

SUBMISSION TO THE SENATE COMMUNITY AFFAIRS COMMITTEE

INQUIRY INTO READY-TO-DRINK ALCOHOL BEVERAGES

May 2008

Delivering local health solutions through general practice



Australian General Practice Network (AGPN) is the new name of the Australian Divisions of General Practice (ADGP) which was established in 1998 as the peak national body representing 115 divisions of general practice and their state-based organisations across Australia. We are the largest voice for general practice in Australia with over 95 per cent of Australia's GPs members of their local division. The Network delivers local heath solutions through general practice.

The Network is involved in a wide range of activities including health promotion, early intervention and prevention strategies, chronic disease management, medical education and workforce support.

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About the Australian General Practice Network

Established in 1998, the Australian General Practice Network (AGPN) is the peak national body representing 115 divisions of general practice and their state-based organisations (SBO's) across Australia. The first local divisions were established in 1992. Over 95% of general practitioners are members of a local division of general practice. The AGPN is committed to:

- Supporting the development of a high quality primary health care framework to improve the health of all Australians.
- Representing divisions of general practice across Australia.
- Being the voice of divisions of general practice to the Australian Government.
- Assisting and advocating for divisions of general practice.
- Informing the public about issues affecting general practice.
- Promoting the exchange of skills, information and ideas between divisions of general practice.

In this regard the AGPN is one of the largest representative voices for general practice and plays a key role in policy development for primary health care matters through a number of national programs targeted to improve the health of all Australians.

Introduction

The Australian General Practice Network (AGPN) welcomes the opportunity to provide a submission to the Senate Community Affairs Committee inquiry into 'Ready-to-drink' (RTD) alcohol beverages.

AGPN has for some time drawn attention to the issues around youth binge drinking and the high consumption of alcopops. AGPN recently made submission to the *Community Affairs Committee Inquiry into the Alcohol Toll Reduction Bill* (2007), including information and recommendations regarding youth binge drinking.

In 2003, AGPN¹ also investigated alcohol consumption patterns of young people (12-21 year olds) in Australia and produced the report '*Ready to Drink? Alcopops and youth binge drinking*'. This report is relevant to a number of the Committees terms of reference and is attached for the Committee's consideration at **Appendix A**.

Key findings from that report which support the Government's decision to increase tax on RTD alcohol beverages include:

- Identification of a high level of alcohol use among young people in all age groups surveyed. 89% of young people surveyed had previously drunk alcohol.
- Alcopops were the most common drink consumed by young people with 38.8% stating that an alcopop was the last drink they consumed. This was followed by other spirits (21.3%), beer (18.5%) and wine (10.5%).
- Alcopops were most popular among young women and **underage drinkers**.
- Alcopops were by far the most popular alcoholic drink among **12-14 year olds**.
- The popularity of alcopops decreased markedly with increased age, the only drink category where this occurred.

¹ At that time, AGPN was known as the Australian Divisions of General Practice (ADGP)

- 75% of young people surveyed reported drinking alcopops at least once a week. 22% of respondents reported drinking an alcopop on three or more days a week and 1% stated that they drunk an alcopop every day in a typical week.
- Young people who drink alcopops frequently reported doing so at levels above what would be considered safe for adults. 54% of alcopop drinkers reported drinking three or more alcopops per session (equivalent to 3.5 standard drinks or more). 17% of alcopop drinkers stated that they consumed five or more alcopops per session (approximately six or more standard drinks).
- People whose last drink was an alcopop reported a higher incidence of drunkenness than people in any other drink category. 32% of people whose last drink was an alcopop reported getting drunk at least once a week in the past month (compared with 20% of beer drinkers and 12% of wine drinkers).
- 59% of respondents stated that they were concerned about a friend's consumption of alcopops. People whose last drink was an alcopop were more likely to state that they are concerned about a friend's alcopops consumption with 75.5% of this group stating that they have concerns about a friend.

These findings are consistent with the range of research findings in the broader literature indicating that alcohol use in young people has been shown to be associated with a range of serious problems, including: sexually transmitted diseases, motor vehicle accidents, assault, unplanned pregnancies, violence, truancy, crime and the use of illegal drugs. Longer term health effects of high levels of alcohol use include heart disease, liver damage, high blood pressure and depression.

Response to the Committee's Terms of Reference

(A full list of the Committee's Terms of Reference can be found at Appendix B)

(a) The effectiveness of the Government's proposed changes to the alcohol excise regime in reducing the claims of excessive consumption of ready-to-drink alcohol beverages

AGPN supports the Government's decision to increase tax on RTD alcohol beverages. International evidence indicates that the best mix of measures to address high-risk alcohol consumption and youth binge drinking **must include amendments to price and taxation of RTD alcoholic beverages.**

Higher priced alcohol is associated with per capita decline in consumption. Small price and taxation changes can make a difference to alcohol consumption. In particular, younger people and those who drink at risk levels are sensitive to price changes². It is important that the tax is carefully regulated to ensure it keeps ahead of increases in disposable income.

