



# ***LEGAL AFFAIRS AND COMMUNITY SAFETY COMMITTEE***

**Members present:**

Mr ML Furner MP (Chair)  
Miss VM Barton MP  
Mr DJ Brown MP  
Ms JE Pease MP  
Dr CAC Rowan MP  
Mrs T Smith MP

**Staff present:**

Ms B Watson (Research Director)  
Ms K Longworth (Principal Research Officer)

## **PUBLIC HEARING—EXAMINATION OF TACKLING ALCOHOL-FUELLED VIOLENCE LEGISLATION AMENDMENT BILL 2015**

### **TRANSCRIPT OF PROCEEDINGS**

**MONDAY, 1 FEBRUARY 2016**

**Brisbane**

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### **Committee met at 9.31 am**

**CHAIR:** Good morning. I declare open this public hearing for the committee's inquiry into the Tackling Alcohol-fuelled Violence Legislation Amendment Bill 2015. This bill was introduced to the parliament by the Queensland government. The parliament has referred the bill to its bipartisan Legal Affairs and Community Safety Committee—this committee—for examination.

My name is Mark Furner, member for Ferny Grove and chair of the committee. With me here today are: Mrs Tarnya Smith, member for Mount Ommaney and the deputy chair; substituting for Mr Jon Krause, member for Beaudesert, is Miss Verity Barton, member for Broadwater; Ms Joan Pease, member for Lytton; substituting for another member is Mr Don Brown, member for Capalaba; and substituting for Mr Tony Perrett, member for Gympie, is Dr Christian Rowan, member for Moggill.

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All those present today should note that it is possible you might be filmed or photographed during the proceedings. I ask everyone present, both in the chamber and in the public gallery, to turn mobiles phones off or switch to silent mode. Only the committee and invited witnesses may participate in the proceedings. As parliamentary proceedings, under the standing orders, any person may be excluded from the hearing at the discretion of the chair or by order of the committee.

The purpose of today is to assist the committee with its examination of the Tackling Alcohol-fuelled Violence Legislation Amendment Bill 2015. This bill aims to introduce a number of legislative changes: the ones receiving the most public attention relate to the times during which alcohol can be served and during which patrons can enter licensed premises. The majority of submissions to our inquiry have focused on those aspects of the bill and this is therefore a significant focus of our inquiry. A number of stakeholders, most of whom have made written submissions to our inquiry, have been invited to participate in the hearing. The program for today has been published on the committee's web page, and there are hard copies available in the gallery and in the chamber.

### **MERGARD, Reverend Lance, Senior Chaplain, ChaplainWatch**

### **TURNER, Mr Simon, Director, Just Let It Go Foundation**

**CHAIR:** Thank you for both of your submissions and for attending here today. We encourage you to make an opening statement each of five minutes and then we will hand you over to the committee for some questions. For the benefit of Hansard, please state your name and title. We will start with Mr Mergard and then Mr Simon Turner to do likewise, and then back to Mr Mergard.

**Rev. Mergard:** My name is Reverend Lance Mergard. I am the Senior Chaplain of ChaplainWatch and the founder of the NightWatch chaplaincy.

**Mr Turner:** My name is Simon Turner. I am a director of the Just Let It Go Foundation, which is a harm prevention charity that was established in Queensland as a result of the death of Bruce Steensen on the Sunshine Coast in 2014. I am also a single dad from Brighton.

**Rev. Mergard:** Thank you, Chair, and thank you, committee, for this opportunity. I do appreciate it. For more than a decade now I have literally been on the streets of the entertainment precinct in the Valley every weekend save a handful, so my knowledge is rather deep and rather strong when it comes to what is happening out there. I am a social welfare worker by trade and a minister and a chaplain by calling. My motivation to be there is to be able to respond to people, because I believe everybody has a God-given destiny that one stupid decision can destroy. I have set up an organisation that is able to respond to the people in the precincts when they choose to start to make silly decisions, to try to intervene to stop that stupidity from destroying their future.

I come before you today with proposals from ChaplainWatch. Initially, and we still hold to this, we have no position when it comes to the lockout times and closure times. As a community service that focuses on public safety and public spaces, we will respond to whatever is handed out to us. Whether we close early, very early or even get to the point of prohibition, we are still going to need our service working on the streets because this is where a very large proportion of our young culture likes to come.

When you come out on to the streets it is like watching Facebook in real time. The reason that young people come out is not just alcohol. It is not just that they want to get drunk. They come out to meet. They come out to greet. They come out to hook up. They come out to meet up, to engage, to realise that the photo on Facebook is not the reality when you actually meet them face to face, to know that they are not going out with that person anymore. Last Saturday we had over 30,000 young people in the entertainment precincts of the Valley, the city and the inner west. To put that into perspective, that is the population of Maryborough. They all come out into that small zone. That is a very large proportion of the population that you have responsibility for as a government.

Even though alcohol is the primary reason that they come, there are many, many other reasons. Therefore, first of all, we humbly caution parliament not to repeat history. Secondly, we humbly submit that the proposed closing time legislation before the committee should not merely be a one-dimensional measure offered to address what is in fact a multidimensional problem. Thirdly, we ask the committee to take into serious consideration that every action that you will take by the decisions you make will have an equal and opposite reaction. Fourthly, ChaplainWatch calls for a robust risk analysis to consider the unexpected results that can come from legislation that you may offer to parliament in the very near future.

Not trying to be flippant but to make a point, we actually consider the only way you are going to be able to resolve the issues before you is to call for a national prohibition on alcohol—that is, stop everybody from drinking, stop everybody from coming out. We are realists and we understand that that is not going to work. Therefore, we put it to you that we do not want you to repeat history. In 2005, the Labor Beattie government brought down the 17-point plan. In 2010, the then Labor government introduced the DSP, the drink safe precinct. Now you are facing this again. They come up in five-year cycles. Instead of seeing what has been done in the past as being failures, see them rather as stepping stones.

The 17-point plan brought to fruition certain measures that were able to start to respond to the issues that society was facing at that time. It all came from a one-punch kill on Caxton Street. Then in 2010 the Labor government brought in the drink safe precinct, which then took the 17-point plan and placed it in the hands of the precincts, requiring them—from police through to venues through to community services like us—to start at a local level to respond to the issues. There was great success as that was becoming a part of the plan. When the LNP came into government, they then introduced the Safe Night Out Strategy. They developed the DSP and made it broader and more inclusive, giving it finances and giving it some muscle to be able to respond.

I have to say that, literally, I have watched violence decrease in the Valley over this period of time. Statistics will bear that out. Police statistics will be given to you, I am sure, somewhere throughout this inquiry. Whereas I used to see broken eye sockets on a very regular basis come from punches in a fight, it does not happen. We do not see that as much now. It still happens, but we do not see it as much—in fact, substantially less. We used to have traffic accident issues where people were being knocked down by cars. I have actually removed that from our statistical data collection because it does not happen much any longer—one or two or three in a year. One happened recently but it was intentional. The person intentionally stood in front of a car.

My thoughts have been that, as a committee, you need to respond to the multifaceted issues that are there, not just bring down one small point and try to deal with that. It needs to be broad ranging. There are economic impacts, and I have spoken about that. There are logistical impacts, especially with regard to taxis getting in and out of the city and the cycle of taking a passenger from the Valley or the city or the inner west out and then coming back in again. In terms of that cycle, by cutting down the time you are going to cut their response times. For buses and trains it is exactly the same.

We asked a small group of people what their response would be if the lockout times were changed: 14 per cent said they would stay at home and drink; 39 per cent said they would seriously consider not coming out; 22 per cent said they would party with friends at their place or go to a park somewhere; and only 25 per cent of all of the respondents said they would consider coming out. My concern then is how we are going to deal with this when we have a displacement of people if they choose not to come out because of draconian lockout times. I am asking the committee to consider what times are appropriate, if you consider any times appropriate.

I understand that there are a lot of people who are doing push-back and are saying that the 5 am stop and 3 am close are there. As I said, we do not have a position. Whatever is done, you have to consider the ramifications that that will have because that is so important. One of the great values of having an entertainment precinct, whether it is in Cairns, Townsville, Surfers, the Valley-CBD or Caxton, is that we are able to concentrate resources right there. We are able to determine whether a person is under 18 and is drinking. We are able to determine when people are becoming seriously ill and respond to them instead of leaving them in the hands of people who have no idea and we could then start to see death by alcohol poisoning et cetera. We can respond to people who have drug issues who have overdosed on party drugs such as MDMA et cetera. The police are able to assist. The ambulance response time to serious incidents is about five to seven minutes from the RBH to the Valley.

By keeping this going, there is the probability of preserving life a lot more. Having said all of that, I do know that there is a culture in Australia of alcohol use and misuse. There is a culture of violence. One of the things we need to do first of all—and I am asking the committee to consider this—is to remove the words ‘alcohol fuelled violence’ as a terminology from the lexicon. I am happy with ‘alcohol related’ but ‘alcohol fuelled violence’ makes it into a syndrome which says that alcohol is the problem. Therefore, if you get rid of alcohol you will get rid of violence. That is not happening. It will not happen. We need to deal with alcohol as an issue. We need to deal with violence as an issue. I leave myself open for your interrogation.

**CHAIR:** Thank you, Reverend Mergard. I will go to Mr Turner for a five-minute opening statement.

**Mr Turner:** In Queensland the most common crime committed against people remains assault. The majority of homicides in Queensland are committed by someone known to the victim. In Queensland we tend to hurt the ones we love. When we are young, our disagreements take place in the backyard. We settle them in the playground when we go to school. As we become young adults, we act out these disputes aggressively on public streets. When we make a family or settle down, we end up taking it home. This is what the statistics of assault and domestic violence tell us.

For 20 years in Australia doctors have shown concern for the physiological effects of alcohol abuse identified as an accumulative estimate comprising a number of fields relating to harm. Violence, according to medicine, is being fuelled by alcohol. Research either seeks to identify or justify this proposition. Though the former is preferable, the latter is often relied upon as the fallback when results are not clearly evident. The current justification that nothing good happens after midnight is almost mystical in its assumption. At 1 am the risk of harm, according to Miller, is at its least, at which time the proposed net return is at its largest—that is, not the actual risk of harm but the potential for a far greater percentage of risk that is yet to occur. However, the prudent rule of government is to apply measures where the needs can be clearly identified.

Miller’s predictive model suggests reducing trading to 3 am would result in reducing the risk of harm by close to 50 per cent—a tangible saving for community and government. The lockout measure does not reduce the risk of harm from alcohol for it is a crowd control measure, not a harm prevention strategy. Reducing trading hours will, according to Miller, reduce harm, though the lockout is far too severe a measure for young people to socially adopt and far too impractical to be realistically adhered to. It restricts the very essence of what it means to be young and it does not address antisocial or violent behaviour. Rather, its sole purpose is to control by locking down the movements, freedoms, choices, spaces and environments of young people which, by its design, may create an inherent risk of harm.

A measured approach to reducing the potential of harm for young adults attending entertainment precincts would include environmental improvements, greater cooperation between industries and new communication strategies that reduce the social currency of violence and macho behaviours, recognise the value of social influence and impart social standards. Youth behaviour is fuelled by uncensored media, violent video games, extreme sports and social commentary. Their judge is not a magistrate, doctor, parent, teacher or coach; it is a peer who has more likes and friends than them on Facebook.

The reduction in the number of licensed supermarkets of packaged alcohol, which have spread through our suburbs like cane toads, and the reduction in their trading hours for the sale of takeaway packaged alcohol is fundamental to social reform. The cost of discounted liquor needs to be offset by a levy that effectively recovers the cost of expenditure on health and social services.

The false gods of luck and promised wealth that erode the social fabric of economies and families must also be reduced. The coupling of gambling and alcohol consumption is not a social activity that should be encouraged, especially in our suburbs. Is this how we were taught to socialise, or is this how

we want our young people to socialise regardless of the increased exposure to risk of personal and financial harm? Reform requires a broad wingspan. You do not solve complex social situations nor curb behaviour through the introduction of a unitary measure. We would all like a silver-bullet answer to remove the werewolves from our playgrounds, streets and homes, but this proposed legislation is not the way to effect visible change in our social and cultural behaviours.

Until the 1840s, doctors administered alcohol as a means of providing a mild anaesthetic before they realised the error of their ways. May it also be said that at this time there are far more effective approaches, methods and strategies to reduce both the consumption of alcohol and violence in Queensland, but the cocktailing of substance and behaviours has mystified and diluted the intended value and purpose of this proposed legislation.

Where does the Just Let It Go Foundation stand? We do not support conservative, unitary approaches; nor do we support those who say, 'Let them eat cake.' Instead we choose to stand, as Noel Pearson puts it, in the radical centre, operating amongst industries, aligned with government intention and agreeing with health experts to participate meaningfully as an agent of social and cultural influence. We support measures that reduce the risk of harm to young people. We support the earlier closure of licensed venues across the state—and that is all licensed venues without exception or exemption. We support the reduction of trading hours for takeaway alcohol which is responsible for the vast majority of alcohol sales that continue to fuel binge drinking and preloading cultures. We support the reduction of gambling across the state and oppose any extension of poker machine trading hours, which we consider to be absurd.

**CHAIR:** Thank you, Mr Turner. In your submission and in your opening statement you reference Professor Miller. In your submission you refer to a research paper that he delivered which defined that 'alcohol related intoxication and harm increases by between 15-20 per cent every hour of trading after midnight'. Are you familiar with any other papers or submissions that the committee has received on this subject at all?

**Mr Turner:** I have not seen any other documents to support Dr Miller's position. I know that Dr Miller's position and that paper was delivered to a police conference here in Queensland earlier this year, adopted by a number of health professionals and held up as the single answer and way to explain antisocial behaviours. I do believe that it is misleading in that it does not recognise or single out alcohol fuelled violence. What it does is it relates alcohol and harm. That could include dad having a few beers in the backyard and tearing a hamstring. It could be mum cutting her finger on a knife while slicing onion after a glass of wine. Whether or not this is an accurate reflection of the level of violence in our community that is driven by alcohol is somewhat misleading, I believe.

**CHAIR:** Nevertheless, the paper of Professor Miller that you refer to relates to after midnight. The bill proposes changes where last drinks will cease at 2 am and an introduction of lockouts from 1 am to 3 am, consistent with Dr Miller's paper. Would you concur that that will therefore see a reduction in respect of what Professor Miller is advocating?

**Mr Turner:** If one is to follow Professor Miller's advice, what he is saying is where we would see a reduction is where the risk is evident. If we were to move trading hours from 5 am to 3 am, under his model we would see a reduction of at least 50 per cent, but placing a measure like a lockout at 1 am when Professor Miller says that the risk of harm is quite negligible, at 15 per cent, would not seem appropriate. It would not seem that it is placed in the right area. An effective place to put the lockout would be at the same time that you had last drinks. I do not believe that many young people will be checking their watch at 12.55 to make sure they are in the venue of choice if that lockout occurred. I think what it will do is cause confusion amongst those young people. I believe that reducing hours in line with what Professor Miller says can potentially reduce the risk of harm, though I do not believe the lockout is a necessary measure or would assist at all. I think it would have a detrimental effect.

**CHAIR:** Reverend Mergard, in regard to your opening statement and your submission, you made reference to your survey of 30-31 October 2015. You relayed some facts to the committee but you did not touch on the first fact in your submission, and that is that 72 per cent of those surveyed were not aware of lockout and cease-drinks legislation proposed. Can you explain the results and how you reached that conclusion?

**Rev. Mergard:** It was a very small survey. It was really trying to determine from our point of view how we would be able to construct our service moving forward. I do not place much weight on it other than it was just a quick observation.

**Mrs SMITH:** Gentlemen, thank you both for presenting and for coming in today. It is very interesting to hear that you have been doing that work, bar a handful of weekends, for the last 10 years. I think you are very well placed to see what has been occurring in the safe precinct area. In regard to your organisation and yourselves, have you ever had to deal with violence at the taxi ranks?

**Rev. Mergard:** There has been violence at taxi ranks. However, consistent with almost everything that is happening in the precincts, it is becoming less and less. What was a real issue three years ago is now becoming less of an issue. There are many reasons for that. I think the Taxi Council have been able to put in place good measures to respond to that. We also have the police, who provide a marvellous response. CitySafe cameras also work exceptionally well. We respond very quickly to any type of incident that is rising to be able to calm it. Those types of measures are working exceptionally well. Back in 2010-11 we saw a lot of problems at taxi ranks. They are becoming less and less, as we are finding throughout the precinct.

**Mrs SMITH:** In your opinion, would there be a possibility of that increasing at the 1 am and 3 am mark if these laws were introduced?

**Rev. Mergard:** I have a problem with lockouts as opposed to the cessation of drinks if we keep moving it two hours. There is wisdom in having a lockout at three o'clock in the morning for a 5 am cessation of drinks. There is wisdom in that. It draws a good line in the sand. Those who want to go home choose to go home at three o'clock. Those who want to stay on can stay on for that extra two-hour period.

If it was brought forward, for instance, then I have a real problem with having a two-hour difference between lockout and the cessation of drinks earlier on. I think it is going to cause problems because there are going to be a lot of people who will not come out because of that or, if they do, they are actually going to stay in until 3 and then we are going to have the problem at three.

There is one issue that I would like to address which is not in my written submission. On Christmas Day and Good Friday we have a 24-hour no-drink time. On Anzac Day we have cessation of drinks for 12 hours and a cessation of drinks and close at midnight. Every time for the next two hours we will have problems on the street. People do not go home when you close at five. People will stay around, even now, for an hour or an hour and a half because they have come out to meet and greet their social framework and eat greasy food—it is not just alcohol—and that is something which does take place. When we are talking about the lockout, I think we have to be very judicious as to how we put that in relation to your cessation of drinks idea. With the way things are working at this point in time we have things well in hand, but that decision is yours.

**Ms PEASE:** Thank you very much for coming in, gentlemen. Thank very much, Lance, for showing us around the Valley precinct. It was a really informative tour, and I appreciate your time and the work of your volunteers. In your submission you mentioned that you work from 11 pm until early morning. What are the hours that you have volunteers on-site?

**Rev. Mergard:** We do it from 11 through until five. I let some volunteers go home at four if we have a reasonable night, but the rest of us will stay on until five. We start at 11 because that is generally when things start to move in. In my submission I talked about economic zones. The restaurant trade starts to close down about 10.30, and there seems to be a good flow-over mix with the next economic trade coming in, if you think about it in those terms. I have problems at the other end, because I think that the economic zone bumps into the coffee/lycra set at the other end, especially if they are staying on after five. I have concerns about Airlie Beach and Cairns, where you have a lot of people who could be tourists coming out to do the power walk and watch the dolphins at sunrise. In other areas I think we just need to be careful. We would move our times if necessary to be able to respond to that; however, at this point in time I think, even if parliament chooses cessation of drinks at three, we are still going to have to be there until five.

**Ms PEASE:** One of the other things that I am interested in is where you get your clients. Do you find them, are they brought to you or are you contacted by the clubs? I know that you are connected.

**Rev. Mergard:** I set up this charity on the philosophy of intentional intervention. I have set up patrols to go out and look and respond to them when they are on the streets. The venues now are aware of that and we work very closely, hand in hand, with them when they see problems. Our focus is basically on public safety and public spaces. When former premier Beattie brought in the 17-point plan, my response was that they missed the fact that there was an 18th point, and that is public space issues. We go out looking for people when their good times are going bad, and that is our response. Yes, the police respond to us and will call us in; yes, taxis will do the same; yes, venues will do the same; security will do the same; stakeholders will do the same. We are part and parcel of the whole ebb and flow of the whole process, and we produce an enormous amount of safety because of our response.

**Dr ROWAN:** Thank you for your submissions today and for the great work that you do as far as your organisations are concerned. As a former president of the Australian Medical Association and as an addiction medicine specialist, I am very keen to see this issue addressed. I take away from both of your submissions that this is a very complex problem, and sometimes having simplistic solutions may

not necessarily deliver the best outcomes for communities. Can you tell me a little bit about your experiences with drug fuelled violence—illicit and synthetic drugs and other things that exist out there—and what is occurring in our entertainment precincts and whether this legislation will do anything to address that?

**Rev. Mergard:** A brief indication of my background is that I have spent 10 years in Kings Cross. I have run the second largest drug rehab in Australia for a decade. I am very much aware of the issues around drugs, especially heroin, which was my speciality at that time from the late 1980s through to the mid-1990s. I have a great deal of experience there. I have to say that my experience with regard to violence and drugs in the precinct is that it is not high. I am more concerned about self-harm. Having said that, three or four times recently we have seen people who have been on heavy amphetamine type substances—whether it was ice or whatever, I do not know—and they were harming other people including police officers. But it is a very small percentage.

What we do see, however, is people who are on other types of drugs like MDMA, ecstasy and their derivatives, and it depends on the 'goodness' of the quality of what we get on the day because they all come from backyards. We had a recent bunch, which we think was cut with ketamine, which caused real problems. On Saturday night we pulled one person off the road because he was so totally off his face that he did not know where the cars were. He was just tripping, chewing his face, his eyeballs were like dinner plates and he was completely disorientated. We had to call an ambulance to respond to him, but for his own safety we had to restrain him and hold him down so that we could keep him in a safe place. That is not highly frequent, but we come across that as well. When it comes to violence, drugs are not necessarily something that we see as a related incident as much as we see with alcohol.

**Dr ROWAN:** I have a follow-up question in relation to unintended consequences, which were alluded to in the submissions, and the potential for other harm in parks and suburbs out in communities. Do you have any further sense as to the risk of that? Are there any other examples that you are aware of around the world or in other jurisdictions where those sorts of things have occurred when there has been a sole focus on supply reduction strategies as opposed to a balance between demand reduction and harm minimisation?

**Rev. Mergard:** I am not a researcher. I major in vomit and blood, so that is where I am at. That is what I do, and I do that very well. Having said that, just recently on the weekend we had indications of parties that are going spare. When you go back to 2009 and 2010, we had sly rave parties taking place. People would take a warehouse, hire it for the weekend, and there would be no security, no prohibition, no controls and no OLGR awareness. They would get around it by saying, 'Bring your own booze.' People would come, and then by the time the authorities were aware of it a catastrophe had already taken place. I feel that displacement is a real probability if we mess with the mix at this point in time.

**Mr BROWN:** Mr Turner, you stated that the cost to society and health should be borne by licensed establishments. Did I hear that correctly?

**Mr Turner:** My suggestion is that where we find the risk of harm in terms of young people consuming alcohol is the availability of discount liquor, and therefore we need to address this issue of discounted liquor. What is really interesting is that when we banned supermarkets from selling alcohol then supermarkets built supermarkets just for alcohol, and at the end of the day that is what you have when you look at something like Dan Murphy's. I am suggesting that you place a levy on those discounted alcohol places to increase the price of alcohol, which will reduce the consumption of alcohol and therefore help the state offset the costs associated with domestic and family violence, issues with policing, police resourcing and so forth, so that it is a deterrent. We know that takeaway alcohol is where the risky behaviours in terms of alcohol consumption are taking place, and it is preloading and binge drinking that we have issues with because these are deregulated spaces. There is a dramatic difference between the responsible sale of alcohol and the responsible service of alcohol, and we think this particular area, which is the firewood stoking this fire, needs to be addressed.

**Mr BROWN:** It would have to be a pretty big levy, because I think the social cost with regard to alcohol is \$36 billion across Australia.

**Mr Turner:** Considering that 80 per cent of alcohol is sold through takeaway outlets, you would probably be able to offset that pretty easily.

**Mr BROWN:** Reverend Mergard, I would be interested to know how many of your volunteers have been assaulted while volunteering in the Valley.

**Rev. Mergard:** In the last year we have had five incidents, all occasioning no bodily harm, so it was a push or a shove. One of my people this year has had blood spat in their eye, and that was because they were trying to clear the person's face of blood. That to me is a serious incident. They have had to go through tests for the last six months and they have come up negative, so that is a good result for me. The only time I have been severely injured was when I was scratched on the face by a girl who was trying to hit a policeman and I stood in the way. That is about as close as it gets. Our people do not get assaulted.

**Miss BARTON:** One of the things that really struck me was that you talked about the fact that you have been doing this for 10 years, so you clearly have a breadth of experience which realistically a lot of us simply will not have because we have not been at the coalface every Saturday night for the past 10 years. Obviously you are seeing 30,000 young people across Brisbane, and I have no doubt that, with your colleagues in other various chaplaincies, that is multiplied across the various entertainment precincts around Queensland. One of the things that really struck me about what you said was that we need to have stepping stones, and we need to build upon our experiences of the past and we cannot simply have a one-dimensional response. It concerns me that perhaps what we are seeing now is a one-dimensional response to what is perceived as the only problem that we are seeing.

In your opening statement you talked about seeing a significant decrease in issues in Brisbane's entertainment precincts over the past year. If we are going to be talking about stepping stones and how we might be able to build on what we already have in place, are there particular things that you have seen over the past 12 months that have been really good and that are better solutions that we need to make sure we protect? Instead of just forcing people out onto the street all at one time and trying to get 30,000 people into a taxi at 3 am, are there other ways to address culture around education with young people and perhaps how your services and other chaplaincies might be able to work with Liquor and Gaming in order to do that?

**Rev. Mergard:** I was prepared to answer that question, but then you started to add and add and I am not quite sure where to go now other than to say that I think one of the things that really has been working—and the parliament really needs to understand—is that when DSP started we were having monthly think tanks with police, ambulance, fire, venues, ourselves, the department of communities and OLGR all coming together to talk about the last month, to try to devise ways of being able to put it together. When the safe night out precinct came, that was developed even further. They are substantial in the process of changing culture because every one of those has a hand in the whole process. However, that is internal. It is looking inward. I think there is also a need for a non-aligned, free-thinking think tank to work for things external.

Often we talk about education, for instance. I love the fact that you have TV asking, 'What's your relationship with alcohol?' But that is meeting the 98 per cent of people who come out, have a good time and go home. It is not meeting the two per cent who are our problems. In fact, if you have 30,000 people coming out, we have 30 incidents in a night that are violence related. That is 0.001 per cent. That is a good score regardless. But what I think would be good is to have another body to be able to ask, 'How do we address culture? How do we address the youth culture? How do we address the culture that we're not getting to? They're not watching TV, so what are they listening to? Where are they at? How are we able to turn their thinking, their set of morality, their ethos, their world view around?'

There are so many people who come out now. It is really encouraging to watch kids go out and when a fight starts everybody steps in now to try to stop it themselves. There is such good things that are happening. The kids are doing it. You have two per cent who sit out there who are the problems, but then you have two per cent bad drivers and you have two per cent domestic violence as well. How do we address those guys? There is something that will be fantastic to address.

**CHAIR:** Reverend Mergard, unfortunately we are out of time. I thank you and Mr Turner for your attendance and for your submissions and interest in this hearing.

**Miss BARTON:** Mr Chair, given we started a minute or two late, I just wanted a quick follow-up question.

**CHAIR:** Sorry, but no. We are strict with time today, so if you did not enter into lengthy preambles in your question we may have got to two questions.

**DALLA, Ms Danielle, Senior Policy Officer, Public Health Association of Australia**

**GARDINER, Dr Paul, President, Queensland Branch, Public Health Association of Australia**

**NAJMAN, Professor Jake, Queensland Coalition for Action on Alcohol**

**ROSENGREN, Dr David, Chair, Queensland Faculty, Australasian College for Emergency Medicine**

**CHAIR:** Good morning. We will start with either Dr Gardiner or Ms Dalla.

**Dr Gardiner:** The Public Health Association of Australia is recognised as the principal non-government organisation for public health in Australia and works to promote the health and wellbeing of all Australians. PHAA seeks better population health outcomes based on prevention, the social determinants of health and equity principles. We are a national organisation comprising about 1,900 individual members and representing over 40 professional groups. The director-general of the World Health Organization, Dr Margaret Chan, has said that the alcohol industry has no role in formulating policies, which must be protected from distortion from commercial or vested interests. We urge the committee to consider this statement when hearing evidence from other stakeholders.

The issues surrounding violence are complex and multifactorial. The global campaign for violence prevention coordinated by the World Health Organization has identified key goals towards which efforts can be directed. These include identifying violence prevention as a health issue and building foundations for ongoing violence prevention efforts. The strategy promotes the implementation of evidence informed programs that focus on parenting, life skills, social norms, alcohol, the risks of firearm related deaths and injuries, and services for victims. We recognise the Queensland government's commitment in these areas, including the rollout of the Positive Parenting Program across the state and the acceptance of all the recommendations in the *Not now, not ever* report into domestic and family violence. We welcome the Queensland government's commitment and leadership in the area of tackling alcohol fuelled violence with this amendment bill and their objective to do this in an evidence based way.

While there are many issues at play here, there is strong evidence that we can make a meaningful difference to curbing a culture of violence and antisocial behaviour by changing drinking patterns. To that end, the evidence from Newcastle is strong that earlier closing hours not only reduced violence but also resulted in an increase in venues and that people simply go out earlier and even spend more. So we support this reduction of liquor trading hours. We also support the restrictions on late-night trading hours of off-licence premises which sell takeaway alcohol. This will have the likely benefit of not only reducing violence in public spaces, including bars and clubs, but also the domestic setting, including child physical abuse.

We support the proposed amendment bill with a few caveats. We recommend that the vision for a 10 pm close applies to all packaged liquor outlets with no exceptions, and we caution that exemptions should be minimised to ensure that the implementation of the changes is consistent with the objective of the amendment bill to tackle alcohol fuelled violence, particularly late at night, through an evidence based, multifaceted approach. Exemptions should only be considered on the basis of a strong rationale and where they do not weaken the controls on the availability of alcohol.

