From:

Gary Trevithick [

Sent:

Monday, 19 October 2009 12:50 PM

To:

Law, Justice and Safety Committee

Subject:

Submission to the Law, Justice and Safety Committeee Inquiry into alcohol-related

violence

Attachments: Attachment A - Reply from Woolworths Board .PDF; Submission to Law, Justice and

Safety Committee .doc; Letter Law, Justice and Safety.PDF

For the attention of the Research Director, Law, Justice and Safety Committee, Parliament House BRISBANE

Dear Sir/Madam,

Please find attached:

- a letter from the Noosa Waters Residents Association Inc (PDF);
- a Submission from the Noosa Waters Residents Association Inc (Word document); and 2.
- Attachment "A" to the Submission (PDF) reply from the Woolworths Board.

Please contact me if you have any queries.

Your faithfully

Gary Trevithick President Noosa Waters Residents Association Inc



NOOSA WATERS RESIDENTS ASSOCIATION (INC.) IA 17666 P.O.BOX 197, NOOSAVILLE, 4566

19 October 2009

By email to ljsc@parliament.qld.gov.au

The Research Director, Law, Justice and Safety Committee, Parliament House BRISBANE QLD 4000

Dear Sir/Madam,

SUBMISSION TO THE LAW, JUSTICE AND SAFETY COMMITTEE INQUIRY INTO ALCOHOL RELATED VIOLENCE

The attached Submission is made by the Noosa Waters Residents Association Inc.

A significant contribution to this Submission was made by Dr Ronald Meikle MB ChB DDR FRANZCR. In addition to being a medical specialist, Dr Meikle was a Director of Medibank Private.

Details of the Association and the experience that we have had in relation to the issues being considered by the Committee are shown in Sections 5 and 6 of the Submission.

We are available, if required, to attend the Committee to discuss the issues.

Yours faithfully,

Gáry Trevithick

President

Noosa Waters Residents Association Inc.

Telephone d

SUBMISSION TO THE LAW, JUSTICE AND SAFETY COMMITTEE INQUIRY INTO ALCOHOL-RELATED VIOLENCE

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RECOMMENDATIONS

Based on the information and evidence contained in this Submission it is recommended that:

- This Committee becomes a Standing Committee of the Queensland Parliament to collate relevant data so that fully informed decisions can be made as to the causes of alcohol-related violence in Queensland.
- 2. The moratorium on all Liquor Licensing applications for extended trading hours between 12:00am and 5:00am remain until relevant data is obtained; analysed, reviewed, and effective policy can be subjected to trials before implementation.
- 3. Hotels located next to residential areas cease trading at midnight.
- 4. The restriction on the ability of Chief Executive of the Office of Liquor Gaming and Racing to consider the social impacts and the impact on community resources is removed from licensing considerations.
- 5. Applicants for Licences and/or seeking extended trading hours must prove the statements they make in their applications, and
- The transfer of Licences should be made more difficult and the owner of the business and not a nominee licensee held responsible for compliance breaches.
- None of the many mitigation strategies has anything like the effect of fewer outlets, and shorter trading hours. We believe that studies and experience show that there is no basis for the Committee to conclude that the risks posed by extending trading hours can be mitigated by imposing more mitigation strategies. They are complementary and have a fringe benefit. To believe that recommending only these measures as a strategy to reduce ARV is to ignore the inescapable conclusion that it is the length of trading hours and the density of outlets which must be addressed.

A. TERMS OF REFERENCE

In respect to alcohol-related violence, the Association takes <u>violence</u> to mean as defined in the Shorter Oxford dictionary:

The exercise of physical force so as to cause injury or damage to a person, property etc. Physically violent behaviour or treatment; a violent or injurious act, a physical assault.

In this context this means violence between patrons, violence in the environs of licensed premises, road violence, domestic violence and sexual violence but can reasonably be extended to mean increased violence against property and destruction of amenity.

Given this definition we seek to make comment on the following discussion points. Not all of these points in the Issues Paper are relevant to our circumstances, and we are concerned not to project ourselves as experts in a very complex field. Notwithstanding this document was drafted by a medical specialist who has familiarized himself with the literature.

In general we comment on the following points:

- 1. The impact of late opening hours on the incidence of violence;
- 2. Flow on effects for emergency services, particularly health and police;
- 3. The economic cost of alcohol related violence;
- 4. The need for properly designed and funded research to regulate licensing;
- 5. Opening hours;
- 6. In-house hotel controls; and
- 7. The impact on a typical Queensland residential community Noosaville's experience.

B. THE SCOPE OF THIS SUBMISSION

As this Submission will demonstrate, there is a proven cost in personal injury, death, disability, health damage, law and order, and willful damage and sexual and psychological damage from Alcohol Related Violence (ARV). This cost is not a matter of speculation but has been the subject of well controlled research published in refereed journals.

The available evidence shows, inter alia:

- · Extended trading hours increase violence at hotels and their environs;
- Extended hours increase drunkenness and dangerous drinking habits;
- Extended hours result in greater alcohol consumption in a manner which increases the incidence of avoidable risk;
- Extended trading hours, no matter how well controlled, increase violence in the home;
- There is a demonstrable increase in drunken driving from extended hours which has a measurable cost:

- There is significant cost from anti-social violence such as graffiti and noise;
- Large hotels have greater risks of violence; and
- Clusters of hotels increase the risk of violence.

A common thread in this submission is that two issues are indisputable. These are that the volume of alcohol drunk and the length of trading hours are directly related to violence and this violence cannot be easily mitigated.

