

23 March 2017

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Director Administrative Law
Department of Racing, Gaming and Liquor
By email: rgl@rgl.wa.gov.au

Re: The availability of packaged liquor in Port Hedland and South Hedland

Thank you for the invitation to make a submission regarding the availability of packaged liquor and the impact of alcohol-related harm in Port Hedland and South Hedland. This brief response is provided on behalf of the McCusker Centre for Action on Alcohol and Youth and the Public Health Advocacy Institute of WA, based at Curtin University.

The McCusker Centre is an independent organisation committed to reducing harms from alcohol among young people. The work of the McCusker Centre is directed towards raising awareness of the magnitude of alcohol-related harms among young people, evidence-based approaches we know can work to reduce harm, other options and the need to act without delay.

PHAIWA is an independent public health voice based within Curtin University, with a range of funding partners. The Institute aims to raise the public profile and understanding of public health, develop and train local networks and create a statewide umbrella organisation capable of influencing public health policy and political agendas. Australian Indigenous health is one of PHAIWA's priority issues.

We thank the WA Police for compiling this comprehensive report to inform the discussion of the issues present in the South Hedland and Port Hedland communities, and consideration of approaches to reducing these problems. We also appreciate the contributions of the agencies that commented on their experience of alcohol issues in these communities. Together, the letters from services and statements of the WA Police demonstrate the broad range of health and social problems present in these communities to which alcohol contributes directly and indirectly, including:

- Domestic violence, including verbal, physical, emotional and psychological abuse (noted by Pilbara Community Legal Service Inc., Relationships Australia WA, Youth Involvement Council, St John Ambulance, WA Police and the Department for Child Protection and Family Support);
- Assaults (noted by WA Police and St John Ambulance);
- Threatening behaviour (noted by WA Police);
- Alcohol dependence (noted by WA Police);

- Housing issues such as tenancy terminations (noted by Pilbara Community Legal Service Inc. and WA Police);
- Child neglect and the emotional impacts of witnessing domestic violence (noted by Relationships Australia WA, Youth Involvement Council and WA Police);
- School non-attendance (noted by WA Police);
- Children being taken into state care (noted by Department for Child Protection and Family Support);
- Crime (noted by WA Police);
- Public intoxication and anti-social behaviours, such as using public places as toilets and sexual intercourse in public places (noted by Relationships Australia WA and WA Police); and
- Violence and aggression towards staff of frontline services (noted by the WA Country Health Service – Pilbara and WA Police).

The letters and statements also point to the significant burden of alcohol problems on the resources of a broad range of services and on the frontline workers whose jobs involve responding to these problems on a regular basis.¹

The WA Police have requested that the Director of Liquor Licensing impose a number of conditions on the liquor licences in Port Hedland and South Hedland to reduce alcohol-related harms, in accordance with section 64 of the *Liquor Control Act 1988*. Our understanding of the requested conditions are summarised in Appendix A. Below we discuss some of the research literature relevant to the proposed restrictions.

We support the focus on packaged liquor within the proposed restrictions. Packaged liquor, such as that sold from bottle shops, accounts for 80% of all alcohol sold in Australia.² Woolworths (which owns BWS and other liquor retail formats) and Coles (which owns Liquorland and other liquor retail formats) accounted for over 63% of the Australian liquor retail market share in 2015-16.³ Australian research, including research conducted by the McCusker Centre, has shown that major alcohol retailers such as those associated with Woolworths and Coles supermarkets regularly promote and sell low cost alcohol, and emphasise low prices and the purchase of high volumes of alcohol in their promotions.⁴ These approaches by liquor retailers are expected to negatively impact public health as an established evidence base links alcohol price reductions to increased levels of consumption.^{5,6}

Harm related to packaged liquor is likely to occur away from the liquor retail outlet. Packaged liquor outlet density is positively associated with rates of assault, domestic violence, chronic disease and

¹ For example, this is noted in the letters from the South Hedland Branch Manager of Relationship Australia WA (Attachment 2), the Operations Manager East Pilbara of the Hedland Health Campus (Attachment 3), the Department for Child Protection and Family Support (Attachment 4), St John Ambulance (Attachment 7), and the statement from Senior Sergeant Dean Snashall (Attachment 10).