It is important that the Queensland government is taking a multifaceted approach. For example, we note the current advertising campaign 'What's your relationship with alcohol?'. In these areas we also encourage an evidence based approach as the evidence suggests that these types of campaigns have a negligible effect, particularly as they are up against an industry that is capable of spending many times more on continual and positive advertising. Australia has successfully and sustainably reduced traffic deaths through compulsory seatbelt and drink-driving legislation, the effects of smoking by packaging controls and limits on where you can smoke, and weapon related deaths through gun controls. We commend the Queensland government for their leadership in tackling alcohol fuelled violence and look forward to future public health initiatives to curb the multigenerational influence of violence. We encourage bipartisan support for the amendment bill and for it to be implemented in all areas of Queensland.

**Dr Rosengren:** I am going to speak from about 14 years worth of senior emergency medicine experience as a senior emergency physician at the Royal Brisbane and Women's Hospital and as the director of an emergency department for a number of years. Also, I am representing the College for Emergency Medicine, which is responsible for policy and advocacy across Australia and New Zealand.

I acknowledge that I am also the chair of the Queensland Clinical Senate, which represents all health professionals multidisciplinary across the state, and the comments that I would make today on behalf of the College for Emergency Medicine I am sure are endorsed and supported by clinicians statewide.

I do not think I will spend a lot of time telling you the fine details because I understand that a number of the members of the committee have had an opportunity to speak to some of my colleagues, both at the Gold Coast and North Queensland, as well as a number of you had the opportunity to visit the emergency department at the Royal Brisbane and Women's Hospital. I guess what I would like to do is just concentrate on a couple of key issues that I think are particularly relevant.

The first one that I think is very important is that there is an absolute lack of clear and definite data around many of the arguments that have been put forward for and against the legislation. It is close to impossible for us to truly quantify the impact of alcohol on the community simply because we do not have any mechanisms, certainly in the health system in Queensland, to actually record it or document it with any certainty. Therefore, to rely on arguments of absolute evidence for and against is significantly challenging, as is often the case with many of our public community health and safety initiatives that we have tackled as complex problems in the past. So I would raise that as an issue that I think needs to be addressed in the longer term but also one which the College for Emergency Medicine certainly acknowledges is clouding our ability to make clear arguments on this.

The second key point that I want to acknowledge is that the College for Emergency Medicine and health professionals certainly acknowledge fully that this legislation is not the solution to the alcohol or the violence problem that we are facing. It is what we would in the health system term affectionately as a 'wicked' problem in that it is a highly complex issue that passes across many, many layers of the community. One single implementation is never going to provide the 100 per cent solution, but, at the same time, I would challenge this committee and certainly the parliament on the fact that along many of these complex issues we have to start somewhere. My response to the questions and concerns around the fact that this is not going to be the 100 per cent solution is absolutely correct, and we would strongly encourage the committee and the parliament to consider additional and other strategies moving forward. I think the historical success around the tobacco solution is a good example of how, step by step and piece by piece, we are able to put together a successful public strategy around change.

The College for Emergency Medicine has a couple of concerns around the legislation in its current form. The issue around takeaway alcohol and restricting any new licences beyond 10 pm does seem to be counterintuitive. Why anyone needs to walk into a bottle shop and buy a slab of beer at 11.30 at night does beg some questioning and we would strongly support that the legislation be afflicted across time to all takeaway liquor outlets up until 10 pm. The other concern, which is quite contradictory, is that we are proposing legislation for the safety of our community and yet 12 times a year we will relax that concern about public safety and allow hotels to put in applications to extend their opening hours. That does not quite make sense from a community perspective.

I guess my final statement is that whenever we tackle these complex community problems there will always be objections, whether they be from industry or from nanny state objectors. This is clearly a significantly important strategic step to tackle a complex problem. A failure to take this forward and to really work on this would be fairly similar, in my mind, to a decision by the government to walk away from drink-driving legislation or seatbelt legislation or bike helmet legislation. There are lots of people who object to driving at 40 kilometres an hour in a school zone, but I cannot quite see that the parliament is going to walk away from its commitment to that. With a complex problem we have to start somewhere. This seems to be a great step.

**CHAIR:** Professor Najman?

**Prof. Najman:** I suppose one place I would like to begin is reflecting on 40 years of teaching and doing research in the public health field. In doing that research I have come across some really quite quaint ideas. I have come across clinicians who want to diagnose disease by looking at your astrological chart. I have come across doctors who treat patients with cancer by using apricot kernel extracts as the main treatment. There really is no limit to the fanciful thoughts that people are prepared to advance in order to improve health, and many of those people will find evidence of some sort that backs up their claim. No doubt, the alcohol industry does precisely that.

When we do research, we have to try to sift through the evidence that we have. We gather the research papers that have been published, usually in refereed journals. The reason we choose refereed journals is that peers have scrutinised them. A typical situation is that there might be 100 articles published on a particular topic and, of those 100 articles, five or 10 might meet strict research criteria for being of an adequate standard that should be looked at. That is the proportion we are looking at.

When people put evidence to you, the questions you need to ask are: how credible is that evidence and does it meet the consensus of researchers who will look at the research design? In that context, we have looked at the research worldwide that relates to the legislation that is being proposed through the parliament. I can identify, depending upon how strictly you apply those criteria, somewhere between 15 and 20 research papers around the world that have tested these propositions. These research papers come from Norway, the United Kingdom, Brazil, Australia and other countries. All of these research papers have, as a key element, that they looked at what happened with drinking and violence and injuries before legislation was changed; they had control groups where there were other areas that were not subject to the legislation or other times; and they then looked at the outcomes some time past the legislation being enacted.

We could look at every one of those studies and we would quibble about some aspects of each of those studies. But, in their totality, they present a picture that is clear and consistent across studies. Is it absolutely certain? From my research perspective, the answer is no. Is it highly probable and consistent with the available evidence? The answer is absolutely it is. There is a broad consensus across the world, not just in Australia, that there are three or four key factors that reduce the number of injuries, the number of deaths, the number of people disabled, the violence, the crime—there are a whole range of indicators. I do not like focusing just on injuries, because they are sometimes very much the tip of the negative-outcomes iceberg. The evidence indicates very consistently that when you increase the number of liquor outlets or you increase the number of hours the liquor outlets are operating, you increase the number of injuries, accidents and other negative outcomes, and when you reduce those you have a reduction in the consequences.

In addition to that, there is some evidence that early-morning trading is a particularly critical period. By the time you get to three, four or five in the morning, you are starting to deal with a highly intoxicated group of people who disproportionately contribute to the harmful outcomes. If we are going to start somewhere, then addressing those harmful outcomes that are disproportionately contributed by a small number of people in a relatively small number of outlets is a good place to start. I agree completely with my colleagues that this is a start and that what we need is a much more coherent, broad based policy response. The situation with alcohol in this country is serious. It needs to be addressed more broadly than this legislation. But this legislation will save lives, it will reduce injuries and violence, and it will make a number of positive contributions.

**CHAIR:** Thank you, Professor. Dr Rosengren, in your submission you are consistent with the previous witness, Mr Turner, who referenced that for every hour of reduced trading there is a 15 per cent to 20 per cent reduction in assaults. With your figure of a 20 per cent reduction in assaults, can you tell me where that research relates to, please?

**Dr Rosengren:** That refers to research that has been published. There are two references cited in the document. One is a Norwegian experience, which I presume is one of the articles that Professor Najman refers to. The other one was done locally out of Newcastle. I see that the author of that is one of the academics presenting to the committee on this afternoon's program.

**CHAIR:** How credible is this research?

**Dr Rosengren:** Again, I am a clinician, not an academic. Therefore, I will make some reference to Professor Najman's reference to these as included in that very small proportion of valid published literature that is out there. I can make reference to one piece of evidence that is very recent and not published. The Australian College for Emergency Medicine did an alcohol snapshot survey. There is some head-nodding, so you might have already heard this data. At 11 pm on Australia Day, 26 January, 87 per cent of all emergency departments in Australia and New Zealand recorded exactly the attendance in their emergency departments and the incidence of alcohol association with those attendances. I note that this is at 11 pm and long before the bus turns up with our intoxicated and agitated people. Across the country in Australia, the incidence was 17 per cent, which compared to half that figure across New Zealand, because of the public holiday and the extended partying time, I guess, of consumers.

Interestingly, and this data has not been released yet, in Queensland we had the second highest incidence of alcohol attendances in our emergency departments for the country at 19 per cent. The four largest emergency departments in our major metropolitan areas had an incidence of alcohol at 11 pm contributing to more than 30 per cent of their total activity in their emergency departments at that time. That does signify that we do have a significant burden on our health services due to alcohol. It is not just at three and four o'clock in the morning. Again, I acknowledge and accept that the legislation is not going to solve that problem at 11 pm. However, it does, I guess, represent the quantification of the problem we are dealing with and the importance of beginning to tackle it.

**CHAIR:** In your submission, consistent with some of the other submitters and evidence that the committee has received, rather than reference the definition of a 'lockout' you refer to a 'one-way door'. Why do you define that?

**Dr Rosengren:** I suspect that that relates to community perception and acceptability of the general public. A lockout seems to imply that you are refusing to allow people in. In order to generate public acceptance and understanding of this transitional change, we are not locking people out; we are just ensuring that if they leave a premises after that time they then cannot enter another one. I think it is a terminology for clarity of the community, reducing unnecessary public concern about an important public safety initiative.

**Mrs SMITH:** Dr Gardiner, in your submission you refer to data provided by Queensland Health between 2007 and 2015. Are we able to access that data and have it provided to the committee?

**Dr Gardiner:** Certainly I can get a copy and send it to the committee.

**Mrs SMITH:** Thank you. Does this data indicate the source of the incident or presentation?

**Dr Gardiner:** I can find that out for you.

**Mrs SMITH:** Thank you.

**Mr BROWN:** On the topic of data, Professor Najman, you say that the actual data is an underestimate of what is presented to emergency wards. Can you go a bit further? I know that the member for Mount Ommaney is interested in data. Do you believe that what is presented to emergency wards is underestimated?

**Dr Najman:** There would be no doubt about it. We have been conducting a major international study where we have looked at young people. We have looked at young people who are violent and nonviolent. We followed them up for 20 or 30 years. We looked at when they began drinking and how much they were drinking and then looked at their level of violence following the decision to drink varying quantities subsequent to their earlier behaviour. What we found, firstly, was that aggressive, violent people are more likely to drink heavily and to drink earlier but that, irrespective of that, once they start drinking their violence and aggression accelerates beyond their violence before they drank. Controlling for their level of violence pre-intoxication, their violent behaviour after they were drinking heavily and regularly accelerated substantially. We are not talking about one or two or three per cent; we are talking about 10 or 20 per cent of young people who drink heavily, who engage in violent, aggressive behaviour that involves theft, that involves hitting and abusing other people, that involves a wide variety of antisocial behaviours. Only a small proportion of those end up in emergency departments. Only a small proportion end up having contact with the police. Only a tiny proportion will end up having contact with my colleagues who provide services for those people. The vast majority of them go back to their communities, where many of them persist with their violent and aggressive behaviour.

Yes, we have a problem, but the problem is broad ranging and the whole argument about needing a multifaceted approach is absolutely correct. Really, picking the group who are the worst of all, who are the heaviest drinkers for the longest period, begins to make an inroad into that.

**Mr BROWN:** I suppose this is a question that can be fielded by anyone here. If I were to drink, let us say, half a carton of heavy beer, would I be any more intoxicated if I were in Cairns or Mount Isa, which are closer to the equator, than if I were in Brisbane?

**Dr Rosengren:** I do not think there is anything to suggest that there would be substantiation to that, no.

**Mr BROWN:** So it is the same statewide, for the same person drinking that same amount of alcohol?

**Dr Rosengren:** The effect of alcohol is individual dependent, it is sex dependent, it is age dependent, it is body mass index dependent and it is previous alcohol exposure dependent, but location is unlikely to have an impact on the effect.

**Dr ROWAN:** Thank you for all the submissions today. I will come to you first, Professor Najman. In relation to the current proposal where there is 2 am last drinks across the state or in the entertainment precincts with a 1 am lockout and 3 am last drinks, when you look at all of the evidence around the world in other jurisdictions, is there any basis for those specific hours or should those hours be different? Why not have a 3 am last drinks across the state—or 1 am? Why specifically those hours? From the literature that you look at, is there an evidence base for those current hours or should they be changed?

**Prof. Najman:** No, there is no evidence base for those hours. The evidence base is for hours. That is, the evidence indicates that for every extra hour you continue to make alcohol available—and, I should add, for very extra outlet as well, though the figures are a little different for outlets—you increase the level of harm. The figure varies between 10, 15 and 20 per cent depending on the study you look at.

If I had my way, we would be looking at 12 o'clock or 11 o'clock. We would be looking at a much earlier closing time. The earlier we can close, the greater the reduction in harm. Having said that, there is absolutely nothing specific—other than the recognition that as the hours accumulate into the morning the opportunity to become more heavily intoxicated increases—or magic about the hours as well.

**Dr ROWAN:** Given that this is, as you said before, a start, would you like to see those hours wound back over time or additional legislation?

**Prof. Najman:** I think from the point of view of the public health community we would be looking at trying to change the way people think about alcohol, and that means thinking about drinking early into the morning. From our point of view, we would want to persuade the community over time that these long hours are not good for their health, in the same way that we have managed to persuade many in the community that smoking is not a good idea for their health as well.

**Dr ROWAN:** Dr Rosengren, the submission from ACEM, at the top of page 2, references a number of alcohol related deaths and hospitalisations in 2010 and a 38 per cent increase to 2014-15. That seems a substantial increase over that five-year period. Does ACEM have a view as to why that is the case, particularly in Queensland? In relation to that data, is it in urban, rural or regional Queensland? Is there any additional information?

**Dr Rosengren:** I am not sure I can answer that question with the detail that it deserves. As I alluded to at the very start of my statement, I think the data that we have at all levels is grossly flawed and that there is a possibility that simple improvements in measuring might be one contributing factor.

I am certain anecdotally that increased population density and changes in entertainment precincts et cetera have contributed enormously. Brisbane is a very different city than it was five years ago. Intuitively, that would be my answer. At the moment there is no mechanism for us to truly record the number of people with alcohol affected illness or injury that present to a hospital for care. It is very hard to be certain.

**Dr ROWAN:** Is there any data in relation to licit and illicit drug related ED presentations and hospitals collected in Queensland, to give us a sense of comorbid alcohol and drug presentations through EDs and hospitals?

**Dr Rosengren:** There is no question that there is a direct relationship between alcohol and other illicit substances in many cases. Again, the data problem is the same. I am sure you are all, as members of parliament, aware of the challenges that emergency departments and emergency health services face. Data collection is low down on the list and we do not have any substantive electronic technology to record that.

Certainly—and I think Professor Najman has made reference to some of these issues—when you combine alcohol with other drugs you just potentiate and get the additive effect of them combined. That is one of the reasons I strongly support Professor Najman's assertions that this needs to develop significantly over time.

In response to your earlier question around whether we would wind back the hours, maybe, but the solution to this is much more than just hours. It comes down to the education of our young community. It comes down to an entire cultural change that requires legislative support around it, around our behaviours with alcohol and other drugs. I think that future initiatives need to broaden beyond just the hours that we open our facilities.

**Dr ROWAN:** My next question is to the Public Health Association. In relation to what we have heard from the College of Emergency Medicine about the data, given the burden of disease that not only Queensland faces but Australia faces and the cost to the community both directly and indirectly as a result of substance use and misuse, whether it be alcohol or illicit drugs, is it a failing of our health system that we are not collecting that sort of data? What should be done to guide good public policy decision-making for Queensland?

**Dr Gardiner:** Certainly good data is essential for guiding policy. Even though the data is flawed at the moment, I do not think we can discount it. It is what we have. It is better to make use of that than say that it is flawed so we will throw it out. I think the data collection in Australian hospitals, ambulances and things like that could be improved, but there are significant trends in the data over time to show that there are more problems with alcohol in both emergency departments and ambulances. If we could get better data it would be good, but the data we have is acceptable when showing the trends.

**Dr ROWAN:** Given that the attention span of some politicians can be quite short, if this was your one and only legislative chance to actually have the broad, multifaceted framework that we are talking about in relation to this issue, what would you like to see changed in the current legislation that is before us? Even though this is predominantly now focusing on supply reduction, if you had no other legislative opportunity to have things done in demand reduction and harm minimisation and the broad, multifaceted framework that we need to achieve a reduction in violence in our community, which is what everyone wants, what else would you like to see in this draft legislation?

**Dr Gardiner:** We would like to tackle issues around the advertising of alcohol, pricing and access.

**Ms PEASE:** Dr Rosengren, you talked about cultural change and how certain changes to legislation have impacted on our culture—for example, that the introduction of the wearing of seatbelts in 1975 saw a substantial reduction in road fatalities. Can you elaborate on your commentary regarding that?

**Dr Rosengren:** Unfortunately I was very young in 1975 so I do not have a personal—

**Ms PEASE:** That was just an example. Perhaps you could elaborate on other areas.

**Dr Rosengren:** Certainly. Whenever we try to introduce legislative frameworks around people's behaviour there will always be objection. If you can think back to the introduction of laws around drink driving you will remember that there was huge community furore about, 'How can they dictate what I can do and what I cannot?' When we look at it now, there is no way anybody would consider it would be remotely possible to consider walking away from that intervention. When the wearing of seatbelts was introduced there was a lot of protest about that. There were significant lobby groups that appealed for exemptions based on the need to get in and out of their car often or whatever reason they felt they were being unfairly victimised as a result of a community safety initiative.

Common sense needs to come into play. It does not matter whether you are a taxidriver and have to get out of your car often or whatever it might be, if you run into another vehicle at 100 kilometres an hour you might die. Therefore, we need to have the courage to recognise what is in the community's interest, in contrast to what is in an individual's interest. In the health system we face this challenge on a regular basis—what is an individual's best outcome versus what is a community best outcome. Certainly with the issue of alcohol we are talking about a community outcome so we need to have the courage to act along those lines.

**Prof. Najman:** I am older than my colleague so I do have a memory of that.

**Ms PEASE:** I remember it also.

**Prof. Najman:** The key paper was by Bill Haddon entitled 'On the escape of tigers' and was published in the *American Journal of Public Health*. In that paper he argued that there are 10 things we could do to save people's lives on the road as a result of motor vehicle collisions and not one of them required us to educate people or to talk to people or to have any contact with people. He basically argued that the solution to many public health problems was tied up in the way we engineer the world. Let us take an example. He said that most deaths in motor vehicle crashes occur because two vehicles travelling in the opposite direction to each other collide, so a solution to deaths on the road is to separate the two lines of traffic so that they cannot collide. We now see that on the highway where the two lines of traffic are separated.

The seatbelt was one example. The other part of the example was that many people who were killed were killed because when the cars collided they smashed their head on the steering wheel and on the front dashboard of the car. As a consequence, steering wheels were made softer and impact absorbing and so were the fronts of cars. The point of Haddon's work, which goes back to 1975, is that we can save many lives by reorganising the world around us without trying to reason or plead or change people directly. I think that is fundamental to the kinds of things we are arguing for—that observation that was many years ago.

**Miss BARTON:** Professor Najman, I want to follow up on an earlier answer you gave but also take some of what you just said. You talked about how we control things by engineering the world and changing people's behaviours. One of the things you referenced earlier, I think in response to a question from my colleague Dr Rowan, was the number of additional venues as well as the additional hours of service. I wonder whether you could comment on how we, if we restrict the trade of alcohol in a certain precinct, as a society manage the reengineering and the reorganisation such that people are drinking outside of precincts where there is no support—where no-one is managing how much they are drinking, there is no chaplaincy on-site and there are no nurses available. Instead, what we would have is a lot of young people drinking without supervision and drinking to excess. We have seen as a

result of what has occurred in Newcastle, and even over the weekend outside of entertainment precincts, problems are happening. How do we address that if we are reorganising people away from the entertainment precincts, where the support is?

**Prof. Najman:** Thank you very much for that question. That is a very interesting issue. There are two parts to the response. The first is that there are now a number of studies—I did not bring them with me, unfortunately, because I was not looking at that legislative initiative—around the world that show a direct relation between the proliferation of liquor outlets, the number of liquor outlets per head of population, and the level of harm that results. That is empirical evidence.

You then raised the question: are we not better off concentrating these people in a particular location? Think about what you are suggesting. I do not have the figures in front of me—it is not just Queensland; it is right through the country—but there has been a large increase in the number of liquor outlets in Australia. We have moved to small, local liquor outlets as opposed to what was there before. There has been a proliferation in the suburbs and regional areas. They are now everywhere. The more we have, the more harm we seem to have. Would you be suggesting that the public purse be then used to station these health workers in many of these remote locations, of which there are now tens of thousands throughout the state?

That brings me to the last point. To what extent should we be using public funds to reduce the harm created by a private industry? To what extent are we as taxpayers obliged to pay for doctors, for nurses, for public health people, for a whole range of community health workers, to do things because commercial enterprises want to proliferate and increase their hours of sale? My view is that that is a judgement you would have to make.

**Miss BARTON:** With due respect, Professor Najman, I was not referring to the proliferation of venues that sell alcohol within the precincts. I was simply seeking—because there is no doubt that you have a lot of experience in this area through your years of work, even if I might have a different point of view about how we respond to it—your view on the fact that there is clear evidence that if there is restricted trade within entertainment precincts people will take their consumption of alcohol elsewhere. I think it would be very irresponsible of us as a parliament to not consider how we respond to that and how we manage that.

I am not referring to the increased proliferation of venues that seek to sell alcohol in precincts. That is not, I do not think, what anyone is suggesting. But nowhere do I see a solution to how we manage the fact that young people will take their drinking elsewhere and there is no support for them. That is what I am seeking to get at. How do you, as someone who seeks to be an expert in this area, suggest that we manage that?

**Prof. Najman:** I would dispute your claim, if I may. When we reduce the opening hours there is no evidence I have been able to find—and this is a question of the scientific credibility of your evidence versus my evidence—that we displace the violence. We displace the drinking; I will not disagree with that, and I am not saying they drink as much. Yes, we displace some of the activity, but there is no evidence that we displace the actual violence and that the violence gets transferred to other places and it is just as serious a problem. If anything, the evidence suggests that it is a real reduction in violence that has been created, despite the fact that it is true that some of these people will then choose to drink elsewhere.

**Miss BARTON:** I am conscious of the time. I will simply finish by saying, Professor, that reports on the weekend would suggest that we are displacing the violence as well as the consumption of alcohol.

**Prof. Najman:** I am sorry. If I may, reports on the weekend are the kind of evidence—

**CHAIR:** Professor, you do not need to respond to that. That was not a question. We are out of time. Some of you have been given homework to produce material. We look forward to receiving that as soon as possible.

**Proceedings suspended from 11.01 am to 11.16 am**

**BRABAN, Mr Nick, Secretary, Our Nightlife Queensland**

**MAINI, Mr Robin, Chief Executive Officer, Valley Chamber of Commerce**

**McGUIRE, Mr Tom, President, Queensland Hotels Association**

**MEADE, Mr Trent, President, Fortitude Valley Safe Night Precinct Association; Director, Revelry Entertainment**

**MEHTA, Mr Sarosh, President, Caxton Street Precinct Liquor Accord**

**PULLOS, Mr Les, Director, Pullos Group**

**CHAIR:** Thank you all for attending. We would like each of you to make a five-minute opening statement. Please keep it to five minutes. Then there will be questions from the committee.

**Mr McGuire:** It is not my intention today to get into statistical data. I speak on behalf of the Queensland Hotels Association. We obviously have a vested interest in all of this. As I said, the main reason I am presenting today is probably not only from an industry perspective but from my own perspective in that I have been involved in the liquor industry my whole life.

In another three weeks I reach the grand old age of 63. I have lived in three hotels over the course of my life. One was across the road at South Bank, near the South Brisbane station. It was called the Manhattan. That was in the early sixties. In the late sixties I was at the Paddington and then in the early seventies I was at the Colmslie at Morningside. All of those hotels by today's standards had a pretty tough clientele.

Over the years I have witnessed a change in our clientele and in our society, because basically our customers reflect society. Over my period the attitude of the overwhelming majority of our customers has remained pretty well constant in that they want to enjoy themselves when they go out and behave in a responsible fashion. They go out without the intent to inflict injury or to abuse the principles which the community expects of them.

The greatest change that I have seen over the 50-plus years I have been involved in the industry is the change in the minority group that goes out at any time. This minority group have a tendency to act violently and have a complete disregard for law enforcement of any kind. Not only is this seen late at night; you can also see it through the course of the day, and you as parliamentarians would have seen it in your own electorates. The problem that I see—and I noticed the article in the *Courier-Mail* today with the Police Commissioner—is that we have a societal problem. Alcohol, sure, is part of it, but I do not think it is the total cause. We have to go down a pathway to try to change the minority in society who are just flagrantly disregarding community expectations.

The problem that I see about the proposed legislation that we are looking at today is that it has not looked at the most important factor—the perpetrator. There is nothing in there about him or her. If we are not going to hold to account people who cause immense social damage through violence, no matter what time of the day it occurs, we have big problems. As I was driving to my office this morning I was going by a school and I thought to myself, 'The students crossing the zebra crossing in front of me are our customers tomorrow.' If we do not get into their minds the social aspects that the community expects of them, we have lost it.

If education of our youth does not happen, I cannot see the point of a lot of the legislation that you are considering. The issue with the legislation, to me, in the way that it is drafted at the moment, is that it has to be uniform. The creation of boundaries, time differentials and different licence categories lessens the capacity to mobilise all of the stakeholders to get behind it to make it effective. The lack of uniformity will impede the legislation, because, in my history, any time there is the slightest loophole we will have bush lawyers coming in trying to find a way through to stop the intent of the legislation. It then goes to QCAT and we go through a journey through QCAT. It gets changed and we are back to square one again. To me, you have to make the legislation uniform.

It intrigues me that, if we are going to have geographical distinctions in regard to when you can and cannot drink—if you go down to the Redlands, it has a population 150,000 people; if you zoom down to Logan, probably 300,000 people; if you go up to Moreton, 400,000 people. Yet they have to have a different licensing regime to those in Brisbane or the Gold Coast. I cannot see the logic in that. If you make the laws uniform everywhere—from Birdsville all the way through—it will make your life a

lot easier, our industry will be happier and the population and the customers will be able to see some logic in it. They cannot see the logic in the fact that you can drink in one area until 3 am but in another area until 2 am and you cannot do this and you cannot do that. You are just making the whole deal too hard.

One of the things I notice in the legislation is the proposed banning of shots. That led to some discussion about the fact that we have whiskey bars, so now we will now make a different exemption for whiskey bars. Why go down that track? Look at it now. What is the definition of a whiskey bar? I do not think anybody knows. What makes whiskey different from vodka? What makes it different from rum? You will say, 'We will allow a vodka bar. We will allow a rum bar.' Then can you have a whiskey-rum bar? You have the bars out there already. You are trying to stop shots—good idea. The abolishment of the ability to serve them does not serve the purpose because now you have to simplify the serving of them.

Ladies and gentlemen, be careful what you wish for. I have great doubts about the lockout. I do not know where these kids are going to end up at one o'clock in the morning if they are not in licensed premises. Where are they going to go? I do not know. I do not think you all know. But I do have a suspicion that when they are locked out they are not going to hop in a cab for \$80 and go home and have a cup of cocoa and go to bed. They are going to go out to unpatrolled areas and get into trouble. The ones who are going to get into real trouble are the minority we are talking about.

In closing, I acknowledge and have no doubt that there are alcohol issues, but the way this legislation is addressing them seems to lay the responsibility for all violent acts solely at the feet of alcohol. I think that raises the question. Unfortunately, if the legislation goes through the way it is, I think it is going to fall far short of all of your expectations.

**Mr Braban:** It is convenient for those in favour of these interventions to cast aspersions on people like me—baseless claims saying things such as that we are driven by profits, that we irresponsibly serve liquor to young people and put them out on the street and then we expect the community to clean up the mess. What these people do not understand is where I come from and where a lot of my colleagues come from and the motivations of the people that I represent. We are the places where contemporary art and music are developed. We are the places where young people choose to spend their time together. We are the places where they choose to meet each other. We are the places who are not generally motivated by greed or avarice. We aim to present something developmental and support artists who push the boundaries.

It is also convenient for those people to cast aspersions on the motivations, qualities and social habits of young people. I guess it falls to me to stand up for our generation today. This age-old demonisation of young people is both illogical and unfounded. The youth are our future; they are not our downfall. Furthermore, those of us who choose to socialise late at night, who choose to work late at night and be part of the night simply do not deserve that demonization, either. Since the sixties, mainstream media has searched out and co-opted the most authentic things it could find in youth culture, whether that be the psychedelic culture, the anti-war culture, the blue jeans culture. Eventually, whether it be heavy metal, rap or electronica, they look for it and they market it back to us. But when something goes wrong they simply turn their backs. We have a generation that is at the moment abrogating all responsibility for where we are at as a culture, despite the fact that they have raised this generation where this malaise apparently resides. We seem to forget that violence has existed since the dawn of man and we are in a unique position to change thinking, not simply push this behaviour under the mat.

The businesses you close via these laws are not the ones that attract or engender the values that you seek to stamp out with the law's application, and therein lies the major issue I have with them. The types of people who would attack another without provocation do not attend underground nightclubs, do not attend cocktail bars, do not attend performance spaces committed to social and cultural capital. Yet these are the businesses you would see disappear as they are not predicated on profit. They struggle to pay their rent simply because they are committed to something grander, something intangible but something so very important for the growth of our culture and society. These are the places that would rather young people drink, dance and experience music and converse rather than stare into a poker machine. These are the venues that reject the macho culture. They reject consumption of substance and embrace consumption of joy. We can embrace the future, we can embrace young people and their culture, we can embrace a free and just society predicated on social cohesion, or we can allow the vandals to win and the barbarians to force us into submission.

