



Premier's Economic and Social Recovery Advisory Council
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To whom it may concern,

I am writing on behalf of the Tasmanian alcohol and other drug sector to provide information to inform the second phase of consultations being undertaken by the Premier's Economic and Social Recovery Advisory Council (PESRAC).

We acknowledge that this round of consultations is focused on obtaining information from grassroots communities and over the past few weeks we have been encouraging those working in our member organisations, and those across our networks to complete The Tasmania Project PESRAC survey.

To complement the information you would be receiving, we would also like to submit a short written submission to urge the Tasmanian Government not to overlook the importance of including alcohol, tobacco and other drug use in their community health and wellbeing messaging.

We welcome the Tasmanian Government's focus on community health and wellbeing, as this will be a critical component to enable an effective social and economic recovery from COVID-19.

However, it has been our observation that there can be a tendency for messaging around healthy alcohol, tobacco and other drug use to be 'lost' in broader health messaging. That is, when discussing healthy communities, a strong focus can be placed on an individual's mental or physical health and drinking, smoking and / or illicit drug use is not always explicitly named up as a health issue that people should be particularly concerned about.

For example, if alcohol consumption is mentioned, it is frequently alluded to as secondary concern alongside information about mental health. In these instances, information and resources are primarily focused on providing information and support lines to address mental health concerns. Even though increased alcohol use can be mentioned, there is generally no information directing Tasmanians to alcohol specific health education resources or support telephone lines. The same is observed for smoking and other drug use. While increased alcohol, tobacco or other drug use can be linked to mental health concerns, this is not always the case and if use becomes problematic, they require a very distinct treatment response.

It is important to our members, and this organisation that wherever possible we elevate the issue of alcohol, tobacco and other drug use as a distinct health issue that Tasmanians need to be monitoring as they continue to emerge from the COVID19 pandemic.

To provide context, I will use alcohol as an example:

- Across Tasmania there are approximately 419,700 people aged 14 years and over¹.
- It is reported that 83 per cent of Tasmanian's aged 14 years and over have consumed alcohol in the last 12 months². This equates to around 348,352 Tasmanians.

¹ABS Census accessed 3 November 2020

²[National Drug Strategy Household Survey 2019](#)

- The majority of these Tasmanians are making healthy choices about their drinking, but it is estimated that almost 17 per cent of Tasmanians (aged 14 and over) are drinking at levels that will cause long-term harm. That's approximately 69,670 members of our community³.
- This figure doesn't include the estimated 109,122 Tasmanians aged 14 years and over, who have reported that they are drinking more than four standard drinks in one sitting at least monthly (commonly known as binge-drinking).
- These are quite large numbers for a population as small as Tasmania, particularly when you consider that during 2018 only 1,130 Tasmanians accessed treatment or support for alcohol related health issues⁴.
- It's difficult to accurately estimate the number of Tasmanians that 'should' be seeking treatment, but are not. However, modelling commissioned by the Tasmanian Government in 2017 estimates that at that time there were 7,619 Tasmanians that were not in treatment that should seek it. The reasons why they are not in treatment are varied, and can range from the stigma associated with seeking support to a shortage of treatment options, particularly in regional Tasmania.

The pertinent issue is that the data above generally underestimates the problem and also pre-dates COVID-19.

The level of alcohol consumption across Tasmania has increased. We know this from a few sources. The media coverage of the spike in alcohol retail sales⁵ and from talking directly to local Tasmanian bottle shop operators who reported COVID-19 was 'like the Christmas rush and it hasn't stopped'. We also know this from the research that has been emerging indicating that 20 per cent of people drank more during the COVID-19 lockdown than they normally did⁶. The reasons appear to vary from mental health distress (e.g. anxiety) to stress, loneliness, or just simply boredom.

Similar issues exist for smoking and the use of other drugs, and we believe that it is unlikely that these issues are going to be unearthed from the survey responses of every-day Tasmanians, at least in the short term, due to their reluctance to disclose that they may have an issue.

Therefore, on behalf of our members, and all Tasmanians we urge PESRAC to include a recommendation that the Tasmanian Government strengthen the health and wellbeing messaging for Tasmanians to appropriately capture the risks associated with elevated alcohol, tobacco and other drug use. The ATDC, and our members would welcome the opportunity to work alongside government to achieve this.

Thank you for the opportunity to contribute to this process. If you require any further information on this matter, I can be contacted via email at ceo@atdc.org.au or by phone on 0450 517 017.

With kindest regards,



Alison Lai
Chief Executive Officer

20 October, 2020

cc: Michael Voumard, Chair – Alcohol, Tobacco and other Drugs Council Tasmania

³ National Drug Strategy Household Survey 2019

⁴ Australian Institute of Health and Welfare National Minimum Data Set AOD Treatment Services

⁵ <https://fare.org.au/wp-content/uploads/COVID-19-POLL.pdf>

⁶ <https://csmr.cass.anu.edu.au/research/publications/alcohol-consumption-during-covid-19-period-may-2020>