

**Submission
No 705**

SYDNEY'S NIGHT TIME ECONOMY

Organisation: Australian Salaried Medical Officer's Federation (ASMOF) NSW

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ASMOF NSW submission to the Inquiry into Sydney's night time economy

The Australian Salaried Medical Officers' Federation (ASMOF) is the Union which represents over 5000 Registered Medical Practitioners in NSW who are mostly employed in our public hospitals. Our members cover a wide range of medical specialities, including 381 doctors working in Emergency Medicine.

We thank the Joint Select Committee for the opportunity to contribute to this important discussion. As the Doctors' Union our concerns and comments are focused on the need to maintain and enhance individual and community health outcomes, including the health and safety of our members.

In order to do this we need to be realistic about the harm that alcohol and drug use causes to our community. These are harms that our members repair every day and night in Sydney's hospitals. Alcohol and drug fuelled aggression and violent incidents represent a serious health and safety risk to individuals, the community and our doctors doing their job.

It is possible to address these risks and also support a world-class, thriving Sydney nightlife. A diverse late night culture which drives our night time economy and community safety can, and does, co-exist. To support it we need to implement a wide range of evidence-based strategies- including those that are working effectively already, and new approaches which will have every chance of success.

Our submission will draw attention to the successful 'lockout laws' as well as other evidence-based strategies that doctors believe are necessary to get the balance right in Sydney.

ASMOF strongly urges the Committee to:

- 1. Recognise alcohol and drug related harm as a priority to improve community health and safety.**
- 2. Maintain and extend Sydney's lockout laws, particularly the 3am cessation of service and the midnight restrictions which are crucial to the effectiveness of the measures.**
- 3. Consider drug law reform and improve drug and alcohol treatment services across NSW.**
- 4. Invest in other measures to enhance safety in Sydney at night, including pill testing trials and outreach services.**

ASMOF is a proud member the Last Drinks Coalition and we also endorse the Keep Sydney Safe campaign and submission provided to the Committee.

Yours Sincerely,

Dr Tom Karplus
Secretary, ASMOF

1. Why we need to address alcohol and drug use

New evidence emerges regularly about the toll that alcohol takes on the health and safety of individuals and our community. Last week the media reported on a landmark study conducted by St Vincent's Hospital in Melbourne, which has once again highlighted the dramatic impact of alcohol in promoting illness, injury, death, violence, crime, unemployment, economic loss and relationship breakdowns.ⁱ The 2019 Australian Drug Harms Ranking study found that alcohol was by far the most harmful drug when harm to users and harm to others was combined.ⁱⁱ

The Drug Harms Ranking Study also draws attention to an alarming fact. The latest research tells us that per capita alcohol consumption in Australia has been declining. But alcohol-attributable deaths, alcohol-attributable hospitalisations and emergency department (ED) presentations have not followed the trend.ⁱⁱⁱ

This is just one of a plethora of studies highlighting the devastating effects of alcohol consumption on our communities. A 2018 study of alcohol-related presentations to EDs in Australia and NZ, which included intoxication and other emergencies besides injuries, found that almost 1 in 10 of all attendances were alcohol-related.^{iv} That equates to half a million patients every year presenting to Australian EDs with alcohol-related harm.^v

Certainly our doctors working in packed EDs have not seen any decline in their work despite a reduction in alcohol consumption overall. They report to ASMOF the ever growing numbers of patients affected by alcohol and other drugs, who can be a threat to the health and safety of themselves, staff and other patients.

The researchers behind the 2019 Drug Ranking study astutely noted:

'In Australia, the cost of the harms caused by the drinking of others was estimated to be approximately AUD\$6.8 billion in 2010 (Laslett et al., 2011). Yet, initiatives aimed at limiting alcohol harms, such as restrictions on the alcohol content of beverages at sporting events, despite their effectiveness (Egerton-Warburton, 2018), draw complaints about the imposition of a 'nanny state' ...'

The lockout laws are a clear example of one such effective intervention which has been undermined by 'nanny state' complaints fuelled by a minority of powerful interest groups, and we will address these laws further below.

We are also reminded to consider the huge financial cost of excessive alcohol consumption, which should be duly considered alongside the profits which our night time economy generates- we need to ensure that we are looking at the whole picture.

The researcher's at St Vincent's go on to conclude:

'These data consistently and unequivocally indicate that alcohol and drug policies must prioritise investment in effective alcohol policies not only for the sake of the drinker but also the community.'^{vi}

Abuse of alcohol and drugs, and record numbers of presentations to EDs in Sydney are a community safety concern, and it must be a priority of the Committee to address this.

Safety of workers

Far too many of our doctors continue to experience and expect violence as part of their job. In the words of one our doctors:

'Physical violence, threats and verbal abuse occur on every ED shift - it just becomes something that we are expected to put up with'

Under the Work Health and Safety Act 2011 (NSW), the NSW Government, as the ultimate employer of salaried doctors in public hospitals, is obliged to provide and maintain a work environment without risks to health and safety and must identify, assess, eliminate or control foreseeable workplace risks. Section 19 of the WHS Act requires that the NSW Government must ensure, so far as is reasonably practicable, the health and safety of its employees, and, so far as is reasonably practicable, that the health and safety of other persons is not put at risk from work carried out.

With assault on NSW hospital premises rising,^{vii} we cannot afford to be complacent about the safety of Sydney's doctors or other workers, and must commit to strategies which place safety first.

2. Sydney lockout laws

ASMOF support the suite of measures introduced by the NSW Government in 2014 which are most commonly referred to as the 'lockout laws', particularly the 3am cessation of service and midnight restriction on shots.

In 2014 the NSW Government introduced the *Liquor Amendment Act 2014 (No. 3 of 2014)* in an attempt to tackle alcohol related violence. The amendments introduced the 1.30 am patron lockout for hotels, nightclubs, general bars and registered clubs in the Sydney CBD and Kings Cross and required certain venues to cease alcohol service at 3.00 am.

The NSW Premier acknowledged that 'there is no single or simple cure-all for those problems' but expressed that he was 'confident that these reforms will make a significant difference in tackling drug-and alcohol-fuelled violence on our streets.'

The 2016 Callinan Review was strongly in favour of the laws, however in order to protect artistic endeavours 20 live music venues had their limits relaxed allowing them to keep their doors open until 2am and serve alcohol until 3.30am.

The amendments also applied a prohibition across NSW on the sale of takeaway alcohol after 10pm.

A win for health and safety

These laws have substantially reduced the incidence of assault in Kings Cross and the Sydney CBD.

Our members working in Emergency Department in the CBD Entertainment District have anecdotally reported to us the drop in alcohol-related injuries since the introduction of the lockout laws. Our members testimony is supported by high quality research from the Bureau of Crime Statistics and Research (BOCSAR) and the Medical Journal of Australia.

Assistant Professor Nadine Ezard, the clinical director of the drug and alcohol unit at St Vincent's Hospital recently wrote that:

'Five years ago, the impact of alcohol-related violence and injuries on the hospital, in terms of presentations and admissions, was nothing short of severe. From our perspective, the lockout measures have been a success.

increased vibrancy shouldn't simply equal turning the beer taps on for longer.^{viii}

Professor Gordian Fulde AO, Director of Emergency at Sydney Hospital, told ASMOF that the benefits of the lockout laws are ongoing, telling us:

'There are still positives coming through, papers showing still decreased trauma, operations...The local residents like it, the footpaths are still now safer night and day.'

Professor Fulde is one of the researchers behind a recently published report from St Vincent's Hospital in Sydney, which showed that alcohol restrictions have reduced the number of violent alcohol-related injuries at their hospital. This included a 10% reduction in the incidence of alcohol-related orbital (eye socket) fractures between 2014-2016.^{ix} This reduction saved nearly half a million dollars in hospital, ambulance and other medical costs.

