



**LEGISLATIVE ASSEMBLY FOR THE AUSTRALIAN CAPITAL TERRITORY**

**STANDING COMMITTEE ON JUSTICE  
AND COMMUNITY SAFETY**

(Reference: [Inquiry into domestic and family violence—policy approaches and responses](#))

**Members:**

**MS E LEE (Chair)**  
**MS B CODY (Deputy Chair)**  
**MS N LAWDER**  
**MR C STEEL**

**TRANSCRIPT OF EVIDENCE**

**CANBERRA**

**TUESDAY, 15 MAY 2018**

**Secretary to the committee:  
Mr A Snedden (Ph: 620 50199)**

**By authority of the Legislative Assembly for the Australian Capital Territory**

Submissions, answers to questions on notice and other documents, including requests for clarification of the transcript of evidence, relevant to this inquiry that have been authorised for publication by the committee may be obtained from the Legislative Assembly website.

**WITNESSES**

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## **Privilege statement**

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*Amended 20 May 2013*

**The committee met at 3.14 pm.**

**THORN, MR MICHAEL**, Chief Executive, Foundation for Alcohol Research and Education

**WARD, MS SARAH**, Acting Director, Policy and Research, Foundation for Alcohol Research and Education

**THE CHAIR:** I declare open this public hearing of the Standing Committee on Justice and Community Safety's inquiry into domestic and family violence—policy approaches and responses. Today the committee is hearing from Sarah Ward and Michael Thorn of the Foundation for Alcohol Research and Education. Thank you for making the time to appear today, and thank you also for your written submission to the inquiry and the opening statement you have just handed us.

I remind witnesses of the protections and obligations afforded by parliamentary privilege and draw your attention to the privilege statement before you. Can you please confirm for the record that you understand the privilege implications of the statement?

**Mr Thorn:** I do.

**Ms Ward:** I do as well.

**THE CHAIR:** I also remind witnesses that the proceedings are being recorded by Hansard for transcription purposes and are being webstreamed live and broadcast live. We will start with your opening statement.

**Mr Thorn:** I will direct my very brief comments to the opening statement. On 7.30 last night I was watching the news reports of the tragic deaths in Margaret River, and there was some discussion about the guns involved. One of the farmers interviewed was saying that guns are a bit like shovels and picks on a farm. Then another person was interviewed, a woman who appeared to be a friend of the grandmother that was murdered, and she was also asked about guns and her response was, "Well, I don't think it was about guns; it was about the mental condition of the grandfather, who appears to have been the perpetrator." I completely agree that it was about the mental state of that person, but I think anyone working on gun control would say that the access to guns made the risk of that happening extremely acute.

That is our message about a lot of family violence, and FARE, along with a number of other organisations, have been trying to get the message across that alcohol is a significant contributor to family and domestic violence. But, by and large, despite our entreaties on this, not enough attention is given to alcohol as a contributor. Alcohol escalates the problems; alcohol frequently leads to greater severity of offences. It is a very significant part of the problem we are dealing with. The research is pretty clear that with alcohol-related family violence both the perpetrator and the victims have been drinking. But the net result is that women are the ones who largely suffer from that when the drinking continues and the violence erupts.

So what to do about it? One of the things that is absolutely clear from the evidence

has been the proliferation of packaged liquor in our community. We have seen a swing from about 60 per cent of all alcohol consumed on premises to about 80 per cent of all alcohol now consumed being in packaged form—in other words, it is purchased off premise.

Another thing that characterises alcohol in our community, particularly when it comes to women, is the almost gross sexualisation of women in alcohol advertisements and promotions. That is an issue that plays into the normalisation of alcohol use more generally and what men think about their use of alcohol and what it all means.

Recently the South Australian parliament added to their liquor act a specific provision in the objects of the act that require administrative regulators and those approving licenses to have regard for family violence as an issue in considering either the granting of a licence or a variation of a licence, and we think that is something that the ACT Assembly should consider.

The fourth point we thought we should make today goes to the issue of the normalisation of alcohol in our community. One thing that has been picked up slowly by jurisdictions around the country in order to go to this issue of dampening down the marketing of alcohol is for governments to move to banning or not accepting alcohol advertising on public property, particularly on our public transport systems. That is all I wanted to say by way of introduction today.

