

Submission to the Community Affairs Legislation Committee

RESPONSIBLE TAKEAWAY ALCOHOL HOURS BILL 2010

On 13 May 2010 the Senate, on the recommendation of the Selection of Bills Committee, referred the Responsible Takeaway Alcohol Hours Bill 2010 [introduced by Senator Fielding] to the Community Affairs Legislation Committee for inquiry and report by 25 October 2010.

From:

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The Children, Youth and Women's Health Service is South Australia's leading provider of health services for children, young people and women. We work in partnership with our clients and their families, the community and other service providers to promote, maintain and restore health.

The Children Youth and Women's Health Service provides:

- comprehensive specialist hospital and acute care services
- a comprehensive range of population health and primary health care services and programs
- integrated community care services
- services and programs that will measurably address the health and wellbeing of particular populations within the community.

The Children, Youth and Women's Health Service submits that the Responsible Takeaway Alcohol Hours Bill 2010 is one of the many important parts of a comprehensive strategy to address alcohol harm.

Alcohol consumption sits within a context of social acceptability in Australian society. This needs to be balanced with mechanisms for the protection of those vulnerable to the harmful effects of alcohol consumption, in particular for unborn babies, children and young people. Young people are particularly vulnerable to harmful effects due to their developing brains, their increasing independence and the required learning about safe consumption.

The National Health and Medical Research Council's most recently published Australian Guidelines to Reduce Health Risks from Drinking Alcohol state that not drinking alcohol is the safest option for children and young people under 18 years of age and that the lifetime risk of harm from drinking alcohol increases with the amount consumed.ⁱ

The harm associated with alcohol consumption for young people is broad ranging including pedestrian and motor vehicle accidents, susceptibility to sexual coercion and violence and sexually transmitted infections, violence and crime, as well as the longer term health damage caused by liver disease, cancers and cardiovascular diseases.

The frequency and volume of alcohol consumed by many young people puts them at risk. 32 per cent of male and 21 per cent of female, 15–17 year olds drink alcohol with some frequency and 52 per cent of male 18–24 year olds and 37 per cent of female 18-24 year olds are drinking at levels that place them at increased risk of an alcohol-related injury.ⁱⁱ

Alcohol consumption accounted for 3.3 per cent of the total burden of disease and injury in Australia in 2003; 4.9 per cent in males and 1.6 per cent in females. Alcohol accounts for 13 per cent of all deaths among 14–17-year-old Australians — it has been estimated that one Australian teenager dies and more than 60 are hospitalised each week from alcohol-related causes.ⁱⁱⁱ

Alarming as this is the harm caused by alcohol goes beyond disease, accidents and injuries to a range of social consequences for both the drinker and their family and community. Alcohol is also associated with crime, including domestic violence, assault and road safety issues.

Alcohol is also a risk to the unborn child. The National Health and Medical Research Council's Australian Guidelines to Reduce Health Risks from Drinking Alcohol state that maternal alcohol consumption can harm the developing foetus or breastfeeding baby and that for women who are pregnant, planning a pregnancy or breastfeeding, not drinking is the safest option^{iv}.

Alcohol crosses the placenta when a pregnant mother drinks to enter the bloodstream of the foetus. Alcohol affects the way the baby's brain develops at any stage of the pregnancy and may cause serious lifelong disabilities. Babies affected by this are said to have Fetal Alcohol Spectrum Disorder (FASD). There is no cure for FAS or FASD.

Around half of all pregnancies are not planned and the mother may not know she is pregnant until about the 6th week of the pregnancy or later. A survey in 2006 of 1103 Australian women of childbearing age indicated that 24% would continue to drink if they became pregnant, and 34% continued to drink alcohol during their previous pregnancy.^v FASD is the most common preventable cause of birth defects and brain damage in unborn children. Restricting access to alcohol will assist in prevention of this.

The National Preventative Taskforce Technical Paper 3 suggests:

Restricting the hours and days of sale of alcohol is a standard component of alcohol policy and regulation ... Most Australian studies have shown that increased trading hours have been accompanied by significantly increased levels of alcohol consumption and/or harms^{vi}.

The Alcohol and other Drugs Council of Australia (ADCA) submission to the National Preventative Health Taskforce noted that alcohol related anti-social behaviour predominantly occurs in areas where there are:

- a. high number of outlets (density); and
- b. long hours of trading

Given that many young people are drinking alcohol and that this puts them at considerable risk of injury or ill health we submit that as part of a continuum of responses to the harm caused by alcohol consumption **access to the purchase of alcohol is restricted by the introduction of reduced hours for the sale of takeaway alcoholic beverages.**

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ⁱ <http://www.nhmrc.gov.au/publications/synopses/ds10syn.htm>

ⁱⁱ STATE OF AUSTRALIA'S YOUNG PEOPLE:

A Report on the social, economic, health and family lives of young people
Kristy Muir, Killian Mullan, Abigail Powell, Saul Flaxman, Denise Thompson, Megan Griffiths
Social Policy Research Centre
University of New South Wales
October 2009

ⁱⁱⁱ http://www.nhmrc.gov.au/your_health/healthy/alcohol/burden.htm#bur

^{iv} <http://www.nhmrc.gov.au/publications/synopses/ds10syn.htm>

^v Alcohol and Pregnancy Project. Alcohol and Pregnancy and Fetal Alcohol Spectrum Disorder: a Resource for Health Professionals (1st revision). Perth: Telethon Institute for Child Health Research; 2009.

^{vi} <http://www.health.gov.au/internet/preventativehealth/publishing.nsf/Content/tech-alcohol-foc~tech-alcohol-4~tech-alcohol-4.2>