



**A L C O H O L
H E A L T H W A T C H**

Briefing Paper
2004

The Sale of Liquor in New Zealand

Recommended Changes to the Act

This Alcohol Healthwatch policy briefing paper contains information on:

- Arguments for and against reinstating a minimum purchase age of 20 years
- Section 160: Purchasing liquor for minors
- Mandatory age verification
- Designating off-licences
- Training for staff selling and serving alcohol
- Local government planning for licensed premises
- Controlling patron numbers in on-licensed premises
- Enforcement of the Act

This paper is one of a set of 5 that includes:

- Changes to Excise Tax for Alcohol
- Health & Safety Advisory Statements for Alcohol Containers
- The Advertising of Alcohol - In Support of Increased Restrictions
- Reduction of Blood Alcohol Concentration for Driving
- **The Sale of Liquor in New Zealand – Recommended Changes to the Act**

These documents can be viewed on the Alcohol Healthwatch website: www.ahw.co.nz

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Executive Summary

The Sale of Liquor Act

- The object of the Sale of Liquor Act 1989 is to *establish a reasonable system of control over the sale and supply of liquor to the public with the aim of contributing to the reduction of liquor abuse, so far as that can be achieved by legislative means.*
- Ensuring a robust Sale of Liquor Act (SOL Act) that keeps pace with a changing social environment requires that the Act be frequently reviewed. Amendments must maximise the Act's potential to reduce alcohol-related harm without unnecessarily infringing on the freedoms of the individual.
- The 1989 SOL Act greatly liberalised the alcohol environment in New Zealand, removing the criteria of community 'need' that effectively restricted the density of outlets and allowed wine sales in supermarkets. The most recent amendments in 1999 continued this liberalisation, allowing Sunday trading, beer in supermarkets, and a purchase age of 18 years. Although legitimate forms of age verification were established, it was not made mandatory for these to be requested. Host responsibility requirements on licensees were strengthened at this time.

Youth Drinking

- While our own trends in youth drinking are not vastly different to those of comparable countries, statistics from the past decade in New Zealand confirm that there is a worrying trend for young people who drink to be drinking more heavily and more frequently at an earlier age. One quarter of 14 to 17 year olds are currently drinking heavily (ALAC, 2003).
- Early onset of drinking is associated with increased risks to the individual as well as high economic and social costs. There is strong evidence that early, regular drinking correlates both with immediate adverse effects of intoxication, injury, high risk sexual activity and violence, and with longer term effects including alcohol dependency and loss of opportunity.
- New Zealand has some of the worst statistics in the OECD for youth suicide, drug use, teenage pregnancy and motor vehicle accidents (Watson, 2001). The involvement of alcohol in all of these is well established.

Impact of Sale of Liquor Act Changes

- The 1999 SOL Act Amendments were designed to simplify the Act and improve its enforceability, with the intention of creating "a hard 18". However there has not been sufficient commitment to increasing and prioritising enforcement resources to enable this to happen.
- Alcohol use takes place in a social, cultural and community context (Babor et al. 2003). The combined effect of a liberalised licensing environment and a lowered purchase age

for alcohol from 20 to 18 years in recent amendments to the Sale of Liquor Act, has been one of increased access to alcohol for young people. The past decade has also seen a greatly liberalised alcohol advertising environment and *the young have become an important target for marketing alcoholic products* (WHO Director General, 2001). It is highly likely that these changes have contributed to the increases in youth drinking.

- Efforts to measure the health and social impacts of lowering the minimum purchase age for alcohol in New Zealand, and thus inform the policy debate, have been hampered by a lack of high quality benchmarking data to explicitly measure the impact of the law change. While available statistics have shown diverse trends (Lash, 2002), they also suggest that lowering of the purchase age has been accompanied by increased frequency of drinking and amount of alcohol consumed by young drinkers (Habgood et al. 2001). This picture of increased drinking and subsequent adverse effects on young people is supported by other New Zealand research.
- There is also considerable anecdotal evidence from those who work in close contact with young people of increased levels of drinking since the purchase age was lowered, as illustrated by frequent media reports of intoxicated 11 to 13 year olds.

Alcohol Healthwatch believes the following changes to the Sale of Liquor Act would significantly reduce access to alcohol and subsequent alcohol-related harm to young people:

Returning the Minimum Purchase Age to 20 Years

- The weight of international evidence indicates that, compared with a wide range of other strategies, an increase in minimum purchase age is one of the most effective measures to reduce youth drinking (Babor et al. 2003; Holder, 2003; Wagenaar et al. 2002; WHO, 2002).
- Reinstating a minimum purchase age of 20 years would both reduce access to alcohol by young people, and give a strong social message about the risks associated with alcohol use. In doing so, it would assist in delaying the onset of regular drinking. It is an essential part of a mix of strategies which, especially when collectively implemented, will reduce the social and economic cost of alcohol-related harm in New Zealand.

Changes to Section 160: Purchasing Liquor for Minors

1. Minors and alcohol at private social functions

- Section 160 (3) (d) of the Sale of Liquor Act allows minors to be supplied with alcohol at a private social function by someone other than their parents or guardians. This exemption creates considerable confusion for the public, especially parents, and makes prosecution for irresponsible supply difficult. This exemption needs to be removed from the Act, so that only parents or legal guardians are able to supply those under 18 years with liquor.

2. *Removal of the need to prove intention to supply.*

- The need to prove that liquor was purchased with the intention of supplying it to minors makes many circumstances where alcohol is purchased then supplied to underage young people difficult to prosecute. This clause needs to be reworded so that every person, other than a legal parent or guardian, who supplies liquor to any person who is under legal purchase age, commits an offence.

3. *Requiring supervision of minors supplied with alcohol*

- The current act does not specify that the parent or guardian, when supplying liquor to their underage children, remain present to ensure the alcohol they supply is consumed responsibly.
- Alcohol Healthwatch calls for debate and further research on the possibility of amending Section 160 so that under 18 year olds may be supplied liquor by a parent or guardian only for consumption under supervision by that parent or guardian.

Together these amendments to Section 160, even if the current purchase age of 18 years was retained, would considerably strengthen the SOL Act by creating an environment whereby the only situation where under 18 year olds would be legally allowed to drink alcohol, would be under the supervision of their legal parent or guardian.

Mandatory Age Verification

- Vigorous enforcement of the minimum purchase age is essential to achieve a decrease in drinking by underage young people. Results of controlled purchase operations and age verification studies have confirmed that the rate of ID checking is inadequate. Many underage young people are likely to be purchasing alcohol themselves or accessing it from other young people.
- The policy held by some liquor outlets to check the age of all young looking people needs to be supported in law. This would ensure that age verification is enforceable and nationally consistent. The Sale of Liquor Act should therefore be amended to require all licensees to ensure that any person appearing to be under the age of 25 years produces an evidence of age document when attempting to enter age restricted premises or purchase alcohol.

Designation of Off-Licensed Premises

- Off-licences are an important source of alcohol for under-age young people (Habgood et al. 2001). Designating stand alone bottle stores as ‘supervised’ areas, allowing minors to enter only with a parent or guardian, would help prevent off-licence sales to minors and assist policing.
- The Liquor Licensing Authority has recommended in its 2002 report to Parliament that bottle stores become ‘restricted’ or ‘supervised’ areas. *“There could then be no suggestion that minors were permitted in bottle stores.”*

Mandatory Staff Training

- It is a new requirement in the SOL Act for managers to receive training, but there is no requirement that this training is passed on to staff. Training for all staff serving or selling liquor can reduce underage sales and intoxication levels. Staff, other than licensees or managers, who sell or supply liquor on or from licensed premises to underage persons are currently liable to a fine of up to \$2,000. A similar fine applies if they sell to intoxicated persons. Yet there is no requirement that they be trained in avoiding these situations.
- The steps proposed to be taken by a licence applicant in relation to training staff should be assessed alongside their host responsibility proposals in the SOL Act criteria for consideration of licence applications.

Changes to the SOL Act are also required to increase the role of communities and local authorities in liquor licensing decisions:

Increasing the Roles of Local Government and Communities in Planning for Licensed Premises

- The current Sale of Liquor Act allows nearby residents no grounds to object to a licence being granted based on the suitability of the premise location and concerns about its effects on a particular neighbourhood.
- As part of addressing this issue, the SOL Act should be amended to allow the licensing authorities to have regard to neighbouring land use, not just in relation to setting trading hours, but in relation to whether a particular licence is desirable for the community.
- Extending the required public notification procedures in the SOL Act to include direct notification of all residents, businesses and community organisations within a certain vicinity of the premises would help to ensure that community members are aware of proposed new licences and renewals in their areas and able to respond within a reasonable time.
- There is clear international evidence that density of alcohol outlets has a positive correlation with alcohol consumption and alcohol-related harm including alcohol-related traffic injury and violent crime. Improved control over the number of premises is therefore an important measure to reduce harm resulting from alcohol misuse.
- A requirement for local authorities to develop a policy on the sale of liquor, including a policy on density and location of licensed premises, should be incorporated into the SOL Act. Such a policy, developed in close consultation with the community, would guide planning for licensed premises and local government implementation of the SOL Act in such a way as to maximise the reduction of liquor abuse. Criteria for assessing new licences could then be required to have regard to this policy.

A further amendment to the SOL Act is required to support the work of the New Zealand Fire Service:

Controlling Patron Numbers on On-Licensed Premises

- Currently there is no method of easily determining the number of patrons that are allowed on premises.
- The Sale of Liquor Act should be amended so that the number of patrons allowed on the premises, as determined by fire safety recommendations, is clearly stated on the liquor licence.

Improved Enforcement

- Rigorous enforcement of liquor laws is essential to reduce underage drinking and intoxication – this needs to be reflected in the resources directed to enforcement at all levels. Expectation of prosecution or loss of licence is an important component in ensuring compliance with the SOL Act, and well-publicised cases have an important deterrent effect. Consistency and use of penalties available is important in improving compliance.
- Licensing police must be sufficiently resourced to carry out controlled purchase operations and prepare cases. Greater resources and priority must be directed to this area of policing.
- Increasing resourcing and training of District Licensing Agency staff within local councils is important to ensure they can perform routine duties as well as targeted monitoring and enforcement.

Wider Change to Alcohol-Related Legislation Needed

- In its Action on Liquor Legislation Campaign, Alcohol Healthwatch has identified five areas in New Zealand's liquor legislation that require change to create a more effective legislative environment for reducing alcohol-related harm. The amendments to the Sale of Liquor Act recommended in this paper will be most effective when implemented as part of a comprehensive strategy that includes strengthening in all these areas.

Section 1

YOUNG PEOPLE AND ALCOHOL

As many of the proposed amendments relate to youth access to alcohol, this section summarises some of the recent surveys of youth drinking in New Zealand.

1.1 Youth and Alcohol Trends in New Zealand

In New Zealand, as in many developed countries, hazardous drinking by teens is a serious public health issue (Habgood et al. 2001).

