

Sale and Supply of Alcohol (Display of Low-alcohol Beverages and Other Remedial Matters) Amendment Bill

Submission to the Justice and Electoral Committee

Date: 9 June 2016

Contact

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About the New Zealand Nurses Organisation

NZNO is the leading professional nursing association and union for nurses in Aotearoa New Zealand. NZNO represents over 47,000 nurses, midwives, students, kaimahi hauora and health workers on professional and employment related matters. NZNO is affiliated to the International Council of Nurses and the New Zealand Council of Trade Unions.

NZNO promotes and advocates for professional excellence in nursing by providing leadership, research and education to inspire and progress the profession of nursing. NZNO represents members on employment and industrial matters and negotiates collective employment agreements.

NZNO embraces te Tiriti o Waitangi and contributes to the improvement of the health status and outcomes of all peoples of Aotearoa New Zealand through influencing health, employment and social policy development enabling quality nursing care provision. NZNO's vision is *Freed to care, Proud to nurse.*

EXECUTIVE SUMMARY

1. The New Zealand Nurses Organisation (NZNO) welcomes the opportunity to briefly comment on Sale and Supply of Alcohol (Display of Low-alcohol Beverages and Other Remedial Matters) Amendment Bill.
2. NZNO has consulted its members and staff in the preparation of this submission. We received strong and consistent feedback, particularly from the College Emergency Nurses New Zealand (CENNZ), that alcohol remains the major cause of preventable disease and injury.
3. NZNO is a member of the Alcohol Action network and supports Alcohol Healthwatch's submission.
4. The stated purpose of the Bill is to address "certain minor and technical issues" arising from the enactment of the Sale and Supply of Alcohol Act 2012 ("the Act") that impede the Act's objective of minimising harm from alcohol.
5. Though the issues are technical, we dispute that they are minor, since they impact the marketing of alcohol in the most common retail outlets used by families every day and therefore offer the most potential to influence both current and future drinking patterns.

6. In this context, it would be pertinent to consider the extreme reluctance of many retailers to implement changes required by the Act in a timely manner¹, despite community wishes or the evidence of harm.
7. While we support both the intention and the objective, we are not confident that the Bill will lead to improved outcomes ie safer, more informed choices, and reduced exposure to alcohol marketing of “vulnerable populations that are at particular risk from the harmful use of alcohol, such as children, adolescents, women of child-bearing age, pregnant and breastfeeding women, indigenous peoples and other minority groups or groups with low socioeconomic status” (WHO, 2010).
8. In particular the Bill offers no further clarity for consumers about the health risks of alcohol consumption, nor does it encourage retailers’ engagement in responsible action on marketing alcohol.
9. We believe the Bill could be substantially improved and accordingly recommend that:
 - display of all alcoholic beverages should be restricted to the single area designated for alcohol (“the single area”);
 - all beverages displaying branding identical to or clearly imitating alcoholic products (look alike beverages) must be restricted to the single area regardless of whether or not they contain alcohol; and that
 - precise and consistent definitions of the alcohol content of the variously described alcohol products available in supermarkets and grocery stores are included in the Bill;
10. We also note and support the recommendations made by Alcohol Healthwatch, namely that:
 - that section 237(1)(b) be amended to include “a price or discount”;
 - s116 or 117 which allows any licensing committee or authority to issue a licence subject to conditions, should explicitly apply to the physical location or single area within supermarket or grocery stores: and that
 - s100 (form of application) is amended so that Directors of companies applying for a liquor licence are required to list any

¹ Eg <http://www.stuff.co.nz/dominion-post/news/70038231/newtown-new-world-gets-alcohol-licence-renewed-but-must-move-storefront-booze>

other alcohol-licence holding company that they were or are named Directors of.

11. NZNO regrets the lack of opportunity to engage with the government on the proposed amendments or to add to them. There are other areas outside the scope of the Bill where the Act is not working as well as it could which could similarly have been amended.
12. NZNO does not wish to make an oral submission.

DISCUSSION

Section 114 Effect of single area conditions

13. NZNO's principle objection is to the proposed amendment to s114 which would effectively allow low alcohol beverages and 'look alike' beverages to be displayed throughout supermarkets and grocery stores.
14. This clearly undermines the purpose of having a single area in these outlets, to highlight the fact that there are restrictions on the purchase of alcohol because it is not an ordinary commodity and is potentially harmful, particularly to children.
15. A very clear signal is required to ensure that children, whether they can read or not, will never confuse an alcoholic beverage with anything else. If they are exposed to displays of similar items throughout the store, there would be no reason to differentiate alcohol from other products, or associate it with risk or restriction.
16. Indeed the likely outcome is that alcohol will be 'normalised' – recognised and accepted like other 'foods' – well before children are able to understand consequences and make 'informed' choices about drinking. This is an effective way to prepare and 'groom' future consumers of alcohol.
17. Point of sale displays are generally highly effective and a potential outcome of increased display opportunities in supermarkets and grocery stores is that consumption of alcohol will increase. This was exactly the outcome in Finland, when it allowed stronger beers to be sold in stores previously restricted to selling lower alcohol beer (Osterberg, 2012).
18. Increased alcohol consumption presents a particular risk to pregnant women and the foetus. The increasing incidence and severity of fetal alcohol syndrome disorder (FASD) in Aotearoa New Zealand with at least 600 children with FASD being born each year (May & Gossage 2001) is clearly related to the deregulation of the sale (and promotion) of liquor which has not only allowed easier access to liquor, but has encouraged more drinking at a younger age.

19. CENNZ members' observation and experience confirm evidence that alcohol consumption is strongly influenced by proximity to alcohol outlets and marketing ie opportunity and prompting to purchase alcohol. The decision to purchase alcohol should be an informed one, not the result of unrestricted marketing while shopping for food.
20. The placement of low alcohol beverages outside the single area implies that they are comparable with other non-alcohol beverages and not potentially harmful. However the risk of harm is proportionate to the quantity of alcohol consumed, not the percentage by volume. Consumers should not be lulled into a false sense of security about any level of alcohol being harmless².
21. While look-alike products may not contain alcohol, they are intentionally 'confusing' and, as indicated, may serve to prepare children or prompt adults to drink alcohol. The choice to align a non-alcohol product with an alcohol product is made by the producer; there is no reason for placing it outside the single area.
22. NZNO recommends that display of all alcoholic beverages should be restricted to the single area designated for alcohol ("the single area"); and that all beverages displaying branding identical to or clearly imitating alcoholic products must also be restricted to the single area regardless of whether or not they contain alcohol.

Standard definition of alcohol content

23. 'Low alcohol' is variously defined in the Act (<2.5% ethanol by volume); the Bill (<1.15%); and by food labelling Standard 2.7.1 (an alcoholic beverage containing more than 1.15% alcohol by volume must not be represented as a low alcohol beverage) (FSANZ 2014).
24. Such variation is confusing and, in an area where consumers need clarity to make informed decisions, potentially unsafe. It is, however, typical of the international inconsistency of defined standards of alcoholic content and labelling of alcohol products both within and between countries.
25. Zero alcohol, low alcohol, reduced alcohol are as variously defined as each country's advice on low risk drinking. The United Kingdom, for example, defines low-alcohol drinks as having alcoholic strength by volume (ABV) of between 0.5 and 1.2%; in Germany, zero alcohol

²In this context we draw your attention to the considerable inadvertent harm that was done in allowing 'party pills' ie containing psychoactive substances to be sold in dairies. Many nurses reported that young people were quite unaware that they posed any danger since they assumed access would be restricted if the pills was harmful.

does not mean nil alcohol; reduced alcohol definitions vary according to the comparative liquor etc.

26. While it may not be possible to align regulatory standards between countries, if any progress is to be made in reducing harm from alcohol, there must be consistent, well defined and understood standards with regard to alcohol.
27. People cannot make informed choices without accurate and accessible information.
28. We recommend that precise and consistent definitions of the alcohol content of the variously described alcohol products available in supermarkets and grocery stores are included in the Bill.

CONCLUSION

29. In conclusion, NZNO supports the intent of the Bill, and recommends that you :
 - **Note** that alcohol is a major cause of preventable morbidity mortality and injury;
 - **Note** that the liberalisation of alcohol has led to increased alcohol consumption and presents a particular risk to vulnerable groups including pregnant women and children;
 - **Amend** Clause 5 S114 relating to single area conditions to ensure that:
 - the display of all alcoholic beverages is restricted to the single area designated for alcohol (“the single area”); and that
 - all beverages displaying branding identical to or clearly imitating alcoholic products are restricted to the single area regardless of whether or not they contain alcohol;
 - **Agree** that precise and consistent definitions of the alcohol content of the variously described alcohol products available in supermarkets and grocery stores should be included;
 - **Consider** the manner in which grocery retailers have responded to the Act and particularly their tardiness in implementing changes despite community pressure;
 - **Consider** how they are likely to respond to the opportunity to legally place and display low alcohol products and similar

products anywhere in the store, and what effect that may have on children in particular; and

- **Note** our support for the following recommendations from Alcohol Healthwatch:
 - that section 237(1)(b) be amended to include “a price or discount”;
 - s116 or 117 which allows any licensing committee or authority to issue a licence subject to conditions, should explicitly apply to the physical location or single area within supermarket or grocery stores: and that
 - s100 (form of application) is amended so that Directors of companies applying for a liquor licence are required to list any other alcohol-licence holding company that they were or are named Directors of.

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