1. COLLATION OF RELEVANT DATA

1.1 There is minimal (or no) discoverable and relevant data regarding Queensland.

Queensland has conducted much less research than other states and the total impact of ARV is not determinable from any published data. Gathering data must be a critical function of this Inquiry.

The issue of alcohol related violence is damaging our families, damaging our society, significantly impacting scarce hospital and police resources and frustrating our legislature. There is incontrovertible evidence that alcohol related violence is already a serious problem in many Queensland communities, including the Noosa environs and creates serious injuries, social problems and significant costs.

In making the above recommendations we are strongly of the view that actual Queensland data needs to be obtained so that all decision making is on a fully informed basis. That if this data does not exist then it ought to be obtained. The most effective way for this to happen is through the aegis of a Standing Committee which has parliamentary privilege and considerable coercive powers to demand responses, under oath if necessary.

The data that needs to be collected includes, inter alia, data relating to police attendance for assault, vandalism and affray; data for arrest for alcohol related violence by region including statistics regarding the place of drinking; Emergency department statistics on assault occasioning harm due to alcohol related hotel and domestic violence, (in and out-patients); drink driving offences and place of drinking.

Until this data is available to policy makers, one can only extrapolate on the extent of violence and its cost and on the effectiveness of preventative measures.

We believe that to obtain the best outcome for Queensland, local data must be collected, analysed and reviewed. This data can then be used to link licensing regulations in a site specific way.

Collecting the above data sets will also expose defects in policing and health services.

The data collected should be publicly available.

1.2 EVIDENCE TO SUPPORT THE SUBMISSION.

1.2.1 Alcohol causes death

Alcohol consumption accounted for 3.3 per cent of the total burden of disease and injury in Australia in 2003. (Chikritzhs et al (2003) This disease burden affected 4.9 per cent of males and 1.6 per cent of females. In Queensland the rate of increase in alcohol related hospitalization was below the national average rising 20% in 10 years. That 21,601 people were admitted from the effects of alcohol is not the same as saying they were admitted because of alcohol related violence. This cohort is not known. Neither is the incidence of emergency department attendance known. The local member for Noosa was told the data on these matters is privileged, not known or not available to Members. This is totally unacceptable.

1.2.2 The burden of disease in Australia

- Alcohol is second only to tobacco as a preventable cause of drugrelated death and hospitalization
- 2. Between 1992 and 2001, more than 31,000 deaths were attributed to risky or high-risk alcohol consumption
- 3. In the eight years between 1993–94 and 2000–01, over half a million completed hospital episodes were associated with alcohol
- 4. While the number of emergency department presentations caused by alcohol is largely unknown apart from the St Vincent's Data (infra vide), it is likely to account for a large proportion of presentations
- Alcohol accounts for 13 per cent of all deaths among 14–17 year-old Australians, It has been estimated that one Australian teenager dies and more than 60 are hospitalized each week from alcohol-related causes
- 6. Alcohol is also a significant contributor to premature death and hospitalization among older Australians — amongst 65-74-year-olds, almost 600 die every year from Injury and disease caused by drinking above the NHMRC 2001 guideline levels, and a further 6,500 are hospitalized. (Australian Institute of Health and Welfare,2001; Chikritzhs 2001)

1.2.3 Alcohol and violence

- In Australia 33% of fatally injured vehicle drivers have a blood alcohol content over 0.05.
- 45% of murders, (Mouzos 2000), domestic violence, assaults and property offences are also often committed under the influence of alcohol.
- Research has shown that a high percentage of incidents to which police are called involve alcohol. Within Australia, a study of metropolitan Sydney police patrols found that 62% of incidents to which police were called during the study period were judged by officers to be alcohol related. Specifically, 73% of assaults, 84% of offensive behaviour incidents, 58% of malicious damages incidents, 40% of domestic violence incidents, and 59% of noise complaints were seen as alcohol related.

- A later study conducted in Queensland, the Alcohol Incidents
 Management Study (AIMS), revealed that 27% of all recorded incidents
 over a two week period involved alcohol. Consistent with the Sydney
 study, 82% of assaults, 53% of domestic violence incidents and 46% of
 noise complaints were alcohol related. Arro,P Crook,G & Felton T 1992.
- These estimates have been confirmed by other authors. (Ireland and Thommeny 1993),
- But the problem is larger than reported. Lister et al (2000) found that ARL occurring around licensed premises is significantly under-reported. They advance several reasons for this:

While not all intoxicated persons are violent, many are. Dealing with intoxicated persons can be dangerous and is often associated with assaults against police officers called in to deal with an incident.

Not surprisingly, anecdotal evidence indicates that officers fear for their safety when dealing with alcohol related incidents. Even if intoxicated offenders are not overtly violent, the involvement of alcohol increases the difficulty of officers' work and can occupy a large proportion of the consequential workload. Such incidents require officers to assess the physical or mental requirements of a person affected by alcohol, to predict the sometimes illogical behaviour of such a person and to determine whether the person is going to become violent. There are biological studies explaining the different neurological pathways impacted by alcohol and its effects on neurotransmitters in different people which change individual behaviour. Illicit drugs and drug cocktails also contribute to erratic violent behaviour. However, it is not possible to predict this by simple observation.

It should be noted that the costs of ARV are borne by everyone in society. Granted everyone has access to hotels and liquor purchases, but publicans and large corporates which control many liquor outlets do not have to fairly share the burden they create. They are not even penalized under the current system for bad practises and for failing to mitigate risks. Many licences in Queensland such as that at Villa Noosa have no restrictions or conditions attached to them. This is simply an abrogation of the requirement to maintain practices which mitigate risk. Further, inspections of facilities are apparently rare and loss of licence or the imposition of extra conditions very unusual.