In 1990, the number of drinks consumed by 14-19 year olds on a typical occasion was 3 to 4; by 1999 this had increased to an average of 5 to 6 drinks (Casswell and Bhatta, 2001). The frequency of drinking enough to feel drunk increased in this period amongst drinkers of all ages, however the increase was more marked in drinkers 14-19 years old.

2003 ALAC Youth Drinking Monitor (Kalafatelis et al. 2003) This annually conducted survey looks at drinking patterns in a national sample of 626 youth aged 12-17 years, allowing drinking trends in young people to be measured. It shows that a high prevalence of risky drinking exists in this age group:

A high proportion of 14-17 year olds drink regularly and heavily:

- 25 percent of all 14-17 year olds meet ALAC's criteria for 'heavier drinkers'.
- 48 percent of current 14-17 year old drinkers claim to have drunk 5 or more glasses on at least one occasion in 2 weeks prior to the survey (a significant increase on the 35 percent who did this in 2002).
- However, the percent of 14-17 year olds who currently drink at least once a week decreased from 29 percent in 2002 to 20 percent in 2003.

The age at which young people report 'really starting drinking' is becoming younger:

- 42 percent of all 14-17 year olds (significantly up from 34 percent the previous year) said that they first started really drinking under 15 years.
- 30 percent of 12-13 year olds surveyed claimed they had ever drunk 5 or more drinks on one occasion (these results are only indicative due to a small sample size).

Accessing alcohol:

- 67 percent of underage young people purchasing alcohol said they were always or mostly successful.
- Key sources of alcohol for 14-17 year olds are parents (identified as most frequent source by 50 percent of the sample) and friends over 18 years (29 percent).

Maori and Pacific youth are particularly at risk:

- Both Maori and Pacific are significantly more likely than other ethnic groups to drink 5 or more glasses on their last drinking occasion (48 percent of Maori in the sample did this and 45 percent of Pacific young people, compared with 30 percent of 'other' ethnic origin).
- 29 percent of 14-17 year olds current drinkers of Pacific origin reported drinking 10 or

more glasses on their last drinking occasion (21 percent for Maori youth, 10 percent for youth of 'other' ethnic origin).

Risky behaviour:

- 36 percent of 14-17 year olds, 27 percent of 12-13 year olds, and 50 percent of heavier drinkers agreed they are more likely to engage in sexual activity following drinking.

Drinking in New Zealand – National Surveys Comparison (Habgood et al. 2001) This survey of over 5,000 New Zealanders compared drinking patterns, problems and issues in 1995 with those of 2000:

- 18-19 year olds increased quantities consumed on a typical occasion from 5 to 7 drinks. The increase was particularly marked among women.
- 16-17 year olds drank more often and increased typical consumption from 4 to 7 drinks.
- 14-15 year olds increased frequency of drinking and increased consumption from 3 to 5 drinks per typical occasion.
- There was a marked increase in the proportion of 16-17 year old women experiencing 5 or more problems due to drinking (from 14 percent in 1995 to 30 percent in 2000).
- The belief that "it's okay to get drunk now and again" showed changes in a liberal direction, with greater agreement especially among women and 14-15 year olds.

Drug Use in New Zealand National Surveys Comparison A survey comparing information from 1998 and 2001 found that the proportion of women who drank 4 drinks or more in one sitting at least once a week increased from 15 percent in 1998 to 28 percent in 2001 (Wilkins et al 2002). An increase was also seen amongst young men aged 15-17 years old who drank enough to feel drunk at least monthly, from 43 percent in 1998 to 58 percent in 2001. The findings are consistent with the 2000 Drinking in New Zealand Survey mentioned above.

New Zealand Youth Survey (Adolescent Health Research Group, 2002) This recent study of 9570 New Zealand secondary school students found that 19 percent of all males and 15 percent of all females reported weekly alcohol use, with a trend for increasing weekly consumption as age increased. More than a third of students reported an episode of binge drinking in the previous 4 weeks. An alarming finding of this study was that 27 percent of students reported riding in a car with a potentially drunk driver in the last 4 weeks.

Te Ao Waipiro 2000 Maori National Alcohol Survey (Moewaka Barnes et al. 2003) A national survey of 1992 people aged 13-65 years who identified as Maori found that 35 percent of 13 year olds and 69 percent of 14-15 year olds were drinkers; that is, they had consumed alcohol in the previous 12 months. Eighty-seven percent of respondents agreed that drinking by teenagers was a problem in their community and 41 percent thought the laws on selling alcohol to those under 18 were not adequately enforced.

1.2 What Are the Consequences of Young People Drinking?

It is well established that early onset of drinking has significant implications for health, both in terms of short-term outcomes, as well as a range of alcohol-related problems in later years (ALAC, 2002).

Short-term consequences

Young people are particularly vulnerable to the adverse effects of drinking, both through their greater risk taking behaviour and relative inexperience with alcohol.

Short-term consequences from episodic heavy drinking include: injury or death from drink-driving crashes, injury from assaults and falls while intoxicated, violence, high risk sexual activity and consequences, alcohol poisoning, increased risk of suicide, substance abuse and decreased scholastic and work performance.

Consuming more than 5 drinks on an occasion is also known to be associated with increased risk of fighting, truancy, and involvement in criminal activities such as theft, burglary and assault (Wechsler et al. 1999).

New Zealand adolescents have rates of pregnancy, drug and alcohol abuse, suicide and self-harm that are among the highest in the western world (Watson, 2001).

The most common cause of death in young people aged 12-19 years old in New Zealand is injury from motor vehicle accidents, followed by suicide (Ministry of Health, 2002). In youth aged 20-24 suicide is the leading cause of death, followed by fatal injury from motor vehicle accidents. Available data and studies show that alcohol is a major cause of these deaths. In 2001 alcohol contributed to 26 percent of all fatal crashes, and 14 percent of all injury crashes (Land Transport Safety Authority, 2002). A recent New Zealand review indicated that 29 percent of young people had evidence of alcohol consumption at the time of their suicide attempt or at the time of presentation (Bennett, 2002).

Other alcohol-related ill-effects include: mental health problems, sexual harassment, alcohol-related family violence, depression and loss of opportunity due to alcohol abuse.

Longer-term harm

Early onset of drinking has been found to be a risk factor for a life time of alcohol-related problems (Chou and Pickering, 1992).

Access to alcohol at ages 15-18 years has been found to be a significant predictor of amounts drunk and adverse consequences at later ages (Casswell and Zhang, 1997; Casswell, Pledger and Pratap, 2002).

Longer-term physical harm associated with drinking includes future dependence, liver disease, increased risks of some cancers including breast cancer, fetal alcohol syndrome and hypertension.

All of these alcohol-related harms represent on-going costs to society.

Section 2

THE MINIMUM PURCHASE AGE FOR ALCOHOL

2.1 Youth Drinking and the Minimum Purchase Age in Comparable Countries

Regular drinking, and in particular binge drinking, in young people is not only a local problem but a widespread and growing problem internationally. Influenced by changing social structures as well as by the mass media through increasingly sophisticated advertising, alcohol has become an integral part of a youth culture that transcends national boundaries.

Increased binge drinking in young people is being reported in several European countries, including Mediterranean countries where intoxication has not traditionally been a large part of the drinking culture.

There is a range of age limits on alcohol purchase and consumption throughout the world. Australia and the majority of Europe has an 18 year minimum purchase age, although in France and Spain the age limit is 16. USA has an age limit on alcohol consumption of 21 years. Some countries differentiate on the basis of alcohol content. Norway, for example has a minimum purchase age of 18 for beer and wine and 20 for spirits. Some, like New Zealand, allow parents/guardians to purchase alcohol for their children.

The drinking frequency of 15 and 16 year-olds in 21 European countries and the United States was compared in a study by Grube (2001) to determine whether young people from Europe, where drinking age laws and attitudes are more liberal, drink more responsibly than young people from the USA.

In comparison with young people in the USA, a greater percentage of young people from nearly all European countries report drinking in the past 30 days, and drinking more on a typical occasion. The authors of this study concluded that there is no evidence that more liberal policies of Europe are associated with lower levels of intoxication, and that the study supports the maintenance of the current minimum drinking age of 21 years in the US.

Some examples of prevalence of drinking and heavy drinking are given below:

**International Comparisons of Drinking and Heavy Drinking Prevalence
Among Young People 15-16 Years (1995 data)**

Country	Age Limit	Prevalence of drinking in past 30 days	Prevalence of intoxication in past 30 days
US	21(consumption)	39 percent	20 percent
Denmark	15, 18	81 percent	58 percent
UK	18	73 percent	47 percent
Sweden	18, 20	53 percent	40 percent
Italy	16	65 percent	18 percent

By way of some comparison with our own statistics from the ALAC Youth Drinking Monitors; in 1998 (when the minimum purchase age was 20 years) 21 percent of 14-17 year olds reported

having had a least one risky drinking occasion (5 or more glasses) in the last 2 weeks. This figure rose to 32 percent in 2001 and 29 percent in 2002 (Kalafatelis, 2002). Twenty-four percent of the US sample of 10th graders reported having 5 or more drinks on an occasion in the 2 weeks prior to the study (1995 data).

Drinking patterns among youth in Europe recently led to Eurocare, an alliance of non-government organisations involved in alcohol policy, to recommend that:

“Governments should review the legal age limits for purchase in the light of the need to reduce harm.” (WHO European Ministerial Conference, 2001).

2.2 What Evidence is There of Increased Youth Drinking Since Lowering the Minimum Purchase Age in New Zealand?

Drinking patterns among young people have worsened

The trend toward high risk drinking patterns in young people with increased heavy drinking at an earlier age certainly appears to have strengthened since the lowering of the purchase age. Lash, in a 2002 report on possible effects of lowering the drinking age, concludes that *“statistics show a mixed picture of possible impact of lowering the drinking age. Evidence from the 1995 and 2000 national surveys of drinking in New Zealand suggests that lowering of the drinking age has been accompanied by an increased frequency and amount of alcohol drunk by young drinkers”*. (See Section 1.1 Youth and Alcohol Trends in New Zealand , page 7.)

Other New Zealand research supports this picture (Wilkins et al. 2002; Casswell and Bhatta, 2001; Moewaka Barnes et al. 2003).

Available data has significant limitations

It is difficult to isolate the effects of lowering the minimum purchase age in 1999 from trends emerging from the previous decade, which saw liberalised alcohol availability and advertising; as well as from other economic, social, and legal confounding factors including changes in policing and monitoring practices. There have been several efforts to measure the health impacts of lowering the minimum legal age for purchasing alcohol in New Zealand; one report was compiled by ALAC in April 2002 and two for the Ministry of Justice, most recently October 2002. These have been hampered by a lack of high quality benchmarking data specific to the law change, highlighting the lack of consideration given to monitoring the effects of significant changes in alcohol-related legislation. In particular, there is the lack of a standard alcohol indicator on national morbidity and mortality data (ALAC, 2002). This, as well as the limited time frame, has limited the ability to provide proof of the impact of the law change. Available statistics, then, are indicators of **possible** impacts only and have shown “diverse trends” (Lash, 2002).

