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(for mother, infant and family health research)

15 December 2016

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### **Submission to the Review of the Liquor Control Reform Act 1998**

Dear Sir/Madam

The Judith Lumley Centre and the Centre for Alcohol Policy Research welcome the opportunity to provide a joint submission to the Review of the Liquor Control Reform Act 1988 (LCRA).

The Judith Lumley Centre is a multidisciplinary public health research centre at La Trobe University in Melbourne, Australia. Established in 1991, the Centre has built a strong program of research addressing issues of major public health importance for mothers, parents and their infants. Professor Angela Taft leads a program of research focused on reducing violence against women and children, which includes research on alcohol-related intimate partner violence. Recent doctoral research conducted by Ingrid Wilson at the Centre provides an in-depth insight into the dynamics of alcohol-related intimate partner violence from the perspective of women survivors.

The Centre for Alcohol Policy Research at La Trobe University, under the direction of Professor Robin Room, has undertaken a range of research into the relationship between alcohol consumption, alcohol policy and family violence. The work of Michael Livingston identified a longitudinal association between alcohol outlets and family violence incidents. The Centre has also undertaken a broad program of research into alcohol's harm to others, incorporating a series of studies relevant to family violence led by Anne-Marie Laslett also of Curtin University.

The two centres are jointly working on a multidisciplinary research program to build strategies to prevent and reduce alcohol-related domestic violence.

The attached submission addresses two key questions posed by the review:

**Question 11. What opportunities are there to address family violence within the LCRA?**

**Question 13. Are there other measures that could reduce harm? What would be the costs and benefits of including them?**

For further queries, please contact Ingrid Wilson, Research Fellow via email: [I.Wilson@latrobe.edu.au](mailto:I.Wilson@latrobe.edu.au) or telephone 9479 8805.

Yours sincerely



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**JOINT SUBMISSION TO THE REVIEW OF THE LIQUOR CONTROL REFORM ACT 1988 (VIC)  
JUDITH LUMLEY CENTRE AND THE CENTRE FOR ALCOHOL POLICY RESEARCH****LA TROBE UNIVERSITY****Introduction**

This joint submission presents a brief summary of the evidence of the relationship between alcohol misuse and family violence, the prevalence of alcohol-related family violence and the effect on women and children. To illustrate the dynamics of drinking and intimate partner violence, the submission also presents research on the experience of alcohol-related partner violence, further illustrated using two case studies from this research. Within this background of evidence, the submission proposes several options for consideration by the review of the LCRA to address alcohol-related family violence in Victoria.

**Background***The relationship between alcohol misuse and family violence*

Domestic and family violence is a complex phenomenon, with a myriad of factors contributing to its occurrence at the individual, relationship, community and societal levels (1).

Alcohol-related domestic violence is prevalent in Australia; it is estimated that alcohol contributes to 50.3 per cent of all partner violence, and 73 per cent of physical assaults by a partner (2). In Victoria, there was a steady rise between 2003/4 to 2012/3 in alcohol-related family violence incidents attended by police, from approximately 15 to approximately 23 incidents per 10,000 people (3). It should be noted that these figures under-represent the full extent of alcohol-related domestic violence in the community as domestic violence incidents are under-reported and those that reach the police are often the more severe cases.

Women and children are disproportionately affected by family violence. The 2010 National Drugs Strategy Household Survey showed that women consistently reported higher rates than did men of being the victim of alcohol-related violent incidents from a current or former spouse. Over thirty per cent of females aged 14 and above had ever experienced alcohol-related verbal abuse from a current or former spouse or partner, compared with 10.7 per cent of males, while 39.6 per cent of females experienced alcohol-related physical abuse from a partner compared with 11.4% of males. Twenty one per cent of females reported being put in fear by an alcohol-affected current or former spouse or partner, compared with 6.3% of males. Men, however, had higher rates of victimisation from a male non-intimate partner (4).

Witnessing family violence is now defined as a form of child abuse and neglect (5); children are most vulnerable when parents have mental health issues, are substance abusers or when children are exposed to family violence (6). While alcohol contributes to violence within the intimate relationship, parental/carer alcohol misuse also has a significant impact on children. The most severe cases of harm show up in the service and social system data; in the child protection systems across Australia, between 15 and 47 per cent of child protection cases involve carer alcohol abuse as a significant risk factor (7). Three per cent of Australian children (140,000) were substantially negatively affected by others' drinking (8).

