

# A characterization of the northern Portugal recreational setting scenes: data from observation-based ongoing research

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## I. Introduction and Research Goals

Portuguese recreational contexts, its participants and their leisure activities, their alcohol, drug use and violent behavior patterns are still poorly characterized. In spite of IREFREA's pioneer research (cf. for e.g. Calafat, 2001), and punctual research conducted in specific settings (Carvalho, 2007; Rekas, Lomba e Mendes, 2006; Chaves, 2003), there is still a significant lack of information on its diversity and specificity, with data on youth drug use patterns being collected exclusively through general population and school surveys, (IDT, 2006a; IDT, 2006b; Negreiros, 1998).

Thus, the present study aims to: (i) develop basic systematic knowledge on Portuguese recreational settings, achieving typologies that reflect its diversity; (ii) give way to a second study that will collect data on youth drug use patterns, in the typologies of recreational settings previously identified; (iii) contribute, with such data, to the adjustment of HR (Harm Reduction) intervention strategies in recreational settings.

Particular emphasis will be given to: (i) recreational settings resources on basic health and safety measures, from the participant's point of view; (ii) observed alcohol use, drug use, violence and other problematic episodes.

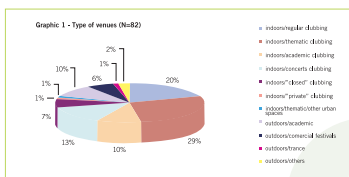
These aspects have been considered relevant by several studies conducted in recreational settings. For e.g. Bellis, Hughes and Lowey (2002), advocating in defence of a *healthy settings approach* (WHO, 1997) that better informs harm reduction strategies, have identified a number of factors that allow us to understand how adverse effects of club drug uses are 'strongly related to the environment in which they are used, rather than resulting solely from the toxic properties of substances themselves' (Calafat et al., 2001 cit in Bellis, et al., 2002). Such factors are, for e.g.: temperature of the environment and related heatstroke; lack of free potable water; poor ventilation; absence of rest or chill-out areas; combining alcohol and other drug uses; absence of appropriately stocked first-aid room and trained staff; glass related injuries; poor lighting; deficiencies in emergency exits and emergency evacuation plans; crowding; high noise levels; etc. Authors identify other serious effects on health deriving from high prevalence of nightlife related violence, drugs and alcohol use.



## III. Results

### 1. Types of venues

Graphic 1 summarizes types of venues so far identified, according to 2 main criteria - indoors (80%) vs outdoors (20%).



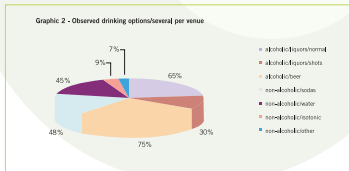
### 2. Observed safety and health oriented strategies

	Positive	Negative
Observed metal detectors (N=82)	22%	78%
Observer's perception of ventilation (N=82)	70%	30%
Observer's perception of temperature (N=82)	68%	32%
Observed emergency exits (N=82)	43%	57%
Observer's perception on lighting adequacy (N=82)	93%	7%
Observed free-access to rest/chill-out areas (N=82)	20%	80%
Observed availability of hear protection (N=82)	0	100%
Observed illicit substance detection strategies (N=82)	5%	95%
Observed free-access to potable water (N=43)	70%	30%
Observed used of plastic glasses (N=82)	11%	89%
Observed presence of law enforcement agencies (N=82)	30%	70%
Observed presence of emergency/aid organizations (N=82)	21%	79%
Observed presence of safety staff circulating (N=82)	21%	79%
Observed presence of HR teams (N=82)	16%	84%

Table 3 - Observed safety and health oriented strategies in recreational settings

### 3. Observed drinking behaviour

Observers where asked to signal all types of drinks being used per venue (several types per venue), emphasising which of them, according to their perception, represented the most commonly used ones:



## II. Method

### 1. Sample

A database using multiple strategies for signalling venues is being assembled on a weekly basis. Between March07 and May08 we identified a total of 1037 venues, 82 of which were pointed out for naturalistic approach with simple, direct and non-participant observation (Lee, 2002; Firmino da Costa, 1999; Anguera, 1997), followed by structured observation instrument (GOMF, Carvalho, 2007) that observer fills in after venue.

Research team is composed integrates researcher and a group of undergraduate students. Data collection is integrated in regular nightlife activities, thus emphasising a double role - *observer* and *participant* in recreational settings.

In 61% of observations conducted, observer spent up to 3 hours in venue for observation purposes (and up to 6 hours in 38% of observations). Observations took place between 03.00 and 06.00 a.m. in 46% of the venues observed.