An increase in alcohol-related crime and hospital admissions

There is evidence, however, both anecdotal and statistical, that lowering the purchase age has been accompanied by an increase in alcohol-related crime and hospital admissions for young people.

A study by Everitt and Jones (2002) showed a 50 percent increase in the number of intoxicated 18-19 year olds presenting to Auckland Emergency Department in the 12 months after the

minimum purchase age was lowered; and a 37 percent increase in the number of 15-17 year olds presenting with alcohol-related problems in the same period (not statistically significant in the study). The authors concluded that the recent lowering of the minimum legal purchase age has resulted in increased presentation to the emergency department of 18-19 year olds. Although, as Lash (2002) pointed out, only two points of reference were used so the difference may reflect a trend that began earlier, this worrying trend has continued in as yet unpublished data, and is supported by the following evidence:

- An increased number of alcohol-related hospitalisations. The number of publicly funded hospitalisations of 15-17 year olds where the primary diagnosis was alcohol-related decreased from 124 in 1996 to 116 in 1997 before increasing to 205 in 2000. For 18-19 year olds, the number of such hospitalisations increased by 107 percent overall between 1996 and 2000 (Lash, 2002). (This was part of an increasing trend for the whole population, making it difficult to measure the specific effect of lowering the drinking age.)
- Christchurch Hospital Emergency Department specialist Dr Rob Ojala estimates that admissions for heavily intoxicated 13-17 year olds had risen by 68 percent in the year following the lowering of the purchase age (Chch. Press, 5 Nov. 2001).

There is anecdotal evidence from police that there are more intoxicated young people on the streets since the lowering of the purchase age. This is supported by an increased number of apprehensions and infringement notices issued to under 18 year olds for drinking or possessing alcohol for consumption in a public place (Lash, 2002).

Evidence of wider community concern

There is wide concern that the binge culture in New Zealand has worsened since the lowering of the purchase age. There are increasing reports from community organisations, for example schools, of intoxicated 11, 12 and 13 year olds. Eighty-six percent of the sample in the 2000 Drinking in New Zealand survey agreed that drinking by teenagers was a problem in their community (Habgood et al. 2001). Similarly, a national study of alcohol use among Maori found that 87 percent of respondents agreed that drinking by teenagers was a problem in their community (Moewaka Barnes et al. 2003). The appendix of recent news clippings provides some record of this.

2.3 What International Evidence is There that Increasing Minimum Purchase Age Reduces Harm?

Experiences of comparable countries where the drinking age has been changed – in particular the USA and Australia, both of which have a similar drinking culture to our own, are useful. With a lowering of the drinking age, both countries experienced increases in drink-drive deaths and injuries, juvenile crime, accidents and suicides.

USA evidence

The lowering of the legal drinking ages in most US states in the 1970s was linked with an increase in alcohol consumption and alcohol-related road accidents involving young people. When they were raised to 21 in 1984, the rates fell. Based on National Highway Traffic Safety Administration statistics, alcohol-related traffic fatalities for people under 21 dropped by 43

percent through the years 1987 to 1996. The drop in alcohol-related traffic fatalities for the general population in these years was 28 percent (NTSA, 1997).

O'Malley and Wagenaar (1991) found that lower rates of alcohol use due to a higher legal drinking age persisted into the early 20s, even after respondents were of legal drinking age.

Australian evidence

Smith and Burville (1986) studied the effects of lowering the legal minimum drinking age to 18 years in three Australian states in the early 1970s. They found the age change significantly increased male juvenile crime by 20-25 percent in two states and the limited data available for the third state indicated similar results.

Reviews of minimum purchase age studies

Wagenaar and Toomey (2002) in the most comprehensive review to date, reviewed 241 analyses, mostly US studies, of the effects of minimum drinking age laws from 1960 to 2000.

They concluded that *"the preponderance of evidence suggests that higher legal drinking ages reduce alcohol consumption and traffic crashes. Compared with a wide range of other efforts to reduce drinking among teenagers, increasing the legal age for purchase and consumption of alcohol to 21 appears to have been the most successful effort to date."*

- Of the 33 higher quality studies, 11 (33 percent) found that, as the legal age was lowered, drinking increased and, as the legal age was raised, drinking decreased. Only one (3 percent) found the opposite.
- Of the 79 higher quality analyses specifically of minimum legal drinking age and traffic crashes, 46 (58 percent) found a higher drinking age related to decreased traffic crashes. None found the opposite.
- Of the 16 analyses of non-traffic injuries, 4 found that, as the legal age was lowered, non-traffic injuries increased and, as the legal age was raised, they decreased. None found the opposite.
- Of the 10 analyses of "other crime" (such as disorderly conduct, and vandalism), three found crime increased as legal drinking age lowered. None found the opposite.

US studies on age verification have found a high level of sales without request for identification, and enforcement actions against underage sales rare (Wagenaar and Wolfson, 1994). Wagenaar and Toomey took this to indicate that the beneficial effects of the age 21 policy was achieved with minimal implementation of the law.

These effects applied to the whole population of young people result in very large societal benefits. For example:

- US researchers Toomey, Rosenfeld and Wagenaar (1996) estimated that the lives of more than 1,000 young people are saved each year by the legal restriction on alcohol consumption under 21 years.
- From reviews of studies of minimum purchase age impacts on motor vehicle crashes, ALAC (2002) concludes that *"studies mostly estimate that raising the drinking age from 18-21 years has decreased motor vehicle fatalities for young people by between 5 percent and 28 percent"*.
- Birckmayer and Hemenway (1999) estimated that, compared to 20 or 21 years, a drinking age of 18 years increases suicide rates by 8 percent for young people aged 18-20 years and by 6 percent among young people 21-23 years.

2.4 Why Should the Minimum Purchase Age be Raised?

Lowering the age of purchase has exacerbated the trend of earlier and heavier drinking in young people.

Trickle down effect

As stated previously, the trend toward heavier drinking at an earlier age certainly appears to have strengthened since the lowering of the purchase age. Available statistics, as well as considerable anecdotal evidence, indicate that the lowered minimum purchase age has been accompanied by worsening patterns of youth drinking, creating a ‘trickle-down effect’, whereby the lower the age at which young people are able to purchase alcohol and supply it to others, the younger the age at which hazardous patterns of drinking tend to begin. The 18 year minimum purchase age appears to have resulted in increased intoxication in 11, 12 and 13 year olds. There are several reasons for this:

1. Increased access to alcohol for young people from licensed premises

The combined effect of the vastly increased number of outlets¹ and extended trading hours resulting from the 1989 and 1999 amendments to the SOL Act, with the lowered purchase age, has been to significantly increase access to alcohol for young people.

The 1999 SOL Act amendments were designed to simplify the Act and improve its enforceability, creating ‘a hard 18’. However, there has not been a commitment to improving enforcement resources, and the use and consistency of fines available has been low (although suspension/cancellation of licences through the Liquor Licensing Authority has increased). Results of controlled purchase operations and age verification studies have confirmed that the rate of checking IDs is inadequate. For example, a pseudo patrons study conducted recently in the Auckland region indicated that nearly one in two (46 percent) attempts to purchase alcohol by 18 year olds without ID were successful.

Underage purchase is an important source of alcohol for young people. The ALAC Youth Drinking Monitor (2002) found that, when asked directly, 18 percent of 14-17 year old drinkers said they had personally purchased alcohol. When considering 16-17 year olds only, this percentage becomes larger. Unpublished data from the *Drinking in New Zealand Survey* (Habgood et al. 2001) found a total of 37 percent of 16-17 year old drinkers had purchased takeaway alcohol in the previous 12 months.

Thus the ‘hard 18’ has not become a reality.

2. On-supply

Another major source of alcohol for minors is supply from friends. Forty-nine percent of 14-17 year old current drinkers identified friends as the most frequent source of alcohol (Fryer, 2002). Habgood et al. (2001) found that, in 2000, over two thirds of 16-17 year olds had obtained alcohol from friends at least once in the past 12 months.

In ALAC’s Youth Drinking Monitor (Fryer, 2002), 15 percent of 17-18 year olds reported that they had purchased alcohol for someone under 18. Forty-four percent of 17-18 year olds reported that, in the last 12 months, they had supplied alcohol to someone under 18 at a function they were also attending. Qualitative research with 14-17 year olds also suggests they see those aged 18 as good sources of supply (Bennett and Coggan, 2000).

¹ In the early 1990s the number of liquor licences rapidly doubled, steadying at 11,000-12,000 in the mid to late 1990s, then rising to 14,211 by 2002. (On-licences 7,160, off-licences 4,280, club licences 2,771) Liquor Licensing Authority, 14.11.02.

It appears then, that 18 and 19 year olds purchasing alcohol are a source of supply of alcohol to younger teens. Quite possibly 18 year olds have less maturity than 20 year olds in this regard. They are also more likely to have younger friends. On-supply is a particularly hard area to enforce and there have been very few prosecutions.

3. Modelling

The social pressure on teens to drink alcohol is strong. Thirty-six percent of 14-18 year olds report peer pressure to drink and smoke (Katafatelis and Fryer, 2001). Eighteen year olds, some of whom are still at school, can be powerful models of behaviour for younger teens, passing on hazardous patterns of drinking. Habgood et al. (2001) found that, between 1995 and 2000, consumption increased among 16-17 year olds from 4 to 7 drinks on a typical drinking occasion. It is probable that direct influence by the newly legal 18 to 19 year olds was a factor.

According to US researchers DeWit et al. (1997), the major risk period for initiation into alcohol, tobacco and most illicit drugs begins around 12, peaks at 16 and is over for most by age 22.

There is clear international evidence of increased alcohol-related harm when the legal minimum drinking age has been reduced.

As indicated on page 12, the weight of international evidence is that, compared with a wide range of other strategies, an increase in minimum purchase age, along with retail price, is one of the most effective measures to reduce youth drinking (Holder, 2003; Babor et al. 2003; WHO, 1999; WHO, 2002).

In assessing whether evidence from US experiences following drinking age changes could be applied to the New Zealand situation, both ALAC and the Ministry of Youth Affairs in 1999 concluded that US patterns of drinking, car usage and culture of alcohol use were similar enough to assume that the US experience could be largely applicable to New Zealand.

Based on the US experience following reduction of the drinking age, ALAC (2002) has estimated the health impact for 18-19 year olds of lowering the legal purchase age to be:

- sixteen deaths in the calendar year 2000, at a cost of \$33.518 million.²
- 145 non-fatal, harmful outcomes from adverse health events in the year 2000, at a cost of between about \$1.604 million and \$8.505 million depending on the severity of the injuries³.