² Euromonitor International. Passport: Alcoholic drinks in Australia. August 2013.

³ Ledovskikh A. IBISWorld Industry Report G4123 Liquor Retailing in Australia June 2016. Melbourne (Australia): IBISWorld Pty Ltd; 2016.

⁴ Johnston, R., Stafford, J., Pierce, H., and Daube, M. (2016) Alcohol promotions in Australian supermarket catalogues. *Drug and Alcohol Review*, doi: [10.1111/dar.12478](https://doi.org/10.1111/dar.12478).

⁵ Anderson P, Chisholm D, Fuhr DC. Alcohol and global health 2: effectiveness and cost-effectiveness of policies and programmes to reduce the harm caused by alcohol. *Lancet* 2009;373:2234–2246.

⁶ Wagenaar AC, SaloisMJ, Komro KA. Effects of beverage alcohol price and tax levels on drinking: a meta-analysis of 1003 estimates from 112 studies. *Addiction* 2009;104:179–190.

very heavy episodic drinking.⁷ Research led by the National Drug Research Institute has also shown that “Higher alcohol sales among off-premises outlets were associated with increased risk of alcohol-related injury”.⁸

Research has demonstrated consistent links between the availability of alcohol in a region and the alcohol-related problems experienced there.^{9,10,11,12} There is compelling evidence from Australia and elsewhere that regulating the availability of alcohol is an important strategy within a comprehensive approach to reduce the harmful use of alcohol.^{13,14} Liquor restrictions, which have taken a number of forms, have made important contributions in a range of areas in WA where benefits have been seen across a broad range of health and social indicators.^{15,16,17}

The current restrictions on the availability of takeaway alcohol in Port Hedland and South Hedland appear to be very modest and relate mainly to container size.¹⁸ These restrictions do not appear to be sufficient given the magnitude of alcohol-related problems in these communities. Additional liquor restrictions appear to be warranted.

The liquor restrictions proposed by WA Police appear to be reasonable; they would continue to allow sensible drinkers to purchase reasonable quantities of alcohol to takeaway, while reducing the overall availability of alcohol in these communities. The on-premise availability of alcohol would not change.

We support the position of Senior Sergeant Snashall that “...while alcohol restrictions alone are not the answer they certainly will reduce the level of intoxication enough in order for service providers

⁷ Livingston M. 2013. To reduce alcohol-related harm we need to look beyond pubs and nightclubs. *Drug and Alcohol Review*; 32(2):113-114.

⁸ Hobday, M., Chikritzhs, T., Liang, W., and Meuleners, L. (2015) The effect of alcohol outlets, sales and trading hours on alcohol-related injuries presenting at emergency departments in Perth, Australia, from 2002 to 2010. *Addiction*, 110: 1901–1909. doi: [10.1111/add.13063](https://doi.org/10.1111/add.13063).

⁹ National Preventative Health Taskforce. Australia: The Healthiest Country by 2020 – National Preventative Health Strategy – the roadmap for action. Canberra: Commonwealth of Australia; 2009.

¹⁰ Chikritzhs T, Catalano P, Pascal R, Henrickson N. Predicting alcohol-related harms from licensed outlet density: a feasibility study, in Monograph Series No. 28. Hobart: National Drug Law Enforcement Research Fund; 2007.

¹¹ Livingston M. A longitudinal analysis of alcohol outlet density and assault. *Alcoholism: Clinical and Experimental Research*. 2008; 32(6):1-6.

¹² Pereira G, Wood L, Foster S, Haggart F. Access to alcohol outlets, alcohol consumption and mental health. *PLoS ONE*. 2013; 8(1):e53461.

¹³ World Health Organization. Global strategy to reduce the harmful use of alcohol. WHO; 2010.

¹⁴ Anderson P, Chisholm D, Fuhr DC. Alcohol and Global Health 2: Effectiveness and cost-effectiveness of policies and programmes to reduce the harm caused by alcohol. *Lancet*. 2009; 373:2234-46.

¹⁵ Midford, R., McKenzie, J., Mayhead, R. (2016). *“It fits the needs of the community”*: Long-term evaluation of the Norseman Voluntary Liquor Agreement. Canberra: Foundation for Alcohol Research and Education.

