

# Chapter 2

## Relationship between alcohol and violence

### Terminology

2.1 The terms of reference for the inquiry refer to both 'alcohol-fuelled violence' and 'alcohol-related violence'. Some submitters argued that it is important to use terminology that accurately describes the problem, and proffered their preferred terms.

2.2 Step Back Think (SBT) argued for careful consideration of terminology:

Language is a vitally important part of our culture and societies...It is important to consider the language we use to describe social violence as it has the power to transform our culture surrounding social violence. Language can also be a barrier to creating change, as multiple or conflicting terminology can limit and confuse discourse.<sup>1</sup>

2.3 SBT supported the term 'social violence', which it defined as 'interpersonal physical violence that occurs in a community setting, such as a one-punch assault, pub brawl or street fight'.<sup>2</sup> SBT claimed using this term would both 'emphasise the social and cultural elements of this type of violence' as well as 'identify that social violence is a specific type of violence'.<sup>3</sup> SBT preferred this term because it does not distinguish between violence caused by alcohol or by other drugs.<sup>4</sup>

2.4 Ms Martha Tsamis, the licensee of Chasers and Inflation Nightclubs, opposed both the term 'alcohol-fuelled violence' and the term 'alcohol-related violence', because the association between alcohol and violence 'does not mean there is a causal correlation between alcohol and violence'.<sup>5</sup> She advocated for thoughtful terminology, positing that:

Getting the terminology right and separating cause and effect in relation to alcohol misuse and violence is vital to effective public policy and practice in relation to these two serious national issues.<sup>6</sup>

2.5 Several submissions made similar points regarding the causal implications of the term 'alcohol-fuelled violence', but did not extend this to the term 'alcohol-related violence'. For instance, Alcohol Beverages Australia (ABA) opposed the term 'alcohol-fuelled violence' because 'alcohol does not "fuel" violence',<sup>7</sup> adding that:

---

1 Step Back Think (SBT), *Submission 27*, p. 1.

2 SBT, *Submission 27*, p. 1.

3 SBT, *Submission 27*, p. 2.

4 SBT, *Submission 27*, p. 3.

5 Ms Martha Tsamis, *Submission 45*, p. 5.

6 Ms Tsamis, *Submission 45*, p. 4.

7 Alcohol Beverages Australia (ABA), *Submission 59*, p. 3.

This mislabelling of violence as 'alcohol-fuelled' contributes to increase rates of violence because it lessens responsibility from the violent perpetrator for their actions: they are not held fully accountable for their behaviour because the alcohol is seen to have been the cause or "fuel".<sup>8</sup>

2.6 Similarly, the Australian Hotels Association (AHA) preferred the term 'anger-fuelled violence', submitting that: '[t]he term *alcohol-fuelled violence* inaccurately lays the blame for this criminal behaviour at the foot of the alcohol industry instead of with the violent criminals that commit it'.<sup>9</sup>

2.7 Dr Kate Fitz-Gibbon supported the term 'alcohol-related violence' because:

The notion of violence as 'alcohol-fuelled violence' rather than, for example, 'alcohol-related violence' partially shifts focus and responsibility for the act of violence from the individual to the alcohol involved. The term 'alcohol fuelled violence' suggests a causal relationship between alcohol consumption and violence which is not always the case.<sup>10</sup>

2.8 Professor David Moore, Professor Suzanne Fraser, Associate Professor Helen Keane, Dr Kate Seear and Dr kylie valentine (Professor Moore et al.) argued that the term 'alcohol-fuelled violence':

...explicitly frames the relationship between alcohol and violence as directly causal. Yet extensive anthropological, sociological and historical research consistently demonstrates that alcohol-related effects, including violence, are contingent on the historical, social and political contexts in which drinking is embedded...<sup>11</sup>

2.9 Professor Moore et al. added that:

Replacing the term 'alcohol-fuelled violence' with 'alcohol-related violence' acknowledges the involvement of alcohol but leaves open the precise relationship between alcohol and violence, and thus allows for the incorporation in policy of other crucial elements that shape this relationship.<sup>12</sup>

---

8 ABA, *Submission 59*, p. 3.

9 Australian Hotels Association (AHA), *Submission 51*, p. 3.

10 Dr Kate Fitz-Gibbon, *Submission 49*, p. 2.

11 Professor David Moore, Professor Suzanne Fraser, Associate Professor Helen Keane, Dr Kate Seear and Dr kylie valentine, *Submission 31*, p. 3.

