

**Submission
No 40**

**INQUIRY INTO ALCOHOLIC BEVERAGES ADVERTISING
PROHIBITION BILL 2015**

Organisation: Royal Australasian College of Surgeons

Date received: 22 November 2017

12 Nov 2017

Revd The Hon Fred Nile MLC
Committee Chair
NSW Legislative Council Portfolio Committee No. 1

Dear Sir

Subject: RACS submission to the NSW Upper House Portfolio Committee 1 Inquiry into Alcoholic Beverages Advertising Prohibition Bill 2015

Established in 1927, the Royal Australasian College of Surgeons (RACS) is the leading advocate for surgical standards, professionalism and surgical education in Australia and New Zealand. RACS is a not-for-profit organisation representing more than 7,000 surgeons and 1,300 surgical trainees. Approximately 95 per cent of all surgeons practicing in Australia and New Zealand are Fellows of the College (FRACS).

RACS is committed to ensuring the highest standard of safe and comprehensive surgical and patient care for the communities it serves, and as part of this commitment, it strives to take informed and principled positions on issues of public health.

The RACS NSW Committee not only represents the College in NSW, but has the privilege of representing almost 2000 Fellows and 450 Trainees as well as a number of International Medical Graduates to key stakeholders throughout our state.

The NSW RACS Committee and the NSW Trauma Committee greatly appreciates the opportunity to make a submission to the NSW Upper House Portfolio Committee 1 Inquiry into *Alcoholic Beverages Advertising Prohibition Bill 2015*.

RACS is an organisation with interests in public health and safety, and notes with concern, that current bias in NSW is weighted heavily in favour of the alcohol retail industry, with insufficient regard for community concern, or to alcohol related harm reduction.

As a NSW stakeholder group, RACS surgeons, along with other health professionals, treat the consequences of alcohol related harms....downstream effects of increased availability of alcohol, increased density of liquor outlets, decreased prices of alcohol and the increased advertising and promotion of alcohol sale and consumption.

RACS surgeons, in particular, often deal with alcohol attributable injury. We are concerned with the rising incidence and prevalence of alcohol attributable injury hospitalisations in NSW, as evidenced by NSW Health Data. Many of these presentations are preventable.

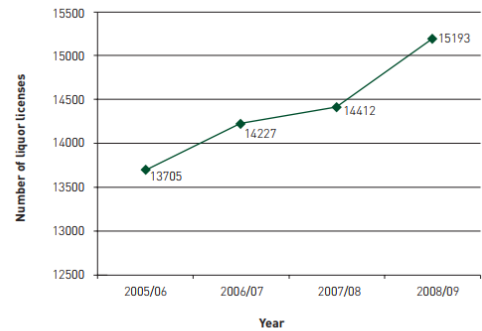
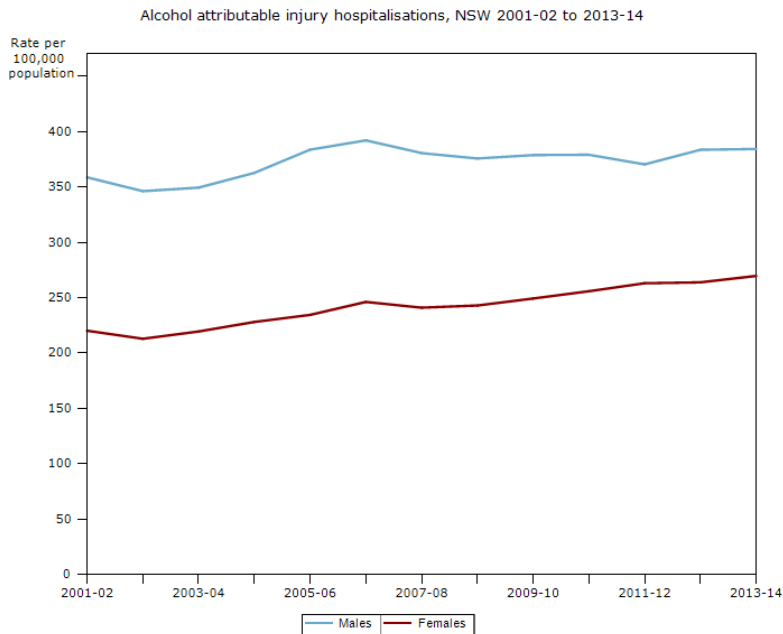


Figure 2: Number of liquor licences in NSW from 2005/06 to 2008-09
Source: NSW Department of the Arts, Sport and Recreation (2009).