While both men and women drink, alcohol consumption and harm is gendered behaviour; men are more likely than women to drink and to drink in more problematic ways (i.e., high frequency and high volume drinking), while women are more likely to drink substantially less or be lifetime abstainers (9). Both men and women perpetrate violence in intimate relationships; however, the risk of male-to-female violence increases when the male or both partners drink heavily (10). Women's drinking alone is not strongly

associated with men's perpetration, compared to the male partner's drinking (11); a recent meta-analysis of gender differences in risk factors for IPV, found that problem drinking in men is more strongly related to their perpetration of IPV than is women's problem drinking related to women's IPV perpetration (12). Women's drinking may also relate to partner violence perpetration and victimisation, though the direction of the relationship is unclear, that is, women's heavy drinking may also be a consequence of experiencing violence (13).

No single explanation accounts for the occurrence of alcohol-related public and private violence. It involves multiple contributing factors including the direct pharmacological effects of alcohol on thinking and behaviour and the ability to resolve conflict, characteristics and attributes of the individual and others involved in the interaction, the circumstances and interaction in the setting, and broader social expectations and values about alcohol and violence (14). Alcohol misuse may also indirectly contribute to family violence by its effect on the quality of marital relationships, leading to situations in which aggression may result (15).

What is clearly demonstrated in research the world over is that alcohol misuse is a consistent risk factor for domestic and family violence (10, 16). Alcohol misuse is a risk factor for violence across the lifespan of intimate relationships from dating violence in youth populations (17), studies in college populations (18), in newlywed relationships (19, 20) and established adult relationships. Higher levels of domestic violence are found in populations with more severe alcohol problems, such as alcoholics seeking treatment (21) and Indigenous populations in Canada, New Zealand, Venezuela and Australia (22-24). Heavy drinking and binge drinking increase the likelihood of male-to-female partner violence in intimate relationships (25) and also increase the severity of violence in relationships (16).

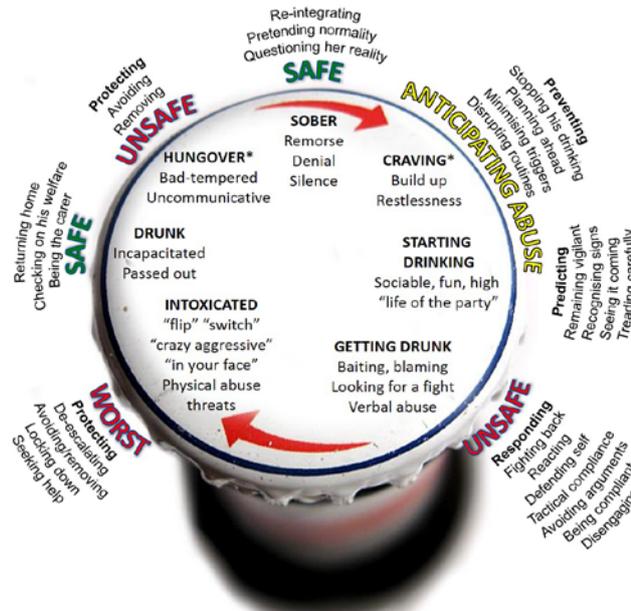
Therefore, intervening to reduce alcohol misuse to prevent and reduce domestic and family violence is recognised as an important public health priority (26, 27), though currently interventions in this area are scarce (28).

#### *The lived experience and impact of alcohol-related domestic and family violence*

While the association between alcohol misuse and family violence is well-established, less is known about the experience of alcohol-related family violence from the perspective of victims/survivors and the dynamics of drinking and violence.

Alcohol use 'makes things worse' for female partners of violent spouses not only in terms of risk and severity of violence (16) but also in terms of the broader impacts on women's lives. For example, partners of male alcoholics report experiencing higher levels of verbal and physical abuse, and sexual coercion, in addition to other aspects such as financial abuse associated with the partner's drinking, and taking on the burden of caring and work (29-31). The impact on children living in this environment is also significant.

