Submission No 325

SYDNEY'S NIGHT TIME ECONOMY

Organisation: Australian Health Promotion Association

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Joint Select Committee on Sydney's Night Time Economy Parliament of NSW Macquarie St, SYDNEY NSW 2000

1 July 2019

I write to you on behalf of the Australian Health Promotion Association Ltd (AHPA®) regarding the call for submissions on the Inquiry into Sydney's Lockout Laws from the Parliament of NSW's Joint Select Committee on Sydney's Night Time Economy.

AHPA is the peak body for health promotion in Australia and is committed to improving the health and wellbeing of all people. Australia is one of the healthiest countries in the world largely because of effective health promotion practice - creating social and environmental conditions that enable Australians to enjoy a healthy and happy life.

The misuse of alcohol remains a real and continuing threat to the health of current and future generations in Australia. Alcohol's contribution to Australia's total disease burden is unacceptable, with alcohol's misuse costing Australia 36 billion dollars annually, despite on-going industry self-regulation and 'responsible drinking' education campaigns.

As a matter of public health urgency, regarding Sydney's lockout laws, AHPA[®] strongly recommends retaining the conditions placed on liquor establishments in the Prescribed Precincts of Sydney CBD and Kings Cross.

Effect on Sydney's Night Time Economy

We know that in both Sydney and Newcastle NSW, sharp reductions in alcohol related violence and other anti-social behaviour have resulted since restrictions were imposed, yet the alcohol industry has consistently criticised the government response, claiming restrictions to personal freedoms and erosion of profits. The following seeks to provide factual responses to the spread of misinformation on the effects of the restricted night time trading of alcohol.

<u>Fact Check 1: The Myth that Sydney's Lockout Laws have Decimated Local Businesses</u>
Industry calls to abandon the lockout laws due to the impact they are having on businesses within the City of Sydney, should be rejected as they contradict actual liquor licence figures. City of Sydney liquor licence counts, published in the relevant ILGA, Dept. of Justice and Dept. of Industry annual reports, indicate that there are now more licences operating than before the laws were introduced (February 2014). Table 2 outlines the annual liquor licence counts for the City of Sydney.

Table 2: City of Sydney Liquor Licence Counts

| 30 th June |
|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|
| 2012 | 2013 | 2014 | 2015 | 2016 | 2017 | 2018 |
| 2,188 ¹ | 2,316 ² | 2,420 ² | 2,510 ² | 2,163 ³ | 2,282 ³ | 2,347 ³ |

Whilst there was a short-term drop in licences post-lockouts, these are being replaced with new licences that comply with the current alcohol harm reduction measures, which enable more innovative and viable business models that enhance Sydney's night time economy. This has been a positive outcome of the lockout laws.

Any further relaxation of Sydney's lockout laws are likely to attract problematic business practices which rely heavily on the excessive sale of alcohol past 3am as their only viable business model. This would likely see a return to the unacceptable levels of alcohol-related harms experienced in these precincts prior to the introduction of the regulations.

Fact Check 2: The Myth that Sydney's Lockout Laws are Inconsistent with Other International Cities

Opponents to Sydney's lockout laws claim that the restrictions imposed on licensed establishments in the CBD and Kings Cross precincts are incongruent with other international cities. However, a simple review of similar regulatory approaches internationally found that not only were these measures commonplace in major cities around the world, but that the current lockout laws in Sydney, particularly the "last drinks" conditions, are less restrictive than many of these other global cities. Table 1 compares Sydney's "last drinks" restrictions with similar conditions internationally.

