

Alcohol, Tobacco & Gambling Environment

Moreland City Council Health Profile

December 2020

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Overview

Tobacco Harm

Tobacco is a highly addictive stimulant that contains nicotine, a toxic substance that is found in cigarettes, cigars and pipes (Department of Health, 2019). Smoking tobacco is a major health concern. People who smoke tobacco have higher risks of many diseases and have poorer health outcomes (Department of Health, 2017). Long term smokers have greater health risks. Conditions that smoking increases the likelihood of include:

- Cancer (lung, mouth, throat, stomach, liver, kidney, pancreas, blood and more)
- Chronic respiratory conditions (chronic obstructive pulmonary disease and asthma)
- Heart disease, stroke and blood circulation problems
- Diabetes
- Dental problems (gum disease, tooth loss and sensitivity)
- Vision and hearing loss and
- Fertility problems (Better Health Channel, 2019).

It has been identified that smokers' lives will be cut short by an average of 10 years due to one of the above conditions when compared to non-smokers (Department of Health, 2020).

Smoking not only affects the health of the individual, but also impacts the health of those who live or are in an environment where there is on-going exposure to smoke. Second-hand smoke is a term that describes the smoke that has come from a burning tobacco product that has been inhaled by someone other than the 'active smoker' or who it was intended for. Children who live with parents that are regular smokers and those in certain occupations are some of those who experience a higher rate of second-hand smoking or passive smoking (Better Health Channel, 2017).

Alcohol Harm

Alcohol is a drug that alters the way people think, feel and behave and is both addictive and a depressant (Department of Health, 2019). There are many contributing factors to how alcohol affects people including gender, medical conditions, use of other drugs/medications, weight and age. Over consumption and binge drinking are two behaviours that pose the biggest risk to health. Long term and chronic alcohol users are more likely to develop mental health conditions, diabetes, weight gain, cancers (stomach, bowel, liver, etc.), and heart conditions, have liver failure or sustain an injury while under the influence. Unborn babies are also at risk of health conditions if their mother consumes alcohol whilst pregnant (Department of Health, 2020). Consumption of alcohol can also impact family relationships, exacerbate domestic violence as well as create financial and social stress (Department of Health, 2020).

Drinking culture in Australia is often fuelled by peer pressure and the belief that alcohol is a necessity for many social events. Young people are most at risk from the pressures to consume alcohol which could contribute to the higher rates of binge drinking from this age group (VicHealth, 2014). Men are also more likely to exceed the recommended single occasion drinking guidelines than women (Australian Bureau of Statistics, 2018).

Gambling Harm

Gambling harm is any negative consequence that comes from gambling and includes financial, relationship, health, emotional, work or cultural issues. Gambling harm can result from a person's own gambling or someone else's and leads to poorer health and wellbeing of the individual, family, community or population (Victorian Responsible Gambling Foundation, 2020). This might include:

- Financial harm: unable to pay for essential needs such as food, housing and medical supplies
- Poor mental health: increased rates of depression, anxiety and suicidal thoughts
- Social health: disruption and conflict within family relationships

• Co-morbidity: problem gamblers are more likely to excessively consume alcohol and smoke, leading to conditions previously mentioned (Victorian Responsible Gambling Foundation, 2020).

Key issues regarding the impact of gambling harm from the recent Victorian Population Gambling and Health Study (2018-19) include:

- Gambling harm increases significantly with each gambling risk category, e.g. it was reported by 29% of low-risk gamblers, 59% of moderate-risk and 100% of problem gamblers.
- Self-reported life satisfaction decreased with each gambling risk category and was lowest in problem gamblers.
- The gambling forms with the greatest population impact in relation to prevalence and source of gambling problems were electronic gambling machines (EGMs) (38%), casino table games (15%) and Keno (13%).
- Over the last ten years the internet has become the preferred method for betting, used by 78% and 35% of sports bettors and race bettors.

