



Alcohol Policy Coalition

13 July 2017

Alcohol Policies and Legislation Review
c/o Department of Health
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Dear Review Manager

SUBMISSION TO THE ALCOHOL POLICIES AND LEGISLATION REVIEW

The Alcohol Policy Coalition is a collaboration of health and allied agencies who share a concern about the level of alcohol misuse and the associated health and social consequences for the community. The Alcohol Policy Coalition develops and promotes evidence-based policy responses that are known to be effective in preventing and reducing alcohol-related problems. The members of the Alcohol Policy Coalition are:

Australasian College of Emergency Medicine	Royal Australasian College of Surgeons
Alcohol and Drug Foundation	Salvation Army
Cancer Council Victoria	St Vincent's Health Australia
Centre for Alcohol Policy Research (CAPR), School of Psychology & Public Health, La Trobe University	Turning Point
Foundation for Alcohol Research and Education	Victorian Alcohol and Drug Association
Jewish Community Council of Victoria	Violence Prevention Group, School of Psychology, Deakin University
Public Health Association of Australia (Victoria)	Uniting Church in Australia, Synod of Victoria and Tasmania

All the Alcohol Policy Coalition partners have a strong track record in tackling major health issues in the community.

Thank you for the opportunity to provide a submission to the Northern Territory (NT) Government's Alcohol Policies and Legislation Review. This review process provides the NT Government with an important opportunity to implement comprehensive reforms to strengthen the regulation of alcohol and reduce alcohol-related harms in the NT.

In the Northern Territory, 38.6 per cent of people aged 12 years and older consume alcohol at rates that place them at risk of short-term harm and 28.8 per cent consume alcohol at levels that place them at risk of long-term harm, including chronic disease and illness.¹ This is significantly more than the proportion reporting such consumption nationally (25.7 per cent and 17.6 per cent respectively).² The NT also has some of the heaviest consumption rates in the world. The latest data

shows that consumption in the NT is 11.9 litres per capita.³ This means that if NT was a country it would be in the top ten countries with the heaviest consumption rates.⁴

Alcohol is too readily available in the Territory with one licence for every 353 people aged 18 years and above.¹ Too many people are affected by alcohol-related harms. Alcohol is responsible for more than 9,000 emergency department presentations and associated with nearly 65 per cent of all family and domestic violence cases where the alcohol status is known. In some areas of the NT, this figure is more than 80 per cent.⁵

The Alcohol Policy Coalition supports evidence-based policies to reduce alcohol-related harms and health impacts, including strategies to regulate the physical and economic availability of alcohol.

There is a strong Australian and international evidence-base establishing that increases in the physical availability of alcohol, through increases in on-premises and take away liquor outlet density and trading hours, contribute to increases in alcohol-related harms.⁶

Australian and international research shows clearly that increases in liquor outlet density are associated with increases in violence, family violence, injury and chronic disease.⁷ This includes a series of Australian studies:

- An Australian longitudinal study found that liquor outlet density was significantly associated with assaults in Melbourne.⁸
- A Western Australian study found that the density of pubs and bars, particularly late night outlets, was significantly associated with alcohol-related injury rates.⁹
- Victorian local level studies have shown that increases in take away liquor outlet density are associated with increases in hospitalisations for assault, police records of family violence¹⁰ and rates of alcohol-specific chronic disease.¹¹
- A Victorian longitudinal study found that the higher density of liquor licences in a neighbourhood, particularly take away liquor licences, is associated with higher rates of family violence over time.¹²

There is also a large body of Australian and international research clearly establishing the relationship between liquor outlet trading hours and levels of violence.¹³ This includes a series of robust Australian studies demonstrating that reducing late night trading hours of on-premises liquor outlets leads to substantial reductions in violence, whereas extending late night trading results in higher rates of harm.¹⁴ Two recent Australian studies provide very strong evidence of the effect of reducing late night trading hours:

- A study in Newcastle, New South Wales showed that changing liquor outlet closing times (from 5am to 3am and then to 3.30am) produced a 37 per cent reduction in assaults compared to a control area.¹⁵
- An evaluation of interventions in Sydney CBD and Kings Cross, including 3am last drinks, found that the interventions resulted in a 45.1% per cent reduction in non-domestic assaults in Kings Cross and a 20.3% per cent reduction in Sydney CBD, with most nearby areas showing no increase in assaults.¹⁶

¹ Based on the number of licensed premises as at 8 July 2016 and the Northern Territory population of 180,970 aged 18 and over at 30 June 2015 [Australian Bureau of Statistics (2016) 3101.0 - Australian demographic statistics, Dec 2015. Population by age and sex tables]

In addition, a strong evidence base shows the relationship between alcohol price and consumption levels. The research shows that low alcohol prices result in higher consumption levels, including heavier drinking, occasional drinking, and underage drinking.¹⁷

There is clear evidence that strategies to restrict the availability and increase the price of alcohol are highly effective in reducing alcohol harm.¹⁸ In particular, restricting liquor outlet density and reducing trading hours are cost-effective and proven harm reduction measures.¹⁹ An Australian study found that restricting trading hours is supported by the strongest evidence of effectiveness in reducing alcohol harm of all interventions to control the supply of alcohol.²⁰

