

AN ALCOHOL-FREE BAR FOR YOUNG PEOPLE

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'Cheers', the alcohol-free bar in Yate, Bristol, opened last June after almost three years of discussion and planning. The outcome of the CAFE (Creating an Alcohol Free Environment) community project, it represents the efforts of local people from various backgrounds who were concerned to establish a social centre for young people where they can learn to enjoy themselves without the need for alcohol but in a sophisticated environment comparable with the local night-spots.

The rationale behind the project can be summed up as follows:

- Young people are most at risk from the consequences of careless and excessive drinking.
- Young people generally lack awareness of possible risks of drinking. In a *New Society* survey, for example, only 12% of 16 year olds thought that alcohol could be harmful.
- Young, inexperienced drinkers have a lower tolerance of alcohol than do adults. After drinking just small quantities of alcohol their judgment and control are affected.
- Under-age drinking is common. In one group of 17-year-olds, 91% of the boys and 61% of the girls admitted drinking illegally in public places. In another group of 15-year-olds, 32% of the boys and 26% of the girls reported drinking in pubs.
- Convictions for drunkenness amongst juveniles has shown a dramatic rise in the past twenty years.

The aims of the project

The aims of the CAFE project were, therefore...

- To provide an alcohol-free bar and lounge open to the community of Yate, particularly to attract the 15-25 year old age group.
- To offer a wide range of non-alcoholic drinks in order to widen drinking choices.
- To educate people informally and indirectly by providing an atmosphere and environment where they can learn how to socialise without depending on alcohol.
- To inform people directly about sensible drinking by the provision of leaflets, advice, and counselling.
- To involve young people in the creation and management of their own environment.

Beginnings

Inspiration for the project came from the Parrot and Palm Cocktail Club, Worthing, the first alcohol-free club in the country, which was visited in July 1986. Similar schemes are now running elsewhere as a positive approach to the problems of alcohol misuse, and to disprove the attitudes, reinforced by advertising and the media, that alcohol is essential for enjoyment and socialising.

To test the feasibility of the scheme, young people circulated 400 questionnaires to schools, youth centres, and individuals to publicise the project, gather ideas, and estimate the likely attendance. The results were encouraging, showing a high level of interest.

In July 1987, after discussions and public meetings convened by Yate Town Council in association with the Youth Service, a management committee was formed to advance the project. Initially the YMCA premises were considered, until building estimates of £33,000 were received! However, by November 1987 a draft agreement to rent premises at St Mary's Youth Centre had been drawn up, and fundraising and promotional schemes began. Young people were approached for their ideas on the interior

design, and in March 1988 volunteer groups began work on structural alterations. The major work was done by building and shopfitting firms. Money was raised by suitcase sales, jumble sales, plugs in the local press and on the radio, a stall at the Yate Festival, and a Street Fair.

The bar opens

'Cheers' opened its doors on 9 May 1989 to a full house of young people, and has been successfully operating on Tuesday, Wednesday, and Sunday evenings since, with an average nightly attendance of 35. A core staff team is made up of part-time paid youth workers and young volunteers. It has already been the setting for a TSW alcohol documentary.

Although work on the project has been steady rather than rapid, due to the major hurdles of fund-raising and finding suitable premises, we have in fact been able to take short cuts through researching similar schemes — we have learned from their experiences, and benefited from their contacts. There will now be an opportunity for liaison with other agencies in connection with the educational side of the project: some youngsters have already expressed interest in learning more from the youth workers about 'sensible drinking'. Any referrals that are necessary for counselling and treatment will be made through the appropriate agencies.

The project is overseen by a management committee which includes youth workers, parents, and young people, supported by the police, HEOs, teachers, and others. The committee meets regularly to report on progress, plan future developments, and decide on policy issues, and individual members have taken on specific responsibilities and activities. However, now that the bar is in operation the committee's function is becoming more advisory, with the staff team actually running the project.

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School nurses...

I was most interested to read the article in the October 1988 issue on *School nurses and the health curriculum* by Kay Fletcher and Carolyn Shelley.

As a DHEO who has had some considerable involvement in the past with school health education, and who also inherited a system whereby nurses went into local schools to 'do' a variety of topics without (for the most part) any extra training or knowledge about current methodology, I have some considerable reservations arising from the article, and would wish to make the following comments.

Recognising skills I would certainly accept that there is a need for the School Health Service and the schools it serves to be much more aware of each other's knowledge and skills.

Understanding methodology Where school nurses have attended a specific training course, they are far more aware of current issues relating to health education in schools. However, I am more than aware that even then, they will have had little chance or opportunity to experience any of the current projects or methodology which we are all trying to promote in schools. This applies particularly to issues relating to self esteem (i.e. being honest, being responsible), drug, solvent and alcohol use, and sex education of any description.

'One-offs' The difficulty of 'one-off' sessions is well known — hence, I imagine, the reluctance of the HEO to encourage school nurses to do such sessions. Past experience and current thinking have made many HEOs, teachers, and nurse managers aware that this is not the most effective way to develop attitudes and behaviour conducive to health-promoting activities.

Teaching skills Where school nurses have a lot of contact with pupils, it obviously makes sense to include them in planning for ongoing, developed programmes, but I and many of my colleagues do feel that this input should



be thought out very carefully and that school nurses (or anyone else for that matter) should not be used simply because the teacher doesn't want to tackle an issue. Nurses, per se, do not have any better teaching skills just because they are nurses — they may also, sometimes, have somewhat fixed attitudes, and their knowledge about some of the issues is not always up to date.

Liaison There is a definite need for departments like my own to work closely with the School Health Service, nurse educators, and the LEA, in order to update school nurses (and where appropriate health visitors) not only on current knowledge, but also into the methodology and resource materials which are appropriate. Some may also need some considerable help in trying to get away from the shock-horror approach to certain issues.

Help and support In an ideal world, it would be good if teachers were able to do most of the health education/PSE work themselves with help and support from the NHS, using school nurses in classes on such subjects as they are most familiar with: for example, the work of the various NHS groups, and how to use services, with perhaps some extra support occasionally on topics relating to bodily functions and first aid. School nurses' most obvious and necessary role in schools is individual sessions with pupils or their parents, and with the *right training* for such a role, in giving personal guidance/counselling.

In reality, what with the new National Curriculum looming ahead, I suspect many more school nurses will get involved in classroom teaching. That being the case, I am very supportive of the moves advocated by ASNA. However, please do remember to make use of HEOs for training and support services.

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