Qualitative research conducted by Wilson et al., (2016) provides new insight into the dynamics of drinking and intimate partner violence from the perspective of women's experience of living in a relationship with a violent drinker (32). In-depth interviews were conducted with 18 women living in Victoria aged 20-50 years who reported experiencing fear and harm from an alcohol-affected male intimate partner. The findings revealed that for these women, violence was experienced as a cycle intimately connected to recognised stages of a partner's drinking. Women experienced heightened fear when their partner drank alcohol, and anticipated the possibility of abuse whenever alcohol was present. Women adapted safety strategies according to stages in the cycle they identified as safe and unsafe. Through repeated experience of this cycle over the relationship trajectory, the women came to connect drinking with violence, an effect which endured after the relationship ended. The model depicting the cycle of drinking and abuse is reproduced below:



\* these stages were experienced by women whose partners had more serious alcohol problems

Figure 1. The cycle of drinking and intimate partner violence – Wilson et al., (2016) (32)

Two case studies are presented to the review as typical examples from this research to illustrate the nature of a partner's drinking and violence and the experience for those affected. The scenarios depict women in different life stages who both experienced fear and harm from their alcohol-affected male partner - a young woman whose partner is a non-dependent drinker, and an older woman in a longer term relationship with children whose partner has an alcohol dependency problem. None of the male partners were treatment seeking. Both women had left the relationship at the time of interview.

Pseudonyms have been used to protect the privacy of individuals.

### Amy

Amy is a 21 year old university student who experienced alcohol-related verbal and physical aggression (pushing and shoving) from her boyfriend in the last 12 months of their 4 year relationship. She noticed a pattern emerging when her boyfriend began going out drinking and clubbing with his male friends on a regular basis; after these nights out he would become verbally aggressive towards her when drunk, behaviour that she did not experience when he drank in other contexts or when he was sober. Jealousy was a common trigger for his aggression which emerged when he drank. Amy observed that alcohol increased her boyfriend's anger and affected his capacity to think rationally and she described being subjected to unfounded accusations when her boyfriend was drunk. Any attempts to calm him down or to defend herself at this time led to heightened aggression from her boyfriend. She expressed fear at his capacity to hurt her when he was drunk, as he was physically much stronger and bigger than her. The ongoing experience of her boyfriend's drunken aggression led her to be fearful every time he went out drinking in this context. Amy's boyfriend seemed unaware of his problems with alcohol and aggression and she

was afraid of raising her concerns with him for fear of further angering him. At the time of interview, Amy had left the relationship but was in the process of reconciling.

*Sarita*

Sarita is a 28 year old Indian-born woman who willingly entered into an arranged marriage with her husband at the age of 19 and moved to New Zealand where her husband was working in a high paying job. Sarita was unaware of her husband's excessive drinking habits before she was married which became apparent within a few months of the marriage. She described her husband drinking large amounts of alcohol continuously in the evenings and on weekends to the point where he would pass out. When sober, her husband was uncommunicative and withdrawn and Sarita spoke of feeling very isolated as her husband would not permit her to work, restricted her access to money and limited her social interaction. Her husband's abuse towards her commenced after she started to question her husband's drinking, and when he drank, she experienced a regular pattern of targeted verbal aggression leading to severe physical violence when he became intoxicated. After these episodes, her husband would be remorseful, promising that he would not be violent again. Sarita became aware that her husband had mental health issues which she felt contributed to his drinking. While there were occasions when she witnessed her husband's anger when he was sober, Sarita only experienced physically abusive behaviour towards her when he was alcohol-affected. Over the course of their six year relationship during which time they had a child, his drinking deteriorated and the violence became worse. While he was not violent towards their daughter, Sarita became increasingly concerned about her husband's capacity to safely care for their child due to his drinking. Over time, Sarita was able to gain some financial independence and confidence to eventually leave her husband in 2013 and move to Melbourne with her 5 year old daughter.

This research highlights that for some women, a partner's drinking and associated aggression and violence presents an ongoing risk to the safety of family life. Women and children living in these situations face a precarious existence where the partner's predictable drinking patterns are accompanied by the unpredictability of heightened violence. Many women remain in these relationships and enact strategies to maintain safety focused around the partner's drinking; reducing the supply of alcohol was a key strategy used by women -- to varying degrees of success, depending on the nature of the partner's drinking problems.