In 2015, Fulde and his colleagues reported a 25% reduction in major alcohol-related injuries (such as the so-called "one punch" injuries) in the 12 months after the laws were introduced.^x The authors noted that the changes were especially marked on weekends.

BOCSAR's research found that Kings Cross has seen a 59% decrease in assaults between 6pm and 1.30am and a staggering 94% per cent decrease between 3am and 6am. In Sydney CBD assaults have fallen by 20%.^{xi}

An underpublicised fact is that sexual assaults have been halved due to the laws – incidences of indecent and sexual assault in Kings Cross, the primary victims being women, have both reduced by almost 50%.

This research adds to compelling evidence that demonstrates restricting access to alcohol by closing drinking venues early reduces serious assaults and injuries.^{xii} A Norwegian study showed the effect in both directions when towns changed opening hours of pubs and clubs after 1am. Alcohol-related assaults increased by almost 20% per hour with increased opening hours, and vice versa with early last drinks^{xiii}.

BOCSAR have also confirmed that there has been no significant displacement of violence to other precincts. In his 2016 review of the laws, the Hon Ian Callinan AC QC noted that

'numbers of admissions at emergency departments and doctors' own experience confirm that' [displacement had not occurred].^{xiv}

The regulations known as the lockout laws have undoubtedly been effective in enhancing community health and safety in parts of Sydney and must be maintained, especially limitations on opening hours.

Doctors have also reported to ASMOF that areas excluded from the laws including the Star Casino and Barangaroo have higher noticeably higher incidences of alcohol-fuelled violence. In fact the Casino has been identified as a hotspot for violence.^{xv}

We therefore strongly recommend that the lockout laws are extended to other identified areas of danger, so that these communities can also benefit from the decrease in alcohol-fuelled violence.

What about Sydney's nightlife?

The lockout laws have been the subject of widespread debate and scrutiny since their introduction, and without real evidence or consideration, they have frequently formed a convenient scapegoat for a purported decline in Sydney's nightlife.

The shrill assertions of the alcohol, hotel and club industries that these reforms have "killed off" Sydney's night life are unfounded. Evidence clearly show that Sydney's nightlife is no such state, and is in fact diversifying.

A 2018 report commissioned by the Council of Capital City Lord Mayors found that the number of Sydney venues has increased, turnover has grown and employment has been boosted. Report highlights were that:

- the number of venues growing by 1.8% to 4,872 in 2017
- overall sales rising by 6.3% - the city's night-time economy is now worth \$4.05bn
- a 4.9% increase in new establishments in the "drink sub-sector" with an 8.7% increase in employment and an increase in turnover of 6.5%. All of these "well above the NSW and national averages"
- the number of drink venues declining by two between 2014 and 2017 (from 576 to 574), and
- a "boom in small bars within the city".^{xvi}

We do not deny that there are challenges for venues operating in Sydney at night, including live music venues. But these challenges are far more likely to take the form of NSW licensing fees and regulations, issues such as isolated noise complaints crippling music venues. Soundproofing requirements are prohibitively expensive and can be a big outlay for all but the most cashed-up venues. These concerns will no doubt be well represented by other submissions to the Committee from local promoters and organisers who are working hard to ensure that Sydney has a vibrant arts and cultural scene that is not dependent on alcohol consumption.

The lockout laws are modest and carefully targeted laws. Those with skin in the game know that two hours of trading restrictions at off-peak times are not the difference between a viable and unviable business and are a diversion from the real issues. It is important to note that they are also widely supported by the community, with 80% of 18-34-year-olds supporting a closing time for pubs, clubs and bars of no later than 3am. Indeed public sentiment suggests there would be support for strengthening the laws, an earlier 1am lockout has majority support from 18-24 year olds.^{xvii}

There are a broad range of measures to enhance Sydney's night-time economy such as transport and design of urban space which should be implemented before successful measures are repealed. The lockout laws can comfortably co-exist with a thriving night-time economy and should be maintained and extended to identified areas.