The concept of voluntary self regulation has proven a failure.

1.2.4 So what are the costs?

In Australia, the direct cost to the community from legal and illicit drug use during 1998–1999 was estimated to be \$34.5 billion with alcohol accounting for approximately \$7.59 billion (Collins & Lapsley, 2002).

It is impossible to quantify the costs of domestic violence, sexual violence, violence and damage to community property and additional police time. In a personal communication, a Police Officer in Victoria related that the additional costs of police on Friday and Saturday nights to deal with ARV were in the order of \$50m, per year.

However, the costs of motor vehicle accidents are quantified.

Chikritzhs et al (2000) estimated that, in Australia in 1997, 418 persons died from a road injury attributable to alcohol and 7,789 persons had to be hospitalized for a total of almost 45,000 bed days. This translates to over 17,000 person-years of life lost from alcohol-related road fatalities. The total economic cost in 1997 was estimated to be 1.3 billion dollars, including costs for years of life lost and hospitalizations.

Estimates for Queensland are that fatal crashes cost in excess of \$700,000 per crash while crashes resulting in hospitalization cost in excess of \$150,000 per crash. This is in line with the estimates from the Monash Trauma unit of fatalities costing \$962,115 and each serious injury \$67,874 per person. Minor injuries cost \$12,060 per person treated.

(www.monash.edu.au/muarc/reports/Other/bencost.pdf)

In 2001, approximately 72,302 hospitalizations were attributable to the misuse of alcohol and the financial burden of alcohol misuse to the community has been estimated to be \$4.5 billion per year, including lower productivity due to lost work days, road accident costs and legal and court costs, as well as health costs. "Alcohol Abuse Vol 252, Editor Justin Healy, ISBN 978 1 920801 62 5, 2007).

Poynton et al (2005) estimated that the annual cost of treating alcohol-related injuries and alcohol intoxication cases at Sydney's St Vincent's Hospital Emergency Department is at least \$1.4 million and taking into account other costs such as inpatient costs, the full cost to the Hospital may be as high as \$3.2 million per year.

We believe that the Committee must make every effort to accurately quantify these costs for Queensland and to transfer a significant part of these to the industry and to the consumer through liquor taxes, licensing fees and compliance certification. It seems that current licensing revenues are less than the cost of alcohol related Emergency services in one major hospital. This is simply not equitable.

1.2.5 Problems relating to Hotels

All the discovered evidence reveals that there are serious and contributing problems related to hotels.

One-third of all alcohol sold in Australia is consumed at licensed premises (Lang et al. 1992). While most of this is consumed in moderation and at safe levels, licensed premises can be associated with risky drinking patterns. In their paper investigating several pubs and clubs in Victoria, many issues were identified.

These were:

- Significant levels of intoxication;
- Issues of staffing, staff training, and service protocols;

- Loud noise:
- Glassware;
- Traffic flow/crowding and permissive atmospheres;
- Promotion of the macho image
- Drug-related activity;
- Drink promotions encouraging speed drinking together with competitions which have drink rewards; and
- The non-availability of free water and food services.

Further issues are outlined in the National Drug Strategy 2004–2009 (Intergovernmental Committee on Drugs and the Australian National Council on Drugs 2004) which states unqualifiedly that:

"Alcohol consumption in licensed venues is correlated with **high levels(our emphasis)** of alcohol-related problems such as violence, intoxication, property damage, road trauma and other accidents."

While alcohol does not always result in violence, crime and disorder, and not all licensed premises are associated with harm, (Doherly & Roche 2003, p. 18) the two together have been associated with a significant amount of public disorder, violence, crime, intoxication and impact on amenity (Banfield, Mallick & Duff 2005).

According to Doherty and Roche (2003), licensed premises are strongly associated with risky drinking patterns. Stockwell, Lang and Rydon (1993) found that one in four patrons exiting licensed premises have a blood alcohol level of 0.10mg/100ml. One in ten patrons leaves licensed premises with a blood alcohol level of 0.15mg/100ml or above. This must be of concern to the Committee as the single biggest contributor to this outcome is extended licensing hours.

As such, alcohol is considered as one of the main drugs of concern in the National Drug Strategy 2004–2009 (Intergovernmental Committee on Drugs and the Australian National Council on Drugs 2004) in Australia.

Alcohol consumption within licensed premises is seen as particularly problematic for young people. Lindsay (2005) found that young people consume between 7.3 and 8.2 drinks on an average night out in licensed venues and as many as 10.8 alcoholic drinks on some occasions (men up to 12.4 drinks).

These figures are, "well above the National Health and Medical Research Council recommended suggested daily level of no more than six standard drinks a day for men and four standard drinks a day for women (National Health and Medical Research Council 2001)". These recommendations have since been revised downwards.

This means that strategies to reduce the volume of alcohol consumed and to restrict supply to intoxicated persons simply do not work.

Chikritzhs states that for each additional average hotel in metropolitan Perth expect 17 domestic assaults per year and this is "likely to be the tip of the iceberg.

There is a correlation between time of day and the day of the week and violence just as there is between the socio-economic status of the geographic location of the hotel.

- 1 High alcohol hour assaults occur on Friday or Saturdays between 8 p.m. and 6 a.m. and ARV was implicated in 65% of police attended incidents.
- 2. Medium alcohol hour assaults occur from Sunday to Thursday, between 8 p.m. and 6 a.m. and alcohol was involved in 54% of assaults.
- Low alcohol hour assaults defined as occurring on all days between 6 p.m. and 8 p.m. Only 22.5% of assaults occurred during this period.

Several studies have highlighted the links between the geographical distribution of alcohol outlets, the density of outlets, the targeted advertising of alcohol to particular communities (especially low social demographic communities) with the prevalence of violence (Parker and Auerhahn 1998). The density of licensed premises is highly correlated with homicide rates and interpersonal assaults, even when studies control for other important variables (Giesbrecht and Greenfield 2003).

However, the distribution of violence across such regions may not be uniform, because a small number of licensed premises can account for a majority of the violence. Studies of social ecology and regulatory strategies have identified community characteristics, for example larger populations of low educational attainment as having a higher association with ARV. Vacant housing potentates alcohol-related assaults, independent of whether or not they are located near high population areas. Regulations to mitigate the problem, for example reducing licensed outlet density can aggravate problems elsewhere (Freisthler B and Gruenewald PJ 2005). To some extent ARV is portable as the clientele reacts to changes in regulations in the venues they frequent. Clearly, regulations need to be uniform and enforced, rather than voluntary.

Studies mapping assaults in NSW over two years found that in Sydney 12% of licensed venues accounted for 60% of assaults and in Newcastle 8% accounted for 80%. This has been explained by the types of clients who frequent the bars and pubs, e.g. large groups of heavy drinking young men, combined with certain expectancies associated with a 'macho' drinking culture (Haines B and Graham K 2005). Levels of intoxication and cheap drink promotions which encourage risky alcohol consumption are highly associated with a higher incidence of violence and aggression.

Recent press reports quote police as recognizing that certain outlets in Fortitude Valley have a disproportionate amount of ARV.

Haines and Graham (2005) also point out that serving food is one of several factors associated with a decreased risk of interpersonal violence. Food consumption acts beneficially to reduce the level of blood alcohol. In addition, a

permissive atmosphere where antisocial and sexist behaviour is tolerated and venues which are poorly maintained or overcrowded can increase the expectation of interpersonal violence (Haines B and Graham K 2005).

Bar staff, security staff and bouncers also play a critical role in either preventing or increasing the possibility of interpersonal violence, although working in a bar is one of the more high risk occupations for experiencing violence. (Haines B and Graham K 2005).

Other-studies have also shown-that in a small number of licensed premises that — have extended trading hours the vast majority of assaults in and around those premises appear to be random attacks on strangers performing routine activities (which means walking the dog or other quiet enjoyment) and these assaults increase after midnight and around closing times (Chikritzhs, Stockwell, & Masters, 1997a; Cohen & Felson, 1979; Homel, Thomsen & Thommeny; Stockwell, 1997). Other studies have also confirmed that a small number of licensed premises tend to be more problematic than others (i.e., licensed premises with poor entertainment, irresponsible serving practises and inadequate staff training) and are usually associated with a greater proportion of violent acts in and around the locality (Considine, Walker, Wiggers, Daly, Hazel, & Fairhill, 1998, Homel & Clark, 1994; Jochelson, 1997).

It has also been demonstrated that a substantial amount of violence among patrons in the most problematic licensed premises occurs more often in specific places such as corridors, serving bars, dance areas, near exits and outside in the parking lots or on the side walk (Lang et al., 1995; Homel et al., 1991; Burns, 1980; Graham & Wells, 2001; Marsh & Kibby, 1992; Tomsen, 1997). Such violence often involves males under 25 years of age, and appears to be triggered by a number of factors including conflict with staff, poorly trained security staff promoting and contributing to ARV, patrons violating bar rules, offensive behaviour and conflict over interpersonal relationships. (Graves, Graves, Semu, & Sam, 1991; Chikritzhs, & Stockwell, 2002).

It is clear that while there can be some mitigation of the risks of violence two factors are the most important in its causality.

These are extended drinking hours and increased drunkenness. These two are directly and indisputably related.

It should be a licensing condition that licensees keep a log of violent incidents at the premises and in surrounding areas; that they indicate how they intend to mitigate the problems and the results of such attempts should be recorded. These incidents should be investigated and logged by the Office of Liquor Gaming and Racing and appropriate action taken including enforcing physical changes to the premises, changes to the trading hours and the mode of operation and extending to the cancellation of the licence.

"One can not escape the recurring conclusion that levels of violence and alcohol consumption appear to dramatically increase as liquor trading hours are extended." (Chikritzhs et al., 1997).

This is a compelling observation. The data supports the premise that extended trading hours increase violence. The work by Chikritzhs is unambiguous.

1.2.6 Role for the Committee

Given that the following factors impact on violence in all studies:

- 1. Trading hours
- 2. Total alcohol sales
- 3. Socio-economic location
- 4. Hotel density
- 5. in -house risk mitigation strategies,

It seems logical that a multi-focused approach should be undertaken to refine the licensing laws to take account of these factors in the light of specific Queensland data. Without an integrated approach there can be no realistic chance of a reduction in violence. The role of the Committee should be to establish systems which collate, analyse and document the regional and Queensland specific factors and continue to monitor them while at the same time recommending legislative changes to reduce and minimise the level of alcohol-related violence. This must include links to licences which have the power to impose conditions, penalties and cancellation.