Voltaire said in his essay on customs, 'The ancient Romans built their greatest masterpieces of architecture'—their amphitheatres—'for wild beasts to fight in.' We want to invest in our young people and in our precincts, I believe. It is their choice of space to pursue each other and pursue the arts they enjoy. Let us not fall into the same trap as the Romans. Let our masterpiece be our cities and let us expel the beasts from them.

The cultural impacts of trading-hours reductions will be significant, especially for contemporary music and youth culture. Whilst live music is often cited as part of the Valley we want to keep alive, electronic music has also become the other bastion of contemporary music which we would seek to protect. Trading-hours reductions will see the closure of certain venues and the truncation of trade and entertainment expenditure in others. Johnny Rotten from the Sex Pistols said when talking about their seminal first album—

You gotta bear in mind, the youth—and this is just in Britain alone—have nowhere to go in the evenings. They've closed all the social centers. There's not even a patch of grass to kick a ball on.

There is nothing I would like to see more than young people adjust their overconsumption of substance, but it needs to be understood that it is the businesses that I represent that are these modern social centres that Johnny was referring to. We need to invest in the experience that these can provide via the arts, via entertainment and via music. This investment should take the shape of changing culture so these businesses can continue to exist.

We should address consumption at the front end—that is, before people come out—otherwise we wind up with the wasteland spoken about in that quote, and we all know what the youth do at night when there is nothing to do. We can be better than this. We can aim higher. We can actually create something memorable and leave a legacy, or we can run and hide, give in to those who would terrorise our communities and diminish our social and cultural capital. Whilst Amsterdam hosts a night mayors conference in April with cities like Berlin and London attending, embracing their night-time culture, here in Brisbane in Queensland we are looking to emulate Newcastle in New South Wales. I do not know about you, but in terms of aspirations I know where I would want to be.

I worry that we are addressing the very small tip of an enormous iceberg. The incredible amount of focus and political capital being spent on this could be better applied to targeted measures at those who perpetrate crime and address the culture of substance use and abuse, for it is not the types of venues I represent that embody these. I also get scared when people are talking about engineering the world without the population knowing. This is a frightful idea for me in a modern liberal western democracy, and I hope we can have a better think about how we do this.

**Mr Meade:** Members of the committee, thank you for providing me with an opportunity to speak today. Along with my partners, we own and operate the GPO Hotel and The Met Brisbane. We have been operators in Fortitude Valley for nearly five years. We are highly engaged members of our community. I am the president of the Fortitude Valley SNP Association, and one of my business partners, Matt, is treasurer. I sit on the Fortitude Valley Safety Committee and management team of the Fortitude Valley and New Farm Local Engagement Committee, which is a subcommittee of the Valley Chamber of Commerce. I ensure that I regularly engage with every major stakeholder, public and private, on a regular basis. The outcomes and important messages from my collaboration and communication within these groups is passed on to all of our staff so that as a group we play an effective and leading role in our community.

I would like to see operators that do not engage and continually do the wrong thing have their licences either restricted or revoked immediately. No-one wants or benefits more from a safer precinct than the good operators. For the record, I would like the committee to note that our local member, Grace Grace, has not attended one safe night precinct meeting since being re-elected, despite our ongoing invitations. Attendance at our meetings is amongst the highest in this state which sees representation from groups such as council, Fortitude Valley police, liquor unit, emergency services, chaplains, fire and rescue, OLGR, taxis and of course the licensees.

In the past 12 months I have personally made visits to Cairns, Townsville, Airlie Beach, Gladstone, Surfers Paradise, Broadbeach, Toowoomba, Newtown and Kings Cross, where I met with licensees, the SNPs and accords, chambers of commerce, tourism bodies, councils, peak industry bodies, police and licensing officers, to name a few, in order to gain a greater understanding of the challenges, successes and losses that these areas are having. I can honestly tell you that Queensland is 10 years ahead of Newtown and Kings Cross in terms of our precinct management practices and engagement, and we should all be very proud of that.

Let me tell you some points about our group. As of 1 July 2015 our group paid \$50,696 in licensing fees which were originally introduced to fund police and emergency services in our precincts under the Blich government. I ask that this committee request an immediate review into what is

happening to these fees once they go into consolidated revenue. I am dumbfounded as to how the police are not receiving adequate funding for staffing and overtime payments. We have 40 CCTV cameras operating at the GPO. We have 45 CCTV cameras operating at The Met. In the last three financial years to date, we have paid \$1,170,000 to security providers to contract to our venues. This is for primarily two nights a week trade and an above-number requirement of guards. We employ our own paramedic to service our two venues each weekend at a cost to us of approximately \$20,000 per year. We are committed to the safety of our patrons.

We have not received police banning notices in approximately 12 months. The police told us at our last SNP meeting that it is too hard and that they are working on it. You can imagine our frustration, given we are the ones being thrown under the bus at the moment. At our own cost we introduced Scantek ID scanners at the GPO because we were having problems with roided up young men and OMCG members pre-VLAD. The scanners have been a great asset for this venue. At the time of my submission to this committee, our group has spent over \$3 million on local, interstate and international artists at our venues for the last three financial years to date. On average, we sell between three to four drinks per person each night of operation at our venues. That is it, and our financials prove it.

We do not advertise drink prices or sell cheap liquor. We facilitate RSA and best training to our staff regularly. Since the beginning we have had an open-door policy with police, the liquor unit, OLGR, and workplace health and safety officers. These groups, particularly the police and the liquor unit, visit our venues and management team on a weekly basis. If we or any other operator in the Valley was doing the wrong thing, then our licences would have been restricted or revoked by now, as this is permitted under the current legislation. Therefore, either every operator in our community is operating lawfully and responsibly or there is a lack of enforcement under the current legislation.

We are successful because we deliver a great product and generate a large volume of people through our doors, not because we supply cheap alcohol and load young people up full of booze and toss them out on the street. Where are we having difficulties? Our precinct is badly losing the battle of preloading which is evidenced by the most recent joint QPS-Griffith University study, which is the largest of its kind. The problems with preloading are only going to continue because the rules for on-premises venue versus retail liquor stores are not close to being on the same playing field. We are also badly losing the battle of drug consumption and we are badly losing the battle of the small number of violent people entering our precincts and being violent.

Australia has a history of excessive alcohol consumption which we continue to manage, but violence, utter disrespect and new levels of antisocial behaviour need to be addressed in individual parts. People have become desensitised to seeing or being involved with antisocial and violent behaviour, and that has to be addressed. Excessive drug consumption and the binge mentality are very real and have to be addressed. In regard to alcohol and violence, correlation does not imply causation.

Key mechanisms such as long-term education and enforcement are the keys to changing the culture of violence, antisocial behaviour and the binge consumption mentality, not prohibitive measures. Our businesses successfully market to the 18- to 30-year-old demographic on a daily basis. This committee needs to understand that the 18- to 30-year-old demographic is primarily concerned about the amount of money they have in their back pocket and their freedom to socialise and go out with their friends. Additionally, they are extremely responsive to peer-to-peer messaging and communication. We therefore need to specifically target and manipulate this demographic around these three components in particular, and we can see a generational change. We also need to support our police by overhauling our judicial system and weak magistrates, because our community has had enough of weak and ineffective sentencing. It simply sends the wrong message, and I can provide you with examples of all the abovementioned if required.

To end, I could not care less about Newcastle. I do not want our city to be anything like Newcastle. Together let us develop the Queensland solution for the tens of thousands of patrons entering our precincts and present that to the rest of the country as the gold standard for precinct management. I want us to take on Melbourne as the burgeoning 24/7 economy in this country, in line with the Brisbane City Council's new world city vision. People who enter our precincts and perpetrate heinous crimes such as unlawful striking, period, are the same as terrorists, in my opinion. They are now destroying our civil liberties, freedoms and our way of life. They are the scum of the earth and should be dealt with and ostracised in a similar vein to terrorists. If these draconian laws pass, these people win. If these draconian laws pass, we cannot go back because no politician will ever be brave enough to do so. Let us start working together to change our culture and prevent the scum from entering our precincts, but mainly let us take minority government politics and one man's agenda out of all of this and let Queensland stay open for business.

**Mr Mehta:** I am here today specifically to speak for Caxton Street. Undoubtedly you have heard some credible information by my colleagues, so I will limit my presentation to our precinct which, unlike some of the others that you might hear from today, is probably the smallest entertainment precinct in the Brisbane area because we are only 10 venues. I will limit my presentation to what impact these new laws may have.

Caxton Street venues were the first venues in Brisbane to be subject to a 3 am lockout. This was way before the Beattie government brought in the 2006 lockout so we know more than anybody else the impact of that particular lockout. Our main bone of contention is not only the damage it did commercially—because I know that does not play well with the community—but also the impact that it had on patron behaviour when our precinct was singled out due to alleged excessive call-outs to the police back in 2000. It did not in any way have any percentage of reduction in antisocial activity out on the street. Therefore, we have made it very clear today in our presentation that we are 100 per cent against any lockout at any given time if the bill passes.

Furthermore, we know from previous experience that, for example, in our case because we are not part of the safe night precinct board because we did not feel that it was working for us, we would then be forced into a 2 am across-the-board closure. What this will mean is that the people who plan to go out in the evenings will not just come in and leave but they will possibly not come into our area at all because they will go to other precincts where they can get in. We think it is totally unfair that a precinct should be pressured by legislation to take on a board where they have to sign up for a 3 am closure because we are opposed to the 1 am lockout.

Like our colleagues in the Valley and Mr Tom McGuire, whom you have just heard from, we are also 100 per cent against any form of antisocial activity. At the end of the day it is just bad business. Nobody that I know of in our industry would disagree with this, particularly in our area. Bear in mind that we are a free kick from one of the finest sports stadiums in Queensland, Suncorp Stadium. On 13 February it will be the first all-star game. A sellout is anticipated for that day which means that the majority of the 50,000 people or 45,000 people who go to that game will end up on our doorstep. This is a unique challenge that we face with every big event. Whilst it may seem that is great commercially, to our credit I can stand here hand on heart and say that we manage it well. Seldom will you ever hear of any antisocial activity after such large infusions of the public on our doorstep. That is because it can be done. We do not believe that the message going across, for example, on State of Origin night to our interstate fans, or for that matter when international games are held, that it is in Brisbane's or Queensland's best interests for people to have, as Mr McGuire alluded to, multiple layers of legislation where they can do one thing in one area of town at 2 am and something else at 3 am. You cannot get in here. This, to us, does not make any sense.

The bottom line is that, if we are here today to try to address the alleged issues that are happening, they are mostly happening in the public space. I must give credit to the member for Broadwater, who was spot on with what she said. For the sake of clarity, today I am celebrating 24 years in the industry at the coalface. I am not just some bureaucrat behind a desk. I am out there on the street night after night. There is not much I have not seen. As she rightfully said, what my experience has shown and that of my colleagues on our street is that the safest place for people to go out at night, especially if they are consuming alcohol—leave the drug issue aside for now—is inside licensed venues, where they are heavily controlled, where we have CCTV cameras, security, RSA marshals and, as in Trent's case, we too have an ID scanner of which I am a huge fan.

In conclusion, I would say: if you are going to go forward with this, give it some serious thought. Let us begin with educating our people. The commissioner today put it right: it is not so much plying them with alcohol; it is getting the message out to the small minority who spoil it for the majority. I thank you for your time and I hope the right decision will be made going forward.

**Mr Maini:** I am president and CEO of the Fortitude Valley Chamber of Commerce, and from the board's standpoint I am here with the viewpoint that obviously the changes to lockouts and the timings of operations are going to negatively impact the business community immensely. We understand that we must have a safe precinct in order to attract people to come and enjoy themselves and have fun, because if it were not a safe area then people would not come or let their kids come out to enjoy the evenings. At the same time, there has to be a balance, because culturally we know that this precinct is known for being open late for commerce and trade to happen.

More importantly, over the last two years many more other businesses related to licensed establishments have also opened up. There are many food establishments, fast-food or otherwise, where you can have late dinners, and those are all set to be affected as well. From our point of view,

we will not forget the fact that it will affect employment. It will affect business, of course, which will affect landlords and tenants. It is a fact that inevitably some businesses will shut down because they rely on the late trade. Our concern is that we need to look at the fact that we do not want to go backwards in an economy that is slowly growing again.

As you have heard many times today, it is very important that consumers are educated about what is acceptable behaviour and what is not. As can you tell from my accent, I am from abroad; I am from North America. I have spent quite a bit of time in the US, Canada and Europe and I have never before seen behaviour such as I have here, where it is acceptable to behave in a certain manner verbally on the street without any warnings or peer pressure from friends to quiet down. I always say that you do not go from having three or four drinks in a bar to getting into a physically violent act right away. There is a transition that goes from getting out on the streets and misbehaving and it being acceptable, to transitioning to a level of violent physical behaviour from verbal violence. My point is that if we can spend a bit more time educating people about what is unacceptable behaviour we should not have this problem, and we can enjoy the fact that it is a place where you can have fun and enjoy yourselves that everybody knows to come to, from not only around Australia but also overseas.

A 3 am closeout and at worst 1 am lockout is not only going to affect the food and licensed establishments and the transport companies; it is going to be mayhem on the streets as well. That in itself will now create a culture that it is unsafe to go to the Valley, and suddenly we are going to crush commerce even further. My fear is that if it is not safe or it is not right to go to the Valley because you cannot get a cab or everything is closed, then people then may start to think that it is not worth it to go there during the day or evenings to have dinner and then have a few drinks afterwards. Then what happens to the licensed establishments that just serve dinner until 10 pm or 11 pm, knowing that people will then go on to have drinks? That will affect the CBD as well, because we know that with all the restaurants in the CBD when you have finished your dinner you go into the Valley for a few drinks, especially if you are here for a conference et cetera. There will be a shockwave effect to commerce and trade when suddenly people realise that this is not a place to go and have fun because of a few individuals who spoil it for the rest, and that is a concern of ours.

Along with my colleagues and a lot of people who have done research, including the Queensland police, I believe that we need to not allow this to be acceptable behaviour on the streets. Whether it is verbal abuse, swearing, urinating or what have you, let's start enforcing them not to be able to do that so it does not escalate to violent behaviour afterwards, because that is where it comes from. You do not go straight from one drink to violence.

**Mr Pullos:** I have to admit that we did have a meeting about the order in which we were going to speak and that has been thrown out the window to some degree, but that is okay. I am going to just piece it together here.

My experience is in the hotel and hospitality industry in general. My people are a Greek family that came to Australia many, many years ago. They had a very famous little cafe in Goondiwindi and then we moved into the hotel industry. My family have been in the industry for 40 years, and at present I own and operate the Royal George Hotel in Fortitude Valley on the corner of Ann and Brunswick streets and, on the other corner, the Brunswick and Ann nightclub and Viva La Vodka, the little bar there. We also operate the Samford Valley Hotel and the Woodford Hotel, which are two very different hotels. They are very family based, with playgrounds and lots of lovely food. Both the Samford and the Woodford hotels are former winners of the best redeveloped hotels division in the QHA award for excellence. So we have some history, and I think we have some authority as to a fairly broad understanding of the issues.

There are some things that I would like to bring up that perhaps have not been touched upon as well as they could be, and of course the elephant in the room is preloading. There has been very little talk and very little willingness on the part of either side of parliament to address it. I have some thoughts as to why that might be, but let's talk about the Royal George and Brunswick and Ann in the centre of the Valley. On a Saturday night a rum and Coke costs \$9.70. I was in the bottle shop at Samford last Friday afternoon, when a young bloke who looked about 17 produced his ID. He was 18½. He bought a bottle of vodka and two bottles of Coke, which came to \$44. There are 37 nips in a 1,125 ml bottle of vodka, which is \$1.20 a drink, ladies and gentlemen. We charge \$9.70 versus \$1.20, and yet there has not been a word from you people about preloading. Is there a problem there? Why do you not want to take on Coles and Woolies? Please take them on. Are you concerned they might back up? That is obviously the problem. That is the first issue. Preloading desperately needs to be addressed. It is all over the world. Every study that has ever been done shows that preloading is a serious issue.

Secondly, the issue which is not spoken about and is all very quiet is the drugs thing, which is becoming more and more of a problem. People are taking speed and ice—and they have been doing it for a long time, but it is getting to be an epidemic because, at \$9.70 a drink, it is too expensive to do otherwise. If you take a pill that cost \$30 and you have three glasses of water, it is a cheap night out. You come along and use our venues like musical soup kitchens, and it is a very difficult situation. You can understand why these kids are preloading and taking drugs, so there needs to be something done there.

I want to talk about scanning, because that is the other issue that has been put in the too-hard basket and it is one of my pet subjects that I have been talking about for many years. There are different views about scanning, even within this group of people here. The civil libertarians amongst us would say that the privacy issue is a problem, but if you go to the video store and hand your card over, every time you have to produce your ID. Trading hours is the crux of the problem, and rather than confuse myself and forget something, let me just read from my submission. It states—

My strong preference is for there to be no change to the trading hours framework at all. I'm reliably informed by Police and others that there is a downward trend in relevant crime statistics which shows that the actions that have been taken to address liquor-related issues and violence over the last few years are bearing fruit.

In Fortitude Valley in particular, it is straightforward to chart the evolution of an active liquor accord, known as the Valley Alcohol Management Partnership (or VAMP) between about 2001 and 2004, and after that as the Valley Liquor Accord, formed in 2004 ...

I was the chairman from 2004 to 2009 and it has continued on. Nick has done a fantastic job since I was there. The VLA is a voluntary organisation. As one of the speakers said, despite that fact there has been less than active interest shown by the liquor licensing division and by our local members. Despite the fact that when they have been invited—and I will probably get into strife for saying this—invariably when liquor licensing division people turning up at our meetings and they are asked a question their stock standard answer is, 'I cannot answer that, I am sorry; I am not authorised to do so.' It is not good enough. They have not really ever been involved. They are there because they have to attend the meetings and it is breaking our hearts.

Please understand that we are not a bunch of cowboys. We are not a bunch of bad people. We are respectable businesspeople. I have five children and all of them except for the little ones, of course, who have not been in the hotel yet, have worked in the hotel in the middle of night. My second youngest girl, Rebecca, who is a fashion designer, was in London for three years making beautiful clothes and is now the managing director. She does a lovely job and is there in the middle of the night on Fridays and Saturdays until five o'clock in the morning. If it was dangerous I would not let her be there. My submission further states—

In the circumstances, it is difficult to discern a case for further change, as perhaps existed in other jurisdictions and areas such as central Sydney. In Queensland, I understand that our rates of relevant crime are well below other parts of Australia and continue to decline. Accordingly, leaving matters as they are at present is a well-justified alternative to the measures proposed in the bill.

This includes the retention of the present lock out at 3am.

There are some different views on that.

In my view the lock out performs a valuable function of assisting transport providers to move the crowds from the Fortitude Valley area by dividing up or staggering the departure of patrons. In my experience it takes about an hour for taxis—

By that time another crowd can be ready at four o'clock. I further state—

If trading hours must change, then an initial reduction of 1 hour would be a more than adequate step, with the 3am lock out retained. The effect of the initial reduction could then be examined before any further adjustments were contemplated.

Let me talk to you very quickly about scanning, which is a serious alternative to anything. If you do nothing else, put a proper scanning and banning regime in place. If it were necessary for all of the hotels and clubs that open after 12 o'clock at night to have scanners and if they were required to use them after 12 o'clock at night, we would very quickly be able to create a 'country town' dynamic in the city. If you are in Dalby and you play second row for the football team and you play up at the Royal Hotel on Saturday night and the superintendent comes along and says to all of the publicans, 'This young bloke is not going to get into any of the pubs for six months,' then everyone knows he is not going to get in there. The only way that we can create this country town dynamic is by making this scanning process mandatory, and I could go on and on.

The scanning needs to be a bit like the airport. You cannot scan everyone. Do they profile at the airport? Of course they do if someone is of Middle Eastern appearance. In our case, if there is a group of young blokes on a football trip from Townsville you are going to scan every one of them, but if there are three pretty girls in pretty dresses and Louis Vuitton handbags you are probably not going to scan

them but you are probably going to let them in. So scanning is an alternative. If all else fails and it all falls on its face, think about the scanning aspect because it is a very good alternative on Friday and Saturday nights.

**CHAIR:** Thank you, Mr Pullos. Mr Braban, I have some questions for you and in doing that I seek leave to table a document for you and get you to identify that. Is leave granted? Leave is granted. I will wait until you get a copy of that in front of you. It is a document that has your letterhead Our Nightlife Queensland. Can you identify that document as being a document from your organisation?

**Mr Braban:** Yes, that is correct.

**CHAIR:** Thank you. It purports to indicate that the Labor government has introduced legislation to do the following to your industry—and I will not go through the specifics that you have covered there.

**Mr Braban:** I apologise for the typo.

**CHAIR:** It purports to claim up to 80 venue closures across the state. Can you explain to the committee how you have modelled that in terms of what those 80 venues are?

**Mr Braban:** Yes, of course. A fair bit of data is collected in the hospitality industry by large consultancy firms that monitor sales and trends and the size of the market. Utilising those and surveying our membership, we have modelled that that is a potentiality for venues that walk along the bubble of existence almost—the small venues that pay their rent week to week and struggle to do so. In terms of an instant change in their trading conditions via trading hour reductions or lockouts which may well see a market rationalisation over a six- to 12-month period, they will not survive that period and that is where that number comes from.

**CHAIR:** Nevertheless, the bill does not talk about closing any venues; it talks about reducing the hours. So that is a direct result of the survey you got back from some of your organisations you represent?

**Mr Braban:** Yes, that is correct. That is based on business expectations and what we estimate will occur.

**CHAIR:** It goes on to indicate there will be major artist and DJ tour cancellations and also reduce gig opportunities for local musicians and DJ promoters. Can you explain that to me, please?

**Mr Braban:** Yes. I would refer you to a submission from APRA AMCOS where they have given you some fairly solid information about the reductions in expenditure on licensing fees seen in places around Sydney. Again, by surveying our members about their expenditure on entertainment and budgets and assigning what quantum of that expenditure would be on large touring international acts as well as smaller local independent performers, we are going to see a big reduction in that business expenditure which means reduced opportunities for musicians, artists and entertainers of all sorts across Queensland.

**CHAIR:** So you are suggesting major artists and DJs will go elsewhere?

**Mr Braban:** Businesses simply will not spend the money to bring them to Queensland. I could pass to Mr Meade if you like. He will give you an example of his business and the type of expenditure that they have on—

**CHAIR:** No, I will stick with you for the time being.

**Mr Braban:** Sure. Businesses like Trent's will not spend large amounts of money bringing big artists to Queensland because they simply cannot afford the investment because they are worried about actually making the money back.

**CHAIR:** Is that because of the change of lockout laws from three to five to one to three?

**Mr Braban:** That is correct.

**CHAIR:** Would you be familiar with a number of DJs who play in some of your establishments, and I will list them?

**Mr Braban:** I certainly would.

**CHAIR:** I refer to Stafford Brothers, Gareth Emery, Gregori Klosman, Kryder and Tom Staar.

**Mr Braban:** I know some of those names, yes.

**CHAIR:** All those play or are about to play in Dubai. Have you ever travelled to Dubai?

**Mr Braban:** Mr Chair, I have heard some of the evidence given around Dubai. I would challenge that assertion that Dubai is in any way a good comparison to the city of Brisbane. We are talking about a Western democracy in Australia compared to an Emirate in a Muslim country in the Middle East. I

know where you are going with the line of questioning. Yes, alcohol is not served at certain times in Dubai and they close earlier. You also have to understand that labour in Dubai is incredibly cheap. With regard for us to pay someone in our venues to keep the doors open and, say, service of liquor ceased at 3 am, that is a very expensive proposition when you cannot sell the product that makes you money. When we are talking about Dubai I would be very scared to know what the minimum wage and payments are there, but I know for a fact that hospitality workers do not earn a fair wage there and it will not allow businesses to remain open in Queensland considering the inputs that are required to staff our venues.

**CHAIR:** My questions are around those five DJs playing in Dubai in nightclubs. It is irrelevant of the liquor in my opinion. It is about their closure times being 2 am or 3 am, consistent with what the bill proposes. Those DJs still play there or are about to play there. I assume they are being paid similarly, if not greater, by those nightclubs than those they play in Fortitude Valley.

**Mr Braban:** But the issue, as I said earlier, is that businesses like ones in Fortitude Valley will not make the investment in a tour of that magnitude based on the business conditions that they see in front of them whereas a business owner in Dubai is making a different determination based on their local economics.

**CHAIR:** Okay. We will beg to disagree on that.

**Mrs SMITH:** Thank you so much for coming in and presenting to us. Mr Meade, I know you made comments with regard to the annual licensing fee you pay and I want to ask Mr Mehta how much he pays in annual licensing fees and how this has changed over the years and what that money entails.

**Mr Mehta:** Thank you, member for Mount Ommaney. I am glad you asked that, because had I had time I would have explained that but I will take the opportunity now that you have asked. In our specific case for my business, which I would say is between small to medium with a capacity of no more than 500 patrons, and that is assuming it is a good night—normally it is far less than that—this last year we paid in excess of \$22,000 just for the privilege of staying open for two nights a week until 5 am. Collectively, I would like to inform the committee that on our street—again I am speaking for Caxton Street—annually we pay in excess of \$100,000-plus every year. When Premier Bligh brought this in I was privileged to be at the table when she explained the reasoning behind this. The reasoning at that time, if memory serves me right, was that it was to service the night economy that we want to stay open for. Fair enough. Sceptical as we were, we copped it and from that day on we have been paying these fees. Speaking again for Caxton Street, I can tell you right now that we get nowhere near the kind of service of those dollars that we put in for. Any businessperson would ask, 'Hang on. If we're laying out all these funds allegedly for services to our precinct, where is it going?' We turn to the police, and I totally agree with my colleague Trent that some of those resources should go towards that.

I will give you a specific example. A couple of years ago when a certain very high level member of the judiciary moved in on my back door, believe it or not, I turned to him for help because all of my attempts to try to get police presence on Caxton Street just on weekends were turned away. I was told, 'Sorry, can't do it. Don't have the resources. Too busy elsewhere. No funds.' I turned to this particular member of the judiciary who, through his influence in the system, was able to get two police officers to rock up on weekends. Fantastic! We loved it. The licensees liked it. The eateries enjoyed it. But guess what? Two weeks down the track my fax machine comes on and there is an invoice from QPS for \$10,000. I damn near fell on the floor! I said, 'Wait a minute! Where did this come from?' The reason given was for the provision of special policing. This is our bone of contention. Collectively, consolidated revenue collects in excess of millions of dollars every year. Yes, some of it has gone to good use with some of the campaigns that the OLGR has put out, but, to be very honest with you, we do not believe that they are that effective. You see them on the back of buses, cabs and what have you, but has that made any impact? No. Our opinion is that some of it should go towards policing in precincts like ours which are designated as safe night precincts and entertainment precincts for example and also in education.

Again here I would like to point out that our area was one of the first ones to introduce harm minimisation for school leavers a couple of years ago, at no cost to the taxpayer. This is contrary to what you heard from the professor in the previous presentation as to why the public purse should have to fund this, so I respectfully disagree with that. We are not out there on a free ride on the public purse. We pay for these things in excess of millions of dollars per year through consolidated revenue. The question I have asked over and over again of every government over the years is: where is this money going? Nobody has been able to explain that to me.

**Mrs SMITH:** Thank you. The casinos are exempt from these laws. Have you got any views on that or if that is going to impact your business?

**Mr Meade:** I would have touched on the casinos if we did have time to discuss that. Once again, we are talking about a completely different playing field that we are going to be operating within. We are going to see a new casino which our group is 100 per cent behind, but not if we are on a different playing field. I think it was a breathtaking act of hypocrisy for the Minister for State Development to very quickly approve and exempt the casinos. In saying that, as I said, we are 100 per cent behind it but not if we are on a different playing field. We simply cannot compete against big business like the casino that will naturally put in nightclubs, late-night bars and late-night entertainment like they do in Marquee at the Star casino in Sydney. It is a perfect example. That is what will occur up here, and we simply cannot compete against that because they are going to be open for much longer with no restrictions.

**Mr Pullos:** I can only endorse Trent's comments. It is a different game, isn't it, really? It is a different game. We are there under these restrictions and these people are operating with special privileges. Of course they are going to put us at a disadvantage, and you cannot blame the kids from going there. You just cannot.

**Mr BROWN:** My question is to Mr McGuire. Firstly, I suppose I have to disclose that I got my first job in a McGuire's hotel as a glassie working in the nightclub there. My experience of the five years that I did that was that there was a definite slowdown between 2 and 3 am. I was given cleaning duties to basically clean up during that time when a lot of water was served. Do you see much of an effect in those suburban pubs by the reduction to 2 am?

**Mr McGuire:** We have always shut at three. Most of our pubs are out in the suburbs. There is one at Caxton Street, but it is really not in Caxton Street, is it, Sarosh? It is up the road. We have never gone into the 5 am space mainly because we are in the suburbs. Like all things, once you have a time period where there is a cessation, you start to wind down. So, yes, Don, you would be right that it does wind down. However, my problem that I still keep coming back to is that we are doing nothing about the perpetrator. In all the conversation today we are not getting to the perpetrator and that just beggars belief. With regard to all of this stuff about hours—two o'clock, three o'clock, half of this, half of that—mate, go for your life. You are going to have a great time, but you are not going to solve the problem.

**Mr BROWN:** My next question is to Mr Braban. I have personal experience from working in the industry and I have also travelled to about 20 different countries and have liked having a drink in those 20 different countries. Most bars in London have closing hours of 3 am. In Amsterdam, where I have also had a drink and a party, it is 3 am. There are party towns solely based on entertainment, such as Lagos, Portugal, where it is 1 am. All are able to have a good time and all places have a pumping economy. You talk about wanting to be like London and Amsterdam, yet they have those hours.

