5 December 2017

Peter Minchin
Director Liquor Control and Arbitration
Department of Local Government, Sport and Cultural Industries
By email: rgl@rgl.wa.gov.au

RE: Inquiry into the availability of packaged liquor in Karratha and surrounding communities

Thank you for the invitation to make a submission to this inquiry. This response is provided on behalf of the McCusker Centre for Action on Alcohol and Youth and the Public Health Advocacy Institute of WA (PHAIWA), based at Curtin University.

We understand WA Police have requested an addendum to the inquiry into the availability of packaged liquor in Port and South Hedland to extend the proposed liquor restrictions to Karratha and surrounding communities. We also understand that the same restrictions are being requested as those in Port and South Hedland, and that our response will be considered together with submissions to the Port and South Hedland inquiry. The McCusker Centre and PHAIWA provided a submission to the Port Hedland and South Hedland inquiry. Thus, our response to this inquiry will be brief.

We thank the WA Police for compiling the addendum to the January 2017 request for consideration that conditions on the sale of packaged liquor in Port Hedland and South Hedland be imposed under Section 64 of the Liquor Control Act 1988. The addendum by WA Police demonstrates the broad range of health and social problems present in the Pilbara region (beyond Port Hedland and South Hedland), and particularly Karratha, to which alcohol contributes directly and indirectly. These harms appear to be consistent with alcohol-related issues identified in Port Hedland and South Hedland, and include family violence, threatening behaviour, assaults, damage to property, child neglect, child safety, children taken into state care, and ambulance call-outs due to alcohol harms.

As highlighted in our submission to the Port Hedland and South Hedland inquiry, we support the focus on packaged liquor within the proposed restrictions. Packaged liquor, such as that sold from bottle shops, accounts for 80% of all alcohol sold in Australia.1 Woolworths (which owns BWS and other liquor retail formats) and Coles (which owns Liquorland and other retail liquor formats) accounted for around 63% of the Australian liquor retail market share in 2016-17.2 Australian research, including research conducted by the McCusker Centre, has shown that major alcohol retailers such as those associated with Woolworths and Coles supermarkets regularly promote and sell low-cost alcohol, and emphasise low prices and the purchase of high volumes of alcohol in their promotions.3 These approaches by liquor retailers are expected to negatively impact public health as an established evidence base links alcohol price reductions to increased levels of consumption.4,5

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It is evident in Superintendent Paul Coombes’ report that packaged liquor in particular is responsible for a large proportion of alcohol harms in Karratha and surrounding communities. Harm from packaged liquor is likely to occur away from the liquor retail outlet; this was also evident in Superintendent Coombes’ report.

There is compelling evidence from Australia and elsewhere that regulating the availability of alcohol is an important strategy to reduce harm from alcohol, within a comprehensive approach.\textsuperscript{6,7} Research shows that alcohol outlet days and opening hours are strongly related to alcohol consumption and harms, including assaults and hospitalisations.\textsuperscript{8,9} Liquor restrictions, which have taken a number of forms, have made important contributions to a range of areas in WA where benefits have been seen across a broad range of health and social indicators.\textsuperscript{10,11}

The current restrictions on the availability of takeaway alcohol in Karratha appear to be very modest and relate mainly to container size. These restrictions do not appear to be sufficient given the magnitude of alcohol-related problems in these communities. Additional packaged liquor restrictions appear to be warranted.

We support the position of Detective Superintendent Jim Migro APM that “for any restrictions to be successful in reducing harm they need to be considered across a broader area rather than two localised towns due to the proximity of packaged liquor outlets in nearby towns and the mobility of persons.” As we noted in our Port Hedland and South Hedland submission, a comprehensive approach is required in order to effectively address alcohol-related problems; appropriate liquor restrictions can form a valuable part of the comprehensive approach, alongside adequate resourcing of treatment and support services and other complementary measures.

As we previously recommended, if the proposed liquor restrictions are imposed in Port Hedland, South Hedland, Karratha and surrounding communities, a comprehensive evaluation of the impacts of the changes, with appropriate resourcing and planning to facilitate meaningful evaluation, would be particularly useful to help inform future decision making in the region and elsewhere.

Thank you for the opportunity to provide a submission on this important matter.

Yours sincerely,

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\textsuperscript{6} World Health Organization. Global strategy to reduce the harmful use of alcohol. WHO; 2010.
\textsuperscript{7} Anderson, Chisholm D, Fuhr DC. Alcohol and Global Health 2: Effectiveness and cost-effectiveness of policies and programmes to reduce the harm caused by alcohol. Lancet. 2009;373:2234-2246.
\textsuperscript{10} Drug and Alcohol Office. The impact of liquor restrictions in Halls Creek, quantitative data – 24 month review. November 2011.