Moreland context

Moreland has a higher proportion of on-licence liquor premises within 400 metres of people's homes than neighbouring Local Government Areas, particularly in the southern suburbs of Brunswick, Brunswick East, Brunswick West and Coburg. Moreland also has a higher proportion of smokers than the Victorian average, with higher rates for Aboriginal Victorians, LGBTIQA+ adults and women from low-income households. There has been an increase in hospital admissions from drug use since 2009, particularly for young males, although these rates are still lower than the Greater Melbourne average.

Gambling losses from poker machines have stayed relatively stable since 2012, with approximately \$63 million lost per annum, and remains a public health issue for Moreland. The highest losses per gambling machine are hotels, not clubs, and Brunswick is the suburb with the highest gambling machine density in the municipality. Venue closures due to Covid-19 have changed gambling behaviour, with an increase in forms of online gambling, and changes to patterns of expenditure since re-opening. The ongoing impacts on all forms of gambling will need to be closely monitored in the near future.

In summary, key issues include:

- A higher proportion of smokers than Victoria
- High access to off and on-licence alcohol premises in Brunswick and Brunswick East
- Increase in hospital admissions from illicit drug use, especially for young people
- Continued high level of losses on poker machines in the municipality

Key insights

Access to alcohol outlets

- Moreland has an average number of 2.5 on-licenses within 400m. This is higher than Moonee Valley (1.9) and Darebin (2.3) but lower than Maribyrnong (2.9).
- Within Moreland, Gowanbrae (0) and Hadfield (0.1) have the lowest number of on-licenses within 400m, whereas Brunswick East (10.7) and Brunswick (6.7) have the highest.

Smoking and Tobacco Use

• In 2017, over one in ten (12.5%) of adults in Moreland smoked daily, which is consistent with the Victorian average (12.4%). An additional 6.1% of adults reported smoking occasionally.

Illicit drug use

- In the 2018-19 year there were 451 hospital admissions from drug use in Moreland. Over half of these hospital admissions were from people aged 25-29 years, and two thirds were male.
- Hospital admission rates in Moreland have increased annually for the past six years but remain lower than the average for Greater Melbourne.

Gambling rates

• Gambling expenditure in Moreland has remained relatively stable in the past six years between \$61.6-\$64.2 Million and has remained below the average for Greater Melbourne. Data for the 2019/20 year has been impacted by the closures of gambling venues due to the COVID-19 pandemic.

Access to gambling outlets

- Across Moreland there were 12 gambling venues with a total of 641 EGMs across six suburbs in 2018/19.
- Brunswick had both the highest number of EGMs (248) and the highest gambling expenditure (\$21.5 Million).

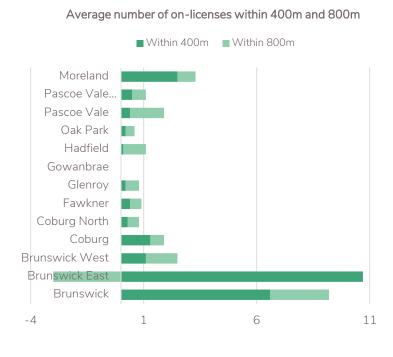
Access to alcohol outlets

Measure: Alcohol outlets within 400m

Moreland has an average number of 2.5 on-licenses within 400m. This is higher than Moonee Valley (1.9) and Darebin (2.3) but lower than Maribyrnong (2.9). Within Moreland, Gowanbrae (0) and Hadfield (0.1) have the lowest number of on-licenses within 400m, whereas Brunswick East (10.7) and Brunswick (6.7) have the highest.

Table. Average number of on-licenses within 400m and 800m.

Area	Within 400m	Within 800m
Glenroy	0.2	8.0
Gowanbrae	0	0
Hadfield	0.1	1.1
Fawkner	0.4	0.9
Pascoe Vale	0.4	1.9
Pascoe Vale South	0.5	1.1
Coburg North	0.3	0.8
Oak Park	0.2	0.6
Coburg	1.3	1.9
Brunswick West	1.1	2.5
Brunswick	6.6	9.2
Brunswick East	10.7	7.7
Moreland	2.5	3.3



Source: Australian Urban Observatory 2018

Table. Average number of on-licenses within 400m by LGA

LGA	Moreland	Moonee Valley	Darebin	Maribyrnong
400m	2.5	1.9	2.3	2.9

Source: Australian Urban Observatory 2018



PANDEMIC

Feeling anxious or stressed during the COVID-19 pandemic may have increased alcohol intake for some people (VicHealth 2020).



