INQUIRY INTO STRATEGIES TO REDUCE ALCOHOL ABUSE AMONG YOUNG PEOPLE IN NSW

Organisation: St Vincent’s Hospital, Inner City Health Program, Alcohol & Drug Service

Date received: 1/03/2013
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Submission by

Inner City Health Program
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1 March 2013
The Inner City Health Program (ICHP) Alcohol & Drug Service (ADS) of St Vincent’s Hospital would like to submit for consideration comments on the Terms of Reference for the NSW Legislative Council Standing Committee into Social Issues in the inquiry into strategies to reduce alcohol abuse among young people in NSW. The ICHP ADS is happy to be called upon to give evidence at any hearing in regards to this matter if required.

a) the effect of alcohol advertisements and promotions on young people, including consideration of the need to further restrict alcohol advertising and promotion

There is abundant evidence demonstrating young people are receptive to alcohol advertising and promotions, with significant influence on attitudes towards drinking, drinking behaviour and the amount of alcohol consumed by young people in NSW.

A recent Australian study highlighted the alcohol advertising industry’s targeting of young people; out of 2,810 alcohol advertisements aired over a two month period, half were aired during popular children’s viewing times. Key themes of humour, friendship/mateship and value for money were found to be appealing to young people\(^\text{I}\). Another study of the impact of alcohol advertising on young audiences during sporting broadcasts had similar findings, demonstrating young people have a high level of awareness of alcohol sponsors and brands promoting during sporting telecasts. The association of alcohol products with social and sporting success is an effective promotional strategy\(^\text{II}\). Such advertising is strongly correlated with attitudes towards drinking and risky drinking practices which are linked to high rates of preventable injury, illness and death.

The ICHP ADS is concerned over the nature and frequency of alcohol related presentations to Hospital Emergency Departments involving young people, particularly on Friday nights and weekends. The high rates of alcohol-related preventable injury places additional demands on already stretched Emergency Departments and increases waiting times for other urgent (non-alcohol related) conditions. Additionally, intoxicated patients – particularly aggressive patients - put avoidable stress on hospital staff and other patients. Injury, including high rates of head injury from assaults and motor vehicle injury, are costly to an already over-burdened health system.

The ICHP ADS strongly supports measures to reduce and restrict the exposure of young people to alcohol related marketing, measures of which should include strict non-industry led advertising regulations, a ban on alcohol related advertising and sponsorship particularly in sport, a ban on alcohol related merchandise, among others. The ICHP ADS also supports the proposal from the Foundation for Alcohol Research and Education (FARE), to strengthen the Liquor Act 2007 (NSW) to prohibit harmful discounting and promotion of alcohol products.

b) the effectiveness of alcohol harm minimisation strategies targeted at young people

The ICHP ADS supports the implementation of evidence-based harm minimisation strategies. Measures such as limiting the availability of alcohol have been shown to be effective. Effective strategies to reduce high levels of intoxication and associated alcohol-related harm include reduced liquor outlet density and trading hours and responsible service of alcohol.
Large scale education campaigns are not favoured due to the limited benefits of such campaigns and such campaigns being dwarfed by the resources, reach and impact of alcohol industry advertising and influence\textsuperscript{v}. Similarly school-based campaigns have been shown to be of limited effectiveness.

\textbf{c) measures to minimise the impact of alcohol in the workplace}

Excessive alcohol use is shown to directly impact on workplace relationships, safety and productivity. In 2001, the costs of alcohol related absenteeism alone was estimated to be over $1 billion nationally\textsuperscript{v}. The ICHP ADS strongly supports measures to minimise the impact of alcohol in the workplace, with particular concern for workplaces with strong drinking cultures that impact on safety. The ICHP ADS recommends that emphasis be placed on workplaces to comply with Commonwealth and State workplace health and safety regulations and workplaces provide workplace health and safety positions to support the identification of staff with problematic alcohol use and support their treatment and rehabilitation. The workplace, particularly large scale organisations, provides a convenient opportunity to identify and assist at risk persons at an early stage and reduce workplace injury and future health costs.

