

Density of alcohol outlets in rural areas depends on the town's average income

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Alcohol outlets tend to be concentrated in lower-income areas. Given that alcohol-related problems such as trauma, chronic disease, and suicide occur more frequently in areas with a greater density of alcohol outlets, lower-income populations are exposed to increased risk. This study examines the distribution of rural outlets in the state of Victoria, Australia, finding towns had more outlets of all types where the average income was lower and where the average income in adjacent towns was higher, and that this was consistent with retail market dynamics.

Results will be published in the January 2015 online-only issue of *Alcoholism: Clinical & Experimental Research* and are currently available at Early View.

"Previous studies in this area have examined the way counts of outlets within geographic areas, such as zip codes or Census areas, are related to the characteristics of local populations," explained Christopher Morrison, doctoral candidate at Monash University, Australia as well as corresponding author for the study. "These studies generally find more outlets in lower-income areas, which suggests lower-income people are exposed to greater risks because of these additional outlets. In [metropolitan areas](#) this seems an appropriate approach because people are able to travel throughout an urban expanse."

Life in rural areas, however, moves through much larger spaces.

"In rural areas people use space in a different way, limited within narrow

roadway networks that pass through large open areas," said Morrison. "Throwing a blanket over a whole state may not reflect the underlying transport patterns, so this study uses towns rather than Census areas. The steps I took to develop the town-based geography required a good knowledge of the study area. I am from Victoria, so this was the most natural location in which to conduct the study."

Morrison examined counts of bars, restaurants, and off-premise [alcohol outlets](#) within 353 discrete towns, with a mean population of 4,326, in rural Victoria. Independent variables were the total resident population of each town, income for the local and adjacent towns, and a group of variables that captured the flow of populations between towns due to commuting, tourism, and other trips.

"We found that residents of towns where the average income is lower have more bars, restaurants and liquor stores, exposing them to excess risk," said Morrison. "This is likely an inevitable consequence of retail market dynamics. Because travel to towns farther afield than just the adjacent towns affects [alcohol](#) markets, lower-income towns will tend to have more outlets. Also, the guiding theory suggests these effects will be observed anywhere there is a difference between income in two adjacent towns. They could be two wealthy towns, but where one is slightly less wealthy than the other."

While the finding that lower-income areas have more outlets is fairly common, said Morrison, no other published studies have looked at the relationships between outlets and income in adjacent areas, or interaction between areas.

"Yet this is important because people don't just purchase alcohol in the immediate area around their homes," he said. "Any purchases elsewhere will affect the alcohol market in that place, and therefore also the risks associated with alcohol sales for people who live in those places. The

general finding that travel between areas is related to outlet distribution will be difficult to replicate in a metropolitan area because dense transport networks are so complex."

Morrison emphasized that the point of the study is that exposure to more alcohol outlets for lower-income populations is inevitable. "However, in [rural areas](#) the average income of the whole town seems to matter," he said. "Lower-income towns where residents wish not to have additional outlets may benefit from regulatory mechanisms to limit this exposure, such as planning and zoning ordinances, or density limits."

Provided by Alcoholism: Clinical & Experimental Research

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