



27 October 2016

Hutt City Council
Private Bag 31912
Lower Hutt 5040

Dear Graham

Re: Proposed Control of Alcohol in Public Places Bylaw 2016

Thank you for the opportunity to provide a written submission on this consultation document.

Regional Public Health serves the greater Wellington region, through its three district health boards (DHBs): Capital & Coast, Hutt Valley and Wairarapa and as a service is part of the Hutt Valley District Health Board.

We work with our community to make it a healthier safer place to live. We promote good health, prevent disease, and improve the quality of life for our population, with a particular focus on children, Māori and working with primary care organisations. Our staff includes a range of occupations such as: medical officers of health, public health advisors, health protection officers, public health nurses, and public health analysts.

Our service delivery includes work to reduce alcohol related harm in the Hutt Valley and we are one of the three reporting agencies in the Sale and Supply of Alcohol Act 2012 reporting on liquor licence applications.

We are happy to provide further advice or clarification on any of the points raised in our written submission. We wish to appear before the committee to speak to our written submission.

The contact point for this submission is:

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Kind regards

Dr Jill McKenzie
Medical Officer of Health

Peter Gush
Service Manager

Summary

Regional Public Health (RPH) appreciates the opportunity to provide a submission on the proposed *Control of Alcohol in Public Places Bylaw*. Regional Public Health considers the enactment of an alcohol control in public places bylaw, an important strategy for assisting in the reduction of harm arising from the misuse and abuse of alcohol.

We support the proposed bylaw and commend the council on taking this proactive approach to reducing alcohol-related harm in the city. We recognise that the proposal is in part a reinstatement of previous liquor ban areas now to be known as alcohol free zones. **We support** the reintroduction of the areas designated as 24 hour alcohol free zones. **We further support** the introduction of all public places outside of those 24 hour zones being designated alcohol free from 9pm to 5am, including Eastbourne and the Western Hills, to avoid movement of problem drinking to public areas not covered in the alcohol free zones.

We support ensuring the community has input into the final bylaw. Such contribution can have a vital part in ensuring the final policy is responsive to the local context and is an appropriate balanced response. A bylaw that reflects community views is more likely to engender a sense of ownership by the community and increases the likelihood of effective implementation. We recommend you take particular note of any areas that community cite as of concern, that are not covered either by boundary or by stated hours in the proposed bylaw.

Alcohol bylaws are generally well supported by residents and businesses. However the details in those bylaws are often not well known. The council should consider how such bylaws are communicated so the details are well understood during the life of the bylaw. **We recommend** simple and visible signage is used to convey this as part of a communication plan. Additional communication through media, social media and community networks will also assist in maintaining awareness and understanding of the bylaw. **We recommend** simplifying the bylaw to include Eastbourne and the Western Hills in the 9pm to 5am alcohol free zone. This facilitates city-wide consistency and clarity of the bylaw requirements for the public.

The Police and council reports have provided the evidence of harm caused by alcohol consumption in public places by recording the amount and location of crime and disorder. We note that this information has been valuable for informing the development of the proposed bylaw.

We recommend that when the alcohol bylaw is reviewed that evidence gathered prior to and after the reintroduction of this bylaw be used to assist in evaluating the value of such a policy. In particular, it will be useful for evaluating the impact of adding city-wide alcohol free zones from 9pm to 5am.

Alcohol bylaws are just one tool to reduce alcohol related harm and work best in conjunction with additional alcohol harm reduction measures. We anticipate that the council will continue as planned, with the early review of the current Local Alcohol Policy in response to concerns raised on the lack of controls on off-licences. Other tools include on-going support for Safe Hutt Valley as an accredited Safe Community and the contribution from Healthy Families Lower Hutt.

Support for alcohol free zones

We see this as an important opportunity to support actions to reduce alcohol related harm in Lower Hutt. The enactment of the bylaw complements other strategies within an overall aim to reduce alcohol related harm.

Public place drinking is one of a number of factors that negatively influences the levels of alcohol related harm. Police have identified public place settings as the most common location where alcohol related offending occurs¹. Other reports note similar findings identifying public places as an environment for underage drinking and that they increase the opportunities for alcohol-related violence and drink driving².

Alcohol free zones are now a widely used and well-established strategy to address such harms internationally and in New Zealand. Such strategies are known to improve perceptions of public safety and can contribute to the reduction of harm by providing police with a tool for dealing with antisocial behaviour caused by drinking in public³.

Since the introduction of such bylaws alcohol free zones have tended to increase in size with few exceptions. Those that have been reviewed since the amendment in the Local Government Act have generally been reviewed positively and have met the criteria for making or continuing bylaws under section 147A and 147B of the Local Government Act 2002.

However, such bylaws are not a silver bullet for harm reduction and do come with limitations. Literature suggests that displacement can be a problem^{4 5}. This is one of the reasons we support a city wide response to the 9pm to 5am alcohol free zones.