AGPN considers a volumetric tax for all alcohol products should adopted in the long term and that planning, research and consultation directed towards adoption of a volumetric tax should commence immediately. AGPN also urges for the review of the taxation regime for RTD alcohol beverages to take into account complementary strategies to address alcohol related problems. These strategies include strengthening primary care approaches to identify and reduce risky alcohol consumption.

² Chaloupka, F, Grossman, M, & Saffer, H (2002) Effects of Price on Alcohol Consumption and Consequences, vol 26, no. 1, Journal of Alcohol Research and Health

Broad submission to the inquiry terms of reference (b) to (i): General evidence relating to alcoholic beverage use and the impact of excise increases on consumption

Much of the evidence around alcoholic beverage use and the impact of excise increases on its consumption is available in AGPN's previous report at **Appendix A**. AGPN draws the Committee's further attention to the range of additional international and Australian-based evidence regarding the consumption of alcohol in Australia, and particularly alcopops among younger Australians. These are outlined below.

Effects of Youth Binge Drinking

The consumption patterns of alcoholic beverages, including RTD alcoholic beverages, have been well documented and have sparked high-level concern about the rates of youth binge drinking. This concern has been fuelled more recently with evidence indicating Australians are starting to drink at younger ages and consuming higher quantities of alcohol.

Risky consumption of alcohol and drinking alcohol from a young age has a range of serious health-related consequences. At some point in their lives, one in ten Australians experience a problem with alcohol. Individuals within this 'at risk' group are more likely to have consumed their first full serve of alcohol at 13 or 14 years of age, showing a strong link between early teenage drinking and alcohol problems in later life³.

Over the period of 1990-2002, an estimated 2,643 young people aged between 15 and 24 years died from alcohol-attributable injury and disease caused by risk/high risk drinking in Australia⁴; and over 100,000 young people were hospitalised for alcohol-attributable injury and disease over a 9-year period $(1993/94-2001/02)^5$.

Consumption of RTD alcoholic beverages (alopops)

AGPN is concerned by the significant growth in the consumption of alcopops, particularly among Australian youth. Statistics from the ABS indicate that consumption of alcopops between 2004 and 2007 has risen by nearly five million litres (from 13. 6m litres in 2004 to $18.1 \text{ million litres in } 2007)^6$.

A key reason for the high consumption of alcopops among young Australians is the appeal of taste (alcopops contain high levels of sugar and pleasant flavours often masking the base flavour of alcohol) as well as product appearance and marketing⁷,⁸.

AGPN supports the finding in the literature that price is also a key factor prompting the high consumption of alcopops in teenage populations and considers an increase in RTD excise is an effective tool in reducing levels of alcohol related harm and binge drinking.

³ Pfizer Australia, 2005, Health Report: Alcohol – Part of the Australian Way of Life <u>www.healthreport.com.au</u> ⁴ National Drug Research Institute, 2002, Trends in Youth Alcohol Consumption and Related Harms in Australian Jurisdictions 1990-2002 <u>www.ndri.curtin.edu.au</u>

⁵ ibid

⁶ Australian Bureau of Statistics Apparent Consumption of Alcohol, Australia 2005-06 <u>www.abs.gov.au</u>

⁷ Australian Drug Foundation, 2005, Submission to the Review of alcoholic beverages that may target young people' www.adf.org.au

⁸ Copeland et al, 2007, Young Australians and Alcohol: the acceptability of ready to drink alcoholic beverages among 12-30 year olds, Addiction, vol 102, issue 11, Blackwell Synergy

(j) the effect of alternative means of limiting excessive alcohol consumption and levels of alcohol related harm among young people.

While an increase in the excise for RTD alcoholic beverages is considered to be an effective tool for reducing youth binge drinking, AGPN urges for the development of a comprehensive and multi-faceted approach to addressing this issue. The four key components of this approach, in addition to excise increase, are outlined on the following pages.

(i) Strengthening the primary care response to address alcohol risk factors

Strategies which strengthen the capacity of general practice and the primary care sector to recognise and respond to risky alcohol consumption are integral in developing an effective response to the high level of alcopop consumption.

With over 70% of Australians visiting a GP every year, GPs are well placed to identify and assist patients with drinking problems.

The divisions network has made a significant contribution to supporting GPs in this role through the implementation of targeted primary care initiatives.

