Street Drinking in Hounslow 2005

The results of a survey commissioned by Hounslow Drug and Alcohol Action Team and the Metropolitan Police Service to map the nature and prevalence of street drinking in the London Borough of Hounslow

Niamh Cullen, December 2005
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This report describes the results of a survey undertaken to map the nature and prevalence of Street Drinking in the London Borough of Hounslow. Street drinkers, members of the public, local service providers and others (e.g. shopkeepers) were interviewed during the summer of 2005.

Several types of street drinking were identified across the borough. The static groups of street drinkers were generally male, single, unemployed and living in their own (rented) accommodation. Not being homeless, they gave volitional reasons for drinking in the street, centred on social aspects.

The majority are not engaged with local alcohol services. They are long term heavy drinkers who share the profile of those who make up the high incidence of alcohol related deaths in Hounslow. They do not have access to harm minimisation nor prevention advice. Half the group said they did not do all their drinking on the street, suggesting alternatives may be possible.

Public concern was mainly with the visibility of the group and the negative impact this was perceived to have on the community, most felt street drinkers required “help”.

Evidence from areas that have experienced street drinking related problems suggest a multi agency approach to street drinking, that encompasses enforcement tactics, environmental improvements and service provision.

Given the relatively ‘static’ nature and size of this population it is possible that a period of coordinated intensive intervention is likely to make a significant impact on the levels of street activity in the area.
Introduction

This report looks at the nature and prevalence of street drinking across the Borough of Hounslow using data and information collated during the period July, August & September of 2005.

In November 2004, during the consultation process on designating Hounslow Central Ward a Controlled Drinking Zone (CDZ), problems relating to street drinking groups in both Inwood Park and Hounslow Bus Station became apparent.

In order to understand the implications of the CDZ on the more vulnerable street drinkers it is important to ensure that solutions balance the community safety, health and social exclusion agendas.

For the purpose of this report a street drinker is defined as a person who drinks heavily in public places and appears in the short term, unable or unwilling to stop or control their drinking. Research tells us street drinkers have a long history of alcohol misuse. And often drink in groups for companionship.

Research by the Mental Health Foundation tells us that the average street drinker is likely to be a white unemployed man aged 35 or older in insecure housing, alcohol dependant, often drunk, and who may also be using drugs and suffering from psychiatric disorders of varying degrees of severity; often in a poor state of physical health; at risk of arrest for public drunkenness offences, shoplifting, begging and other minor public order offences, and at risk of being the victim of assault.

Despite their obvious vulnerabilities, their activities and even just their presence can cause real fear among the population, and can adversely affect the quality of life for other residents and users of the streets and parks, causing noise litter and general nuisance. This can be an obstacle to economic regeneration in Town Centres.

Many London boroughs are controlling, or trying to control street drinking over quite large areas of their town centres. This report outlines lessons that may be learned from other areas tackling street drinking, particularly on how to avoid unmanaged displacement into surrounding residential areas and further excluding street drinkers from services.
Methodology

Anecdotal evidence suggested that street drinking is more prevalent during the summer months for the obvious reasons of increased daylight and warmer weather. For this reason the bulk of the data collection for this report was undertaken during July, August and September 2005.

In order to provide as broad a picture as possible, five key methods were employed. These covered the range of interested groups and elicited the views and concerns of each which have fed into the report’s findings and recommendations. These methods are described below.

Consultation

During the planning stages of the research key stakeholders were contacted and asked to identify areas that street drinking took place, where they considered the “Hot Spot” areas to be, what time of day this occurred and the type of problems experienced. Those contacted were:

- Local Area Committees
- Safer neighbourhood teams
- Metropolitan Police
- Hounslow Homes
- Parks and Open Spaces
- Street Management
- Public Transport (London Underground and Hounslow Bus Station)
- Businesses near identified Hot Spots
- London Ambulance Service
- West Middlesex Hospital Accident & Emergency Department
- Local Substance Misuse Services

Observation

Alongside the observation of identified “hot spots” the outreach workers ensured that they regularly visited areas across the borough such as parks and playing fields, town centres and housing estates.

They were asked to observe all street drinking as it presented itself across the borough whilst focusing on the more typical groups of street drinkers who were presenting problems in both Inwood Park and Hounslow Bus Station.

During the three months research the outreach workers regularly attempted to buy alcohol outside legal licensing hours from shops in the vicinity of hot spots. They were unsuccessful on every occasion.
Community Survey

Outreach workers conducted a street survey of 98 residents, businesses and public transport staff in locations where street drinking had been identified. This asked about the public’s attitudes to the people who drink on the streets, how this impacts upon them and their views on proposed solutions. A copy of the questionnaire is available as Appendix 1.

Street Drinker’s Fieldwork

Equinox a London based substance misuse provider with a long history of working with street drinkers were commissioned to provide two outreach workers with experience of the street drinking population to undertake the field work.

A total of 65 street drinkers in Hounslow agreed to take part in the research.

The outreach workers were able to use their experience and in-depth knowledge of street life to put interviewees at ease. For example, the interviewers ensured they concealed their clipboards and questionnaires in plastic bags until they had engaged in conversation with the interviewee and gained their agreement to take part. The in-depth interview covered not only demographic details but also the street drinkers views on proposed solutions to street drinking, their views on local services, and what would be most likely to help them personally to leave the street behind.

A copy of the Questionnaire is available as Appendix 2.

Desk Research

The survey and observation work was underpinned by desk research, to enable us to compare the experiences in other cities and towns in the UK and in other parts of London.

The documents reviewed included the following:

- Previous research reports
- Fact sheets
- Police Data
- Health Data
- Website searches
- Information from neighbouring Authority’s

Gathering specific data on street drinking from the West Middlesex A & E Department and the London Ambulance Service proved to be problematic in the short term. In the long term data glitches have been identified that will be are solvable over a period of time.
There are problems with the A&E attendance data, during this research A&E were encountering data quality problems with A&E database reporting tools, where it has been generating duplicate records. A new database is currently being validated. However diagnostic codes are not standardised, often when the attendance is alcohol related, the ‘injury’ is the more important factor to record and so it may be missed out completely. It seems that a specific snapshot study were either patients notes are examined or alcohol related attendance is recorded specifically for a fixed time period would be the most accurate method to gather health related data.