Delaying onset of regular drinking

Alcohol, though legal and widely used, is a drug with many known risks to health and well-being. Under 20 year olds are already at higher risk of harm by virtue of their inexperience and well-documented risk-taking behaviour. They are frequently involved in risky sexual activity and have often newly obtained a driver's licence. They also have less tolerance to the effects of alcohol and lack the protective maturity that is associated with adult roles. Postponing the onset of drinking is an essential preventative measure in reducing harms that are frequently associated with this stage of life.

The evidence that early drinking correlates both with immediate risks and adverse consequences at a later age is strong (see page 9). The 1995 Drinking Survey (Wyllie et al. 1996) showed that 18-24 year olds were more likely to experience harm from their drinking than older people

² Based on LTSA estimates of the costs of a statistical life and associated medical costs.

³ Including vehicle-related, non-traffic and self harm injuries. Excluding longer term health, economic and social effects such as teenage pregnancies, fetal alcohol effects and loss of opportunity and ongoing injury associated costs.

drinking the same amount. Any reasonable and evidence-based measures that will assist in delaying the onset of regular drinking should therefore be implemented.

A minimum purchase age of 20 years gives a strong social message about the responsibility that goes along with alcohol use.

Laws help to create a social climate. The lower drinking age has helped to create a message that drinking is an acceptable or tolerated activity for young people. Reinstating a minimum purchase age of 20 years would assist to promote the message that there are situations and times in life when any drinking is inappropriate, one of these being while young.

It also impacts on the **perceived** increase in accessibility. Research supports the idea that perceived alcohol availability is significantly associated with higher levels of alcohol consumption (Jones-Webb et al. 1997). Casswell and Zhang (1997) found that people considered themselves more influenced to drink if they believed alcohol was easy for them to access, and that this was a greater influence than peers or parents.

Unlike many measures to reduce drinking by young people, access to alcohol is subject to direct legislative control.

A minimum purchase age of 20 years uses the legislative means we have available and serves the object of the SOL Act.

A minimum purchase age of 20 has a high level of support, both from the public and from interested organisations.

One of the four criteria for determining the minimum drinking age was that the law “*must have a high degree of public acceptance, if it is to restrict the freedom of the individual, particularly among those affected by the restriction*” (Liquor Review Advisory Committee, 1997).

When considering lowering the purchase age from 20 to 18 years in 1997, the Liquor Review Advisory Committee received 233 submissions commenting on the minimum drinking age, 112 for retaining a minimum purchase age of 20, 106 for a minimum purchase age of 18, and 15 recommending a variety of other ages.

Since the SOL Act amendments in 1999, there has been increasing evidence that much of society finds the number of young people involved in alcohol-related harm unacceptable. The Drinking in New Zealand National Survey (Habgood et al. (2001) found that 86 percent of those surveyed agreed that drinking by teenagers was a problem in their community. The decision to lower the purchase age followed a period of licensing liberalisation, at a time when population alcohol consumption was declining. Public support for the liberalisation of restrictions of licensing laws in New Zealand is no longer necessarily the case. The appendix of recent news clippings provides some evidence of this.

After declining for two decades, total alcohol consumption is now trending back up again. With evidence of worsening alcohol-related problems among young people, there appears to be increasing concern that the liberal policies have worsened the situation. Rather than a coordinated approach to legislation based on a national alcohol strategy, there has been a reactive policy response as governments, both national and local, scramble to address youth drinking issues. Examples are the recent partial addressing of the changes needed to pricing through excise tax, and locally, the increasing enacting of liquor bans in public places.

Reinstating a minimum purchase age of 20 is supported by many bodies engaged in public health

activities, for example: ALAC, The Public Health Association, The New Zealand Drug Foundation, the Massey University Centre for Social Health Outcomes Research and Evaluation, The New Zealand Medical Association and Auckland City Council.

There have also been moves by MPs to initiate change. In October 2002, New Zealand First MP Ron Mark introduced a Sale of Liquor (Increase of Drinking Age) Amendment Bill to the ballot with the purpose of amending the Sale of Liquor Act to increase the purchase age from 18 to 20 years.

What, if any, exceptions should there be?

Prior to 1999, the number of exceptions to the 20 year purchase age made enforcement, as well as public awareness of the law, extremely difficult. One of the criteria used by the Liquor Review Advisory Committee in 1997 was that the law “*should be sufficiently clear in its expression so that it can be understood by those affected and enforced by those responsible.*” Consequently, they recommended only one exception which became law in 1999: that under 18s may be purchased or supplied alcohol by their parent or guardian, and may be present with a parent or guardian in age-restricted premises with a ‘supervised’ designation. Another exemption remains for persons who are attending a private social gathering; this is discussed in the next section.

Alcohol Healthwatch recommends that the only exception applied to a 20 year minimum purchase age be supply by a parent or legal guardian.

2.5 Answering the Critics of Returning the Minimum Purchase Age to 20 Years

Teenage binge drinking is a social issue... education is the key.

The belief that the provision of education alone is sufficient to produce behaviour change is simplistic and has little evidential support, in fact, there is evidence to the contrary (Babor et al. 2003; Edwards et al. 1994). In the prevention of alcohol-related harm there is a move away from a focus on the individual toward approaches which recognise the interactions between the individual and the environment (Kilbourne, 2000; WHO, 1999). Interventions with the greatest evidence-base for effectiveness in reducing alcohol-related harm are environmental policy approaches such as increasing minimum purchase age, along with retail price, enforcement, a lower blood alcohol concentration for driving, and control of density of outlets (Holder, 2003). The evidence is that a range of integrated strategies works best (WHO 1994; WHO, 2002; Babor et al. 2003).

Raising awareness through education is an important tool, but without a strong, supportive legislative environment and well resourced enforcement, it will be difficult, if not impossible, to achieve sustainable gains by educational activities alone.

“The SOL Act should encourage people to consume alcohol moderately in safe drinking environments, rather than resort to beaches, car parks, unsupervised house parties where the risks of liquor abuse are very high.” (Liquor Review Advisory Committee)

Ideally, licensed premises would be environments where safe drinking practices are modelled to

young people. However, the monitoring, training, and enforcement of host responsibility practices is a hugely under-resourced area. While some bars may provide such safe environments, others are associated with high levels of intoxication, underage sales, poor food options and lack of safe transport promotion. Licensed premises have been found to be significantly more likely to be the settings used prior to harm occurring than other locations (Stockwell et al. 1993, Casswell, Zhang et al. 1993).

Young people may leave licensed premises intoxicated and no longer be in a supervised environment. Importantly, lowering the minimum purchase age has not just allowed access to the “safe environments” of on-licences, but access to (cheaper) take away alcohol.

Returning the purchase age to 20 may have little effect on availability. Younger teenagers are drinking now anyway.

Parents, friends and other adults are main suppliers of alcohol for underage drinkers, rather than licensed premises. For many heavy drinking young people then, the drinking age is immaterial (Ministry of Youth Affairs, 1999).

A 20 year minimum purchase age should have few exceptions and be accompanied by a commitment to improved enforcement resources. Adequate levels of enforcement have proven to be a problem in New Zealand. However, in the US, studies show huge benefits from a raised drinking age despite the fact that enforcement levels were low (see page 13).

Raising the purchase age alone is not going to solve the problems associated with youth and alcohol. However, accompanied by a range of other strategies such as discouragement of social supply to minors, it will assist in raising the de-facto drinking age by reducing accessibility. It will also give a powerful message about the responsibility that goes along with alcohol use, and provide a strong message to parents and others who are inappropriately supplying alcohol to young people for unsupervised use.

“The minimum age of purchase must be fair in regard to other restrictions and rights which may apply to people of the same age.” (One of four criteria used by Liquor Review Advisory Committee, 1997)

“Eighteen is the age at which young people gain many of the rights of adulthood.” (Ministry of Youth Affairs, 1999)

Society regulates many activities, such as the age of obtaining a driver’s licence, marriage, gambling and sale of tobacco, and must take into account dangers, benefits and responsibilities associated with each of these activities. Heavy use of alcohol is associated with numerous serious problems, particularly for young people, and has potential negative consequences not only for the health of the drinker, but for those around them. Developmental maturity is incomplete at 18 years, a time when young people are vulnerable to the effects of alcohol. There is also merit in staggering the ages at which different high risk activities are set, especially driving and purchasing alcohol.

A minimum purchase age of 20 may be unacceptable to some, however, society also finds the number of young people experiencing alcohol-related harm unacceptable.

Increasing the minimum purchase age will inhibit the development of a mature drinking culture.

European teens are allowed to drink from an early age and don’t have the problems we do. A

drinking age of 20 adds to the mystique of drinking - alcohol is seen as “forbidden fruit.”

It is often asserted that alcohol is more integrated into family life in Europe, leading to more responsible drinking habits. Grube and colleagues’ comparison of European and US drinking patterns in young people (see page 10) indicates otherwise.

According to the WHO Global Status Report on Alcohol (Jernigan, 2000), the French drink 54 percent more alcohol than Americans and have 57 percent more deaths from liver cirrhosis.

Patterns of young people’s drinking in southern European countries are changing. Increased binge drinking and intoxication are now being seen in countries such as Italy and Spain, where drunkenness was traditionally alien to the culture (The Globe, 2001).

The evidence is that drinking among young teenagers leads not to greater sophistication but to later drinking problems (see page 9). Nor for that matter, is there evidence that early exposure leads to a more ‘mature’ drinking culture. Young people, by definition, cannot be expected to be mature. In New Zealand we have a culture of drinking that commonly accepts intoxication as normal drinking practice. This must be addressed before we can model responsible drinking practices to young people.

“A drinking age of 20 years will criminalise the responsible behaviour of some 18-19 year olds. The best interests of children and young people are served by promoting their participation within society except where there are strong interests for not doing so.” (Ministry of Youth Affairs 1999)

Although many people may drive over the speed limit safely, we accept regulations because they are protective against a minority of negative outcomes. Society must protect its most vulnerable members. This is well stated in the Charter of Principles and Goals adopted in 1995 by European member countries of the World Health Organization in a Regional Action Plan on Alcohol.

Article 3:

All children and adolescents have the right to grow up in an environment protected from the negative consequences of alcohol consumption and, to the extent possible, from the promotion of alcoholic beverages.

This is particularly important considering the fact that young people are being increasingly targeted by the alcohol industry:

Over the past 10–15 years, we have seen that the young have become an important target for marketing of alcoholic products. When large marketing resources are directed towards influencing youth behaviour, creating a balanced and healthy attitude to alcohol becomes increasingly difficult. (Dr Gro Brundtland, WHO Director-General, Stockholm 2001)

A significant proportion of 18-19 year olds are not drinking responsibly. Over 70 percent of 18-19 year old males (63 percent of women), reported drinking enough to feel drunk at least monthly in 2001 (Wilkins et al 2002). Moewaka-Barnes et al. (2003) in their national study of alcohol use among Maori, found that 18-19 year olds was the age group with the highest annual volume of alcohol consumed, both for men and women. They were also the most frequent drinkers and drank most on a typical drinking occasion. Habgood et al. (2001) also found that the largest typical amounts consumed on an occasion were by 18-19 year olds, amounting to eight and a half cans of beer. The typical amounts consumed in 2000 by this age group, as well as by 16-17 year olds, exceeded that of the heaviest drinkers in 1995.

