2. Formalising informality

At present, many urban centres in South Africa are governed by a dual formal/informal system of land use, markets and enforcement. In this case, areas of the city with formal, licensed premises are subjected to high degrees of formal enforcement efforts (eg noise and nuisance control), while those areas with illegal, unlicensed premises are subjected to differing systems of control and regulation. This dual system means that drinkers and drinking places get characterised as legitimate/illegitimate by virtue of where they are located. This then has consequences for the ways in which spatial governance strategies are deployed in 'high risk' (informal) areas. However, many of the consequences of alcohol consumption across all urban spaces could be mitigated by stronger links between cause and effect. At present, enforcement of existing legislation is inadequate or unnecessarily heavy-handed (eg shebeen raids). For example, the prosecution rate for drink drivers remains low as courts waiting lists are long, the burden of proof is unobtainable and corruption is frequent.

* Personal responsibility must be inculcated by ensuring that people are rendered responsible for their actions through appropriate and efficient enforcement.

3. Public health

Alcohol is now recognised as one of four main risk factors for NCDs, along with unhealthy diets, a lack of exercise and smoking. However, in South Africa. the public health alcohol remit focusses on the acute consequences of drinking: injuries, accidents, violence and crime. In practice, it is not concerned with the long-term chronic health effects of sustained heavy drinking. This is despite South Africa's pledge to the WHO to reduce alcohol consumption by 20% by 2020, as part of the wider goal to reduce premature mortality from NCDs by 25% by 2020. By extension, this has meant that supply-side restrictions on alcohol's availability have taken precedent over efforts to link drinking with long-term health risks in the public imagination. Both demand-side and supplyside policies are needed to instigate sustainable alcohol control policies.

* A focus on alcohol as one of four risk factors for the significant NCD burden would legitimize the development of behaviour change, demand-side policies.

4. Who are the drinkers?

Improved micro-scale data is needed to better understand the nature of risk groups for alcohol consumption. The old Apartheid-era racial categories may no longer be applicable at a time of rapid socio-economic and class transition. Indeed, too little is known by policy makers about current consumption trends (packaging type, drinks categories) and how these vary by class, race and location. Without this industry knowledge, alcohol control policies will be unable to effectively visualise the most important points and sites of intervention if binge drinking is to become denormalised. In particular, evidence shows that the most educated women and the least educated men drinkmost. Stakeholders need to be aware of these particularities rather than relying on generalisations and stereotyping of risk groups and riskbehaviours.

* We cannot use outmoded demographic categories to capture the contemporary nature of risk groupings and behaviours.

5. Infrastructural upgrading

Existing urban upgrading programmes (eg VPUU) must be linked into community-scale needs to balance the harms of drinking with the livelihood opportunities provided by alcohol. Infrastructural improvements such as better lighting, transport networks and safety measures will help the risks associated with moving from/to shebeens. Leisure alternatives to drinking must also be offered and actively marketed to the community. Improving basic standards of living will improve overall wellbeing, such that the health risks of drinking are not magnified by the environmental risks endured in poor quality, unsafe places.

* Making communities safer and improving the built environment will reduce the need for and risks associated with liquor.

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Overview

Alcohol represents a major economic, political, social and public health challenge to South Africa. The management of alcohol and its negative externalities is a major area of contestation between citizens and government in the country's urban areas. As a result, the governance of liquor speaks to broader debates on poverty, inequality, informality, urban management, social justice, livelihoods, public health, economic development, infrastructure, safety and security, as well as the appropriate role of the state and industry.

Alcohol is important because it enables us to explore multiple governance issues. However, it is also a significant contributor to South Africa's high rates of violent crime, road traffic accidents and injuries, infectious and chronic disease. There are also growing concerns over the links between the sale of alcohol and drug-related gang activity. At the same time, liquor also provides tax revenue, tourism and livelihoods. In 2009, the liquor industry contributed 4.4% of national GDP and the unlicensed, informal economy represents a network of employment opportunities amid unemployment rates exceeding 80% in some poor communities.

Given this, the project questions the:

- Magnitude, extent and characteristics of the Western Cape alcohol "problem".
- Relationship between alcohol (consumption and retail), poverty and development.
- Rationale behind alcohol control strategies and their implementation.

Legislative context: The Western Cape Liquor Bill

Liquor legislation has long been used as a tool of social, economic and political control. This was particularly the case for the Apartheid state, but alcohol has remained an area of economic and social life whose governance has long been a barometer of political aspirations and anxieties. South African liquor legislation exists at a number of governmental scales – from national, to provincial, to the municipal. At present, At a there are debates over national legislation to completely ban alcohol advertising and to increase the legal drinking age to 21 (from 18).

