



From us all at Alcohol Healthwatch

The waiting is finally over.....

The Alcohol Reform Bill passed its third and final reading in Parliament on 11th December 2012, putting our new liquor laws in place.

For the many New Zealanders who have called for alcohol law reform, the passing of the Bill will be met with relief.

Alcohol Healthwatch Director Rebecca Williams says, "We've pretty much known what the outcome of these final stages of the Parliamentary process would be, and that moves to strengthen the legislation by opposition parties would be thwarted. A lot of people have already moved on and started to look at how the new rules can be maximised."

Williams says the new legislation is far from ideal and communities will have to work jolly hard if they are to harvest any safety gains from it. "It has been harrowing to watch the already weak Bill get even further whittled away after the public submission process was over. Alcohol and supermarket interests have certainly influenced the outcomes despite the clear public support for stronger measures.

"The Government has backed down on requiring supermarkets to keep alcohol in one non-prominent area of the store. Now up to 3 "sub-areas" can be used. They've also backed down on plans to regulate the alcohol content of Ready to Drinks (RTDs) or to regulate

where they can be sold, leaving this in the alcohol industry's hands to self-regulate."

..... Or is it?

The 12 month lag time before key elements of the new law, such as Local Alcohol Policies, can be implemented will cause further frustration for a lot of people.

Although the Government has failed to take opportunities to reduce the affordability and marketing of alcohol, these issues will remain on the policy agenda.

What were they thinking?

In August, the Government backed down on its plan to regulate the alcohol content of ready-to-drinks (RTDs) in favour of industry self regulation.

Evidence clearly shows that industry self-regulation doesn't work. By way of example, just look at how the industry has responded to a request made last year by New Zealand and Australian Food and Health Ministers for them to voluntarily introduce health warnings on alcohol. The Ministers gave the industry two years to do so.

At the time DB Breweries flatly refused to participate in voluntary labelling.

An independent audit* of 250 alcohol products carried out in Australia recently found that:

- Only 16% carried the industry 'consumer information' messages.
- Most of the messages took up less than 5% of the label, many were only 1-2% of the label.
- Of products carrying the industry label most (59%) were at the back of the product.

- The labels were inconsistent and lacked uniformity.
- Most labels simply referred consumers to an industry website to “get the facts”.

Auditors also found examples of the industry using this process to further promote their brand, rather than provide any substantial health warning, such as a vodka brand including the message “Enjoy with Absolut Responsibility”.

*www.fare.org.au

Aussie’s Action on FASD



It’s full steam ahead for addressing Fetal Alcohol Spectrum Disorder (FASD) in Australia!

FARE example of health warning

The Foundation for Alcohol Education and Research (FARE)

together with experts in FASD from across Australia launched the Australian FASD Action Plan at Parliament House, Canberra in September 2012. The plan covers the prevention continuum and calls on the Commonwealth Government to fund the plan which is estimated to cost \$36 million over the next 3 years.

In the same month, the Education and Health Standing Committee of the West Australian (WA) Parliament released its findings and recommendations into FASD prevention and intervention, including calling for financial commitment to the 2010 Child and Youth Health Network FASD Model of Care. The WA report makes explicit the deficits in how FASD is being addressed and recommends changes that would contribute to its prevention, and more fairly represent and treat FASD as a disability.

These two important pieces of work pre-empt a report from a Commonwealth Parliamentary Inquiry into FASD by the Social Policy and

Legal Affairs (SPLA) Committee. Their report, *FASD: A Hidden Harm*, was tabled in Canberra in November 2012.

What all three Australian reports have in common is an urgent call for FASD to be addressed, and a strong and united call to require all alcohol products to carry a consistent and visible health warning.

Currently some within the alcohol industry are claiming great success of a voluntary scheme that is adding small, obscure and misleading health messages to alcohol containers in the hope of averting Government regulation. However the SPLA Committee concluded that the current regulation and voluntary programs are not working and are unlikely to ever do so given the commercial realities of the alcohol industry.

The SPLA Committee recommends: *that the Commonwealth Government mandate a health advisory label advising women not to drink when pregnant or when planning a pregnancy to be included on the packaging of all pregnancy and ovulation testing kits. These labels should be in place by 1 October 2013.*

The Committee further recommended: *that the Commonwealth Government seek to include health warning labels for alcoholic beverages, including a warning label that advises women not to drink when pregnant or when planning a pregnancy, on the Legislative and Governance Forum on Food Regulation’s (FoFR) December agenda.*

The FoFR was held in Brisbane on 7 December. It is not yet known whether these recommendations were considered.

Links to these reports can be found on the FARE website <http://www.fare.org.au/> the website www.parliament.wa.gov.au and the [Social Policy and Legal Affairs Committee website](#)

Alcohol Marketing to Young People... More Aussie Action!

The Australian Medical Association (AMA), in association with the 70 member National Alliance for Action on Alcohol (NAAA), held a National Summit on *Alcohol Marketing to Young People* at Parliament House in Canberra on the 19th September, 2012.

