



Alcohol, Tobacco and other
Drugs Council Tasmania Inc.

Submission to the
Department of Treasury and Finance

Response to the Proposed Liquor Licensing Regulations 2016 – Consultation Paper

May 2016



Alcohol, Tobacco and other
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Alcohol, Tobacco and other Drugs Council of Tas Inc. (ATDC)

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The Alcohol, Tobacco and other Drugs Council

The Alcohol, Tobacco and other Drugs Council of Tasmania (ATDC) is the peak body representing the interests of community sector organisations (CSOs) that provide services to people with substance misuse issues in Tasmania. The ATDC is a membership based, independent, not-for-profit and incorporated organisation.

The ATDC is the key body supporting the sector to secure adequate systemic support and funding for the delivery of evidence based alcohol, tobacco and other drug (ATOD) initiatives. We support the sector through training and sector capacity building, as well as undertaking policy and development projects with, and on behalf of, the sector.

We represent a broad range of service providers and individuals working in prevention, promotion, early intervention, treatment, case management, research and harm reduction.

We play a vital role in assisting the Tasmanian Government to achieve its aims of preventing and reducing harms associated with the use of alcohol, tobacco and other drugs in the Tasmanian community.

By working with all levels of government and the community the ATDC seeks to promote health and wellbeing of all Tasmanians through a reduction of the harms caused by substance use. Our priorities are set by the membership and Board and focus on the prevention of the uptake of harmful alcohol or drug use, the provision of effective treatment for alcohol or drug misuse and the long term promotion of health and relapse prevention.

A broad and regionally dispersed membership base ensures the ATDC maintains a strategically relevant position within the overall understanding of what services are provided, what services are needed and how best to achieve the goal of reducing the negative impacts on the Tasmanian community from alcohol and drug use.

The ATDC is committed to the following eight broad principles:

- Harm minimisation
- A population health approach
- A continuum of service types
- Consumer participation
- Consumer self determination
- Evidence based practice and policy
- Partnership and collaboration
- Recognition of Aboriginal and Torres Strait Islander Australians.



Alcohol, Tobacco and other
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Our Vision

A Tasmania without drug or alcohol related harm or discrimination.

Our Mission

To provide independent leadership and advocacy; strengthen partnerships through inclusion, and support consumer participation in the promotion of holistic alcohol, tobacco and other drug (ATOD) services for all Tasmanians.

Our Goals

Goal 1: To provide effective leadership and representation for the alcohol, tobacco and other drugs sector.

Goal 2: To build sustainability of the ATDC and the alcohol, tobacco and other drugs sector.

Goal 3: To maximise consumer engagement in service planning and delivery.

ATDC response to Liquor Licensing Regulations 2016- Consultation Paper.

- Include the principle of harm minimisation/reduction in the definition of best interest of the community (Consultation paper, p2). Harm minimisation/reduction is an established concept at the national policy level. Within the concept is a group of practical strategies that are underwritten by an evaluated (peer reviewed) evidence base. These strategies are aimed at individual and community levels and premised by cost benefit analyses. Inclusion of the term could include 'harm minimisation' or 'reducing the harm associated with' – either variation is a reference to the established concept as outlined here. It is essential that the harm minimisation framework is included in the objectives of the Act.
- Expansion of point (c) (p3) – the monitoring of adverse affects must include data gathering, analysis and feedback through shared protocols between Police, health and hospitality agencies. It is vital that this data be fed back to relevant stakeholders.
- Re: barring orders (p7-9). Re: 'how is a person barred' – *in the instance of a barring order being sent to a person's address, and if it is appropriate to do so* – it is suggested to include harm reduction information alongside the barring order. This is non-judgemental information that provides options for the person should they seek to act on their behaviour. This may just be a list of services.
- Re: Minimum age for selling and serving liquor – The consultation draft proposes the age to be 16 years old. This is potentially too young for some environments such as clubs and bars with high volume of patrons and higher risk of harm from alcohol related harm. There may be scope for distinguishing between small businesses in smaller country and rural environments, and, those in urban settings where volume of patrons and degree of risk may be higher.
- General comments, the document is lacking with regard to-
 - References to outlet density and hours of sale. Giving the Commissioner authority to call for community impact studies for questioned license applications could manage such planning and public health issues that could arise.
 - No mention of the provision of free water. The Review of the Act in late 2014 listed free water in the recommendations.
 - Accountability for industry – focus is mainly on the consumer in the Regulations. The areas that need to be strong with relation to industry include: availability (opening hours, outlet density) and advertising (legal restrictions on content and/or exposure to alcohol advertising for general population and specifically for young people) as these have a significant impact on consumption.
 - Restrictions on availability of high strength/risk products.
- The ATDC wishes to highlight the document, the 'National Alcohol Policy Scorecard'¹ that provides a sound checklist of policy considerations and is backed by an extensive and prestigious list of members.

¹ See here: <http://actiononalcohol.org.au/wp-content/uploads/2015/media-clips/alcohol-policy-scorecard-2014.pdf>