Anecdotal information from the local London Ambulance stations in Hounslow was gathered. This identified the following areas as known to them for street drinking related call outs:

- Kingsley Road /Hounslow East station
- Hounslow Bus Garage
- Hounslow West Station
- Bedfont Green
- Inwood Park Hounslow

**Police Data**

Hounslow Police helpfully completed an analysis of street drinking activity between 1st October 2004 to 1st October 2005. Data has been extracted from Cadmis and CRIS to complete this analysis.

There have been 1313 reported incidents of drunkenness on the borough during the period covered within this report.
The map above has identified Hounslow High Street and the immediate surrounding area as the highest concentration of street drinking in Hounslow. Further analysis of this hotspot has been completed to identify key roads within this area and these are shown in the table overleaf.

<table>
<thead>
<tr>
<th>KEY ROADS</th>
<th>NUMBER OF INCIDENTS</th>
</tr>
</thead>
<tbody>
<tr>
<td>Hounslow High Street</td>
<td>41</td>
</tr>
<tr>
<td>Lampton Road</td>
<td>21</td>
</tr>
<tr>
<td>Hanworth Road</td>
<td>17</td>
</tr>
<tr>
<td>Bell Road</td>
<td>12</td>
</tr>
</tbody>
</table>

Data Source: Hounslow Police - Cadmis and CRIS Oct 05

The roads shown above represent 67% of the hotspots street drinking. It should be noted that these roads include busy public houses within the High Street.

The data has been analysed for the hotspot to identify key times and days when street drinking is more of a problem.

As can be seen from the graph above street drinking peaks between 8pm and midnight but shows a steady increase from midday.
This chart clearly shows that Friday through to Sunday are the busiest days for street drinking within this hotspot location.
Street Drinking In Hounslow

Information from both direct observation and interviews with businesses, residents and those street drinking tell us that all parts of the borough have incidence of street drinking. A comprehensive table of areas affected is available as Appendix 1.

During the project the outreach workers observed several forms of street drinking across the Borough.

Typical Street Drinking “Schools”

This group is two or more drinkers who are stationary and drinking together. The term school refers to an informal arrangement of pooling financial resources to ensure all involved will be able to drink over a weekly period. As a street drinker described, “We take turns to buy depending on who’s got paid (claimed benefits) that day.”

Groups of drinkers were observed at least twice in the following locations:

- Hounslow Bus Station/ London Road Bus Stops
- Inwood Park
- Avenue Park
- Feltham Duck Ponds
- Lampton Park
- Hounslow Town Centre
- Outside Job Centre
- Behind Treaty Centre
- Cranford Valley Park (Waye Avenue)
- Bedfont Green
- Brentford - St Paul’s Recreational Ground

During the research period Inwood Park was particularly quiet and Hounslow Bus Station and the bus stops just beyond on the London Road the busiest drinking area.

Young People

Young People gathering in parks consuming alcohol during the summer was commonplace, and cannabis smoking was also observed. Most of this activity occurred during the evenings with less incidences during the day. Broken glass left behind was problematic for young families using the parks during the days. The evidence of glass suggested the consumption of both Alcopops and spirits. Parks where this was seen to be a significant problem were:

- Murray Park
- Cranford Park
- Bear Road Recreation Ground Hanworth
Street Drinking In Hounslow

- Charville Hall Park South Brentford
- Silverhall Park & Redlees Park Isleworth
- Beavers Park
- Hounslow Bus Garage (evenings)

There were also young people regularly present with some of the older drinkers at Feltham Duck Ponds and Hounslow Bus Station.

Specific Ethnic Groups

Groups of Asian, Black and Eastern European men were observed drinking together in the following areas:

- Kingsley Park - Asian
- Corner of Maswell Park Road - Black
- Bath Road - Eastern European
- Gunnersbury Park - Polish
- Lampton Park - Asian

A significant proportion of those observed drinking alone were Asian or Black.

Individuals

It became clear very quickly that it would not possible to record in any detail all the individuals consuming alcohol in public. There are a large number of people in transition, walking in the street, waiting for or using public transport consuming alcohol. For this report we have focused upon individuals who are stationary drinking in a public place.

The outreach workers observed that this group fell into two categories:

1. The more entrenched rough sleepers, possibly with mental health problems and obvious physical health problems that were difficult to engage. **Chiswick High Road & Hounslow Town Centre**
2. Problem drinkers who were drinking alone to conceal their drinking from family and colleagues. **Hounslow Heath, Bedfont Lakes, Lampton Park**

Recreational

Several groups of adults drinking in parks during the day were observed in the following area:

- Waterman's Park
- Osterley Park
- Chiswick House Park
When approached these groups said they were drinking together outside because the weather was good, they would usually drink indoors or not be drinking alcohol during the day.

**Displacement**

Displacement is a common outcome of interventions, particularly enforcement activity. Chiswick High Road is a good example where current rough sleeping street drinkers have been known to services in Hammersmith & Fulham but have slowly moved from King Street, Hammersmith to Chiswick High Road, Hounslow to avoid assertive outreach and police operations co-ordinated over a number of years in which Hammersmith & Fulham has received specific funding for rough sleepers initiatives.

The Chiswick/Acton border (LB Ealing) has several parks close to the Hounslow border where street drinkers congregate, activity in Ealing may cause displacement into Hounslow.

