



**COMMISSIONER
FOR CHILDREN**
T A S M A N I A

SUBMISSION

Alcohol Toll Reduction Bill 2007

**MR PAUL MASON
COMMISSIONER**

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The Commissioner for Children is an independent, statutory office responsible to the Parliament of Tasmania. The Commissioner's functions include promoting the rights and well-being of children and young people, examining and advising the Government on policies, practices and services provided for children and laws affecting their health, welfare, care, protection and development.

BACKGROUND

Alcohol is a drug.

Alcohol is addictive.

Alcohol is the most widely used psychoactive, or mood-changing, recreational drug in Australia. Excessive consumption of alcohol can have significant negative outcomes for children and young people including both those exposed to excessive alcohol consumption by family members and those engaging in excessive alcohol consumption.

The negative outcomes of alcohol abuse on children and young people are often long term and can affect the child throughout their life, from birth into adulthood and beyond. Children whose parents abuse alcohol are at greater risk of suffering neglect and abuse (alcohol or drug abuse is a factor in approximately 50% of child protection cases), developing psychological, neurological and behaviour problems including Foetal Alcohol Syndrome, school failure and development of their own alcohol problems. Those young people who engage in excessive alcohol consumption are more likely to engage in risky behaviour such as swimming or driving whilst intoxicated, unsafe or unwanted sex and verbal or physical abuse.

Data collected from the Australian National Council on Drugs (ANCD) and the Australian Institute of Health and Welfare (AIHW) demonstrates the pervasiveness of alcohol abuse in the community and the potential numbers of children and young people who may be adversely affected by alcohol abuse. In 2007 the ANCD reported that 231,705 children aged less than 12 years were exposed to binge drinking by an adult in the home. This equates to more than one in 10 children. Similarly the latest available data from AIHW (2004) indicates that 25% of young people aged 14 -19 report drinking alcohol every week. The alcohol consumed in high risk situations such as sessions of binge drinking accounts for two thirds of all alcohol consumed in Australia and New Zealand¹.

Research has shown that advertising of alcoholic products is associated with an increased rate of alcohol consumption by adolescents².

¹ Royal Australasian College of Physicians and the Royal Australian and New Zealand College of Psychiatrists (2005). *Alcohol policy: Using evidence for better outcomes*.

² Connolly, G.M., Casswell, S., Zhang, J., & Silva, P.A. (1994). Alcohol in the mass media and drinking by adolescents: a longitudinal study. *Addiction*, 89, 1255-1263.

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RESPONSE TO BILL

The *Alcohol Toll Reduction Bill 2007* attempts to facilitate a reduction in the alcohol toll resulting from excessive alcohol consumption by creating a culture of responsible drinking. To achieve this aim the Bill will –

- Require health information labels on all alcohol products
- Restrict television and radio alcohol advertising to after 9pm and before 5am, to stop alcohol being marketed to young people
- Require all alcohol ads to be pre-approved by a government body comprising an expert from the medical profession, alcohol and drug support sector, accident trauma support sector and the alcohol industry
- Ban alcohol ads which are aimed at children or which link drinking to personal, business, social, sporting, sexual or other success

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The Commissioner for Children notes that the abolition of all public tobacco advertising coincided with the decline in tobacco usage and sales with measurable benefits for public health and health expenditure.

This can only be explained in one of four ways:

1. tobacco advertising caused tobacco usage
2. tobacco advertising contributed to tobacco usage
3. tobacco advertising caused or contributed to tobacco uptake in first-time smokers (children)
4. there was no relationship at all between tobacco advertising and usage and the contemporaneous decline was a pure coincidence.

The Commissioner for Children submits that the fourth scenario is an insult to the intelligence, promoted by an industry whose representatives famously denied in the US Congress that nicotine was a drug and that it was addictive.

ADVERTISING, SPONSORSHIP AND SPORTING HEROES

The Commissioner for Children's primary submission is that the policy underpinnings of the proposal logically dictate that all public alcohol advertising be discontinued.

The Commissioner for Children understands the role of the proposed measures as a first step in reducing the harm caused by alcohol abuse but is concerned that they are "tinkering round the edges" and will fail to protect children and young people from alcohol advertising which glorifies the consumption of alcohol and associates it in the mind with sporting prowess, success, sexual attractiveness and social inclusion.