\textbf{d) the effectiveness of measures to reduce drink driving}

The ICHP ADS supports measures to reduce drink driving including current lower Blood Alcohol Concentration (BAC) limits for young drives and Random Breath Testing (RBT) enforcement. There is evidence that such measures have been effective in reducing the risk of road fatalities\textsuperscript{vi}. The ICHP ADS recommends that any measure also include referring drive offenders for further assessment, education and intervention. St Vincent’s Hospital, Alcohol & Drug Service, operates the Alcohol and Drug Information Service (ADIS), a 24 hour service which can assist with providing treatment information, advice and referral.

\textbf{e) measures to reduce alcohol related violence, including in and around licensed venues}

There is strong evidence of an association between the consumption of alcohol and violence, particularly in relation to binge drinking\textsuperscript{vii}. In Australia alcohol is a key factor in the three leading causes of death among adolescents; unintentional injury, homicide and suicide\textsuperscript{viii}. Additionally, one in four Australians report being the victim of verbal abuse by intoxicated persons\textsuperscript{x}. Research from NSW and Victoria indicate a dramatic increase in rates of alcohol-related harm among young people in recent years, harms which include acute intoxication, alcohol related assaults and hospitalisations\textsuperscript{x}. This is consistent with results from a national study on alcohol related harm which found an increase in alcohol related hospitalisations in all states from 1995-2006\textsuperscript{xii}. Responding to these harms requires a coordinated response involving reducing the overall availability of alcohol, improving the safety of licensed venues and providing safe and efficient public transport options\textsuperscript{xiii}.

Due to its location near entertainment areas, St Vincent’s Hospital experiences a high number of alcohol related presentations, a significant proportion of which include alcohol-related assaults. The link between violence and liquor outlet density as well as volume of alcohol sold by licensed venues is undeniable\textsuperscript{xiv}. The ICHP ADS supports measures to reduce alcohol related violence, particularly measures which restrict access to and supply of alcohol. Evidence-based measures include but are
not limited to restricting liquor outlet density and trading hours. Comprehensive measures, together with community mobilisation, have been introduced in various locations throughout NSW including Newcastle and other parts of Sydney and have been demonstrated to be effective in reducing or curbing alcohol related violencevi. Such measures should be replicated in the Kings Cross and nearby inner city areas; they are expected to reduce the number of alcohol-related presentations to the St Vincent’s Hospital Emergency Department.

**f) measures to address the impact of alcohol abuse on the health system**

According to the Australian Institute of Health and Welfare over one in five (22%) of all hospitalisations of young people aged 15-24 years old are alcohol relatedvii, resulting in significant health, social and other cost. In additional to structural changes discussed, the ICHP ADS recommends expanding targeted and early intervention services to reduce the incidence and cost of high risk alcohol use by young people and the associated burden on the health system.

The ICHP ADS also strongly recommends increased investment in workforce training not just within the alcohol and drug field but across the health, welfare, education and workplace health and safety sectors to better identify persons at risk early and offer appropriate treatment intervention. For this to occur, increased funding is required for specialist Alcohol & Drug educators to train workers across multiple sectors and Emergency Department staff to effectively identify and manage persons at risk of alcohol related harm, including referring persons at high risk for specialist treatment.

**g) any other related matter**

The ICHP ADS supports increased investment in alcohol related research and improvements in alcohol-related data collection (such as alcohol outlets, alcohol sales, and alcohol-related harms) for monitoring and evaluation. Initiatives include:

- collect and publish alcohol sales data in NSW.
- improve processes for the collection and linking of data for alcohol-related harm including data from ambulance services, hospitals and police, and make these data sets publically available.
- develop an evaluation framework and conduct independent evaluations for strategies to reduce the impact of alcohol.
- behavioural change intervention research to change drinking patterns among young people.
- health services research (pilot followed by scale up) of screening and brief intervention for at-risk drinking among young people, using a variety of electronic and social media; St Vincent’s Hospital has good experience of delivering scientifically proven online interventions for depression and anxiety (with its This Way Up clinic) and already delivers NSW Health’s 24-hour statewide telephone counselling, advice and referral service for drug and alcohol problems (Quitline for tobacco cessation and the Alcohol and Drug Information Service for other substances) which could be readily built on for the development of such an intervention.
References


Australians Bulletin 60. Available: