

## **Comments on ANPHA Alcohol Advertising: The effectiveness of current regulatory codes in addressing community concerns.**

A joint response prepared by the Health Promotion and Drug and Alcohol Units of Murrumbidgee Local Health District addressing the themes and questions arising on page 27 of the Issues Paper..

### ***Effectiveness of regulation.***

#### **Regulation is ineffective by the fact that it is self-regulated with no penalties.**

Self-regulation has been proven ineffective in other areas of public health such as the advertising of junk food to children. This was exposed by the National Preventive Health Task Force and led to the recommendation to '[reduce the] exposure of children and others to marketing, advertising, promotion and sponsorship of energy dense, nutrient poor food and beverages' (NPHTF 2009 p14). This was to be achieved by phasing out marketing and advertising to children using a 4 year staged responsive regulation approach (NPHTF 2009 p33).

Albeit that the alcohol advertisers do not directly market to children and young people, it seems reasonable to expect that **a staged responsive regulation approach might work for alcohol advertising**, particularly as at the end stage there would be the powers to penalise infringements that are not available with self-regulation. Note however, that the Federal government chose to merely note rather than adopt the NPHTF recommendation (DoHA 2010 p 46) raising the question as to whether it would be likely to follow a similar course with recommendations related to alcohol advertising.

### ***Scope of regulation***

#### **The current regulations are ineffective against the shift to the use of new media by the target audience and the infiltration by alcohol advertisers into this environment.**

The issues paper describes the issue well (p15) particularly in exposing the alcohol industry's intent to normalise alcohol use. The 'facebook 'hit 'data alone is compelling evidence. The scope of regulation requires expansion to cover the move by advertisers from traditional media in response to the change in preference of their target audience. **We would support legislative regulation, not self-regulation, as a means of controlling advertising to young people via new media.**

This includes social media, product placement in films and at events, point-of-sale promotions, sponsorship of sport, arts and public entertainment events, the industry's own websites and other.

Moreover, at the level of traditional media, regulation to limit the times at which alcohol advertisements can be broadcast (e.g. the CTICP) is narrow in scope. The

restrictions do not extend beyond designated children's programs into other programs children and young people are likely to view. In the case of elite sports, children and young people are not only exposed to alcohol commercials in advertisement breaks but also via product placement within the games themselves. Even if there is no explicit advertising of sportspeople drinking to suggest alcohol may contribute to sporting success, the association of sport and alcohol via these practices is damaging to young people's perceptions of the role of alcohol in Australian culture.

In addition, there should be no need to have alcohol branded signage outside pubs, clubs and bottle shops as adults who visit these venues clearly know what is being sold.

## **Management**

**The Alcohol and Beverages Advertising Code (ABAC) should not have parties on the management committee who represent the vested interests of the alcohol industry.**

These interests are the representatives of the Brewers Association of Australia, the Winemakers Federation of Australia or the Distilled Spirits Industry Council of Australia. This is an obvious conflict of interest and not balanced by the presence of only one Commonwealth Government representative on the committee. The Management Committee should not be funded by the Industry and rather should be funded and regulated by the Government.

**The public health inputs and considerations are insufficient.**

Although there is a mandatory requirement for one member of the ABAC adjudication panel to be of a public health background, it remains unknown how much weight this member has in the decision making process .

**The government should at least adopt the precautionary principle and use the Public Health Act to impose regulation to protect the health interests of young people.**

There is sufficient longitudinal evidence (as summarised in the paper) for the associative and predictive effects of advertising on the attitudes, purchasing behaviours and health effects of advertising and marketing of alcohol to young people to justify adopting the precautionary principle. This would close a current loophole for advertisers who exploit the fact that evidence of causality is inconclusive in order to create doubt and continue their advertising practices. The industry is well aware that advertising and marketing of any product is integral to increased purchase and subsequent consumption of the product, otherwise why advertise? They are probably aware too, that to establish causality the highest level of evidence via randomised control trials would be required but that this would not occur because it is clearly unethical.

### ***Other considerations***

**Advertising of alcohol is one of many important factors influencing the drinking behaviours of young people. However, a large and sustained investment is required in the form of human and physical resources to change the culture of drinking in Australia.**

Advertising is a sign of culture; it leads us to believe certain things which prompts us to act in certain ways. Although alcohol advertising may not be directly aimed at children or young people, children are influenced by advertising to adults. Our view is that stronger regulation of alcohol advertising is an essential strategy in addressing the wider concern about the use and abuse of alcohol in the Australian culture.

Although the paper refers to the fact that alcohol consumption has steadied, there is growing community unease about the way people consume alcohol particularly the practice of binge drinking. We would welcome increased investment in research leading to interventions to prevent the harmful effects of alcohol abuse on the population.

### **References**

Commonwealth Department of Health and Ageing, 2010, *Taking preventative action, the government's response to the report of the National Preventative Health Taskforce*, Obesity recommendations, Viewed 26/2/13 at

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