Table 1: Licensed Premises' Closing Times of Large Cities

City	Closing Times		
Sydney, Australia	3am last drinks or 3.30am for live		
	entertainment venues (no mandatory closing		
	time for authorised venues)		
Los Angeles, USA	2am closing time		
San Francisco, USA	2am closing time		
Dublin, Ireland	Closing times up to 2.30am with an extended		
	licence		
Glasgow, Scotland	12am closing time for pubs and 3am for clubs		
Toronto, Canada	Closing time of 2am, extension to 4am for		
	special events		
Queensland, Australia	3am closing time for safe night precincts (SNPs)		
	and 2am for venues outside SNPs		
Cape Town, South	2am closing time		
Africa			

It is important to note that the lockout laws do not preclude authorised licensed premises from remaining open past 3am (or 3.30am for live entertainment venues), they simply

¹ Independent Liquor & Gaming Authority, Annual Report 2013-14. 2014

² NSW Department of Justice, Annual Report 2015-2016. 2016

³ NSW Department if Industry, Annual Report 2017-18. 2018

mandate a cessation of alcohol sales. Sydney's night time economy is already a vibrant and eclectic environment, which is not solely predicated on the supply of alcohol.

Positive Impacts of the Sydney Lockout Laws

The evidence overwhelmingly supports the retention of the reforms established in 2014 through the Sydney Lockout Laws, which have proven successful in reducing alcohol-related harms in both the Sydney CBD and Kings Cross precincts. In the following section we highlight some of the benefits to health and wellbeing for the communities impacted by the Sydney Lock Out laws.

Reductions in Alcohol-Related Hospital Presentations & Admissions

From a health perspective, St Vincent's Hospital admissions linked to alcohol-related violence in Sydney's entertainment precinct significantly reduced eighteen months after the introduction of the Lockout Laws. The number of patients with serious head injuries admitted between 8pm and 8am had more than halved.⁴

More specifically, an analysis of the incidence of eye socket fractures in the preceding 2 years and the 2 years after the laws came into effect highlighted a statistically significant 10% reduction in the number of fractures associated with alleged violence or assault during the period covered by the laws. Furthermore, the severity of these injuries tended to be less with fewer fractures requiring operative management.⁵

In addition to the reduction of head injuries, during the 12 months after the laws were established, there was a significant decrease in the number of all alcohol-related seriously injured patients presenting to St Vincent's Hospital during "high alcohol times" (6pm Friday to 6am Sunday). Presentations reduced from 140 before the regulatory changes to 106 after their introduction, a relative reduction of 24.8%.

Reductions in Alcohol-Related Crime

An analysis of crime statistics published by the Bureau of Crime Statistics and Research (BOCSAR) indicated that the Sydney lockout laws had a sustained reduction in non-domestic assaults 32 months after the reforms were introduced (to September 2016).

The research identified a statistically significant reduction in non-domestic assaults of 49% for the Kings Cross Precinct and 13% for the Sydney CBD Entertainment Precinct. This represents an estimated 553 fewer non-domestic assaults in Kings Cross and 613 fewer non-domestic assaults in the Sydney CBD in the 32 months after the laws commenced. Whilst some displacement of assaults (299 more non-domestic assaults) was identified in nearby suburbs including Pyrmont, Ultimo, Chippendale, Surry Hills, Elizabeth Bay and The Star Casino, as well as areas located further away including Bondi Beach, Coogee, Double Bay and Newtown, this was far outweighed by the reductions experienced in the Prescribed Precincts.

⁴ St Vincent's Health Australia website, Key must not turn on alcohol lockout laws. Available at: https://www.svha.org.au/newsroom/media/key-must-not-turn-on-alcohol-lockout-laws (Accessed 17/06/2019)

⁵ Holmes, R. F., Lung, Tom., Fulde, G.W., Fraser, C.L., Fewer orbital fractures treated at St Vincent's Hospital after lockout laws introduced in Sydney. Medical Journal of Australia, 208 (4): 174, 2018

⁶ Fulde, G., Smith, M., and Forster, S. L., Presentations with alcohol-related serious injury to a major Sydney trauma hospital after 2014 changes to liquor laws. Medical Journal of Australia, Nov 2;203(9):366, 2015

⁷ Donnelly, N., Poynton, P., and Weatherburn, D., The effect of lockout and last drinks laws on non-domestic assaults in Sydney: An update to September 2016. Bureau of Crime Statistics and Research, Crime and Justice Bulletin: Contemporary issues in crime and justice, no. 201, Feb 2017

The Need to Retain Sydney's Lockout Laws

Whilst the lockout laws have led to significant improvements to the health and safety of the local and broader community, the City of Sydney still experiences alcohol-related harms at substantially higher levels than the rest of NSW.