Section 3

FURTHER AMENDMENTS TO REDUCE ACCESS TO ALCOHOL BY YOUNG PEOPLE

3.1 Section 160: Purchasing Liquor for Minors

S.160. PURCHASING LIQUOR FOR MINORS

(1) Every person commits an offence and is liable to a fine not exceeding \$2,000 who purchases or acquires any liquor on or from any licensed premises with the intention of supplying the liquor, or any of it, to any person who is under the age of 18 years.

(2) Subsection (1) of this section applies irrespective of any liability that may attach to the licensee or any manager or other person in respect of the sale and supply of the liquor.

(3) Subsection (1) does not apply to a person who purchases or acquires any liquor with the intention of supplying it to:

(b) Any child of whom that person is a parent or guardian; or

(d) Any other person who is attending a private social gathering.

3.1.1 Supplying liquor to minors at private social gatherings

Currently under Section 160 (3) (d) of the Act, minors are able to be supplied alcohol at a private social function by someone other than their parents or guardians. This exemption needs to be repealed.

Exemption 3 (d) creates enforcement problems as well as considerable confusion for the public, especially parents. It was designed to cover people supplying liquor at weddings and other similar functions, but also covers private parties, and gives no guidance as to what a private social function may be. It would appear, for example, to allow for a 14 year old to be legally supplied alcohol by an 18 year old at a party, or a gathering of 16-17 year olds to be supplied alcohol by an 18 year old or by one parent.

Reducing the supply of alcohol to minors by adults other than parents or legal guardians is an important measure to reduce alcohol abuse in underage persons. The law needs to be clear and simple in regard to the supply of alcohol to minors. Removing this exemption would give parents or legal guardians the sole right to control access to alcohol by their children, and ensure that only they are able to legally supply their own child with alcohol.

Removing exemption 3 (d) would also assist with policing irresponsible supply of alcohol to unsupervised or poorly supervised underage social gatherings. Currently it conflicts with Section 153 whereby any person commits an offence who allows their (unlicensed) premises to be used as a place of resort for the consumption of liquor; and so police report being unsure of whether to proceed with a prosecution.

Support for the removal of this exemption from the Sale of Liquor Act is also found from the New Zealand Drug Foundation and NZ Police.

3.1.2 Removal of the need to prove intention to supply

The need to prove that liquor was purchased with the intention of supplying it to minors makes many occasions where alcohol is on-supplied to underage young people difficult to prosecute. Currently police are having to virtually catch the purchase and supply happening to prove the liquor was bought with the intent to supply it. This clause needs to be reworded so that every person other than a parent or legal guardian commits an offence who supplies liquor to any person who is under legal purchase age.

3.1.3 Investigation and debate around requiring parents and legal guardians to supervise the use of alcohol supplied to minors.

The current act does not specify that the parent or guardian, when supplying liquor to their underage children, remain present to ensure the alcohol they supply is consumed responsibly.

Section 160 (3) b could be considerably strengthened by ensuring parents supervise the drinking of alcohol they supply to their children, including the wording that a parent or guardian may supply liquor to their child for consumption under the supervision of that parent or guardian. This would make it illegal for parents or guardians to supply alcohol to their underage children for use at social gatherings they are not attending.

These three amendments to Section 160 would together, even if the purchase age was retained at 18 years, considerably strengthen the SOL Act by creating an environment whereby the only situation where under 18 year olds would be legally allowed to drink alcohol, would be under the supervision of their legal parent or guardian

3.2: Mandatory Verification of Evidence of Age

Rigorous enforcement of the minimum purchase age is essential to achieve a decrease in drinking by under-age youth. At present, under-aged youth can access alcohol with relative ease. This is of great concern, as alcohol use in teenage years has been shown to predict subsequent levels of heavier drinking and problems (Casswell and Zhang, 1997).

When the Sale of Liquor Act was amended in 1999, the evidence of age document was required to be one of a New Zealand or overseas passport; a driver's licence issued under the Land Transport Act 1988; or a HANZ 18+ card. While it is a defence to a charge of selling to a minor, or having a minor on an age restricted premise to have sited a valid evidence of age document, there is still no requirement in the Act for licensees and managers to ensure their staff actually ask young people for proof of age.

Underage purchase is a significant source of alcohol for young people. The ALAC Youth Drinking Monitor (Kalafatelis et al. 2003) found that, when asked directly, 13 percent of 14-17 year drinkers said they had personally purchased alcohol (down from 18 percent in 2002).

- Kalafatelis et al. (2003) found that, of the 14-17 year olds who purchased alcohol for themselves, 41 percent claimed they were *hardly ever* or *never* asked for ID.
- In a recent national study of alcohol use among Maori, 40 percent of 13-17 year old males and 45 percent of 13-17 year old females agreed that it was easy for them to buy takeaway alcohol when they wanted (Moewaka-Barnes et al. 2003).
- A recent pseudo patron study used 18 year olds to purchase alcohol without ID from off-licensed premises in the Auckland region (Huckle et al. 2003). Using 18 year olds involves no breaches of the SOL Act but provides an indication of whether premises are routinely asking for ID before serving young looking people. The 2003 study found that 46 percent of purchases without ID from selected off-licences were successful. Although this was a significant improvement from a similar study in 2002, where the proportion was 61 percent, the fact that nearly one in two attempts by young people to purchase alcohol from off-licences without ID is likely to be successful is cause for concern. In both studies grocery outlets had the highest proportion of sales made without ID; followed by bottle shops and supermarkets.

Progressive Enterprises Ltd - who hold approximately 45 percent of the New Zealand grocery market - have recently introduced a company policy requiring staff to verify age of customers appearing to be under 25 years. Such in-house policies are now a required condition of a licence by Auckland City and Franklin District Licensing Agencies. These agencies have used Section 14 (5) of the Act which gives the power to the LLA or DLA to impose conditions relating to:

- (e) Any other matter aimed at promoting the responsible consumption of liquor
- (f) The steps to be taken by the licensee to ensure that the provisions of this Act relating to the sale of liquor to prohibited persons are observed.

As the practice by these DLAs has not yet been tested in court, other councils have not so far followed these DLAs' lead. Alcohol Healthwatch commends the actions of Auckland City, Franklin and Progressive Enterprises in adopting these policies. However, an amendment to the SOL Act would ensure that, rather than just in a limited number of licensing areas, all licensees ensure that age of young-looking people is verified. This would be an appropriate national strategy to assist in addressing the problem of youth access to alcohol, and would ensure that age verification practices are consistent across the country.

A requirement in law to request an evidence of age document is a simple way to ensure that those younger than the minimum purchase age are less easily able to purchase alcohol, being a deterrent both to minors and to licensees and their staff. According to the Liquor Licensing Authority (Decision 52/2003), having a policy whereby all persons appearing to be under the age of 25 who enter a premise are required to produce an evidence of age document “*is likely to promote the object of the Act*”.

Requiring age verification would fit alongside other required practices of responsible management, such as provision of food and not serving to intoxicated patrons. It should be used as an effective and supportive host responsibility tool for those involved in the sale and supply of liquor, as well as for those involved in enforcement. It would also support servers, especially those who are themselves young, by empowering them to ask confidently for identification.

The Sale of Liquor Act should therefore be amended to require all licensees to ensure that any person appearing to be under the age of 25 years produces an evidence of age document when attempting to enter age restricted premises or purchase alcohol. This could be included in the Act as a mandatory condition of all licences, and failure to ask for evidence of age could be an infringement offence.

An alternative suggestion, avoiding the legal difficulties associated with ‘appearing to be 25’ would be to have a mandatory condition that licensees ensure their staff ‘verify that any person attempting to enter age-restricted premises or attempting to purchase alcohol is of the legal age to do so.’

Mechanisms to aid in doing so could include:

- having premise policies to check ID of under 25 year olds
- till prompts
- separate aisles in supermarket for customers whose purchase includes alcohol
- supervisor checks for sales of alcohol

This would be stronger and more specific than the current requirement for licensing authorities to have regard to ‘*the steps proposed to be taken by the applicant to ensure that the requirements of this Act in relation to the sale of liquor to prohibited persons are observed*’ when considering applications for a licence.

Legislation to require age verification would need to be monitored and consistently enforced, both by Police and District Licensing Agencies.

In summary, to reduce access to alcohol by young people, Alcohol Healthwatch recommends that:

- The minimum purchase age for alcohol be 20 years, with the exception that under 20 year olds may be supplied liquor by a parent or legal guardian.
- Section 160 (3) (d) of the Sale of Liquor Act, which allows minors to be supplied with alcohol at a private social function by someone other than their parents or guardians, be removed, so that only parents or legal guardians are able to supply those under 18 years with liquor.
- Section 160 (1) be reworded, removing the need to prove that liquor was purchased with the intention of supplying it to minors, so that every person, other than a legal parent or guardian who are exempt in the following subsection, commits an offence who supplies liquor to any person who is under legal purchase age.
- All licensees, as a mandatory condition of a licence, should be required to ensure that any person appearing to be under the age of 25 years produces an evidence of age document when attempting to enter age restricted premises or purchase alcohol.

Alcohol Healthwatch calls for research and debate on the following possibilities:

- A purchase age at 18 for on-licences only. Although there is evidence that young men do much of their heavy drinking in on-licensed premises (Casswell et al. 1993, Gruenewald et al. 1996, Stockwell et al. 1993) well-managed and well-monitored host responsibility practices have great potential to influence responsible use of alcohol. If a significant increase in resources was directed at measures to improve and monitor host responsibility practices, in particular age verification practices and measures to reduce intoxication on premises, such a compromise could avoid the purchase of large quantities of takeaway alcohol by young people for consumption at unsupervised locations.
- Amending Section 160 (1) so that under 18 year olds may be supplied liquor by their parent or guardian only for consumption under supervision by that parent or guardian.

Section 4

OTHER RECOMMENDED AMENDMENTS TO THE SALE OF LIQUOR ACT

4.1 Improved Planning for Licensed Premises

Criteria for Objecting To New Licences

Alcohol Healthwatch strongly endorses efforts to improve public participation in the licensing process. Considerable frustration arises within communities when members have inadequate input into the development of their neighbourhoods. Providing roles for community involvement in liquor licensing and monitoring can assist in reducing alcohol-related harm.

Local government planning processes are currently inadequate to allow sufficient control over the density and appropriate siting of new licensed premises, and criteria for objecting to a licence in the current SOL Act allow nearby residents no legitimate grounds for objections based on concerns about the suitability of the location for licensed premises.