1.2.7 Hotel service practises

It would be ambitious to believe that changing hotel service practises will have any real effect. Some such as *lock out* have been lauded by some researchers and damned by others. There is no convincing evidence that this is really effective. We now consider them in detail.

Any new practises should be subjected to trials at selected venues before extending them to others or having them compulsorily implemented.

Serving practises are a core issue contributing to alcohol-related harm. Irresponsible service practises are linked to increased intoxication and research suggests that "as the number of signs of intoxication increases, so does the likelihood of continued alcohol service" (Donnelly & Briscoe 2002.). It has been found that between 47% and 79% of venues served semi-intoxicated patrons despite some servers expressing concerns that the semi-intoxicated patron had had too much to drink (Lenk, Toomey & Erickson 2006; Wallin, Gripenberg & Andreasson 2002).

The continued service of an obviously intoxicated person is a very strong and independent predictor of alcohol related harm (Lang et al. 1995) including violence, drink-driving and injury. This occurs frequently according to the published literature. It is important to realise that intoxicated people frequently become the victims of violence. (McLeod et al 1998)

Increased consumption of alcohol is well correlated with the extended amount of time available for drinking (Chikritzhs & Stockwell 2002). Drummond noted that, in examining evidence from Western Australia, Ireland and Iceland, "extending licensing hours increases the number of people drinking more for longer, which results in more violence and disorder".

In short, no alleged controls on service to intoxicated people seem to mitigate this risk. There is scant monitoring of the responsibilities imposed by the licensing process. This is the very behaviour that the Noosaville area wishes to curtail because it comes at a high social and real cost to the community—without any advantage.

1.2.8 Self harm and injury to others

The scope of Alcohol-Related Injuries, Hospitalizations and Deaths is illustrated by the following.

Alcohol is a significant contributing factor in road trauma and other accidents. For example, 30% of driver fatalities in Victoria were alcohol-related in 2005, a 4% increase on the previous five-year average of 26%. Furthermore, there was a 5% increase in alcohol-related pedestrian fatalities to 36% (Transport Accident Commission 2006, 15 September). High prevalence of excessive drinking especially among young people is correlated with a high level of road trauma. Young people aged 15 to 24 years account for 52% of alcohol-related serious road injury occurrences on Australian roads (Chikritzhs et al. 2000).

An analysis of hospital emergency room presentations and place of last drink data reveals the extent of the association between alcohol, licensed venues, road trauma and other accidents.

For example, a Queensland study carried out on the Gold Coast noted that 38% of male assault victims and 17% of female assault victims that presented to triage staff had been attacked at a nightclub or bar (Campbell & Green 1997). A similar study carried out in Sydney found that over 42% of respondents had been assaulted just outside or inside hotels, clubs or nightclubs (Jochelson 1997). Another Perth study used data on drink-driving offences, alcohol-related traffic accidents and the number of assault charges to emphasise that patrons of hotels, taverns and nightclubs had a higher probability of being involved in confrontations that ended in alcohol-related harms (Stockwell, Somerford & Lang 1992).

Integrating the data reveals that, 14 per cent (191) of the eligible injury cases presenting to the Emergency Department involved injuries that had been incurred as a result of interpersonal violence. Eighty per cent of these assault patients were male and 69 per cent were under the age of 35 (28.3% were less than 25 years old). Slightly more patients sought treatment for an assault-related injury in the January/February audit.

English et al(1995) estimated that 47% of all perpetrators of assault and 43% of all victims of assault were intoxicated prior to the event.

Alcohol related assaults were a leading cause of death, venereal disease or injury for women and road injuries were a leading cause of death, disease or injury in males. Nationally, males accounted for over 70 percent of the deaths attributable to alcohol.

1.2.9 Alcohol related crime

Estimates of the costs of alcohol-related crime for Australia have been provided by Collins and Eapsley (2002) using a number of secondary data sources. They estimated that Australia wide the costs of alcohol related crime in 1998/99 were approximately 1.7 billion dollars.

Part of this estimate was developed by allocating estimates of the costs in terms of police resources of 648 million dollars and of criminal court resources of 113 million dollars.

The general nature of these police and criminal courts resource estimates is open to some question, given that they were based upon detainee survey data from just four sites throughout Australia while making assumptions about what proportion of each crime type involved alcohol. Collins & Lapsley (2002) acknowledged that there was not sufficient data available to attempt to estimate the costs of alcohol related property crime. Also, given that only a small proportion of total crimes committed get reported to or detected by police, these cost estimates are necessarily underestimates of the true level of alcohol-related costs.

A BOCSAR study, published in late 2006, provided costing estimates for the total time that is spent by NSW Police dealing with all duties, including both reactive and proactive tasks, associated with alcohol.

Whatever the analysis, crime against property, sexual assault, rape, domestic violence is all related to drinking late at night and the longer the drinking hours the greater the crime levels. The one thing that can be immediately implemented is an indefinite ban on extended trading hours.

1.2.10 Mitigating Risk

Taft and Toomey produced a comprehensive review of all these strategies in a report entitled, "Vichealth, Review of Links between interventions to reduce Alcohol-related Interpersonal Violence". This is a large literature review and considers many strategies. In March 2004, The Australasian Centre for Police Research published ,The antecedents of Alcohol related violence in and around licensed premises. These are valuable reviews and recommended to the Committee.

The authors conclude that:

 Community interventions are a promising development; however the evidence to date is inconclusive.