PRIORITY GROUPS

Women who have partners who drink excessively are more than twice as likely to experience physical abuse at the hands of a partner. Alcohol is a contributing factor to violence against women (Women's Health Victoria, 2017). Women who consume alcohol are also less likely to use alcohol and drug treatments due to fear of losing children, social stigma and the lack of gender-sensitive treatment programs (Women's Health Victoria, 2017).

Aboriginal Victorians present at emergency departments for alcohol-related causes at more than four times the rate of other Victorians (DPC 2015, in Korin Korin Balit-Djak, 2017).

Tobacco accessibility & use

Measure: People who smoke

In 2017, over one in ten (12.5%) of adults in Moreland smoked daily, which is consistent with the Victorian average (12.4%). An additional 6.1% of adults reported smoking occasionally.

Table. Proportion of the adult population smoking status and frequency in Moreland LGA compared to Victoria in 2017

Smoking status	% Moreland	% Victoria
Current smoker	18.6%	16.7%
Ex-smoker	24.5%	24.4%
Non-smoker	55.9%	58.1%

Smoking frequency	% Moreland	% Victoria
Daily smoker	12.5%	12.4%
Occasional smoker	6.1%	4.3%

Source: Victorian Population Health Survey 2017



PANDEMIC

There was a mix of both positive and negative results for smoking rates during the pandemic (VicHealth 2020). Some Victorians attempted to quit because they believed smoking would increase the severity of COVID-19 if they were to contract the virus and many wanted to save money due to job loss of financial uncertainty (VicHealth, 2020).



PRIORITY GROUPS

Women with lower levels of education or from low-income households have higher rates of smoking compared to other women. Tobacco usage in women has the same health outcomes as men, however, women are exposed to additional risks such as smoking while pregnant (impact on child), smoking while taking an oral contraceptive and increased risk of cervical cancer (Women's Health Victoria 2017).

LGBTQIA+ adults have higher daily smoking rates compared to non-LGBTQIA+ adults, these rates are 17.8% and 12.3%, respectively (Victorian Agency for Health Information 2017).

Tobacco use by Aboriginal people in Victoria aged over 18 years is more than three times the rate of non-Aboriginal people (Korin Korin Balit-Djak 2017).

Smoke-free environments

Measure: Environments in Moreland that are smoke-free

Smoke free areas in Moreland include those that are mandated by the Victorian Tobacco Act 1987. Exposure to second-hand smoke is known to increase the risk of numerous health problems, particularly among young children. Reducing exposure to second-hand tobacco smoke by implementing smoke-free areas provides the community with protection from the harmful effects of second-hand smoke (Department of Health and Human Services, 2020). Council may prescribe designated smoke free environments under Part 4 of the General Local Law 2018.

Use of illicit drugs

Measure: Hospital admissions from illicit drug use

In the 2018-19 year there were 451 hospital admissions from drug use in Moreland. Over half of these hospital admissions were from people aged 25-29 years, and two thirds were male. Hospital admission rates in Moreland have increased annually for the past six years but remain lower than the average for Greater Melbourne.