Maintain and Enhance Individual and Community Health Outcomes

The City of Sydney's alcohol-attributable hospitalisation rate has consistently exceeded the NSW average over the past 15 years. The most recent data indicates a 41% higher alcohol-attributable hospitalisation rate than the NSW average⁸. Figure 1 below compares the rate of alcohol-attributable hospitalisations for the City of Sydney and the NSW average from 2001-03 to 2015-17.

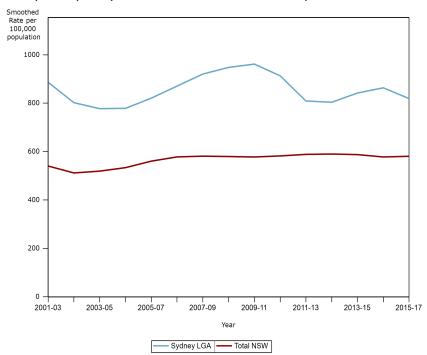


Figure 1: City of Sydney's Alcohol-Attributable Hospitalisations Rate Vs NSW

Source: Healthstats NSW

Similarly, the rate of alcohol-attributable deaths in the City of Sydney has also consistently exceeded the state average⁵. Figure 2 indicates that the alcohol-attributable death rate has been steadily decreasing since the 2006-07 period, but remains almost 15% higher than the NSW rate.

⁸ Healthstats NSW website, NSW Combined Admitted Patient Epidemiology Data and ABS population estimates (SAPHaRI). Centre for Epidemiology and Evidence, NSW Ministry of Health.

Figure 2: City of Sydney's Alcohol-Attributable Death Rate Vs NSW

Source: Healthstats NSW

In addition to the health-related harms experienced directly in the City of Sydney, Alcohol remains a health concern more broadly. This is particularly relevant to the Prescribed Precincts, whose patron catchment area extends throughout the Greater Sydney area and beyond. Emergency Department (ED) presentations across NSW resulting from alcohol problems have been steadily increasing.

Figure 3 indicates that the rate of ED presentations have increased by almost 15% in the last decade, suggesting that stronger regulations, rather than a weakening of current legislation, is required⁵.

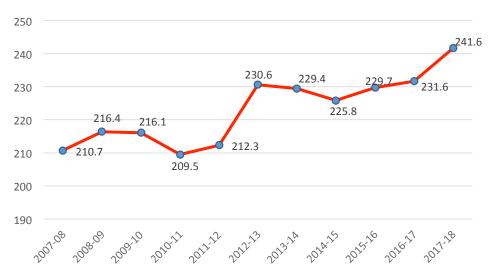


Figure 3: Emergency Department Presentation Rates per 100,000 population in NSW resulting from Alcohol Problems

Source: Healthstats NSW

Maintain and Enhance Community Safety

The evidence is clear that the lockout laws have had a significant impact on alcohol-related crime in the City of Sydney. However, the LGA currently still experiences some of the highest rates of alcohol-related crime in the state.

The City of Sydney alone accounted for over 15% of all alcohol-related non-domestic assaults in NSW in the 12 months to March 2019 (April 2018 to March 2019), and the rate per 100,000 population was over 5 times higher than the state average⁹. Recent data published by BOCSAR identified that the majority of these offences in the City of Sydney were committed between the hours of 12am and 6am, with 46% of all alcohol-related non-domestic assaults committed during this period¹⁰.

This is consistent with an earlier BOCSAR study which found alcohol-related assaults and offensive behaviour in NSW peaked between 12am-3am but remained high until 6am (see Figure 4 below)¹¹. This has particular relevance to the lockout laws, which aim to reduce the availability of alcohol during these periods identified as having higher incidents of alcohol-related crime.