**Sampling criteria:** inclusion of regular clubbing activity in urban contexts of northern Portugal; inclusion of concerts that take place in clubbing; inclusion of events that take place in urban spaces not conceived originally to be nightlife recreational contexts (for e.g. *drum'n'bass* parties in old city theatres; industrial facilities; outdoor urban venues - associated or not with electronic music, etc.); exclusion of concerts and music events that take place in Concert Halls; exclusion of clubbing in cities from southern Portugal (not applicable to outdoor events such as Summer Festivals, and Trance Parties, less geographically oriented in what concerns their target-participants).

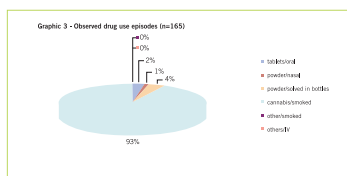
	Systematic strategies (Internet/newsletters weekly-basis)	Non-systematic strategies				
		Internet	Flyers	Media	Informants	Team's regular nightlife
Total venues observed (N=82)	18	11	19	7	14	13

Table 1 - Total of venues per sampling strategy



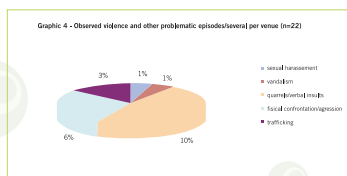
### 4. Observed drug uses

Drug use was present in 45% of venues observed (N=82), in a total of 165 episodes. Observer's perceived frequency of drug use was considered high in 41% (n=37) of the venues.



### 5. Observed violence and other problematic episodes

Violence or other problematic episodes where observed in 17% (N=82) of venues attended, encompassing a total of 22 episodes (n=14).



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### 2. Instrument

GOMF (*Greha de Observação em Meio Festivo* - Carvalho, 2007), integrates closed and open-ended items as well as qualitative descriptions, focused on observation of the following dimensions:

Section I	Space scheme	Discriminating venue's area main components
Section II	Images	Photos of space, activities, logistics, D'ing, etc
Section III	Flyers and other media materials	Supply additional information to observation
Section IV	Description of data collection conditions	Monitoring of observation conditions
Section V	Venue's characterization	For e.g. how is it integrated in surroundings; presence of disturbance caused by venue; crowding criteria; staff behaviour; prices; safety
Section VI	Violence and other problematic episodes	Information on observed frequency and description of such episodes
Section VII	Participants	Observed characteristics (age, subculture, predominant gender)
Section VIII	Alcohol and drug use; drug access	Observed alcohol use general characteristics; observed drug use episodes (description); observed drug access dynamics

Table 2 - GOMF's (Recreational Settings Observation Instrument) sections and observed dimensions.

<sup>1</sup> "Recreational Settings Observation Instrument"

### 3. Procedures

**Step 1: open ended sampling** (Glaser & Strauss 1967) aimed at conducting observation in the most possibly diverse venues. Continuous data analysis and sample monitoring.

**Step 2: codified and selective sampling** (Glaser & Strauss, 1967) aimed at conducting observation in types of venues underrepresented in global sample. Continuous data analysis and sample monitoring. *Data saturation* (Glaser & Strauss, 1967). (Ongoing).

**Step 3: Descriptive statistics** of different venue typologies; *content analysis* to identify specific dynamics related to safety in general and HR strategies present in recreational settings, drug and alcohol uses, violence and other problematic episodes; etc. (Ongoing).



## IV. Discussion

Some of the types of events identified are still underrepresented in the global sample, making it necessary for codified selective sampling to proceed, in order to achieve saturation that will lead us to recreational settings typologies.

This, alongside with difficulties related to observational method, may also account for the fact that some types of drug use may be clearly underrepresented, such as use of cocaine, mdma and amphetamines (*nasal/powder; oral/tablets*).

Traditionally defined problematic drug uses are absent from the observational data, what seems to be in accordance with epidemiological data on drug uses in recreational settings (Calafat, 2001; Martins, Mazzotti & Chikotso, 2005; Pallarés, Baruti, Espuga, Oro & Canales, 2007).

High observed frequency of cannabis use may come in support of the thesis of drug use normalization (Parker, Adridge, & Measham, 1998). The role that recreational settings play's here, in our opinion, a relevant research topic, to be analysed in detail in further research.

Reduced observed presence of violence and other problematic episodes contrasts with a climate of acute moral panic installed around nightlife in the city of Oporto, during the same period of time data collection took place for present research.

Observers perceptions of some the safety and health oriented strategies may indicate that some HR strategies are clearly being integrated in recreational settings, such as perception of adequate ventilation, temperature, lighting and access to potable water.

Other important safety and health oriented strategies, however, are clearly absent from recreational settings, according to observer's perceptions, such as absence of free-access to rest/chill-out areas, availability of hear protection, illicit substance detection and use of plastic glasses. Presence of HR intervention teams is still merely punctual.