An alcohol advertisement is intended to cause the purchase of a product.

If an alcohol advertisement does *not* link the purchase of the product to personal success, to business success, to social success, to sporting success, to improving sexual attractiveness with a view to sexual success or linking the purchase to any “other success”, the advertising industry will be hard pressed to suggest how any given advertisement would persuade a given buyer to purchase the product. Even beer advertisements that (falsely) promote the primary function of the purchase as the quenching of thirst link the purchase to “other success” namely “success in quenching thirst”.

It is submitted however that the ban on advertising proposed under the Bill does not extend far enough and that a complete ban on advertising of alcohol, such as that implemented in relation to tobacco products, should be implemented in discussion with the industry.

It has to be acknowledged that the major sporting codes have sourced sponsorship from outside the alcohol industry and have adjusted completely to the loss of tobacco funding. However products like Bundaberg Rum, VB Jim Beam, XXXX and Tooheys still feature in major State tournaments.

Time bans for alcohol advertisements are likely to be of limited effect while the industry publicly sponsors daytime activities. Electronic alcohol advertising at all times of the day around sporting fixtures, alcohol advertising on the spinnakers and hulls of famous yachts, alcohol sponsorship of sporting heroes, and the naming rights to some of Australia’s most iconic sporting events – for instance the Melbourne Cup when it was for a while “The Fosters Melbourne Cup” - all take place in full view of the alcohol industry’s future market.

Alcohol is widely promoted at sporting events including the use of billboard displays around the boundaries of sporting arenas which are often linked to the sponsorship of sporting events by alcohol companies. Such advertising does not generally “link” the alcohol to the sport itself and may therefore fall outside the ban on adverts that link drinking to success in sport, but the “association” is undeniable. These forms of advertising do not appear to be covered in the proposed ban thereby significantly reducing the bans effectiveness if children are exposed to alcohol advertising through other media.

The proposed ban is limited to advertising on television and radio and fails to take into account advertising in the print media or advertising on the internet, a medium readily available to children. Any change in the law should make it clear that “advertising” includes all forms of advertising including individual, team and tournament sponsorships, and the inclusion of names and logos on sportswear.

VETTING OF INDIVIDUAL ADVERTISEMENTS

Anyone with a child knows that children aspire to adult behaviours. Children are influenced by car advertisements and debate the relative merits of various makes and models long before they can obtain a licence or drive themselves.

An advertisement that portrays alcohol favourably to adult eyes will *ipso facto* portray it favourably to the eyes of non-adults who rightly or wrongly think of themselves as mature enough to make adult decisions or aspire to that status. Children and young people are widely assumed to be innocent to the point of stupidity. The Commissioner for Children sees limited utility and wasted expenditure in devising a panel to vet the “appropriateness” of alcohol advertising as “directed” or “not directed” to children and young people.

If there is to be a panel to approve or disapprove an advertisement as a disincentive to children the Commissioner for Children submits that it be comprised not of adult experts with particular agendas, but that it be comprised entirely of children and young people with an adult moderator. At the very least any adult panel should be underpinned by a panel of children and young people whose task will be to answer the simple question

“Does this advertisement portray the product in a positive light to you?”

Given the alcohol industry’s own argument that responsible drinking in young people starts with responsible drinking behaviour in their parents, there is no logic in limiting sensitivity about advertising content to children and young people: logically to prevent dangerous levels of uptake, the consumption of alcohol **by parents** has to be tackled and reduced. Any advertisement which is directed to the population cohort that includes parents should also be excluded by any panel vetting advertisements.

So there we have it – the two segments of the population who need to be protected from the adverse effects of alcohol advertisement (the taking up or the excessive use of alcohol) include:

- a. all minors; and
- b. all adults who are or who might become parents.

Accordingly, the only alcohol advertising which cannot be said to contribute to the excessive consumption of alcohol is that aimed at people who fall into neither cohort, that is people who are unable or unwilling to parent children. Indeed, the argument could be extended without much difficulty to grandparents who are past child-bearing age but whose personal habits of tobacco and alcohol usage exert significant influence on the thinking of their grandchildren.