Literature also reports other limitations including that disadvantaged and marginalised groups are more likely to consume alcohol in public, either by choice or because of limited alternatives^{6 7}. In

¹ Stevenson, R. (2009, April). *National Alcohol Assessment*. NZ Police.

<https://www.police.govt.nz/sites/default/files/Police-National-Alcohol-Assessment.pdf>

² Webb, M., Marriott-Lloyd, P. A. U. L., & Grenfell, M. (2004, May). Banning the bottle: Liquor bans in New Zealand. In *3rd Australasian Drug Strategy Conference*. Melbourne, Australia

[http://www.moh.govt.nz/moh.nsf/pagescm/1047/\\$File/banningbottleliquorbans.pdf](http://www.moh.govt.nz/moh.nsf/pagescm/1047/$File/banningbottleliquorbans.pdf)

³ Pennay, A., Manton, E., Savic, M., Livingston, M., Matthews, S., Lloyd, B. (2014). *Prohibiting public drinking in an urban area: Determining the impacts on police, the community and marginalised groups*. Turning Point Alcohol and Drug Centre. Funded by the National Drug Law Enforcement Research Fund.

<http://www.ndlerf.gov.au/sites/default/files/publication-documents/monographs/monograph49.pdf>

⁴ Alcohol Advisory Council. (2005, October). *Liquor Bans in New Zealand: ALAC Occasional Publication no. 25*.

<http://www.hpa.org.nz/research-library/research-publications/liquor-bans-new-zealand>

⁵ Pennay, A., Manton, E., Savic, M., Livingston, M., Matthews, S., Lloyd, B., (2014). *Prohibiting public drinking in an urban area: Determining the impacts on police, the community and marginalised groups*. Turning Point Alcohol and Drug Centre. Funded by the National Drug Law Enforcement Research Fund.

<http://www.ndlerf.gov.au/sites/default/files/publication-documents/monographs/monograph49.pdf>

⁶ Pennay, A., Room, R. (2012). Prohibiting public drinking in urban public spaces: a review of the evidence. *Drugs: Education, prevention and policy*, vol 19(2), p 91-101

⁷ Pennay, A., Manton, E., Savic, M., Livingston, M., Matthews, S., Lloyd, B., (2014). *Prohibiting public drinking in an urban area: Determining the impacts on police, the community and marginalised groups*. Turning Point

New Zealand, young Māori are over-represented in statistics on breaches of alcohol bans. The responses to, and implementation of, an alcohol ban may work to induct young Māori into the formal criminal justice system⁸.

Because of these limitations the literature recommends alcohol free zones be used in conjunction with other community responses^{9 10}. These may include other regulations for supply control such as elements in a Local Alcohol Policy as well as broader community directed harm reduction initiatives, access to health services and culturally appropriate and age related programmes.

Alcohol free zones are most successful when part of a wider strategy where communities work in partnership to solve the underlying problems that contribute to public drinking and other alcohol related concerns. Understanding the causes and engaging community in solutions will also support effective implementation of the bylaw. Safe Hutt Valley and Healthy Families Lower Hutt are ideally placed to help facilitate and support actions around the bylaw implementation and a wider strategy to reduce alcohol harm.

Why a bylaw is needed in Lower Hutt

Alcohol is a well known contributing factor to crime, violence and adverse health outcomes. The large majority of alcohol is purchased from off-licences (supermarket, grocery and liquor stores) and it is likely these outlets contribute to the consumption of alcohol in public places. Public places near alcohol outlets are particularly vulnerable and the increase in outlet density particularly in residential suburbs may be a factor contributing to the communities requesting growth of alcohol free zone areas.

Misuse of alcohol and effect on amenity and good order and behaviour is more likely to occur in unsupervised drinking environments and this is a significant factor that highlights drinking in public places as a vulnerable activity for all who use those public spaces.

Hazardous drinking is one measure used nationally to monitor alcohol related health harm. Hazardous drinking is rising in the Hutt Valley, whereas the national figure is decreasing. In the NZ Health Survey 2006/07 Hutt Valley District Health Board was at 12.5% rising to 14.9% in 2011/14 where the national figure decreased from 18.0% to 15.5%¹¹.

Alcohol and Drug Centre. Funded by the National Drug Law Enforcement Research Fund.

<http://www.ndlrf.gov.au/sites/default/files/publication-documents/monographs/monograph49.pdf>

⁸ Webb, M., Marriott-Lloyd, P. A. U. L., & Grenfell, M. (2004, May). Banning the bottle: Liquor bans in New Zealand. In *3rd Australasian Drug Strategy Conference*. Melbourne, Australia

[http://www.moh.govt.nz/moh.nsf/pagescm/1047/\\$File/banningbottleliquorbans.pdf](http://www.moh.govt.nz/moh.nsf/pagescm/1047/$File/banningbottleliquorbans.pdf)

⁹ Alcohol Advisory Council. (2005, October). *Liquor Bans in New Zealand: ALAC Occasional Publication no. 25*.