Leading public health, NGOs, law enforcement bodies, youth associations and experts in alcohol met to discuss the problem of young people and children being exposed to alcohol marketing (including social media), and the policy and legislative reforms needed to curtail this.

The AMA also released a major report at the Summit: *Alcohol Marketing and Young People: Time for a new policy agenda*. In this report, the AMA has recommended eleven measures to curtail the exposure of children and young people to alcohol marketing.

These measures include: statutory and independent regulation of alcohol marketing and promotion; meaningful sanctions for serious and persistent non-compliance with marketing regulations; phasing out alcohol sponsorship of sport; banning alcohol sponsorship of youth, cultural and musical events; regulating the volume or amount of alcohol marketing, and its content and expanding the regulations to incorporate point-of-sale promotions, branded merchandise, and new media and digital marketing; mandating the public disclosure by leading alcohol companies of their annual expenditure on marketing; continuing research into the extent and impact of online and digital marketing and the effectiveness of different regulatory approaches to this form of marketing; developing options for a cross-border, international response to alcohol marketing; building the critical media literacy of young people through health education; and incorporating the prevention of alcohol

marketing to young people as part of a comprehensive and multi-faceted strategy to address alcohol-related harms in Australia.

As a crucial first step in establishing this regulation, the AMA and NAAA have called on the Australian Government to establish a Parliamentary Inquiry to canvas these options.

For more information and to download the report visit <http://ama.com.au/node/8188>.

International Action on Price

The Australian Federal Government's National Preventative Health Agency is currently seeking public feedback on their proposal that a 'floor price' and new taxes be calculated as a way to make alcohol more expensive. The Agency will make their final recommendations to Federal Mental Health Minister Mark Butler in December.

Earlier this year Scotland passed legislation for implementing a minimum price of 50p a unit. However, the Government there are currently facing a legal challenge from the alcohol industry in relation to the new policy.

In England and Wales, The Department of Health and the Public Health Directorate have proposed a minimum price of 45p a unit for the sale of alcohol, and discussions by Government's Drug and Alcohol Strategy Group are currently underway. A 10-week consultation period for the proposed minimum price is underway.

Northern Ireland is also considering minimum pricing, while Isle of Man health officials have also proposed a minimum price of 50p a unit for the sale of alcohol.

Recent Canadian research has again demonstrated the benefits of minimum pricing. The research found that a 10% increase in minimum prices reduced consumption of beer by 10.06%, spirits by 5.87%, wine by 4.58%, and all beverages

combined by 8.43%. Consumption of coolers (Ready-to-drinks) decreased significantly by 13.2%, cocktails by 21.3%, and liqueurs by 5.3%.

Consumption of higher strength beer and wine declined the most. A 10% increase in minimum price was associated with a 22.0% decrease in consumption of higher strength beer (>6.5% alcohol/volume) versus 8.17% for lower strength beers.

The study was carried out using alcohol sales and price data from the Saskatchewan Government alcohol monopoly for 26 periods before and 26 periods after new and increased minimum alcohol prices were introduced. The authors conclude that pricing that reflects alcohol content of drinks can shift consumption towards lower alcohol content beverage types and that minimum pricing is a promising strategy for reducing the public health burden associated with hazardous alcohol consumption.

Stockwell T., Zhao J., Giesbrecht N., et al. The raising of minimum alcohol prices in Saskatchewan, Canada: impacts on consumption and implications for public health. American Journal of Public Health: 2012, 102(12),p. e103-e110.

Deflect, delay and divert

The alcohol industry launched a so called 'social change' initiative called the *Tomorrow Project* in Auckland on the 21st November 2012.

Alcohol Healthwatch Director Rebecca Williams says it is nothing short of a desperate public relations exercise, and an attempt to delay the inevitable.

Williams says the global alcohol industry is fearful of any measures to control price and marketing or otherwise limit their access to markets. When Governments try to implement such measures, alcohol industry groups threaten legal action and offer these ineffective programmes as alternatives.

Williams says, "We know what will reduce alcohol-related harm and it isn't industry self-regulation and spin doctoring."

Governments across the world need to resist alcohol industry pressure and implement the measures set out in the Global Strategy to Reduce the Harmful Use of Alcohol. New Zealand's blueprint for change lies in the Law Commission's final report on their review of the regulatory framework for the sale and supply of liquor.

2013 Here we come

The Alcohol Healthwatch team would like to thank all of our colleagues and supporters for your contributions over the year.

We're preparing for the release of two new Policy Briefing Papers: *Alcohol, Injuries and Violence* and *Women and Alcohol in Aotearoa/New Zealand* early in the New Year.

We are also planning for a series of community workshops aimed at building understanding of the new alcohol legislation.

With lots of other exciting things on the agenda we are looking forward to 2013.

Until then we wish you all a safe and happy holiday.

Rebecca, Christine, Amy, Raj and Suzanne


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