- Mass media campaigns (harm reduction or counter-advertising) show some evidence of effectiveness in reducing alcohol-related interpersonal violence.
- Restricting alcohol advertising has been demonstrated to reduce consumption but there is no existing evidence for its effect in reducing alcohol-related assaults.
- Increasing the minimum drinking age can reduce consumption and alcohol-related harms.
- The evidence about the effect of price alone on consumption or related-harms is inconclusive.
- Licensing restrictions are easier to enforce and not vulnerable to commercial pressure in comparison with voluntary accords. There is weak evidence for their effectiveness in reducing alcohol-related assaults.
- Comprehensive strategies including community mobilisation, responsible beverage service, increased policing or creating safe atmospheres can reduce alcohol-related assault.
- Police strategies have weak evidence of effect, but new technologies such as CCTV recording should be evaluated for their effectiveness in reducing alcohol-related assaults.

1.2.12 Targeted interventions

Early intervention approaches include:

- home-visiting of vulnerable and disadvantaged mothers;
- newer family therapies; or
- psychosocial /educational approaches such as the Strengthening Families program are effective in reducing later adolescent misuse and alcohol-related social problems.

School-based intervention programs often target many forms of substance misuse, and are rarely well evaluated. In the US, many are abstinence-focused, while Australian programs target responsible consumption where alcohol misuse is included.

Evidence for the effectiveness of school-based psychosocial (e.g. building peer resistance skills) and educational (e.g. teaching alcohol harms) programs is mixed as they are very heterogeneous. However, the most effective evidence based interventions recommended for schools are those using psychosocial approaches.

Methods for improving school-based program effectiveness have been identified and require further evaluation to assess their impact on assault rates.

There is good evidence that <u>brief</u> interventions (short sessions designed to assist an individual to modify a high risk health behaviour and reduce the associated harms) are effective in reducing problematic consumption.

There is some evidence of the effect of brief interventions in reducing alcoholrelated interpersonal violence.

Liquor licensing restrictions have been found to reduce assaults.

Several other harm-minimisation strategies, similar to those outlined above, have demonstrated impressive reductions in assaults in uncontrolled studies, including the Surfers' Paradise project in Queensland.

It should be remembered that uncontrolled data has serious bias and may be confounded. Subsequent replication of similar strategies in other quite different Australian regional towns also demonstrated 75% reduction in total physical assaults. However, in a 2004 re-analysis of subsequent Queensland initiatives demonstrated that improved physical comfort of licensed premises, the reduced degree of overall permissiveness, the availability of public transport and aspects of the ethnic mix of patrons were the few significant factors that explained the reduction in assaults (Gant and Grabosky 2000; Homel, Carvolth et al. 2004; Haines B and Graham K 2005). Other evaluations suggested that the Gold Coast close liaison programs with police and publicans had an initial impact but this dissipated over a two year period. Such strategies appear to change the clientele rather than reform the behaviour of those prone to violence.

Several studies in the UK in particular, as well in Australia, have combined policing of licensed premises, targeted cover charges, and responsible bar staff training with an emphasis on heavy policing of higher risk licensed premises. However, the evaluation of these interventions has not been rigorous and therefore the results of the studies cannot be generalised with confidence. Nevertheless, the authors' note that the overall directions of results indicate that targeted policing is likely to be an effective approach to reducing bar-related violence (Doherty and Roche 2003).

Door staff or 'bouncers' have a role in the first line of response to potentially violent incidents and also managing conduct within licensed premises. However, some assaults in bars are perpetrated by security staff themselves or they can be the target of assaults perpetrated against them. Training of door staff and strict eligibility to work of security staff have shown some positive results. However their training has been part of larger programs of interventions, so that it is not possible to separate the effects of security staff training from those of other interventions (Haines B and Graham K 2005).

1.2.13 IMPORTANT CONCLUSION

None of the many mitigation strategies has anything like the effect of fewer outlets, and shorter trading hours. There is no basis for the Committee to conclude that the risks posed by extending trading hours can be mitigated by imposing more of these mitigation strategies. They are complementary and have a fringe benefit. To believe that recommending only these measures as a strategy to reduce ARV is to ignore the inescapable conclusion that it is the length of trading hours and the density of outlets which must be addressed.

2. CONTINUATION OF MORATORIUM.

The moratorium, announced by the Premier on 17 September, on all Liquor Licensing applications for extended trading hours between 12:00am and 5:00am should remain in force until relevant Queensland specific data is obtained; analysed, reviewed, and effective policy can be subjected to trials before implementation.

This will ensure that licensing decisions can take into account any specific differences for the State of Queensland. Different sites and location specific needs and requirements can also be ascertained e.g. Brisbane and quiet residential areas.

3. HOTELS LOCATED NEXT TO RESIDENTIAL AREAS SHOULD CEASE TRADING AT MIDNIGHT

3.1 Extended trading hours increases violence

The data in 1 above supports the premise that extended trading hours increase violence.

As there is a direct correlation between the lengths of time that alcohol can be consumed and drunkenness then Hotels located next to residential areas should cease trading at midnight. Future licensing conditions should be on a site specific basis i.e. different rules for hotels located adjacent to residential areas.

Once Queensland data is obtained the size, location and trading hours of venues would have a basis in fact. On such a serious matter as this being investigated by the Committee a culture of non-disclosure is not in the public interest.

Data that we have produced in this Submission shows:

- There is unequivocal evidence that longer trading hours correlate with increased violence, personal harm and drink driving.
- Total alcohol consumed on licensed premises correlates strongly with increases in public drunkenness, and this in turn leads to violence.

