Alcohol-related Social Disorder and Rural Youth: Part 1–Victims

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The consumption of alcohol is embedded in the culture of rural Australia. By their early teens, most youth in rural Australia have tried alcohol and some consume alcohol regularly. Typically, youth consume alcohol at hazardous and harmful rates, increasing their likelihood of being involved in social disorder as victims or perpetrators, or both. While there has been much anecdotal evidence of an increase in alcohol- and other drug-related social disorder in rural Australia in recent years, and particularly so for disorder involving young persons, there has been very little empirical data to support, or contradict, the commonly held perceptions.

The data presented in this, and a forthcoming Trends and Issues paper reports alcohol-related social disorder between 1993 and 1998 among young persons aged 14–19 and 20–24 years living in rural areas of Australia. Rates of alcohol-related social disorder in these age groups in rural areas of Australia are compared with rates for older rural Australians and with rates in metropolitan areas. The data themselves do not “explain” why living in a rural area protects youth from, or exposes youth to, higher rates than their metropolitan counterparts. However, knowing the extent and nature of the differences and similarities is a necessary first step in developing appropriate interventions.

The apparent higher levels of alcohol consumption in rural Australia, compared to other parts of the country, is associated with values of “self-reliance”, “hardiness”, and “mateship” (Dunn 1998). In some instances, local hotels are the main source of entertainment in rural and remote areas. They provide a focus for social interaction and often provide sponsorship for local sporting teams and community groups (Reilly and Griffiths 1998). However, actual alcohol consumption levels by adults in Australia appear to be independent of geographic influence. The National Health Survey in 1995 found that males from metropolitan centres had the highest proportion of hazardous or harmful alcohol consumers, followed by men in large remote towns (Strong et al. 1998). Among females, the highest consumption patterns were reported in small rural centres and the lowest consumption patterns were reported in remote towns.

Younger Australians see alcohol as playing a “fundamental role in community life, featuring strongly in most social and recreational activities of both a formal and informal nature” (Elliott and Shanahan Research 1999). Bachelor and Spinster (B&S) Balls, which are largely rural phenomena and targeted at young persons, are events where the consumption of large amounts of alcohol is a feature of activities. Young persons do, however, recognise problems with alcohol consumption, they identify alcohol-related social problems as “increased incivility, displays of public violence, vandalism and destruction of property and its potential role in the breakdown of family life” (Elliott and Shanahan Research 1999, p. 9). The advantages of alcohol, however, are perceived to outweigh the disadvantages, with enjoyment experienced through its use, its benefits as a social lubricant to ease awkwardness of social occasions, and its relaxant qualities, figuring prominently.
Alcohol and Social Disorder

The relationship between alcohol and social disorder (particularly between alcohol and violent behaviour) has variously been explained as being due to:

- the physiological effects of alcohol;
- expectations and characteristics of drinkers; and
- sociocultural norms.

(See for example, Collins and Messerschmidt 1993, White and Humeniuk 1994, Graham, Wells and West 1997).

While the causal link between alcohol consumption and social disorder is not fully understood, the overwhelming evidence is that drinking and antisocial behaviour are proximate. There is an increased risk of social disorder in the presence of alcohol consumption (Mason & Wilson 1989, Wallace and Travis 1994, Graham, Schmidt and Gillis 1996), and a positive association between the levels of alcohol sales and the incidence of assaults (Stevenson, Lind and Weatherburn 1999).

Makka (1997) reported national data for 1993 and 1995 on the extent and the nature of alcohol-related social disorder for the Australian population aged 14 years or older. Results indicated that younger persons, particularly males, were more likely to be victims of alcohol-related social disorder than older persons. There was no difference in the likelihood of being a victim between Australian- and non-Australian-born persons, and post-secondary education was associated with the higher rates of alcohol-related property damage, verbal abuse, and being “put in fear”. The purpose of this paper is to provide a descriptive overview of alcohol-related social disorder differentials between young victims aged 14 to 24 years in rural and metropolitan areas, and it is essentially “policy free”. The companion Trends and Issues paper “Alcohol-related Social Disorder and Rural Youth: Part 2—Perpetrators” will report on the differentials among young perpetrators, draw together the patterns identified in both papers, and provide a policy perspective.

