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Secretariat of the Western Australian  
Department of Local Government, Sport and Cultural Industries  
Liquor Reform Consultation  
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## **RE: WA Liquor Reform – The Next Chapter of WA’s Liquor Laws**

The Public Health Association of Australia (PHAA) is recognised as the principal non-government organisation for public health in Australia working to promote the health and well-being of all Australians. It is the pre-eminent voice for the public’s health in Australia and seeks to drive better health outcomes through increased knowledge, better access and equity, evidence informed policy and effective population-based practice in public health.

PHAA resolutely stands with Cancer Council Western Australia’s (WA) submission in response to the liquor reforms proposed by the Department of Local Government, Sport, and Cultural Industries. **There is no safe level of alcohol consumption.** Any liquor laws should be prioritising public safety and adopt a proactive, evidence-based approach to minimising and ideally preventing, the harms from alcohol.

Alcohol is responsible for a substantial burden of death, disease, and injury in WA, affecting not only the drinkers themselves, but also children, families, and the broader community. The costs of alcohol related harms are significant and far exceed government revenue from alcohol taxation.<sup>(1)</sup>

We join Cancer Council Western Australia in demanding DLGSC consider and implement the following:

### **Introduce a minimum (floor) price for alcohol.**

- The price should be evidence informed (\$1.50 per standard drink) and adjusted for inflation.
- Must be complemented by additional investment in alcohol and other drug (AOD) treatment and support services state-wide.

Substantial research shows that reducing the affordability of alcohol is the single most effective intervention to reduce alcohol-related harms.<sup>(1)</sup> The heaviest drinking 20% of the Australian population account for 75% of all alcohol used and those most likely to prefer really cheap alcohol. A floor price for alcohol will target the disproportionate harm caused by very cheap alcohol.<sup>(2,3)</sup>

### **Stronger controls for the online sale and home delivery of alcohol**

- Drivers must be supported to safely ensure that alcohol deliveries are not left unattended, proof of age is checked, and delivery is refused to inebriated persons.
- Restrict alcohol delivery hours to between 10am and 10pm to reduce the risk of family violence and suicide occurring.
- Mandatory delay of two hours between alcohol order and delivery to reduce the risk of rapid delivery, enabling people to drink to high-risk levels.
- Report alcohol delivery data to the Department to enable research and inform regulations.

While alcohol does not cause suicide and domestic violence, alcohol products contribute to the likelihood of suicide and family violence occurring and the severity of harms that result from violence.<sup>(4)</sup> **Here are the facts.** Of alcohol related assaults in Australia, 37 percent occurred in the home, and more than half (57 per cent) of those were domestic violence.<sup>(4)</sup> Alcohol-related assaults increase substantially between 6pm and 3am (peaking between midnight and 3am). Also, acute alcohol consumption increases the risk of attempted suicide.<sup>(5)</sup> Again, suicides and sudden or unnatural deaths involving alcohol predominantly happen at night, in the home environment.<sup>(6,7)</sup> Time delays to prevent acute alcohol consumption, proper checks for inebriation and limiting delivery hours are all appropriate controls on the physical availability of alcohol and are essential components to effectively preventing and reducing harm from alcohol.<sup>(8)</sup>

#### **Meaningful community centred participation in liquor licensing processes.**

- Establish an independent Community Defender's Office.
- Licensing must require consultation with Aboriginal communities and people with lived experience.

Currently, community consultation of liquor licensing is far from being community centred. The community must prove the validity of their objection with very limited, if any, support by DLGSC or other bodies, despite the fact that the process entails a mass of lengthy documents and a very short timeframe, and the system being complex and legalistic. Such a process may discourage meaningful input from communities that have lived experience or Aboriginal communities, communities that are so often and appallingly targeted by the alcohol industry. That is why we must see greater lengths taken to consult with these important stakeholders.

#### **Amend the Act**

- Introduce measures to prevent young people's exposure to alcohol advertising and promotion.
- Amend the Act's primary object to regulate the sale, supply and consumption of liquor and minimise harm or ill-health caused to people due to liquor use (sections 5(1)(a) and 5(1)(b)).

Alcohol use can cause irreparable damage to the developing brain<sup>(9)</sup> and contributes to the three leading causes of death among adolescents: unintentional injuries, homicide, and suicide.<sup>(10)</sup> Young people must be protected against alcohol advertising or promotion, the Act must be amended to reflect the risk.