To ensure high quality management of alcohol related issues in the community setting, training programs that address alcohol prevention and treatment are offered through divisions. Currently, the 'Can Do' Initiative: *Managing Mental Health and Substance Abuse in General Practice* (funded through the Australian Government Departments of Health and Ageing and Veterans' Affairs) offers a multidisciplinary model of education and training to a wide range of community based health care professionals, including general practitioners.

Topics include those targeting alcohol and depression, a high-prevalence comorbidity in the Australian community. 'Network training' workshops, which concentrate on building effective pathways of care for patients with alcohol and mental health issues and clinical education outlining best practice in working with patients in the community with alcohol related issues are offered. A number of other training packages are available that target a range of population groups and include other high prevalence mental health and substance use disorders commonly seen by general practitioners in the local community. All of these acknowledge that polydrug use is common and that alcohol is almost always one of the substances used. A '*Can Do'* for Indigenous People training package is currently in development. This will have a high focus on alcohol consumption and mental health issues.

The introduction of *headspace* (the National Youth Mental Health Foundation) provides an excellent opportunity for working on health promotion, prevention and early intervention strategies to assist young people in avoiding risks associated with alcohol use and their mental wellbeing. Extensive training is planned for those working in headspace sites to ensure the best possible translation of research into practice at the local level. All *headspace* sites include divisions of general practice in their membership.

The use of *Lifescripts* in general practice encourages development of healthy lifestyles. *Lifescripts* encourage and support general practice to focus on the priority areas of prevention, early intervention and chronic disease management by promoting and supporting positive lifestyle behaviour change in patients. Lifescripts build on work undertaken on the SNAP risk factors (smoking, nutrition, alcohol and physical activity).

(ii) Strengthening alcohol labelling

AGPN supports the stance of the Public Health Association of Australia, which notes the importance of "*ensuring that alcohol falls under the same banner as other foods with regard to identifying content. Food and other beverages are required to state information so that*

consumers have the ability to assess the health impact that food and additives might have on their own health and wellbeing. There is simply no good reason why alcohol should be exempt".

AGPN considers the labelling of RTD alcoholic beverages should include health warnings about the short and long-term health affects of underage and binge drinking, as well warnings about adverse health affects of the high sugar content, preservatives and additives in alcopops. Furthermore, producers of alcopops should make efforts to ensure labelling and promotion of products does not target teenage drinkers.

(iii) Curbing availability and improving responsible service of alcohol

Alcohol is freely available in the Australian community. Restricting the number of licences issued to outlets and the hours when alcohol is sold assists in the reduction of a range of harms resulting from alcohol consumption. Requiring stronger safety measures in licensed premises (eg pubs and clubs) reduces opportunity for intoxication. Strengthening the system for responsible service of alcohol reduces violent behaviours and social disturbance, especially in high risk settings such as late night venues (eg clubs and bars) where crowd control is often poor. Improving safety measures in licensed premises (eg refusing service to intoxicated patrons, employment of trained staff to manage crowd control and avoidance of promotional activity such as cheap drink nights, happy hours and training staff to implement these) reduces injury caused by violent behaviours⁹.

AGPN recommends strengthening a national system for responsible service of alcohol, with requirements linked to issue/retention of an alcohol licence.

(iv) Role of Parenting

A number of teenagers report drinking alcohol at home (30%) or at a friend's house $(35\%)^{10}$. Furthermore, 35 per cent of Australians feel it is appropriate to give children an alcoholic drink in the home at 15 or 16 years of age¹¹.

Parental supervision has been associated with lower risk alcohol consumption¹², and it is vital that parents provide positive role models to assist teenagers to manage alcohol in a healthy manner.

However, many parents qualitatively report concern about the level of their child's drinking and seek advice from a range of sources including primary care practitioners, family members and friends.

AGPN supports the national rollout of a positive parenting program, *Every Family*, based on the highly successful and evidence based Triple-P program. The program has been developed to assist parents in managing their child's behavioural problems and has been clinically evaluated, with findings indicating a significant improvement in social, health and vocational outcomes for children participating in the initiative.

Of particular relevance is the component of the program specifically developed to assist parents in managing their teenager's behaviour and to develop strong and positive relationships.

⁹ Room R., Wilkinson C. Information and warning labels on alcohol containers, sales places and advertisements: experience internationally and evidence on effects. AER Centre for Alcohol Policy Research and Turning Point Alcohol and Drug Centre. Victoria. 2008.

¹⁰ King, E et al, 2005, Alcohol consumption patterns among Australian 15-17 year olds from 2000 to 2004, accessible www.health.gov.au.