**Demographics**

The basic demographics of those observed from all the groups described above are:

<table>
<thead>
<tr>
<th>Gender</th>
<th>Count</th>
</tr>
</thead>
<tbody>
<tr>
<td>Male</td>
<td>275</td>
</tr>
<tr>
<td>Female</td>
<td>95</td>
</tr>
</tbody>
</table>
### Ethnicity

<table>
<thead>
<tr>
<th>Ethnicity</th>
<th>Numbers</th>
</tr>
</thead>
<tbody>
<tr>
<td>White British</td>
<td>236</td>
</tr>
<tr>
<td>Caribbean</td>
<td>12</td>
</tr>
<tr>
<td>Mixed Race</td>
<td>2</td>
</tr>
<tr>
<td>Black British</td>
<td>11</td>
</tr>
<tr>
<td>Africa</td>
<td>3</td>
</tr>
<tr>
<td>Eastern European</td>
<td>23</td>
</tr>
<tr>
<td>Oriental</td>
<td>0</td>
</tr>
<tr>
<td>Asian</td>
<td>83</td>
</tr>
</tbody>
</table>

### Age

<table>
<thead>
<tr>
<th>Age Group</th>
<th>Numbers</th>
</tr>
</thead>
<tbody>
<tr>
<td>Under 18</td>
<td>74</td>
</tr>
<tr>
<td>18-24</td>
<td>55</td>
</tr>
<tr>
<td>25-34</td>
<td>51</td>
</tr>
<tr>
<td>35-44</td>
<td>63</td>
</tr>
<tr>
<td>45-54</td>
<td>58</td>
</tr>
<tr>
<td>55-64</td>
<td>45</td>
</tr>
<tr>
<td>65-74</td>
<td>7</td>
</tr>
<tr>
<td>75+</td>
<td>4</td>
</tr>
</tbody>
</table>
Summary

There is no one initiative that would respond to the different types of street drinking problems presented but there is a need for an all encompassing strategy (Alcohol) that includes the issues for prevention and health education amongst the vast number of people visibly drinking alcohol as they go about their daily business.

The issue of young people drinking in parks during the evening will require a specific response involving the Youth Service, Connexions, the DAAT and CIP.

All initiatives will require sensitivity to specific cultural needs of BME groups, for example a group of East European men drinking socially in public in Hounslow West may need encouragement and support seeking a more appropriate social venue.
Street Drinking Profile

Of the 370 individuals observed 75 were asked if they would participate in a more comprehensive survey, covering basic demographical information, their knowledge of services available, health & housing and why they street drink. 65 agreed to participate; a copy of the survey questions is available as Appendix 2.
Income

Half of those interviewed consume between 5-10 cans of strong lager or cider a day. (On average this would cost £5-£15 a day or £35-£105 a week). 94% belonged to an established drinking school.

<table>
<thead>
<tr>
<th>Income Type</th>
<th>Number</th>
<th>%</th>
</tr>
</thead>
<tbody>
<tr>
<td>Job Seekers Allowance</td>
<td>35</td>
<td>54%</td>
</tr>
<tr>
<td>Incapacity Benefits</td>
<td>1</td>
<td>2%</td>
</tr>
<tr>
<td>Pension</td>
<td>3</td>
<td>5%</td>
</tr>
<tr>
<td>Working</td>
<td>7</td>
<td>11%</td>
</tr>
<tr>
<td>Other</td>
<td>4</td>
<td>6%</td>
</tr>
<tr>
<td>Not specified</td>
<td>15</td>
<td>23%</td>
</tr>
</tbody>
</table>
Housing Situation

Contrary to popular opinion, many street drinkers do not sleep rough. Research indicates that there are up to 20,000 street drinkers throughout the country, only one third of whom are sleeping rough. This reflects in the profile of Hounslow’s street drinkers.

<table>
<thead>
<tr>
<th>Housing Type</th>
<th>Number</th>
<th>%</th>
</tr>
</thead>
<tbody>
<tr>
<td>Rough Sleeping</td>
<td>20</td>
<td>31%</td>
</tr>
<tr>
<td>Council</td>
<td>29</td>
<td>44%</td>
</tr>
<tr>
<td>Private</td>
<td>5</td>
<td>8%</td>
</tr>
<tr>
<td>Squat</td>
<td>5</td>
<td>8%</td>
</tr>
<tr>
<td>Not Specified</td>
<td>6</td>
<td>9%</td>
</tr>
</tbody>
</table>

Support Needs

Respondents expressed a range of needs. Secure housing, a sense of community and inclusion featured prominently.

“Housing - in the last 18 months I have been moved several times”

“I was in a care home, now I’m working in a whorehouse, no benefits as I am homeless”

“I need more support and help especially for my loneliness, I can’t handle bills, take care of a home”

<table>
<thead>
<tr>
<th>Support Needs</th>
<th>Number</th>
<th>%</th>
</tr>
</thead>
<tbody>
<tr>
<td>Not specified</td>
<td>20</td>
<td>31%</td>
</tr>
<tr>
<td>Physical Health</td>
<td>16</td>
<td>24%</td>
</tr>
<tr>
<td>Housing</td>
<td>13</td>
<td>20%</td>
</tr>
<tr>
<td>Mental Health</td>
<td>10</td>
<td>15%</td>
</tr>
<tr>
<td>Children</td>
<td>2</td>
<td>3%</td>
</tr>
<tr>
<td>Disabled</td>
<td>1</td>
<td>2%</td>
</tr>
<tr>
<td>Other</td>
<td>1</td>
<td>2%</td>
</tr>
<tr>
<td>Special Needs</td>
<td>1</td>
<td>2%</td>
</tr>
<tr>
<td>Treatment</td>
<td>1</td>
<td>2%</td>
</tr>
</tbody>
</table>
Health

It is well documented that nationally, street drinkers have difficulty in gaining access to healthcare services, especially psychiatric services. They suffer from a wide range of illnesses which are exacerbated by their drinking, poor diet and sleeping rough for periods and they are at risk of injury from falls and physical attacks.

Whilst only 24% of the street drinkers say they have serious health problems, under-reporting of health problems is also a frequent phenomenon noted by researchers of homeless people and heavy drinkers - in previous studies a number of people will say they have no health problems and then go on to list breathing difficulties, abscesses, skin complaints, etc.

The outreach workers observed many cases of poor health and injury on one occasion having to call an ambulance for a street drinker they were interviewing. They concluded that respondents underreported poor health.

Of those interviewed 25% stated that they were not registered with a GP, several stated they used the A&E department for all their health needs, many stating it was years since they had visited a Doctor other than A&E.

