



# **New Zealand Nurses Organisation**

## **Submission to Food Standards Australia New Zealand**

**on**

## **Application A576 - Labelling of Alcoholic Beverages with a Pregnancy Health Advisory Label**

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## **EXECUTIVE SUMMARY**

1. The New Zealand Nurses Organisation (NZNO) welcomes the opportunity to comment on the Application seeking a variation to existing Standard 2.7.1 – Labelling of Alcoholic Beverages and Food Containing Alcohol, of the Australia New Zealand Food Standards Code (the Code), to require a health advisory label on alcoholic beverage containers advising of the risks of consuming alcohol when planning to become pregnant and during pregnancy.
2. As representative of over 40 000 nurses, midwives, kamahi hauora, and other healthcare workers, most of whom are women, NZNO has both a professional and personal insight into the effects of alcohol, particularly during pregnancy, and is strongly in favour of the mandatory labelling of alcoholic beverage containers with a health advisory label (Option 2).
3. Apart from the clinical evidence that alcohol in pregnancy presents risks to both mother and child, two key social factors persuade NZNO that this measure is necessary. Firstly, changes in the patterns of the consumption of alcohol by young women, who are tending to drink more heavily and more frequently and at a younger age, suggests that the incidence of Foetal Alcohol Spectrum Disorder (FASD) and alcohol-related Birth Defects could increase rapidly, at great public and personal cost. Such an increase would have huge resourcing implications for public health, education, employment and social welfare programmes. Secondly, since virtually half of all pregnancies in Australia and New Zealand are unplanned, warnings are most appropriate repeatedly and at the point of sale, not afterwards or in other contexts.
4. Alcohol is a common factor in sexual behaviour associated with increased health risks such as sexually transmitted infection (STI) and unwanted pregnancy (Standerwick et al 2005), yet alcohol advertising, across all media, is directed at the most vulnerable at risk group, young adults, with no accompanying warnings. NZNO believes that warning labels on alcohol could be doubly beneficial in raising awareness of the health risks of both alcohol and unwanted pregnancy.
5. It is also significant given the rise in infertility in developed countries and the resources used to address it, that high alcohol intake is implicated in decreased sperm quantity and quality, disrupted menstrual cycles, miscarriages, placental

abruption, preterm deliveries, and stillbirths, and evidence suggests even moderate intake make affect couples' chances of getting pregnant (Jensen, 1998).

6. The suggested labelling directed at the effects of alcohol on the foetus is accurate and informative and counters prevalent, manifestly unsafe misconceptions that it is safe to drink moderately during pregnancy. NZNO does not accept that such warnings would be ineffective, any more than it accepts that advertising does not work. Labelling would complement and reinforce other public health strategies relating to drinking by delivering a timely, consistent message in a relevant context.
7. NZNO does not believe that concerns about spreading unnecessary alarm are warranted. There have been warning labels on alcoholic beverages in the United States and other countries for many years without any evident panic.
8. Rather, NZNO suggests that NOT having a warning in itself sends a clear and dangerous message that there is nothing to worry about. Results from a recent New Zealand survey indicate that although most women are *aware* of the detrimental effects of alcohol during pregnancy, over half were felt that some alcohol was safe, and over half of those who were pregnant or had given birth within the past five years had consumed some alcohol while pregnant, though only 13% consciously chose to do so (Parackal et al, 2006). That is because forty percent drank before they were aware they were pregnant, which is when the foetus is most vulnerable to the effects of alcohol and 20% had binged at least once, again, mostly before pregnancy was confirmed. Evidently, as the report says, "awareness and knowledge may not necessarily translate into behaviour during pregnancy, especially among younger women," hence the need for constant, timely messages.
9. The Behaviour Survey of pregnant women conducted by the New Zealand Ministry of Health (2004) indicated a similar level, 13%, of women who consciously chose to drink during pregnancy, which suggests that the vast majority of women would be neither panicked nor offended by a health warning label, but would welcome the reminder.
10. NZNO strongly recommends mandatory labelling of alcohol with warnings about its potential to affect fetal development as an effective, responsible public health tool to prevent avoidable harm.

## **ABOUT THE NEW ZEALAND NURSES ORGANISATION**

1. The New Zealand Nurses Organisation (NZNO) is a Te Tiriti o Waitangi based organisation which represents over 40 000 nurses and health workers. NZNO is the professional body of nurses and the leading nursing union in Aotearoa New Zealand. Our Māori partner, Te Runanga o Aotearoa, represents NZNO and Māori in nursing and health. Our members include nurses, midwives, students, kaimahi hauora, health care workers and other health professionals.
2. The NZNO vision is “Freed to care, Proud to nurse”. Te Runanga o Aotearoa’s vision is “Hei oranga motuhake mo ngā whānau me ngā hapū me ngā iwi”. Our members enhance the health and wellbeing of all people of Aotearoa New Zealand through ethically based partnerships. Our members are united in the achievement of their professional and industrial aspirations.
11. NZNO has consulted its members in the preparation of this submission in particular NZNO staff (Management, Professional Nursing Advisors, Policy Analysts, and Industrial Advisors) and NZNO members (Te Runanga, Colleges and Sections, Board Members and other health care workers). Our members include nurses, midwives, students, health care workers and other health professionals.

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