As is, the liquor laws attempt to balance minimising harm from alcohol with development of the liquor, tourism, and hospitality industries. These competing priorities often mean that harms from alcohol to our families and communities are accepted by the regulator to meet the objective of developing the liquor industry. There should be no role for the alcohol industry to influence government planning. We fervently believe that the Act should be amended to prioritise public safety to reduce harm caused by alcohol.

PHAA appreciates the opportunity to provide our support towards Cancer Council WA's submission and the numerous other evidence-based recommendations that they have put forward. Please do not hesitate to contact me should you require additional information or have any queries in relation to this submission.



Yours Sincerely,  
Dr. Elizabeth Connor  
PHAA WA Branch President

## References

1. Cancer Council Western Australia, WA Network of Alcohol and other Drug Agencies, Alcohol and Drug Foundation, Telethon Kids Institute. WA's hidden crisis: Harm from alcohol [Internet]. Perth: Cancer Council Western Australia; 2022 [cited 2023 Jan 27]. Available from: <https://cancerwa.asn.au/wp-content/uploads/2022/08/2022-06-WAs-Hidden-Crisis-Harm-from-alcohol-FINAL.pdf>
2. Coomber K, Miller P, Taylor N, Livingston M, Smith J, Buykx P, et al. . Investigating the introduction of the alcohol minimum unit price in the Northern Territory [Internet]. Geelong ; 2020 Feb [cited 2023 Jan 27]. Available from: [https://alcoholreform.nt.gov.au/\\_\\_data/assets/pdf\\_file/0007/818278/investigating-introduction-of-alcohol-minimum-unit-price-nt-final-report.pdf](https://alcoholreform.nt.gov.au/__data/assets/pdf_file/0007/818278/investigating-introduction-of-alcohol-minimum-unit-price-nt-final-report.pdf)
3. Department of Health. NATIONAL ALCOHOL STRATEGY 2019–2028 [Internet]. Canberra; 2019 [cited 2023 Jan 27]. Available from: <https://www.health.gov.au/sites/default/files/documents/2020/11/national-alcohol-strategy-2019-2028.pdf>
4. Briscoe S, Donnelly N. Temporal and Regional Aspects of Alcohol-Related Violence and Disorder [Internet]. 2001 May [cited 2022 Dec 9]. Available from: [https://www.bocsar.nsw.gov.au/Pages/bocsar\\_publication/Pub\\_Summary/Alcohol\\_Bulletin/ab01-Temporal-and-Regional-Aspects-of-Alcohol-Related-Violence-and-Disorder.aspx](https://www.bocsar.nsw.gov.au/Pages/bocsar_publication/Pub_Summary/Alcohol_Bulletin/ab01-Temporal-and-Regional-Aspects-of-Alcohol-Related-Violence-and-Disorder.aspx)
5. Borges G, Bagge CL, Cherpitel CJ, Conner KR, Orozco R, Rossow I. A meta-analysis of acute use of alcohol and the risk of suicide attempt. *Psychol Med* [Internet]. 2017 Apr 8 [cited 2022 Dec 9];47(5):949–57. Available from: DOI: 10.1017/S0033291716002841
6. Darke S, Duflou J, Torok M. Toxicology and Circumstances of Completed Suicide by Means Other than Overdose. *J Forensic Sci* [Internet]. 2009 Mar [cited 2022 Dec 9];54(2):490–4. Available from: DOI: 10.1111/j.1556-4029.2008.00967.x
7. Darke S, Duflou J, Torok M, Prolov T. Characteristics, circumstances and toxicology of sudden or unnatural deaths involving very high-range alcohol concentrations. *Addiction* [Internet]. 2013 Aug [cited 2022 Dec 9];108(8):1411–7. Available from: DOI: 10.1111/add.12191
8. World Health Organization. The SAFER technical package: Five areas of intervention at national and subnational levels [Internet]. Geneva; 2019 [cited 2022 Dec 12]. Available from: <https://apps.who.int/iris/bitstream/handle/10665/330053/9789241516419-eng.pdf?sequence=1&isAllowed=y>
9. Bava S, Tapert SF. Adolescent Brain Development and the Risk for Alcohol and Other Drug Problems. *Neuropsychol Rev* [Internet]. 2010 Dec 19 [cited 2022 Dec 12];20(4):398–413. Available from: DOI: 10.1007/s11065-010-9146-6
10. National Health and Medical Research Council. Australian guidelines to reduce health risks from drinking alcohol [Internet]. Canberra; 2020 [cited 2022 Dec 9]. Available from: <https://www.nhmrc.gov.au/about-us/publications/australian-guidelines-reduce-health-risks-drinking-alcohol#block-views-block-file-attachments-content-block-1>