**THE CHAIR:** In your written submission, recommendation 7 refers to models of care, and the page before talks about the Victorian government's model of a support and safety hub concept. Have you had any engagement with the ACT government in the ACT's family safety hub design and all of the work currently underway? If so, what are the differences between what the ACT is doing, compared to the Victorian model you recommended?

**Mr Thorn:** I have not had any involvement in the establishment of the ACT's hub, which I think was announced on the weekend. I do not know that you have either.

**Ms Ward:** No, I have not. I suppose in terms of ACT-based organisations, it would be more likely to be ATODA, the Alcohol, Tobacco and Other Drugs Association, that would be involved, rather than us. As far as I know, we have not been involved in it at all.

**THE CHAIR:** You have recommended that we look at the support and safety hub concept in Victoria. Can you expand on some of the specific aspects of that?

**Mr Thorn:** Our main advice to the committee and to all those responsible for policy—this has been picked up in ATODA's evidence to this committee—is to deal with the problem of these parallel universes of alcohol and drug treatment and family and domestic violence services. People repeatedly report, and this committee has heard evidence, that many people with alcohol and drug problems are involved in abusive relationships or at least are in unsafe circumstances, with children being exposed to violence, and that they are looking for family violence services. The same applies with many of the community violence services.

It is pleasing there is some work going on in the ACT to try to develop a shared model of care so that the practice in either stream is a no-wrong-door approach—in other words, it does not matter whether you enter through the family violence or through the AOD system; if you have come through the AOD system and you have a family violence issue as well, that can be attended to and vice versa. That is our thing and that is what the Victorians have been trying to do. They are probably streets ahead of every other jurisdiction on that, it needs to be said.

**Ms Ward:** Victoria has been placing family violence advisers within our contract treatment services, but we also like to see the reverse—that is, people that have alcohol and drug expertise within family violence services, so there is that connection and that those ways of working are strengthened.

It is difficult because—this is a sweeping generalisation—for most drug and alcohol services the clients are predominantly men, and obviously for family violence services the clients are predominantly women. But there are ways the two services can work together and ensure that women are safe in both of those services. They are not expected to attend group meetings, for example, with potential perpetrators of family violence or indeed with their partners if they are attending alcohol and drug services.

One of the things we do not want to happen is for women to be refused access to services because they are intoxicated or because they have drug and alcohol issues. We see that happen quite a lot—they turn up to a drug and alcohol service but they have a family violence issue and they are told, “Well, we can’t help you.” And then they turn up to a refuge and are told, “Well, we can’t help you because you’ve got alcohol and drug issues.” They get bounced around, as well as having to repeat their stories again and again and again, which further traumatises women. It is about ways that the system can work together.

**MS LAWDER:** I was just wondering about your recommendation to insert a new part (v) into the Liquor Act 2010. I was just wondering if you would talk me through that a little more. For example, why you do not feel it is covered under (i), (ii), (iii) and (iv): violent or antisocial behaviour, property damage, personal injury or adverse effects on health? Can you just unpack it a little for me?

**Mr Thorn:** I think my starting point is that the liquor acts around the country tend to operate in a way that preferences the applicant—in other words, the person seeking to sell liquor. From our experience, time and again the decision tends to fall in favour of the applicant, even though this is an administrative decision and really the applicant should have the responsibility to prove that their proposed business is not going to do any harm.

Pretty well every liquor act is set up on a harm minimisation basis. That is the first order principle, but that is not how it operates in reality. The business interests seem always to override the public health and community wellbeing public interest test. There are numerous examples of how that happens and there are lots of reasons why it is hard or why liquor commissions and regulatory authorities have been so favourable towards the applicants.

The applicants argue that there is no evidence to show that their additional liquor

licence is going to cause any harm, and it is very hard for a community, for public health organisations, for law enforcement organisations, to demonstrate that this particular licensee in Curtin, for instance, is going to add to the totality of harm in that neighbourhood, even though logic would tell us that adding an additional amount of alcohol into a community is likely to, or in all probability will, increase harm, not just family violence harms but injuries more generally, crime. And because those organisations that might be raising concerns about these applications have not been able to establish demonstratively, with quantitative evidence, that this will be the outcome, applications tend to go through.

I think what the South Australian parliament have done is noted that family violence has become a major public policy issue. They have recognised that in the overall scheme of things they can see that alcohol is contributing anything between 30 and 50 per cent of all the family violence incidents that jurisdictions are dealing with, and they have said to the regulator, to the liquor commissions, “You will have specific regard to the likely impact on family violence if you approve this licence.”