Hounslow Alcohol Related Deaths

There were 103 of alcohol related deaths in Hounslow from 2000 to 2003, increasing from 26 in 2001 and 53 in 2003. Of the 33 London Boroughs Hounslow rates as the third highest for alcohol related deaths.

The majority of these were born in England, male aged between 45 - 64. Whilst this data is not street drinker specific the demographic profiles are very similar suggesting a group of long term chronic drinkers that may not all have been engaged in services. The geographic distribution of these deaths by ward is shown in the diagram below.
Alcohol Consumption

In the majority of cases the term “cans” relates to strong beers and ciders. Such beers often contain over 5 units per can. The safe limit for women is 14 units a week and men 21 units a week. The majority of respondents drank at least their safe weekly limit on a daily basis.

Over 50% said they had been drinking heavily for over 5 years, many of these in excess of 10 years. 43% said they wished to stop drinking.
Drinking Habits

The majority of respondents drank for 4 - 7 days a week, they cited a variety of venues.

Most explained that they chose their street drinking venue for practical and environmental reasons, because there’s somewhere to sit or shelter, that it’s near where they buy drink or because it’s where their friends go.
Of the street drinkers interviewed, the main reasons for drinking outside were because it’s cheaper than pubs and they enjoyed the company. “You’re all in the same boat,” said one street drinker. “You get together for the company, other people who will just drink with you and not judge you,” said another. Many have been drinking outside for more than five years. 20% said they wouldn’t want to drink elsewhere.

People stated numerous reasons for not drinking at home, loneliness, wanting to conceal their alcohol use from family. Some said they drank outside to protect their tenancy, knowing they would be risking complaints and eviction if their flat became used as a drinking den.

Previous research has commented that economic and demographic changes that mean that many of the old pubs that some of the street drinkers would have visited have now closed down. Throughout the UK, where once there were small, cheap pubs, mainly used by older men who could sit with a couple of pints for a whole afternoon, street drinkers, who would have been welcome in the old venues, now no longer fit in. Most said that they drank outside during the day and early evening.

Problems with The General Public

“Children throw stones at me” - A Lampton Park Drinker

Street drinkers were asked to describe problems they have had with members of the general public. Many cited that they felt ‘looked down upon’ and excluded from the community describing their way of life as an alternative to the mainstream.

Problems With General Public

- Verbal abuse: 42%
- Physical abuse: 29%
- Complaints about drinking: 6%
- None
12% of those who took part in the survey felt there was a need for a security strategy to help protect them from abuse. When asked for their suggestions they stated the following:

- CCTV
- Support from Police
- Day Centre for drinkers
- More alcohol services
- Greater park security including more Park Rangers
- Public Amenities including free toilets

The street drinkers showed some level of awareness of the impact of their behaviour acknowledging that “When drunk we argue & fight, sometimes the police are called for help” and that street drinkers use the public telephone at the bus station as a urinal. The toilet issue was raised by several drinkers as there is nowhere appropriate for them to go in the hot spots.

**Summary**

The profile of street drinkers in Hounslow fits the national picture, predominantly male, white and over 35 years old. Hounslow’s street drinkers are a static group presenting with a wide range of and often multiple need.

They present with a long term history of heavy drinking, the majority are not engaged with local alcohol services. Many present in poor health and share the profile of those who make up the high incidence of alcohol related deaths in Hounslow. They do not have access to harm minimisation or prevention advice.

They describe social and emotional needs such as loneliness and isolation, 15% disclosing mental health issues. Many described insecure housing and requested support with this.

The range of need clearly demonstrates the importance for partnership working, across disciplines and care groups.
Services

Street drinkers are some of the hardest people for services to work with - extremely resistant to help, and despite the obvious health dangers and unpleasantness of the street, many show a stubborn determination to remain there, drinking year in year out. Many experienced outreach workers are perplexed by the apparent addiction to these street activities.

Alcohol services are notoriously under funded, in order to deliver basic services Commissioners often fund alcohol services from the drugs budgets. This has resulted in slow growth and development in this area. The limited range of service provision often results in the access threshold for treatment being high, in that the person demonstrates motivation to change. The combination of chronic drinking, chaotic lifestyle and waiting times often result in potential clients losing their motivation.

There are currently two Alcohol specific services in Hounslow:

**EACH (Ethnic Alcohol Counselling in Hounslow)**

EACH is a voluntary sector organisation who are commissioned to provide assessment counselling, group work, targeted services with the probation service and a structured day programme. EACH welcomes service users from all sectors of the community and despite the title at any one time at least 30% of its clients describe themselves as White British. Despite this during the research a significant number of street drinkers described it as a service for “Asians”.

**CNWL Mental Health Trust - Hounslow Alcohol Team**

This is an NHS trust service delivered by clinicians who are able to undertake assessments and provide clinical interventions such as detoxification (community and inpatient) and other pharmacological interventions alongside counselling and group work.

Neither service undertakes any outreach work or work targeting chronic long term drinkers.

Over 50% of those interviewed knew of local services. At the time of the research 50 (77%) were not using services and 15 (23%) were currently engaged in services. Of those using services only 5 were using a specific alcohol service, 4 a drugs service and 6 Mental Health services.

23 members of staff were interviewed in local services (EACH, HSMT, DAIS and the Health Information Project). They were asked if they thought their current services were meeting local need.
Do the Current Services Meet Local Needs?

<table>
<thead>
<tr>
<th>Response</th>
<th>Number</th>
</tr>
</thead>
<tbody>
<tr>
<td>Yes</td>
<td>13</td>
</tr>
<tr>
<td>No</td>
<td>7</td>
</tr>
<tr>
<td>Other</td>
<td>3</td>
</tr>
<tr>
<td><strong>Total Responses</strong></td>
<td><strong>23</strong></td>
</tr>
</tbody>
</table>

Those that felt services could be improved to meet the needs of street drinkers also reported that services lacked funding, did not cater for street drinkers or homeless drinkers and day programmes were described as unsuitable and waiting lists a problem.