**Mr Braban:** I challenge that assertion. London has a 24-hour licensing regime and Amsterdam has a 24-hour licensing regime. Places such as Berlin and Amsterdam have nightclubs that trade almost 72 hours straight. I am not advocating that. I am saying that the short-term effect that these restrictions will cause within the industry will wipe out a generation of entrepreneurs who are committed to the type of venues that you talk about. They are committed to entertainment. They are committed not to consumption but to the offering of said entertainment. That is where we are really going to hurt. Markets will change over six, 12, 24 months. We all understand that. People may well come out earlier or they may not come out at all; we simply do not know. But in that time, we have damaged what we currently have. That is a really sad thing, I think, and it will set us back from becoming like cities such as Melbourne, Paris, London, Amsterdam.

**Mrs SMITH:** Mr Chair, I would like to ask for an extension of five minutes so we can thoroughly question the current witnesses.

**CHAIR:** We will go till 12.20.

**Miss BARTON:** Thank you very much, Mr Chair. Nick, one of the things that Tom particularly highlighted was the number of displaced people and not knowing how to manage it when people are leaving venues at one o'clock in the morning or three o'clock in the morning. One of the earlier witnesses—and I know you were here—was a chaplain who talked about there being, over the weekend, 30,000 people in the city's precinct. Firstly, I wanted to gauge from you whether or not that is an accurate representation and reflective generally of weekends throughout the year?

**Mr Braban:** Yes. Those are the estimations of those of us who work and manage our precincts. There has never been empirical data collected on the amount of people, but I think it is a fairly accurate statement.

**Miss BARTON:** Following on from what Tom said in terms of not knowing how to manage where those people go, one of the concerns that I have, perhaps as a younger member of the parliament having lived it only a few years ago, is how we manage people getting out of the entertainment precincts

and how we manage people getting out of the cities safely. Does your organisation have a view about how we manage that safely, because obviously everyone in the industry would agree that the safety of your consumers is absolutely paramount because without safe consumers you guys cannot continue? Do you have a view about how we manage that and whether or not actually having a lockout further impinges the safety of your consumers and patrons?

**Mr Braban:** Yes. The concern is when we bring the last drinks back two hours to 3 am, we are only talking about it affecting, if we take Fortitude Valley for example, about 15 venues. It is not a large amount of venues that will lose that right. However, what that does is it aligns those 15, which are the largest venues and nightclubs, with the 40 or 50 other venues that trade until three and two and one at different stages of the night. Our current licensing regime allows that determination to be made by the Commissioner of Liquor and Gaming. Deliberately constructed staggered closing is something that exists in our precincts. When we align those times, we are going to see a bigger displacement of people, without a doubt. Yes, we say venues can stay open after the last drinks, but it is simply not economical for venues to keep their doors open when they are only selling three to four drinks a night to a patron, which is a responsible amount, and then paying to keep the doors open when they are not able to sell anything. It is not realistic. It is poor business and poor economics if you think that is going to happen. When we put many, many more people on the streets, our exceptionally well run cab ranks and public transport systems simply will not be able to handle it. If we are serious about changing the goalposts in terms of trading hours and lockouts, we need to fix that problem, as well. Unfortunately, we have not seen any plans around that.

**Miss BARTON:** Thank you. Mr Meade, I have a question for you, in particular because of your role with the Safe Night Precinct Association. Again referencing evidence provided earlier to the committee, the chaplain said that one of the great things that we have seen with the safe night out legislation is the regular monthly meetings of all industry players, getting together to talk about what is happening in that individual precinct. As someone who lives in that space, could you talk about the impact that that has had on your industry and also, perhaps, the flexibility that that precinct has had to make determinations about what is right for that group of businesses?

**Mr Meade:** Yes, it is a great question. I will start by saying that I have been quite lucky to come into a community that has been well organised for a long period, starting back with the Bichel family, Pullos and Nick over a long period. The engagement and communication within those groups was already quite large and very well orchestrated. I have been able to come into a community where those relationships were formed. Being able to facilitate monthly meetings only enhances that experience for all of us. To be quite frank, I speak with Nick nearly every single day. I would speak with Les multiple times a week. Other board members such as members from the Katarzyna Group and also Lance Mergard, from whom you heard today, I see and speak to as a regular occurrence. I am pretty lucky to be in an environment where we do get along. We all have different vested interests, but we understand that for the greater good we have to collaborate and communicate and work together.

I made the suggestion in my opening remarks that we are 10 years ahead of places such as Sydney, specifically Kings Cross and Newtown, and that is the reason why. They are so disjointed and so disconnected, no-one is communicating with each other. Having the ability to do that up here has been unreal.

**CHAIR:** Thank you, Mr Meade. Unfortunately—

**Miss BARTON:** I have just one final question for Mr McGuire.

**CHAIR:** No, we are out of time. I thank representatives from the hospitality industry for your attendance and your submissions to the committee.

**FLOCKHART, Mr Doug, Chief Executive Officer, Clubs Queensland**

**CHAIR:** Good afternoon, Mr Flockhart. Welcome to the committee and I thank you for your submission and for attending here today. I encourage you to make a brief five-minute opening statement.

**Mr Flockhart:** Mr Chairman and members of the committee, thanks again for the opportunity to appear before you. It is genuinely and sincerely appreciated. I have no doubt that the committee has given our industry submission due consideration. Consequently, there is no benefit in utilising this time to reiterate it verbatim. Suffice to say that we have made our position clear on key proposals contained within this bill.

Alcohol fuelled violence is real and the community clubs are certainly not immune to it. I can, however, advise that our sector is at the lower end of the risk continuum, given its focus on safe and family-friendly environments, the membership model and our sign-in requirements, all of which act as significant deterrents to antisocial behaviour in venues. Antisocial behaviour and violence often present at the front door and in our streets, due largely to preloading and/or illicit substance abuse. An example of this is the recent and well publicised incident at the Carpentaria Buffalo Club, affectionately known as The Buffs Club, in Mount Isa, which sees The Buffs Club duty manager, Melissa Abdo, still incapacitated. Preloading and illicit substance abuse are significant contributors to the problem and it is our national drinking culture that must first be addressed via educational change before other ancillary strategies will take effect or make a notable difference.

I refer the committee to the 2015 anthropological report commissioned by Lion and conducted by Dr Anne Fox. Based on more than 20 years of research, the report challenges the predominant and outdated thinking on alcohol fuelled violence. The paper makes the key claim that it is the wider culture that determines the drinking behaviour and not the drinking itself. Dr Fox urges stakeholders to stop focusing on alcohol fuelled violence per se and instead concentrate on violence, its causes and triggers, including the beliefs that alcohol causes people to behave badly and bad behaviour can be blamed on alcohol. In her words—

Scapegoating alcohol as the sole cause of violence merely diverts attention from violent men and the maladaptive cultural norms that allow their behaviour to develop and proliferate.

I have a copy of Dr Fox's paper with me and would like to leave a copy with the committee for review.

**CHAIR:** Is leave granted? Leave is granted.

**Mr Flockhart:** Further, a statistic shared by a QPS officer recently is pertinent to your considerations, and that is that in his locality one in every 2.4 persons pulled over and subjected to an RBT is charged with being under the influence of an illicit substance. All stakeholders need to genuinely acknowledge that this is an alarming statistic and it is outside the control of Queensland's licensed premises. However, it is a significant contributor to the violence issue and broader issues confronting our communities generally.

Also of concern is the fact that over 70 per cent of all alcohol sold in Queensland is for off-premise consumption in unregulated environments. For off-premise consumption, either in a BYO venue or a residential location, liquor retailers offer consumers the opportunity to purchase a 750 ml bottle of wine, for example, for less than the cost of a bottle of water or my morning espresso coffee. Given this, I suggest that alcohol discounting is also a significant contributor to the issue of preloading for those who practice this activity, which seems to have eluded the debate and changes proposed in the legislation. The bill has received mixed responses, particularly as there is a fine line in terms of commercial viability and failure for many of Queensland's licensed hospitality providers. Every business venture is a bet on the future. It has been put out to the market in order to cater for both current and anticipated customer need. The changing of the goalposts legislatively in relation to trading hours has the potential to detrimentally challenge this formula, particularly given the volatility of today's 24/7 consumerism and its associated competitiveness. That will be the case until such time as the night economy adjusts to new trading conditions and venue offers, which I believe will be the case.

As a Queensland, a husband, a father and a representative of the community club sector, I acknowledge that together more must be done to minimise the abhorrent violence at all levels, inclusive of incidents that may be alcohol related. I also again highlight that preloading and illicit substance abuse are both significant contributors. It is Clubs Queensland's position that alcohol fuelled violence is primarily a direct manifestation of antisocial behaviour, risk taking and poor or uninformed choices, rather than just arising from the operation of licensed premises. To quote Dr Fox again—

It is not necessarily how much a society drinks that determines what problems it has, but what it believes alcohol does.

That is, acknowledge both positive and negative effects of alcohol. Patron safety has a direct impact on the reputation of all aspects of our members' operations and the hospitality offerings associated with the night economy generally. We all should, however, not lose sight of commercial realities around the profitable survival of hospitality in Queensland, particularly given its lifestyle and entertainment appeal.

In reality the fix for this issue, as we have heard consistently throughout the morning, is not, unfortunately, as simple as a reduction in trading hours. I acknowledge, however, that something has to be done. If this legislative reform is to achieve the positive changes required then it must be considered in a bipartisan way by the parliament and not be used for political point scoring. Additionally, all stakeholders have to contribute and work towards positive change in conjunction with the government and regulator. This will require some compromise on the industry's part for a long-term beneficial outcome.

All solutions and offers are inevitably built on, adapted, extended, combined, remixed and redeployed from offerings that already exist. The goal, however, should be one of resolving competing tensions to set new consumer expectations that are respectful of personal safety whilst diluting the experience or choice of available options.

As is often the case, the inappropriate and ill-considered behaviour of a few unfortunately spoils the freedom of choice for the majority given the unacceptable behaviour and violence regularly initiated on our streets. Queensland's community clubs support safe communities and a safe night out for all Queenslanders and those who visit our state which is why the government's bill has our support. Community clubs have zero tolerance for violence and antisocial behaviour. Again, I thank the committee for its consideration. I am happy to take questions.

**Dr ROWAN:** Thank you, Mr Flockhart, for your submission on behalf of Clubs Queensland. I just wanted to pick up on the issue of this minority group that we have heard about in relation to antisocial behaviour or risk taking, not only in relation to alcohol fuelled violence but also the role of illicit drugs that you have alluded to and some of our other presenters this morning have talked about as well.

There seems to be no or very limited data, as far as our health system and the collection of that is concerned, on the role of illicit drugs or synthetic drugs—synthetic cannabinoids, hallucinogens or things like methylenedioxymethamphetamine, ecstasy, or crystalline methamphetamine—involved in those instances. Can I further examine what your views are around the involvement of illicit drugs and the role that they are having in these violence fuelled instances that are occurring as far as the industry is concerned?

**Mr Flockhart:** I, like most, see a lot of the material in the media and what is shared by way of what happens in communities across the state as a consequence of alleged drug abuse or illicit substance abuse. Interestingly, I will share feedback from member clubs of ours throughout the state which refer to what they call ping-pong. So when someone presents at the front door security often identify them as either being intoxicated via visual signs or ping-pong if they deem them to be under a substance.

We are seeing regularly the unknowns that come with drug use, whether that be extreme strength or irrational behaviour that could not be anticipated. That seems to be more and more regular. I am pleased by the statistic that I shared with you that one in 2.4 individuals at the RBT mentioned were then charged with substance abuse on the basis that it seems to be sleeping giant in the room. The research that was done by Griffith uni, in conjunction with the QPS, which is quite good research in terms of the quantum of preloading, talks, from memory, about on average for those who were engaged in the research females having five standard drinks before they head out and males having six standard drinks with some 20 per cent of those who preload also enjoying an illicit substance before they embark on their evening. I hope that has answered the question.

**Dr ROWAN:** I guess what I am trying to clarify is in the experience of the members of Clubs Queensland, and you used the term ping-pong, with violence fuelled episodes whether there are substances involved beyond alcohol—that is alcohol with the combination of illicit or synthetic drugs being the vast majority of instances? We do not really have data at the moment on that, as we heard earlier today. Do you have a sense with the instances that they are having to be involved with—security and other people at those clubs who are intervening—whether they are truly alcohol fuelled violence instances alone or whether the vast majority are alcohol combined with other substances?

**Mr Flockhart:** I would not say it is the vast majority, but statistically if you had to pick a mark, probably going back to the Griffith research, you might say that 20 per cent of incidences that are presenting have other connotations attached to them.

**Ms PEASE:** Thank you very much for coming in today and for tabling the report you did today. Can you provide the committee with some information as to who commissioned the report?

**Mr Flockhart:** That was commissioned by Lion Nathan, the national brewer—XXXX and so on.

**Ms PEASE:** So it has actually been funded by someone from within the alcohol industry?

**Mr Flockhart:** That is correct, yes.

**Ms PEASE:** Do you have any idea how much was spent on commissioning that report, Mr Flockhart?

**Mr Flockhart:** No, I do not, I am sorry.

**Ms PEASE:** I have some issues around the credibility of a report that has actually been commissioned by someone within the industry. We have heard much this morning about data and statistics. Can you perhaps give some commentary, given that the report has been commissioned and given the extensiveness of the report, on the credibility of the report? That is my concern.

**Mr Flockhart:** Lion did not present me with that information. We were sourcing information as part of our research internally with regard to this problem that we are all facing, frankly. I came across it by chance and objectively read it with a clean set of eyes. I was interested in the commentary in that it provided another perspective beyond just alcohol in that it is talking about the drinking culture.

It is very important in terms of the parliament's consideration and your committee's consideration and given that the government is intending to look at and has looked at education in the community in terms of alcohol related violence and alcohol generally. I am not an expert in it. I am interested in finding experts who can add to the cultural compost of whatever we derive at the end of the day that assists with educating the community more broadly.

In terms of bias of the report, it was not presented to me. I found it. I found the findings in the report interesting, as a social observer and someone in the industry, and worthy of consideration.

**Ms PEASE:** My concern is the independence of the report given, I reiterate, that it was commissioned by, done by and paid for by an alcohol industry provider.

**Miss BARTON:** Can I just say that it is a shame that Dr Fox is not being given an opportunity to respond to aspersions that are being made with respect to her research. I just wanted to ask a question in terms of the club industry and what happens with your trade. Could you detail how gaming impacts the trade of clubs and the role of gaming in terms of the patronage of clubs after midnight?

**Mr Flockhart:** The community club sector has about 1,300 licensed community clubs across the state. Of that 1,300 approximately 500 have gaming machines. Of that 500 approximately 72 per cent have fewer than 40 gaming machines. It is a quite diverse industry right across the state. In terms of why people go to a community club, the predominant reason—60 per cent of the decision-making—is to enjoy a meal, about 14 per cent is to enjoy a drink with a friend and it continues down to five per cent being with the primary intention to play a poker machine.

By way of history, the moratorium that was imposed on the hospitality industry generally for applications for post-midnight trading, which was lifted by the LNP government, saw the opportunity for hospitality to apply for extended trading hours. In terms of the impact of those applications for those that did not have the opportunity in the past, we have seen clubs by way of example that might have been able to trade only to midnight now have their licences extended to 3 am. We have seen growth in those businesses right across-the-board by way of people being able to enjoy the facility in their local community in preference to recognising that the venue might well close at midnight and they would have to leave earlier to get to where they were going. We have certainly seen some growth in gaming in the wee small hours of the morning, with predominantly those customers drinking coffee more so than alcohol. It tends to be more of a mature age patron who is enjoying the entertainment that comes with gaming and drinking coffee.

**Miss BARTON:** You have indicated in the past your support for decoupling a restriction on trading hours from gaming and the consumption of liquor. Has Clubs Queensland done any modelling perhaps on what the impact might be of a restriction on someone's ability to use a poker machine between, say, midnight and 2 am if someone's ability to use a poker machine was cut off at midnight?

**Mr Flockhart:** The short answer is that, no, we have done no modelling. However, feedback from the industry that sees the extended traded hours sees growth in gaming. I will add to that that there is the impending Queens Wharf development in Brisbane, a multibillion dollar development. The casino has been a drawcard to date anyway. If you are someone who is interested in gambling as your form of entertainment we have seen significant leakage early in the evening into the casino because they can gamble there well into the morning. The extended hours availed by way of the entertainment

offer of gambling has been positive by way of allowing people to remain in their own community in preference to transiting into the casino, the funds that they invest into the gambling and the surpluses derived by the venue from that stay in the local communities, which is beneficial.

**Miss BARTON:** With respect to the increased patronage of gaming between midnight and 2 am, is Clubs Queensland considering doing anything to address the impact that that might have on the community—that is, the impact of the increased level of gaming in those wee hours of the morning?

**Mr Flockhart:** We are not seeing a negative impact in the community. If you are intent on gambling or intent on anything as an individual it is going to happen whether it is available to you in your local community or somewhere else. Frankly, the gambling industry is a mature industry with responsible gambling initiatives that are well enacted over many years via bipartisan approaches that are world class and proven.

**Miss BARTON:** So you do not see the need to put in draconian measures to restrict a small percentage of people who might be behaving or acting inappropriately whilst using a gaming machine in the wee hours of the morning?

**Mr Flockhart:** To be honest, we do not have people inappropriately using a gaming machine, that I have evidence of, in the wee small hours of the morning.

**Miss BARTON:** There may well be some who would be gambling beyond their means and spending money that they cannot afford. In those circumstances you do not believe that it might be appropriate for that small percentage of people, whether it is 0.1 per cent or 0.5 per cent, to provide restrictions on their ability to game between midnight and 2 am?

**Mr Flockhart:** People with problem gambling issues, that as an industry we all work hard to minimise, as I mentioned, will find a way to gamble if it is not available to them predominantly in a physical sense close by. Online gambling would be an example of that. Today 2½ thousand-odd casinos are available to us right now on our iPhones and iPads and computers to be able to gamble on, with inducements and no responsible gambling initiatives and so on. Therefore, people at risk are better controlled or better observed in their community environment, would be my suggestion in preference to otherwise.

**Miss BARTON:** If you do not believe it is appropriate to impose restrictions on people conducting the lawful behaviour of gaming, why, then, do you think it is appropriate to impose restrictions on the vast majority of lawful people who are consuming a legal product such as alcohol? Why do you think it is therefore appropriate to impose restrictions on those patrons if you are not going to impose restrictions on other patrons who might, where there is only a small percentage of people, be behaving inappropriately? Why is it appropriate to restrict one group of patrons and not the other?

**Mr Flockhart:** With respect, the trading hours that are being proposed restrict everyone. They are all combined, whether you are a gaming patron or someone enjoying entertainment or a cold beer. The proposed legislation with cessation of service restricts everyone. If you want to continue gambling on a poker machine post the cessation of service if the venue is licensed to do so, respectfully again, we have seen no-one aggressively causing violence within venues or out on the street after they have been enjoying a coffee playing a poker machine.

**Miss BARTON:** I am simply seeking to highlight the hypocrisy.

**CHAIR:** No, that is the end. Mr Flockhart, thank you for your attendance here today.

**WILSON, Ms Penny, Chief Executive Officer, RSL and Services Clubs Association Queensland Inc.**

**CHAIR:** We have very limited time. I would encourage you to make a brief opening statement and then we will have some questions from the committee.

**Ms Wilson:** Thank you, Mr Chairman, and the committee for allowing me to speak to you today. I represent RSL and services clubs, which range in size from a couple of hundred members to the largest club in Queensland with over 90,000 members. Most of my association's clubs fall into the medium to large club bracket. These clubs are not-for-profit and are required by law to redistribute surplus funds back into the community. They do this primarily through their support of returned service men and women, by their financial and in-kind support of their sub-branches and more broadly through their donations to other charities and community groups. They take their responsibilities very seriously particularly in regard to the responsible service of alcohol and the responsible service of gaming.

Because of their structure, which includes a set of strict rules, they are able to exclude members and visitors for a period of months or years or even permanent exclusion. Consequently, the incidents of bad behaviour are few and far between in our members' venues as members and visitors understand that penalties could result in permanent exclusion from club premises.

If Commonwealth, state or local governments introduce changes that impact adversely on them, unfortunately this also impacts adversely on the charities and community groups they support. We had an example of this most recently when the previous government introduced an additional tax on large clubs based on gaming revenue. This resulted in some large clubs losing up to \$250,000 off their bottom line. They tried their best to ameliorate the impact on community groups they supported, but obviously they still had to meet their overheads so there was definitely some collateral damage done to the support they were able to give community groups and charities.

We are very keen to make sure that any proposed legislation has minimal impact on our members. A number of our members that currently trade until 3 am will have their hours cut back to 2 am under the proposed legislation unless they fall into a safe night precinct. However, there are only a few clubs to my knowledge that fall into that category. The breaking of the nexus between liquor trading hours and gaming trading hours might present an opportunity to minimise the impact of the reduced liquor trading hours to 2 am. Although this is not within the purview of this legislation, it could provide an avenue to commence trading earlier—say, from 9 am instead of 10 am—without the sale of alcohol, and we would like to pursue this with the government at an appropriate time. Earlier trading will better suit our older clientele who tend to rise early and those members who are shiftworkers.

I would also like to refer to the sale of alcohol for off-premises consumption which, as I stated in our submission, is by far where the greatest volume of alcohol is sold. Unlike licensed premises, there is no restriction on advertising alcoholic beverages for liquor barns and bottle shops. Through their buying power, these outlets sell alcoholic products below the prices that our services clubs receive from their distributors. Many of the submissions have referred to preloading by the younger generation who seem to be the demographic most involved in drunken assaults. We respectfully suggest that the government should consider regulating the advertising of alcohol by liquor barns and bottle shops as part of tackling this problem.

I know there are programs developed by psychologists overseas with grants from governments providing education aimed at stopping violence. They are basically primary prevention programs that operate from the perspective that everyone has a role to play in ending violence. This association also supports the concept of public education programs that go further than the current One Punch Can Kill campaign, as good as it is, to bring into focus the responsibility that all members of the public have in respecting others and not engaging in antisocial behaviour.

In conclusion, in dealing with violence, the government also needs to carry out some research into what the consumption of illicit drugs contributes to the incidence of violence—and I know we have heard quite a lot of other speakers today speak about this. We have heard reports of police charging increasing numbers of people for driving under the influence of illicit drugs, so it would not be surprising to find that drugs are impacting on the increasing violence in our society. We can no longer close our eyes to this problem and think it will go away; it will not. Without proper research though, we can continue to bury our heads in the sand and allow the problem to become unmanageable or insurmountable.

I would also like to comment in relation to something that a previous speaker said concerning dealing with the actual perpetrators. I endorse those comments very strongly. If we are not going to tackle the people who are at fault in a really meaningful way, then I think we are wasting our time, quite frankly. Thank you very much for the opportunity to speak to you today, and I am happy to answer questions.

**CHAIR:** Thank you, Ms Wilson. In your submission you refer to a number of clubs that trade to 3 am. If you cannot provide the evidence to the committee today on the number of those, you can provide that on notice.

**Ms Wilson:** Yes.

**CHAIR:** Also in your submission you refer to the proposed cutback in hours to 2 am. Are you familiar that the bill does not propose a close of business but last drinks at 2 am?

**Ms Wilson:** Yes, I am aware of that. I am also of the understanding that on application a venue can ask to continue beyond 2 am as long as they are not serving alcohol. Some of our members might avail themselves of that now that there is a disconnect between gaming and liquor.

**CHAIR:** Are you able to provide to the committee the clientele in terms of age demographics on average that go into RSLs?

**Ms Wilson:** I cannot do that off the top of my head, I am afraid. Anecdotally, probably the majority of people who would patronise our clubs would be in the more mature bracket—40 to 60 plus—although some of the more trendy, if I can put it that way, RSLs probably do attract a younger clientele as well.

**Dr ROWAN:** Thank you, Ms Wilson, for your submission on behalf of the RSL and other services clubs in Queensland. In the conclusion of your submission you allude to the fact that potentially combining the Tackling Alcohol-Fuelled Violence Legislation Amendment Bill with any potential changes to the VLAD laws may have implications for the Gold Coast. Could you outline more what you mean by that?

**Ms Wilson:** Yes. This came about through a comment that was apparently made. I was not there to witness it and I had to couch that in careful language because I did not want to say that I knew about it personally because I do not. I was told on reliable evidence that this was raised at a liquor accord meeting on the Gold Coast. Somebody obviously had some information that some of the bikie gangs were about to jump on some sort of bandwagon and take people away from areas where there were restrictions on trading hours to party houses or party venues. If that did eventuate, as I said in my submission, that would be of grave concern because obviously no controls are likely to cause problems in the suburbs. I thought I would raise it with you anyway.

**Dr ROWAN:** As well as being in your submission, we have heard earlier today that some seem to be seeking a whole-of-government legislative framework with a level of complexity to it, looking at things like alcohol marketing or ending that to young people, investing in school and community education programs, preferentially taxing low-alcohol products, reviewing the density of liquor outlets, and ensuring strong sentencing and dealing with the perpetrators of such violence. In your view, would those types of things be useful and are there other things that you think could be implemented in relation to a whole-of-government legislative framework?

**Ms Wilson:** As I mentioned before, I think the advertising regime around alcohol in bottle shops and liquor barns is something that should definitely be looked at. I was not privy to the earlier statement, so I am not quite sure what was involved there. We would be very supportive of any measures that are taken that are going to address this very important issue. We are certainly concerned, as anybody would be, in relation to violence that is taking place in our community, even though I do not believe that the RSL clubs themselves are a problem area. But I think we all have a responsibility and we need to all do our bit to try to address it.

**Ms PEASE:** Thank you for coming in, Ms Wilson. We have a great services club in Wynnum Manly, where I am from. It is a great club. You mentioned that one of your clubs has a membership of 90,000. Whereabouts is that club?

**Ms Wilson:** That is the Greenbank RSL.

**Ms PEASE:** What sorts of services do they run out of that club? Do they have a nightclub or a restaurant?

**Ms Wilson:** I think they have multiple restaurants. I do not think they have a nightclub. I would have to check on that. I think they may have had one. I know that one of our members did have one but decided that was not the clientele they wanted in their premises. They have a vast array of different services at Greenbank—coffee shops, bars, gaming obviously and various activities going on there.

**Ms PEASE:** I have seen that the RSL has a great club in Cairns.

**Ms Wilson:** Yes, it is. It is lovely.

**Ms PEASE:** It is in a great location. Are you aware of any issues or problems that they have?

**Ms Wilson:** I am not aware of any at the moment, no.

**Ms PEASE:** Do you know what time they trade till?

**Ms Wilson:** I am not absolutely sure, but I would say till midnight, probably.

**Mr BROWN:** Does your association, when putting submissions in to these types of inquiries, tend to go off the rumour mill, albeit rumour mill allegations? How will people get out to these house parties with the motorcycle gangs? Will they be on the back of a motorcycle and get a free helmet from the bikies?

**Ms Wilson:** I must admit that I was a little reticent about putting that into a submission. I have never put a rumour into a submission before, but I was trying to be helpful rather than not. It was something that really concerned me when I heard it, and it had been raised in an official meeting of the liquor accord. That is why I put it in there.

**CHAIR:** Thank you, Ms Wilson, for your attendance before the committee today.

**Proceedings suspended from 1.00 pm to 1.31 pm**

**CADDIE, Ms Sharron, Assistant Secretary, United Voice**

**GILBERT, Mr James, Occupational Health and Safety Officer, Queensland Nurses' Union**

**MOHLE, Ms Beth, Secretary, Queensland Nurses' Union**

**NELSON, Mr Torrin, Ambulance State Councillor, United Voice**

**OLSSON, Ms Lita, Clinical Nurse Consultant, Royal Brisbane and Women's Hospital**

**CHAIR:** Good afternoon. I welcome the representatives from the Queensland Nurses' Union and United Voice. Ms Mohle, we would like you to make a brief opening statement for about five minutes, followed by Ms Caddie.

**Ms Mohle:** Thank you for the opportunity to present to this hearing today. I am the state secretary of the Queensland Nurses' Union. As you know, appearing with me today is QNU health and safety officer James Gilbert and clinical nurse consultant from the Royal Brisbane and Women's Hospital emergency department, Lita Olsson. I wish to make some brief opening remarks that highlight recent research into the effects of the changes to licensing laws and our particular concern for members who are prominent amongst health workers in the front line of alcohol related violence.

Nurses and midwives are exposed to alcohol related violence in two ways: they treat those who are affected by excessive alcohol consumption or who are the victims of alcohol related violence and abuse. In turn, they can themselves become the target of the intoxicated individuals whom they seek to help. Nurses comprise the largest professional group in the health workforce and as an occupational group they have the highest exposure to non-fatal violence and also report the highest levels of violence among healthcare workers. This is of real concern because individual nurses may not only sustain physical injury but there is potential for long-term risks including psychological trauma and symptoms of post-traumatic stress disorder.

Exposure to violence and aggression should not be accepted as the normal part of a nurse's or midwife's job, and the cost is not limited to the economic impact. Rather, it extends beyond the physical and/or psychological harm inflicted on an individual. Families, friends, colleagues and organisations are all impacted in some way. We ask the committee to consider the strong evidence we have provided in our submission to demonstrate that reducing the number of alcohol related assaults in late-night entertainment precincts reduces the number of emergency department presentations. We need only look to recent studies from New South Wales to know that restricting the opening hours of licensed venues in entertainment precincts will reduce alcohol related violence.

In 2015 researchers analysed data from St Vincent's Hospital, the major trauma and teaching hospital in the Sydney CBD entertainment precinct. They found a significant reduction in the number of these presentations in the 12 months following changes to the legislation to wind back drinking hours. The change was seen through the week but was especially marked at the weekends. The New South Wales government implemented these changes following the deaths of two young men in alcohol fuelled attacks.