Evidence also supports the need for effective regulation of the advertising, promotion and discounting of alcohol, to reduce the impact of advertising on the age and frequency at which young people drink,²¹ and the impact of licensee promotions and discounting practices on levels of consumption and harms.²² A number of studies have demonstrated a strong association between exposure to alcohol advertising and promotions, and subsequent consumption. Alcohol advertising influences both the age at which young people start drinking and their levels of consumption, and whether or not they had consumed alcohol in the past 30 days.^{23,24,25} Liquor promotions centre heavily on using price discounts as an enticement to purchase the product such as 2-for-1 offers, product bundling, buy-one-get-one-free promotions, happy hours, and free gifts. Low liquor prices are a concern in light of the strong evidence on the inverse relationship between the price of alcohol and overall consumption.²⁶ Advertising by packaged liquor outlets associated with supermarket chains are particularly concerning since they have been found to use more point-of-sale promotions, have a greater focus on price based promotions and require more alcohol purchases to participate in a promotion than other off-premise retailers.²⁷

The Alcohol Policy Coalition recommends actions including the following to regulate the availability, price and promotion of alcohol, in order to reduce alcohol-related harm in the NT:

- Review the trading hours of on-premises and take away liquor outlets, particularly those that trade late.
- Reduce the number of liquor outlets in the NT. This should include extending the moratorium on new take away licences to include on-premises licences, transfer of existing licences and reactivation of liquor licences.
- Introduce a risk-based licensing system.
- Increase community involvement and prioritisation of harm minimisation in liquor licensing decisions.
- Introduce a minimum price per standard drink (or unit of pure alcohol), and advocate for introduction of a volumetric tax on wine at the national level.
- Restrict the promotion of alcohol, including by prohibiting promotional activities such as shopper docketts, point-of-sale promotional materials, and catalogue promotions.

Thank you again for the opportunity to raise these important issues with you.

Please contact Sarah Jackson, Legal Policy Adviser, Alcohol Policy Coalition, on (03) 9514 6463 or by email at sarah.jackson@cancervic.org.au if you have any questions or wish to discuss the submission.

Yours sincerely



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¹ Australian Institute of Health and Welfare. (2014). *National Drug Strategy Household Survey 2013*. Retrieved from: <http://www.aihw.gov.au/alcohol-and-other-drugs/data-sources/ndshs-2013/>

² Australian Institute of Health and Welfare. (2014). *National Drug Strategy Household Survey 2013*. Retrieved from: <http://www.aihw.gov.au/alcohol-and-other-drugs/data-sources/ndshs-2013/>

³ Department of the Attorney-General and Justice. (2016). *NT wholesale alcohol supply for 2008-2015*. Northern Territory Government. Retrieved from: <https://justice.nt.gov.au/attorney-general-and-justice/statistics-and-strategy/wholesale-alcohol-supply-data>

⁴ World Health Organization (2016). Global Health Observatory data repository. Recorded alcohol per capita consumption, from 2000 Last update: May 2016. Retrieved from: <http://apps.who.int/gho/data/node.main.A1026?lang=en?showonly=GISAH>

⁵ Northern Territory police (2017). *Statistical publications*. Retrieved from <http://www.pfes.nt.gov.au/Police/Community-safety/Northern-Territory-crime-statistics/Statistical-publications.aspx> on 6 June 2017

⁶ Livingston, M, Wilkinson, C & Room, R 2016, *Community impact of liquor licences*, Sax Institute for the Ministry of Health (NSW), <<http://www.saxinstitute.org.au/wp-content/uploads/Community-impact-of-liquor-licences-1.pdf>>.

⁷ Livingston, M, Wilkinson, C & Room, R 2016, *Community impact of liquor licences*, Sax Institute for the Ministry of Health (NSW), <<http://www.saxinstitute.org.au/wp-content/uploads/Community-impact-of-liquor-licences-1.pdf>>.

⁸ Livingston, M 2008, 'A longitudinal analysis of alcohol outlet density and assault, *Alcoholism: Clinical and Experimental Research*, vol. 32, no. 6, pp. 1074-9.

⁹ Liang, W & Chikritzhs, T 2011, 'Revealing the link between licensed outlets and violence: counting venues versus measuring alcohol availability', *Drug and Alcohol Review*, vol. 30, no. 5, pp. 524-35.

¹⁰ Livingston, M 2011, 'A longitudinal analysis of alcohol outlet density and domestic violence', *Addiction*, vol. 106, no. 5, pp. 919-25.

¹¹ Livingston, M 2011, 'Alcohol outlet density and harm: comparing the impacts on violence and chronic harms', *Drug and Alcohol Review*, vol. 30, no. 5, pp. 515-23.

¹² Livingston, M 2011, 'A longitudinal analysis of alcohol outlet density and domestic violence', *Addiction*, vol. 106, no. 5, pp. 919-25.

¹³ See Wilkinson, C, Livingston, M & Room, R 2016, 'Impacts of changes to trading hours of liquor licences on alcohol-related harm: A systematic review 2005–2015', *Public Health Research & Practice*, vol. 26, no. 4 (online); Miller, P 2013, *Patron Offending in Night-Time Entertainment Districts (POINTED)*, monograph series no. 46, National Drug Law Enforcement Research Fund, p. 220; Manton, E, Room, R & Livingston, M 2014, 'Limits on trading hours, particularly late-night trading', in Manton, E, Room, R, Giorgi, C & Thorn, M (eds.) 2014, *Stemming the tide of alcohol: liquor licensing and the public interest*, Foundation for Alcohol Research and Education, pp. 122-36; Miller, P, Tindall, J, Groombridge, D & Lecathelinais C, 'Effective measures for dealing with alcohol and the night-time economy (DANTE)', in Manton, E, Room, R, Giorgi, C & Thorn, M (eds.) 2014, *Stemming the tide of alcohol: liquor licensing and the public interest*, Foundation for Alcohol Research and Education, pp. 196-210.

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