Housing was cited as a key missing link and the Somali community identified as a particular group having difficulty accessing services. Access to rehabilitation was described as lengthy and often problematic process.

Suggestions for improvement were:

- A drug and alcohol service for those with Special Needs
- An Alcohol service for older people and individuals with anger management issues
- A drop-in service that is open 7 days per week
- Aftercare Support
- First Aid courses for street drinkers

Summary

Over recent years scarce funding for alcohol services has hindered the growth and development of services. There are no specialist outreach workers to undertake the engagement and motivational work many street drinkers require to change entrenched behaviour and lifestyles. Neither of the current alcohol services in Hounslow offers an explicit harm minimisation service or rapid access to assessment and treatment.

Over the three-month research period the outreach workers developed trusting relationships with regular street drinkers. As a consequence of this 12 People were assisted with accessing treatment and housing suggesting outreach would be an effective initiative. Care coordination was handed over to local services (EACH and DIAS) for the individuals who needed ongoing support.

The high incidence of alcohol related deaths in Hounslow suggests that further work should be undertaken to explore how services effectively engage with chronic heavy drinkers generally.

The complex presenting needs of the client require strong links to be made between services particularly between Alcohol, Housing and Mental Health services.
The Community View

People perceive street drinkers to be aggressive and violent and a danger to society, even if this is often not the case. As a study in Rotherham reported, people resent and fear the presence of street drinkers though there is no evidence to substantiate any real threat to public safety. There is an expectation that police and other services should act.

“I used to use the park (Inwood) with my kid but cannot do so now because of drinkers and drug users, it is a pity for others kids”
- Inwood Park Resident

“Not good for the customers. Smoking & selling weed on the streets. Dustbin is full of empty beer cans. Clients are scared to come to our offices because they are intimidated by the drinkers pet dogs as well as their street drinking”
- Hounslow Central Businessman

98 Community surveys were carried out in the Borough of Hounslow. Outreach workers interviewed a cross section of local businesses and residents. (Copy of the survey Appendix 3)

How Safe Do You Feel?

<table>
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<tr>
<th>Response</th>
<th>Number</th>
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<tr>
<td>Fairly Unsafe</td>
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<td>Total Responses</td>
<td>98</td>
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</table>

Outside the hot spots for traditional street drinkers in central Hounslow the majority of respondents cited drug users & dealers, beggars, ticket touts, & young people as their primary nuisance often resulting in feeling unsafe.

Young People, particularly in large numbers wearing “hoodies”, in the town centre at night were mentioned by a significant number of respondents.
Graffiti, vandalism, litter and verbal abuse were highlighted as a problem across the borough.

Of those who commented specifically on street drinkers, the main complaint was the physical debris left when they leave. The survey generally expresses them being viewed as “sad” rather than “bad”.

“These people should not be on the street, they should be looked after. They need help not on the street. Some need to be hospitalised”

The nature of the impact of street activity upon those surveyed was firstly a negative impact on business (24%), followed by a large group who described feeling uncomfortable, scared, intimidated and unsafe (18%), litter and graffiti was cited as a major consequence (17%). 7% said that they have considered moving away from the area, and 7% experienced problems with shoplifting/theft. 6% of individuals reported some form of verbal or physical attack, and 9% felt that they were not impacted upon at all.

Other individual responses included witnessing drugs being both sold and used openly, that parks are unsafe for children and that they felt harassed by aggressive begging.

Activity was reported to be most problematic during the evening time and relates predominantly to broader night time activity issues. Warm days and weekends were seen to be more problematic than during the day.
Those surveyed were invited to suggest how some of these issues could be managed, the suggestions fell into three categories:

- **Enforcement** - More policing, improved police response time, more/better CCTV, more PCSOs, street drinking bans/bans in parks with children, better security, ASBO/dispersal orders.
- **Welfare** - Better services for substance users, Youth Centres, activities, education, information and employment.
- **Environmental** - Better play facilities in parks, planning & design of the area, park wardens, toilet facilities.
Summary

39% of those interviewed felt unsafe; the main causes were broader community safety issues, young people in groups, drug use and dealing. Street drinking was often related to as one of a range of issues, well expressed by one resident.

“This park (Lampton) is dangerous. There are people drinking in here, taking drugs & may even be dealing. Most times you see the police’s yellow board asking for more information about stabbings/muggings etc”

Street drinkers do attract strong feelings, for every group of people who would like to see them simply swept out of sight, there will be others who show them real compassion. However litter, public urination and feeling intimidated by larger groups of rowdy drinkers were consistent complaints.

Many were concerned about the lack of visible policing and police response times and were aware of the range of enforcement options available. They also offered practical environmental suggestions ranging from facilities for drinkers, namely toilet facilities, benches and bins etc. and expressed concern about dilapidated buildings, overgrown hedges and poor lighting.
The Police View

Police with frontline responsibility for community policing in the Central Hounslow Police Sector were asked of their experience of street drinkers. They visit the drinkers around the bus garage area daily and perceive this as the busiest hot spot estimating there to be call outs to the bus garage approximately every two days. They said that at least one drunk was arrested every day. They described the typical problems as public urination, disorderly behaviour and vandalism of buses.

Officers explained that there can be a conflict between the public’s view of disorderly behaviour and how the police perceive disorder, but that they do arrest drinkers whenever they upset the public enough. The Officers were very conscious of the police resources involved in arresting a drunk, describing them as:-

- A minimum of 2 ½ hours of paperwork
- Cell time of 6 hours
- ½ hourly checks by the jailor
- A doctor would need to be called out whatever time to assess the fitness to detain
- Cleaning the cells after release

Police felt concerned about a lack of service intervention, and that they had contacted local services and been told they do not work with street drinkers.

Police are now able to give tickets (on the spot fines) instead of arrest. It was felt unlikely street drinkers would pay the fine and would serve the alternative day in prison.
Lessons from Other Areas

In recent years there has been much activity nationally looking at the range of interventions available to address the issue of street drinking and associated problems. The following is a simple overview of the range of interventions currently being used:

**Enforcement**

Historically it is often the police who end up (often reluctantly) having the most frequent contact with street drinkers. It is often the police who are most likely to engage in the kind of interventions designed to change someone’s behaviour. In treatment terms this is not the best way to approach addressing change, either from the police point of view or from the street drinkers perspective.