**Question 11. What opportunities are there to address family violence within the LCRA?**

In light of the strong evidence of the association between alcohol misuse and family violence, and the impact on the lives of women and children, we argue that reforms to the liquor licensing regime in Victoria provide a key opportunity to reduce family violence in the state.

This submission proposes several options for further exploration by the review. Consistent with an ecological understanding of violence (1) which sees violence as a complex interplay of factors operating at multiple levels, we take the view that there are a range of measures that could be taken through liquor regulation that operate to address the issue of alcohol-related family violence at different levels.

As illustrated in Figure 2 below, these include:

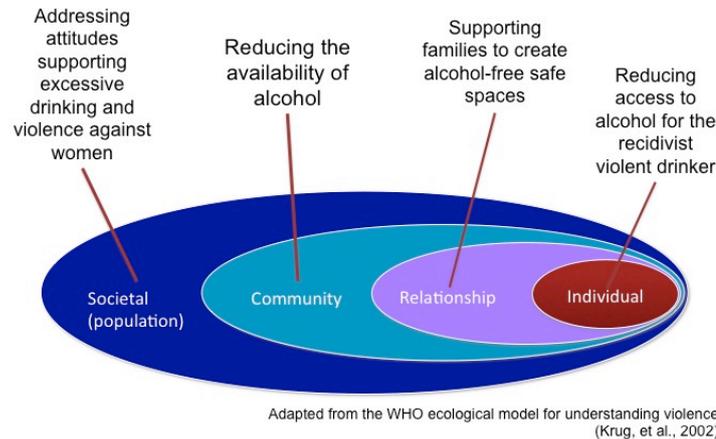


Figure 2: Opportunities to address family violence through the LCRA

- Societal level: Addressing alcohol promotion that supports excessive drinking and violence against women
- Community level: Reducing alcohol availability
- Relationship level: Empowering individuals to make their homes safe
- Individual level: Reducing the risk of harm from a recidivist violent drinker

We discuss each option further below.

**a) Addressing alcohol promotion that supports excessive drinking and violence against women**

There is considerable evidence of the influence of constructions of masculinity on both heavy drinking and aggression in drinking settings, particularly amongst young males (33-36). Masculinity is also linked to partner violence (37), and excessive alcohol use can play a role in “demonstrating masculinity” through aggression against an intimate partner (38), particularly for those for whom traditional markers of masculinity, such as employment, are absent (39). Advertising can play a role in reinforcing attitudes towards gender roles and stereotypes and, as one review found, alcohol advertising can provide potent representations of dominant forms of masculinity and gender relations, which are at odds with the prevention of domestic violence and violence against women (40).

The Victorian Commission for Gambling and Liquor Regulation (VCGLR) has the power to ban inappropriate advertising or promotions. Current guidelines for licensees set out principles for responsible liquor promotion and include principles relevant to the prevention of family violence:

- Principle 4: The advertising or promotion of liquor must not condone or encourage rapid or excessive drinking, drunkenness or anti-social behaviour.
- Principle 9: The advertising or promotion of liquor must not be linked to sexual imagery or imply sexual success.

- Principle 10: The advertising or promotion of liquor must not suggest any association with risk taking, or with violent, aggressive, dangerous or anti-social behaviour.

We suggest an extension of these principles to specifically address harmful gender representations including representations of masculinity connected to dominant gender roles, excessive drinking and disrespectful attitudes towards women. We also argue for strong enforcement of the principles for responsible liquor promotion.

**Recommendation:**

- **That the Guidelines for responsible liquor advertising and promotion specifically address harmful representations of gender including representations of masculinity connected to dominant gender roles, excessive drinking and disrespectful attitudes towards women.**
- **That the principles for responsible liquor promotion be strongly enforced by the VCGLR**

**b) Reducing alcohol availability**

Research on alcohol consumption and purchasing behaviour in Australia shows that a higher percentage of alcohol is consumed in the home (63%) and much less is consumed in licensed premises (41). The majority of off-licence purchases are from liquor barns which are known to make available cheaper alcohol in larger quantities. Those who purchase more alcohol and with lower income purchase cheaper alcohol (42).