There is some research evidence. Dr Michael Livingston from the Centre for Alcohol Policy Research at La Trobe University has shown, through some of the studies that he has done, through crunching the numbers, that there is an increase in family violence as you increase the number of outlets and that that is certainly correlated with lower socio-economic areas. We believe that there is a kind of targeting of some of those areas in the first instance.

That, I think, again supports the argument that there should be greater attention by licensing authorities on family violence as one of the harms that arise as a consequence of additional liquor licences being approved, or the extension of an existing licence to allow for longer periods of trading for a greater range or size of an outlet, for instance. That is our main reason for arguing for the addition of family violence into the Liquor Act.

**MS LAWDER:** To follow on from that, it does say that, in making a decision under this act the decision-maker must have regard to the following principles: the harm minimisation and community safety principles. Do you think adding that in as 10(c)(v) is sufficient? Is it also about compliance and regulatory activity? You could write whatever you like into legislation but people do not necessarily comply, do they?

**Mr Thorn:** No. I think that compliance and enforcement is a much underdone part of our liquor control system. It is just one piece of the jigsaw. There is no silver bullet to dealing with alcohol harm. As a society we accept that there are risks that do convert to actual harm. It is just a question of how much harm we are prepared to accept. The responsibility for that falls across all jurisdictions, be it the commonwealth government, the states and territories and local government.

I think that there is, by and large, a pretty light-touch approach to enforcement and compliance and too often you hear liquor licensees complaining about regulators issuing fines for poorly placed signs and things like that. We know from bitter experience that little attention is given to the numbers of intoxicated people on premises, for instance, or intoxicated people purchasing packaged liquor, which is

actually contrary to what this territory's legislation says—and just about every other's, for that matter.

We think about liquor control in terms of its price, its availability and the way it is marketed. By and large, the commonwealth has responsibility for the tax system, albeit the failure of the commonwealth to deal with the highly criticised alcohol taxation system in this country. The Northern Territory government, for instance, has moved to impose a floor price on alcohol because the current way that wine is taxed in this country incentivises the production of cheap wine, and we see that in the cleanskins, the \$10 cartons, boxes of wine, those sorts of things, heavily discounted products or cheap products.

Availability is largely a state and territory jurisdiction and that manifests itself not only in trading hours but also in this issue of the proliferation of the number of outlets—not only licensed venues, pubs and clubs but also the bottle shops and the restaurant trade, for instance. There are a lot of places you can get alcohol around Canberra, for instance, and also in most other jurisdictions, it needs to be said.

When it comes to promotion, the reason that promotion is of critical interest to public health is that it reinforces, one, the purchasing by people but, more importantly, it is a massive contributor to the environment in which we live. It reinforces the drinking culture of this country and the various jurisdictions, and that is a joint responsibility between states and territories and the commonwealth.

The commonwealth obviously controls things like free-to-air TV, what can be advertised when et cetera. But at the local level jurisdictions can do a lot about the way different products are marketed—for instance, the sorts of signs that are around bottle shops or supermarkets where you can purchase liquor, the sorts of promotions that licensed outlets engage in to encourage more trade.

Then there is the issue of enforcement and compliance and it is a much underdone area of public policy, I think. There is no doubt that we could be doing a lot better on that front. We could be investing more effort, more thinking, into what we do. But there is a price to pay for that because it does mean that licensing inspectors and police officers are in the faces of business about their practices and that is a bit of a rub. From my experience, licensees then complain to their local members about this sort of behaviour. Then you get that psychic pressure being applied on whoever the responsible minister is, and down the line it goes.

**MR STEEL:** In your submission you suggested that the ACT government needs to collect better data around alcohol and whether that is involved in a family violence incident. Are there any other jurisdictions that do this work and what has that data revealed?

**Mr Thorn:** I will let Sarah answer most of this, but I will say that, as a general rule, the collection and analysis of data is pretty poor. New South Wales probably is our best jurisdiction and, in my opinion, the single reason for that is the existence of the Bureau of Crime Statistics and Research, led by Professor Don Weatherburn. Professor Weatherburn is probably the world leader on data collection when it comes to crime and violence. And he keeps the system honest, and because he is doing these

reports he is always on the back of health authorities, justice authorities, law enforcement agencies to get high quality data that he can analyse.