**Street Drinking By Laws**

Making street drinking illegal. This is a current popular measure, commentators suggest that it is preferable to deal with the issue proactively by using enforcement in partnership with other interventions rather than simply to criminalise a pattern of behaviour. The use of Bylaw in some areas has caused displacement and consistent enforcement is a drain on Police resources. Arresting someone is time-consuming, can be dangerous (there is a higher risk of death in custody with people who are very drunk), and it does nothing to prevent the problem reoccurring in the future.

**Anti-Social Behaviour Orders (ASBO’s) and Acceptable Behaviour Contracts**

Anti-Social Behaviour Orders (ASBO’s) were introduced in 1998. These community-based civil orders can be applied to individuals who are judged by the courts to be undertaking persistent and serious anti-social behaviour. If the ASBO is then breached it becomes a criminal offence, punishable by up to 5 years in prison.

There is concern that using Anti social behaviour orders for street drinking criminalises the vulnerable and may adversely affect the comparatively large proportion of people who are committing no actual crime or disorder other than drinking quietly in public. Instead, through use of ASBO’s, the force of the law could be targeted at those who are making a nuisance of themselves.

A police officer in Camden (where ASBOs are used with both street drinkers and beggars) pointed out that there is a very thorough and sometimes intrusive process that will be gone through to collect enough evidence of the anti-social behaviour prior to court to granting the ASBO. That process itself is often enough to persuade someone to modify their behaviour before it reaches court.
Lessons from Other Areas

In Southwark the Police Safer Neighbourhoods Team, used their range of enforcement powers to intervene, dispersing groups in the area and arresting on individual acts of anti-social behaviour and crime. In January 2005 Acceptable Behaviour Contracts were introduced, and 15 of their 35 identified street drinkers voluntarily signed contracts. The remaining 20 have moderated their behaviour and reduced their presence in the area and did not sign the contract. A total of eight ASBO’s have been served with regard to street drinkers in Camberwell. This enforcement activity was supported by available wet centre and outreach support services.

Outreach Teams

Outreach teams targeting street drinkers are used to provide assessment, referral and support in areas where there are significant populations of street drinkers both rough sleepers and those who may hold tenancies. It is usually the role of outreach workers, working on the street to provide a gateway to health, housing and social services for treatment and harm minimisation/motivational services. Success of such interventions is measured in terms of health gains, fewer arrests, reduced emergency hospital admissions and tenancy sustainment.

The London Borough of Ealing already has a scheme underway to tackle street drinking. The Safer Ealing Partnership has helped establish a controlled drinking zone (CDZ) in Acton to address the ongoing problem of street drinking and associated anti-social behaviour. Enforcement activities are complemented by an Alcohol Link Officer from St. Mungo’s, (A homelessness charity) whose role is based around referrals, case management and tailored outreach; ensuring the most vulnerable get the support and services they need.

Wet Day Centres

A creative solution to supporting both the very marginalised street drinkers and inner city residents living at high densities emerged when the Government’s Rough Sleepers Unit recommended “Wet Activity Centres” where chronic drinkers can go to safely drink, socialise, get help with accommodation, health/welfare, and to stop drinking. Research found that well managed Wet Centres reduced amenity impacts, have very low levels of injury and violence. Residents reported a large reduction in street drinkers when the Finsbury Park Wet Centre was established in Islington. Evaluation of the Leicester Wet Day Centre showed a high use of the centre, clients taking part in the activities rather than drinking. Homeless street drinkers were housed and there were significant cost savings through fewer arrests, less need for hospital treatment, and reduced security costs in public areas.

Alternatives to Arrest

Essentially this means referral schemes to local projects by the police / street wardens, park keepers etc. This has included the creation of leaflets containing relevant information, and a programme of training to ensure a consistency of approach.
Regulation of Off Licenses

Controlling the sale of certain types and quantities of alcohol (e.g. strong lagers) in some areas has had a marked effect on the local environment, and the street activity centred on it.

As a response to a street drinking town centre problem the police in the London Borough of Richmond police have referred Tesco’s alcohol licence to the licensing authority, to encourage a more responsible alcohol sale policy.

In the London Borough of Southwark targeting particular traders selling alcohol to intoxicated individuals resulted in the revocation of the licence of the traders whose premises were found to be holding a “credit ledger” for street drinkers. Such initiatives require on going and regular monitoring.

Environmental Interventions

Such interventions involve designing out or in, features that change current patterns of street use. This may include looking at the location of street furniture, the provision of bins and public conveniences, or even the installation of CCTV. Street cleansing and the management of parks and open spaces may also be reviewed.

“Someone is living in the garage. There were some who broke into the boiler room & were squatting. I had to kick all of them out & put in a new padlock. There are drinkers & rough sleepers in the car park but they leave before we turn up for work.”

A comment from a Heston resident relating to the management of disused buildings.

In Finsbury Park (LB Islington) an environmental response to street drinking was to provide an all-weather shelter/overhang with toilet and bin facilities in the area of the park least frequented by families. This is monitored by local outreach services.
There is evidence however that measures that are simply designed to prevent street drinking occurring are only successful in the short term often resulting in the problem moving to a different location in the same area.

The London Borough of Richmond had a long term problem with street drinking in a town centre church yard. The benches were removed from the church yard resulting in the drinking school relocating to a more central spot in the Town Centre, the Quadrant. Earlier this year the benches were removed from the Quadrant. The impact was to move the street drinkers back to the churchyard as there were alternative-seating facilities e.g. gravestones.
Recommendations

Given the relatively ‘static’ nature and size of this population it is possible that a period of coordinated intensive interventions is likely to make a significant impact on street drinking problems in Hounslow. There are a variety of interventions that if used in combination would be appropriate to consider using in Hounslow.