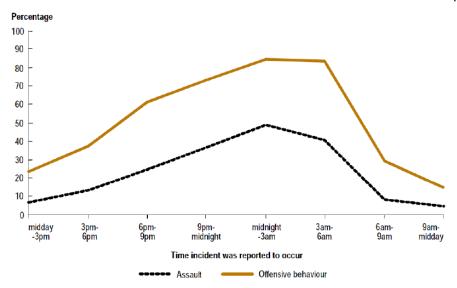


Figure 4: Times Assault and Offensive Behaviour Incidents Were Reported to Occur

Source: Briscoe, S., Donnelly, N. (2001). 'Temporal and regional aspects of alcohol-related violence and disorder'. Alcohol Studies Bulletin.

Incidents of alcohol-related offensive conduct in the City of Sydney (691 incidents) accounted for 24% of all incidents throughout NSW in the year to March 2019. Furthermore, the rate of alcohol-related offensive conduct incidents in the City of Sydney is 8 times higher than the state average (296.7 incidents per 100,000 people and 36.6 incidents per 100,000 population respectively).¹²

The majority of alcohol-related offensive conduct incidents in the City of Sydney occurred between the hours of 12am and 6am, which accounted for 44% of all incidents⁷. Figure 5 outlines the temporal trend of incidents in the last 12 months.

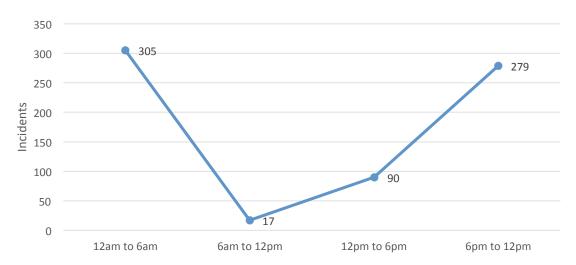
⁹ Bureau of Crime Statistics and Research, Incidents of Alcohol-Related Assault (Non-domestic assault) from April 2017 to March 2019. Available at http://crimetool.bocsar.nsw.gov.au/bocsar/. (Accessed 18/06/2019)

¹⁰ Bureau of Crime Statistics and Research, LGA_Alcohol_Related_Time_Day19Q1. Available at http://crimetool.bocsar.nsw.gov.au/bocsar/. (Accessed 18/06/2019)

¹¹ Briscoe, S., Donnelly, N., Temporal and regional aspects of alcohol-related violence and disorder. Alcohol Studies Bulletin, 2001

¹² Bureau of Crime Statistics and Research, Incidents of Alcohol-Related Disorderly Conduct (Offensive Conduct) from April 2018 to March 2019. Available at http://crimetool.bocsar.nsw.gov.au/bocsar/. (Accessed 18/06/2019

Figure 5: Temporal Trend of Alcohol-Related Offensive Conduct Incidents from April 2018 to March 2019



Source: Bureau of Crime Statistics and Research

<u>Premier's Priorities: Reducing Domestic Violence & Protecting Our Most Vulnerable</u> Children

The NSW Premier recently released a new set of priorities to address social challenges in the community. Two of these challenges include reducing domestic violence and protecting our most vulnerable children from abuse and neglect, with particular focus given to alcohol dependence and domestic violence in the household.^{13,14}

The role of alcohol in family and domestic violence (FDV) is complex and often misunderstood. Historically, the relationship between alcohol and FDV has not been adequately recognised. More recently however, it has increasingly been acknowledged as a contributing factor in many domestic violence incidents.

The World Health Organisation (WHO) suggests that alcohol consumption, especially at high levels, can increase the occurrence and intensity of intimate partner violence (IPV), and links between the two are complex⁵. A large body of evidence supports the notion of this multifaceted relationship^{15,16}.

Alcohol is estimated to be involved in up to 65% of all family violence incidents throughout Australia¹⁷. Within NSW, alcohol-related domestic assaults have consistently accounted for approximately 30% of all domestic assaults. Figure 6 highlights the proportion and number of alcohol-related domestic assaults in NSW over the last 5 years.