Only in the last couple of weeks he completed some evaluations of three extremely well-funded New South Wales family violence programs and showed that they had no impact. I do not know of another jurisdiction in this country that could do that sort of work and demonstrate that the taxpayer dollar has not been spent wisely. And that is the value of having a really robust agency like BOCSAR.

We have some views about what should be done and how that data initially should be collected. Perhaps you want to mention those.

**Ms Ward:** In terms of family violence incidents, Victoria is probably the best jurisdiction in Australia. When police attend an incident they record whether there is definite alcohol involvement or probable alcohol involvement. And there is a form, the L17 risk assessment form. It really is the jurisdiction that is showing us the way and highlighting the amount of alcohol-related family violence, and it is the only jurisdiction in Australia that is collecting that data.

Other states collect whether there is possible alcohol involvement, but it is not done consistently. The same data is not recorded nationally. That causes problems when you then try and talk about how big the issue is nationally. They are probably the best jurisdiction in terms of being able to say which proportion of it is alcohol related. And the statistics are somewhat frightening and continue to go up. But then we also know that the—

**MR STEEL:** Do you know what the statistics show, off the top of your head?

**Ms Ward:** It is a while since I have looked at them.

**MR STEEL:** It might just give us a sense about the level of involvement.

**Ms Ward:** I am pretty sure that it is around 30 per cent that have definite alcohol involvement and it goes up to about 50 per cent that have possible involvement. There were over 15,000 cases in 2015 that had definite alcohol involvement. And there were only three states that really collect any data, the NT, New South Wales and Victoria. That makes it impossible to say how big an issue it is across Australia, but we know that it is up to about 50 per cent of all family violence incidents.

There was something else that I was thinking about with Western Australia. There is alcohol sales data and, again, it is not collected nationally; it is not collected consistently. That is data from all licensed premises to say what is being sold. It used to be collected, not consistently across Australia but it used to be collected. And then it stopped. That information was going to Curtin University in Western Australia and they have not published anything since about 2005, I think.

It makes it really difficult to be able to say, “This amount of alcohol has been sold in Australia,” because things are not collected consistently across jurisdictions. Alcohol sales data is definitely one that we are recommending and we are trying to get all jurisdictions to collect.

**Mr Thorn:** The ACT collects sales data, but the quality of the collection method is pretty poor and I am not sure that there has been any reporting. That passed through—I am going to say in 2010—in changes to the Liquor Act. It was not brought into effect until some time later, however. But there has been quite a stand-off between the industry and JACS on this. It is certainly not being reported to our satisfaction, that is for sure.

**MR STEEL:** Is the L17 risk assessment and risk management form in Victoria only reporting on the presence of alcohol in relation to family violence or is it also used for other crimes as well?

**Ms Ward:** That is a good question. I am pretty sure that it is just related to family violence incidents. I can have a better look at it because it is a while since I have had a look at that.

**THE CHAIR:** Could you take that on notice and provide it back to us?

**Ms Ward:** Yes, sure.

**Mr Thorn:** Weatherburn has said that he generally assumes that alcohol is involved in all family violence incidents.

**MS LAWDER:** I just want to make sure I understand. Can you just briefly explain to me what you mean by packaged liquor?

**Ms Ward:** Bottle shop.

**Mr Thorn:** Liquor that comes in a can or a bottle or a carton as opposed to draught.

**Ms Ward:** On tap.

**Mr Thorn:** Mostly what you purchase from a bottle shop.

**MS LAWDER:** I just wanted to make sure I understood what you are referring to.

**THE CHAIR:** The terminology.

**Ms Ward:** There are lots of different ones—on and off-licences. There is lots of different terminology.

**THE CHAIR:** When available, a proof transcript will be forwarded to you to provide an opportunity to check the transcript and suggest any changes. I understand, Ms Ward, that you took on notice one question that you were to come back to us on.

**Ms Ward:** Yes.

**THE CHAIR:** We do not set a formal date for that to be submitted, but if you could get it to us the sooner the better.

**Ms Ward:** Sure.

**THE CHAIR:** Especially now that we are coming to the conclusion of our public hearings and then we will go into deliberations. That would be great. On behalf of the committee, I thank you both for coming in today. I close this hearing.

**The committee adjourned at 3.44 pm.**