3. Reform on drugs and Fair Treatment

Whilst curbing the impact of excessive alcohol consumption has rightly been a priority of efforts thus far, our members working in busy EDs in broader Sydney CBD have shared with us their concern around the increase of patients attending ED affected by drugs, which can lead to violence and unsafe behaviour. Patients presenting to EDs may be inexperienced first-timers, recreational users or those with a drug dependency.

The 2019 Drug Ranking Study referred to earlier in this submission identified that Australia has a particular problem with crystal methamphetamine, which scored 2nd highest in terms of overall harm. Globally, Australia is reported to have the highest prevalence of use of methamphetamine with the cost of methamphetamine to the Australian community estimated at AUD\$5 billion annually, which does not even include the costs of Federal policing, Federal courts, or border protection.^{xviii}

Drug use is an important health issue to address and approaches we have drawn upon so far have failed us.

Fair Treatment

We can safely declare that we have lost ‘the war on drugs’ in NSW and it is time to take a different approach. For this reason ASMOF supports the [Fair Treatment campaign](#) being led by Uniting in NSW, with the support of 58 other non-government/not-for-profit organisations. Fair Treatment calls for increased investment in evidence-based drug harm reduction and demand reduction strategies; and the decriminalisation of personal possession and use of illegal drugs.

Using or possessing small quantities of drugs was decriminalised in Portugal in 2001, and drug users are referred to treatment services rather than dealt with as criminals. Since this time the use of harmful drugs has dropped, and the rate of death from overdose has lowered significantly. By comparison, Australia currently has an overdose death rate 20 times that of Portugal.

Australia’s poor track record is partly a reflection of the fact that drug and alcohol treatment services are simply unavailable across NSW, with significant geographical disparities in access and huge waiting lists. Patients who receive inadequate care in the community are more likely to be found on our streets and presenting to EDs.

Our doctors recognise that resource constraints in community-based drug and alcohol services are contributing to growing ED admissions. We believe that we need to take a broader, more preventative approach to tackling harm caused by alcohol *and* drugs, and one clear path to do this is to increase our investment in drug and alcohol treatment services across NSW to ensure they are available to all those who need them. This includes those who have found themselves in ED due to their alcohol and drug use and may be at increased risk.

4. Other measures to enhance health and safety

Pill testing

ASMOF supports ongoing trials of pill testing as a strategy to minimise potential harm caused by recreational drug use. Many experts have noted that pill testing acts as a gateway to engagement, and creates opportunities to provide targeted education about drug use and information relevant

services. The most recent trial of pill testing in Australia has shown early positive outcomes, with 7 substances found to contain lethal ingredient N-Ethylpentylone and binned by festival goers.^{xix} It's reported that festival-goers also stated they would consume less than they had intended when the purity of substances was revealed to them.

We need to continue to build a sound evidence base around pill testing in order to ensure we are looking out for the safety of our community, and employing realistic strategies that reach young people where they are at.

Onsite medical services and outreach

ASMOF would also like to encourage the Committee to explore options for a safe Sydney nightlife which bring health and other workers close to the action to keep community members safe.

'Street Outreach' or 'Street Teams' are one measure to ensure the safety of those affected by alcohol or drugs. The City of Sydney's has pointed to a successful trial of 'Precinct Ambassadors' in assisting people to reach medical service on weekends.^{xx} Outreach teams can work in partnership with hospitals and ambulance to enhance community safety.

Event-based interventions, such as onsite medical services at music festivals, could also be learned from. Major events in Sydney, such as Mardi Gras, see a spike in hospital admissions noted by our members. One way to effectively keep revellers safe and out of our EDs could be by investing in greater onsite medical services. Professor Simon Lenton of the National Drug Research Institute has called for broader, coordinated, event health care services, which include roaming outreach teams, assessment and triage from medical practitioners and onsite acute care.^{xxi}

ASMOF members who have participated in onsite medical services have told ASMOF that there is no doubt value to these services are valuable keeping attendees safe, however it is a very different working environment to their usual setting without access to the extensive medical equipment that is available in hospitals.