<http://www.hpa.org.nz/research-library/research-publications/liquor-bans-new-zealand>

¹⁰ Pennay, A., Manton, E., Savic, M., Livingston, M., Matthews, S., Lloyd, B. (2014). *Prohibiting public drinking in an urban area: Determining the impacts on police, the community and marginalised groups*. Turning Point Alcohol and Drug Centre. Funded by the National Drug Law Enforcement Research Fund.

<http://www.ndlrf.gov.au/sites/default/files/publication-documents/monographs/monograph49.pdf>

¹¹ NZ Health Survey: Data tables 2011-14 results for adults aged 15 years and over for all 20 DHBs

<http://www.health.govt.nz/publication/regional-results-2011-2014-new-zealand-health-survey>

Alcohol related health harms are not distributed evenly throughout the population but in part is related to the age, sex and ethnicity of that population. Hazardous drinking is significantly higher in younger adult age groups. In the NZ Health Survey 2006/07 and 2011/14 in the Hutt Valley District Health Board the levels are highest in those aged 15 to 24 years at 24.0%, followed by those aged 25 to 44 years at 17.7%¹². Nearly eight percent (7.7%) of young New Zealanders aged under 16 years were binge drinking in 2012 as were 11.9% of those aged 16 to 18 years, with this level of substance abuse considered very high risk¹³. The advice of the NZ Health Promotion Agency is that those under the age of 18 years should preferably not drink alcohol, especially those aged under 15 years¹⁴. As public place drinking is also associated with younger drinkers, implementation of this bylaw has the potential to reduce harms in the vulnerable younger age groups.

In the Hutt Valley District Health Board, Māori have a prevalence rate of hazardous drinking at 30.6%, which is more than twice the level of hazardous drinking in non-Māori at 12.4%.

The importance of public consultation

Given the unequal impact that hazardous drinking has on different groups within the Hutt community it is important to assess the impacts of local policies on vulnerable groups. One approach to understanding the impacts of a new policy is to have robust input from community and relevant agencies during the consultation. This will facilitate the implementation of a policy that is supportive of positive change including mitigation for any potential unintended consequences that have been identified. The effectiveness of the policy is further increased when it sits alongside other harm reduction activities within an overall alcohol harm reduction strategy.

Ensuring effectiveness and meeting legislative requirements

Evaluation of an implemented policy is important to assess its impact both positive and negative. Prior to the next review it may be beneficial for the Hutt City Council to again collaborate with other agencies involved in alcohol harm reduction and complete an evaluative impact assessment. This would provide policy makers with evidence supporting the requirements under the Local Government Act, support a sustainable approach to the wellbeing of communities and a participatory and consultative approach to policy-making.

Community knowledge of alcohol free zones

The proposed bylaw has a number of different area, time and day restrictions. The time ranges from 24 hour 7 days a week, to night time bans from 9pm to 5am, and from 1 day of the year to everyday.

¹² NZ Health Survey: Data tables 2011-14 results for adults aged 15 years and over for all 20 DHBs

<http://www.health.govt.nz/publication/regional-results-2011-2014-new-zealand-health-survey>

¹³ University of Auckland. Problem substance use among New Zealand secondary school students: Findings from the Youth'12 national youth health and wellbeing survey.

<https://www.fmhs.auckland.ac.nz/assets/fmhs/faculty/ahrg/docs/Final%20Substance%20Abuse%20Report%2016.9.14.pdf>

¹⁴ Health Promotion Agency. Low risk drinking advice. <http://www.alcohol.org.nz/help-advice/advice-on-alcohol/low-risk-alcohol-drinking-advice>

Having variable restrictions across the city can cause confusion. Such concerns were raised in the Law Commission report Alcohol in Public Places¹⁵. It is important there is on-going clear communication about the variations that apply in any specific areas throughout the life of the bylaw.

Where possible it is helpful to consider how the bylaw can be simplified. We consider one such area is the 9pm to 5am restrictions. It is far easier to remember that all public places are subject to a night time restriction than to try and remember which areas have exclusions. This is another reason for our supporting the inclusion of Eastbourne and the Western Hills as alcohol free zones from 9pm to 5am. The first reason raised was to avoid any movement of public place drinking and antisocial behaviour to other public places.

Simple and visible signage is one common method used to convey the details about alcohol free zones. Signage needs to be of ample size, placed prominently enough to be visible from almost all vantage points, and be very easy to interpret.

However, signage alone will not be sufficient. The bylaw once passed needs to be effectively communicated to the public so they are aware of the changes. Various community networks and the use of media and social media should be considered as part of a communications plan.

¹⁵ Law Commission. (2009). Alcohol in our lives: An issues paper on the reform of New Zealand liquor laws.