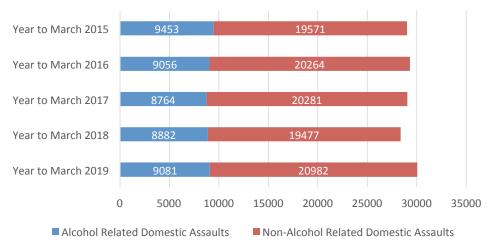
¹⁴ NSW Government Website, Premier's Priorities 2015-2019. Available at: https://www.nsw.gov.au/improving-nsw/premiers-priorities-2015-2019/ (Accessed 1/7/2019)

¹⁵ World Health Organisation, Intimate Partner Violence and Alcohol. John Moores University, Centre for Public Health, 2006.

¹⁶ Livingston, M., (2011). A Longitudinal analysis of alcohol outlet density and domestic violence. Addiction, 106(5): 919-925.

¹⁷ Foundation for Alcohol Research and Education, National Framework for Action to Prevent Alcohol-Related Family Violence, 2015.

Figure 6: Incidents of alcohol related domestic assault vs non-alcohol related domestic assault from April 2014 to March 2019

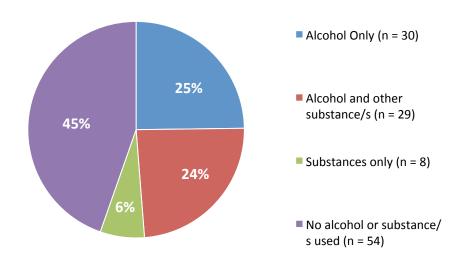


Source: Bureau of Crime Statistics and Research

Locally, the City of Sydney is experiencing higher rates of alcohol-related domestic assaults compared with NSW (189.8 incidents per 100,000 people and 115.5 incidents per 100,000 people respectively). There were 442 alcohol-related domestic assaults in the year to March 2019, which represents almost 5% of the total incidents across NSW.¹⁸

The strong association between alcohol and family violence becomes even more evident in the most critical incidents. A 2018 analysis of IPV homicides by the Australian Domestic Violence and Family Violence Death Review Network indicates that of the 121 male IPV homicide offenders who killed a female homicide victim between 2010-2014, almost half were using alcohol at the time of the fatal episode $(n=59, 49\%)^{19}$.

Figure 7: Australian male homicide offenders who killed a female intimate partner by alcohol and/or other substance use at fatal episode



Source: Australian Domestic Violence and Family Violence Death Review Network

¹⁸ Bureau of Crime Statistics and Research, Incidents of Alcohol Related Assault (Domestic Assault) from April 2017 to March 2019. Available at http://crimetool.bocsar.nsw.gov.au/bocsar/. (Accessed 19/06/2019

¹⁹ Australian Domestic Violence and Family Violence Death Review Network, 2018 Data Report. Published by the Domestic Violence Death Review Team. 2018.

This association is replicated at a state level within NSW. According to the Domestic Violence Death Review Team Report 2015-2017, of the 77 reported homicide cases where offenders were identified, 49% of abusers had a history of problematic alcohol use. Furthermore, 38% of abusers were using alcohol at the time of the fatal incident²⁰.

The Domestic Violence Death Review Team has provided recommendations for implementation by government and non-government agencies to reduce the incidents of domestic violence caused deaths. The most recent 2015-2017 report made an unprecedented recommendation relating to licensed premises which states:

Recommendation 14:

"When making determinations regarding any alcohol licensing related applications in areas identified by the NSW Bureau of Crime Statistics and Research as domestic violence 'hot spots', apply the following criteria:

For any applications pertaining to an extension of trading hours, or the development of new liquor outlets or bottle-shops in domestic violence hot spots, there should be a rebuttable presumption against granting the application.²¹"

Figure 8 highlights the domestic assault hotspots in the City of Sydney and surrounding areas. Both the Kings Cross and Sydney CBD precincts fall within a "high" hotspot for domestic assaults.

