



ALCOHOL BEVERAGES AUSTRALIA



Submission to the Department of Health

ABA's Response to the draft National Preventative
Health Strategy

14 April 2021

Alcohol Beverages Australia welcomes the opportunity to comment on the draft National Preventive Health Strategy.

ABA is pleased to note that the Australian public's relationship with alcoholic beverages has matured over the last 20 years, and rates of risky drinking and underage drinking continue to decline. The vast majority of Australians who chose to drink do so at low-risk levels, and younger Australians are delaying their initiation to drinking. Key statistics from the National Drug Strategy Household Survey show that between 2004 and 2016, there was:

- A 33% decrease in the number of Australians who drank daily;
- A 34% increase in the number of Australians who abstain from alcohol;
- A 18% decrease in the number of Australians drinking at lifetime risky levels;
- A 50% increase in the number of underage Australians abstaining from alcohol; and
- A 10% increase in the average age when Australians first try alcohol.

In addition, alcohol-related violence has also reduced with a 32% decrease in physical violence and a 20% reduction in verbal abuse since 2013.

We recommend the final National Preventive Health Strategy note the improvements in reducing harmful consumption and underage consumption in its key facts in the chapter on alcohol and other drugs.

These successes have been achieved through a series of sensible and balanced regulatory measures which target risky drinking behaviours and ensure the responsible marketing and sale of alcoholic products. For example, Australia has achieved great success in bringing down the rate of drink driving through a combination of public education campaigns highlighting the risks to oneself and others, strict enforcement through random breath testing and fines, and the targeting of groups at higher risk of drink driving, such as young males. In NSW, in 1980, 244 drivers and motorbike riders were killed with a blood alcohol concentration above 0.05; in 2017, that number had been reduced to 44. Another success has been the passage of secondary supply laws in all jurisdictions which create penalties for people who supply alcohol to minors (other than their parents), including in private settings.

As well as improvement to Australia's drinking culture, ABA welcomes the wider improvements in Australia's overall burden of disease, with a decrease of 11% in the total rate of burden between 2003 and 2015, as evidenced in the Australian Institute of Health and Welfare's most recent Burden of Disease Study. We note the disease burden from cardiovascular disease has decreased significantly over the same timeframe, down 36% (age standardised rate). Similarly, over the same period, there have been substantial drops in as the age standardised burden attributable to high cholesterol (down 49%), high blood pressure (down 41%) and dietary risk (down 34%).

We recommend it would be useful for the final National Preventive Health Strategy to present some time series analysis to show the improvements across many diseases and risk factors, and that data should be shown using age standardised rates, in order for accurate comparisons across multiple years.

With respect to the chapter on reducing alcohol and other drug harm, ABA notes the proposed target of a 10% reduction in harmful consumption by Australians by 2025. We are concerned that this directly changes the target set in the National Alcohol Strategy, where governments agreed to a 10% reduction between 2019 and 2028. We are barely two years in the national strategy, and the proposal to recalibrate the target undermines the previous government-agreed position.

We recommend the final National Preventive Health Strategy to target a 10% reduction in harmful consumption by Australians from 2019 to 2028, as reflected in the final National Alcohol Strategy.

In the chapter on improving access to and the consumption of a healthy diet, we note one of the proposed policy achievements by 2030 is the labelling of energy and ingredients on alcoholic beverages. ABA notes several global producers are already providing energy information to consumers about their products, either voluntarily on label or digitally. We also note that Food Standards Australia New Zealand has announced its intention to consider the matter of energy labelling on alcohol in its 2021 work program.

The final National Preventive Health Strategy should not pre-empt that consultation and consideration by FSANZ as it determines whether, and if so, how to convey energy information of alcoholic beverages to consumers.

We recommend the final National Preventive Health Strategy note that FSANZ will examine the issue of energy labelling of alcohol beverages in Australia in its future work plan, without pre-empting what the final policy position.

In the chapter on leadership, governance and funding, we note the proposal to establish a formalised governance mechanism for preventive health. We believe this is contrary to the findings of the Review of COAG Councils and Ministerial Forums which recommended reducing and streamlining formal governance mechanisms. The coordination of national preventive health policy can be undertaken through the Health Ministers' Meeting or the Health National Cabinet Reform Committee.

We recommend any governance arrangements for preventive health be consistent with the Government's endorsement of the Review of COAG Councils and Ministerial Forums.

In the chapter on environmental determinants of health, we note the draft text asserts a causal link between the density and location of alcohol outlets and adverse health outcomes. The relationship between outlet density and harm relies on statistical analysis. We note that in licensing applications across multiple jurisdictions considering this issue, adjudication panels have considered the statistical research behind this and have rejected this causal link, and we consider it incorrect for it to be added to the table.