Data and Sample

The data used in this study are based on the three most recent National Drug Strategy Household Surveys which were conducted in 1993, 1995, and 1998. The surveys included questions on alcohol-related personal abuse (verbal, physical, and being “put in fear”) and property disorder (damage and theft). Over 17,000 respondents aged 14 years or older participated in the surveys. For the purposes of this paper, the samples have been stratified into metropolitan (capital city and other metropolitan areas) and rural (rural/remote) according to the Rural and Remote Area (RARA) classification system (DHS & H 1994).

Alcohol Consumption

Reported alcohol consumption in the previous 12 months increased in both rural and metropolitan areas between 1993 and 1998 (Table 1). Over four in five rural (84.3%) and metropolitan (82.4%) persons consumed alcohol in 1998, compared with 78.0% and 78.5% respectively, in 1993.

Compared to their metropolitan counterparts in 1998:

- rural persons aged 14-19 (82%) were more likely to have consumed alcohol (cf. 71.5%); and
- rural persons aged 20-24 (95%) were also more likely to have consumed alcohol (cf. 88.9%).

However, due to the higher proportion of persons in rural areas aged 25 years or older compared to metropolitan areas, there was very little difference in overall (all ages) rates between rural (84.3%) and metropolitan (82.4%) Australia.

As occurred with alcohol consumption in the previous 12 months, the rates of hazardous or harmful drinking also increased between 1993 and 1998 (see Table 1). More than one in three rural (38.8%) and metropolitan (33.5%) persons consumed alcohol at hazardous or harmful levels in 1998, compared to 16.3% and 21.2% respectively, in 1993. Young persons, however, were more likely to have consumed alcohol at these levels.

Compared to their metropolitan counterparts in 1998:

- rural drinkers aged 14-19 (68.6%) were slightly more likely to have consumed alcohol at hazardous or harmful levels (cf. 65.7%); and
- rural drinkers aged 20-24 (61.4%) were also more likely

Table 1: Alcohol consumption, by Region, Australia 1993, 1995, and 1998 (percentages)

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<tr>
<td>14-19</td>
<td>54.7</td>
<td>81.4</td>
<td>82.0</td>
<td>42.0</td>
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<td>89.1</td>
<td>95.0</td>
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<td>79.2</td>
<td>81.2</td>
<td>83.7</td>
<td>15.7</td>
<td>22.9</td>
<td>27.3</td>
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<tr>
<td>All ages</td>
<td>78.5</td>
<td>80.1</td>
<td>82.4</td>
<td>21.2</td>
<td>28.2</td>
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(a) % of population, consumed alcohol in the past 12 months
(b) % of drinkers consumed alcohol in past 12 months, NHMRC guidelines
to have consumed alcohol at hazardous or harmful levels (cf. 54.5%).

If the association between alcohol consumption and social disorder was a simple dose-response function, then the higher proportions of alcohol consumers, and hazardous and harmful drinkers, in rural areas might lead us to speculate that the levels of alcohol-related social disorder would also be higher in those areas. However, the relationship is not so straightforward.

### Alcohol-related Social Disorder

Somewhat paradoxically, in light of the increased proportion of alcohol consumption, and the higher rates of hazardous and harmful consumption, which occurred between 1993 and 1998, the rates of alcohol-related personal and property disorders declined in both rural and metropolitan areas in this period (Table 2). In 1998, almost one in three rural (31.7%) and metropolitan (32.7%) persons experienced alcohol-related personal abuse, compared to 44.5% and 43.7% respectively, in 1993. In 1998, less than one in ten rural (9.9%) and metropolitan (9.5%) persons experienced alcohol-related property disorders, compared to 19.7% and 18.0% respectively, five years earlier. While the rates of property disorder were consistently lower than in 1993, the rates of alcohol-related victimisation for younger persons in 1998, particularly for rural youth, were higher than for older groups.

Compared to their metropolitan counterparts in terms of alcohol-related personal abuse in 1998:
- rural persons aged 14-19 (33.1%) were less likely to experience victimisation (cf. 44.5%);
- rural persons aged 20-24 (62.5%) were more likely to experience victimisation (cf. 57.0%).

Compared to their metropolitan counterparts in terms of alcohol-related property disorder in 1998:
- rural persons aged 14-19 (14.3%) were slightly more likely to experience victimisation (cf. 13.9%), but
- rural persons aged 20-24 (13.9%) were less likely to experience (cf. 18.1%).