At a provincial level, the Western Cape Liquor Act (2012) represents one of the most concerted regulatory strategies governing alcohol in the Global South and is far more stringent than any other province. The Bill's central aim is to 'protect the community against any negative consequences of the abuse of alcohol' through several objectives: (1) bringing unlicensed, illegal 'shebeens' into the formal, regulated economy by allowing those meeting certain criteria to apply for a liquor license; (2) revising land-use regulation to limit licenses in residential areas; (3) enabling community involvement in the licensing process

Cape Town's, new municipal by-laws will restrict licensed premises opening hours in residential areas. This was originally set at 11pm for bars and restaurants and 2am for clubs, but now allows clubs with existing 4am licenses to continue trading. Off-trade sales remain from 9am-6pm, excluding Sundays. The by-laws have been mired in controversy over nanny statism and the need to preserve Cape Town's tourism, muchof which is predicted of the wine trade.

Methodological note:

The research project was conducted in three contrasting case study sites in Cape Town:

Salt River: is a previously industrial suburb situated to the east of the central city, near the harbour. Now, a host of new redevelopment projects have been undertaken as part of the City of Cape Town's plans for inner city revitalisation. SaltRiver's socio-economic composition cuts across race, class and religion. Previously a lower-middle class suburb settled mainly by working-class families, the area is now settled by young professionals, workers and students of all races, as well as a large transient population and homeless.

Philippi: is a low-income settlement on the Cape Flats, dating back to 1878. Today, the population of Philippi consists of a number of disparate groups who settled in the locality at different times and through very different processes. As a settlement, Philippi presents both potential and a range of challenges. It is strategically located in close proximity to transport nodes and economic opportunities, such as the Cape TownInternational airport, the Philippi Industrial Area and the PhilippiHorticultural Area. Yet it faces serious development challenges from poverty, unemployment, overcrowding, food insecurity, crime and exposure to environmental hazards such as flooding and fire.

Freedom Park: was once an informal settlement, but has recently beenupgraded into formal housing. It is located in Mitchell's Plain, one of the biggest townships in Cape Town. Freedom Park was established in 1998 when a group of backyard dwellers occupied a parcel of vacantland which had been zoned for a school that was never built. The residents of Freedom Park lived without basic serviceslike water, electricity and sanitation until 2001 when the municipality provided rudimentary services. A study in 2004 revealed challenges of crime, drug abuse, alcoholism, domestic violence and community conflict, high levels of food insecurity with 64% of residents reliant on social grants. The construction of formal houses started in 2007 and was completed in 2009. At each site, four focus groups were conducted with 'older' and 'younger' men and women. The groups explored the participants' experiences and opinions of the consumption and retail of alcohol in their communities. In so doing, they shed light on the community-scale, gendered nature of alcohol as a problematic commodity and behaviour as well as how perceptions differ by age group.

In addition, the researchers conducted interviews with 30 major stakeholders in alcohol control, drawn from municipal and provincial government, NGOs, academic, the alcohol industry and trade associations. These shed light on the internal complexities, debates and contestations that facilitate and impede the development of effective alcohol control policies. It also revealed the external influences on policy development in the Western Cape.

A note on South African drinking

The 2003 South African Demographic and Health Survey shows that whites in SA are most likely to have had a drink in the past year (70% of men and 51% of women) and past week (53% of men and 31% of women). Coloured and Indian respondents are the next most likely to drink. Nationally, the highest rates of hazardous drinking occurs among men aged 35-44 (31.4%) and among women aged over 65 (42.3%). Urban African and coloured men are most likely to be "irresponsible" drinkers (28.6% and 28.4% respectively), whereas coloured women are most likely to take this title (38.7%). It is interesting to note that even though whites form the largest group of drinkers they are more likely to selfdefine their drinking as "responsible".

Key findings

1. Spatial inequalities of access to licenses

Alcohol is a clear instance of the challenges inherent in man ageing the residual consequences of past inequalities. For example, licensing data for 2010 (below) shows that there are still gross inconsistencies across the city of Cape Town in the spatial and social distribution of liquor licenses. The biggest growth in licenses has been in the Atlantic Seaboard, CBD and Southern Suburbs of the city, all affluent areas. The 'previously disadvantaged' areas remain underrepresented in liquor licenses due to the cost of applications, their complexity and the stipulations of facilities needed to get a license. When premises in poorer areas do apply for licenses, these often take far longer to process than more affluent bar owners who can afford a lawyer to navigate the system. This reinforces the likelihood of selling and consuming liquor in illegal settings, with its associated magnified risks.

* Licensing conditions should be variable to allow the previously disadvantaged to legitimately enter the trade.