There is good evidence that the availability of packaged liquor is related to rates of family violence in Australia. For example, research by Dr Michael Livingston examined the relationship between the density of alcohol outlets in a neighbourhood and rates of family incidents reported to the police in Melbourne over a ten year period, finding that increases in the density of packaged liquor outlets were associated with increases in rates of family violence (43). Further analyses of these data identified varying relationships across different types of neighbourhood, with positive relationships in most neighbourhood types (44). Evidence from Western Australia also revealed the link between increased availability of alcohol from off-site outlets and violence occurring at residential premises. The volume of alcohol sold had the biggest impact; this research showed that for every 10,000 additional litres of pure alcohol sold by an off-site outlet, the risk of violence on residential premises increased by 26 per cent (45). These findings provide local evidence that broad alcohol policies can influence rates of family violence in the community, supporting a growing body of similar international research (46).

Over the past 15 years, the number of packaged liquor outlets in Victoria has increased by 49.4% overall (from 1,354 in 2001 to 2,023 in 2016), and by 18.2% relative to population (from 28.7 per 100,000 in 2001 to 33.9 in 2016). The number of 'big box' stores has increased dramatically from 3 to 68 – an increase of 2000% on a per capita basis (47). Between 2003/04 and 2012/13, the per-capita rate of alcohol-involved family incidents recorded by the Victorian Police has increased by nearly 60% (48).

We support the liquor licensing policy changes proposed in the submission by the Alcohol Policy Coalition (APC) to this review. Reforms to the licensing process are urgently needed, with only 1% of licence applications refused in 2014/15. In particular, the system needs to be reformed to:

- a) reverse the onus of proof in licence applications and require applicants to satisfy harm and public interest tests,
- b) require VCGLR to consider the cumulative impact of existing licences in the area,
- c) include clear and comprehensive definitions of harm, public interest and cumulative impact,
- d) introduce broader, consistent grounds for objecting to licence applications, and
- e) limit the Commission's discretion to grant licences where licences will contribute to harm or are not in the public interest.

The APC submission outlines these reforms in detail.

**Recommendation:**

- **That the review adopt reforms to the licensing process recommended by the Alcohol Policy Coalition to minimise the harm associated with alcohol misuse, particularly alcohol-related family violence.**

**c) Empowering individuals to make their homes safe**

As highlighted in research by Wilson et al. (2016) (32), a key preventive strategy to remain safe employed by spouses of violent drinkers is to reduce the availability of alcohol within the home. The women in this study described actions such as hiding alcohol from their partner, pouring alcohol down the sink and declaring their home an alcohol-free zone; however, this was not adhered to by the partner and proved difficult for an individual who is the subject of violence to enforce. The LCRA can help to empower and support women with these strategies by enshrining enforceable provisions that declare a private premises alcohol-free.

Two jurisdictions in Australia – the Northern Territory and Western Australia – currently contain provisions in their licensing regulation whereby family homes and private premises may be designated as a restricted licence premises, that is, alcohol availability is either limited or not permitted (section 101C of the Liquor Act (NT) and Part 5B of the Liquor Control Act 1988 (WA)). For example, in WA, these provisions allow property owners or occupiers or a prescribed person such as the Department for Child Protection, to apply to have private premises declared an alcohol-free zone. Applications are approved by the Department of Racing, Gaming and Liquor who may seek advice from the local government authority and the Police Commission. In determining an application, the Director of Liquor Licensing must be satisfied that making the declaration either reflects the wishes of the majority of the occupiers of the premises; or is in the public interest, despite not reflecting the wishes of the majority of the occupiers of the premises; and is reasonable in the circumstances.

Where an application has been granted, a notice must be displayed onsite. If drinking takes place or liquor is brought into the restricted premises, the Police have the power to enter premises and seize liquor and take action against the person who committed the offence. Police may also conduct a search and seize any liquor opened or unopened on the premises.

Applied in this way, liquor regulation can give family members such as spouses and children experiencing alcohol-related family violence a mechanism for having their voices heard through enforceable limitations on the violent drinker's ability to drink in the family home.