¹¹ Pfizer Australia, 2005, Health Report: Alcohol – Part of the Australian Way of Life <u>www.healthreport.com.au</u> ¹² King, E et al, 2005, Alcohol consumption patterns among Australian 15-17 year olds from 2000 to 2004, accessible www.health.gov.au.

AGPN recommends the national roll out of the Every Family initiative which will provide an effective initiative for preventing significant behavioural problems in teenagers, and will also assist parents to manage these problems if they arise.

Summary

AGPN supports the Government's decision to increase the tax on alcopops and RTD alcoholic beverages. This decision is underpinned by a large body of evidence indicating that alcopop consumption is a key factor in underage binge drinking, with rates of alcopop consumption increasing at an alarming rate over the last three years.

International evidence shows that an increase in price and excise on alcoholic beverages has a direct association with per capita decline of alcohol consumption.

While AGPN supports an increase in excise on alcopops as a key strategy in managing youth binge drinking, it strongly calls for the development of a multifaceted strategy, integrated with the primary care sector, to address this issue. AGPN calls on the Committee to consider the role of GPs and primary care practitioners in identifying and managing youth alcohol problems and the impact of product labelling and current regulatory measures for alcohol service. In addition, in forming its recommendations, AGPN calls on the Committee to consider evidence-based initiatives to strengthen the role of parenting in preventing youth behaviour problems.

Appendix A

Ready to Drink? Alcopops and youth binge drinking



A report from the Australian Divisions of General Practice December 2003

Cover photo taken from one Alcopop producer's website promoting a schoolies week party to young people.

About ADGP

Australian Divisions of General Practice (ADGP) is the peak national body representing 121 Divisions of General Practice across Australia. About 94 per cent of GPs are members of a local Division of General Practice.

Divisions are funded by the Commonwealth to support general practice to deliver high quality care to the Australian community. General practice is the core of Australia's health system. Around 90 per cent of Australians visit their GP each year, and these visits are the gateway to the country's hospital, specialist and diagnostic services.

General practice plays a major role in childhood immunisation, management of chronic diseases such as asthma and diabetes, identifying and treating mental illness, and working with indigenous communities in remote parts of Australia.

Within the community, Divisions are central to the integration of general practice with other health sectors – pharmacy, hospitals, and community and area health services.

Through linking GPs in local areas, Divisions are the voice of general practice in the community, with the concerns and views of GPs in day-today practice being passed through local divisions to the State Based Organisations and ADGP, which in turn presents those views to Federal and State Governments.

ADGP is one of Australia's largest representative voices for general practitioners. As part of ADGP's representation program, grass roots GPs sit on about 60 key decision-making bodies in the health sector, having direct input into general practice financing, GP workforce and training, clinical practice and practice management and other key areas influencing the future of general practice.

ADGP also coordinates a number of National Programs through Divisions of General Practice to improve the health of all Australians. ADGP's programs cover a broad range of primary care issues, including immunisation, mental health and practice nursing. These programs aim to strengthen primary health care to better meet the needs of the Australian community.

ADGP also auspices the National Divisions Youth Alliance (NDYA) a national youth health program that aims to improve the health of young people in Australia through the active participation of GPs and Divisions of General Practice. NDYA is working to strengthen the ability of GPs and Divisions to respond to the health needs of young people through national collaboration.

ADGP is governed by a Board of Directors comprising two GPs from each State and one GP from each Territory. Half the Directors are GPs working in rural areas of Australia. There is also a consumer representative who sits on the Board as an observer, nominated by the Consumers' Health Forum.

Through supporting GPs and advocating on behalf of general practice, the Australian Divisions of General Practice is a vital part of Australia's primary health care system.

Alcopops Report

Abstract

ADGP investigated current alcohol consumption patterns among young people aged 12 - 21 in Australia. The research sought to investigate among young people and to determine whether there is a relationship between the type of alcoholic drinks young people are consuming and their level of risk drinking.

The study found that "alcopops" or "alcoholic sodas" are the most popular alcoholic drink among young people aged 12-21. In particular, these products are most popular among underage drinkers (aged 12-17) and among females. It found that there is a relationship between alcopop consumption and risk drinking, with young people whose last drink was an alcopop reporting a higher incidence of drunkenness than young people in any other drink category. The survey also found that there was a high level of concern among young people about the consumption of alcopops in their peer group.

Based on these findings, ADGP recommends further research and community consultation to be undertaken to determine the relationship between alcopop consumption and risk drinking among young people and to develop appropriate policy responses.



SPOT THE DIFFERENCE!

Half the drinks above are Alcopops and half are popular brands of non-alcoholic soft drinks

Introduction

A number of recent research studies have demonstrated that young Australians have high levels of alcohol consumption. These studies have shown that the level of alcohol consumption and the level of binge drinking among young people have increased dramatically in the past decade.