Alcohol attributable injury hospitalisations ¹

Alcohol is no ordinary commodity. The molecule “ethanol” is a class 1A carcinogen, psychoactive, a depressant, teratogenic, and causative of foetal alcohol spectrum disorder.

RACS Position Paper “Alcohol Related Harm 2016” states that “Alcohol misuse is a causal factor in more than 200 diseases and injury conditions, including cirrhosis of the liver, inflammation of the gut and pancreas, heart and circulatory problems, sleep disorders, male impotency, and eye disease. Excessive alcohol consumption also raises the overall risk of cancer, including cancer of the mouth, throat and oesophagus, liver cancer, breast cancer and bowel cancer.”²

The NSW Government has a duty to reduce this burden of alcohol related harm. Relevant to this inquiry is the role of advertising in the promotion, sale and consumption of alcohol.

Children are particularly vulnerable to inculturation and normalization of alcohol consumption. They are particularly susceptible to the effects of advertising by the alcohol industry.³

With this in mind we need to broaden our horizons around advertising, particularly around secondary advertising including sponsorship of sports teams and the associations that are created to positive healthy endeavours. In the Annual Alcohol Poll 2017, released by The Foundation for Alcohol Research and Education (FARE), “more than three quarters of parents and guardians (77%) believe that their child under 18 years of age has been exposed to alcohol advertising, while 15% believe they have not been exposed and 9% are unsure. This represents an increase from 2016 (71%). The main ways in which parents and guardians believe their children under 18 have been exposed to alcohol advertising include at a supermarket/shopping centre (49%), while outside on the street (for instance, billboards, posters) (45%), via radio, television or at the cinema (43%), at a licensed venue (such as a club or restaurant) (42%), at an event (including sporting, music, cultural and other events) (37%) and via social media/internet (34%). When compared with 2016 results, there is an increase in the proportion of parents and guardians who believed their children under 18 were exposed to alcohol advertising while outside on the street (from 37% to 45%), at a licensed venue (from 35% to 42%) and on social media/internet (from 26% to 34%).”⁴

Alcohol advertising and promotions are prolific in Australia and presented through a variety of media, including print media, broadcast (including television and radio), digital media (including SMS text messaging, websites and social media platforms such as Facebook, YouTube and Twitter), merchandising, sponsorship of sporting and cultural events and product placement. Nowhere is off limits when it comes to alcohol promotion and marketing.

Alcohol promotion and marketing is regulated by an industry self-regulatory code, the *Alcohol Beverages Advertising (and Packaging) Code* (ABAC). The ABAC specifies that alcohol advertising must not encourage irresponsible consumption, infer that its consumption will change mood and/or contribute to financial, social and sexual success or have evident appeal to young people.

The ABAC has been repeatedly found to be a non-objective and ineffective regime which fails to serve the public interest.^{5,6,7,8}

The evidence

The volume of alcohol advertising young people are exposed to has been demonstrated to impact on their future alcohol consumption behaviour.

A review of 12 longitudinal studies of over 38,000 young people⁹ has shown that the volume of alcohol advertising they are exposed to influences the age that they start drinking as well as their consumption levels. This review demonstrated that the more alcohol advertising that young people are exposed to, the earlier they will start to drink, and the more they will consume if they already drink.

International evidence also shows that in countries with stricter alcohol advertising regulations there is a lower prevalence of hazardous drinking.

The solutions

Leading health authorities, including the World Health Organization and the Australian Medical Association, as well as international scientific reviews, recommend restrictions on alcohol marketing as part of a comprehensive approach to reducing alcohol-related harms.

Clear policy objectives are needed for the regulation of alcohol advertising.

Five key principles for the regulation of alcohol advertising that should be prioritised and adopted in alcohol advertising regulation in Australia:

- Alcohol advertising regulation must aim to reduce the overall volume of alcohol advertising.
- Alcohol advertising regulation must ensure that activities are not targeted at young people and are not in places where children and young people are present.
- Alcohol advertising regulation must cover all communication formats including advertising, sponsorship, and print and digital, including social media.
- Alcohol advertising must be independently regulated and have clear and consistent penalties for non-compliance.