Data Analysis

During the preparation of this report the difficulties in accessing data across CDRP partner agencies rapidly became apparent. The problems (all solvable in the long term) came to light because the information had not been requested previously. There is a wealth of data available that should and could be used to develop local strategies. Liaison is needed between the Information Analysts in the DAAT, Community Safety Team, the Police, Accident & Emergency and the London Ambulance Service. Progress that has been made in the collation of information for the purpose of this report should be maintained.

It seems that that the most effective way to deal with public drinking is through a combination of enforcement, changes to the physical environment and access to both treatment and social services.

Environmental Interventions

This report has identified several environmental interventions that, if used in conjunction with other initiatives, would improve the current situation for both street drinkers and the wider community.

1. **Litter** - That the size of litter bin and regularity of emptying bins particularly in areas identified is examined. Recycling bins for cans would be of benefit. Posters requesting people to use bins may encourage use.

2. **Parks and Open spaces** - Feeling unsafe in parks was expressed by many residents and park keepers were suggested by many as a solution. If this is not viable then a regular and consistent presence by Youth Workers, Community Support Officers or other CIP staff in the areas identified in this report would offer a partial solution.

3. **Public Toilets** - In order to prevent public urination it is important to ensure access to public toilets particularly in drinking hot spots.

4. **Derelict and Empty buildings** - particularly those adjacent to open spaces should be secured and regularly monitored.

5. **Management of areas where street drinking occurs** - It seems that the enforcement of a CDZ in Hounslow’s Central ward is likely to displace the current problems in
Inwood Park and Hounslow Bus Station to areas just outside the zone. The current street drinkers are unlikely to give up quickly and will need to have somewhere else to go. One possible solution would be to choose an area of least impact on the wider community and provide facilities such as benches urinal recycling bins and shelter. This would also provide a static base for services to contact and monitor street drinkers.

Enforcement Interventions

The experience of other areas is that enforcement activities alone are effective at removing street drinking from one area but that it quickly emerges elsewhere. The enforcement of any controlled drinking zone will be resource intensive, and may involve the constant re-arresting of persistent street drinkers resulting in blocking cell space and creating paperwork. However there have been positive outcomes for areas where the police work closely with local alcohol and homelessness services.

This has not excluded heavy enforcement approaches (Dispersal Operations) and has consistently involved co-ordination and planning with partner agencies, for example ensuring that arrest referral outreach workers are available following or even during targeted police operations.

There is public concern about police response times and many complaints about anti-social behaviour and explicit drug activity. Community intelligence free phone telephone lines have been used in tackling open drug markets. In Hounslow it may be more appropriate to have a Community Safety wide brief, having the benefits of both improved community intelligence on a range of issues and providing an accessible outlet for members of the community to articulate concerns. This may also prove useful in obtaining ASBOs. They need not be resource intensive as people could leave messages anonymous or by name requesting a call back. This has been particularly successful when drop-mailed to all addresses in hot spots.
Services

Street drinkers are presenting a range of problems, in particular housing, mental health and social isolation. It is important that current alcohol providers consider if they are best placed to deliver both outreach and assessment and care planning for street drinkers. It may present difficulties if continuing drinkers and existing abstinence based programmes are delivered from the same premises. It is however good practice to develop local services and facilitates seamless care pathways through the treatment process.

Targets and monitoring set for any new services should incorporate the requirements of both the community and the police. Appropriate service options for Hounslow would be one or ideally a combination of the following:

Outreach

Outreach worker(s) are needed to work specifically with street drinkers, provide assessment, referral and ongoing support. Such workers could bridge the gap and between street drinkers and static services.

Drop - In Centre

Provision of a low threshold direct access day centre that would provide assessment, referral and support, and have the potential to provide a range of diversionary and educational activities. They provide a safe social setting for a variety of vulnerable individuals. In many areas such centres are hosted by faith communities, and visited by a range of health and social care professionals. Drop In surgeries with specialist housing, drug & alcohol and mental health advice would improve access. Such projects also have the benefit of drawing upon resources from across the partnership, reinforcing the partnership operationally.

Tenancy Sustainment

Of the street drinkers interviewed 44% were council tenants. Currently EACH is funded by Supporting People in Hounslow to provide floating support designed to help clients to maintain tenancies and deal with alcohol related issues. Further development of this established scheme could be considered.

Wet provision

Wet provision gives street drinkers a safe space in which to drink, staff support and intervention when needed and referral to services that focus on harm minimisation. Wet provision whether in the form of a day centre, a garden or a designated area of a park is no longer perceived as radical, The Alcohol Harm Reduction Strategy for England (2005) uses the Booth Centre in Manchester as an example of a creative solution. The Centre’s garden provides a supervised environment where people can drink during the drop-in sessions.
Through regular support, advice and encouragement, the Centre achieves great success in helping street drinkers to start tackling the problems their drinking causes.

Community Involvement

Involving the community in seeking solutions can reap many benefits including an important shift in perception of the problem. It is possible that a better understanding of the lifestyle of street drinkers would make them appear less intimidating.

To date it has predominantly been the police that have engaged with residents groups in relation to substance misuse related street and park activity. Representation at such meetings by the DAAT would encourage a better understanding of the issues involved.

Good communication is essential, either meeting with, or targeting literature to local residents and businesses in areas where interventions are planned, (particularly hot spots) will make the wider community aware that action is being taken, and provide options to positively contribute.

Opportunities should be sought to enable community concerns to be represented explicitly at groups/steering groups to ensure that the impact of strategies upon local residents are understood. Drug related activity is a community concern. Hounslow Drug Intervention Programme (DIP) should ensure that they include community concerns in their planning.

If static service provision is to be developed then residents and businesses should be involved at the earliest planning stages, their anxieties acknowledged and managed. Visits to similar projects should be arranged. Community representation should also be involved in the ongoing monitoring of any new projects.
Overall Co-ordination

It is clear that this challenging but vulnerable group require a range of interventions provided by several agencies. Robust communication structures will be essential to the success of any joint project.