12 Professor Moore, Professor Fraser, Associate Professor Keane, Dr Seear and Dr valentine, *Submission 31*, p. 3.

2.10 Many submissions used the term 'alcohol-related violence', and the term was commonly used at the public hearing.<sup>13</sup> This report uses the term 'alcohol-related violence' in place of 'alcohol-fuelled violence', 'social violence', or other suggested terms.

### **Does alcohol cause violence?**

2.11 The committee heard evidence that alcohol can cause harm to the drinker and to others. Apart from the obvious harm to a person's own health if they regularly drink to excess, intoxication can also cause individuals to engage in activities which may be dangerous to their health, and that of others. St Vincent's Health Australia (SVHA) stated that: '[a]lcohol is second only to tobacco as a leading preventable cause of death and hospitalisation'.<sup>14</sup> The Foundation for Alcohol Research and Education (FARE), the Public Health Association of Australia (PHAA) and the National Alliance for Action on Alcohol (NAAA) labelled alcohol a 'toxic substance' with the capacity to cause both long and short term harm, including harm to people other than the drinker.<sup>15</sup> The Royal Australian College of Surgeons (RACS) likewise submitted that:

Surgeons are dramatically confronted with the effects of alcohol misuse when treating patients with injuries resulting from road traffic trauma, interpersonal violence and personal accidents that are caused by excessive alcohol consumption.<sup>16</sup>

2.12 There was, however, contention around the extent of the causal relationship, if any, between alcohol and violence. The relationship between alcohol and violence is important because policy responses to alcohol-related violence often rest on assumptions about the underlying causes of the problem.

---

13 See, for example, Australian Medical Association (AMA), *Submission 7*; Royal Australasian College of Physicians (RACP), *Submission 16*; WA Nightclubs Association (WANA), *Submission 18*; Queensland Nurses' Union (QNU), *Submission 19*; The Royal Australian and New Zealand College of Psychiatrists (RANZCP), *Submission 25*; Professor Tanya Chikritzhs, Professor Steve Allsop, Mr William Gilmore and Mr Vic Rechichi, *Submission 28*; Victorian Alcohol & Drug Association (VAADA), *Submission 29*; Professor Moore, Professor Fraser, Associate Professor Keane, Dr Seear and Dr valentine, *Submission 31*; McCusker Centre for Action on Alcohol & Youth (MCAAY) and Public Health Association of Australia (PHAA), *Submission 32*; Australian Drug Foundation (ADF), *Submission 34*; St Vincent's Health Australia (SVHA), *Submission 38*; Australian Liquor Stores Association (ALSA), *Submission 44*; Deakin University Violence Prevention Group (DUPVG), *Submission 47*; Dr Fitz-Gibbon, *Submission 49*; Foundation for Alcohol Research and Education (FARE), Public Health Association of Australia (PHAA) and National Alliance for Action on Alcohol (NAAA), *Submission 50*; Western Australian Network of Alcohol & other Drug Agencies (WANADA), *Submission 52*; Aboriginal Health Council of Western Australia (AHCWA), *Submission 58*; and ABA, *Submission 59*.

14 SVHA, *Submission 38*, p. 2.

15 FARE, PHAA and NAAA, *Submission 50*, p. 4.

16 Royal Australian College of Surgeons (RACS), *Submission 43*, p. 2.

2.13 SVHA argued that alcohol is 'a major contributor' to alcohol-related violence.<sup>17</sup> It outlined the findings of four international studies into the correlation between alcohol and violence:

- a one hour extension of alcohol outlet closing times in some of Amsterdam's nightlife areas was associated with 34 per cent more alcohol-related injuries;
- a study of 18 cities in Norway found a 16 per cent increase in violent crime associated with each additional hour of trading;
- a late-night off-premise alcohol sales ban in Germany has been effective at reducing alcohol-related hospitalisations among adolescents and young adults in the short term; and
- in New York, every additional hour of trading was associated with a greater reported incidence of violent crimes.<sup>18</sup>

