

THE NITELITE INITIATIVE: NIGHTLIFE ISSUES IN A BRITISH SEASIDE TOWN: CONSULTATION AND EVALUATION

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I am going to be talking about a project that I have been working on for the past two years, in a place called Southport. Southport is a seaside town about an hour north of Liverpool, much smaller than Liverpool as you would expect. The town centre has a population of about 12,000 people, but it gets between 5-6000 people visiting it every weekend night and this can swell to 12,000 for special events, so there is a significant night time economy in the area. The bars and clubs are relatively compact, there is about 5 or 6 streets and they have 34 bars so everything is very focused.

The project grew from a problem-solving day in Southport, with Merseyside Police, the licensee community, door and other key stakeholders including the local council. Door staff expressed concerns about people using stimulants and alcohol together and that this was leading to a greater number of violent incidents. They were expressing concern over steroid use and that they could not restrain people adequately. We were not sure how accurate this was as it was very anecdotal, so we set up a group to investigate. This group became the steering group and had representatives from Sefton Drug Action Team, Southport's licensee community, Merseyside police, John Moores University, and Merseyside Drugs Council who are a drug treatment provider in Southport.

We decided to broaden the scope and the aims to look at feelings of safety, and improving people's safety. We wanted to try and get an idea of what the issues were in Southport and we felt that it was too easy to use anecdotal evidence. In order to do this the group carried out a wide-ranging consultation. A dedicated member of staff was hired to carry out interviews with club and pub patrons, licensees, door staff, bar staff, A&E staff, police and taxi drivers; we wanted to get the views, of all the key stakeholders in the area. The interviews covered perceptions of safety and aggression, substance use and its links to aggression and violence and also environmental influences such as CCTV, lighting and transport.

Just to outline some of the findings that came out of this consultation work. There were 17% of patrons who felt uncomfortable on a night out, which is not a huge percentage but does represent a level of uncertainty. As you may expect, a lot more people had witnessed assaults than had actually been assaulted. When we actually asked people about the perception of safety, those who had witnessed assault, suggested that they felt as unsafe in Southport on a night out as those who had been assaulted. Witnessing the assault had affected people's perceptions. This is an issue because in Southport, in 2003, there were about 3-recorded assaults per weekend. But the problem is that, if you have about 200 people seeing each assault, you have then got 600 people who are having their feelings of safety affected by this, and this will damage the night time economy. This is also exacerbated by the fact that the bars and clubs in Southport are concentrated together, so that the chance of many people seeing the same incident, are increased.

To outline some of the findings around substance use, you will not find it particularly amazing that cannabis, cocaine and ecstasy were the most commonly used drugs. It is a pattern we see fairly consistently in Britain. However, the problem from a health point of view is that 30% of door staff and 60% of bar staff did not feel that they were well trained around drug issues, suggesting that people may be getting into clubs and being served with alcohol once they are already intoxicated with other substances. When you are dealing with substances like GHB, the use of which could be on the increase, this is a real issue, as GHB mixed with alcohol has significant health implications.

The real issues in Southport are the high levels of alcohol consumption, with 12% of patrons drinking over 21 units of alcohol on an average night out. So realistically, you have people consuming what their recommended weekly dose is, in one single night. These are people who are going out two or three times a week, and this would be an average night for them, so when you consider that 6 is the maximum recommended intake, there is a real problem there. Patrons are making use of the cheap drinks culture that exists in Southport in middle of the road clubs i.e. 'two for one', 'come in for £5 and drink as much as you want'. Despite this, they reported that they felt that these sorts of offers contributed to aggression and violence, so they know it is a problem, yet they still utilise the system and they may be the people who are actually involved in the aggression and violence at the end of the night.

Respondents suggested there were significant problems around transport, or the lack of it. At the time that the consultation was carried out, there was no public transport after about 10 o'clock at night, so you have 500-600 people, on an average night, probably about half of them are trying to get home in taxi's, so you have 'flash points' particularly as the general perception was there are not enough taxi's. The people we spoke to cited taxi ranks as locations of high aggression and, unsurprisingly, 75% of patrons and a large proportion of the other groups felt that there should be late night transport operating in Southport.

Southport's CCTV system is very well developed, and has in the region of 30 cameras covering a fairly small area within the town centre, and convictions have come from the CCTV footage. The problem is there is no signage associated with CCTV; 50% of those interviewed said they are unable to comment on how well covered Southport was by CCTV.