- There is documented evidence that the risks of violence, injury, drink driving, self harm and anti-social behavior cannot be sufficiently mitigated by in-house hotel controls and practises to justify the extension of trading hours.
- The distribution and type of licensed premises contributes to the risk of violence.
- Many Queensland communities, including the whole of the Noosapopulation, are going to have their already strained medical services further compromised by increasing demand for alcohol related trauma services if licensing hours are extended.

3.2 Risk mitigation strategies are not working

The Association notes that many hotels assert they are well managed with appropriate staff training, appropriate signage, free water, CCV security, lighting, and in some cases a no-glass policy, available public transport and a meals service. While there is some evidence that some of these strategies mitigate risks, this mitigation is small. (Victorian survey). There is ample evidence that despite this, the problems remain.

The residents of Noosa Waters have long lists of problems and are well aware of the disruption and cost of drunkenness and alcohol related violence.

There is no evidenced based argument that will support the view that an extension in trading hours will do other than impact adversely on this community. Violence has its best correlation with the volume of alcohol sold not the method of its sale. This violence includes domestic and road violence. None of this is mitigated in any significant way by in-house hotel measures.

This points to the fact that one set of licensing rules does not fit all licensing circumstances. To argue that an area is commercial and therefore appropriate for a large, late closing hotel when there is residential housing abutting the facility is to miss the point. These are the people impacted by violence and vandalism in particular. It is these very people who are intimidated by violence adjacent to or on their properties.

Such an impact will fall on all the citizens unfairly. Making the right to appropriate health care subordinate to the demands of irresponsible alcohol use is unconscionable.

While it seems attractive to minimise harm by in-house interventions and close policing of premises, the weight of evidence is solid. The only effective way to reduce violence is to reduce the total amount of alcohol sold and to reduce the hours of operation. It is recognised that clean premises, lack of overcrowding, strict policies about serving, food service, free water, knowledge of the number of standard drinks being consumed all have only slight effects or no proven effect.

4. REMOVE THE RESTRICTION ON THE ABILITY OF CHIEF EXECUTIVE OF THE OFFICE OF LIQUOR GAMING AND RACING TO CONSIDER THE LACK OF COMMUNITY RESOURCES

Due to a decision by the Commercial and Consumer Appeals the Chief Executive of the Office of Liquor Gaming and Racing cannot refuse a new application or a request for extended trading hours based on the lack of community resources e.g. lack of police i.e. the inability to prevent further violence due to lack of police resources.

The Government is ultimately responsible for the allocation of resources and its wishes, which should reflect community attitudes, should be the ultimate determinate when considering licensing applications. It alone should decide if it is going to adequately provide e.g. police, hospital and emergency services to a community.

The lack of resources must be a ground for the Chief Executive of the Office of Liquor Gaming and Racing to refuse to grant a new application or a request for extended trading hours. To not take scarce resources into account will only increase the possibility of violence and injury.

There also appears to be no current obligation on the Office of Liquor Gaming and Racing to put any significant weight on community desires. The extension of licence is not related to past records or community impact. Even police submissions pointing out they have insufficient resources to cope with violence have been disregarded. When a community shares an ethos which rejects late night pub drinking and its consequences, then the Office of Liquor Gaming and Racing should respect that right by exercising its power to refuse the application.

5. THE ADVERSE EFFECT ON THE PROVISION OF MEDICAL SERVICES IN NOOSA

The critical shortage of after hours medical services must be recognized and form part of any realistic assessment of the risks of extended trading and associated violence.

Noosa medical services are at crisis level and waiting times are often suboptimal. Older people who form a large part of the demographic in Noosa have presentations with stroke and unstable angina which require urgent medical attention. Time taken to treatment determines outcomes.

There is no capacity at Noosa Hospital to deal with increased alcohol related violence and maintain the ability to deal with the urgent after hours needs of these law abiding citizens. Neither does Nambour Hospital (AMA public commentary) have this capacity. The Government acknowledges the need for greater health services on the Sunshine Coast.

It follows that a decision to extend trading hours until 5 am would be a willful impost on the safety and availability of medical resources to the remainder of the

community. That medical services to residents with genuine medical emergencies is made subordinate to the victims of ACV is unconscionable.

6. APPLICANTS FOR NEW LICENCES AND/OR SEEKING EXTENDED TRADING HOURS MUST PROVE THE STATEMENTS THEY MAKE IN THEIR APPLICATIONS

6.1 Unsubstantiated statements

Currently it appears that statements Applicants make when applying for Licenses and/or seeking extended trading hours do not have to be substantiated. We strongly believe that when lodging a new application or seeking an extension of trading hours applicants must prove the statements they make.

6.2 Noosaville's experience on an application to extend trading hours

Members of the Noosa Waters Residents Association Inc reside in the residential Noosa Waters Estate (1,141 homes, duplexes and units sites) which is located in Noosaville.

The Noosa Water Residents' Association Inc is in contact with about two thousand people who live in this estate which comprises a significant proportion of Noosaville's population. We have a close relationship with the Sunshine Coast Regional Council via a Partnering Charter and also have contact with other Associations, residents and businesses in Noosaville. As a result we are therefore uniquely positioned to gauge local opinion.

Noosaville is typical of many residential communities in Queensland that are currently affected by alcohol-related violence which would increase if trading hours were extended.

The local hotel, Villa Noosa, which is owned by Woolworths (through their ALH Group of companies), has applied to extend trading hours to 5am each day. The Hotel is separated from the Estate by a two lane road and is 105 meters from the Estate's main entrance, Saltwater Avenue.