However, there has been little research conducted into the specific alcoholic products young people are drinking and their impact upon youth alcohol consumption. This is despite the fact that the alcohol market has changed markedly in the past decade, with the introduction of a new breed of "ready to drink" alcoholic products called "alcoholic sodas" or "alcopops". Since their introduction into Australia in 1995, these products have become the fastest growing sector ever experienced by the alcohol market. Anecdotal evidence suggests that alcopops are particularly popular among young people, in particular young women. The fact that the

dramatic increase in youth drinking rates has occurred during the period in which alcopops have been introduced into the Australian market raises questions about the relationship between these products and the concurrent rise in risk drinking among young people. This study investigates the relationship between the consumption of alcopops and the level of risk drinking among young people and to gauge whether young people themselves are concerned about the consumption of alcopops among their peer group.

The need for a comprehensive policy response to the high level of risk drinking among young people in Australia has been acknowledged by both Federal and State/Territory Governments and supported by stakeholder groups and the general community. For this policy response to be successful in reducing the harms associated with alcohol use among young people, it must be based on comprehensive research that accurately identifies current youth alcohol consumption patterns and the factors that influence risk drinking behaviours. This report is a contribution to this debate.

What are Alcopops?

Alcopops are pre-mixed, spirit-based drinks, also called alcoholic sodas or alcoholic soft drinks. They are a distinct category of the 'ready-to-drink' or RTD segment of the alcohol market. Alcopops were first sold in Australia in 1995 and the market for these products has expanded rapidly since that time. There are currently about 400 alcopop products available in Australia, an increase of 30 per cent in three years.

Alcopops are typically based on "white" spirits such as vodka and white rum which have a blander flavour than dark spirits such as bourbon. They typically contain high levels of sweeteners, colouring and flavouring and in appearance and taste they resemble soft drinks more than traditional alcoholic drinks. Alcopops are available in a wide range of flavours including lemon, passionfruit, raspberry and blueberry. Alcopops have an average alcohol content of around 5 per cent, which is stronger than normal strength beers.

Method

A total of 400 young people in Canberra, Sydney and Melbourne between the ages of 12 and 21 were interviewed using the street intercept survey method. This is a common methodology for researching drug and alcohol use patterns among young people. The young people were asked five questions about their own alcohol consumption patterns and one question about their friends' consumption of alcopops. The interviews took approximately three minutes to complete and were anonymous.

No surveys were conducted with young people who were drinking alcohol at the time and no surveys were conducted outside of a venue selling alcohol. Young people accompanied by adults were not interviewed. Only four young people approached declined to undertake the survey.

	12-14 years	15-17 years	18-21 years	TOTAL
Males	63	80	56	199
Females	71	81	49	201
TOTAL	134	161	105	400

The following table provides a breakdown of the respondents by age and gender:

Quote from survey respondent: "They taste so good. Once you drink one you just can't stop" Tegan, 14

Summary of Findings

This study found a high level of use of alcohol among young people in all age groups surveyed. 89% of young people surveyed had previously drunk alcohol. The proportion of young people who had never had an alcoholic drink decreased with age.



Fig 1: Percentage of young people who had never consumed an alcoholic drink by age group

Alcopops were the most common drink consumed by young people with 38.8% stating that an alcopop was the last drink they consumed. This was followed by other spirits (21.3%), beer (18.5%) and wine (10.5%).



Fig 2 Last drink consumed by 12-21 year olds

Alcopops were most popular among young women and underage drinkers. 45% of female respondents stated that an alcopop was the last drink they consumed compared with 33% of males.



Fig 3 Last drink consumed by gender

Alcopops were by far the most popular alcoholic drink among 12-14 year olds. More young people in this age group reported an alcopop as their last drink than any other drink category in any of the age groups surveyed. The popularity of alcopops decreased markedly with increased age, the only drink category where this occurred. Young people aged under 18 were more than twice as likely to drink alcopops than people aged 18-21 (46% compared with 20%).



Fig 4 Last drink consumed by age

While alcopops were most popular among 12-14 year olds, alcopops were consumed regularly by a majority of young people in every age group. 75% of young people surveyed reported drinking alcopops at least once a week. 22% of respondents reported drinking an alcopop on three or more days a week and 1% stated that they drunk an alcopop every day in a typical week.

Quote from interview: "My brother buys them for us and we drink a case and a half every weekend" Kelli 13



Fig 5 Number of days per week alcopops are consumed

Young people who drink alcopops frequently reported doing so at levels above what would be considered safe for adults. 54% of alcopop drinkers reported drinking three or more alcopops per session (equivalent to 3.5 standard drinks or more). 17% of alcopop drinkers stated that they consumed five or more alcopops per session (approximately six or more standard drinks). More than six standard drinks a day is considered a harmful level of drinking in adult males.