Table. Total number of hospital admissions from illicit drug use for the year 2018-19

Year	Hospitalisation rate from illicit drug use		
	Moreland	Greater Melbourne	
2018/19	24.8	33.6	
2017/18	23.1	26.1	
2016/17	22.7	28.8	
2015/16	22.6	27	
2014/15	18.1	24.8	
2014/13	12.6	18.7	

Hospitalisation rate from illicit drug use

Moreland Greater Melbourne

35
30
25
20
15
10
5
0
2014/13 2014/15 2015/16 2016/17 2017/18

Source: AOD Stats 2019

Table. Total number of hospitalisations by age and by sex

Age	Hospitalisations from illicit drug use	%
0-14 years	No data	-
15-24 years	98	21.7%
25-39 years	229	50.8%
40-64 years	108	23.9%
65 years +	No data	-
Total	451	100%

Sex	Hospitalisations from illicit drug use	%
Male	296	65.6%
Female	155	34.4%
Total	451	100%

Source: AOD Stats 2019



PANDEMIC

The trends and patterns of illicit drug use have changed since the pandemic lockdowns began. Rates of usage for some illicit drugs increased (cannabis increased usage 57%) for prior users however rates of usage for some other illicit drugs also decreased (cocaine, MDMA and ketamine) (Australian Institute of Health and Welfare 2020).



PRIORITY GROUPS

In 2019, 2 in 5 (40%) people who identify as LGBTQIA+ recently used illicit drugs (Australian Institute of Health and Welfare 2020).

Gambling rates

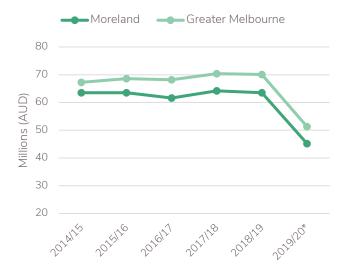
Measure: Gambling expenditure

Gambling expenditure in Moreland has remained relatively stable in the past six years between \$61.6-\$64.2 Million and has remained below the average for Greater Melbourne. Data for the 2019/20 year has been impacted by the closures of gambling venues due to the COVID-19 pandemic.

Table. Historical Yearly (2010-2020) EGM LGA Expenditure Data (Moreland LGA).

*Gambling venues across Victoria have been closed since 16 March 2020 to slow the spread of coronavirus. Gambling expenditure data published during that time reflects these closures (VCGLR).

Year	Yearly expenditure (Millions)		
	Moreland	Metropolitan Melbourne (Avg)	
2019/20*	\$45.2	\$51.3	
2018/19	\$63.5	\$70.1	
2017/18	\$64.2	\$70.4	
2016/17	\$61.6	\$68.2	
2015/16	\$63.5	\$68.6	
2014/15	\$63.5	\$67.3	



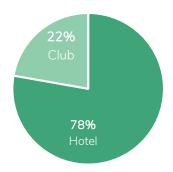
Source: Victorian Commission for Gambling and Liquor Regulation

Table. Player loss & adult gambling rates per machine & venue

Year	Total player loss (Millions)	EGMS per 1,000 adults	Adults per venue
2019/20*	\$45.2	-	-
2018/19	\$63.5	4.24	12,610
2017/18	\$64.2	4.43	12,252
2016/17	\$61.6	4.54	11,837

Source: Victorian Commission for Gambling and Liquor Regulation

Expenditure by Venue Type in Moreland (2018/19)





PANDEMIC

Before closures due to the COVID-19 pandemic, the rate of people who gambled four or more times a week was 23%, this number has risen during the pandemic to 32%. The survey identified that 79% of participants were classified as being at risk, or currently experiencing gambling-related harm. (Australian Gambling Research Centre 2020).

Access to gambling outlets

Measure: EGMs (Electronic Gambling Machines) per suburb

In 2018/19 there were 12 gambling venues with a total of 641 EGMs across six Moreland suburbs: Brunswick, Brunswick East, Coburg, Fawkner, Glenroy, and Pascoe Vale.

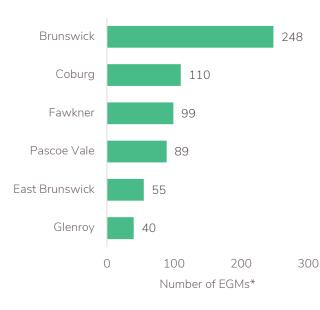
Brunswick had both the highest number of EGMs (248) and the highest gambling expenditure (\$21.5 Million).

