Bothersome and besotted
Blok, G.

Published in:
Urban Europe

DOI:
10.26530/OAPEN_623610

Citation for published version (APA):

General rights
It is not permitted to download or to forward/distribute the text or part of it without the consent of the author(s) and/or copyright holder(s), other than for strictly personal, individual use, unless the work is under an open content license (like Creative Commons).

Disclaimer/Complaints regulations
If you believe that digital publication of certain material infringes any of your rights or (privacy) interests, please let the Library know, stating your reasons. In case of a legitimate complaint, the Library will make the material inaccessible and/or remove it from the website. Please Ask the Library: http://uba.uva.nl/en/contact, or a letter to: Library of the University of Amsterdam, Secretariat, Singel 425, 1012 WP Amsterdam, The Netherlands. You will be contacted as soon as possible.
28. Bothersome and besotted

The struggle against public drunkenness in urban space

_Gemma Blok_

‘The scandal of our society.’ That is how the British Prime Minister David Cameron described British drinking culture. It seems that tolerance of excessive drinking has been rapidly decreasing in several European countries in recent years. Generally speaking the approach to alcohol abuse in the Netherlands and Western Europe has evolved from a period of repression (1890-1960) to steadily increasing tolerance after 1960. Now the tide seems to be turning once more. Over the past decade the problem of public drunkenness has received a high position on the agenda of several European cities. Rotterdam, for instance, has been participating in a partnership with various French, Belgian and German cities since 2011, with the aim of studying alcohol abuse by young people in public spaces and learning to manage it better. This project, entitled ‘Safer Drinking Scenes’, is being co-funded by the European Commission.

In 2012 the Mayor of Amsterdam, Eberhard van der Laan (PvdA), also joined the struggle against public drunkenness in his city. He felt that alcohol use among young people was becoming a serious problem. On Queen’s Day 2012, ambulances were called out 575 times in the capital to pick up binge drinkers. ‘This involves major costs for society,’ said Van der Laan, and he recommended that drunken ambulance clients should pay a fine. The Mayor also wanted binge drinkers to pay the costs of their hospital admission and for any necessary police action. This plan has not been implemented for the time being, but the tone was set. Now, as a survey by Statistics Netherlands (CBS) reveals, 81% of Dutch people think that young people engaging in excessive alcohol use should pay the costs of their related hospital treatment in part or in full.
In English cities too, ambulances and hospital casualty departments work overtime on weekends and during certain public holidays. The city of Bristol chose an original approach: during Christmas 2014 a mobile Alcohol Recovery Centre went out on the streets. This specially equipped bus picked up blind-drunk Bristolians from the streets to examine them and see if they needed treatment. This type of bus is now planned for ten English cities. They are popularly known as ‘drunk tanks’, a reference to the cell blocks where drunkards used to be forced to sleep it off in the countries of the Eastern Bloc.

**Sustainable alcohol policy**

Binge drinking (known in Dutch as *komazuipen*) has become an established term in recent years, although of course it is not new. For centuries, European cities have experienced the phenomenon of alcohol-soaked public festivals and sozzled pub customers staggering through the streets. Students have also traditionally been hard drinkers. But now that downing a series of shots (small glasses of spirits) during a night out seems to be becoming far more widespread, social protest is growing as well. Cities have become veritable consumer Valhallas, with extensive nightlife venues. Young people now have more money and leisure time. Nowadays the ‘public festival’ takes place every weekend.

However, binge drinkers are a relatively small cost item for society. One out of five Amsterdam citizens drinks too much, researchers estimate, and this generates substantial medical and social costs. For some years there have been rising numbers of people over 55 who contact addiction care organisations. The most persistent, chronic alcoholics drink themselves to death at home; this group is seen as beyond recovery and is provided with palliative care by a host of care providers.

A look at the past may help in formulating a sustainable alcohol policy, which certainly deserves a place on the European Urban Agenda. What can we learn from the past? First of all,
that the effects of repressive measures in the past were minimal, or at least difficult to measure. Secondly, that a repressive approach brings a major danger of stigmatising vulnerable groups in society. Cities should thus take a less one-sided approach to the problems associated with alcohol consumption in public spaces. This is the most visible aspect and requires the most acute interventions, more so than drinking at home. Nonetheless, cities should broaden their perspective and strive for an integral policy on drinking.

Blacklisting

In 1886 the Dutch government made public drunkenness a punishable offence in the new Criminal Code. Citizens who were regularly guilty of public drunkenness (‘habitual drunkards’) were now sent to a state labour institution. Alcoholics in Amsterdam mostly went to the state labour institution in Hoorn, but sometimes also to the one in Veenhuizen in the distant province of Drenthe. In these special prisons they were to be transformed into self-controlled and hard-working citizens. They worked long hours each day and slept in iron cages. On Sunday they had to visit church. Those who misbehaved ended up in the punishment cell on a diet of bread and water. Intensive use was made of the state labour institutes, but they did not prove a great success. Many men reverted to their alcohol misuse after their sentence expired and the institutes were soon full of repeat offenders.

An alternative then arose in the form of addiction care in the ‘Health Clinics for Alcoholism’ as they were known. The first clinic was set up in Amsterdam in 1909, and dozens more quickly followed in the Netherlands. If convicted of public drunkenness, men could now choose between being sent to a state labour institute or living for several years under the control of one of these agencies, which managed their incomes. The men’s wages, pension or welfare money were then paid directly to their wife or the landlord, no longer to the drinkers themselves.
This milder form of coercion resulted in few total abstainers, to the disappointment of the addiction care providers. But it was very effective in protecting the families of alcoholics against economic and social degradation.