Fig 6 Number of alcopops drunk per night/drinking session

Young people surveyed also reported a high incidence of perceived drunkenness. 58.5% of young people stated that they had got drunk at least once in the past month and 21.7% stated that they got drunk 4 times or more in the past month. People whose last drink was an alcopop reported a higher incidence of drunkenness than people in any other drink category. 32% of people whose last drink was an alcopop reported getting drunk at least once a week in the past month (compared with 20% of beer drinkers and 12% of wine drinkers).



Fig 7 Incidence of drunkenness four times or more in the past month by last drink

The young people surveyed reported a high level of concern about alcopop consumption among their friends. 59% of respondents stated that they were concerned about a friend's consumption of alcopops. People whose last drink was an alcopop were more likely to state that they are concerned about a friend's alcopops consumption with 75.5% of this group stating that they have concerns about a friend.



Images taken a website promoting one alcopop product.

Quote from interview: "They're girls drinks but sometimes at the end of a big night when you can't drink anymore beer they go down really well" Michael 15

Discussion

ADGP's study indicates that young people in Australia are consuming alcohol at levels that cause significant health and social harms. The findings of this study are supported by recent Australian research into this area that has demonstrated that the rate of risk drinking among young people has increased significantly in the past decade.

The high level of alcohol use among young people in Australia raises serious health and social concerns. Alcohol use in young people has been shown to be associated with a range of serious problems, including: sexually transmitted diseases, motor vehicle accidents, assault, unplanned pregnancies, violence, truancy, crime and the use of illegal drugs. Longer term health effects of high levels of alcohol use include heart disease, liver damage, high blood pressure and depression.

While moderate alcohol use in adults has been shown to provide some health benefits, these protective health effects do not occur in young people. Mortality associated with alcohol use in young people rises in line with consumption and there is no recommended safe level of alcohol

consumption for people under the age of 18. Research has shown that young people are more vulnerable than adults to alcohol-related harms and are less able to assess the risks associated with the inappropriate consumption of alcohol. As there is a strong association between the level of alcohol use and the level of violence experienced by young people, young people who drink alcohol are at particular risk of alcohol-related violence

"Growth has been phenomenal, especially since the introduction of the GST which brought down the retail price of RTDs (alcopops). The growth has kept on going and at this stage [there's] no sign of stopping.

Alcoholic sodas are definitely the drinks that young people are into at the moment, young women in particular. I think these are drinks that are very dangerous. They initiate young people into drinking alcohol at a very young age. They don't even realise how alcoholic they are".

Bottle Shop Operator, Adelaide. (The Adelaide Advertiser 15/3/2003) This study shows that alcopops are widely consumed by young Australians with 75% of young people surveyed reporting drinking these products at least once a week. In particular, alcopops are associated with drinking in younger age groups and are the drink of choice for over half of 12-14 year olds. Alcopops are the only alcoholic drink whose popularity declines with age, in fact 12-14 year olds are more than twice as likely to drink alcopops as 18-21 year olds. This finding indicates that alcopops may be playing an "initiation" role in introducing young people to alcohol at a young age, before they move onto other types of alcoholic drinks, such as wine and beer. While alcopops are the most popular alcoholic drink for both genders, they are significantly more popular among young women than young men. The high rate of alcopop consumption among young women is particularly concerning given that the safe level of alcohol use for women is lower than that for men.

The work suggests there is a relationship between the type of alcoholic product consumed and the incidence of

reported drunkenness. Young people whose last drink was an alcopop report getting drunk more often than people drinking any other alcoholic beverage. This indicates that alcopops may be a specific risk factor for binge drinking among young people. Young people also report widespread concern for their friends about the unsafe level of consumption of these products.

This study did not address why young people are choosing to drink alcopops in preference to other alcoholic drinks. Previous research undertaken on alcohol preferences among young people has found that the two main factors influencing young people's choice of alcoholic beverage are taste and price.

Anecdotal evidence collected as part of this research suggests that young people like the taste and appearance of alcopops. In their packaging, branding and marketing, alcopops appear to be designed to appeal to a younger age group than are traditional alcoholic drinks, such as beer and bottled wine. Popular brands of alcopops sponsor youth events such as dance parties at schoolies week where large numbers of underage people are present. Other marketing techniques used by alcopop manufacturers include dedicated websites promoting their products, an environment in which there is no way to restrict these messages to people over 18. However, despite these practices, there are no specific policies or guidelines for the marketing of these products to young people.