In a further study, the largest of its kind ever undertaken, the Australian College of Emergency Medicine found one in 12 presentations to EDs were alcohol related. These patients were more likely to require urgent resuscitation and arrive by ambulance with police. The college categorically concluded that the measures included in the New South Wales lockdown laws, particularly early closure, have demonstrated beyond doubt that when you reduce availability you reduce harm. Policymakers have the power to ease the human tragedy caused by alcoholic violence. If these laws can prevent just one injury or save one life, if they can prevent just one family from the trauma of dealing with the loss of a son or a daughter, if they can alleviate the emotional and physical stress placed on our paramedics, nurses and doctors, then they will be worth the discontent of an earlier night for patrons and owners of licensed venues. If you would like Lita Olsson to say a few words now, she can do so or, alternatively, you may ask Lita questions.

**CHAIR:** If you would like to make a contribution, please do so.

**Ms Olsson:** Thank you for having me along today. I have some information that we have recovered through our statistics recently. From September 2014 to September 2015 we required security assistance 1,798 times in the emergency department alone. Three-quarters of those were secondary to alcohol related incidents. We have staff members of late not able to complete shifts and the flow-on effect is not limited to nursing staff but also security, administration and our social workers

who are dealing with the flow-on effect of these traumatic incidents. Alcohol related incidents have been in the top three primary diagnosis in our emergency department for the past five years and in the top 10 primary diagnosis for the past 10 years.

**Ms Caddie:** United Voice Queensland represents almost 30,000 workers across a vast range of public and private sector industries. We proudly represent 2,000 ambulance officers across the state working as paramedics, patient transport officers and communications officers. Last year alone paramedics attended more than a million calls for help. Too often they are witnessing firsthand the devastating consequences of alcohol related violence and harm. Increasingly, they are becoming the victims of it. Ambulance officers are the people Queenslanders turn to during some of their darkest hours, and yet in the 2014-15 financial year more than 247 ambulance officers reported being attacked or assaulted—an alarming jump of almost 20 per cent in one year and those figures are continuing to rise.

Seventy per cent of these attacks are described as deliberate physical attacks, with our members reporting a majority being alcohol fuelled. Already this financial year 216 assaults have been reported and if they continue at the same rate assaults would exceed 370. That is almost a 50 per cent increase. These reported assaults represent the tip of the iceberg, as many of our members indicate they have little time in a shift to report every incident that occurs while they are attending to calls serving Queenslanders.

Sunday, just one week ago, we had three incidents involving paramedics in one night, the circumstances of which have been widely reported and are subject to court proceedings. The largest number of incidents occur on the Gold Coast, metro south and metro north of Brisbane. Sixty per cent of the attacks on paramedics occur in the 12-hour reporting period between 6 pm and 6 am. That is the time period by which the QAS tracks reports in those 12-hour blocks, but we are looking at changing the way that reporting occurs.

That is why United Voice ambulance officers support the objectives of this bill and any and all measures that can work together to address the hazard at its source. Limiting the supply of alcohol and the sale of rapid intoxication drinks, as outlined in this bill, are initiatives when combined with ongoing public education, responsible service of alcohol training implementation and, most importantly, compliance will make a real difference on the ground. Safer venues and safer communities are in the interests of all stakeholders.

We have been working with government and QAS through the Paramedic Safety Taskforce to identify some immediate measures to ensure paramedics have access to the information, training and support necessary to better deal with incidents as and when they occur. Action that prevents these incidents occurring is crucial such as the measures outlined in the bill. With your leave, I would like to ask Torrin Nelson to make a few comments in terms of the impact directly on front-line staff.

**CHAIR:** Of course.

**Mr Nelson:** Thank you for your time. As a front-line paramedic, I, like so many of my colleagues, have been faced with violence while on the job. A lot of this violence has been alcohol fuelled. It is not just the actual event of being assaulted or witnessing an assault but also the long-term physical and psychological effects on the officers, their families and their colleagues. It also affects the service delivery of the Ambulance Service and staffing.

We need to be able to focus on the complex task of saving people's lives while we are out there on the front line, sometimes being required to make split second decisions to save someone's life. Having to look over our shoulders and having that continual fear of an assault or an attack takes our focus away from this important task that we are providing to the people and visitors of Queensland. Ambulance officers deserve to feel safe when they go to work and our families deserve to expect that we will return in one piece from our shift.

**CHAIR:** Mr Nelson, you indicated in your opening statement the long-term physical effects on the career of ambulance officers. Could you expand on that in terms of, firstly, the number of alcohol related attacks? I did hear from Ms Caddie about under-reporting. Maybe you could give an explanation around that and also the long-term career effects on an ambulance officer.

**Mr Nelson:** Certainly. A lot of these attacks do go unreported if they are small attacks or verbal assaults, which are quite frequent. We can pretty much say that every night shift on a Thursday, Friday or Saturday there will be some sort of verbal assault, particularly in the CBD or in areas where there are lots of venues and late-night drinking. A lot of officers will not report these incidents because they brush them off as just a matter of course in the job and because the paperwork involved is quite time consuming. We have more important tasks at hand to deal with, and we are already dealing with shift overruns and missing meal breaks to be able to focus on that.

**CHAIR:** Can you give an explanation on the effects of the career of an ambulance officer?

**Mr Nelson:** Just the assault itself will have the immediate effect of an injury but there is also the psychological effect that will stay with you forever. There is post-traumatic stress, the effect it has on your pride and your ability to do the job, and being able to provide longevity to the service. People are becoming burnt out because it is affecting them psychologically and affecting their families. Families are putting pressure on them to pursue a career in another avenue.

**CHAIR:** Do they end up exiting the QAS?

**Mr Nelson:** Yes, they do and they will go on to other careers or easier jobs.

**CHAIR:** Ms Olsson, I forget the figure but it was in excess of 1,700 assaults. Was that September—

**Ms Olsson:** September 2014 to September 2015.

**CHAIR:** Three-quarters of those were alcohol related; is that correct?

**Ms Olsson:** That is correct. That is purely the emergency department at the Royal Brisbane Hospital requiring security.

**CHAIR:** What are the long-term effects on nurses who are involved in those situations?

**Ms Olsson:** Along with the paramedics, it is grossly under-reported. This is an international phenomenon and it is not new. It also takes time and it is a difficult process to fill out reporting forms and things like that. Staff are encouraged to do so, and through the process we have started to do some further training and education around that. Sometimes staff are unable to complete shifts. An incident happened in December 2014 where a patient verbally and physically assaulted staff, and due to a lack of executive support that patient was within our department for 36 hours until we were given support from the executive level to move that patient on. During that time three staff members were unable to complete their shifts, and it also exposed however many staff to that patient and to those assaults over that 36-hour period.

**CHAIR:** Ms Mohle, in your submission you made reference to the significant reduction in the number of presentations to the St Vincent's Hospital in Sydney in the 12 months following the changes to the legislation. The subcommittee of this committee went there before Christmas and heard some evidence around this. Can you just explain to the committee what a 'significant reduction' means, please?

**Ms Mohle:** I might hand over to James Gilbert, who is responsible for putting together our submission in that regard in terms of the figures that are in the submission.

**Mr Gilbert:** Essentially it was Kings Cross, because that is the catchment area for St Vincent's and clearly that is a late-night precinct which was subject to the changes. I have not spoken with our colleagues in the New South Wales nurses' association, but I know at the time prior to those changes they formed a coalition with the police union and the ambulance officers down there for a Last Drinks Campaign, and they were successful in having those changes made. Essentially, there was a 32 per cent reduction in assaults within Kings Cross and the Sydney CBD entertainment precinct as a whole was down 26 per cent. Anybody who has a basic understanding of statistics would see that as a very significant change and reduction in the numbers, and we would hope to see similar circumstances in Queensland.

**Mrs SMITH:** Thank you so much to everyone for coming in today and presenting. First of all can I say that I feel for any nurse or paramedic who has to bear the brunt of any violent incident. If I can just first go to your submission, the analysis on page 11 states '4,629 cases of injury due to alcohol-related violence collated by the Queensland Injury Surveillance Unit between 1999 and 2011' indicated that the home was the most common location for assault injuries. It states, 'Whether the violence occurs from drinking at home or in licensed venues, victims still end up in EDs.' Given that these statistics say that the drinking is happening at home and incidents are occurring there, how would these laws address that problem?

**Mr Gilbert:** Essentially the statistics related to that are 31 per cent, so there is obviously another 69 per cent that are occurring elsewhere. We would say that if you are looking at the statistics we provided in terms of what happened in Sydney it is still going to be a significant reduction. We clearly cannot extrapolate that to what would happen here without further detail, but we can make assumptions. You have to go on the evidence that you have, and that is essentially the evidence that we have.

**Ms Mohle:** The reason we brought Ms Olsson with us today is that she has more up-to-date evidence from one facility. This evidence that we quoted in our submission is only up until 2011, but we thought it was really important to hear front-line evidence from workers at one of the largest and busiest EDs in the state which services the precinct of the Valley. Most of the assaults would occur in the Valley, would they not?

**Mrs SMITH:** That was my next question. From September 2014 to September 2015, 1,798—three-quarters were presented as alcohol related. How many of those may have also had drug use involved as well?

**Ms Olsson:** That 1,798 is actually only security data. That does not even count the people who were drunk or intoxicated and did not require security, so that number is actually much greater. A lot of times people do delve into both, but if you ask any emergency or front-line staff member they will tell you that the ice epidemic is not what it seems. The fantasy epidemic was not what it seemed. Alcohol is our biggest traumatic incident in the emergency department with verbal assaults, threats, spitting and biting, all of which carry very significant traumatic incidents to us which also includes three- to six-month blood tests which we then have to take home to our families and all the trauma that goes along with that. Patients who are under the influence or intoxicated by other things, whether it be drugs or whatever—ice, heroin, whatever it may be—are usually easier to deal with because we can sedate them to maintain our safety. Alcohol is a very different ball game, unfortunately.

**Mrs SMITH:** Many of today's witnesses have stated that this bill does not address the perpetrators. With the Safe Night Out Strategy the previous government looked at increasing the maximum penalty for aggravated assaults for public officers such as ambulance officers from seven to 14 years imprisonment. Did you support that change or do you support any increase in penalties that can be imposed on perpetrators?

**Ms Caddie:** It is the view of paramedics that the sentencing regime should appropriately reflect the seriousness of the crimes that are being perpetrated and that alcohol or drug abuse or overuse is not an excuse for occupational violence.

**Mr Gilbert:** In 2008 the QNU lobbied and was successful in getting the government to change the criteria for what was considered serious assault. Ordinarily people were being charged with common assault. There was a change to the legislation so that if you assaulted a public officer performing their duties it would be serious assault. We did not see any significant reduction in the number of people being assaulted because of that change. Whilst we were not opposed to the change in terms of the legislation that was brought in last year, we were concerned that, if that is all you are going to rely on, that is not going to make any difference whatsoever. There needed to be other facets, and the evidence suggests that a reduction in the sale of alcohol and the times at which it is available will do that job.

**Ms Mohle:** That is the point I was going to make. That is merely one facet of a holistic response that is required to this problem. Simply increasing sentencing is just like putting an ambulance at the bottom of the cliff—excuse the ambulance analogy—rather than having a fence at the top of the cliff to stop accidents from happening. So even though it is an important part of the response, we think that there are far better avenues to address this problem, including restricting drinking hours.

**Mr Gilbert:** Lita may want to speak about one of her colleagues at the Royal Brisbane. I might as well talk about it if you are happy with that. Of course I cannot go into particulars because I want to keep the anonymity of the person involved, but it was a very, very serious assault that has very serious ramifications for that person. That person's transition through the justice system—and this was post changes last year—did not reflect a sentence that was similar to what was espoused in the legislation changes. That is really demoralising for the other staff. That is all I can say in relation to that.

**Ms Olsson:** A lot of the reason staff do not report is that nothing happens. At the end of the day, we fill out the incident forms and we alert our colleagues for the next time that the patient comes in, we contact the police to press charges and then nothing happens. The staff member that we are talking about had a head injury, and essentially the perpetrator was given a \$355 fine. It is embarrassing, demoralising and to us there is not much point. She is still off work.

**Ms PEASE:** Like my parliamentary colleague, I am sorry that you have had to experience such terrible violence at your workplace. Previous witnesses have given evidence that there has been no discussion about perpetrators. I tend to disagree with that, because I think this whole discussion is about the perpetrator because people go into the city or go and drink alcohol, with an unintended outcome being that they become the perpetrator or the victim. I would like to reiterate that and wonder if any of you would like to comment on that. Would you agree that the unintended outcome of people going out and having a good time is that they can unintentionally become the perpetrator or a victim?

**Ms Mohle:** Yes, that is certainly the case.

**Ms PEASE:** We were fortunate enough as a committee to come and visit the emergency department at the Royal Brisbane in the early hours of the morning. On that occasion many of the beds were taken up by people who were intoxicated, who had come from one of the safe night out precincts and required a great deal of care and attention from the nursing staff at the hospital. Can you indicate to the committee the impact that having to give such directed attention to people that are under the influence of alcohol or are violent has on the care of your other patients?

**Ms Olsson:** Firstly, it is what we do. It is our bread and butter and it does not matter what you present with, we will look after you. I guess what is difficult, though, is that they do take up a lot of your time and resources. There is that fine line between are they unconscious and maintaining an airway, or are they borderline requiring an intubation and intensive care, which is unfortunately not uncommon. There are a lot of visual and nursing hours that go into that, and of course the little nanna who comes in with a broken hip is going to feel the repercussions of that. We would like to turn her and give her pain relief and things like that more often, but if our time is taken up with a patient who is kicking off and threatening to kill everybody or the patient who is so unconscious that she cannot maintain her own airway, we do have to prioritise those things as well. It is about the safety of our colleagues and ourselves and our patients and the person who is the perpetrator.

**Ms PEASE:** Mr Nelson, with regard to attending to instances do you ever go into venues, or are the victims taken outside and you pick them up out on the street?

**Mr Nelson:** When the call taker is speaking to them, we do prefer to bring the patient out to the street to us and have security there, but there have been times when we have attended to patients in toilets. I remember one instance where we had to intubate a patient—so place an emergency airway and breathe for them—inside the stall of a toilet in a busy licensed venue in the wee hours of the morning, which is very risky for us and for the patient.

**Ms PEASE:** I have attended the emergency training venue down at the port of Brisbane, which is in my electorate, and I have seen the training that you have to undergo. One of those training exercises is in an instance where you are in a nightclub, so I have seen not really firsthand but I can understand how difficult it is, so I appreciate all the work that you do for the community.

**Dr ROWAN:** First of all, as a former president of the Australian Medical Association of Queensland and as a doctor and health professional colleague, can I acknowledge all of the great work and the difficult situations that you and your members deal with on a daily basis. I wanted to ask Mr Nelson first from the Queensland Ambulance Service's perspective whether there is any data that the QAS collects in relation to drug fuelled violence incidents that are taking place in relation to officers of the service or paramedics.

**Ms Caddie:** Mr Nelson is representing United Voice members who are paramedics. In terms of the Queensland Ambulance Service, one of the outcomes from the Paramedic Safety Taskforce is that the QAS needs to start collecting data that clearly differentiates drug related incidents from alcohol fuelled incidents in isolation.

**Dr ROWAN:** Thank you. My next question is to Beth Mohle from the Queensland Nurses' Union. With respect to cultural change, we have heard a lot of witnesses this morning talk about the cultural change that we need across our community in relation to alcohol and alcohol consumption. Are there any particular strategies that the Queensland Nurses' Union would like to see beyond what is currently proposed and is there a role for school based nurses in relation to education?

**Ms Mohle:** I think it is multifaceted and I think it will take a fair bit of effort to unwind the culture we have in Australia in relation to alcohol consumption. I do very strongly think there is a role for school based nurses—starting in primary school actually and not leaving it until high school when the kids start to get into a bit of trouble. I think there is a role not only for nurses but other health workers to actually play that role of educating the community. It does start not only in the school but also in the home, so community based education would be very much supported as well. I think it is about challenging the culture we have in Australia and challenging the assumption that we can only have a good time when we have a few drinks under our belt. I think it is going to take a fair bit of doing to undo that culture, but I certainly do support that statement, Dr Rowan. I think it would be most beneficial if there were more school based nurses who could undertake that very important community education function.

**Dr ROWAN:** My final question is to both the QNU and United Voice in relation to solo nursing and ambulance positions which still exist in rural and remote Queensland. How is this being dealt with and are there particular considerations that need to be looked at from a workplace health and safety aspect in relation to those communities?

**Ms Mohle:** Certainly we do not support solo practitioners. I was involved in a dispute years ago in the Torres in relation to solo nursing practitioners, so we certainly do not support solo practitioners at all. We believe that there needs to be minimum safe staffing of at least two. There certainly are ongoing issues in relation to community ambulance services, if you like, out in the rural areas where there are tensions. Unfortunately, many of our members are put in the invidious position that if they are not available to do that call-out who is going to go and actually collect the people? But they should never be solo in our view. They should always travel with either another nurse or another operational officer or another health worker. James may want to comment on that.

**Mr Gilbert:** In relation to that, it was recognised in the Safe Night Out Strategy the proposal for the watch house. There was agreement from the last committee that looked at it that it needed two staff, so you would extend that clearly out into the outer areas as well, yes.

**Mr Nelson:** With our paramedics in the regional areas a lot of them are single-man ambulances but also in the metropolitan area we have our critical care paramedics and also our low acuity response units which are single officers. We need more forward intel for them. At the moment they are told to approach with caution, but by the time you have approached with caution then it is already too late. So we need more intel from the call takers, the call-taking process and also backup from police to be able to respond safely in that single-officer setting.

**Ms Mohle:** If I could just add to that, it is the case that neither United Voice nor the QNU are omnipresent so what we are reliant upon is people actually advising us if there are those issues. But certainly as a policy position, we do not support solo operators and we would very strongly support there being more attention to this issue because, as I said, more often than not people are put in uncomfortable situations in rural areas that they feel put upon to actually attend to situations where it may not be safe for them. So we certainly call upon our members to advise us of those situations and we immediately take action when we are made aware of them.

**Mr BROWN:** Ms Olsson, how long have you been working in the emergency department of the RBWH?

**Ms Olsson:** I have been in emergency for nine years.

**Mr BROWN:** In that nine years, have you seen the effectiveness of the Valley's Liquor Accord? We have had people involved with the Liquor Accord in here talking about all of the great things that they have done—the Chill Out Zones, the intervenue radio, scanners, taxi marshals, Chaplain Watch, increased police presence. How have you seen those in terms of reducing alcohol fuelled violence and presentations to the emergency ward?

**Ms Olsson:** Since I first started alcohol has always been a problem, but certainly nowhere near as bad it is now, despite all of those measures. I guess the significant difference that I can comment on is where previously we would have—probably up until the last four or five years—patients semiconscious coming through to the doors until four, five, six in the morning, that has certainly decreased. I put a direct correlation with that to the fact that lockout times are earlier than what they used to be and certainly between four and six we do not get those really unconscious patients who are struggling to breathe for themselves. That would be my biggest comment I suppose.

**Mr BROWN:** I pose the same question to you, Mr Nelson.

**Mr Nelson:** You mentioned Chaplain Watch. I have done two New Year's Eves in a row recently. I work in the Logan area but still ended up in the Valley on both those New Year's Eves, so it is a long way out of our catchment. Both times we have had patients who have ended up being handed over to us by Chaplain Watch and then they have taken over those patients. So that service is taking over a great deal of the strain on emergency departments in those precincts.

**Mr BROWN:** Mr Gilbert, I am subbing in today with regard to this committee, but I want a bit of background with regard to the coalition that was set up in New South Wales to the Kings Cross changes. Who implemented those changes? What government was it and who was the Premier at the time?

**Mr Gilbert:** My understanding it was Premier O'Farrell. He was in charge at the time before his resignation. In terms of the genesis of the coalition, I am not sure, but I had spoken with my health and safety colleagues from the nurses association in New South Wales and they were very organised in terms of how they managed that, and it was a consensus between the three unions that essentially looked after emergency workers and police. It was successful in that the O'Farrell government changed the legislation, so it was a worthwhile exercise. In terms of the genesis, I think it was similar to in Queensland—the deaths in Kings Cross and people had just had enough I think. That was the tipping point and the catalyst, especially when they had seen the changes that had occurred in Newcastle.

That was the model that they believed was the appropriate one for changing what they had to expect. We support the lockout model because we talk about cultural change. Cultural change takes a long time. Many years ago I used to work in the emergency department at the Royal Brisbane and at that time it took us at least 10 years to get a change in the view that you do not have to expect to be hit. My concern is cultural change takes too long. Health and safety legislation relies on a hierarchy of control where you look to eliminate the hazards. If you can put in lockout laws that reduce the number of people who are intoxicated, then that reduces your exposure to that hazard. So that is why we are supportive of the changes.

**Miss BARTON:** I just wanted to touch on—and, James, I am not sure whether you are the best person to answer—the fact that we were just talking about a comparison between Queensland and New South Wales. I wanted to ask whether or not you had much of an experience with what they have done in Victoria with the Labor government. I am not sure whether or not you are aware, but the Labor government have recently suspended the lockout laws and they are moving towards a more fluid 24-hour licensing regime. I wondered whether or not you might have statistics from your colleagues in Victoria that you might be able to, if not now perhaps at a later date, provide to the committee.

**Mr Gilbert:** Sorry, but I was not aware of those changes. I will certainly have a conversation with them, but I suppose that is the Andrews government. I do not know the reasons for that. It would be interesting. I would add that there is a very big move in Victoria around occupational violence in health. There was an Auditor-General's report just recently that had some criticisms of how occupational violence was managed in Victoria in terms of the public sector hospitals and the inspectorate down there in terms of how it was managed. I suppose they have a different focus, but we do have a committee that is meeting with Queensland Health around occupational violence. Occupational violence for the health setting includes other forms of violence as well as the alcohol fuelled ones.

**CHAIR:** Mr Gilbert, can I just help you here, because my understanding was that Victoria was last drinks, not a lockout, and it was selected in parts of Melbourne. Would that help you in your response?

**Mr Gilbert:** I just was not aware of it, but to me last drinks might not be a lockout but it stops people drinking I assume. That is the whole idea of last drinks. You might be able to stay in the venue a bit longer but not buy any further drinks.

**Miss BARTON:** If you get the opportunity to get some information from your Victorian colleagues, I am sure we would appreciate it. I want to touch on the statistics that Lita was talking about earlier, and I join with all of my colleagues and acknowledge the work that both nurses and ambulance officers do. I am sure that we speak for all Queenslanders when we say that we very much appreciate the work that you all do on the coalface and none of us think that you should have your lives put at risk by virtue of the work that you do in an attempt to help people when they are in need. I want to delve just a bit more into the statistics that you were talking about and the number of presentations where alcohol is a factor. When you are recording those statistics—and I appreciate that those which you mentioned were those that necessitated an additional level of security support—generally where someone is presenting and they are alcohol affected, do you record where that person has come from? Is that something that is taken into account in your statistics?

**Ms Olsson:** It is and that is done when they arrive at the emergency department. So essentially our administration team will update the patient's details and also in the QAS documentation that we receive, which has a case number that we can then track, it has their residential address if it can be recorded and also a pick-up address.

**Miss BARTON:** To your knowledge—and, again, I appreciate that you might not have the information to hand—would you have a potential percentage of how many of those have come from the designated entertainment precincts as opposed to licensed venues outside of the entertainment precincts such as parks, streets and private residential addresses?

**Ms Olsson:** I cannot comment on exact statistics, but I can tell you that the majority of them do come from our Valley precinct, except on the few occasions that we have a fabulous festival across the road at RNA and then they take the cake.

**Miss BARTON:** This might be more of a question for Beth or James, because I appreciate that your experience is relative to the hospital that you work at and given its approximately to the entertainment precincts it is obviously going to have a higher presentation, but I wonder—and, again, I am happy for you to take it on notice—whether or not perhaps a hospital like the Mater Hospital or the Princess Alexandra Hospital is seeing similar levels in terms of their presentation numbers of people coming from entertainment precincts as defined by legislation.

**Mr Gilbert:** We would not have that information. We were lucky to have Lita here with us so she was able to comment on her workplace. It is not something that we would ordinarily be given. Maybe that is a question you could address to Queensland Health.

**Ms Mohle:** There is a problem with available meaningful information of the nature you are seeking. It would be very good to have that information, but the systems generally do not talk to each other. With electronic digitalisation of hospitals and improvements in electronic health record keeping, in the near future we are hopeful that that data will be much more readily available and better integrated between QAS information systems and Queensland Health ones. But right now, unfortunately, a lot of systems do not talk to each other and we cannot get the necessary meaningful information that we would like.

**Ms Olsson:** Could I add: not quoting statistics exactly, but if a patient is so grossly intoxicated that they require the emergency intervention of an airway, they will come to either the PA or to us. Because the majority of our precinct is from the Valley to the city—

**Miss BARTON:** Is that your catchment?

**Ms Olsson:** Yes—we see a huge number of those. The Mater not so much. I can tell you that they would not get those types of patients, as such. The PA would, but again their catchment tends to be South Bank and things like that. Their catchment is a little different to the demographics that we see.

**Miss BARTON:** I am trying to get an understanding of the best way that we can respond to the issue. It occurs to me that if we are making an assumption about where all of the intoxicated people are coming from and that assumption is wrong, then the solution that is on the table is not going to be the right one to address what might be a broader problem, rather than one that is concentrated on entertainment precincts. Just quickly to United Voice—I am conscious of the time—I am assuming that you would have similar problems in terms of providing that kind of information to the committee?

**Ms Caddie:** Yes, we would. QAS would be your port of call. We have all identified that better records is an initiative that needs to be implemented.

**CHAIR:** Queensland Nurses' Union and United Voice, thank you for your evidence today and for your submission. We wish you all the best in the future.

**KESKINIDIS, Mr George, Workplace Health and Safety Auditor, Salus and George**

**OLIVER, Mr Garry, President, Security Providers Association of Australia**

**WASH, Mr Benjamin, Chief Executive Officer, Taxi Council Queensland**

**CHAIR:** We will start with you, Mr Wash. Please identify yourself and make a five-minute opening statement. Then we will move on to the others.

**Mr Wash:** Good afternoon, everyone. Thank you for the opportunity to present to the committee. I am the chief executive officer of Taxi Council Queensland. We are the peak body for the Queensland taxi industry, representing more than 16,000 industry participants delivering more than 100 million passenger trips per annum in Queensland. As you may be aware, Taxi Council Queensland provides secure rank services for the Queensland government through a funding agreement. The agreement sets out a number of ranks that are to be staffed at specified times in late-night precincts. As part of the agreement, we gather extensive data regarding the numbers of patrons using the ranks and conduct video surveys on a periodic basis to corroborate and confirm the data collected. Should the committee wish to review some of this data, we are more than happy to supply it on request.

TCQ has been involved extensively with liquor reform since the introduction of the drink safe precincts in 2010 by the Bligh government. Further, extensive data was supplied for the development of the Newman government's safe night out policy. Unfortunately, we were excluded from the implementation panel of that policy and have had limited opportunity since to contribute to discussions regarding the current proposed reforms. The Queensland taxi industry plays a unique role in the late-night economy because, where other measures can only minimise or reduce risk associated with alcohol consumption, taxis can remove the risk altogether. This makes us a key element of any policy that deals with liquor licensing.

One of the critical things for consideration when looking at lockout times is the capacity of transport systems to effectively move people out of the precinct. At the times that are being suggested, that is, 1 am lockout in a 3 am trading precinct or 2 am in other areas granted late-night trading, there is often little or no public transport. This is especially the case in regional Queensland. Any measures that would see significant numbers of patrons on the streets at the same time will severely challenge the ability of the Queensland taxi industry to service all of them in a timely manner.

Unlike other industries where the front line of service delivery is provided by employees, each taxi driver is a small business in their own right. This means that they cannot be compelled to service any particular precinct, meaning that each individual may choose to simply avoid areas where there are perceived problems. Over the last several years, TCQ and the industry have worked very closely with licensees and the Queensland Police Service to improve ranks and locations in late-night entertainment precincts to encourage more drivers to service demand. This is done through effective rank management, assessing customers so as to not expose the driver to potential harm and working with bodies such as Chaplain Watch to provide assistance to extremely intoxicated persons. It would be a fair assessment that more taxis than ever now service late-night entertainment precincts because of the effectiveness of such measures.

While servicing these areas may be lucrative on any given night, for some drivers the perceived risks far outweigh any potential reward. It must be noted, however, that this is less to do with the opening hours and more to do with being able to manage demand. In fact, removing arbitrary licensing restrictions may well be of benefit with people self-selecting their departure times and demand being steady over a number of hours, rather than having all patrons on the street at the same time.

Arguably, the current regime of licensing already delivers the desired outcomes, with Deputy Director-General Ford noting in his testimony on 2 December 2015—

... while it is possible in Queensland now to trade till 5 am there are really relatively few venues that do... Even within those venues that are licensed to trade for extended hours, many of them do not trade to the full extended hours.

The flow-on effect of mandatory closing times is that it becomes difficult to service demand due to the restricted number of ranks and additional congestion from other vehicles in the precinct seeking to pick up and drop off. Instances like this are often seen at major events that are poorly serviced by public transport, leaving taxis as the only effective means of travelling away from the venue or precinct. Invariably, this is seen as a failing of the Queensland taxi industry when it is, in fact, a failing of other policy measures, usually mass transit. This is perhaps the single greatest concern that TCQ has with respect to the suggested reforms, that an artificially created increase in demand at closing times will

be seen as ineffective peak-demand management by the taxi industry. To that end, failure to consider all of the implications of these reforms, especially with respect to transport, may be seen as setting up the Queensland taxi industry to fail.