We recommend that density and location of alcohol outlets be removed from the environmental determinants of harm.

In the chapter on partnerships and community engagement, we note language which seeks to disengage some sectors, particularly industry, due to “undue influence by any form of vested commercial interest”. We note that this is inconsistent both with current government policy, and with the approach of both the United Nations and World Health Organisation.

We note that it is current government policy to work with industry, including the alcohol beverages industry, in identifying targeted, cost effective solutions to addressing harmful consumption, marketing and sales, as noted in the 2019-2028 National Alcohol Strategy.

Internationally, we note in the UN General Assembly’s 2018 political declaration on the prevention and control of non-communicable diseases, the UN confirmed there was a role for economic actors, including alcohol producers and retailers, to work with governments to address the prevention, control and treatment of non-communicable diseases. We also note more recently, the World Health Organisation, in its action plan on alcohol for 2022-2030, has proposed the alcohol industry be a co-regulator with governments in relaying health-related information to consumers on alcohol beverage labels.

In Australia, governments and industry have worked in partnership to identify issues of concern, and to design and implement policy solutions to address these issues. For example, the Alcohol Beverage Advertising Code (ABAC) was created in 1998, and the Federal Government and senior industry representatives work together on the Management Committee to set policy and identify emerging issues relating to responsible marketing. The Code sets clear rules for the alcohol beverage industry around all aspects of advertising and marketing, to ensure messages are not irresponsible or inappropriate, and it is prohibited for advertising to target or appeal to minors, promote rapid or excessive consumption, or claim consumption will lead to a therapeutic benefit, among other obligations.

The general public can raise complaints about any aspect of alcohol advertising. Complaints are adjudicated by an Independent panel, chaired by a former Commonwealth Attorney-General, as well as a professor of public health, nominated by the government. The Adjudication Panel applies the “reasonable person” test when considering a marketing communication against the ABAC Code.

Community Standards Research by Colmar Brunton has found that the Panel is generally consistent with community expectations of alcohol marketing and is slightly more conservative than the community reflecting the high standards set by the Code for alcohol marketing in Australia. Additional, ABAC provides free online training to advertisers and marketers that comprehensively cover all aspects of the ABAC standards and system, their aims, interpretation and application.

In addition at a global level, the International Alliance for Responsible Drinking, of which ABA is member through the partnership council, has announced partnerships with global social marketing companies, including Facebook, Snapchat and YouTube, to limit the potential for underage users to access or view alcohol-related advertising or marketing, including through social media influencers, irrespective of whether the user has submitted accurate date of birth data.

In 2005, the Federal Government and industry co-funded the creation of the social aspect organisation, DrinkWise, established to promote a healthier and safer drinking culture in Australia. The DrinkWise Board is chaired by a former Chief Commissioner of Victoria Police, and includes representatives from the health and education sectors, as well as former federal ministers and a former Chief Medical Officer of Australia, in addition to members of the industry. DrinkWise partners with government agencies, police, sporting associations, Indigenous groups and NGOs to create and deliver a range of national information and education campaigns as well as providing practical resources to help inform communities about alcohol and to reduce alcohol-related harm.

Individual sectors of the industry have also initiated programs and campaigns aimed at reducing harmful consumption. The role of industry-led education campaigns in meeting in supporting these achievements should be understood and acknowledged.

For example, Retail Drinks Australia, a member of Alcohol Beverages Australia, has proactively led several campaigns to promote responsible consumption and target underage drinking. "ID25" is an initiative to educate customers, dissuade attempted purchase by minors and to reinforce staff awareness and confidence to refuse service to minors with point-of-sale material.

The general premise of the campaign is that if a customer looks under the age of 25, staff members are encouraged to ask to verify ID prior to completing the sale, under an inoffensive promotional line "if you look under 25, take it as a compliment, as we'll ask for ID". "Don't Buy It For Them" is a program designed to discourage secondary supply and to educate the community on their shared responsibility not to supply to under age and highlights the penalties for doing so.

The Retail Drinks Online Code is an industry-wide framework developed in collaboration with government and community to enhance compliance in the responsible online sale and delivery of alcohol. The Code seeks to address one of the challenges in regulating online alcohol sale and delivery, which is that liquor licensing legislation is state and territory based, but the marketplace is national.

We recommend that the final National Preventive Health Strategy explicitly states that all stakeholders are engaged and consulted in the development of strategies and policies, and that the food and beverage industry, including retail, is a partner with government to address Australia's national priorities in preventive health.