Community concerns are typically:

- outlets appearing in inappropriate locations; for example outside school gates (*see appendix for recent examples*),
- the effect of intoxicated patrons on the community,
- over-density of premises contributing to promotion of alcohol use to young people as “normal”, “everyday” “everywhere” and,
- the difficulty and costs of monitoring a large number of premises.⁴

Grounds for objecting to a new licence are set out in the SOL Act and include matters such as the suitability of the applicant and their host responsibility programme, the days and hours of the proposed licence, but not whether the presence of the premise itself is considered to be detrimental to the area.

In short, changes in legislation have left a “gap” between:

- The Resource Management Act 1991— which deals with planning issues through its requirement for District Plans which establish zones for different business activities including licensed premises and;
- The Sale of Liquor Act 1989— which is a framework for looking at conditions of individual licence applications and governs the management of licensed premises.

Because planning rules apply to zones, which are too broad to allow judgements to be made about the suitability of a particular site, and licensing laws are related to management, neither system allows the community impacts of particular kind of premises on a particular site to be considered. This has been a long standing source of frustration in communities, and submissions on the issue were not addressed in the last SOL Act review.

⁴ (Manukau City, for example, has 492 licensed premises and one District Licensing Inspector – 2004 data)

There are now two-and-a-half times as many liquor licences as in 1989 (figure supplied on page 14). While there has not yet been New Zealand research on this topic, there is clear international evidence that density of alcohol outlets has a positive correlation with alcohol consumption and alcohol-related harm including alcohol-related traffic injury and violent crime (Scribner et al. 2000; Norstrom, 2000; Weitzman et al. 2002; Gorman et al. 2001). Higher outlet density is often in areas of lower socio-economic status. Control of outlet density can contribute to reduced access of alcohol to young people. This may be of particular importance in regard to off-licence purchases by young people, which are difficult to control as purchase of alcohol may only take a couple of minutes. Improved control over the number of premises is therefore an important harm reduction tool.

Liquor outlets opening near sensitive community facilities such as schools, preschools, churches, Marae and parks have repeatedly caused considerable outrage from affected residents who are dismayed at their inability to contest the licence.

A number of states in Australia include grounds for refusal of a licence based on whether “the amenity, quiet or good order of the neighbourhood is likely to be disturbed”, or whether it is likely to “detract from the amenity of the area”.

In the Sale of Liquor Act 1962, criteria for assessing new licence applications included whether a new premise was “necessary or desirable”, and whether the demand was being “met but not stimulated”. This clause has been removed and any locational issues are assumed to have already been addressed by the resource consent certificate that must accompany the liquor licence application.

To assist in remedying this situation, Alcohol Healthwatch recommends that Sections 13, 35, and 59 be amended to allow the licensing authorities, in assessing new licence applications, to have regard to neighbouring land use in relation to whether a particular licence is desirable for the community.

This amendment would support planning controls by providing an avenue for licensing authorities to respond to the concerns of local communities.

Local government policies on the sale of liquor

Local government district plans and long term community plans provide another context for addressing this issue. All councils should be encouraged, or in fact required, to develop policies which not only guide their role in the implementation of the SOL Act, but which cover how the council uses its planning function under the Resource Management Act 1991 to regulate liquor activities. Such policies would incorporate criteria for density and appropriate location, similar to the policies required on location of gambling venues and brothels. The policy could include:

- An investigation of current controls over location of licensed premises by the district plan.
- Determining, in consultation with the community, where it is inappropriate to site licensed premises; for example near schools, community facilities, preschools, parks, marae; and determination of an acceptable density.
- The development of criteria to limit the number and location of licensed premises, and incorporation of these into the district plan.
- Establishment of a system of record keeping of complaints about licensed premises and objections to licences to inform planning.

- Improvement of the public notification system.
- Promotion of rights to the community.

Criteria for granting new licences should require licensing authorities to have regard to these policies. Further information on this topic can be found in New Zealand Drug Foundation paper: *Planning for the Sale of Alcohol*, (Hill, 2004).

Notification of liquor licences

All new and renewal applications for on, off and club licences and any applications for variations to licence conditions are required in the SOL Act to be publicly notified. Any person ‘*who has greater interest in the application than the public generally*’ may object in relation to a limited set of specific criteria. The applicant must give public notice of the application with a specified time and attach the notice on a conspicuous place on the premises. However these procedures are inadequate to ensure that affected community members are aware of an impending licence and able to respond. Extending the required notification procedures in the SOL Act to include direct notification of all residents, businesses and community organisations within a certain vicinity of the premises would also help to ensure that community members are aware of proposed new licences and renewals in their areas. This is particularly important in the case of licence renewals, where substantiated complaints from community members experiencing the negative effects of poorly managed licensed premises (including noise) are able to influence the likelihood of obtaining renewal under the same conditions.

In summary, to improve the planning of licensed premises in a way that contributes to the reduction of liquor abuse and maximises the input from the affected community, Alcohol Healthwatch recommends the following changes to the Sale of Liquor Act:

- The inclusion in the Act of a requirement that all local authorities develop a policy to guide their implementation of the SOL Act and Resource Management Act 1991 in such a way as to maximise their ability to reduce liquor abuse; including a policy on premise density and location.
- An amendment to Sections 13, 35, and 59 to require licensing authorities, in assessing new licence applications, to have regard to local government policy on premise density and location.
- Amending sections 13, 35, and 59 to allow licensing authorities, in assessing new licence applications, to have regard to neighbouring land use in relation to whether a particular licence is desirable for the community.
- Extending the required notification procedures in the SOL Act to include direct notification of all residents, businesses and community organisations within a certain vicinity of the premises.

4.2 Designation of Off-Licences

Off-licences are an important source of alcohol for underage young people (Habgood et al. 2001). Off-licence sales only take a minute and are therefore difficult to police. ALAC's Youth Drinking Monitor (Kalafatelis et al. 2003) found that, for young people 14-17 years, bottle stores were most frequently mentioned as the source of alcohol they purchased themselves (83 percent of alcohol purchased by 14-17 year-old current drinkers).

Designating stand alone bottle stores as 'supervised' or 'restricted' areas would be an extra barrier to off-licence sales to minors, affirming that, if not actually able to buy liquor, it is not appropriate for unaccompanied minors to be on the premises.

The Liquor Licensing Authority (LLA) has recommended to Parliament that the Act be amended to allow off-licences to be made as 'restricted' or 'supervised' areas. The LLA's 2002 annual report (Unwin, 2002) recommended that, "*On granting an application for an off-licence in respect of a premise in which the sale of liquor is the principal business, the LLA or DLA as the case may be, must designate the whole or one or more parts of the premise as restricted areas or supervised areas. There could then be no suggestion that minors were permitted in bottle stores.*" Again in decision number PH 328/2003, the LLA asked "*why should a premises devoted almost solely to the sale and supply of liquor, not be designated?*" In this case they challenged the defence that a significant portion of sales was from non-alcohol products with the argument that most restrictive licensing controls will have an economic impact on licensees.

Some councils are enacting a policy that off-licences, as a condition of a licence, are designated 'supervised' areas. Alcohol Healthwatch recommends that, in the interests of having a nationally consistent policy that will help to minimise sales to minors, the SOL Act be amended to require all stand alone bottle stores be designated as 'supervised' areas.

4.3 Training of Staff Serving and Selling Alcohol

Although it has been made a requirement in the 1999 SOL Act for managers to receive training, there is no requirement that this is passed on to staff.

Alongside the provision of food, low alcohol beverages and transport options, training of staff who sell or serve alcohol in on-licences, clubs and off-licences is an important measure to prevent under-age sales and intoxication.

Submissions to the last liquor review that sellers be required to be of purchase age themselves were not heeded. Consequently, sellers may themselves be young and lack the assertiveness to require ID from their peers.

Similarly, bar staff may not have the knowledge and skills to minimise intoxication.

Training could cover areas such as:

- attitudinal and motivational training, raising awareness of underage drinking issues, effects of alcohol and the benefits of preventing intoxication,
- knowledge of penalties,

- skills in assertively requesting ID, assessing ID, dealing with false IDs,
- signs of intoxication, prevention, early identification and responsible dealing with intoxicated patrons, skills in refusing service, arranging safe transport for intoxicated patrons.

Evaluations of responsible beverage service programmes (Graham, 2000) have shown nearly all training programmes improve attitudes and knowledge of strategies among participants. Many also have some effect on serving practices, including decreasing irresponsible serving practices such as ‘pushing drinks’ and increasing interventions such as suggesting food or slowing service.

A recent Swedish randomised controlled trial (Johnsson et al. 2003) found that educational programmes given to campus bartenders significantly reduced blood alcohol concentration in patrons and reduced the “rowdy” atmosphere.

Holder and Wagenaar (1994) found that mandated server training introduced in Oregon significantly reduced single vehicle night-time traffic crashes (those with a high percentage of alcohol involvement).

Other studies have indicated that, to be effective, staff training programmes need full management commitment to work (Lang et al. 1998, Gliksman et al. 1993).

The steps proposed by the applicant in relation to training staff fit alongside assessment of host responsibility proposals and should form part of the assessment criteria for licence applications in the Sale of Liquor Act.

A specific requirement for server training, either assessed in criteria for considering applications for a licence, or by imposing a certain minimum level of staff training as a condition of a licence, would ensure this is a nationally consistent practice.

4.4 Controlling Patron Numbers on On-Licensed Premises

The New Zealand Fire Service has concerns over the fire safety practices in nightclubs and other licensed premises. So far, New Zealand has been lucky and has escaped the tragedies that have seen thousands of people die in nightclub and dance hall fires worldwide since records began. Although the risk of fire and similar emergencies may be low, the consequences are huge.

Licensed premises are most often not in purpose-built premises. Exits may not be properly lit or blocked; and there is a high turnover of managers who have little, if any, fire safety knowledge. If patrons are intoxicated, this creates further problems such as confusion, disorientation and panic.

In early 2003 the New Zealand Fire Service assessed the fire safety of nightclubs. They found that locked escape doors and escape routes used for storage were common. Another problem described by the Fire Service as a “disaster waiting to happen” (Talbot, 2003) was overcrowding. One club they visited was licensed for 150 people yet had approximately 400 patrons present. The Team Policing Unit from the New Zealand Police have at times been unable to even enter premises due to intense overcrowding.

The Police, District Licensing Inspectors (DLI) and other statutory agencies regularly visit licensed premises to determine whether they are complying with both the Sale of Liquor Act and the conditions stated on their liquor licence. Due to recent tragedies overseas from fires in

nightclubs, such agencies are currently making the assessment of the number of patrons on premises a priority.