While the current placement of ranks is adequate and secure ranks operate at maximum efficiency with the average waiting time being less than one minute and no more than 15 minutes at peak times, more can be done. For example, there are often loading zones outside of venues and these could convert to taxi zones at specified times of night. If more of these can be established nearer the exits of major venues, it may act as an incentive to drivers to service the area without the prospect of having to queue up for 15 minutes. Further, the incidents of violence are likely to reduce even further if people can walk only a few metres to a rank when they leave their last venue. TCQ is happy to work with venues to assist with directions to the nearest rank and the Queensland government to establish additional secure ranks that have proven so successful in managing crowds and their interface with taxis.

As noted earlier, the late-night economy may be lucrative for some participants in the Queensland taxi industry. However, it must be balanced against the safety and security of drivers and customers. Again, we are willing to work with the Queensland government and other stakeholders to ensure that whatever policy is ultimately adopted is practical and workable. Thank you. I am happy to take questions.

**Mr Keskinidis:** I take this opportunity to firstly thank the parliamentary committee for acknowledging my submission and formally inviting me to the public hearing today. I would also like to take this opportunity to acknowledge the positive change of attitudes, behaviours and evolved positive safety cultures that many Queensland licensed premises, including clubs, resorts, restaurants, bars and hotels in Queensland, have undertaken and embraced over the years. I strongly believe that is absolutely paramount for what needs to be achieved here collectively, as it cannot be just a collection of legislative policies being rolled out. Finally, I acknowledge the work that our emergency services have been undertaking in managing incidents within each Queensland community.

Those in the industry who know me would say that I am a health and safety advocate for the industry. This is very true, as I am very passionate about what I do. From an auditor and industry risk advisory perspective, I know that many licensed premises continue to embrace health and safety and risk mitigation strategies for their businesses, including safety for workers and patrons. Currently, I have the privilege of chairing and overseeing several health and safety committees. I also develop and implement safety management systems for numerous licensed venues around the state. There is a common theme here, that is, worker and public safety is absolutely paramount.

From the outset, the labelling of the amendment bill 'alcohol fuelled violence' or, in essence, an alcohol management plan is misleading, and creates complexity and controversy. The labelling and, more so, the branding of such a bill extends the boundaries of alcohol related violence to all parts of the community, including the home. Furthermore, it does not even deal with the issue of illicit drugs. While the bill is well intentioned, it raises some serious safety questions in relation to lockouts.

Therefore, in the Tackling Alcohol-fuelled Violence Legislation Amendment Bill 2015, proposed section 142AB, 'License subject to lock out condition' states—

It is a condition (*a lock out condition*) of the holder's licence or permit that a patron of the licensed premises must not be allowed to enter the premises during the trading period.

That said, with all my industry experience and expertise within this wonderful and vibrant industry of ours, along with the many years of academic study that I have undertaken, I have not once come across the implementation of a policy initiative that undermines the safety of workers and public safety. I am talking about the lockout. Licensed premises strive for the continuous improvement of their safety management systems, including meeting current legislative requirements. Through consultative processes, they focus on the improvement and development of policies and procedures to eliminate and mitigate risks to workers and their patrons through appropriate risk management processes. Thus, from a risk management perspective, the lockout represents operational and legislative challenges for workers, the licensed premises and the community. The lockout itself is a risk and imposing the lockout on a licensed premises directly undermines the objectives of work health and safety legislation that workplaces are required to embrace.

The main objective of the Work Health and Safety Act is to provide for a balanced and nationally consistent framework to secure the health and safety of workers and work places through various means such as, but not limited to, workplace consultation, cooperation, issue resolution and assisting employers and workers to achieve a healthier and safer work environment and securing compliance. Therefore, the introduction of a lockout during what most premises would deem to be peak trading

times for the night trade would certainly make it difficult for licensed premises to meet their legislative obligations. This is more so the case when a framework for continuous improvement and progressively higher standards of work health and safety is to be strived towards by the licensed premise. This is once again hampered when there is the risk to the workplace by the introduction of the lockout.

Under section 17 of the Work Health and Safety Act 2011, each licensed premise has a duty to manage risks within the workplace as far as is reasonably practicable. The words 'reasonably practicable' definitely come into play here as the lockout in its own right would not be deemed as 'reasonably practicable'. Hence, it would not be reasonable for any workplace to implement a policy that would increase the risk to persons or its business.

It is important to note here that not only is this an option to 'place on the table per se' a policy that would certainly increase the risk of injury to workers and patrons that is be deemed as unsafe, but also it would certainly not be considered for implementation under any safety management system, especially during peak trading teams when the risk to the licensed venue is escalated through increased trade. Under section 28 of the Work Health and Safety Act 2011—

While at work, a worker must—

- (a) take reasonable care for his or her own health and safety; and
- (b) take reasonable care that his or her acts or omissions do not adversely affect the health and safety of other persons; and
- (c) comply, so far as the worker is reasonably able, with any reasonable instruction that is given by the person conducting the business or undertaking to allow the person to comply with this Act; and
- (d) co-operate with any reasonable policy or procedure of the person conducting the business or undertaking relating to health or safety at the workplace that has been notified to workers.

Once again, it would be deemed highly unlikely that a licensed premise would implement such a policy that would create an unsafe environment for workers and patrons, and expect workers to cooperate with the policy and enforce it when it places them at risk.

Furthermore, under section 19 of the Work Health and Safety Act, the licensed premise has a primary duty of care and must ensure, so far as is reasonably practicable, the health and safety of workers. It has an obligation to ensure a health and safe environment at all times. Essentially, their primary duty of care would be compromised.

In light of the above stated, situations could arise whereby patrons could be refused entry during the lockout time and try to find every excuse to get into the licensed premise. The front-line workers such as security guards and door personnel are faced with increased levels of workplace stress and harassment in trying to manage these types of situations. In some instances, front-line workers may be continuously bullied. How is that a reasonably practicable policy to implement by the licensed venue? It is not.

As a result, this could lead to increased WorkCover claims for licence premises and, consequently, rising industry premiums which would be felt by everyone. It would also increase the number of investigations undertaken by the work health and safety regulator and place further strain on government resources.

This policy only contributes to creating an unsafe work environment, instead of helping to improve the working environment for workers and the environment for patrons. The view held by the Victorian Drugs and Crime Prevention Committee in volume 1 of its final report on its inquiry into strategies to reduce harmful alcohol consumption is that a number of limitations have been associated with the introduction of lockouts.

In one study, researchers indicated a possibility that lockouts can actually increase the incidence of violence, with door staff encountering an increase in aggression towards them when patrons are refused entry and concerns about the potential for violence as patrons wait in long queues at entrances and for public transport.

Another situation may arise whereby a person has an alleged emergency situation and is legitimately seeking their friend, but, due to the lockout laws, is refused entry because the security worker does not wish to jeopardise their job or face fines by breaching the legislation. The stance taken by the security guard in this situation would be questioned as they have a duty of care, yet they are restrained from exercising their duty of care as a consequence of the lockout policy of the licensed premise. In addition, what may also occur is that the security guard may not be able to distinguish from what is a real emergency and an orchestrated one as a result of persons trying to enter the licensed premise for whatever reason.

Another scenario would be the exit of patrons at one given time from the licensed premises creating overcrowding in the streets and increasing noise pollution to nearby areas. Liquor licences have current noise restrictions which licensed venues need to comply with regardless. Noise pollution is already a challenging issue on its own for many licensed premises. The implementation of a lockout would certainly compound the problem.

Furthermore, how would a licensed premise deal with a real emergency situation which may take place during the lockout period where persons are evacuated from the workplace and seek re-entry once the emergency situation is over? How would the front-line workers know who was originally in the premise prior to the emergency and who was not to allow them re-entry? This would create more confusion and stress for everyone.

To punish all the good citizens of the community as a consequence of a few bad operators would create a disheartening and negative feeling, and undo all the good work the good operators have done over the years. That is not to mention the time and resources they have spent on ensuring their licence premise meets all government regulations and beyond, including health and safety requirements.

Thus, a practical approach would be to target the bad operators individually and make an example of them, and reward the good operators. Licensed venues that have developed and implemented a suite of safety control measures as part of their safety management strategy, that enable them to manage risks to their businesses on all levels, including public safety, should not be detracted from by laws that would be a burden and counterproductive.

To reiterate, what the lockout would achieve is increased stress on current safety systems and place at risk workers and patrons through trying to manage the influx of patrons over a shorter duration of time within licensed premises. Finally, just like other safe night precincts, the Cairns safe night precinct has been exemplary in its approach to creating a safe night out precinct for its community. It has invested numerous resources in creating a safer environment whereby persons can enjoy a night out. Licensed premises continue to play a proactive role in community safety, and this has been self-evident across the Cairns community. Thus, since the Cairns safe night precinct is a good citizen, why punish it?

**Mr Oliver:** First of all, I thank you, Mr Chairman, and the committee for inviting me today. To assist when it comes to questions I will outline my background. I have 34 years police and security experience. I served 24 years in the Queensland Police Service. I was the first police officer appointed to liquor licensing enforcement in the post-Fitzgerald era, paving the way for the current police OLGR task force. I coordinated seven agencies specialising in the development and maintenance of harm reduction strategies, been the original founder of the Liquor Enforcement and Proactive Strategies process, referred to as LEAPS, and been instrumental in regulating the first lockout condition in 2004. I have lectured in harm minimisation strategies to health, private security and enforcement agencies throughout Australia, New Zealand and the United Kingdom for the last 18 years.

I am an active member of the Victorian Security Industry Advisory Council as well as the Property Services Industry Advisory Committee nationwide. As evaluated by Professor Ann Roche, the Director of the National Centre for Education and Training on Addiction at Flinders University, for over five years, the success of the LEAPS project was dependent on four basic pillars to reduce alcohol related violence. These pillars revolved around security, staff training, venue accountability and environmental design.

These four areas have been neglected in recent times and not appropriately addressed in this current bill. In regards to security, in 2006 a 17-point plan incorporating the LEAPS project was implemented in Brisbane and included a security ratio for all premises trading beyond 1 am. This security ratio started at 8 pm the previous night. Now the security ratio applies only from 11 pm on the previous night, reducing the crowd controller's ability to identify problem areas and respond in a proactive manner.

With regard to staff training and venue accountability, recently Queensland has abolished the requirement to have staff training registers and therefore the requirement to record competency standards on their venue. We have abolished the requirement for venues in Queensland to have a licensed manager present or readily available to the venue. Before such changes all premises were required to have an approved manager on the premises or readily available. They were also required to complete a responsible management of licensed venues course every three years. Now these premises can be managed by a person who has no higher qualification than an RSA certificate completed online once in a lifetime.

With regard to RSA training, Queensland has abolished the requirement for all staff involved in the service and supply of liquor to complete a four-hour Queensland RSA course every three years. Now staff are required to complete a national course once in a lifetime. In the majority of instances these courses are completed in a 100 per cent online environment, often without any reference to Queensland's regulatory requirements. Concerns about Queensland's acceptance of these online qualifications were raised at page 20 of the national ASQA security training review report which was released a few days ago.

Our association's review of this training standard revealed that RSA online courses could be completed in less than 10 minutes, with certificates obtained by our association in the name of Mickey Mouse, Huey Duck and Louie Duck. This was reported to the government of the day and the regulator.

Brisbane city is the only area in Queensland that has a consistent approach with the implementation of the 17-point plan in 2006. The following licensee requirements are published on the OLGR website—

In addition to the statewide 3 am lockout and normal licence conditions, you must also:

- provide sufficient security
- keep an incident register
- install closed-circuit television (CCTV) at entrances and exits
- responsibly promote alcohol and happy hours
- prevent irresponsible drinking games and competitions.

Our association would submit that the 17-point plan, which was a Labor initiative, has proven to be an effective way to reduce alcohol related violence within the Brisbane CBD. It is clear that the hospitality industry has already suffered tough economic times. We have watched premises cut costs in the areas of security and training to meet these challenges, to the detriment of safety standards.

A further reduction in trading hours will force many venues to consider additional cost cutting, including an increase in the practice of employing security working on ABN. This practice circumvents premises having to pay award wages, superannuation contributions and appropriate public liability insurances. Queensland is the only state in Australia where individual ABN holders are not required to hold security firm licence to operate.

In conclusion, this bill does not address the fundamental requirements to reduce alcohol related violence. As an association we do not support the bill. We do not support the reduction of training hours just to fix the mistakes of the past. We do, however, support working with the government in a collaborative way, with the full engagement of industry. We support the Queensland government's objective to grow the economy based on tourism by maximising workplace opportunities to contribute to Queensland's economy. To achieve this, however, we must say that we only support, at this time, the expansion of the original 17-point plan across all safe night out precincts across Queensland to effectively tackle alcohol related fuelled violence.

**Mrs SMITH:** A lot of the witnesses over the last few hearings have resorted to the Newcastle and Sydney experiences and the perceived success there. I noticed in your submission that you drill down to assault rates per 100,000. Would you like to expand on the Newcastle experiment and the lockout laws in Sydney as well?

**Mr Oliver:** In terms of the lockout that was imposed statewide in 2004, the LEAPS project looked at a much wider view in relation to environmental design which resulted in the lockout. Lockout was only one condition that ultimately was designed to stop pub crawling and assist with taxi transport away from Surfers Paradise. My 24 years in the police was on the Gold Coast. There is too much emphasis being placed on the lockout condition. I am Gosford born. I know Newcastle and Sydney very well. I was asked to go down to Sydney—my first gay mardi gras—when the lockout was originally introduced in Sydney.

A lot of speakers today have talked about the necessity to look at a multifaceted view in relation to tackling alcohol fuelled violence. I cannot support that enough. There is too much emphasis placed on the lockout condition. In saying that, the 3 am lockout is currently imposed in around 90 venues. When it was first introduced we did have conflict on the doors of our nightclubs from our members. The 1 am lockout would be imposed in probably around 550 venues in Queensland—that is, the peak trading hours. I agree with my colleague here that the amount of conflict and violence towards our crowd controllers will increase significantly if that 1 am lockout is ever introduced.

**Mr Keskinidis:** I agree with what Garry said. I want to make an important point in relation to Newcastle. I am not sure whether this has been brought up by any person or organisation. Page 12 of my submission states—

Just to reiterate, and of significance is that *no other recommended 'safety' measures were introduced in Newcastle in 2008* (scanning, public transport, taxi marshals, street lighting etc) so all of the burden of the interventions fell on the licensed businesses.

That is important to consider. If those additional safety control measures were implemented then the question would arise: would the Newcastle lockout model have gone ahead? I have some doubts whether it would have gone ahead. This goes back to my recommendation for safety control measures to be implemented, if they have not been already, in all safe night precincts. If we go back to the Newcastle situation again we need to look at the root of the problem and work out what was implemented initially and what was not implemented. That is a key issue that we need to follow-up on.

**Ms PEASE:** Mr Oliver, would you mind elaborating on the changes that you talked about in the legislation with regard to the requirements for RSA and the impact that you feel those changes have had on the industry?

**Mr Oliver:** Ultimately training generally has changed in the last few years. RSA training under the previous government was changed from a state government course specific to our legislation—it was a four-hour minimum course that was attended every three years, and we issued a state government qualification—to a national competency through ASQA, which had to be done at any time within their lifetime. The biggest problem that we had with that was that many people have done their RSA certificate at school, doing their certificate II in hospitality management. Regardless of recent training, they could go back 10 or 12 years and use that previous certificate as competency. We have had significant changes in this industry in Queensland. None of those changes would be included in their training 12 or 13 years ago.

The other change was RMLV training, which is the approved manager's course. The government changed it to say that all low-risk venues, which are represented by restaurants, no longer needed an approved manager. The industry then looked at it and said, 'If I don't need to be an approved manager, I do not need to do any training.' Nearly half our industry, which is represented by restaurants, are not being trained in the one-day RMLV course. Those restaurants and the service practice that occurs in restaurants obviously flow on to our late-night traders. It seems like there are double standards already within the act itself, which has gone through an enormous amount of amendment in the last few years.

**Ms PEASE:** Why do you imagine the government made those changes?

**Mr Oliver:** As it was probably against our association's recommendation, I would have to leave that question open. The only place in the state where security ratios really occur is in the Brisbane CBD, which has the lowest incidents of crime, as most statistics would show. We talk about security in licensed venues outside of Brisbane as following the golden rule: the golden rule is who has the gold makes the rules. Security companies will go into venues and be told by licensed venues what they can afford, not necessarily what is safe. The hospitality industry has struggled—we acknowledge that. If they struggle, the first thing they cut is training and security. The two things that will increase alcohol related violence is probably training and security.

**Ms PEASE:** Thanks very much for that. There has been a lot of commentary about education around that area, so I appreciate you giving me some background on that. George, you have given a lot of information in your submission and one of those particular points was that you felt that lockouts may increase violence. What evidence do you have and how have you arrived at that position?

**Mr Keskinidis:** Thank you for the question. As an auditor, I have undertaken over 300 auditing assignments for clubs, hotels, licensed premises et cetera over a 19-year period. That has come about through not only my own findings but findings in other jurisdictions as well. When we are involved with a licensed premises—I also project manage many licensed premises as well as being their health and safety committee chairman—we look at incident reports and records as well. I have data to support that in terms of hard data from licensed premises in each jurisdiction.

**Ms PEASE:** Has that been compiled into any reports?

**Mr Keskinidis:** It has not because it is bound by privacy. It would be a challenge to try to obtain the information over X number of years for each licensed premises to back that up due to privacy reasons in each workplace.

**Ms PEASE:** I also note in your submission that you discussed the 14 premises that were in Newcastle and that there have been many closures. Are you aware that, of those 14, 12 still exist and, of the two that closed down, one was burnt down and one was closed down due to breaches of their licence?

**Mr Keskinidis:** Yes, I have heard that. I will make the point again that, if safety control measures were appropriately implemented from the beginning, I do not think we would be having a discussion about Newcastle today. I really believe that.

**Ms PEASE:** My comment with regard to that is that we have seen an increase in alternative licensed premises that have opened and are servicing the Newcastle area, because there has been a substantial growth in that area.

**Dr ROWAN:** It is very clear to me in listening to your submissions and those of others today that alcohol fuelled violence is a very complex issue requiring a detailed consideration of a whole-of-government legislative framework with multifaceted solutions in collaboration with multiple stakeholders, including clubs and pubs, those involved in the transport industry and security as well, to achieve safety for everyone. The first question I wanted to come to was to you, Mr Wash, from Taxi Council Queensland in relation to your evidence today about the risk of increased violence at taxi ranks—in other words, as you put it, increasing demand and setting the taxi industry up to fail in a way. I could speculate why the government might want to do that. If that were to occur, that would obviously be a very worrying trend for patrons and for those who drive taxis. How have they dealt with that in other jurisdictions—in New South Wales or other places—in relation to transportation and how people get home from these precincts?

**Mr Wash:** Thank you very much for the question. I just want to start by saying my understanding of the bill is that it is to do with alcohol fuelled violence and most of the discussions that I have heard seem to be focused heavily on licensed entertainment venues and those precincts when in actual fact it is much broader than that. I would like to think that this process is drawing out a lot of the breadth of complexity as far as that is concerned.

In terms of setting up the industry to fail, it is not a glib or flippant comment at all, because what we have seen in other jurisdictions is a single-sided approach, and then the data collection that sits around that is often targeted to potentially achieve the outcome that the person gathering the data wished to achieve in terms of movements and statistics. Other governments have sought to increase the number of taxis that are available in those areas by throwing a number of taxi plates on the road, but that is actually a very simplistic solution because it does not take into account the individual's choice of where they are going to service with those additional suppliers.

In actual fact, as I said in my opening statement, in the Fortitude Valley precinct we believe we have unprecedented levels of taxi service compared to almost any time over the last half century, and it is mainly because of the measures that came out of things like the drink safe precinct. Without looking at any specifics—I am no academic in this area—some of the biggest things that we saw come out of it was the broader collaboration between all of the different moving parts that make up the late-night economy.

In any of the research that has been done around this, there does not appear to have been specific research targeted to what was done with the transport solutions. I know in the last government I had a number of conversations with then attorney-general talking about some solutions. One of the concerns that we had was, when you look at different late-night options, one of the things that makes taxis so much more powerful over, say, a bus is that you are still getting the same net effect of a collaboration of people who are unrelated to one another highly intoxicated, potentially aggravated and you are just removing a problem from somewhere on the streets in the precinct into a bus and putting a potential driver at risk.

With the support mechanisms that we have seen through the rank marshalling, ChaplainWatch and the work we have done through the Queensland Ambulance Service as well as the Queensland Police Service in training our guys, when that works we can move people away from the precinct very quickly and very efficiently. What that has the effect of doing is freeing up those resources that are there for front-line service delivery and assisting people who may be in extreme need of help.

I think just looking at lockout times in the absence of the broader picture would be too narrow-minded. The other thing I want to say is that I have yet to hear any discussion about preloading. As an industry, we are acutely aware of how intoxicated people are coming into the precinct. If you are just looking at it as an issue of those precincts without looking at broader liquor licensing and alcohol sales then you are going to miss the mark no matter what you do.

**CHAIR:** Mr Wash, can I clarify something you said in answer to the member for Moggill. You referred to other governments adding more plates or more licences. What are those other governments?

**Mr Wash:** I will qualify that—New South Wales and Victorian governments. When they have sought to address these issues in the past, they have sought to address them by releasing additional taxi supply into the marketplace.

**CHAIR:** Are you referring to the New South Wales government accepting Uber?

**Mr Wash:** I am not referring to Uber at all.

**CHAIR:** That is what has occurred.

**Mr Wash:** That is not part of the solution from the point of view that you are dealing with a body who is operating outside a regulatory framework. The collaborative opportunity there in terms of getting meaningful outcomes is limited at best. I am talking about historical things such as the Newcastle solution and solutions in the Kings Cross region where additional supply has been released in an attempt to address those issues.

**CHAIR:** I will have you, on notice, table the number of additional plates or licences in those outcomes.

**Dr ROWAN:** Mr Oliver, I wanted to go back to your evidence in relation to some of the deficiencies of the legislation, as you alluded to those four areas around staff training, venue accountability, venue design and staff ratios in the current proposals. I wanted to ask about two things—one was in relation to venue design and whether you have any information about how critical that is to reducing some of these instances that occur in entertainment precincts. My second question related to some of the incidents that take place, through the experience that you and your members have had, in relation to repeat offenders—in other words, the individuals who are committing these acts. Again, we have heard evidence earlier today that there is a small group of people with antisocial behaviours who seem to be committing the vast majority of offences. In your experience, is it a small group who are repeat offenders who need to be dealt with in a specific way? Also, do you have any comments around venue design?

**Mr Oliver:** If I use my experience, I am also the compliance officer for the Nomads backpacker group. I run a 5 am venue on Magnetic Island called the Full Moon event, which is a Queensland premier event, and have done for the last nine years. I was given the opportunity to turn my environmental ideas into lowering alcohol related violence in that particular venue. It has to do with lighting. It has to do with security. It has to do with security wearing tactical vests and wearing high-visibility vests. It has to do with stopping problems at the door. We had probably over twice the number of security that are required on our licence and we made sure that security are very active and present.

There is no offence in Queensland to be intoxicated in a licensed venue. We would rather have an alcohol management system where wrist bands are changed, those patrons are given water and kept in the venue. They are not served and supplied liquor. But we found it very problematic to evict people to the kerb; we would rather look after their safety instead. Those things have been implemented for over nine years. As a result, our incidence rate of violence is one of the lowest in the state. From a personal point of view, environmental design is far more than painting a wall a different pastel colour. It has to do with how the venue operates. The legislation itself needs to support that. As I said, when the venues find money tight, they will absolutely reduce security numbers. They will absolutely reduce training requirements in the venue. It is not supported outside of Brisbane—that is, as far as environmental design is concerned.

As far as the groups are concerned, in principle we do agree that the ID system will assist and in principle we do agree absolutely with the banning notices to identify these people. The problem that we have with the ID system is that currently we can accept every driver's licence in the world and currently we can accept every passport in the world. My surname is Oliver. It can be a first name. It can be a surname. That means that the software must identify whether that is my first name or my surname. Currently our members are probably overriding these systems for about one in eight patrons. So for every eight patrons we have to overrule. If that becomes regulatory and we have to get a report every time we overrule or it comes under question because Big Brother is watching, that will be problematic. An ID system in itself is a great idea, but it should be left up to the venue to implement and regulate that process.

**Mr BROWN:** Mr Oliver, from your submission obviously you have a key focus on training—RSA and management of liquor licensing. I was disturbed by reports last week about shoddy training being endemic in the security industry that said that 80 per cent of security guards qualify after less than a fortnight's study. A third of the qualifications come out of Queensland and yet we only employ 20 per cent of them. The authorities said that they felt that public safety was compromised. Do we as a government need to look at the qualifications of security officers and what course they do with regard to Queensland as a holistic approach to deal with alcohol fuelled violence?

**Mr Oliver:** Thank you for your question, and if I could split it into two responses. Those media reports do not take into account some other issues of other states. If you look at people going interstate on mutual recognition acts, some other states do not licence security if they are not permanent residents of this country. So there are states in Australia that will not licence someone unless they are an Australian citizen or permanent resident. Queensland does. The only way that people who are working quite lawfully in this country on visas—study visas or whatever—can obtain a licence in those states is to go via Queensland. So the statistics themselves were used to justify poor training standards in Queensland and I would suggest that there are other reasons. So that is the first statement.

The second thing in relation to training standards is that we are all trained to a national competency. My biggest concern is Queensland law is significantly different and because we work in a very regulatory environment in security I believe that the state government should specifically identify colleges with national competencies that relate to Queensland. We are training security officers online, interstate or whatever. They do work here in Queensland and they have no knowledge of our specific industry requirements. So I do believe that the regulatory authority can assist in nominating RTOs that train in Queensland law and be approved in other states where at the moment they accept everything.

I just want to make one quick comment, because I know we are short on time. A few times now there has been discussion about trying to draw a line between alcohol and drugs and no-one has actually mentioned the fact that there has been an amendment to the Liquor Act that makes alcohol and drugs all come under the same category of intoxicated persons under section 9A. It interests me when people say that someone is under the influence of ice, for instance, and say that he is intoxicated, and legally that statement is true under section 9A, because 9A does not just involve alcohol; it relates to drug and intoxicating substances. The reason we cannot differentiate between those is because the act does not and that was an amendment to this act in the last few years.

**CHAIR:** Thanks, Mr Oliver. You are right: we are unfortunately out of time. I thank all of you for coming in this afternoon and for your submissions. Thank you.

**HALL, Professor Wayne, Director, Centre for Youth Substance Abuse Research, University of Queensland**

**KYPRI, Professor Kypros, Centre for Clinical Epidemiology and Biostatistics, School of Medicine and Public Health, University of Newcastle**

**PETHERICK, Dr Wayne, Associate Professor of Criminology, Bond University**

**CHAIR:** Good afternoon, gentlemen. We will start with Dr Petherick and proceed through the rest of you. Please provide a five-minute opening statement.

**Dr Petherick:** Ladies and gentlemen, thanks very much for having me here today and for hearing what I have to say on a matter of considerable public importance. I begin by saying that you are well aware of my position that lockouts and early closing times are not necessarily the best way to effect a change. However, I do not want anyone to think I am soft on crime and I do not want to give anyone the impression that any harm, including a number of unfortunate deaths, are simply part of doing business. After much deliberation I decided there was no best place to start except to say that I have read the same studies you likely have and that I have opinions about alcohol fuelled violence. I say so-called alcohol fuelled violence because the term itself is vague and difficult to measure accurately, as is evident from proxy measures used by many studies. Perhaps more importantly, it is somewhat misleading and many studies acknowledge that even the proxy measures used to quantify associated problems are themselves problematic. It is my opinion that alcohol fuelled violence over-represents a role played by alcohol and intoxication in any given event and undermines the role of group and social behaviours such as face saving and individual level behaviours such as machismo.

Another factor undoubtedly at play is that of binge drinking. We know that about 85 per cent of patrons consume alcohol or drugs at venues other than the nightclubs and pubs where they spend the late evening and early morning hours. Many of them are under the influence of alcohol when they arrive and by many, if not most, definitions this preloading is binge drinking. We may have a distorted view of the role played by alcohol because, by default, any violence in an entertainment precinct can be inappropriately mislabelled alcohol fuelled violence regardless of the many possible roles that alcohol may play. This may increase our perception of the incidence and prevalence of alcohol related disorder. Without going into a great amount of detail, many studies show that community perceptions are shaped largely by media coverage and therefore we should be very judicious in our use of studies that rely on community surveys and public surveys in terms of driving legislation to change problems. As one example, the media reporting one crime over and over and over again will increase the public perception about how common that crime is and so I would be cautious about using public perceptions about the prevalence of alcohol related violence as a yardstick by which to drive legislative change.

I have read the studies showing about a 20 per cent reduction in violence per hour reduction of trade and I understand that this may seem like a lot and worthy of more broad attempts to tackle the problem. As a criminologist I understand that we will never eradicate this problem while the underlying cultural and psychological issues exist, regardless of any attempt to legislate them away. I am also—and with all due respect to our law-makers—concerned about the degree to which the proposed laws mark the dissent into a nanny state where we overprescribe certain behaviours. It is important also to understand what a 20 per cent change means in terms of the base rate of behaviour. If we consider Fortitude Valley as a local example, it is estimated that about 30,000 people per week use the Valley precinct. This equates to about 120,000 people per month for approximately 18 assaults per month. If we do the maths, that means that people in the Valley precinct are assaulted at the rate of about one in 6,666 people. If we look at the state average for assault and compare that to the population, we see that about one in 360 people are being assaulted. I acknowledge that there are some tragic events that we could undo if we could, but in the grand scheme of things that rate of assault is actually not that bad and definitely not as bad as many believe. If we undermine this base rate by 20 per cent by bringing in a one-hour closing, that means that we will eliminate or reduce the number of assaults by approximately 3.6 assaults per month or approximately 0.9 assaults per week. Again, I would suggest that the problem is not as bad as some would have us believe.