¹⁶ Drug & Alcohol Office. The Impact of Liquor Restrictions in Halls Creek, Quantitative Data - 24 month review. November 2011.

¹⁷ Kinnane S, Farrington F, Henderson-Yates L, Parker H. Fitzroy Valley Alcohol Restriction Report: An evaluation of the effects of a restriction on take-away alcohol relating to measurable health and social outcomes, community perceptions and behaviours after a two year period. Perth: University of Notre Dame Australia, Drug and Alcohol Office, Government of Western Australia; 2010.

¹⁸ Department of Racing, Gaming and Liquor. Factsheet on liquor restrictions in Port Hedland and South Hedland, effective 8 October 2012. Available from:

http://www.rgl.wa.gov.au/maps/Restrictions/Port_Hedland_and_South_Hedland.pdf

to engage more meaningfully with the community”.¹⁹ A comprehensive approach is required in order to effectively address alcohol-related problems; appropriate liquor restrictions can form a valuable part of the necessary comprehensive approach, alongside appropriate resourcing of treatment and support services and other complementary measures.

If additional liquor restrictions are applied in Port Hedland and South Hedland, we recommend comprehensive evaluation of the impacts of the changes, with appropriate resourcing and planning to facilitate meaningful evaluation. Evaluation findings would be helpful in informing approaches to managing the availability of alcohol in other areas of WA and elsewhere.

Thank you for the opportunity to make a submission on this important matter.

Yours sincerely,

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Appendix A. Summary of conditions requested by the WA Police and how they vary from current restrictions in Port Hedland and South Hedland.

Current situation	Proposed restrictions	Comment on changes
Takeaway alcohol can be sold Monday to Saturday 11am to 8pm	Packaged liquor may only be sold Monday to Saturday from 2pm to 8pm	Takeaway alcohol trading hours would be reduced by 3 hours per day. Takeaway alcohol would be available for 6 hours on trading days.
Takeaway alcohol cannot be purchased on Sunday	The sale of packaged liquor on Sunday is prohibited	No change
The sale of wine in containers of more than 2 litres is prohibited	Wine excluding fortified is limited to three bottles maximum, each no greater than 750ml, per customer per day	Wine in containers larger than 750ml (e.g. cask wine) will no longer be available. Limited to purchasing three bottles of wine per person per day.
The sale of fortified wine in containers of 1 litre or more is prohibited	Fortified wine in containers not exceeding one litre is limited to one maximum, per customer, per day	No change in maximum container size. Limited to purchasing one fortified wine product per person per day.
The sale of spirits in containers greater than 750ml is prohibited	Spirits are limited to one 750ml bottle maximum, per customer per day	No change in maximum container size. Limited to purchasing one bottle of spirits per person per day.
	Beer and RTDs sold as packaged liquor are limited to 3.5% alcohol content or less	Full-strength beer and RTDs will no longer be available as packaged liquor
	Beer is limited to 30 cans maximum, each can no greater than 375ml, per customer, per day	A maximum of one carton of beer or RTDs (up to 3.5% ABV) may be purchased per person per day.
	RTDs are limited to 24 containers maximum, each no greater than 375ml, per customer per day	
	Liquor may be purchased as a combination of beer, RTDs and wine but cannot exceed half the maximum applied to each category.	The overall volume of alcohol that may be purchased per person per day will be limited.
	The sale and supply of liquor is only permitted to a person who is present at the time of purchase.	Supports the monitoring of alcohol purchase limits.
	Operators of taxis and buses are not to be sold packaged liquor on behalf of persons in the vehicle.	Supports the monitoring of alcohol purchase limits and licensees' obligations regarding RSA.
	Occupants of taxis or buses must exit the vehicle to purchase packaged liquor to allow for RSA assessment.	Supports licensees' obligations regarding RSA.
	Where a packaged liquor product is	Supports harm minimisation.

	available in a non-glass container, licensees are prohibited from selling the product in a glass container.	
	Takeaway alcohol will not be sold if it is intended to be consumed in a public place or at a liquor restricted premises.	Supports approaches to reducing the amount of drinking in public places or at liquor restricted premises.