This issue has recently been highlighted in a recent case in which the LLA delivered a strong message that overcrowding will not be tolerated. An Auckland bar had its licence and that of its manager suspended for 10 days for having approximately 160 patrons on premises for which the building code stated a maximum of 50. The Authority found that the dangerous overcrowding of the premises amounted to the premises being conducted in an improper manner. *“The situation was so serious that if an emergency had occurred there was the possibility that the licensee could be faced with a charge of manslaughter.”* In this case there were conflicting records of the number of patrons allowed on the premises, and the licensee and manager were unaware of the correct figure. They also demonstrated a lack of understanding of the dangers involved, having an exit which could have been used in an emergency inaccessible — thus highlighting the need for good quality fire safety training as part of managers’ training.

Police and licensing inspectors, when carrying out their inspections, may think a licensed premise is overcrowded, yet have no method of easily determining the requirements for the number of patrons safely permitted on the premises. Confusion also arises from the variety of recommendations which currently exist for the number of patrons allowed on premises; including building code recommendations, resource consent conditions and fire safety recommendations.

Stating the number of patrons permitted on the premises according to the fire safety recommendations on the liquor licence would aid in the fire safety of the premises. It would also contribute to the object of the Sale of Liquor Act by assisting with host responsibility practices. When premises are overcrowded staff are not able to effectively monitor all their patrons and keep an eye on intoxication levels — they are likely to be too busy at the bar, and are less able to move around the premises to interact with patrons. If the liquor licence clearly states the number of patrons allowed on the premises, door staff would be empowered to turn people away from entering the premises when numbers are reached.

Alcohol Healthwatch believes that, in order to aid the powers of the Police, District Licensing Inspectors and other statutory agencies, as well as contributing to the object of the Sale of Liquor Act, it is necessary for the following changes to occur:

- The Sale of Liquor Act should be amended so that the number of patrons allowed on the premises, as determined by fire safety recommendations, is stated on the licence. Police, DLIs and other statutory agencies, when inspecting the conditions of the licence on entering the premises, would have a quick and easy method of determining the number of patrons that are permitted on that premise. The New Zealand Fire Service recommends that there be a maximum occupancy number for each main space within the premises.
- The Police should be given the powers to immediately close down a premise if it is overcrowded as determined by the number stated on the liquor licence.
- The fire safety module of manager’s certificates needs to be upgraded and made a mandatory component of the training.

Improved Enforcement

Rigorous enforcement of liquor laws is essential in reducing underage drinking and intoxication – this needs to be reflected in the resources directed to enforcement at all levels. Amendments to the SOL Act which resulted in vastly increased numbers of premises, extended trading hours and a lowered purchase age, have not been followed up with the provision of additional resources to enforce the purchase age and monitor premises for compliance and good practice.

Alcohol-related crime, violence and injury make up a substantial portion (internationally estimated at 60-80 percent⁵) of police workload. The planned national Enhanced Alcohol Intelligence Project initiative will build a more complete picture of alcohol's involvement in police activity and raise the profile of reducing alcohol-related offending. It will need to be followed through with a commitment to supporting enforcement to ensure it achieves its full impact.

Studies of the results of increased enforcement show it to be a very effective means to reduce sales to minors. Even moderate increases in enforcement have been found to reduce sales to minors by as much as 35-40 percent, especially when combined with community based activities (Grube 1997; Wagenaar et al. 2000). Expectation of prosecution or loss of licence is an important component in ensuring compliance with the SOL Act, and well-publicised cases have an important deterrent effect. Consistent use of penalties available is important in improving compliance and educating licensees about their responsibilities.

Liquor licensing policing is a poorly resourced and trained area, with few districts having full-time licensing police. Liquor licensing police must be sufficiently resourced to carry out controlled purchase operations and prepare cases. More resources and priority must be directed to this area of policing.

Increasing resourcing and training of District Licensing Agency staff within local councils is also important to ensure they can perform routine duties as well as targeted monitoring and enforcement.

⁵ As yet, New Zealand data is based on small scale, one-off investigations of police activity. (Webb M, 2003). For example: "a recent survey in Wellington of Charge Sheets indicated that 90% of violent offenders were affected by alcohol" (Wellington Police Area Controller, 2003).

An estimated 70% of incidents attended by New South Wales Police each year are alcohol-related (NSW Department of Gaming And Racing, 2003).

Policy Statement

Alcohol Healthwatch recommends:

- That Sections 155-164 of the Sale of Liquor Act be amended to reinstate the minimum purchase age for alcohol at 20 years. Those aged under 20 years may be present on age-restricted premises with a 'supervised' designation if they are with a parent or guardian, and, on any premises, may be supplied with alcohol only by a parent or guardian.
- That the Sale of Liquor Act be amended to require all licensees to ensure that any person appearing to be under the age of 25 years produces an evidence of age document when attempting to enter age restricted premises or purchase alcohol.
- That Section 160 (3) (d) of the Act, allowing minors to be supplied with alcohol at a private social function by someone other than a parent or guardian, be repealed.
- That Section 160 (1) be reworded so that the need to prove purchasing with the intent to supply to a minor is removed, and every person commits an offence who supplies liquor to any person who is under legal purchase age.
- That the possibility of amending Section 160 (1), so that under 18 year olds may be supplied liquor by their parent or guardian for consumption only under supervision by that parent or guardian, is opened up for research and debate.
- That there be a requirement in the Sale of Liquor Act for local authorities to develop and adopt a policy on the sale of liquor, including a policy on density and appropriate location of licensed premises.
- That Sections 13, 35, 59 of the Sale of Liquor Act be amended to allow the licensing authorities to have regard to: neighbouring land use in relation to whether a particular licence is desirable for the community, and whether it is in accord with local government policy on where particular kinds of premises may be located.
- That notification procedures in the SOL Act are extended to include direct notification of all residents, businesses and community organisations within a certain vicinity of the premises.
- That a minimum level of staff training be made a legal requirement in both on and off-licensed premises.
- That stand-alone bottle stores are required to be designated as supervised areas.
- That the number of patrons allowed on the premises, as determined by fire safety recommendations, is stated on the liquor licence.
- That increased resources are directed to the monitoring and enforcement of the Sale of Liquor Act.

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Appendix - Sample of Recent Newspaper Extracts

Extracts relating to youth drinking and the purchase age

Doctors attack ‘stupid’ law on drinking age

New Zealand Herald, February 2004

“An Auckland emergency doctor has predicted the cost of lowering the drinking age will be many more alcoholics as the city’s hospital treats a soaring number of young drunks. Dr Peter Jones said it had been “crazy” for MPs to lower the drinking age because it had created more health and social costs when governments were telling hospitals they could not have more money. Since it took effect in December 1999, the number of intoxicated young people being admitted to Auckland City Hospital’s emergency department has risen every year. Last year it was 40 percent higher than in 1999. ‘In 20 years we’re probably going to be seeing more alcoholics because more people are being exposed [to alcohol]. Those sort of hidden costs aren’t counted for when this sort of legislation comes in.’ Dr Jones said his personal view was that the legal age for buying alcohol should revert to 20 years. And be properly enforced, and there should be restrictions on advertising alcohol.

Another doctor, this time in Christchurch, says the number of underage drinkers being treated for potentially fatal alcohol poisoning has doubled since the drinking age was lowered from 20 years to 18.”

Drink use starts at 13

New Zealand Herald, 29 August 2003

“An annual study on teenage drinking, commissioned by the Alcohol Advisory Council (ALAC) and released yesterday, shows the average age when teenagers start drinking is 13.6 years, compared to 14.5 years in the 2002 study. [New Zealand Drug] Foundation spokesperson Sally Jackman said the ever-younger drinking ages were a direct effect of the Government’s decision to lower the legal drinking age from 20 to 18 in 1999.”

Young, boozed and restless on city streets

The Dominion Post 18 August 2003

“Children are increasingly finding their way onto city streets to mimic drunken and violent behaviour...Every weekend children as young as nine are gathering on Wellington’s city streets to get drunk, fight and break the law...Since the drinking age was lowered to 18, he [Drug Arm team leader Nigel Webster] has become increasingly concerned to see younger and younger kids on the streets drinking, getting high, fighting and getting into trouble with police. In the past month alone, more than 80 youths have been picked up by police for drinking in inner-city streets”.

Nine –year-old drunk in street

The Dominion Post 14 August 2003

“Children as young as nine have been found drunk late at night on central Wellington streets as police crack down on growing numbers of underage drinkers. Wellington police area controller Inspector Marty Grenfell said police were dealing with much younger drinkers since the legal drinking age changed to 18. Much of the alcohol was being supplied to underage drinkers by ‘their 18 year old mates’.”

Pool plagued by drunk kids

Manukau Courier, 13 February 2003

Police are called to the Moana-nui-a kiwa leisure centre [Mangere] up to three times a day to deal with intoxicated teenagers, some of them unconscious in the lobby. ‘This is far worse than in previous years’ Ms Witehira [centre manager] says. These kids are so drunk they don’t know where they are, or what they’re doing, and my staff are having to deal with it.’ Mangere Ward Councillor John Kerr says a blanket alcohol ban is urgently needed before problems escalate further.

Drunk and just eight years old

Manawatu Standard 13 May 2003

“Girls as young as eight are routinely seen wandering the streets of Palmerston North absolutely drunk, says Drug-Arm co-ordinator Lew Findlay...Mr Findlay said underage drinking increased noticeably after the drinking age was lowered. He said many youngsters came into town carrying bottles and ‘as high as they come’.”

Drunk teens force early closing

The Timaru Herald, 23 June 2003

“Drunk obstreperous teenagers have force Timaru’s Burger King restaurant to shorten its late night opening hours... Manager Craig Stewart said yesterday that he’d had enough of his staff being verbally abused, excrement being smeared around the toilets and general loutish behaviour. ‘What I’m fed up with seeing is drunk 14 and 15 year olds getting themselves into trouble late at night.’ He believes lowering the drinking age has been a major contributing factor.”

Drink ‘is worse than drugs’

The New Zealand Herald, 23 June 2003

“Heavy drinking remains a far bigger health threat for young New Zealanders than methamphetamine and other hard drug addictions, health experts say. Dr Lynne Theron [emergency medicine specialist at Auckland Hospital] says and ‘astronomical’ proportion of injuries treated at the emergency department are alcohol-related. ‘The number one problem is still alcohol.’ ...’ ‘Alcohol is a bigger problem in term of numbers and because it’s a chronic relapsing condition which individuals have for a long time.’

Out-of – it drunken girls shock police

Dominion Post 3 January 2002

“Drunken young women on the streets of Wellington overwhelmed police on New Year’s Eve...The young women were so drunk they could have been fair game for anyone, Mr Gilpin [Wellington Area Controller Inspector] said...Lowering the drinking age had made the situation worse because it was easier for young people to get alcohol. Many had also been drinking “alcopops”, which were easy to drink and popular with young women.”

Return drinking age to 20 – Board

Howick and Pakuranga Times 2 September 2002

“The Howick Community Board wants the Manukau City Council to lobby central government for a review of the legal drinking age, and possibly return it to 20 years of age. The board believes the recent lowering of the legal drinking age has resulted in increased consumption and binge drinking for this age group.”