### Location of Victimisation

In 1998, the vast majority of alcohol-related personal abuses against young persons aged 14-24 were committed in pubs and clubs, and most alcohol-related property offences occurred in the home. This was particularly so for youth in rural Australia (Table 3).

Compared to their metropolitan counterparts in 1998, young male rural victims were:
- more likely to experience alcohol-related verbal abuse (66.3%, cf. 57.3%),
- more likely to experience alcohol-related physical abuse (68.9%, cf. 47.8%), and
- more likely be “put in fear” in an alcohol-related incident (64.0%, cf. 35.1%), in pubs and clubs.

Female victims in both regions were more likely to experience alcohol-related personal abuses in the home than males. In 1998, female victims in rural Australia were:
- five times more likely (25.1%) to experience verbal abuse in the home than rural males (5.9%),
- over eleven times more likely to experience physical abuse in the home (43.8%) than rural males (3.7%), and
- over three times more likely (32.1%) to experience being “put in fear” in the home than rural males (10.0%).

For both male and female rural victims (and if pubs and clubs are excluded), alcohol-related personal victimisation was less likely to occur in a public place (workplace, school/university, and street) than for their metropolitan counterparts. Being “put in fear” in an alcohol-related incident in public streets was particularly prevalent in metropolitan areas. Over half of the male victims (53.6%), and over two in five female victims (44.0%), identified the street as the location of the incident(s), compared with 31.8% and 15.5% respectively, in rural areas. Property disorder in rural areas was also generally “non-public”.

Compared to their metropolitan counterparts in 1998, young male rural victims were:
- far more likely to experience alcohol-related property damage (81.2%, cf. 44.2%); and
rates of alcohol-related victimisation. Table 4 illustrates this relationship.

risks of alcohol-related alcohol, are predictors of higher personal consumption of gender), being a prior victim and risk factors (for example, age and Among a number of recognised 

slightly less likely to experience alcohol-related property damage (66.5%, cf. 69.5%); but

more likely to experience alcohol-related property theft (56.0%, cf. 48.7%), in the home. In addition, young female rural victims (25.3%) were almost three times more likely to experience alcohol-related property damage, but three times less likely (7.1%) to experience alcohol-related property theft, in pubs and clubs, compared to their metropolitan counterparts (cf. 9.7% and 20.1% respectively).

Victimisation Risk Factors

Among a number of recognised risk factors (for example, age and gender), being a prior victim and the personal consumption of alcohol, are predictors of higher risks of alcohol-related victimisation (Makkai, 1997). Table 4 illustrates this relationship.

As occurred with the overall rates of alcohol-related victimisation of young persons, the rates of repeat alcohol-related victimisation also declined between 1993 and 1998 in both rural and metropolitan areas of the country. In rural Australia in 1993, 45% of all victims of alcohol-related social disorder experienced multiple victimisation (more than one type of abuse, or one type of abuse on multiple occasions), and this had declined to 31% by 1998. The rate declined in metropolitan Australia from 47.9% to 33.6% in the same period.

Compared to their metropolitan counterparts in 1998, young female rural victims were:

• far more likely to experience alcohol-related property theft (66.9%, cf. 47.4%), in the home.

Compared to their metropolitan counterparts in 1998, young female rural victims were:

• slightly less likely to experience alcohol-related property damage (66.5%, cf. 69.5%); but

• more likely to experience alcohol-related property theft (56.0%, cf. 48.7%), in the home.

In addition, young female rural victims (25.3%) were almost three times more likely to experience alcohol-related property damage, but three times less likely (7.1%) to experience alcohol-related property theft, in pubs and clubs, compared to their metropolitan counterparts (cf. 9.7% and 20.1% respectively).

Who Does the Victimising?

The companion Trends and Issues paper will be focused on perpetrators of alcohol-related social disorder aged 14-24 years, but perpetrators of disorder against victims aged 14-24 are unlikely to come exclusively from this age bracket. Accordingly, Table 5 reports the identity of all perpetrators of alcohol-related disorder against youth, regardless of age.
Young rural victims of alcohol-related social disorder were more likely to know their alleged perpetrators than their metropolitan counterparts. Female victims in both regions were more likely to know their alleged perpetrators than males.