Some particularly actionable findings were around door staff, there was a generally negative perception of door staff among clientele, but the interesting thing was that door staff were agreeing with the patrons, by saying they were not well trained. About 1/5 of them reported that they were not well trained in restraint and first aid. If they were removing people from clubs, you would worry about whether they are using an appropriate amount of force. As I mentioned before, there were a lot of door staff who were saying they were not well trained in drugs knowledge and 65% said they were not well trained in legal issues. In order to operate a safe night time economy, it is critical that door staff, licensees and police work together. If door staff hold someone and they are not sure if they have broken the law and are going to get arrested, when the police turn up they are going to lie or they are going to make up some story of what actually happened. We really need to tackle the legal issues problem, and the door staff, actually asking for more training in this area.

The steering group have already responded to some of the issues raised. For instance there have been a number of nights in clubs and bars where bags of information regarding safe sex and safe drug use, the dangers of binge drinking as well as lollipops and condoms have been handed out by A&E representatives and representatives of the local alcohol services. In addition, the group has instigated new accredited door staff training, that is in-line with national legislation which requires door staff to have a licence to be able to work on a the door. A late night bus service is also being set up. The consultation findings have also contributed to a police initiative which will target violence hot spots. Police and A& E through the steering group are now regularly coming together to identify particular trends or locations where trouble is occurring. Nitelite have also chaired meetings between the alcohol treatment and education agencies, something that has never been co-ordinated before, and we are now mapping their work to try and get some concerted effort to tackle binge drinking in Southport

My role is as an evaluator from Liverpool John Moores University. We were contracted at the project outset to provide ongoing input to the problem, rather than simply evaluating it at the end. We examined the function and nature of the steering group, and the consultation process and the interventions that have been put in place. I think it is critical for any project like this, that there is some consensus about the project aims and where you are going. The aims for the project were not laid out until about four months into the project which was a problem initially.

For any sort of community led process, lacking in large levels of funding or statutory backing, where you are relying on the agencies involved, it is critical that everyone understands the direction in which the project is heading. This sort of project management has been lacking with Nitelite from the very beginning. The group has had difficulty utilising time lines effectively and in re-visiting their aims to make sure they are focusing on the issues they set out to tackle, but through the motivation, enthusiasm, and excellent communication, they have managed to progress the project. You have to get everyone involved at the beginning with a project like this, because you are relying on favours. The Steering Group have tried to get everyone involved. Involvement of licensees has proved problematic all the way through because the hours they keep, but there have also been issues with getting the health sector and alcohol services which were eventually addressed.

The consultation has targeted the right people. The victims and perpetrators of violent crime are generally between 18 and 25 according to police statistics and the consultation spoke to large numbers of people in this age group. However, there was an issue of re-sourcing the consultation process. There was only one person to carry out interviews and this was not really enough to raise the projects profile or to hit the original number of target interviews. However, the group did actually finish a large number of interviews, and collected good quality data bearing in mind the lengthy questionnaire content, covering such a wide range of issues.

Unfortunately, there has been a significant delay in the interventions phase of the project, which was again down to project management. Delays in the planning and consultation phases had a knock on effect. The complete analysis of the consultation data and dissemination of this data was not completed on schedule. Therefore the

individual hired to co-ordinate interventions spent a lot of their early time finishing off the consultation phase. This just shows how important it is to be responsive to project blockages and have a constant idea regarding process. Despite significant delays in starting interventions, there are some significant actions being undertaken and the multi agency nature of the group is showing its value as contacts are being used to push projects forward.

However, the project has not really publicised itself very well. I think with a project like this it is really important, that everybody is made aware of what is going on, particularly the public. The group have learnt some lessons the hard way. If you are doing something good, half of the battle is letting the public know you are doing something. The group, realising that this was a shortcoming for the project, have responded by bringing in the media specialists from the partner organisations and publicising the consultation findings and the interventions that are being put in place.

Positive lessons from the initiative have been the success of the broad multi agency group and the benefits that come from having a group that it is not dominated by the police or the health service or the council, resulting in a balanced view. Some members of the public do not like things that are police led, and some do not like things that are council led. If you have these agencies as equal partners, people's perception of the project will be more balanced and you might get more co-operation.

The decision to undertake a consultation was also a major strength of the project as it is critical to find out what the actual issues are. It is very easy to sit in a room and decide what the issues are, but the consultation determined the true issues for those involved in the night time economy. A good example of this is drink spiking. Drink spiking is something that has been talked about a lot in media but when we asked people about that, it emerged that it is not really an issue in Southport. Dedicating limited resources, to something that people did not view as an issue and the police said was not an issue in terms of arrests or convictions, would be a waste and the group could put this to the side.

Some of the more negative lessons learnt by the project have been that you need to be brave with resources and think big, as under re-sourcing one part of a project will have knock on effects later. It is also critical that the licensees are involved, they are the most elusive and in many ways the most important partner. A project such as this must also be approached with adequate project management and a key thing from the start is the ability to identify slippage and tackle it. Finally, it is vital that people know what you are doing; use the media, raise the profile, it is important that people are aware something is being done – 'blow your own trumpet'.