Overwhelming backing for age reversal

The Daily News 30 September 2002

“Daily News readers are overwhelmingly in favour of reverting the legal drinking age to 20. In Saturday’s Infoline telephone poll we asked whether the law should be put back to 20. Of the 418 calls received, 84% were in favour and 16% against.”

Binge culture must change

The Dominion February 28 2002

“One of the arguments for lowering the legal drinking age to 18 years in 1999 was that it would give young people the chance to develop a more mature approach to alcohol...Though the picture is mixed, evidence is mounting that easier access to alcohol has not resulted in a sudden surge of responsibility. Rather, in the words of the co-author of a study based on people treated in Auckland Hospital’s emergency department ‘it has exposed a younger age group to the societal norm of drinking to excess’.”

Teen drinkers

The Otago Daily Times, 25 September 2002 Editorial

“Lowering the drinking age did address some problems, ...but altogether too little thought was given by Parliament to enforcing the lower drinking age, to educating the new generation of young drinkers and to changing the immature drinking culture that permeates our society. The problem of under-age drinkers continues, but now they are a year or two younger. They are either buying their alcohol themselves, unchecked, or having a person of legal drinking age buy it for them. Consequently, the age of offenders committing senseless acts of violence and vandalism has also dropped. Violent crime has risen nationally and police, in the lower South Island at least, believe the lower drinking age has been the major contributing factor. More 16 and 17 year olds are responsible for these kinds of offences than before and most of them are consuming alcohol before offending. The emotional and physical health and well-being of young New Zealanders is also being jeopardised by the lower drinking age...”

Legal age to purchase alcohol

The Otago Daily Times, 25 September 2002

“ ‘The kids drinking seem to be getting younger and younger and I think that does directly reflect the lowering of the age,’ Mrs Leighton [Otago Principals Association chairwoman Inspector] said, ‘Teenagers with alcohol is a huge concern to schools and principals’.”

Alcohol behind upsurge in teen rapes – rape crisis

The Daily News, October 2002

“ ‘Alcohol is behind a dramatic increase in the number of teenage girls being raped,’ New Plymouth Rape Crisis co-ordinator Lorraine Jans says. Lowering the legal drinking age from 20-18 had been the main reason for the rise, she said.”

Drink- driving up for teens

Waikato Times, 24 October 2002

“A 50 percent increase in 16 year olds caught drink-driving in the Waikato has been recorded since the drinking age was lowered to 18.” Health Waikato Public Health Drug and alcohol agencies say teenagers as young as 13 are getting into more trouble with booze and want the drinking age returned to 20. Unit health protection adviser Ross Henderson cited an increase in disorder and vandalism, and growing concern at teen’s sexual behaviour as a result of alcohol consumption.

When kids go boozing

Sunday News, January 2002

“ ‘It is the first time Westport has had problems with 14, 15, 16 and 17 year old drunks. They were all badly affected by alcohol,’ says Westport Mayor Pat O’Dea. He says things have changed since the Government lowered the drinking age to 18 in 1999 and paved the way for liquor to be sold in supermarkets and on Sundays. And it’s not going to get any better until the government takes firmer action over alcohol.’ ”

Drunk teens pelt police

The Press, August 2002

“Drunken Oamaru party-goers, some as young as 14, pelted police with beer bottles and cans at the weekend, prompting concern that under-age drinking has spun out of control. The brawl had been fuelled by a lot of alcohol. Acting Senior Sergeant Lane Todd said that since the drop in the drinking age police were dealing with younger people who were not only drinking more but drinking spirits and pre-mixed drinks they could not handle.”

MP seeks drinking age of 20

NZ Herald, September 2002

“New Zealand First MP Ron Mark is proposing legislation to bring the legal age for drinking alcohol back to 20. He said the 1999 change had proved “disastrous” with more children than ever being found drunk on the streets. ‘We warned [back in 1999] that there would be problems with 13 and 14 year olds gaining

easy access to alcohol and that younger school children would get involved.’ He said there was plenty of anecdotal evidence from the police and health workers that the change in the age had had a negative impact on young people. There had been an increase in alcohol-related crime and more drunken teenagers were being picked up off the streets by police.”

Raising the drinking age

Media release, ALAC September 2002

“The Alcohol Advisory Council supports a return of the legal purchase age of alcohol to 20 years but says this change by itself won’t solve drinking problems for young people. ALAC’s Chief Executive Dr Mike MacAvoy says studies have shown that delaying the age at which social drinking begins for young people means it is less likely that they will get into difficulties in later life. He says ALAC believes a change to the law needs to be supported by a range of other measures.”

Bid to raise drinking age but community divided

Sunday Star Times, September 2002

“Grace McGregor, who works with young people for Levin’s Pacific Island Family Services, said lowering the drinking age was the ‘worst thing they ever did.’ ‘You get the argument that at 18 you are old enough to fight for our country and you should be able to drink. Sorry, drinking alcohol calls for an attitude that’s not found at that age.’

The Hospitality Association is strongly opposed to increasing the drinking age, said CEO Bruce Robertson, ‘Simply raising the age is will do very little to address the issue of minors and alcohol.’ he said.”

Push for return to drinking age of 20

NZMA Press Release 5 July, 2001

New Zealand Medical Association Chairman John Adams announced in July that the organisation favoured a return to the legal age of 20. It believed it was time for politicians to rethink their attitude to teenage drinking. The NZMA had opposed the lowering of the drinking age 2 years ago. It said then it was concerned that New Zealand could face many of the negative public health effects experienced by other countries which had lowered their drinking age. ‘Unfortunately, both anecdotal and research evidence seems to point to this happening.’ If a return to the legal age of 20 didn’t happen, the NZMA believed that ID checks of young people trying to buy liquor must be carried out more rigorously.”

Extracts Relating to Age Verification

Liquor stores caught in under-age trap

Taupo Times 28 November 2003

“Liquor shops in the Taupo area have been caught out selling alcohol to an under-age youth and police are blaming a relaxing of standards in the lead-up to Christmas...Sergeant Andy Lynch says a quarter of off-licence businesses in and around Taupo sold alcohol to the youth...“These results are disappointing, bearing in mind the high public profile and media attention that alcohol and youth have received recently”. Mr Lynch says the premises which sold alcohol to the youth will be put before the Liquor Licensing Authority in due course.”

14 year old drunk behind wheel on a school night

New Zealand Press Association 7 November 2003

“A 14-year-old girl three times over the legal limit after drinking in a Tauranga bar has been caught driving by police...A breath test showed the girl had 503mcg of alcohol per litre of breath. The limit for drivers under 20 is 150mcg...Mr Saunders [Acting Senior Sergeant] said the officers who processed the girl left a note on the file to say she definitely looked 14 and could not have been mistaken for being any older”.

Minors find buying booze a breeze

The Dominion Post 02 December 2002

“A police crackdown on Wellington liquor outlets has revealed that more than a third sold liquor to underage drinkers without checking their age.”

Retailer calls for mandatory ID scheme

Otago Daily Times 03 December 2002

“Liquor retailers have become the “whipping boys” of the liquor industry, a Dunedin retailer says, after a recent police sting found one in four outlets sold to under-age drinkers...He [Mosgiel New World owner Alan Gray] called on the Government to pass laws requiring identification be shown with every sale, no matter how old the buyer appeared. This was the only way to completely safeguard retailers, who could be caught out by people who looked much older than they were.”

Research backs call to raise drinking age

East and Bays Courier, March 2002

“Health researchers are calling for a law change making it compulsory for under 25s to show identification when buying liquor. The Alcohol and Public Health Research Unit says its one way to battle teenage drinking.

‘Lowering the drinking age has had an effect.’ says researcher Dr Habgood, ‘A large number of young teens are supplied alcohol by friends – because most 18 year olds associate with younger people.’ ”

Call for police to take a harder line

The Timaru Herald 08 August 2002

“More than 100 callers to the Herald on Wednesday want the police to take a harder line on teenagers and those who allowed their premises to be used for under-age drinkers to become drunk. They were angry that some elderly people had seen groups of teenagers smashing letter boxes and too scared to confront them in case they got ‘hit on the head or kicked over’.”

Prosecutions for nine as outlets sell teen alcohol

Howick and Pakuranga Times 9 September 2002

“Workers at nine off-licence liquor outlets in the Howick and Pakuranga area face prosecution after selling alcohol to a 16-year-old girl during an undercover police operation. “Of those 11, nine sold liquor to her, to a 16-year-old girl – no questions asked, nothing,” said Howick Community Constable Tom Molloy... ‘We are very disappointed with the results and with the ease she could buy alcohol – I was dumbfounded’.”

Editorial: Enforce the age limit

The New Zealand Herald 24 September 2002

“Parliamentarians who believed they had delivered astute reform that balanced greater freedom with heightened responsibility have been let down by a failure to enforce the age limit.”

Extracts Relating to Location of Premises

Booze and betting

Letter to the Editor, East and Bays Courier, 28 May 2003

“... ‘I am talking about the Peccadillo’s TAB St Heliers Sports Bar, Maskell Street. This property which I am sure many are aware of by now, is opposite my son’s primary school and adjacent to my daughter’s kindergarten...Not only did the council not allow us time to offer our objections, we have been made to feel we are in the wrong as the Council has followed the correct procedures. I now understand that when a liquor licence is granted no provision is made for surrounding, existing schools or environments that contain children. How can this be, when I am sure a lot of ratepayers have children and would find this situation inexcusable?’”

School outrage at licensing laws

News and Views, Issue 35, 2002.

“The principal of an Auckland college that suddenly found itself with a liquor outlet outside its gate said he was concerned that so little community consultation is required to open a licensed premise. ‘We are very concerned about this store a few metres from our front gate,’ says principal Brian O’Connell. ‘We are monitoring the situation and will be appealing the licence when it comes up for renewal next year. There appears little else we can do. I have written to the Auckland City Council and they have written a conciliatory letter but the process concerns me somewhat.’ The off-licence concerned is just across the road 10- metres from the school gate. Staff are concerned that a nearby park will become a drinking area for students. Nearby Kings College principal also thought it was highly inappropriate that the outlet was allowed to go ahead.”

Judge “powerless” to help

Manukau Courier. November 8 2001

“A District Court judge says he hears the concerns of Manurewa residents about a new bar for their neighbourhood, but he is powerless to help them...Manurewa residents opposing the application say Grace’s Place (formerly named Whizz Bar) is too close to a primary school. They are concerned about its opening hours, children’s safety, parking problems and the growing number of liquor outlets in their community...Judge Gatley says it is frustrating when people bring to the authority matters it has no power to act on. The [Liquor Licensing] Authority wanted schools, churches and hospitals to have more say in the application process.

This paper was prepared by Alcohol Healthwatch in consultation with representatives from the New Zealand Drug Foundation, New Zealand Police, New Zealand Fire Service and District Licensing Agencies in the Auckland region.

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