The Commissioner for Children strongly supports any move that would require explicit warnings of the risks and dangers of addiction and of excessive use to be included in every instance of alcohol advertising.

DEMAND REDUCTION – FINANCIAL DISINCENTIVES

Research has demonstrated that one of the most effective methods of preventing the harm of alcohol abuse is through financial disincentives. The evidence available overwhelmingly supports the conclusion that alcohol prices have an effect on the level of alcohol consumption, with increasing alcohol prices leading to a decrease in alcohol consumption³. The effectiveness of financial pressure in reducing alcohol consumption appears to apply across the board and has been shown to extend to heavy and problem drinkers. Younger drinkers and adolescents appear to be especially sensitive to price increases. Some researchers claim that adjustments to the taxing and pricing of alcohol is the most effective method of reducing alcohol consumption⁴.

One method of modifying the price on alcoholic products would be to implement a **volumetric tax** on all alcohol products. This would mean that the amount of tax paid on an alcoholic beverage would depend upon the percentage of alcohol contained in the product, with those products with higher percentages of alcohol being taxed more heavily. This system could have multiple advantages most notably encouraging consumers to purchase products with a lower percentage of alcohol. This may be particularly influential in reducing the consumption of pre-mixed spirits that are particularly popular among adolescent females and contain a high percentage of alcohol in comparison to many other alcoholic beverages.

DEMAND REDUCTION – AVAILABILITY

Regulating the physical availability of alcohol is another method of effectively reducing alcohol consumption. Evidence indicates that policies such as reducing the opening hours and number of outlets that sell alcohol, as well as increasing the restrictions on the availability of alcohol are highly effective in reducing alcohol consumption.

Increasing the minimum age at which a person can legally purchase alcohol has been found to be one of the most effective regulations to reduce alcohol related harm⁵. While the Commissioner is not advocating raising the legal drinking age, this research highlights the importance of policing sales to those underage to ensure that the minimum age of 18 is adhered to.

The alcohol industry, like any industry reliant on the sale of an addictive drug, constantly finds itself caught on the horns of self-contradiction and impaled on unavoidable conflicts of interest.

The entirely worthy concept of “Responsible Service of Alcohol” and laws prohibiting the sale of alcohol to persons affected by its consumption have the

³ Loxley, W., Toumbourou, J., & Stockwell, T. (2004). *The prevention of substance use, risk and harm in Australia: A review of the evidence*, Australian Government Department of Health and Aging, Canberra.

⁴ Casswell, S., & Maxwell, A. (2005). What works to reduce alcohol related harm and why aren't the policies more popular? *Social Policy Journal of New Zealand*, 25, 118-141.

⁵ Ibid.

ineluctable outcome of reducing sales and reducing profits and are be policed in the first instance by those who sell and those who take home the profits.

In Tasmania the AHA has recently issued a statement that it opposed an increase in the drinking age because in the fist place most excessive teenage drinking takes place at home under the watchful eyes of parents and secondly to do so would effectively shut down Hobart's vibrant dockside night-life. The astonishing *non sequitur* inherent in these two statements went unremarked by the spokesman or the newspaper that reported it.

CONCLUSION

The Commissioner supports the implementation of any measure which effectively reduces the harm associated with excessive alcohol consumption and promotes a culture of responsible drinking. The provisions of the *Alcohol Toll Reduction Bill 2007* fall short of achieving this goal.

The focus of the Bill is too narrow with significant gaps that weaken the potential of the Bill to achieve its aims. Consequently the effectiveness of the Bill is likely to be significantly limited. The Bill in its current form is unlikely to achieve a widespread and long term reduction in the alcohol toll resulting from excessive alcohol consumption and could be strongly improved through the inclusion of additional methods shown to reduce the risk of alcohol abuse. Policies that increase the price of and limit access to alcohol are likely to be most effective provided that they are able to be effectively policed and enforced.

The Commissioner hopes these observations and recommendations are of assistance.

Paul Mason
Commissioner

1st Floor Stone Building
ABC Centre, 1 Brooker Ave
Hobart TAS 7000
Ph (03) 6233 4520