The application to extend trading hours galvanized the local population. Within a few weeks 1,333 residents signed a petition against the application. A very large number of written objections were also lodged, including detailed submissions by the Association and medical specialists.

Correspondence from the Board of Woolworths (attachment "A") shows that the Board is seeking to extend trading hours "to mitigate revenue loss from increased taxation and a legislated change reducing hotel opening hours."

The Association lodged a 34 page submission with the Office of Liquor, Gaming and Racing objecting to the application. The Applicant's statements in their application were not supported by any evidence and in many cases the data appeared incorrect and inconsistent with other parts of their application. We would be happy to send the Committee a copy of our objection to the Application

so that you can see what communities are up against. Please contact us for a copy.

There appears to be a blinkered view from ALH that they simply provide a service and if it is abused then it is not their problem. The problem is that their product reduces people's ability to behave properly and the more they have of it, the worse their behaviour.

In-house hotel "codes of service" have minimal effects and cannot be relied upon to-impact-this-problem.—Changes to these-will not represent other than a token gesture to a serious problem.

Residents are the regular victims of intimidation in the street, people fighting and damage to personal and community property and to amenity. In making the objections and in preparing this Submission we were frustrated by the policies of withholding relevant data. The Committee, we are told by the Secretariat, is similarly constrained and no doubt frustrated.

In Noosa we are concerned NOT to have this culture and we consider extended trading hours will encourage over crowding and unruly behaviour associated with increased violence as other venues in the area close and patrons come to Villa Noosa. It will be argued that the lock out provisions will prevent this. There is accumulating evidence that lock out does the opposite. It creates angry queues of people at the entrance and brawling and other violence frequently erupts.

The Sunshine Coast has a large number of alcohol-related violent incidents and injuries. It also has one of the highest levels of drink driving in Queensland.

Residents are very concerned that extending trading hours will only worsen the current problems. In fact it is hoped that as a result of the Committee's Inquiry trading hours for Hotels located next to residential areas will be limited to midnight.

7. THE TRANSFER OF LICENCES SHOULD BE MADE MORE DIFFICULT

Conditions ought to be integral to licensing regulations and be site specific. They should be regularly checked for compliance. Adequate police and other resources are required for this.

The Committee should not be persuaded to the view that in-house strategies can control this serious problem and leave the matter at that. They can have small influences but many of these are un-proven or of minimal impact.

We believe that in the framework of detailed and accurate information, amendments to the licensing laws can be made which can exert real controls and serious coercion on publicans to moderate drunken and violent behaviour.

One practical suggestion is to make the transfer of a licence more difficult. The parent company that owns the premises should be the licencee and the nominee

has the company's delegation. This means, that contrary to the present system of "revolving licencees", the owner stands indicted in failure of compliance.

8. AUTHORITY TO ACT

Mr Gary Trevithick as President of Noosa Waters Residents' Association Inc (NWRA) is authorized by the elected Committee of this Incorporated Association to make this submission on behalf of the committee and the residents it represents. This submission as been made after careful research, but the Committee of NWRA claims no particular expertise in these matters but strongly opposes the extension of licensing hours by Villa Noosa Hotel for all the cogent.

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Further resource material can be provided to the Committee if required.

ATTACAMENT "A"

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Mr Gary Trevithick
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18th August 2009-08-18

Dear Mr Trevithick.

Thank you for your letter dated July 20 2009

I can confirm that the ALH board whose directors include Woolworths directors; Mr Michael Luscombe (Managing Director, CEO), Mr Tom Pockett (Director, Finance Director) and Mr Leon M L'Huillier (Non Exec. Director) are in support of the ALH Group applications to extend hotel trading hours in some of our Queensland hotels.

The Villa Noosa Hotel has applied for extended trading hours to meet not only customer demand but to mitlgate revenue loss from increased taxation and a legislated change reducing hotel opening hours.

As a large-scale operator of licensed venues, Woolworths and ALH have a responsibility to demonstrate best practice in terms of our service of alcohol and gaming and to set a positive example to our customers and to other licensees by complying with and, where appropriate, exceeding mandatory compliance regulations. ALH is very proactive in introducing any proven initiatives that will further encourage responsible alcohol consumption. This includes:

- ALH abiding by a strict buying charter that governs all aspects of our liquor operations. The charter includes principles that aim to avoid the sale of any products that appeal to minors and encourage inappropriate drinking practices.
- ALH does not promote any practice which may encourage rapid or excessive consumption of alcohol.
- All frontline management and staff are trained in the Responsible Service of Alcohol.

ALH do not expect an increased risk of violence or impact on resident amenity from later closing hours at the Villa Noosa Hotel, especially given the hotel is located in a commercial precinct. This view is based on their experience in operating many hotels across Australia that trade until 5am. ALH also understands that in some cases for extended trading hours to be approved they may be subject to additional licence conditions.

I am aware that the ALH State Manager for Queensland, Mr Trevor Smith had a recent telephone discussion with your Association on Tuesday 9th June 2009 to discuss your concerns. Mr Smith has also

had meetings with the Queensland Police and the Office of Liquor, Gaming and Racing, Sunshine Coast office on Tuesday 7th May 2009, to discuss our plans for extended trading hours. The discussions focused on ensuring there is no impact on resident amenity from the additional trading hours, through effective hotel management which includes a security plan along with our rigorous responsible service of alcohol policies.

As part of the formal process to determine the outcome of this application a public forum will be held at which ALH will be represented by senior management to discuss community concerns.

Yours Sincerely

Peter Horton

Group General Counsel & Company Secretary