In practice, the aforementioned measures mostly affected the older, chronic problem drinkers. Greater success among younger men was achieved with ‘blacklisting’ alcoholics, based on the English model and introduced at the start of the 20th century in a growing number of Dutch municipalities. The blacklist was managed by the police, and it included drinkers who caused problems or whose families requested inclusion. The list was displayed in a prominent position in all the inns and cafes in the municipality. A fine was imposed on anyone serving beer to people on the list. Owners of establishments received a personal letter from the Mayor when someone was placed on the list.

At the end of the 1950s there were some 380 Dutch municipalities – mostly villages and smaller towns – with a blacklist of this kind. The media referred to the blacklist as a ‘pillory in modern form’, and it was. But the pillory did have a useful effect, as stated by researchers of the day. Not on the incorrigible chronic drunkards: they were still able to get hold of their drink, for instance by going to another municipality to drink or turning to methylated spirits instead. But the lists had a deterring effect on beginning problem drinkers. Imminent placement on the blacklist was regarded as a major social disgrace by one’s immediate social circle.

It is possible that all these stricter and milder forms of coercion did indeed have some success, because alcohol consumption fell sharply in the Netherlands after 1900. Between 1920 and 1960 it reached a historic low of less than three litres of pure alcohol per head of population per year. By way of comparison: in the mid-19th century the consumption was at over eight litres. But the conclusion that a strict approach with regard to alcoholics leads to lower alcohol abuse is hard to make in a broader perspective. In many countries with a stricter alcohol policy, such as America and Russia, the consumption of alcohol is relatively
high. And in the Netherlands too, alcohol consumption rose rapidly again after 1960, despite all repressive measures. As prosperity increased, so did drinking. Around 1980 the Dutch were drinking a well-oiled nine litres of pure alcohol per head of population. This is why many historians of alcohol and drug use currently state that the use of intoxicants depends on other factors than measures imposed from above. They point to the presence of social inequality as a background for substance abuse. The stress associated with urbanisation and migration also seems to promote the misuse of alcohol and drugs. In addition, group behaviour and social rituals concerning drink (and drugs) also play an important role. Many historians estimate that policy measures have a relatively small influence on the use and misuse of intoxicants.

**Civilising offensive**

There is no doubt that a tougher approach with regard to alcoholics is often accompanied by stigmatisation and marginalisation of certain groups of users. A century ago, male workers were the scapegoats, accompanied by the stereotypical cry of ‘Oh, father! Please drink no more.’ These irresponsible drinkers were said to beat their wives and reduce their families to penury. In those days, disciplining these alcoholics was linked to a wider project: the elevation of the ‘lower classes’. Alcohol abuse was said to facilitate poverty, prostitution, crime and unemployment. There was no place for this kind of ‘anti-social’ behaviour in the orderly city envisaged by the bourgeoisie.

In practice, the target group for the judiciary and for addiction care organisations was selective and confined to problem drinkers from working-class environments or the lower middle class, who created visible problems in the city or at their work. It was all right for rich people of independent means to drink themselves to death, such has always been the attitude in the Netherlands – as long as no one else is inconvenienced. Separate
neighbourhoods arose in Amsterdam and many other cities for ‘anti-social families’, including many families where alcoholism was a factor. In these ‘schools for living’ (which existed up until the 1960s) they had to learn to live a decent life under the supervision of inspectors. The main result was that the inhabitants of these ‘schools for living’ were heavily stigmatised.

Now it is the binge drinkers – who include many younger girls – who are seen as the black sheep in the spotless white herd. Here too, the approach to these binge drinkers fits inside a wider civilising offensive. In Amsterdam and other Dutch cities, increased decency in public spaces is a 21st-century trend. Prostitution is being forced out of neighbourhoods where it was long tolerated. The number of ‘coffee shops’ (actually cannabis cafes) has been falling for years. In some parts of Amsterdam there are prohibitions on the public and shared consumption of alcohol and drugs. In short, the liberal city that has formed since the 1960s is slowly being cleaned up. In this process, the young binge drinkers form the ultimate symbol of the negative heritage of the 1960s. But the ideals of freedom and happiness propagated at that time never intended this result, did they? Scantily clad young women out on the streets with unsteady gait and slurred speech, ending the evening by puking in the gutter... Bah!

However, if cities take a tougher approach to binge drinkers, they will chiefly end up targeting certain groups with their disciplinary measures: people who are already in a socially vulnerable position. Research shows that risk groups for binge drinking in Amsterdam are mostly to be found among Antillean/Aruban and Surinamese young people, young people in Amsterdam-Zuidoost and young people with an educational level lower than senior general secondary education. In addition, binge drinking is twice as frequent among children who do not live with both parents as among children whose parents do live together.

When formulating a sustainable alcohol policy, European cities should not only take visible disturbance in public spaces as a point of departure, but also try to move beyond the front doors of the many home drinkers – both solitary persons and those
living with others, and from all social environments. Instead of a punitive approach they should prioritise an approach aimed at limiting harm: one aimed at preventing the mental and social damage caused by alcohol misuse for the individual and his or her direct surroundings. As the temperance campaigners of yesteryear already said: as long as we all enjoy our recreational tipple and the hospitality trade and the state earn plenty from this, we owe solidarity to those who cannot handle alcohol well.

The author

Gemma Blok is assistant professor in Dutch History at the University of Amsterdam. Her research focuses on the history of psychiatry and addiction treatment, as well as on the history of drug use and drug policy. She has recently finished a project on public mental health services in Amsterdam in the 20th century and is currently working on the ‘epidemic’ of heroin use in Europe during the 1970s and 1980s.

Further reading

