



Foundation for Alcohol
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The Hon Jill Hennessy MP
Minister for Health
Level 22
50 Lonsdale Street
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Dear Ms Hennessy

VICTORIAN PUBLIC HEALTH AND WELLBEING PLAN 2015-2019

The Foundation for Alcohol Research and Education (FARE) welcomes the opportunity to provide a submission to the *Victorian Public Health and Wellbeing Plan 2015-2019* (the Plan).

FARE is an independent organisation working to stop the harms caused by alcohol. For more than a decade FARE has been working with communities, governments, health professionals and police across the country to take action to reduce alcohol harms.

The Australian Institute of Health and Welfare (AIHW) identifies chronic disease as 'Australia's greatest health challenge'.¹ Australians are living longer, but our ageing population presents a challenge for our health system because we are also living longer with chronic diseases. This comes at a significant cost to the health system, with the four most expensive chronic diseases (cardiovascular disease, oral health, mental disorders and musculoskeletal disease) costing \$27 billion and accounting for 36 per cent of health expenditure in 2008-09.² The major non-communicable diseases share four common modifiable risk factors, tobacco and alcohol use, unhealthy diets and physical inactivity.³

The Consultation Paper states that the "The next Plan will focus on reducing ill health that is avoidable – that can be prevented or its impact delayed or mitigated". To do this the Plan needs to ensure that it adequately addresses the risk factors that cause ill health, including alcohol.

Alcohol places a significant burden on Victoria's health system, the latest data shows that in 2010 in Victoria alone there were 1,214 alcohol-attributable deaths a year. This includes 351 alcohol-attributable cancer deaths and 304 alcohol-attributable injury deaths.⁴ The harms from alcohol are not only significant they are also increasing, alcohol-related hospitalisations have increased by 53 per cent over the ten years between 2001-02 and 2010-11 and treatment episodes for alcohol have increased by 28 per cent over the ten years between 2003-04 and 2012-13.⁵

The burden from alcohol is not just limited to Victoria's health system, but also the emergency services. Victorian Police data demonstrates the high proportion of reported family violence incidents that involve alcohol. In 2012-13 there were 60,055 incidents of family violence of which 14,015 were recorded as having the 'definite' involvement of alcohol and a further 13,834 incidents with the 'possible'

involvement of alcohol. Alcohol is, therefore, at least partially implicated in up to 46 per cent of reported family violence incidences in Victoria.⁶

The current priorities for 2015-19 and long term objectives of the Plan do not reflect the need to prevent alcohol harms in Victoria. Given the scale of alcohol-related disease and injury in Victoria, it is critical that the Plan effectively and directly address the prevention of alcohol harms. This should begin with including the reduction of alcohol harms as part of the Plan's priorities for 2015-19 and long term objectives.

To support these priorities and long-term objectives to reduce alcohol harms the development of the Plan and any supporting documents should include clear evidence-based policies to prevent alcohol harms.

The evidence base to prevent alcohol harms is extensive and long standing. The level of harm directly relates to the price, availability and promotion of alcohol. Effectively regulating these areas will decrease and prevent further alcohol harms from occurring, these factors need to be considered in the development of the Plan and any supporting documents.

It is well-established that increases in the availability of alcohol contribute to increased alcohol harms.⁷ These harms include family violence and child maltreatment.⁸ Research in Melbourne has found that there is a strong association between family violence and the concentration of off-licence (packaged or take-away) liquor outlets in an area. The study concluded that a ten per cent increase in off-licence liquor outlets is associated with a 3.3 per cent increase in family violence. Increases in family violence were also apparent with the increase in general (pub) licences and on-premise licences.⁹

This is particularly concerning for Victoria as the state that hosts the greatest number of liquor licenses,¹⁰ with 19,978 active liquor licences in 2012-13.¹¹ Between 2003 and 2012 licensed premises increased by 21 per cent.¹² While over the same time period ambulance attendances for alcohol doubled and alcohol-related family violence incidents increased by 85 per cent.¹³

An example of policies that have proven to reduce and prevent alcohol harms in the modest reductions in the trading hours of licensed venues, most recently been demonstrated in the Sydney City CBD and Kings Cross Precincts with the introduction of 3am last drinks and 1.30am lockouts. An early analysis indicates that following the introduction of these reforms, there has been a reduction in non-domestic assaults in Kings Cross by 32 per cent and the Sydney CBD precinct by 26 per cent.¹⁴

The measures introduced in the Sydney CBD and Kings Cross precinct were modelled on the Newcastle trading hour restrictions, which is a proven measure to reduce alcohol harms. Five years after the 3am closing time and the 1am lockout were introduced, an evaluation found that there was a sustained reduction in alcohol-related assaults in the Newcastle CBD with an average of a 21 per cent decrease in assaults per hour.¹⁵ The Sydney CBD, Kings Cross and Newcastle experiences demonstrate how even modest reductions in trading hours can result in significant reduction in harms.

