

The Commission for Children and Young People and Child Guardian

promoting and protecting the rights, interests and wellbeing of all Queenslanders under 18

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Advice to: Law, Justice and Safety Committee

Topic: Inquiry into Alcohol-Related Violence in Queensland – Request for Public Comment

Date due: 23 October 2009

Thank you for providing the Commission for Children and Young People and Child Guardian (the Commission) with the opportunity to comment on the Issues Paper: Inquiry into Alcohol-Related Violence in Queensland.

The Commission appreciates the complexity of the varied contexts and issues alcohol-related violence raises. However, as the Commission's focus is on the safety and wellbeing of children and young people in Queensland, the Commission has confined its response to alcohol-related violence amongst young people.

The Commission commends both the Queensland and Australian Government for their commitment to evaluating current policy measures and considering policy improvements designed to reduce alcohol-related violence.

Summary of the Commission's position

The Commission recommends that any new policy settings implemented by Government to reduce alcohol-related violence:

1. Be based on existing research evidence and data of what works, for example:
 - reducing alcohol supply through restricted trading hours
 - enforcing the minimum age for alcohol purchases
 - ongoing training for staff at licensed venues, and
 - alcohol advertising restrictions and education programs
2. Be designed, implemented and evaluated with the participation of the target groups, especially if they aim to change behaviours
3. Be implemented in a thorough and adequately resourced manner
4. Have built-in evaluation procedures that contribute to an on-going evidence base

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1. Policy settings proposed by Government to reduce alcohol-related violence should be based on existing research evidence and data of what works

Although there are complex and inter-related factors that contribute to alcohol-related violence, it is possible to reduce the resultant levels of harm. A substantial body of international and national research highlights policy measures, or combinations of measures, which are most effective in reducing harm in various settings.

It is now widely accepted by governments, researchers and the general public that there is a problem in Australia with levels of binge drinking, particularly among young Australians. Alcohol related violence in Australia is a major problem for many young people.

For example:

- Over 80% of all alcohol consumed by 14 – 17 year olds is done so at high risk levels for acute harm¹
- Young girls are consuming alcohol at higher levels than ever before, sixty per cent of year 12 girls surveyed in 2008 by La Trobe University, said they had been binge drinking three or more times in the fortnight before the survey. This survey indicated binge drinking among girls of this age group had more than doubled from the previous survey in 2004².

Implementing policies to reduce alcohol-related violence is not a simple or straightforward task. When addressing why people, and young people in particular, consume dangerous amounts of alcohol, many complex and interrelated factors are identifiable. Fitzgerald and Jordan³ outline numerous social, political, developmental, cultural and consumption issues in their recent book on the history of alcohol in Australia. This history canvasses issues as diverse as the strong connection between celebrations and alcohol in Australia to the recent trend by marketing experts designing cheap sugary alcoholic drinks packaged in bright colours that appeal specifically to young people.

When focussing on young people and alcohol consumption, it is important to note that 'young people' are not an homogenous category. How and why young people consume alcohol will vary depending on a complex combination of factors such as gender, socio-economic status, family background and geographical locations.

Individuals also respond to alcohol in different ways, and while it is still not clear why some people go on to form alcohol dependency and others do not, there is abundant evidence that people living with high levels of stress are more likely to self-medicate and

¹ Chikrizhs, T., Pascal, R and Jones, P. (2004) *Under-aged drinking among 14 – 17 year olds and related harms in Australia*. National Alcohol Indicators, Bulletin No.7. Perth: National Drug Research Institute

² Smith, A., Agius, P., Mitchell, A., Barrett, C., Pitts, M., *Secondary Students and Sexual Health 2008: Results of the 4th National Survey of Australian Secondary Students, HIV/AIDS and Sexual Health*. Melbourne: La Trobe University

³ Fitzgerald, Ross and Trevor L. Jordan. (2009) *Under the Influence: A history of Alcohol in Australia*. ABC Books, HarperCollins Publishers, Australia

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abuse drugs such as alcohol⁴. Over two-thirds (71%) of the young people held in Queensland Detention Centres who completed Commission surveys in 2008, reported that they had problems with drugs or alcohol when they first got into trouble with the police⁵.

Research evidence of what works⁶

Current research evidence of what works when implementing policies to minimise harm from alcohol use indicate there are a number of measures that achieve this overall aim.