The following suburbs of Moreland are capped on number of EGMs where the density has been highest: Brunswick, Brunswick East, Brunswick West, Coburg, Coburg North, Fawkner, and Fitzroy North. The Maximum permissible number of gambling machine entitlements in this area is: 551 (as determined under section 3.4A.5(3A). The remainder of the municipality is capped under a 'municipal district' and the maximum number of Moreland's remaining parts is: 514.



*'EGM Numbers' are defined as the average number of operating EGM's at the gaming venue during the month. This figure is consistent with the average entitlement applied to the EGM as per tax calculation (VCGLR).





Expenditure by suburb in Moreland 2018/19





PANDEMIC

The closure of gambling and pokies venues did have an immediate benefit for some who gamble, particularly those who are not online gamblers. However, there was an increase in those who signed up to an online betting platform during the pandemic and a rise was seen in the amount of people who started to gamble online (Australian Gambling Research Centre 2020).

Data Sources

For a full list of references, please refer to the Moreland Health & Wellbeing Profile 2020

AODstats Turning Point Data

AODstats provides information on the harms related to alcohol, illicit and pharmaceutical drug use in Victoria using a wide range of data sources. Data includes emergency presentations, hospital admissions, deaths, service treatment episodes, telephone and online counselling services, serious road injuries and assaults and domestic violence incidents.

The most recent data is 2018/19.

Australian Gambling Research Centre 2020

The Australian Gambling Research Centre (AGRC) provides high quality, evidence-based publications and resources for policymakers, researchers and professionals in the area of gambling. The most recent data is 2020.

Australian Institute of Health and Welfare: Alcohol, Tobacco & Other Drugs Australia 2020

This report consolidates the most recently available information on alcohol, tobacco and other drug use in Australia, and includes key trends in the availability, consumption, harms and treatment for vulnerable populations.

The most recent data is 2020.

Australian Urban Observatory

The Australian Urban Observatory is a digital platform that transforms complex urban data into easily understood liveability maps across Australia's 21 largest cities. The Observatory maps key liveability indicators found to be associated with health and wellbeing, and provides a clear understanding of the liveability of cities.

The most recent data is 2018.

Department of Health and Human Services 2020

Victorian State Government evidence-based guidance to assist partners in the implementation of actions to reduce tobacco-related harm across a range of settings.

Korin Korin Balit-Djak: Aboriginal health, wellbeing and safety strategic plan 2017-2027

Korin Korin Balit-Djak follows the government's commitment to self-determination for Aboriginal Victorians commissioned by the Department of Health and Human Services. This research and discussion has underpinned a new policy platform for health, wellbeing and safety.

VicHealth Coronavirus Victorian Wellbeing Impact Study 2020

A survey of 2,000 Victorian adults to explore how their health and wellbeing was affected during the first lockdown of 2020. The survey covered general wellbeing, social connection, healthy eating, physical activity, financial hardship, smoking, alcohol consumption, as well as working and home life. The most recent data is from 2020.

Victorian Agency for Health Information 2020

Safer Care Victoria and VAHI were created as a part of government reforms to improve quality and safety across Victoria's public healthcare system.

Victorian Commission for Gambling and Liquor Regulation

The Victorian Commission for Gambling and Liquor Regulation (VCGLR) is the independent statutory authority that regulates Victoria's gambling and liquor industries.

Released monthly on the fourth Friday of each month, this data set provides information relating to the various local government areas (LGAs) throughout Victoria, primarily the region classification, total gambling expenditure and the number of electronic gambling machines (EGMs) and gambling venues per LGA.

Victorian Population Health Survey

The Victorian Population Health Survey has been conducted each year since 2001 and is based on a random sample of adults aged 18 years and over. The Survey is administered using computer-assisted telephone interviews. In 2017, the sample was expanded to approximately 34,000 respondents to allow for the reporting of analysed data at the local government area level.

Women's Health Victoria 2017

Women's Health Victoria is a state-wide women's health promotion, advocacy and support service, applying a gendered approach to health that reduces inequalities and improves health outcomes for Victorian women.