Some of these assaults can be addressed and I believe that the way to do this is through community action through existing rules and regulations. Many of these can be prevented through addressing the environment such as crowding and competition for services. As stated, preloading is a community problem that is being dumped on the doorstep of the club workers, security guards and management and once on the premises it is their problem to manage and there are many good strategies in place to do so. Education campaigns in this regard have been shown to be effective as long as they are long term and on message. It is my opinion that the many one-punch assaults that

have been perpetrated are perpetrated by predatory individuals operating outside of normal social conventions and therefore will be less amenable to the proposed legislation and legislation like it. An examination of the comments made on social media by some alleged offenders show that many of them are out looking for trouble. They will continue to do so regardless of the laws or policies put in place. History has shown us this is most typically the case in wanton acts of predatory violence. Once again, thanks for the opportunity to be here today.

**Prof. Hall:** Thank you for the opportunity to be here. I will just say something fairly briefly. I think the first point to make—and I heard some of the previous submissions make this—is that somehow the relationship between alcohol and violence is incredibly complicated and all very fuzzy. There is an abundance of evidence from time trends with regard to the amount of alcohol consumed related to violence; case control studies meaning comparisons of people who are injured or injure others compared with people who do not, showing intoxication is much higher in those groups; longitudinal studies where we follow large representative samples of the community and find that it is the heavy drinkers who are much more involved in assaults and injuring other people; and most particularly—and I guess this is a central concern here—the effects of reducing alcohol access by reducing trading hours, which is very different from lockouts. There seems to be a lot of confusion with lockouts, which I think are a dumb policy because they just lock the drunks up inside to be all thrown out at the same time. It is reducing trading hours we want to do, not lockups. Reducing trading hours and increasing price are the most effective ways to reducing consumption and alcohol related harm. The Newcastle experiment, which Professor Kypri will talk about in detail because it was work that he did, has shown a 20 per cent reduction in assaults. I would note that 20 per cent is also the reduction that random breath testing produced in fatalities and injuries from driving which was another public policy the alcohol industry fought tooth and nail because it said it would reduce employment and reduce the viability the industry.

The other important point I think is the comparison between Newcastle and Geelong. I think the other thing that needs to be remembered—and, again, Professor Kypri will talk about this in detail—is that we have tried a lot of the proposed solutions such as identity checks and accords between publicans and police. It was tried in Geelong and it had no impact at all. We have not seen or heard the comparison between the experience in Newcastle and Geelong, where all the alcohol industry favoured solutions were implemented and alcohol related violence went up. There is abundant evidence, and not just from the Newcastle experiment. There is more recent evidence that Professor Kypri can describe that has been replicated in New South Wales in the Kings Cross area with the introduction of similar sorts of restrictions on trading hours. We know it is not rocket science. Economics 101—reduce the amount of time people have to drink, increase the price, reduce the amount of alcohol consumed and you reduce the amount of harm that is caused.

No-one is saying that reductions in trading hours are all that we need to do. This is a straw man that industry keep putting up. We need to do a lot of things, particularly with regard to the issue of preloading. We need to be regulating the off-licence sales of alcohol from bottle shops. I do not think there is any doubt about that. A lot of the measures here are really within the purview of the Commonwealth government. They relate to taxation of alcoholic beverages and setting minimum legal prices. That is how we reduce binge drinking, which is a major problem.

I think the other point to make about alcohol related harm is it is not just assaults. There are lots of injuries. People fall over, they hurt themselves and they hurt others and it is not just the number of assaults reported to police, which are the figures that we have just heard about with the reduction; it is the large number of people who end up in emergency departments with serious injury from fights that are not reported to police. There is a lot of this that just goes unreported, because what we have in the alcohol area is an evidence policy mismatch that the industry supports the policies of the least evidence in favour of them and so it is always about education, about responsible server training, about self-regulation and we have seen that sort of particular policy tried and failed. I guess the other point I would emphasise is that whatever government decides to do they should be evaluating it. One of the big problems in this area is that we get policies implemented, trialled and not properly evaluated, so we end up not learning from the experience and particularly not learning about what does not work as much as what does work. What I think we need is much better publicly available data on alcohol sales and consumption and data on alcohol related harm that is publicly available for competitive evaluation that should be made publicly available for debate. Thank you.

**Prof. Kypri:** Good afternoon. May I table this figure?

**CHAIR:** Is leave granted? Leave is granted.

**Prof. Kypri:** There should be a copy for each member of the committee. I am going to come to the figure toward the end of my discussion, but it was published today on the New South Wales Bureau of Crime Statistics and Research website and so it is in the public domain. My evidence is going to stay  
Brisbane

pretty close to my written submission, which reflects a discussion between myself and Mr Furner and colleagues in Newcastle just before Christmas. In my written submission, I provided 10 items. Eight of them are articles in peer reviewed scientific journals, including some review articles that I am going to start with. The last item is an example of the kind of law that I think would make a lot of sense based on the evidence from California and another item is a Bureau of Crime Statistics preliminary report on the effects of what occurred in Sydney.

The first two papers are systematic reviews and I want to take a moment to explain what they are. Systematic reviews have become a pillar of health science and, increasingly, social science as a way of reviewing the scientific evidence in a way that other people can trace the lineage of the conclusions one might reach from examination of that evidence to protect against cherry picking or a sort of selective review. You can replicate the search strategy, the databases and so on and the evaluation of each paper.

The two reviews in my written submission are from Tim Stockwell and colleagues in 2009 and from Hahn and colleagues in 2010. I am just going to read to you very briefly the conclusion of the Stockwell review. They examined 49 unique studies from many countries concerning the effects of trading hours and violence. Forty-nine met the inclusion criteria of which only 14 included baseline and control measures, so they excluded studies that did not permit some sort of control for competing explanations for the findings and were peer reviewed. Among those, 11 reported at least one significant outcome indicating adverse effects of increased hours or benefits from reduced hours. Controlled studies with fewer methodological problems were also more likely to report such effects. Tim Stockwell is a former director of the National Drug Research Institute in Perth. He is now and has been for some years in British Columbia performing a similar role.

In the other review conducted for the US Preventive Services Task Force, which had a different kind of focus but has been published to guide policy in the United States, they found that there was sufficient evidence in 10 qualifying studies to conclude that increasing hours of sale by two or more hours increases alcohol related harm. They also examined studies of changes of less than two hours and they found that the evidence from six qualifying studies was insufficient to determine whether increasing hours of sale by less than two hours increases excessive alcohol consumption and related harm. That was the status of the evidence in 2009/2010, before we knew much of what had happened in Newcastle and Sydney and to two other important locations, the country of Norway and Amsterdam, which I am going to tell you about now.

Items 3, 6 and 9 in my submission are papers describing the evaluation of the Newcastle experiment concerning the effects of reductions in trading hours so, in fact, closure was required of the premise at three or 3.30, with a lockout of one or 1.30. The effect was a one-third reduction in assaults—in fact, 20 per cent per hour of trading—and effects have been persistent over the period since 2008. Assaults are now half what they were before those restrictions were implemented. There was no evidence of displacement to neighbouring areas. There is an area called Hamilton, which is walkable from the central business district of Newcastle, and the trend that had been going for seven years in Hamilton continued in the years that followed. Some of the strategies were voluntarily introduced and then imposed by government, but not the restriction in trading hours. In the years that followed, we did not see significant reductions in Hamilton.

The next bit of evidence is the Norwegian study by Rossow and Thor Norstrom. This was very important because, in contrast to what had gone before, this was started by a law that permitted municipalities to set trading hours. In fact, 18 cities modified their trading hours in the first decade of this century. Ten of them restricted hours, three of them extended them and five did both. They extended and then restricted, having seen that there were problems. This all happened between the hours of 1 am and 3 am, so there is a fair amount of uniformity to start with and 18 different experiments, in contrast to what we have in Newcastle and Sydney, which are just two. They found a 16 per cent change in assaults per hour of trading, that is, where trading increased by an hour, the average increase in assaults was 16 per cent; were it reduced by an hour, the average reduction in assaults was 16 per cent. That is actually fairly similar to what we found in Newcastle, where we saw one-third for a two-hour change in trading. It extends that literature that I referred to before, which expressed some hesitancy to reach a conclusion about smaller changes, which are what we are talking about, as I understand it, in Queensland.

Then there is a study by de Goeij and others in Amsterdam, where there was a one-hour increase in central Amsterdam and they used surrounding areas as control sites. They went from 3 am to 4 am on week nights and from 4 to 5 am on weekends. They found a one-third increase in ambulance attendances. That covers assaults, but also other unintentional injury, as Professor Hall related.

Finally, I want to refer you to the Bureau of Crime Statistics and Research report, which is in my submission. That was a preliminary study in which we looked at the first eight months of change after January 2014, where the restrictions were implemented in Sydney. It found large reductions in both Kings Cross and the Sydney CBD and no evidence of displacement. I want to now draw your attention to newer evidence, which is this chart. Unfortunately, this should have been printed in colour, but let me talk you through the three lines on it. The dark line at the top is the Sydney CBD. The scale for that is on the left-hand side. The assaults were between 100 and 200 per month in the period preceding January 2014, when they fell. In fact, the overall fall is about 20 per cent. The line that is intermingled with that is actually Kings Cross, but the scale for that is on the right-hand side. It is a smaller area geographically. The base rate assault count is lower, but it falls much more dramatically, in fact, by 45 per cent in the 16 months that followed that change.

I have added Newtown below, because it has become a kind of focal point. Newtown is just south of the CBD. It is not comfortably walkable, but there are buses and trains, so it is quite plausible that there would be displacement to there. Many people have claimed that there has been displacement—many opponents to this regulation. What you see is that there is a great deal of random variation, as there was in the pre-change period, but there is no significant increase. I would ask you to consider the scale. Once again, we are talking about 10 to 15 assaults per month in Newtown, compared to about 10 times that in the CBD. For a moment, imagine a 15-litre beaker of water next to a one-litre beaker of water. If you displace 10 per cent of that 15-litre beaker into the one-litre beaker, you would notice it. This is a pretty good indication that that is roughly the difference in the assaults rate, the base rates, that we have not seen displacement. In fact, we find that there is no evidence of displacement, either geographic or temporal, in any of the localities that are around the Sydney CBD. Thank you.

**CHAIR:** Professor Kypri, turning to the document that you have tabled, is it correct that Newtown is not covered by the New South Wales laws?

**Prof. Kypri:** That is correct. I should have mentioned that it is just outside the boundaries, to the south of the city.

**CHAIR:** Why is there a reduction? Are they self-regulating?

**Prof. Kypri:** No. There has not been a reduction. There has essentially been no change over the period. There is some suggestion that there was a slow increase in the period prior to the restriction and there has really been no evidence that there has been a dramatic—In fact, what people are saying in the debate about this is that the assaults have simply increased in Newtown as though the problem has merely been displaced. This shows that that is not the case.

**CHAIR:** Professor, I did see a news article recently about some controversial opinions around some reports and research you have done, and also that done by Dr Fox. Could you explain to the committee your view on the material that was delivered by Dr Fox, please?

**Prof. Kypri:** Yes. Dr Anne Fox is a British anthropologist. She was paid by Lion, the alcohol industry body, to produce a report. They commissioned a report from her on causes of violence in the night-time economy. She published a 99-page report, quite nicely written, but very deliberately, it seems to me, avoidant on the body of evidence that seems not to agree with her position. So she has been highly selective in what she has drawn attention to. Her basic argument is that alcohol is not a cause of violence. She downplays the role of it and focuses more strongly on 'cultural' influences on violence. I am happy to say more about that, but that is the nutshell.

**CHAIR:** Professor Hall, I was interested in your comment about the Geelong trial. We have heard some evidence today about a short trial of last drinks in Melbourne. Could you discuss for the committee's benefit what happened in Geelong, please?

**Prof. Hall:** Yes. The work was done there with a colleague of Professor Kypri, Professor Peter Miller at Deacon University. They were observing rates of alcohol related violence and harm in the Geelong region over a period in which they introduced liquor accords, they increased policing, they introduced ID checks, there was a public media campaign to discourage binge drinking and violence. Alcohol related assaults went up in Geelong over that period, whereas they declined in Newcastle.

**CHAIR:** Why did they go up?

**Prof. Hall:** I do not know that it was attributable to those things. I am just saying that they did not stop it from going up.

**Prof. Kypri:** May I just add, I think there was earlier debate about Melbourne. Prior to this hour, there was some confusion about what has happened in Melbourne. Melbourne itself has not had restrictions in last drinks; what they have had is lockouts. There was a claim earlier on that they are

re-examining or reviewing the efficacy of those lockouts. The evidence on lockouts is not strong. There are about six studies and I would say it is equivocal at best. The effective strategy is reducing alcohol consumption and that means either last drinks or closing premises.

**CHAIR:** Dr Petherick, you have heard Professor Kypri refer to the Stockwell review in 2009, which showed a decrease in harm as a result of reduced trading hours. What is your opinion on the Stockwell review?

**Dr Petherick:** I think we have to be a little bit careful in any of the studies that show a reduction, because effectively what we might be talking about is a reduction in exposure. I would raise probably the Kings Cross experience here, where a large number of businesses in Kings Cross have shut down and so people have said that the laws are effective in reducing violence in Kings Cross; what they actually did was reduce patronage in Kings Cross. Anecdotal evidence that was made available to me suggested about over 50 per cent of the businesses in Kings Cross had actually closed.

**CHAIR:** The committee has heard evidence, both from Professor Kypri and the Newcastle police, showing that licensees and business has increased, not decreased. In fact, I think out of the 14 establishments, 12 are still in operation. There has been an increase in licensees in the Newcastle—

**Dr Petherick:** I was referring to Kings Cross. I spoke to a friend who lives down there and he said that it is like every second business you walk past is now out of business in Kings Cross. He was a police officer down there for a long time.

**CHAIR:** Professor Kypri, do you have something to add?

**Prof. Kypri:** Yes. My preference as an expert in behavioural sciences working in this area is to stick to data. I do not rely on reports from my friends. Newcastle and Sydney both went down this line; the industries both went down this line of saying that it would be disastrous. Undoubtedly, there were businesses that had to change their models in Newcastle. We have twice the number of premises there, but they are of a different nature. They attract a different market. Yes, there is a reduction in exposure. Part of the problem in Sydney is that it was attracting hundreds of thousands of people over weekend nights, such that the city of Sydney was having to manage the precinct of Kings Cross like a major sporting event. That is how they describe it: putting outdoor pissoires in place and being able to deal with the carnage. If you can supply all of the services that are necessary to run that economy and you are willing to do that and the public is willing to pay for it, that is a different matter. But there is enormous cost in being able to maintain a night-time economy with the kinds of services that are necessary to clear patrons from the area and so on.

**CHAIR:** Dr Petherick, what peer reviewed or scientific studies have you conducted with respect to your recommendations, either in your contribution here today or in your submission?

**Dr Petherick:** I have not personally conducted any research. I was asked to write the report because of a comment I made in an interview. I have previously done similar reports to this with specific regard to restrictions on trading hours and lockouts. I also taught the subject alcohol, drugs and crime for many, many years and the area of violent crime is a speciality of mine, so because of those things I was asked to prepare the report that I submitted.

**Mrs SMITH:** I want to go back quickly to Newtown, and you have those figures there. Are they under any restrictions in Newtown?

**Prof. Kypri:** The change that was brought in effective 24 February 2014 does not affect Newtown in any way.

**Mrs SMITH:** Can Newtown operate until 5 am?

**Prof. Kypri:** Yes.

**Mrs SMITH:** Therefore they have not seen an increase or decrease in crime and the behaviour in Newtown was obviously different, so it does not necessarily support that. If Newtown is open until 5 am and yet we have not seen an increase in violence, I do not understand the argument that for every hour you are open there is an increase in violence. Would it not suggest that it is just a different clientele?

**Prof. Kypri:** I am having difficulty following the argument, because nothing changed in Newtown so you would not expect the assault rates to change. They are going along at this level. If you were to reduce the hours in Newtown, you might find a 20 per cent reduction in assaults if you went down by one hour. That is what you would generalise from the data that is in front of you.

**Mrs SMITH:** But they are a lot less to start with anyway.

**Prof. Kypri:** Yes, it is a smaller area. It never had the reputation of Kings Cross. In fact, I would like to come back to Kings Cross in a moment because it has not always been like this, either.

**Mrs SMITH:** I wanted to touch on those issues. Newtown is not like Kings Cross, and I have the figures from the security people who appeared previously. In their submission they state that the Brisbane police district assault rate for 2015 is 256.8 assaults per 100,000 population. When you go to Sydney, Kings Cross and Newcastle you are looking at 1,652.8 and 700.7, so it would suggest that we were already at 63 per cent lower than Newcastle as our base. So are we really comparing apples and oranges?

**Prof. Kypri:** You have a population base rate there. We deliberately avoid using population base rates because there are all sorts of issues in coming up with the right denominator to permit comparing apples and apples, and it is fundamental in epidemiology that you would make sure that you had appropriate population data. Having the population data based on a census of who lives in the area is not appropriate because you have large numbers of people coming in. I do not really trust the population base rates; I would not use them.

**Mrs SMITH:** Did Newcastle have a casino in its safe night precinct?

**Prof. Kypri:** No.

**Mrs SMITH:** What is your view on the casino being exempt from these laws?

**Prof. Kypri:** It makes no sense to me that there should be an exemption for the casino. It is exempt in Sydney. There is a sort of carve-out for the casino, and I did not see any rationale presented for that.

**Mrs SMITH:** Are we comparing apples with apples? Everybody knew the reputation of Kings Cross for many, many years. Are we doing the right thing by comparing Kings Cross to the Queensland solution or comparing the Valley to Cairns? Do you have any comment to make on that?

**Dr Petherick:** The comment I would make with regard to that is one that Professor Kypri raised with regard to the Fox study, and that is that she places a fairly heavy premium on culture. It has been found repeatedly and over a very long time that culture plays a significant role in the perpetration of violence. So we must consider culture, and I think in that particular report that was probably appropriate. I think the thing that we have to be careful about doing—and I did mention this in my report and my opening remarks—is that we are potentially introducing legislation that has significant side-effects to industry. I understand there are some studies that say, yes, the population of people using this area has increased. One study showed there was a nine per cent decline in people drinking and a 10 per cent increase in people doing other things there, so what we lost on the swings we gained on the roundabouts.

Having worked at a university for 18 years, I do know that a large number of my students over that time—probably tens of thousands of them—rely on work in the hospitality industry. I think that we have to balance the public good against the public bad, and the public bad is the potential loss to certain industries that certain sectors of the community rely on fairly heavily. I am not just talking about university students; I mean people with families, people who have mortgages and bills to pay. When I look at a base rate change, that is not a 20 per cent change or a 15 per cent change or a 50 per cent change. When I look at a base rate change on the prevalence or the incidence of a particular crime in a community and I see that the introduction of that legislation potentially undermines single digits worth of actual assaults, I would have to question whether that legislation potentially does more harm than it does social good.

**Ms PEASE:** Professor Kypri, there has been much talk today about perpetrators and how we have to manage perpetrators. My understanding is that many people would enter precincts to go out and have fun with no intention of becoming a victim or a perpetrator. Could you provide some support or conversation with regard to reducing the number of hours that alcohol is served and how likely those extended hours will impact on people potentially becoming either a victim or the perpetrator of violence?

**Prof. Kypri:** I will try and stick to what I have evidence for and avoid speculation. Exposure is a big part of that. You want to do two things: you want to reduce the number of people in these areas that are intoxicated, because that increases the liability for intentional and unintentional injury and other problems, and there are multiple ways of doing that. One of those is by reducing the number of patrons coming into the area. By moving from 5 am to 3 am, for example, in Sydney, what it did in part is make it more difficult for people to come in and remain there all night until the first trains start. We do not have really good transport data. The little that we do have for Sydney suggests that the number of patron movements has reduced, so there are fewer people coming in. If you are going to create a sort

of honeypot that is going to attract large numbers of people coming from the outskirts of the city or even beyond that, you have to be able to deal with what happens at three, four and five in the morning. By setting the restriction on last drinks earlier, you reduce the potential for both people with bad intentions and people who are coming in for innocent fun to end up with problems.

**Ms PEASE:** Dr Petherick, I wanted to ask you about comments you made with regard to the nanny state and whether we are enforcing public good against public bad. Perhaps you could elaborate on that, particularly in light of the introduction of antismoking legislation and drink-driving legislation that was brought in which have both been very successful. Can you elaborate on what you mean by public good versus public bad?

**Dr Petherick:** I guess a similar situation would be legislating that people must wear seatbelts and the number of lives that saved as well. I absolutely agree that there are certain types of things that we need to legislate against. When we talk about potentially thousands of road accidents caused by speeding and hundreds of thousands of deaths caused by not wearing seatbelts and stuff like that, we are talking about large harms as a general rule, and that tends to be what we want legislated against.

Having said that, I am not an advocate of the 'wild west' of the drinking culture. In fact, I agree wholeheartedly with Professor Kypri and Professor Hall, both of whom reference things like the California experience—simply reducing the availability of certain types of alcohol—which has had a very significant and positive effect on the rate of violence. I think that we have to make sure that we are legislating against the right things.

I have heard mention a couple of times about health related impacts and people having accidents. We are not here for the 'tackling disease related' legislation; we are here for the 'tackling alcohol fuelled violence' legislation, so I think we have to keep on message. When I look at the base rates of change, I look at the potential negative impacts to social behaviour and social opportunity and people's ability to earn a living, and in my opinion as a criminologist, doing what I have done for 18 years, the effect is probably not quite strong enough to bring in legislation with such a significant social impact.

**Ms PEASE:** I would like to raise again not just deaths but also the drain that alcohol related violence has on the police and health resources. We have heard about the impact that it has had on health workers and their families.

**Dr Petherick:** If I could just add one comment. Now, this is a bit of an unknown and, as I mentioned in my report, I said that we have to be a bit cautious about this. We have measured the impact of displacement to other licensed areas. One thing that we do not know is the impact from the licensed areas to residential and other community areas. Violence in the home is less likely to be reported than that which occurs in a public space, so there is a potential for displacement where people make a conscious choice not to use licensed precincts, where there are certain controls in place, and instead do their drinking at home. If alcohol really does play the significant role that some people argue that it does, then we are just as likely to see a significant increase in domestically related violence as we are a reduction in alcohol fuelled violence that occurs in a licensed or night-time entertainment district.

**Ms PEASE:** You mentioned at the beginning of that response that you had some data. Do you have that data that you can table here today?

**Dr Petherick:** Which data specifically?

**Ms PEASE:** The data that you just mentioned in that response to me that alcohol related violence will be dispersed and happen in homes and regionally.

**Dr Petherick:** No, that was my comment regarding that one thing that is distinctly possible. One thing that we have to be very careful we do not create a problem with is that displacement occurs into residential communities.

**Dr ROWAN:** Dr Petherick, what is happening with respect to the prevalence of antisocial personality traits amongst individuals in our community and the prevalence of other antisocial behaviours from a criminology perspective? I get the sense that there are a number of events taking place in our community, whether they are well publicised or otherwise. Is there any data or evidence that you are aware of in your field of criminology in relation to antisocial behaviours and personality trait disorders?

**Dr Petherick:** I think we have to be a little bit careful about not overstating the link between antisocial personality traits and violence, because the research in that area tends to indicate that antisocial people are more likely to commit financial crimes than they are violent crimes. But we also know that people who commit violent crimes at the extreme end of the spectrum do tend to possess

more antisocial personality type traits. We know that there is an increase in narcissism as well. That is actually caused by a fundamental lack of self-esteem, and all of those things are inherently linked. Violence and self-esteem are inherently linked, so when we have these extreme acts of violence—and I would probably refer to the ‘one punches’ here—what we are talking about is individuals with an antisocial bent. Those individuals are also less likely to follow the laws or the rules of prosocial conduct.

**Dr ROWAN:** I just wanted to come to Professor Kypri in relation to all of the harms that can happen as a result of alcohol consumption, violence being one of those and then a subset of that violence being that violence which occurs in our entertainment precincts. In the hierarchy of order of all of the harms that can happen in relation to alcohol, where does that sit compared to the other violence that we are talking about, whether it be domestic violence, whether it be accidents, whether it be medical disorders as far as renal failure or cirrhosis and all of those things are concerned? Where specifically does alcohol fuelled violence in the entertainment precincts sit? My follow-on question to that is: do you have any comments around the cost benefit of us focusing exclusively on that particular area in our entertainment areas and precincts compared to other areas?

**Prof. Kypri:** That is a good question. About half of the total burden of disease in Australia of injury and disease is due to chronic conditions—about a third of those are cancers attributable to alcohol, cirrhosis and alcohol dependence addiction. The balance is injury. I cannot tell you off the top of my head the proportion of injury which is assault. It is a substantial proportion. I would guess it is more than a third, but I do not know the numbers off the top of my head, nor what proportion of those are in domestic situations versus non-domestic situations. The proportion in domestic situations is considerable.

To the second question regarding the cost-benefit analysis, if you started to cost the externalities of this industry—that is, the assaults and other problems—and to my knowledge this has not been done, you would very quickly find that you could not possibly be willing to pay that cost because with one head injury to a young person, a young man—in fact, a young man who does not die when he is hit but requires lifelong care—you very quickly tip the health economic equation into a space where you could not possibly pay for the activity. You would not choose to pay for that activity. If we were having the discussion in possession of a proper costing of alcohol related harm in the night-time economy and in other environments, I think we would take this much more seriously than we currently do.

**Dr ROWAN:** That is what I wanted to come to. Whilst we all want to reduce alcohol fuelled violence not only in the entertainment precincts but anywhere else, there are other alcohol associated harms that need to be addressed as well. With limited financial resources from a government perspective, there needs to be a prioritisation of what is going to be the best social value benefit for not only taxpayers but consumers and the people of Queensland. What I am further wanting to ask is, in relation to New South Wales after the law changes that have occurred there, have they then gone on to address other matters associated with alcohol related harms and other elements which are delivering a social benefit to the community?

**Prof. Kypri:** They are doing a lot less than what I would like them to do. Frankly, you have to applaud a step in the right direction. We get a little bit too critical I think at times of government in balancing their various objectives. I say you have to grasp whatever opportunity comes. This type of intervention is pretty good value. You get to reduce a lot of assaults. To achieve a 20 per cent change in assault rates, compared with my colleagues working in cancer prevention, those numbers are unheard of. You do not get reductions in incident cancer for the kinds of costs we are talking about here—they are much lower costs than very labour intensive intervention required in medical health promotion spheres.

**Mr BROWN:** Professor Kypri, I am interested in an update on Amsterdam. You said that after they increased their liquor licensing from 3 am on weekends to 4 am there was an increase of—

**Prof. Kypri:** One-third in ambulance attendances.

**Mr BROWN:** Have they kept that 4 am licence regime or are they reconsidering?

**Prof. Kypri:** I do not know. I have been in touch with the authors. This paper was only published in the second half of last year. It was a fairly recent change. It was quite fresh. I do not know what the debate has been like.

**Mr BROWN:** Your studies have been peer reviewed. Is that correct?

**Prof. Kypri:** Yes, absolutely—in fact, robustly. On the Newcastle article that was published in 2011 there is a commentary from an editor regarding the methods that were used and discussing the findings.

**Mr BROWN:** You are not funded by any anti-alcohol lobby groups?

**Prof. Kypri:** No. My funding is from the National Health and Medical Research Council and the Australian Research Council and similar competitive grant funding agencies.

**CHAIR:** Professor Kypri, in response to the member for Moggill's last question you referred to a correlation of reduction in harm as a result of the laws that have been introduced in New South Wales. I think you were leaning towards the possibility of that happening in Queensland. Would you correlate that with the changes as a result of awareness programs of the smoking campaign and the lesser access to tobacco now in society?

**Prof. Kypri:** The advances in smoking were built on a bedrock of regulation. So what we see is the most visible bit of that which is the advertising on television; likewise with drink-driving. Both of them built on a very solid bedrock of regulation. In fact, the drink-driving laws were not popular when they came in, but they required enforcement and so on. There were some big changes. They are public health success stories—both smoking and drink-driving. I think this is of a similar order of magnitude in terms of reducing harm in the community.

**Miss BARTON:** Professor Kypri, I am looking at the statistics and the data that you provided the committee earlier. Forgive my naivety—I am not ordinarily a member of this committee; I am substituting today for another member who is unwell. But my understanding is that the legislation in New South Wales that is currently in place was introduced in January or February 2014. Is that right?

**Prof. Kypri:** That is right.

**Miss BARTON:** Looking in particular at the data for the Sydney CBD and Kings Cross—and I appreciate that this is not data that you have put together yourself but, seeing as you have given it to us to rely upon, I am hoping that you might be able to expand on what I am seeing. For the Kings Cross precinct between January 2011 and July 2011 and again between October 2012 and April 2013 and then for the Sydney CBD entertainment precinct between January 2011 and January 2012 and then again between April 2012 and October 2012 we were seeing decreases. Having provided this data for us to rely upon as to why the New South Wales example has been successful, could you perhaps provide some reasoning as to the decreases that we saw pre the lockout laws?

**Prof. Kypri:** Sure. In all assault data—and certainly it is true for traffic injury as well and other incident injury—you find considerable variability, a lot of random variation in a series. There is statistical analysis that you would do. You would control for the trend that preceded the intervention point, which is January 2014 in this particular case, and then see whether the slopes just in the fitted lines in a regression model differed and see whether there was any large reduction immediately afterwards, a step reduction. You would control for the random variation—your estimates would take into account the random variation from one month to the next. There is seasonal variation as well. You would have a term for seasonality.

I am not going to attempt to interpret any particular peak or trough in here because my focus has been on the January 2014 change. Then all of that becomes something I have to manage statistically. The more variability there is the more difficult it is to see a signal in the data. In this case it is a very strong signal; it shines through. The reductions are so large, particularly in Kings Cross, that you cannot fail to miss it, and the statistics reflect that.