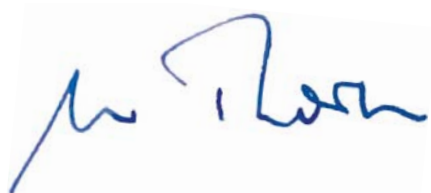
The following measures need to be considered to ensure the prevention of alcohol harms is a priority within Plan:

- Tighter controls on the density of liquor licences in Victoria.
- Further restrictions to the hours that alcohol is available for sale for both on-licence premises (bars, pubs and clubs) and off-licence premises (bottle shops).
- Apply liquor promotion controls for on- and off-licence premises with equal weight.
- Ban alcohol promotions from appearing on shopper docketts.
- Restrictions on price-based promotions, such as bulk purchase discounts, and other promotional activities and practices which encourage the consumption of alcohol in risky volumes.
- Prohibition of alcohol promotions and advertisements from appearing on public property (e.g. trams, trains and buses).

These solutions are outlined in more detail in the Alcohol Policy Coalition (APC)'s *Five steps to a safer, healthier Victoria* and FARE's *National framework for action to prevent alcohol-related family violence*. Both of these documents are enclosed with this letter.

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

Yours sincerely



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¹ Australian Institute of Health and Welfare 2014 *Australia's health 2014: In brief* Cat. no. AUS 181 Canberra: AIHW <http://www.aihw.gov.au/WorkArea/DownloadAsset.aspx?id=60129547555>

² Ibid.

³ World Health Organization 2013 *Global action plan for the prevention and control of noncommunicable diseases 2013-2020*
http://apps.who.int/iris/bitstream/10665/94384/1/9789241506236_eng.pdf

⁴ Gao, C., Ogeil, R.P., & Lloyd, B. (2014). Alcohol's burden of disease in Australia. Canberra: FARE and VicHealth in collaboration with Turning Point.

⁵ FARE. (2014). *The state of play: Alcohol in Victoria*. Canberra: FARE.

⁶ Law Enforcement Assistance Program (LEAP) data extracted 18 July 2014, Victoria Police

⁷ Liang, W and Chikritzhs, T (2010). Revealing the link between licensed outlets and violence: Counting venues versus measuring alcohol availability. *Drug and Alcohol Review*. 30, 524-535.

⁸ World Health Organization. (2006). WHO facts on: Child maltreatment and alcohol. World Health Organization, Geneva. Retrieved from:

http://www.who.int/violence_injury_prevention/violence/world_report/factsheets/fs_child.pdf.

⁹ Livingston, M. (2011). A longitudinal analysis of alcohol outlet density and domestic violence. *Addiction*, 106(5):919-925.

¹⁰ Roche, A.M. and Steenson, T. (August 2014) 'Liquor licensing in Australia: an overview of the legislative frameworks', Chapter 2 in Manton, E., Room, R., Giorgi, C., Thorn, M., eds. (2014). *Stemming the Tide of Alcohol: Liquor licensing and the public interest*, Canberra: Foundation for Alcohol Research and Education in collaboration with The University of Melbourne, p.11.

¹¹ Foundation for Alcohol Research and Education (FARE). (2014). *The State of Play: Alcohol in Victoria*, Canberra: FARE. <http://www.fare.org.au/wp-content/uploads/2014/09/VIC-Harms-Paper-FINAL-Sep-2014.pdf>

¹² Victorian Commission for Gambling and Liquor Regulation (VCGLR). (2013). Annual Report 2012-2013. Melbourne: VCGLR.

¹³ Foundation for Alcohol Research and Education (2014). *The state of play: Alcohol in Victoria*. Foundation for Alcohol Research and Education (FARE), Canberra.

¹⁴ Menéndez, P., Weatherburn, D., Kypri, K., and Fitzgerald, J. (2015). *Lockouts and last drinks: The impact of the January 2014 liquor licence reforms on assaults in NSW, Australia. Contemporary Issues in Crime and Justice. Number 183*. Sydney: New South Wales Bureau of Crime Statistics and Research.

¹⁵ Kypri, K., McClelland, P. and Miller, P. (2014). Restrictions in pub closing times and lockouts in Newcastle, Australia five years on. *Drug and Alcohol Review*, 33, 323-326