In 1998, in comparison to the metropolitan counterparts when identifying perpetrators, young male victims of alcohol-related personal abuse were:

- three times more likely (24.0%) to identify a housemate (cf. 8.4%);
- twice as likely (36.2%) to identify a workmate (cf. 17.8%);
- over 1.5 times as likely (56.4%) to identify a friend or acquaintance (cf. 17.8%);
- three times more likely (23.0%) to identify a former spouse, boyfriend or girlfriend (cf. 8.0%); but
- almost four times less likely to identify a current boyfriend or girlfriend (cf. 8.4%).

In terms of perpetrators of alcohol-related property disorder in 1998, young rural male victims were:

- twice as likely (13.0%) to identify a sibling (cf. 6.4%);
- twice as likely (8.4%) to identify a housemate (cf. 4.1%);
- almost four times as likely (34.0%) to identify a workmate (cf. 9.4%); but
- almost three times less likely (14.8%) to identify a friend or acquaintance (cf. 38.9%).

Compared to their metropolitan counterparts, when identifying perpetrators of alcohol-related personal abuse, young rural female victims in 1998 were:

- slightly more likely (26.7%) to identify their spouse (cf. 13.8%);
- more than twice as likely (9.7%) to identify a relative other than a parent or sibling (cf. 3.9%);
- more than twice as likely (8.4%) to identify a housemate (cf. 3.7%); and
- more than twice as likely (15.7%) to identify a current boyfriend or girlfriend (cf. 6.5%).

Additional data not reported here show that among married victims in rural areas, two in five (42.0%) females, and one in five (19.8%) males, identified their spouses as perpetrators. Close intimates, for example, boyfriends (current or former), spouses (current or former), and other relatives featured prominently as perpetrators of alcohol-related property disorder against young females in both rural and metropolitan areas.

In 1998, young rural male victims were more likely than their metropolitan counterparts to identify certain relatives other than a parent or sibling as perpetrators. They were also twice as likely to identify a close intimate (cf. 17.8%) as perpetrators of alcohol-related personal abuse.

In 1998, young rural male victims were more likely than their metropolitan counterparts to identify another relative (excluding parent or sibling) as perpetrators of alcohol-related property disorder. They were also almost four times less likely to identify a friend or acquaintance (cf. 38.9%).

### Conclusion

Alcohol consumption among youth aged 14-24 increased between 1993 and 1998 in both metropolitan and rural areas of Australia. Proportionally, in 1998 there were more alcohol consumers and more hazardous and harmful drinkers among youth in rural Australia. These rates, however, did not universally translate into more alcohol-related social disorder in rural areas.

As occurred in metropolitan areas between 1993 and 1998, the rates of alcohol-related disorder declined in rural areas. In the same period, the rates of repeat victimisation also declined in both metropolitan and rural areas. Nonetheless, one-third of persons aged 14-19 years, and two-thirds of persons aged 20-24 years in rural Australia, were victims of alcohol-related personal abuse in 1998. In addition, about one in seven were victims of alcohol-related property disorder.

Rural youth aged 14-19 years were less likely to experience alcohol-related personal abuse than their metropolitan counterparts, but they were more likely to experience property disorder. For rural youth aged 20-24 years, the patterns were the complete opposite, suggesting that different factors are operating. Compared to their metropolitan counterparts, rural youth in both age groups were more likely to experience alcohol-related personal abuse in public places. This suggests that if there was a culturally condoned venue for alcohol-related disorder in rural areas, the pub was the place. Other than the pub or the club, alcohol-related disorder was generally "behind closed doors" in rural areas, and particularly so for female victims, where the home was often not a safe haven. Rural female victims of alcohol-related personal abuse were
between three and eleven times more likely than male victims, to be abused in the home.

As might be expected in smaller communities, rural youth of both sexes were more likely to know the perpetrators of alcohol-related social disorder (in many instances, they were close intimates) than their metropolitan counterparts. The results support the conclusions that:

- pubs and clubs in rural areas are important social venues for young people,
- in these establishments, excessive alcohol consumption and the associated disorder between friends, acquaintances, work colleagues, and housemates are commonplace,
- both the excessive consumption and related disorders are possibly even tolerated.

The companion Trends and Issues paper Alcohol-related social disorder and rural youth: Part 2—Perpetrators will examine the implications of the findings from both papers, and identify possible policy interventions.

### References


Elliott & Shanahan Research 1999, Developmental research for a National Alcohol Campaign, Commonwealth Department of Health and Aged Care, Canberra.