- The alcohol industry should be required to report their annual expenditure on alcohol marketing activities to government to inform future policy directions.

In the longer term, legislative bans on alcohol advertising should be modelled on the *Tobacco Advertising Prohibition Act 1992 (Cth)*. This Act comprehensively imposes restrictions on the broadcasting and publishing of tobacco advertisements, and provides a precedent for this to occur for alcohol products.

**NSW DOMESTIC VIOLENCE
DEATH REVIEW TEAM
REPORT
20152017**

This recent NSW Coroners Report cites literature suggesting that reducing alcohol use in the community is likely to have a positive effect on reducing rates of domestic and family violence.

“Reducing alcohol use and availability can form part of broader public health strategies around reducing alcohol related harm – including reducing trading hours, reducing availability and **limiting product advertising** – and these initiatives are likely to have a positive health effect at a population level. However responses can also encompass narrower, more targeted, initiatives”.¹⁰

Summary

Alcohol related harm minimization is one of the fundamental aims of the *NSW Liquor Act*.

Reduction of the existing level of this harm in NSW, must be one of the instruments against which any legislative amendments which affect alcohol sale and use are assessed.

RACS endorses the principles espoused in the *Alcohol Beverages Prohibition Bill 2015*, which aims to encourage a healthier lifestyle by prohibiting advertising and other promotional activities aimed at assisting the sale of alcoholic beverages, and consequently reducing the incentive for people to consume alcohol.

The Bill, which also provides for the declaration of local option areas within which the purchase, sale or delivery, or the consumption in a public place, of alcoholic beverages will be an offence, can reasonably be anticipated to assist in the reduction of alcohol related harm.

RACS is grateful for the opportunity to contribute into this process of review.

Yours sincerely,

Chair RACS Trauma Committee

¹ HealthStats NSW, Alcohol attributable injury hospitalisations. Available from: http://www.healthstats.nsw.gov.au/Indicator/inj_alcafhos/inj_alcafhos?&topic=Injury%20and%20poisoning&topic1=topic_inj&code=inj

² Royal Australasian College of Surgeons, Position paper on alcohol related harm. Available from: https://www.surgeons.org/media/20784483/2016-08-02_pos_rel-gov-025_alcohol_related_harm.pdf

³ Weintraub Austin E., Chen M., Grube J. et al, How does alcohol advertising influence underage drinking? The role of desirability, identification and scepticism. *Journal of Adolescent Health*, Volume 38, Issue 4, April 2006, pages 376-384. Available from: <http://www.sciencedirect.com/science/article/pii/S1054139X05004064>

⁴ Foundation for Alcohol Research and Education, 2017 Annual Alcohol Pole. Available from: http://fare.org.au/wp-content/uploads/FARE-ANNUAL-ALCOHOL-POLL-2017-REPORT-FINAL_DIGITAL.pdf

⁵ Donovan et al, Magazine alcohol advertising compliance with the Australian Alcoholic Beverages Advertising Code. Available from: <https://www.ncbi.nlm.nih.gov/pubmed/17364839>

⁶ Jones et al, Adolescent and young adult perceptions of Australian alcohol advertisements. Available from: <http://www.tandfonline.com/doi/abs/10.3109/14659890802654524>

⁷ Pettigrew et al, Introducing and applying a new Australian alcohol advertising code. Available from: <http://onlinelibrary.wiley.com/doi/10.1002/pa.1444/abstract>

⁸ Carah et al, Breaching the code: Alcohol, Facebook and self-regulation. Available from: <http://fare.org.au/archives/12710>

⁹ Anderson P., De Bruijn A., Angus K., Gordon R., Hastings G., Impact of Alcohol Advertising and Media Exposure on Adolescent Alcohol Use: A Systematic Review of Longitudinal Studies, *Alcohol and Alcoholism*, Volume 44, Issue 3, 1 May 2009, pages 229–243. Available from: <https://academic.oup.com/alcalc/article/44/3/229/178279>

¹⁰ Snowden, Alcohol outlet density and intimate partner violence in a nonmetropolitan college town: accounting for neighborhood characteristics and alcohol outlet types (2016) 31(1) *Violence and Victims*