In WA, between 1 July 2012 and 30 June 2016, a total of 346 premises across the state were declared restricted by the Director. While no formal evaluation has yet been conducted, anecdotal evidence suggests that the majority of applications for alcohol-free premises are voluntary and that applicants acknowledge that the 'safe house' initiative offers them considerable support in dealing with a problem drinker.

**Recommendation:**

- **That provisions be inserted into the LCRA 1988 to enable owners and occupiers of private premises to apply to the Licensing Director for restrictions on the use of alcohol in private premises.**

**d) Reducing the risk of harm to family members from a recidivist violent drinker**

The LCRA recognises that that alcohol misuse by individuals presents a risk to the safety and well-being of others through a range of mechanisms including banning notices and exclusion orders from designated areas (Part 8A) and barring orders from licensed premises (Part 7A). Licensees may bar a person if they are drunk, violent or quarrelsome in the licensed premises or if the licensee or other believes that the safety of the person, or any other person in the licensed premises, is at substantial or immediate risk as a result of the consumption of alcohol by the person. Liquor Accords play a role in addressing patron behaviour through implementing these orders through voluntary agreements between licensees.

While these provisions aim to protect those within immediate vicinity of the drinker within the licensed premises, victims of alcohol-related family violence are more at risk when the drinker returns home. Greater consideration could be given in the use of banning and barring orders to an assessment of risk based on an individual's history of family violence, preventing that individual from being served in a licensed premises where there is an identified risk of recidivism.

The risk of violence and harm associated with alcohol misuse are recognised within Victorian family violence provisions and at the Federal level. Currently Magistrates can place conditions on an intervention order which restrict the perpetrator from drinking or using drugs, generally in the context of while they are either in the presence of the aggrieved family member or at the place they reside. Similarly, under the Family Law Act 1975 (Cth), the court can make a parenting order (s 64B) that includes any conditions related to "any aspect of the care, welfare or development of the child or any other aspect of parental responsibility for a child" (s 64B(2)(i)). These provisions allows for the inclusion within a parenting order of a provision specifying that the parent not consume alcohol while the child is in his or her care, or they can be even more specific. For example, the parent might be required to not consume alcohol prior to a child being dropped off for a visit or before attending a child contact centre. We understand that orders requiring parents to not consume alcohol during a contact visit are common. We are not aware of the extent to which parents comply with the orders, but any breach of an order will return the matter to the court.

Given the strong evidence of increased risk of family violence from heavy and binge drinkers, we argue that these considerations should be specifically incorporated into current provisions in the Act.

**Recommendation:**

- **That the use of banned drinker provisions (and their application by Liquor Accords) be extended to consider the risk to family members from recidivist violent drinkers**
- **That evidence of alcohol-related family violence be utilised in the assessment of risk to support the barring of an individual from licensed premises or the purchasing of packaged liquor.**

**Question 13. Are there other measures that could reduce harm? What would be the costs and benefits of including them?**

As noted earlier, higher rates of partner violence are found in populations who drink heavily and have more significant alcohol use problems. For those who seek treatment, reductions in drinking following alcohol treatment has been shown to reduce violence in before and after studies, though rates of violence remain high in these groups and relapse is common. However, not all individuals with alcohol problems seek treatment. Therefore recidivism is a challenge for addressing alcohol-related family violence for those individuals who have significant alcohol dependency issues.

A promising approach for reducing crime among substance-involved offenders is the 24/7 Sobriety Program in South Dakota, which addresses the problem of recidivism amongst individuals charged with driving under the influence (DUI) and who are subject to community release. The program couples frequent alcohol monitoring with an immediate, automatic short jail stay following alcohol use by repeat DUI offenders and others with alcohol and drug-involved offences. The program was found to be associated with a 12% reduction in repeat DUI arrests, but also had the unexpected result of a 9% reduction in domestic violence arrests (49). High rates of compliance with the program were also achieved and seen as attributable to the use of frequent testing with swift, certain and modest sanctions. We suggest that such a program may present a cost effective approach to addressing the social and economic costs associated with heavy alcohol use and harm and is worth trialing in Victoria.

**Recommendation:**

- **That a trial of the 24/7 Sobriety Program for offenders whose intoxication was involved in the offense be undertaken in Victoria and evaluated for the effect on repeated domestic violence perpetration**

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