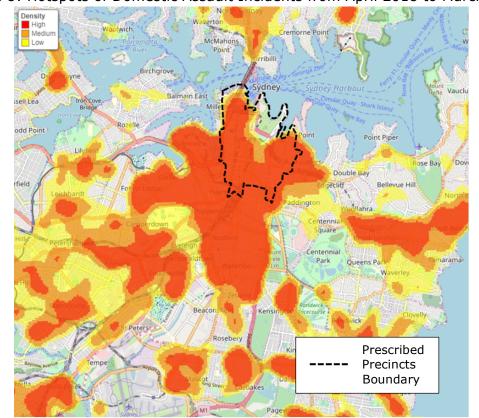


Figure 8: Hotspots of Domestic Assault Incidents from April 2018 to March 2019

Source: Bureau of Crime Statistics and Research

²⁰ NSW Domestic Violence Death Review Team, NSW Domestic Violence Death Review Team Report 2015-2017. Available at: https://www.parliament.nsw.gov.au/lc/papers/DBAssets/tabledpaper/WebAttachments/72106/2015-2017_DVDRT%20REPORT%20PDF.pdf (Accessed 9/1/2019).

NSW Domestic Violence Death Review Team Report 2015-2017. State Coroner's Court of New South Wales, Department of Justice, 2017

A further weakening of the lockout laws will essentially grant a blanket extension of trading hours for two precincts within "high" hotspots for domestic assaults. This is likely to exacerbate the serious impacts of domestic violence in the local and greater Sydney Metropolitan areas.

The Report on the Government Response to this Coroners Report states that Recommendation 14 is "Supported in Principle"²². We strongly recommend the Parliamentary Committee adhere to the NSW Government's support of Recommendation 14 outlined in the abovementioned report and retain the current regulatory measures.

<u>Premier's Priority: Towards Zero Sui</u>cides

"The tragic loss of life from suicide leaves families and communities devastated and we shouldn't accept the current rates." (Gladys Berejiklian, October 2018)²³

An additional Priority has been included in the updated Premier's Priorities released in June 2019, titled Towards Zero Suicides. This new focus sets an ambitious target of reducing the rate of suicide deaths in NSW by 20% by 2023. 13 Substantial Australian and international evidence clearly demonstrates strong and consistent relationships between suicidal behaviour and chronic alcohol use disorders, as well as the acute use of alcohol and intoxication, particularly among younger cohorts^{24,25,26}.

In 2017, acute intoxication or drug and alcohol use disorders were mentioned as contributing factors in 41.6% of intentional self-harm deaths in Australia in the 25-44 year age group²⁷. Alcohol, drugs or other substances were also found in the bloodstream of almost 15% of all people who died by suicide²⁰.

Australian Bureau of Statistics data indicates that suicides are rising in Australia, with 3,128 people having died by suicide in 2017. This was a 10-year high and equates to 8.6 deaths by suicide every day²⁰. This is replicated at a state level with NSW experiencing an increasing trend of suicide deaths since 2008.

²² NSW Coroners Court website, Domestic Violence Death Review Team Report 2015-2017 Government Response. Available at: http://www.coroners.justice.nsw.gov.au/Documents/DVDRT%20Report%202015-17%20-1

^{%20}Government%20response_received%2029June2018(for%20web).pdf (Accessed 14/06/2019)

23 NSW Government, NSW Begins Journey Towards Zero Suicides. Available at: https://www.nsw.gov.au/your-government/the-premier/media- releases-from-the-premier/nsw-begins-journey-towards-zero-suicides/ (Accessed 20/06/2019)

Topp, L. (2011). Suicide in Australia: Where do alcohol and other drugs fit in? Of Substance: The National Magazine on Alcohol, Tobacco and Other

Drugs, 9(1): 18.