This is actually the subject of a paper that has been submitted for publication and it is currently being reviewed. I was fortunate that the bureau of crime statistics put this on their website so at least it was foreshadowed what is likely to emerge. But also the preliminary report, which is published and is online in July this year, does not have as much follow-up in it, but it does have the same preceding series and it has the statistical tests in it which protect against the kind of random variation influencing the results.

**Miss BARTON:** But it is also entirely possibly—I am not an academic, so my language will not be academic—that there is a general ebb and flow. There will be ups and there will be downs in community behaviours and there will be cultural change between people who are born in 1999 who move on in their behaviours and people who might have been born in 2002, for example. So there would be ebbs and flows that you would expect to see in terms of people's behaviour generally over a period of years rather than a static line and then a significant decline.

**Prof. Kypri:** Correct.

**Miss BARTON:** So it is entirely possible that the decrease would have just happened anyway as part of the natural ebb and flow.

**Prof. Kypri:** No. That is where I would differ from you in that what we are seeing is a change that is substantially greater than would be expected by the chance arrival of an ebb or a flow. Yes, it ebbs and flows. The point of the statistical test is to see whether that variation that is observed is greater than you would expect by chance. So the reductions are so large that that is not a tenable inference.

**Miss BARTON:** Dr Petherick, I think it was you who referred to people being influenced by media and how people's behaviours have changed as a result of that. I remember the significant media that there was at the time coming from New South Wales. Obviously there was the tragic circumstance that led to the New South Wales government introducing the legislation that they have in place. Based on your experience—and I think you said it was 18 years experience—and your knowledge of how media might influence people's behaviour, is it possible that people's reaction to the incident is what has impacted behaviour, not solely legislation in isolation?

**Dr Petherick:** Absolutely. I think Professor Kypri made the point that when we tried to compare apples and oranges we need to make sure we do not have bananas in there ruining the fruit salad, to continue with the analogy. One of the things that you will see has come out in some of the studies is, yes, there was a reduction of X and Y. This happened in line with the introduction of lockouts or reduced closing times. But what is not often said is that there was also the introduction of a new liquor act at the time. What often happens around the time of lockouts is that police will naturally increase their presence to be there to monitor the behaviour of the people, because lockouts and closing times are known to be a problem because of the vastly increased congestion and competition for services.

What actually happens in those instances where you have increased police presence is that it can have a positive or negative impact on what we believe to be happening. People may see police and go, 'There is the police. I do not want to act badly because I may get arrested,' or it may be that people are going to behave in an antisocial anyway and they will be arrested. Then the official crime figures will increase as a result of the increased arrests. Then we will look at that and go, 'The lockout must have made people more violent,' when it has nothing to do with that at all. It is just the fact that there were more police standing there to see what was going on.

The short answer to your question is that there are other possible influences on the reductions or increases that must be accommodated within the research. Very often in a discussion section in a journal article you see something like, 'It is possible that this caused the change. Future research should factor this into their study design.' To conclude that point, the short answer is yes. There are other possible influences that may not be factored into the research design and/or the study outcomes.

**Miss BARTON:** In your opening address you made reference to preloading, which is something that we have heard about from other witnesses. We had one witness reference the fact that a rum and coke, for example, at his licensed venue would be \$9.70 but, if you were to go out and buy a bottle of rum and buy bottles of coke, it would significantly reduce the cost. A number of witnesses have made reference to preloading. One of the things that you also talked about was community action. My understanding of what you were saying was how we as a community can work together to try to change behaviours rather than necessarily prohibiting something to change norms and expectations. I wondered whether you could expand on that, particularly with reference to preloading.

**Dr Petherick:** To cross-reference a point made previously to a question asked by Dr Rowan, self-esteem and crime are intricately linked—inextricably linked even—and so too is self-esteem and problem drinking. We know that alcohol is often a type of self-medication people will engage in when they feel bad about themselves. We know that happens.

Where that causes a problem is in people becoming addicted to substances. The research that has been conducted on preloading both in Mackay and I think on the Gold Coast shows that about 80 to 85 per cent of people preload. They drink before they go out. The two reasons given for that are to be social and to reduce the cost of the night out. As I said in my opening, what it means is that many of these people are turning up on the doorsteps of the licensed venues already well on their way to problem behaviour.

My take on this matter with regards to what the community can do comes from having taught crime prevention and having implemented crime prevention in various cases that I have worked and given crime prevention advice to a number of different agencies, and that is when you engage the community they can work very effectively in reducing disorder. One of the other things that I am concerned about—and this has been shown through crime prevention research to be true—is that when we start to reduce the number of people in an area we thin out what is called capable guardianship. That is, people going about their normal business act as a crime prevention measure.

**CHAIR:** Thank you, Doctor. Unfortunately, we are running out of time, but I understand the member for Lytton has a very quick question.

**Ms PEASE:** Professor Kypri, there has been much talk about the impact that potentially closing earlier will have on the night-time economy. Could you elaborate on that? Do you have any commentary on that?

**Prof. Kypri:** I do not have data myself. I do not study the performance of the industry and so on. I can say that there is research examining Newcastle and Geelong. Professor Peter Miller has produced a report showing that in Newcastle the industry has changed quite a bit. The nature of the outlets has changed. It is a vibrant environment. We heard a number of claims when this was going on in 2008-09 that it was going to destroy night-life in Newcastle, and I do not think that is the case. That is not what the evidence shows from Professor Miller's study and it is not what people are saying in Newcastle.

**CHAIR:** Thank you all for your evidence here today. It is much appreciated.

**BROWN, Mr Tony, Alcohol Reform Campaigner, Newcastle**

**CHAIR:** Mr Brown, we encourage you to make an opening statement and then we will proceed to questions.

**Mr Brown:** I would like to thank the members of this committee for inviting me to address them this afternoon. In doing so, I pay my respects to the traditional owners and custodians of the land. It is well known that the alcohol burden falls disproportionately on the Aboriginal community. It is also less known that the Aboriginal community has more non-drinkers than the white community. I pay my condolences to the Miller family for the tragic loss they recently had and the many other parents who are afraid and whose children are unfortunately assaulted because of alcohol related violence. I think that shows the salience or the importance of this committee and its functions. My encouragement with respect to all members of the committee would be to adopt an evidence based approach, to adopt a bipartisan approach and to really encourage and persuade their fellow members that the overwhelming requirement of all states is to protect the lives of our young people.

By way of background, in terms of my education I have an economics degree, a graduate diploma in economic studies and an honours degree in law. I have been admitted to practise in the High Court of Australia since about 2001 and the Supreme Court of New South Wales. I am currently the chairperson of the Newcastle community drug action committee and New South Wales's first multicultural drug action committee. I have been an alcohol harm prevention advocate since about 2000. In 2007 I led the Newcastle community which consisted of over 150 residents, small business and concerned citizens in the section 104 undue disturbance complaint which the police initiated which led to the introduction of the Newcastle conditions, which is primarily a modest reduction in late trading hours from 5 am to 3 am and a one-way door policy of one o'clock. There was also a package of other measures they introduced which address drink supplies.

More recently, I have been assisting the community in Kings Cross which culminated in Barry O'Farrell in January 2014 introducing Kings Cross in the central Sydney conditions which equally consisted in this case of a last drinks policy and a one-way door policy plus a package of other measures. I have been following the Queensland situation closely for a number of years, and more recently it has brought it home to me because my daughter is a resident of Brisbane and likes to go out and enjoy herself.

The committee has heard a lot of material. It puts a very strong onus on peer reviewed evidence. There is a lot of speculation out there, but it needs to be based on a robust evidence led basis. I reiterate the need to put this beyond politics. I leave myself open now for a grilling and questions from the committee.

**CHAIR:** Thanks, Mr Brown. I do not know whether you were here all day—

**Mr Brown:** Yes.

**CHAIR:**—but certainly in the evidence given today and at other venues where the committee has travelled we have heard that people who are affected by drugs consume more alcohol. We have heard examples of drugs not being the problem and why this legislation is forthcoming but alcohol being the primary drug associated with the introduction of this bill. I would like to get your feedback on the effect of people under the effects of drugs in our society.

**Mr Brown:** In closely studying this problem of alcohol related violence for a number of years, I think it is important to take one step back and examine the motivation of the various parties. One of those things I have been studying is the industry. Their modus operandi in terms of protecting their financial interests includes, like big tobacco, is a process of deflection, denial, trying to blame others and introducing misleading evidence to try to cloud the issue. I have probably documented about 15 different excuses. Having witnessed all the presenters today, I did not witness anybody from the industry or anyone closely associated with it take any responsibility whatsoever.

In my written submission, over a number of years in different communities the industry has been totally devoid of taking any responsibility. One of their classic ploys is trying to blame everything else. That includes, for example, insufficient taxis, not enough police, individual responsibility and drugs. The focus of my approach is that the industry should be working with the authorities and with the community and accepting a shared responsibility. All we have heard today from the industry is that it is the individual's fault.

In terms of drugs, last year as chairperson of the Newcastle Community Drug Action Team we organised an ice forum and over 150 Newcastle citizens showed up. I undertook some research on the impact of crystal methamphetamine or ice compared to alcohol. We were very fortunate to have a great speaker there, Associate Professor Adrian Dunlop, who is New South Wales's chief addiction specialist

and director of alcohol and drugs for Hunter New England Health. His basic view was that the alcohol problem is 10 times worse than that of crystal methamphetamine. I brought some statistics along today in anticipation that the industry would roll out this worn, old excuse that it is the drugs. I am happy to pass you my one document afterwards.

Just quickly, the Victorian ambulance did a really good study in terms of their emergency attendances. They looked at all alcohol and other related drugs in terms of proportion of emergency attendances they make to those types of call-outs. For the year 2014—these figures were only produced towards the end of last year—for the total of Victoria, a rate of 100,000 population, there were 2,880 alcohol-only attendances, whereas for crystal methamphetamine there were only 267. This is based on the Victorian ambulance statistics. In other words, the number of emergency attendances or call-outs to a drug or alcohol related problem were 10 times higher for alcohol than for crystal methamphetamine. The rate of attendance for alcohol was higher than the combination of benzodiazepines, non-opioid analgesics, cannabis and all amphetamines. We know from the total drug use population that only about two or three per cent of that population consume amphetamines, particularly crystal methamphetamines. Of that very small proportion, 75 per cent are regarded as casual users—not those we see depicted on television.

If we address this problem in terms of what is the most harmful drug, it is, first, alcohol; second, benzodiazepines; third, non-opioid analgesics; fourth, cannabis; and, finally, then comes all amphetamines. Yes, there has been an acknowledged increase in emergency department admissions with people on crystal methamphetamine, but we must consider this in the proper context of that versus alcohol. I am sorry for that longwinded answer.

**CHAIR:** No, you are all right. I want to go to your submission. You refer to them as OWDs— one-way doors. There are two parts to this question that I would like you to answer. You refer to patrons quickly adjusting to the new entry controls as proven in Newcastle. I would like to hear from you on that. Secondly, you talk about what I would deem is a tool of police in being able to direct at-risk persons off the streets and return home rather than milling around and causing problems.

**Mr Brown:** As part of the disinformation put out by the industry, I understand the committee may have received a submission from ALH, which is 75 per cent owned by Woolworths, that looks at the Melbourne experience. The Melbourne experience did not, as I think Professor Kypry pointed out previously, adopt the last drinks, reduced late trading hours. It only had a lockout. Individually, researchers such as Professor Miller say that one-way door policies—I much prefer that terminology to lockouts. For example, when we go to the supermarket and it is closed we do not come home and say, 'We are locked out,' or if we do not get to the library by 5 pm the common terminologies are, 'Mum, I have been locked out of the library.' So why are we not applying the same non-aggressive type of terminology to one-way door policies? It is my view that in consideration of a package of measures with the first and foremost being earlier last drinks, one-way door policies are reportedly useful for the police in terms of moving on stragglers and people who want to cause trouble. As part of the package I would support the adoption of a one-way door policy, but I would support the evidence that it is ineffective by itself.

**CHAIR:** The other part of the question I put to you was that patrons quickly adjust to the new entry controls, as proven in Newcastle. Can you add some commentary to that?

**Mr Brown:** The typical narrative from the AHA back in 2008 in Newcastle and for many years after was that these 'draconian conditions would devastate Newcastle'. We have heard this repeated across Queensland, in Cairns and in Kings Cross. But the reality proven by the research through Professor Miller from Deakin University was that the population in Newcastle, including the young patrons, adapted relatively quickly to the new conditions. As I said on ABC Radio in Brisbane this morning, a recent survey done by Newcastle council, details of which I have provided in my written submission, shows that there is about 80 per cent to 85 per cent of not only community support for these conditions but also, importantly, the support of patrons. Young people adapt to the changed conditions quite quickly.

**CHAIR:** I refer to data in your submission on page 10, which was sourced from the Newcastle police in July 2015. It talks about an overall increase in licensed premises of 110 per cent. Is that the most recent data that you can put your fingertips to?

**Mr Brown:** Yes, it is. It is really important to remember—and I think the lessons have been learnt with respect to Queensland—that it can be a triple win. I have a business consultancy practice myself. I have worked for a lot of businesses and I appreciate their financial requirements. We have seen a triple win. We are seeing more than a 50 per cent sustained reduction in alcohol related assaults over eight years. I am not an epidemiologist. My eyes turn into poker machine dials when people start

quoting these numbers. In very practical terms, what this means in Newcastle—and it can mean exactly the same for Cairns, Townsville, Airlie Beach and all those night spots—is that this has prevented approximately 5,000 young people from being bashed and assaulted on our streets at night. It has meant that the brave nurses like we have seen this afternoon and the police officers are not seriously injured, assaulted and abused on a regular basis. Reducing that level of malevolence by a mono-economy of late-trading binge barns has allowed more responsible, smaller, licensed premises to flourish. In real practical terms we have seen more than a doubling in the number of licensed premises in Newcastle, which refutes the hysteria and scaremongering from the industry that it would be devastated. What this has practically translated into in Newcastle is more jobs and more opportunities for our young people. With respect, I do not think any responsible government or opposition should deny their communities that.

**Mrs SMITH:** There are a couple of areas I wish to touch on. First of all, you made comment about what the industry has not done from what you have heard and seen and put blame on them for not taking responsibility; is that correct?

**Mr Brown:** Yes.

**Mrs SMITH:** We were in Townsville and, for example, they had come up with a solution that they would not be selling two-for-one drinks or half-price drinks. So as an industry they have come up with that on their own for their community. I know in Cairns the industry got together and they looked at introducing scanners and banning notices and working very closely with police. There were a couple of other local solutions to the issues that I cannot think of off the top of my head. At the end of the day the industry had said that it is bad for business if we have undesirable people. I would challenge that comment that some of the industry have not done anything when things like saying, 'We will not be supplying two-for-one drinks,' as Townsville came agreed to, show a little bit of initiative. I just wish to clarify that.

**Mr Brown:** Could I respond that question, please?

**Mrs SMITH:** Please do.

**Mr Brown:** I have memory problems. There is a plethora of proffered solutions out there, some that I would call, without disrespect, 'snake oil' solutions. Those unfortunately predominantly come from the industry because at the end of the day, unlike police, who have a sworn duty to uphold public safety, unlike medical practitioners who have a Hippocratic oath to protect the safety of their patients, the industry's corporate law responsibility is to their shareholders. I have had very senior people in the liquor industry approach me and honestly say to me, 'Tony, you have to appreciate, mate; we're just like service stations. Our business models are based on maximising the volume of petrol'—in this case, alcohol—'we can serve to maximise our profits to stay in business given the interest rates and everything else.' That is a legitimate business practice but it conflicts with the overarching issue of public health and safety. I am not confrontational towards the industry, because I acknowledge that the majority of industry members do the right thing. In context, it is only a very small proportion of the industry in Queensland and Australia that trade after midnight. Let's look at the broader picture of how many licensed venues these laws will impact, and it is a small minority I would suggest respectfully.

**Mrs SMITH:** That is where I come to the fact that in Newcastle we established that there was no casino. In Cairns the casino is in the safe night precinct and that has been exempted. What is your view on that, because at the end of the day we will have a bit of anticompetition because the small businesses will be adhering to these lockout laws yet alcohol will still be available if people go to the casino.

**Mr Brown:** I hate to put on a political hat because I am apolitical—I do not belong to any political party—and I am critical of some of the aspects of the bill. To respond to your question, I agree. I am surprised, though, that the opposition has not more responsibly attacked the government for the inconsistencies. It has not gone hard enough in terms of the earlier last drinks consistently applying. It has not gone hard enough in terms of the exemptions. I have raised these concerns in my submission. It is not encouraging its colleagues to support the legislation but says, 'Why have we delayed it for so long with the political electoral mandate?' We know the single most effective measure to prevent alcohol related violence across Australia, including your electorate and those that you have visited, is a modest reduction in late trading hours. What I mean by 'effective' has two dimensions to it. The first is preventing assaults, and assaults are less than half of the harm. We are really talking about reducing the alcohol burden. We know that foetal alcohol spectrum disorder is the most common preventable form of non-genetic birth defects. It is greater than the combination of autism, spina bifida and other common known birth defects. In my submission I quote research from the UK, where there is a volcano about to erupt about cirrhosis of the liver and liver damage in young people from drinking excessive

amounts. We all should be concerned about that not because we are politicians, but because most of us here are parents. In relation to your industries that you have seen, yes, they might have dropped two for one, which is good.

However, if there is one measure they could pick which is not only going to prevent the most burden of harm but also, importantly, which has not been talked about much today, reducing the public cost burden, it is modest reduction in late trading hours. Why? Because when you speak to the police in Kings Cross and in Newcastle it has dramatically reduced their costs and resources. They can now go out and prevent crime. I spoke to the Newcastle local area commander, Superintendent John, Gralton, last week. He said to me, 'Tony, Newcastle was a bloodbath. We were so busy going from one assault to the other we could not do anything else.' He said, 'Look at Australia Day just gone. I think we had one assault or one arrest. In 2010 and earlier I remember that there was one death. A guy sadly dived into a rock pool but he missed the water, and we almost had something like the Cronulla riots occur because of levels of intoxication. These in Newcastle have been sustainably brought down. It has been beneficial for public safety. It has been beneficial for the patrons themselves. We have had about 80 per cent patron support and we have had more than a doubling of the number of licensed premises.'

**Mrs SMITH:** I come back to the last point that you made in regards to the evidence based data. The one thing that has come out loud and clear is that we have not collected good data or good evidence from the hospitals. They cannot tell us whether the drinking is occurring at home, at private parties, parks or venues. Cairns gave us a bit of an outline and Townsville did also to that degree that they also had their own challenges that I do not think Newcastle faced with regard to homelessness, itinerants and a larger Indigenous population coming in. One of the key issues is that the solid evidence is not being presented, be it from our police or our hospitals in relation to that data collection. As I said, people are presenting at the emergency departments but the information is not being recorded as to whether they are coming from a night out or whether it has been a home incident.

**Mr Brown:** I can only accept that there is a significant deficit in the recording of alcohol statistics in Queensland. My advice, whether it be right or wrong, is in fact a former premier cut that out but, again, I am not here to try to score points. Be that as it may, record keeping could be improved in Queensland. It is my humble and respectful submission that based on the overwhelming conclusive scientific independent, peer reviewed evidence there is no logical, practical reason why this parliament should be depriving all families, all communities and all individuals in the whole state of Queensland these proven life- and cost-saving measures. I would much rather prefer—again, I say this most respectfully—a preventive approach rather than what we are hearing in some other states, including New South Wales, about a statewide adoption; that is a reactive model. We should not have to wait for more deaths like Cole Miller's with more grieving parents. We know from this very simple—it is not complex—intervention with a package of measures that we as politicians—not me included—can make a real difference. If I was ever in such a fortunate situation as you are to represent my constituency with competing claims, I would like to leave parliament knowing that I made a difference. To me, we make laws for the peace, order and good government, and that is a placard term for the Constitution. The fundamental role of government is to make laws for peace, order and good government.

**Mrs SMITH:** Thank you, Mr Brown. I am a mother of two children in their twenties so I do have a good understanding of that as well.

**Mr BROWN:** Mr Brown, we hear a lot of talk about the Valley just being nightclubs, but it is not; there are other businesses there. I am a MAMIL, a middle aged guy who wears lycra. I do not mind going out in the morning to get a coffee. I go for runs and go to the local bakery. What was the experience for Newcastle and the other businesses, the early morning businesses, after these changes?

**Mr Brown:** Can I say we had a number of businesses, as part of our coalition which I represented in court, small businesses, dominated by the late trading binge barn. Some of them could no longer afford insurance because their plate glass windows are etched and scratched so many times. So many business people would come to me and complain of having to hose down the excrement, vomit, blood out the front of their shops along Hunter Street. It really was a retarding factor on the increase in diversity and safety of Newcastle. It has also significantly increased the prosperity of Newcastle and there is a much more positive vibe there now. People feel safe and comfortable in going out and that is difficult to measure but there has been an honest transformation. It has not only been recognised by me, it has been supported and researched by a broad cross spectrum of the community. Sorry, have I answered your question, Mr Brown?

**Mr BROWN:** Yes, you have. Following up from that, is there a measurable Newcastle council cost of clean-up or of maintaining their city, if we want hard data?

**Mr Brown:** The cost to the community in 2006 was \$1 million, which was primarily preventable. It must be remembered that all these costs are primarily preventable. There is one national study putting the cost to the community of \$36 billion per annum. I have quoted research from the Australian Institute of Criminology which says, in very broad summary, that for every \$1 we get back in revenue from the industry we pay \$2 in costs. So we know if we adopt these measures in Queensland you will have significant reductions in your emergency department, your ambulance costs, your policing costs and I am sure that many would agree that there are much better ways to spend that scarce revenue than having to clean up the mess or wait for the trial of these snake oil solutions which we know do not work and, importantly, shift all responsibility onto the individual consumer. We know that binge drinking is a social construct. There is a large industry input into why people binge drink. Alcohol has never been cheaper. It has never been more heavily promoted or more available. I do not advocate for one second prohibition, but we know sensible controls in reducing supply are the most effective.

**Mr BROWN:** You said there was a reduction of about 5,000 assaults. Do you know the ratio before then of assaults that led to death? Would that translate to saving lives through the Newcastle changes?

**Mr Brown:** Well, we were averaging at one stage about three deaths per annum. Importantly, though – again, it has only been a narrow focus today – not all of those deaths were through violence. One was from a young man, who was a really good soccer player, walking home along the railway line, which unfortunately the state government has since torn out. Another one was a person leaving a licensed premise highly intoxicated—and we have not talked about why the industry is not complying with RSA – and fell off a bridge. Another fellow was the result of a violent act. When you talk about Cairns and those places, people say that there has been a fall. The College of Emergency Medicine say the opposite; they say there has been an increase in the number of alcohol related admissions. We should not just look at assaults because I think the statistics show that more people die through alcohol related injuries than assaults.

**Mr BROWN:** I think that is a very good point. I buried a mate that fell off a walkway after being out on the drink when he was 18 years old. He was walking along the river city walkway and fell to his death after a night out. I think that is an important point that we are missing: alcohol injuries do not just occur through assaults but also through the consumption of it.

**Mr Brown:** As Dr Rowan I am sure would point out, what the industry seems to neglect is the fact that alcohol is not only a carcinogen, a teratogen, a neurotoxic; it also is a mind-altering substance. I understand—and I stand to be corrected—that the first part of the body affected by excessive alcohol intake is the frontal lobe judgement skills. So all these ideas about educating people and doing this and that to them—highly intoxicated people cannot think straight. It is a chemical reaction. So we really have to question the demand reduction part of the three pillars to this national drug strategy. Research from Babor, from the World Health Organization down, shows the relatively ineffectiveness of demand reduction measures compared to supply based measures, and first and foremost in the supply based measures is earlier last drinks.

**Miss BARTON:** One of the first things that I wanted to highlight, I guess, and particularly with reference to the member for Capalaba's last question—and certainly please accept my condolences – is that this legislation is about tackling alcohol fuelled violence, not illness, injury or death as a result of the consumption of alcohol. Some of the circumstances that you referred to are not necessarily intended to be encapsulated by this legislation. A one-way door at 1 am as opposed to 3 am is not going to prevent someone from making a bad decision about whether or not they walk home or catch a taxi home. One of the things that I had wanted to touch on was really a comparison between Brisbane and the other entertainment precincts in Queensland and Newcastle, because that is something that we have seen consistently come forward in the evidence throughout the day—that we really should not be comparing apples and oranges particularly when we have academics casting aspersions on their colleagues, on other academics' pieces of work.

I do not know what experience you have had travelling around the entertainment precincts in Queensland, but it strikes me that they are all very, very different communities, from the Gold Coast through Brisbane, up through Central Queensland and up to Far North Queensland. Not only are they different from each other; they are very different from Newcastle. I just wondered whether or not you might like to comment on the opportunity that we have as a parliament to empower local communities to make those decisions themselves rather than enforcing that decision from here in Brisbane on a community like Mount Isa or on a community like Mackay in the same way that Newcastle and Novocastrians might oppose Sydneysiders making decisions about what they do in their community.

**Mr Brown:** I will try to respond to each question. There were a number of points in that, so come back to me if I have not answered. First of all, in my submission I suggested you retitle the legislation because, in reality, if your legislation is aimed at less than 50 per cent of the primarily preventable alcohol related harm, to me it is not effective legislation. What we should be focusing on is how we prevent the Miller family and many other families suffering those tragedies.

The second point is that I have heard that argument—I am not saying it is your own—from the industry about, 'We are different.' I have spoken to parliamentarians from South Australia, from the Northern Territory and other places, and this gets raised by them representing their industry representative members or interests. I think there are a number of good answers to that, although I am not the judge of whether my answers are good or not.

I think, first of all, what we are faced with is a national problem. Contrary to the Police Commissioner on the radio this morning, other countries do have a similar problem, like the UK. The national problem applies across the whole country. First of all, there is too much alcohol being available, it is too cheap and it is too promoted. Secondly, we know the single largest predictor for alcohol related violence is intoxication. The third common factor is the preload-reload phenomenon. I would respectfully suggest to you that those common denominators apply equally in every place that I have been asked to comment about across the country.

So how do we address that common problem? Common problems require common solutions, and that is why I applaud the government and encourage the opposition to support the process and that these be statewide conditions without exemptions, without loopholes, because we are focusing too much on the inputs. With respect, what we should be aiming at is to prevent the harm, to prevent the deaths, and we can do that by commonly addressing the issue of industry responsibility and effective responsible service of alcohol. We know from research from the Bureau of Crimes Statistics and Research in New South Wales, a highly reputable organisation, that a survey done in Kings Cross of young people showed that more than 93 per cent admitted to having at least three signs of intoxication and still being served. So a key problem is RSA.

Why do young people preload? I know that is a major concern. Young people preload because they know they can get into licensed premises intoxicated. The number of bouncers—and I have seen it in Newcastle. They have let young people in who are highly intoxicated, which reflects the BOCSAR research. So we have this dyad approach of young people preloading at home on cheap supermarket booze—dirt cheap, cheaper than some bottled water—knowing full well they will travel on the train, like I did out from the airport, into the city, in Cairns, in Townsville, on the Gold Coast—whatever mode of transport—and they have a high degree of certainty, even though they have preloaded and are probably showing signs of intoxication, that they will still get in. The nightclub or the pub will gratefully accept their money, reload them up and kick them out after blowing their money and say, 'Our responsibilities have ended. You go and look after yourself.' I think when the nation can address those injustices and anomalies then we can change it. You really have the opportunity to make a real difference, regardless of party, because we have that common denominator.

**Miss BARTON:** One of the things that you said was that common problems require common solutions, but I guess what I am saying—and I served on this committee in the last term of parliament when it considered the Safe Night Out Strategy. One of the key things about that and the establishment of local community meetings was accepting that they are not necessarily common problems right across the state and that there is not going to be an entirely common solution. I just wanted to highlight that it is not just the industry that is coming in here and telling us that it is a problem, but it is other people at the coalface. It is groups like the ChaplainWatch who are out there helping people who are intoxicated and saying that this is not the solution. I guess my only concern is that, with respect, you have a particular viewpoint as a result of the circumstances that you have lived through but that is not necessarily going to be relevant for Mount Isa or for Cairns or for Brisbane or even the Gold Coast. When we have local people, local organisations at the coalface—not just the industry, but organisations that are designed to help people who need that support—saying that there is a problem with this legislation, surely you must accept that those who are on the ground, at the coalface, who are locals, should know better, with due respect, than someone who has lived a different experience in a different state in a different community.

**Mr Brown:** Quickly in answer to that, in my understanding the safe-drinking precincts approach cost the community about \$10 million and the Queensland Auditor-General said it has had massive problems. Secondly, I have some problems with respect to what the chaplain service said this morning, but I ask the committee to look at the motivation of the submissions. Why do local communities have different issues? It is because they have a vested interest. The major speakers in local community are the local licensees, and the reality is that they have a vested interest in some of those premises to

maximise the supply of alcohol sold to their patrons. We know that the RSA laws and the penalties associated with noncompliance are sadly ineffective—and that just does not apply to Queensland. Overarching laws make a significant difference.

**CHAIR:** Thank you, Mr Brown. That concludes the hearing today. I thank you and all the other witnesses for their participation and their contributions to this inquiry. For those who observed the proceedings as well, thank you for your interest in this inquiry. Thank you to Hansard and the reporters. A transcript of these proceedings will be available on the committee's parliamentary web page in due course. The committee is due to report to parliament by 8 February 2016. I now declare this public hearing for the committee's inquiry into the Tackling Alcohol-fuelled Violence Legislation Amendment Bill 2015 closed. For those still listening who have appeared today, you have been given some homework so we look forward to your responses, which will be required by tomorrow. Thank you.

**Committee adjourned at 4.45 pm**