The Alcohol Harm Reduction Strategy for England (2005) has suggested that the CDRP as a partnership can help individual members achieve their Alcohol related objectives by:

- Providing a forum for agreeing a strategic framework on alcohol misuse which reflects local priorities, ensures complementary objectives and sits within existing strategies where appropriate.

- Ensuring that organisations share information and good practice; and providing a forum for agreeing how organisations will work together, for example police and A&E departments.

- It is essential that other key stakeholders are involved in this process:
  - representation from the alcohol industry, building on the existing British Beer and Pubs Association partnership scheme
  - representation from local voluntary groups
  - representation from the local community

Such a forum would be able to provide strategic direction on street drinking, then a steering group with a membership comprising of the key agencies involved i.e. police, DAAT, housing, health and CIP would have the role of implementing the strategy and reinforcing the partnership approach at a senior level.
Number of people observed during area visits:

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<thead>
<tr>
<th>AREA</th>
<th>Drinkers</th>
<th>Rough Sleepers</th>
<th>Youth</th>
<th>Ticket Touts/Beggars</th>
<th>Drug Users</th>
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### Appendix 1

#### Key:
- Activity was not observed first hand, but, that either evidence of paraphernalia or witnessed by local residents.

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<th>AREA</th>
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<tr>
<td>Kings St. - Old Southall</td>
<td>3</td>
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<tr>
<td><strong>TOTAL:</strong></td>
<td><strong>228</strong></td>
<td><strong>31</strong></td>
<td><strong>76</strong></td>
<td><strong>7</strong></td>
<td><strong>28</strong></td>
</tr>
</tbody>
</table>

*Image: Street Drinking in Hounslow 2005*
Appendix 2

Appendix 2 - Street Drinkers Questionnaire

Date & Time: __________________ Location: ______________ Weather: ____________

Personal Details
Gender: M F Age: ____________
Sexual Orientation: ☐ Gay/Lesbian ☐ Bi-sexual ☐ Heterosexual ☐ Not Stated
Race: ____________ Nationality: ______________

Support Needs
☐ Mental Health ☐ Children ☐ Learning Difficulty ☐ Pet (Specify) ____________
☐ Physical Health ☐ Pregnant ☐ Couple ☐ Other ____________

Substance Use
Primary: _______________ How long using? ____________ How much? _______________  
Secondary: _______________ How supporting? _______________

Accommodation
Borough of origin: _______________ How long here? ___________________________
☐ Rough Sleeper ☐ Private Rented ☐ Hostel (Specify) ____________
☐ Hidden Homeless ☐ Squat ☐ Other (Specify) ____________
Tenancy: ☐ Licence ☐ Short hold ☐ Assured
If homeless, how long? ☐ Under 6 months ☐ 6 months - 1 year ☐ 1 - 2 years
☐ 2 - 5 years ☐ over 5 years
If housed, do you have problems with any of the following? Give Details

Bills: ☐ Council Tax ☐ Gas ☐ Rent arrears
☐ Electricity ☐ Housing Benefit ☐ Other (Specify) _______________
Other: ☐ Cooking ☐ Lack of furniture ☐ Lack of Support ☐ Cleaning
☐ Loneliness
GP
Are you registered with a GP?
☐ Yes  ☐ No

Benefit Details
☐ JSA  ☐ Income Support  ☐ No Benefit (Reason)
☐ Incapacity Benefit  ☐ Pension  ☐ DLA

Other Agencies
☐ Day Centres  ☐ Healthcare  ☐ Drug Agencies
☐ Alcohol Agencies  ☐ Outreach Services  ☐ Other

Specify

What is working for you?

What hasn't worked for you?

How would you see services supporting you better? Is there a lack in your area?

Drinking Habits
Which areas do you drink in regularly?

How many days a week do you drink outside?

Do you drink outside all year?

If not, when do you drink outside and where do you go when you do not?

Do you drink outside during the day and night?
☐ Day  ☐ Night  ☐ Both

Why do you drink outside?

When did you start drinking outside?

How much do you drink in a day?

Are you part of an established drinking group or do you prefer to drink alone?
☐ Group  ☐ Alone

Do you want to stop drinking outside?
☐ Yes  ☐ No  ☐ Don’t know

Would anything stop you drinking outside?
☐ Yes  ☐ No  ☐ Don’t know

Details.
Problems with the Public

Have you experienced verbal abuse from the public? ☐ Yes ☐ No

If yes: How often? ____________________________

Details. ____________________________

Have you experienced physical abuse from the public? ☐ Yes ☐ No

If yes: How often? ____________________________

Details. ____________________________

Has anyone ever complained about your Street Drinking? ☐ Yes ☐ No

Who? ____________________________ Why? ____________________________

Are they reasonable complaints? ☐ Yes ☐ No

Resolving these problems

How do you think that these problems can be resolved? ____________________________

Do you think that street drinkers need a code of conduct? ☐ Yes ☐ No

If yes: How do your see it working? ____________________________

Do you have any suggestions for a code of conduct? ____________________________

Do you think street drinkers need some form of security strategy? ☐ Yes ☐ No

If yes: What would this involve? ____________________________

How would it work? ____________________________
Optional

Name: ___________________________ Contact Details: ______________________

__________________________________________

Would you like to be contacted in the future for help accessing services?
☐ Yes ☐ No
Appendix 3 - Community Questionnaire

1. Do you feel that there is a problem with regards to street activity in this area? If yes then what do you feel these problems are?

2. How do these problems impact on you or your business?

3. What do you feel could be done to resolve these problems?

4. Are there certain times that there is an increase/decrease in the problematic behaviour?

5. Do you feel safe in your community? If not then why?

6. Do you feel intimidated or threatened in your community? If yes then how do you deal with this threat?

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Tony D’Agostino (April 2000) Beneath the Surface - a report into levels of drug use among ARP’s Shopfront clients, Alcohol Recovery Project

Lynda Friemanis If Not Now - When? - An agenda for action on Street Drinking in London that will make a difference, (Oct 1999), London Street Drinking Network

Lynda Friemanis and Oliver Paul (August 1999) Street Drinking in Wandsworth Equinox


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