²⁵ Borges, G., Bagge, C., Cherpitel, C., Conner, K., Orozco, R. and Rossow, I., A meta-analysis of acute use of alcohol and the risk of suicide attempt. Psychological Medicine, 47(5): 949-57. 2017

²⁶ Norstrom, T. & Rossow, I., Alcohol consumption as a risk factor for suicidal behavior: A systematic review of associations at the individual and at the population level. Archives of Suicide Research, 20(4): 489-506. 2016

²⁷ Australian Bureau of Statistics, Causes of death, Australia, 2017, intentional self-harm, key characteristics. Available at: https://www.abs.gov.au/ausstats/abs@.nsf/Lookup/by%20Subject/3303.0~2017~Main%20Features~Intentional%20selfharm,%20key%20characteristics~3 (Accessed 19/06/2019)

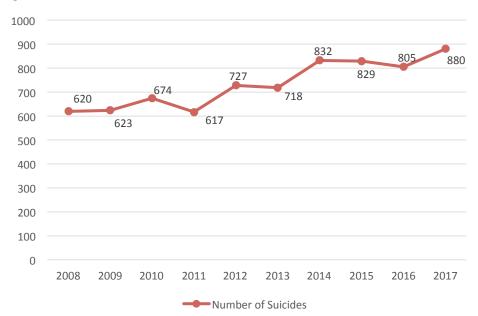


Figure 9: Number of Suicide Deaths in NSW between 2008 and 2017

Source: Bureau of Crime Statistics and Research

Suicide prevention has become a key focus area for the NSW Government with the release of the Strategic Framework for Suicide Prevention in NSW 2018-2023. The strategy recognises the need for "whole of government, whole of community approach(es) to prevent further suicides or suicide attempts, with greater integration and collaboration between all levels of government, community, non-government and private sector organisations to support current and future suicide prevention initiatives²⁸".

The National Drug Strategy 2017-2026 identifies the regulation of the availability of alcohol as a key pillar of harm minimisation²⁹. Regulatory measures such as Sydney's lockout laws are an effective primary prevention strategy to reduce the harms associated with alcohol, which includes suicidal behaviours. In keeping with the abovementioned strategy, the current lockout laws should be supported by government, non-government and the private sector alike.

In summary:

- The lockout law reforms are consistent with other major cities internationally
- · Liquor licences in the City of Sydney have returned to pre-lockout levels
- Alcohol-related presentations to St Vincent's Hospital have reduced since the restrictions have been established
- There has been a significant reduction in non-domestic assaults in the Prescribed Precincts
- Alcohol-attributable hospitalisation rates are 41% higher in the City of Sydney than the NSW state average
- The City of Sydney remains among the highest in the state for alcohol-related crime and the majority of incidents occur between 12am-6am
- The Prescribed Precincts are located within a "high" hotspot for domestic assaults and therefore any further trading hour extension would be contrary to the

²⁸ NSW Health factsheet, Suicide Prevention in NSW. Available at: https://www.health.nsw.gov.au/mentalhealth/resources/Factsheets/strat-fmk-suicide-prev-nsw-factsheet.pdf. (Accessed 19/06/2019)

²⁹ Australian Government – Department of Health, National Drug Strategy 2017-2026. Available at: https://beta.health.gov.au/resources/publications/national-drug-strategy-2017-2026 (Accessed 19/06/2019)

- Government's support of Recommendation 14 of the NSW Domestic Violence Death Review Team Report
- Regulating the availability of alcohol is a proven primary prevention strategy to minimise alcohol-related harms including suicide, domestic violence and alcoholrelated crime

The evidence overwhelming supports the retention of the lockout laws within the Prescribed Precincts.

Whilst we recognise the role Kings Cross and the Sydney CBD plays within Sydney's night time economy and the positive health and crime outcomes achieved since the lockout laws were established, levels of alcohol-related harms remain unacceptably high.

We strongly recommend that the Joint Select Committee on Sydney's Night Time Economy retain the lockout laws and consider further regulatory measures to reduce the harmful effects of excessive alcohol consumption in the City of Sydney and more broadly throughout Greater Sydney.

Thank you once again for the opportunity to comment on the Review of the Sydney Lockout Laws.

Yours sincerely,

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