Another possible factor influencing young people's choice of beverage is availability. Alcopops are typically sold in smaller units and priced at a level that may be more affordable for young people than bottled wine, beer or spirits (often single bottles costing \$3-\$4 each). Whether there is a link between the dramatic rise in consumption of these products and the lowering of their cost as a result of the implementation of the GST, needs to be established.

The alcopop market has developed over the past eight years largely without scrutiny by governments or public health authorities. The impact that these products may be having on youth risk drinking has not been the subject of any major research studies. Other alcoholic products, such as alcoholic flavoured milks, alcoholic icy poles and alcoholic jellies, have been banned from sale in Australia on the basis that they are likely to appeal to children and young people and could be confused with similar non-alcoholic products. However, alcopops, which resemble soft drinks in their appearance, packaging and taste, have been allowed to be freely promoted and sold to young people.

ADGP's survey suggests a high level of consumption of alcopops by young people in Australia and that these products are associated with high levels of youth risk drinking. Additional research is needed to determine the specific factors that influence young people's consumption of alcopops and to inform the appropriate policy responses to reduce the harms associated with youth alcohol use. This research should include a comprehensive review of current policies on the sale, marketing and taxation of alcopops.



Quote from survey respondent: "My favourites are blueberry and raspberry, they taste just like normal soft drinks so you can drink them really fast" Carly 17

Further research recommended

Due to the serious harms associated with the misuse of alcohol, ADGP recommends that further research is needed to determine whether alcopops are contributing to higher levels of alcohol misuse among young people.

Funding for this research and consultation could come from the alcohol industry, through a dedicated independent research fund, administered jointly by Commonwealth and State/Territory Governments and overseen by an expert committee.

The following issues are suggested as priority areas for research:

Priority Areas for research

• Link between Alcopop consumption and alcohol-related harms among young people

Are alcopops contributing to the high levels of alcohol use among young people? What is the relationship between consumption of alcopops and alcohol-related harms, such as violence, sexual assault, unwanted pregnancies, motor vehicle accidents and others?

- Marketing of Alcopops and other alcoholic drinks to young people How does the current marketing of alcopops, including sponsorship of youth-targeted events, such as dance parties at schoolies week, web sites and other forms of entertainment targeted at young people, influence young people's drinking choices?
- Availability of Alcopops

Do alcopops play a role in encouraging a transition from non-alcoholic to alcoholic beverages in young people because they closely resemble soft drinks in appearance and taste?

• Alcopop pricing

How does the price of alcopops affect their use by young people? Has the reduction in the price of alcopops (due to the introduction of the GST) resulted in higher levels of consumption by young people? Would an increase in price reduce consumption?

The results of this research should then be made available to the community through a consultation process to develop policies on the regulation of alcopops that reflect community concerns about youth alcohol use and that support other initiatives to encourage the responsible use of alcohol among young people.

Questions for policy makers

- **Taxation policy** Should the tax on alcopops be increased to reduce consumption among young people?
- Marketing of alcopops Should alcopops be marketed to young people?
- Sale of Alcopops and other alcoholic drinks to people under 18 How can sales of alcohol to underage drinkers be restricted? Should there be greater enforcement of restrictions on selling alcohol to people under 18 at the point-of-sale? Should the unit of sale of alcopops be restricted to larger units (for example, packs of eight or more, larger bottles etc) to discourage younger people from purchasing them?

Conclusion

Reducing the harms associated with alcohol use should be a high priority for governments in Australia. Public policy responses that aim to reduce the significant harms that alcohol use can cause in young people need to be sensitive to the context in which young people begin consuming alcohol. In our society, drinking alcohol is part of the 'rite of passage' to adulthood and is an important part of the social life of many young people and adults. Most people start to drink alcohol when they are teenagers and in their early twenties. This period of youth and early adulthood is a critical time for health policy intervention as the patterns of alcohol use established at this age strongly influence adult alcohol behaviour. This study suggests that alcopops are a significant factor in alcohol consumption among young people. Additional research is required to further investigate the relationship between alcopops and unsafe levels of drinking among young people and to inform the development of the appropriate policy responses.

Survey questions

The following questions were asked to obtain the data used in this research study (provided with some explanatory notes).

What is your age range? Age ranges given as 12-14, 15-17 and 18-21.

What was the last alcoholic drink you had? Responses were classified into the following categories: alcopops, spirits, beer, wine, other and "never drunk alcohol". The category of "spirits" included spirits consumed either straight or with a non-alcoholic mixer. The category of "other" included drinks that included both spirits and other alcoholic substances and home brewed alcoholic drinks (not beer) that the respondents could not classify into another category. Respondents whose last drink was an alcopop tended to identify them by their brand name rather than a generic name.