ASMOF encourages the Committee to consider investment in outreach options to improve safety on Sydney's streets and venues on busy weekend nights. Appropriate investment is needed to ensure workers are properly trained, able to practice safely, and health and safety protections are in place.

ⁱ Cunningham, M in the Sydney Morning Herald (2019) 'Alcohol causes most overall harm of any drug, says study', available [here](#).

ⁱⁱ Bonomo, Y., Norman, A., Biondo, S., Bruno, R., Daglish, M., Dawe, S., ... Castle, D. (2019). The Australian drug harms ranking study. *Journal of Psychopharmacology*, 33(7), 759–768.

ⁱⁱⁱ *ibid.*

^{iv} Egerton-Warburton, D., Gosbell, A., Moore, K., Wadsworth, A., Richardson, D., and Fatovich, D. M. (2018) Alcohol-related harm in emergency departments: a prospective, multi-centre study. *Addiction*, 113: 623–632. doi: 10.1111/add.14109.

^v *ibid.*

^{vi} Bonomo, Y., Norman, A., Biondo, S., Bruno, R., Daglish, M., Dawe, S., ... Castle, D. (2019). The Australian drug harms ranking study. *Journal of Psychopharmacology*, 33(7), 759–768.

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- vii NSW Bureau of Crime Statistics and Research. (2016, February 26). Police-recorded assaults on hospital premises in New South Wales. Available [here](#).
- viii Ezard, N. in the Sydney Morning Herald (2019) 'Don't lock out the facts on lockout laws: they've made this city safer', viewed [here](#).
- ix Ryan F Holmes, Thomas Lung, Gordian WO Fulde and Clare L Fraser (2018) Fewer orbital fractures treated at St Vincent's Hospital after lockout laws introduced in Sydney, *Med J Aust* 2018; 208 (4): 174. online: 10.5694/mja17.00564
- x Gordian WO Fulde, Myles Smith and S Lesley Forster (2015), 'Presentations with alcohol-related serious injury to a major Sydney trauma hospital after 2014 changes to liquor laws', *Med J Aust* 2015; 203 (9): 366
- xi NSW Bureau of Crime Statistics and Research (2016). Lockouts and Last Drinks. Sydney: NSWBOCSAR, available [here](#).
- xii Menéndez, P., Kypri, K., and Weatherburn, D. (2017) The effect of liquor licensing restrictions on assault: a quasi-experimental study in Sydney, Australia. *Addiction*, 112: 261–268. doi: 10.1111/add.13621.
- xiii Rossow I, Norström T.(2012) 'The impact of small changes in bar closing hours on violence. The Norwegian experience from 18 cities. *Addiction*. 2012 Mar;107(3):530-7.',
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- xv NSW Bureau of Crime Statistics and Research (2015), 'Mapping the impact of the Sydney lockout laws on assault', viewed [here](#).
- xvi Ingenium Research Pty Ltd (2018) 'Measuring the Australian Night Time Economy 2016-17- A project for the Council of Capital City Lord Mayors', available [here](#).; Henrique-Gomes, L, *The Guardian* (2018), 'Sydney drinkers recover from lockout blues, while Melburnians turn to food', available [here](#).
- xvii Foundation for Alcohol Research & Education (2018). Annual Alcohol Poll 2018. FARE: Canberra.
- xviii Bonomo, Y., Norman, A., Biondo, S., Bruno, R., Daghli, M., Dawe, S., ... Castle, D. (2019). The Australian drug harms ranking study. *Journal of Psychopharmacology*, 33(7), 759–768.
- xix Martin, L. (2019) 'Pill testing at Groovin the Moo festival potentially saves seven lives, organisers say' published in the *Guardian*, available [here](#).
- xx City of Sydney (2011) Discussion Paper:OPEN Sydney Future directions for Sydney at night, available [here](#).
- xxi Cunningham, M in the Sydney Morning Herald (2019) 'Alcohol causes most overall harm of any drug, says study', available [here](#).