2.14 However, Ms Tsamis argued that 'correlation does not imply causation'.<sup>19</sup> She argued that 'alcohol does not directly cause violence' and that 'most people who drink are not violent'.<sup>20</sup> Ms Tsamis also presented research papers which she claimed 'demonstrate that cultural factors alone are a strong indicator in whether violence will occur, regardless of whether alcohol is consumed or not'.<sup>21</sup>

2.15 A number of submissions argued a similar point, and referred to a study by Dr Anne Fox titled *Understanding behaviour in the Australian and New Zealand night-time economies*.<sup>22</sup> The AHA highlighted 'violent people as being the real issue' and quoted Dr Fox's report:

If alcohol alone makes people violent, we would expect to find incidents of violence spread evenly across the full range of drinkers, from female post-menopausal librarians to young male rugby players, but we don't.

We would also expect to find an equal incidence of violence among drinkers in all societies, but we don't. We would expect to find equal levels of violence in all drinking situations, from weddings to funerals to Saturday nights out on the town, but we don't.

The conclusion of this, and many previous studies, is that alcohol can, in certain cultures and situations, be a facilitator of aggression if aggression is there to begin with, both in the individual and in the cultural environment. It does not produce it where it doesn't already exist.<sup>23</sup>

---

17 SVHA, *Submission 38*, p. 3.

18 SVHA, *Submission 38*, p. 4.

19 Ms Tsamis, *Submission 45*, pp 16-17.

20 Ms Tsamis, *Submission 45*, p. 16.

21 Ms Tsamis, *Submission 45*, p. 18.

22 ALSA, *Submission 44*, pp 7-8; AHA, *Submission 51*, p. 7; Brewers Association of Australia and New Zealand, *Submission 61*, p. 9.

23 AHA, *Submission 51*, p. 7.

2.16 The Australian Liquor Stores Association (ALSA) summarised findings from Dr Fox's report, including that 'the physical effects of alcohol do not determine a behavioural response' and that 'it's the wider culture that determines the behaviour whilst drinking, not just the drinking'.<sup>24</sup> However, the Woman's Christian Temperance Union (WCTU) Australia opposed Dr Fox's report, and asserted that it was funded by Lion, an alcohol company.<sup>25</sup>

2.17 The Deakin University Violence Prevention Group (DUVPG) highlighted the link between alcohol and violence, arguing that:

The evidence is very substantial in terms of the links, and in a number of different ways you can see that. So you can do studies, as they have been doing in America for quite a long time, where you get people in a room and you add alcohol and you provoke them. When they do not have alcohol or when they have a placebo they do not respond as aggressively as when they do have alcohol. You can track people throughout time, and you can measure that when alcohol is involved people are more likely to be involved in violence than when it is not involved...

One of the key things that we are finding is that alcohol also creates victims...In terms of victims, they tend to walk into situations they would never walk into, and they respond to prompts that they would never normally respond to from people they would never normally respond to.<sup>26</sup>

2.18 The DUVPG ultimately argued that there is no single cause of alcohol-related violence; the causes are many and complex. It contended that:

Conceptualising alcohol-related violence as an outcome from a mix of psychological, developmental and environmental risk and protective factors it the only scientifically valid framework to work [from].<sup>27</sup>

### ***Aggressive masculinities***

2.19 Various submitters and witnesses highlighted that men are frequently both the perpetrators and victims of alcohol-related violence. For example, Dr Fitz-Gibbon explained:

Australian research...observed that nationally between 2000 and 2012 the vast majority of one-punch deaths took place at night in public drinking venues, such as hotels and pubs, and involved young males (as both offender and victim) acting under the influence of alcohol and/or drugs.<sup>28</sup>

2.20 Professor Moore et al. emphasised certain aggressive masculinities as a cultural factor contributing to alcohol-related violence. These masculinities, it was argued, are socially constructed and 'inextricably linked to struggles for social power

---

24 ALSA, *Submission 44*, p. 8.

25 Woman's Christian Temperance Union (WCTU) Australia, *Submission 13*, pp 4-5.

26 Professor Peter Miller, DUVGP, *Committee Hansard*, 15 April 2016, p. 6.

27 DUVPG, *Submission 47*, p. 9.

28 Dr Fitz-Gibbon, *Submission 49*, p. 1.

between men and between men and women'.<sup>29</sup> The authors pointed to a large body of research that:

has consistently highlighted the disproportionate involvement of men, and particularly young men, in acute forms of alcohol-related harm (e.g. violence, sexual assault, traffic accidents, drink driving and public disorder).<sup>30</sup>