In a typical week, on how many days would you drink an alcoholic soda or alcopop? Brand names (such as Woodstock, Breezer, Cruiser etc) were given as prompts if respondents were not familiar with the terms "alcoholic soda" or "alcopop". Once these terms were introduced, however, the young people surveyed generally understood them as a generic name for this category of drinks.

How many alcoholic sodas or alcopops would you estimate you drink during a typical night out or drinking session? The number of drinks was used to refer to the number of bottles consumed rather than standard drinks consumed. Different alcopop products contain different quantities of alcohol, ranging from about 1.1 to 1.9 standard drinks per bottle.

How many times would you estimate you had been drunk in the past month, if at all? Responses were based on young people's self-assessment of their drinking behaviour. No further description of the term "drunk" was provided.

Thinking specifically about alcoholic sodas or alcopops, are you concerned about any of your friends who in your opinion might be putting themselves at risk of harm from drinking too many of these products? Responses were based on young people's reported level of concern. No prompts were provided on what might be a risky level of drinking and what sorts of harms might be associated with risk drinking.

References

Adhikari P, Summerill A 1998 National Drug Strategy Household Survey Australian Institute of Health and Welfare

Alcopops under fire in the European Union The Globe 1997

American Medical Association *Partner or Foe? The alcohol industry, youth alcohol problems and alcohol policy strategies* 2001

American Medical Association *Standing tall against underage drinking: the current crisis and what we can do about it* 2002

Barnard M, Forsyth A *Alcopops and underage drinking: changing trends in drink preference* Health Education 1998

Commission of the European Communities *Drinking of Alcohol by children and adolescents* 2000

Cook E, Hastings G, Andersen S *Social responsibility in the alcohol industry: actions speak loader than words* Centre for Social Marketing, University of Strathclyde, Glasgow 2002

Cook E, Hastings G, Andersen S *Desk research to examine the influence of marketing and advertising by the alcohol industry on young people's alcohol consumption*. Prepared for the World Health Organisation by the Centre for Social Marketing, University of Strathclyde, Glasgow 2002

Department of Human Services (Victoria) School students and drug use in 1996 1999

Directorate of Public Health, Croyden Health Authority *Tobacco, Alcohol and Drug Use among Croyden Schoolchildren 1998* 2000

Hall S New wave of 'sophisticated' alcopops fuels teenage binge drinking The Guardian 2002

Honess T, Seymour L, Webster R *The social context of underage drinking* The research, Development and Statistics Directorate, The Home Office UK 2000

Jernigan D Global status report: Alcohol and young people World Health Organisation 2001

Jones S, Donovan R Regulation of alcohol advertising in Australia: case study of a failure 2001

King E, Ball J Carroll T Alcohol consumption patterns among Australian 15-17 year olds from February 2000 to February 2002 department of Health and Ageing 2003

McKeganey N, Forsyth A, Barnard M, Hay G *Designer drinks and drunkenness amongst a sample of Scottish schoolchildren* British Medical Journal 1996

Ministry of Youth Affairs (New Zealand) Lowering the Drinking Age: an issues paper 1999

Oh S, Hemphill S *Enquiry into purchasing alcohol by adolescents* Centre for Youth Drug Studies 2002

Romanus G Alcopops in Sweden - a supply side initiative Addiction 2000

Roy Morgan Research Alcohol Awareness Survey Conducted for the Salvation Army 2002

White V, Hill D, Effendi Y Patterns of alcohol use among Australian secondary students: results of a 1999 prevalence study and comparisons with earlier years Journal of Studies on Alcohol 2003

Appendix B

Terms of Reference for the inquiry into ready-to-drink alcohol beverages:

Senate Community Affairs June 2008

- (a) the effectiveness of the Government's proposed changes to the alcohol excise regime in reducing the claims of excessive consumption of ready-to-drink alcohol beverages;
- (b) the consumption patterns of ready-to-drink alcohol beverages by sex and age group;
- (c) the consumption patterns of all alcohol beverages by sex and age group;
- (d) the impact of these changes on patterns of overall full strength spirit consumption, including any increased consumption of standard drinks of alcohol;
- (e) the evidence underpinning the claims of significant public health benefit in the increase of excise on this category of alcohol;
- (f) applicability of incentives to encourage production and consumption of lower alcohol content beverages;
- (g) the modelling underpinning the Government's revenue estimates of this measure;
- (h) the effectiveness of excise increases as a tool in reducing the levels of alcohol related harm;
- (i) the empirical evidence on which the government's decision to increase the excise on ready-to-drink alcohol beverages was based; and
- (j) the effect of alternative means of limiting excessive alcohol consumption and levels of alcohol related harm among young people.