

6th February 2018
Mr Jonathan Horton QC
The Independent Liquor & Gaming Authority
PO Box 8325
PARRAMATTA WESTFIELD NSW 2150

Dear Mr Horton

SUBMISSION TO THE *NEWCASTLE CBD LIQUOR LICENCE CONDITIONS REVIEW*

This is a submission to the *Newcastle CBD Liquor Licence Conditions Review*. We are a group of medical practitioners who live in Newcastle and work in the public health system or in primary care in Newcastle, and are keenly aware of the history of alcohol related harms in Newcastle prior to the 2008 change in licencing conditions, known as the 'Newcastle conditions'.

We strongly support maintaining the Newcastle conditions and believe they should be extended to adjacent suburbs where unacceptable alcohol related violence continues to occur including the Hamilton area/Beaumont Street.

Risky drinking and alcohol attributable deaths in the Hunter New England region exceeds NSW averagesⁱ. The John Hunter Hospital was a recruitment site for an evaluation of the impact of alcohol presentations on the hospital. Alcohol was by far the most common psychoactive substance contributing to drug-related presentationsⁱⁱ.

The current level of alcohol related problems in Australia is highly significant. Over 20% Australians drink alcohol at risky levels on a monthly basis, and one in five Australians have experienced alcohol related verbal abuse in the past yearⁱⁱⁱ. The impact of alcohol is profound including a major driver of motor vehicle deaths and injuries^{iv} and contributor to family violence involving women being killed by their partners^{v vi}. Alcohol results in over 5,500 deaths per year and over 155,000 hospital admissions annually^{vii}. Alcohol is associated with 14 - 27% of hospital emergency department presentations^{viii, ix}. Alcohol costs Australia between \$A15 billion^x and \$A35 billion^{xi} each year while bringing in a taxation revenue of approximately \$A8.6billion per year^{xii}.

As medical practitioners who live and work in the Newcastle area, we are a regular witness to the devastating effects of alcohol on our community.

There is robust international evidence that alcohol availability, through hotels and bottle shops, is strongly associated with alcohol related harm and that reductions in alcohol availability results in decreased alcohol related harm^{xiii}.

Restrictions in alcohol trading in the fourteen Newcastle hotels has resulted in a successful significant and sustained reduction in alcohol related violence, demonstrated by academic publications from researchers at Newcastle University and elsewhere. The restriction in alcohol availability resulted in an immediate decrease of alcohol related violence of 37%^{xiv} that has been sustained with a decrease of alcohol related assaults by 21% five years after the introduction of the Newcastle conditions^{xv}.

This evidence is also supported by the latest data from the Bureau of Crime Statistics and Research (BOCSAR). From October 2007 to 2017, there has been a 79% reduction in the non-domestic assaults recorded by police in Newcastle and Newcastle West on Friday and Saturday night^{xvi}. Data from

Newcastle Police shows that from March 2008 to July 2015 there has been a 140 per cent increase in on-premise liquor licenses in the Newcastle CBD.

It should be noted that the principal proponents of extending the licencing hours and relaxing the 'Newcastle conditions' are proposing this to increase liquor sales and availability, with the aim of increasing profit. As has been demonstrated above, our community bears a significant economic, health and social cost as a consequence. We encourage your review to consider the objectives of the *NSW Liquor Act 1982*, consider the evidence being presented and find that the licensing conditions should not be relaxed.

The Review can be confident that any significant loosening of licensing conditions, i.e. increasing the availability of alcoholic beverages in the Newcastle CBD, will create additional alcohol related harm.

The evidence above demonstrate the Newcastle conditions are effective in reducing alcohol related harm and should remain in place.

Yours sincerely

Signed by

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ⁱ <http://www.healthstats.nsw.gov.au/>

ⁱⁱ <http://www.health.nsw.gov.au/aod/professionals/Documents/rpt-eval-nswda-cl-serv.pdf>

ⁱⁱⁱ Australian Institute of Health and Welfare 2017. National Drug Strategy Household Survey 2016: detailed findings. Drug Statistics series no. 31. Cat. no. PHE 214. Canberra: AIHW

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