For example:

- Increased trading hours for licensed premises are clearly associated with increased levels of consumption, violence and harm. A study from Western Australia found that an extension in opening hours from midnight to 1 am was accompanied by an increase of 70% in violent incidents⁷.
- Evidence also strongly suggests that the increased problems associated with late evening trading and early morning trading result from increased alcohol consumption⁸. A New South Wales study found that assaults at licensed premises were more likely to occur during extended trading periods, most frequently between midnight and 3 am⁹.
- One important factor in alcohol-related violence is the place in which drinking occurs, with most incidences being in and around inner-city hotels⁸. The physical and social characteristics of a licensed venue, including the levels of untidiness, patron comfort, levels of crowding and staff interactions with patrons, have all been found to impact on levels of aggression¹⁰.
- Alcohol related assaults are also highly correlated with increased outlet density¹¹, a longitudinal study in Melbourne found changes in the number of outlets in an area are directly related to changes in the rates of assaults in the evenings⁸. When alcohol outlet density increases, the level of assaults increase.

4 McClure, Craig. 2009. *Reflections on the Politics of Harm reduction and the Global Response to HIV*. Address by Craig McClure, Executive Director, International AIDS Society to the International Harm Reduction Association's 20th International Conference, Bangkok, Thailand: April 2009

5 Commission for Children and Young People and Child Guardian. (2009). *Views of Young People in Detention Centres*, Queensland, 2009. Brisbane: Author

6 The Commission notes that evidence suggests reducing the economic availability of alcohol are highly effective policies that reduce alcohol-related harm, however, pricing and taxes are not discussed here because they fall within a federal jurisdiction

7 Chikritzhs, T., Stockwell, T. & Masters, L. (1997). *Evaluation of the public health and safety impact of extended trading permits for Perth hotels and nightclubs*, National Centre for Research into the Prevention of Drug Abuse, Curtin University, Perth

8 National Preventative Health Taskforce (2009). *Preventing Alcohol-related Harm in Australia: a window of opportunity*. Australian Government Preventative Health Taskforce

9 Briscoe, S. & Donnelly, N. (2003). *Problematic licensed premises for assaults in inner Sydney, Newcastle and Wollongong*, Australian and New Zealand Journal of Criminology, 36, 18-33

10 Mazerolle, P, Professor. and Dr P. Cassematis. 2009. *Understanding Glassing Incidents on Licensed Premises: Dimensions, Prevention and Control*. Griffith University and Queensland Government

11 Chikritzhs, T., Catalano, P., Pascal, R. & Henrickson, N. (2007). *Predicting alcohol-related harms from licensed outlet density: A feasibility study*, National Drug Law Enforcement Research Fund, Monograph Series No. 28

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- Recent research published in September 2009¹² adds to the evidence base on restricting trading hours. States with tighter controls on access to alcohol, such as Western Australia and Queensland had smaller increases in the number of alcohol-related hospitalisations compared to those states that have more liberal trading hours, such as Victoria and New South Wales.
- Restrictions on the legal drinking age for purchase or consumption of alcohol is an important supply reduction strategy and there is some evidence that raising the minimum drinking age, from 18 to 21 years for example, is likely to reduce alcohol related injuries among young people¹³. Most researchers, however, also acknowledge the difficulty of introducing such a change within the Australian population, given that it has been over 30 years since the minimum drinking age was 21 years.
- Research evidence also exists for the efficacy of brief interventions in primary health settings for early-stage alcohol problems¹⁴. A recent Australian study indicates that brief interventions at hospital emergency departments resulted in significant reductions of further alcohol-related injuries. Utilising this strategy, and expanding it to all relevant health service staff in remote areas, may be of particular benefit to young people who engage in risky and violent behaviour as a result of alcohol¹⁵.
- In relation to night-time licensed premises and reducing violence, research by the World Health Organisation¹⁶ indicates multi-agency interventions that utilise a package of complementary measures can reduce violence. Such measures include implementing and enforcing minimum age of alcohol purchase, improving management and staff practices through adequate training, improving street lighting and safe late night transport options.
- The evidence around bans and restrictions on alcohol advertising, sport sponsorship and promoting alcohol products and its influence on young people is mixed. Many studies, however, identify a clear link between advertising and the knowledge, beliefs and intentions of young people in relation to alcohol use¹⁷. In order to protect adolescents and young people from pressure to start drinking; the Commission

12 Pascal, R., Chikritzhs, T. & Jones, P. (2009). *Trends in estimated alcohol-attributable deaths and hospitalisations in Australia, 1996-2005*. National Alcohol Indicators, Bulletin No.12. Perth: National Drug Research Institute, Curtin University of Technology

13 Doran, Christopher; Vos, Theo; Cobaiac, Linda; Hall, Wayne; Asamoah, Isaac; Wallace, Angela; Naidoo, Shamesh; Byrnes, Joshua; Fowler, Greg and Arnett, Kathryn. (2008). *Identifying cost-effective interventions to reduce the burden of harm associated with alcohol misuse in Australia* http://www.sph.uq.edu.au/staff/StaffSearch/staff_profile.asp?staff_id=231

14 Collins, David and Helen Lapsley. (2008) *The avoidable costs of alcohol abuse in Australia and the potential benefits of effective policies to reduce the social costs of alcohol*. National Drug Strategy. Monograph Series No. 70

15 Havard A, Shakeshaft A and Sanson-Fisher R. (2008) *Systematic review and meta-analyses of strategies targeting alcohol problems in emergency departments: interventions reduce alcohol-related injuries*. *Addiction*; 103:pp368-76
www3.interscience.wiley.com/journal/119411900/abstract

16 World Health Organisation. (2008). *Youth Violence, Alcohol and Nightlife, fact sheet 1*. Working Group on Youth Violence, Alcohol and Nightlife. www.who.int/violenceprevention

17 National Preventative Health Taskforce (2009). *Preventing Alcohol-related Harm in Australia: a window of opportunity*. Australian Government Preventative Health Taskforce

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endorses the World Health Organisation's recommendation¹⁸ that bans and restrictions on advertising are an important component of any overall strategy to reduce alcohol-related harm.

- Similarly, education programs designed to alter high risk drinking behaviour can have a positive effect when implemented in specific ways and when combined with a wider range of preventative strategies. The continued support for random breath testing and the significant behaviour and attitude changes around cigarette smoking are examples of successful, well planned and well resourced policy initiatives. There is already substantial public support for stricter monitoring of late night licensed premises and limiting TV alcohol advertising until after 9.30pm¹⁹.

While alcohol consumption itself is a risk factor for violence among young people, particularly males, there is evidence that there are policy settings that reduce levels of violence. There is, however, no one policy or prescribed combination of policies that will be equally effective in every setting. Therefore, it will be important to utilise the existing relevant research and data, as well as monitor trends and behaviour changes in specific settings, to target the most effective measures to reduce harm.

2. Policy settings proposed by Government to reduce alcohol-related violence should be designed, implemented and evaluated in consultation with the target groups, especially if they aim to change behaviours

Policies designed to change the behaviour of people, such as reducing levels of violence among them, will be more effective when designed, implemented and evaluated in consultation with that target group. When consulted about issues such as violence and alcohol, many young people suggest they need more youth-friendly activities and environments designed by and for young people, and were in favour of advertising restrictions.

There is a limited amount of publicly available research on the views and opinions of young people on ways to reduce alcohol related harm. The Commission supports the efforts made by the Law, Justice and Safety Committee to consult young people through electronic media avenues and by addressing the Queensland Youth Parliament.

The Commission is currently undertaking its own examination of the views of young people from Craigslea High School and the Youth Outreach Service Education Program at Lawnton, on issues related to violence and safety, in an effort to better understand their perspectives.

Recurring themes in the available research on young people's views include the lack of alcohol-free activities for young people and an absence of suitable youth spaces. This absence of activities and space leads to boredom and alcohol abuse. The issue of a lack

¹⁸ World Health Organisation. (2008). Youth Violence, Alcohol and Nightlife, fact sheet 1. Working Group on Youth Violence, Alcohol and Nightlife. www.who.int/violenceprevention

¹⁹ National Preventative Health Taskforce (2009). Preventing Alcohol-related Harm in Australia: a window of opportunity. Australian Government Preventative Health Taskforce

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of public transport to transport people safely home from venues is also often raised as a concern and potential cause of alcohol-related violence. Many young people feel they receive mixed-messages about alcohol use from adults and the wider community²⁰

Of those young people who have been consulted on the issue of alcohol advertising, many support harsher restrictions on advertising in all forms of the media. There was support for banning alcohol advertising at sporting events and banning the sale of alcohol at these events.

There were also suggestions that more young people should be involved in designing education campaigns and they should be based on true stories. There were two specific media campaigns that were mentioned as effective and powerful. One was the *No-one thinks big of you* anti-speeding campaign designed by the New South Wales Road Traffic Authority. The Queensland Government's anti-violence, *One punch can kill* initiative was also mentioned in a positive light²¹.

At the Australian Drug Foundation conference in 2006, young people suggested they need to be more informed about the existence of any alcohol support services that are available for them. Many of the most vulnerable young people disengage from formal schooling at an early stage and therefore need access to non-school-based programs and services.

In relation to Aboriginal and Torres Strait Islander youth, alcohol related violence is a major problem. For example, death caused by drinking among Aboriginal and Torres Strait Islander youth is, on average, 2.3 times greater than for the rest of the Australian youth population²². The Commission notes there are currently a number of Australian and Queensland Government initiatives designed to improve the health, well-being and lived experience of Aboriginal and Torres Strait Islander peoples. Where successful, these initiatives should also assist to reduce levels of alcohol-related violence.

The Commission endorses the recommendations of the National Indigenous Drug and Alcohol Committee, that any strategies to reduce alcohol-related harm should be evidence-based, culturally secure and involve Aboriginal and Torres Strait Islander people at all stages of development, implementation and evaluation²³.

20 Australian Youth Forum. (2009) Binge Drinking, A report on youTHINK findings and website discussions. (July 2009) www.youth.gov.au/ayf/pages/response.htm; Australian Drug Foundation. (2006) fifth International Conference on Drugs and Young People 24-26 May 2006, Sydney Australia <http://adf.org.au/browse.asp?ContainerID=5dvo>; Australian Youth Forum. (2009) Violence and Safety, A report on youTHINK findings and website discussions. (Feb-March 2009). www.youth.gov.au/ayf/pages/response.htm; Youth Affairs Council of Western Australia, Western Australia Commissioner for Children and Young People and the Western Australia Office for Youth (2008); *Drug and Alcohol consultation with youth in Western Australia*. Cited in, Joint Submission to the National Preventative Health taskforce Australia: The Healthiest Country by 2020. <http://www.ccvpcq.qld.gov.au/about/submissions.html>

21 Australian Youth Forum. (2009) *Violence and Safety*, A report on youTHINK findings and website discussions. (Feb-March 2009). www.youth.gov.au/ayf/pages/response.htm

22 Chikritzhs, T. and Pascal, R. (2004). *Trends in youth alcohol consumption and related harms in Australian jurisdictions, 1990-2002*. National Alcohol Indicators, Bulletin No 6. Perth: National Drug Research Institute, Curtin University of Technology

23 National Indigenous Drug and Alcohol Committee. (2009). *Bridges and barriers: Addressing Indigenous Incarceration and Health*. www.nidac.org.au

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Policies aiming to change behaviour will be enhanced by collaboration with the target group it is designed for. The insights and unique perspectives of various groups of young people will not only add value to the current research base, it will also increase the likelihood of successful outcomes because people generally respond more positively to changes when they have been consulted and listened to.

3. Policy settings to reduce alcohol-related violence should be implemented in a thorough and adequately resourced manner

The efficacy of any policy or combination of policies designed to change behaviour is dependent on whether it is implemented in a detailed and thorough manner.

One recurring theme in the research is the need for effective and thorough enforcement of alcohol supply restrictions if they are to be successful. For example, the degree to which drinking age regulations are observed by licensees is dependent on the level of enforcement by police and liquor licensing officers²⁴. Enforcement levels by police and liquor licensing officers are also a deciding factor in whether restricting service to intoxicated patrons in licensed premises is effective. The threat of enforcement of any supply restrictions has to be perceived by the target group as a real and imminent possibility, to have the desired effect.

Enforcement of any new policy aiming to restrict or modify alcohol supply needs to be strongly publicised in the media, be highly visible when enforcement does take place, and occur frequently, in accordance with the policy. Strategies for remote areas where enforcement staff may be minimal include telephone hotlines for reporting breaches and employing locally trained liquor licensing officers.

To be successful, policy implementation requires rigorous attention to the details required to make it effective, such as adequate funding, staffing and quality training programs where required. According to Associate Professor, Richard Midford, even though Australia has adopted several national strategies designed to reduce alcohol-related harm since 1989, the reason they have not been highly effective is because the follow-through on policy application has been poor²⁵.

4. Policy settings to reduce alcohol-related violence should have built-in evaluation procedures that contribute to an on-going evidence base

An essential component of good policy implementation is the formal and ongoing evaluation of its impacts and effectiveness. An evaluation procedure will not only measure the stated and expected aims of a policy, but also potentially uncover any unexpected or unintended outcomes. Published evaluations add to the current research base, including valuable information on the cost-effectiveness of various strategies.

24 National Drug Research Institute (2007). *Restrictions on the Sale and Supply of Alcohol: Evidence and Outcomes*. Perth: National Drug Research Institute, Curtin University of Technology

25 National Preventative Health Taskforce (2009). *Preventing Alcohol-related Harm in Australia: a window of opportunity*. Australian Government Preventative Health Taskforce

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Research evidence needs to be continually updated for a number of reasons. In the case of alcohol products, their availability, design and nature can change quickly, as recognised by the Queensland Government. The Commission commends the introduction in 2007 of the Ministerial power to immediately ban undesirable liquor products that inappropriately target young people. Continuous and often rapid change is also a feature of the behaviour of young people themselves, particularly in relation to interests, fashions, and social behaviours, including trends around choice of alcoholic products and particular venue types.

Evaluation of other harm reduction initiatives, such as the extended 'lock-out' provisions for late night trading in Queensland, will be an important aspect of effectively reducing alcohol-related violence amongst young people.

This current period is one in which there is a growing awareness and concern about alcohol-related violence and binge drinking, making it also a unique opportunity to review and improve on the existing policy initiatives designed to reduce alcohol-related violence.

For further information, please contact
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