

18 September 2020

Mr Peter Achterstraat AM  
NSW Productivity Commissioner

Dear Commissioner Achterstraat

**PRODUCTIVITY COMMISSION GREEN PAPER:  
CONTINUING THE PRODUCTIVITY CONVERSATION**

I am writing to provide feedback to the recently released Productivity Commission Green Paper, "Continuing the productivity conversation", specifically Cancer Council NSW's concerns in relation to recommendation 4.9 to review current restrictions on the retail sale of packaged alcohol.

**About Cancer Council NSW**

Cancer Council NSW is Australia's leading cancer charity, working across every area of every cancer. Cancer Council NSW supports people affected by cancer and their families with information and practical help, speaks out on behalf of the community on cancer issues, empowers people to reduce their cancer risk, and uses research to better detect, treat and prevent cancer.

Cancer Council NSW, as an independent health organisation, supports evidence based public policies and we are concerned that easing restrictions on supermarkets, general stores and other retailers selling packaged alcohol increases the availability and accessibility of alcohol and promotes increased alcohol consumption including at dangerous levels. We are especially concerned that expanding the availability of alcohol in retailers such as supermarkets, increases the accessibility of alcohol to children and adolescents.

**Alcohol and cancer**

The International Agency for Research on Cancer (IARC) classifies alcohol as a Group 1 carcinogen.<sup>i</sup> This means that IARC are certain that alcohol causes cancer. Alcohol use is a cause of cancers of the breast, mouth, pharynx, larynx, oesophagus, liver, bowel and stomach. There is no safe limit of alcohol use in relation to cancer risk.<sup>ii</sup>

**The health costs of alcohol**

It has been estimated that approximately 3,500 cancer cases (2.4% of all cancers) occurring in Australian adults in 2013 could be attributed to alcohol use.<sup>iii</sup> In addition to the cancer burden, alcohol has impacts across our health system. HealthStats NSW data shows that, in NSW in 2018, alcohol was responsible for 1,929 deaths.<sup>iv</sup> Recently released data demonstrates that in 2019, 32.8% of the total NSW adult population drank alcohol at rates that increased their long-term risk of harm.<sup>v</sup> This proportion has been increasing each year since 2016.<sup>vi</sup>

Alcohol abuse costs the NSW government more than \$1 billion every year.<sup>vii</sup> This does not include the cost of treatment of chronic conditions linked to alcohol use.<sup>viii</sup>

### **The danger of increasing accessibility of alcohol to minors**

Cancer Council NSW is concerned about the suggested relaxation of restrictions on where and how supermarkets can sell alcohol. In particular, we are concerned that relaxing the rules around the areas of the store that people can purchase alcohol may make it easier for under-aged people to purchase alcohol. For example, making alcohol purchases available through self-serve checkouts has been shown to lead to under-aged purchases overseas.<sup>ix</sup>

Allowing alcohol to appear on shelves and displays in areas that are not designated alcohol areas also normalises alcohol use and aligns it with necessary products such as food. We do not believe there should be any changes to these provisions in the packaged liquor licencing regulations.

### **Productivity loss from alcohol**

The Australian Institute of Health and Welfare (AIHW) report, *Alcohol and other drug treatment services in Australia 2018–19*, noted that the social costs of alcohol misuse in Australia in 2010 was estimated to be \$14.35 billion and that the highest costs were associated with productivity losses at 42.1%.

In addition to the productivity loss of alcohol misuse, the AIHW report catalogues other impacts and costs to society of alcohol misuse including:

- 20.6% of the \$14.35 billion social costs of alcohol abuse relates to costs to the criminal justice system.
- The 2016 Personal Safety Survey showed that of women who have experienced male perpetrated physical or sexual violence (assault or threat) in the past 10 years, around half reported that they believed alcohol or another substance contributed to their experience of male perpetrated sexual violence.
- Mental and behavioural disorders due to alcohol abuse made up about 20% of alcohol-induced deaths in 2017.
- Alcohol abuse was responsible for 14% of the suicide burden.

### **The impacts of increasing alcohol availability should be rigorously assessed**

The data and evidence on the health, social and economic costs of alcohol misuse should give us pause before this recommendation progresses further.

There is a growing body of evidence that indicates alcohol outlet density is associated with community-level alcohol consumption and harms, including violent crime, domestic violence, traffic injury and child maltreatment.<sup>x</sup> The results of a 2018 systematic review of research in this area, by Sherk et al, were generally consistent with previous systematic reviews relating to physical availability and alcohol related concerns.<sup>xi</sup>

There is currently an abundance of choice available to consumers to access alcohol. Apart from the desire for the convenience store industry to increase their sales revenue, no evidence has been presented of wider social or economic issues that

recommendation 4.9 is attempting to address. Case study 4.3 in the Green Paper refers to claims by the Retail Council of Canada that expanding the sale of alcohol would lead to the creation of jobs and an increase in the GDP, however no evidence is presented that these claims have been tested.

Cancer Council NSW believes that recommendation 4.9 should be removed, as no prima facie case has been made for the expansion of the retail sale of packaged alcohol, and the health, social and economic costs of increasing the accessibility of alcohol has not been appropriately considered.

If you require further information, your staff can contact [REDACTED]

Yours sincerely

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<sup>i</sup> International Agency for Research on Cancer. Monographs on the evaluation of carcinogenic risks to humans: alcoholic beverage consumption and ethyl carbamate. Lyon, France: International Agency for Research on Cancer; 2010.

<sup>ii</sup> World Cancer Research Fund/American Institute for Cancer Research. Diet, Nutrition, Physical Activity and Cancer: A Global Perspective. Continuous Update Project Expert Report. 2018. Available at [dietandcancer.org](http://dietandcancer.org)

<sup>iii</sup> Wilson LF, Antonsson A, Green AC, Jordan SJ, Kendall BJ, Nagle CM, et al. How many cancer cases and deaths are potentially preventable? Estimates for Australia in 2013. *International Journal of Cancer*. 2018;142(4):691-701.

<sup>iv</sup> Centre for Epidemiology and Evidence. Health Stats NSW Alcohol [Internet]. Sydney: NSW Ministry of Health; Updated 2020. Available from: <http://www.healthstats.nsw.gov.au/>

<sup>v</sup> New South Wales Auditor-General. New South Wales Auditor-General's Report to Parliament Cost of alcohol abuse to the NSW Government. Sydney, Australia; 2013

<sup>vi</sup> *ibid*

<sup>vii</sup> *ibid*

<sup>viii</sup> *ibid*

<sup>ix</sup> Van Hoof JJ. Underage alcohol-purchasing strategies and alcohol availability through self-checkout lanes in supermarkets. *Journal of Substance Use*. 2017;22(5):561-6.

<sup>x</sup> 'Liquor landscapes: Does access to alcohol outlets influence alcohol consumption in young adults?' Sarah et al, 2017

<sup>xi</sup> Alcohol Consumption and the Physical Availability of Take- Away Alcohol: Systematic Reviews and Meta-Analyses of the Days and Hours of Sale and Outlet Density, Sherk et al, 2018