2.21 According to this view, aggressive masculinities play a 'key role' in public assaults, and it is simplistic to consider alcohol as 'the "precipitating or influencing" factor'.<sup>31</sup> The authors concluded that:

...violence is gendered and most often perpetrated by men, especially young men. Although these are not new insights, they are strikingly absent from contemporary policy discourse and legal debates on alcohol and violence (such as the effectiveness of lockout laws).<sup>32</sup>

2.22 The DUVPG submitted that 'violence and alcohol feed each other, making both more common and more severe'.<sup>33</sup> The DUVPG also explored many possible causes of alcohol-related violence, including masculinities, stating that:

What we find overwhelmingly is that if you are someone who is aggressive and you drink, that virtually explains whether you will perpetrate a fight. Trait aggression, heavy episodic drinking and if you experienced violence in the home as a child are the key predictors of whether you will be violent in later life, not masculinity.<sup>34</sup>

### ***Domestic violence***

2.23 As discussed briefly in chapter 1, some submitters identified a relationship between alcohol consumption and domestic (family and intimate partner) violence.

2.24 The Law Council of Australia (LCA) advised that alcohol is a significant factor in 50 per cent of domestic physical and sexual violence in Australia, and that \$46.4 million per year in costs can be attributed to alcohol-related domestic violence.<sup>35</sup>

2.25 The DUVPG stated that there is clear evidence about the long-term and intergenerational effects of family and domestic violence 'of which 30–50% are

29 Professor Moore, Professor Fraser, Associate Professor Keane, Dr Seear and Dr valentine, *Submission 31*, p. 4.

30 Professor Moore, Professor Fraser, Associate Professor Keane, Dr Seear and Dr valentine, *Submission 31*, p. 5.

31 Professor Moore, Professor Fraser, Associate Professor Keane, Dr Seear and Dr valentine, *Submission 31*, p. 7.

32 Professor Moore, Professor Fraser, Associate Professor Keane, Dr Seear and Dr valentine, *Submission 31*, p. 9.

33 DUVPG, *Submission 47*, p. 59.

34 DUVPG, *Submission 47*, p. 35.

35 Law Council of Australia (LCA), *Submission 30*, p. 7.

alcohol-related'.<sup>36</sup> The DUVPG told the committee that children who survive family or domestic violence 'are three times more likely to become perpetrators and twice as likely to become victims' and:

Boys who are abused physically by their fathers, who normally do so when drunk, are twice as likely to be perpetrators of bar-room violence as adults. They often destroy their lives as well as others before they even really begin.<sup>37</sup>

2.26 The DUVPG also told the committee that its research revealed incidents of intimate partner violence and family violence (as well as other violence), with 32.7 per cent of participants had experienced violence involving alcohol and that a:

...participant was more likely to report that they had themselves consumed alcohol for other violence, whereas the other person (not the survey participant) was more likely to be reported as having consumed alcohol for intimate partner violence.

The alcohol consumed, including during intimate partner violence incidents was most frequently purchased at a supermarket liquor store (38.8%) and consumed at the respondent's home (55.9%).<sup>38</sup>

### ***Violence towards nurses and carers***

2.27 The Queensland Nurses' Union (QNU) described some of the violence directed towards nurses and carers. In commissioned research, the QNU found that:

...almost half of the Queensland nurses and midwives who responded to their survey had experienced workplace violence in the previous three months with the lowest incidence of workplace violence reported in the private sector. Overall half of the nurses and midwives who responded said that workplace violence had remained the same but a third noted an increase. There were more aged care nurses who said it had decreased whilst private sector nurses were more likely to say that it had remained the same. Clients/patients/residents were the highest source of workplace violence.

This study did not differentiate between alcohol-related and other forms of violence, but the prevalence of alcohol could be assumed to correlate to other studies (for example Crilly, Chaboyer & Creedy, 2004) where alcohol and drugs accounted for half of the incidents.<sup>39</sup>

---

36 DUVPG, *Submission 47*, p. 7.

37 DUVPG, *Submission 47*, p. 9.

38 DUVPG, *Submission 47*, p. 39.

39 QNU, *Submission 19*, p. 7.

