

# **Family First**

## **Dissenting Report**

### **Inquiry into the Alcohol Toll Reduction Bill 2007**

The abuse of alcohol is a serious problem causing long-term health problems, injury, assaults and death. It is estimated to cost Australia \$15.3 billion a year.

Family First believes that solving the binge drinking problem requires a broad range of approaches, with action required from all levels of government. Family First's *Alcohol Toll Reduction Bill 2007* focuses on a number of key elements:

- Providing compulsory health information labels on all alcohol products;
- Limiting the times alcohol can be advertised on television and radio to after 9pm and before 5am; and,
- Ensuring broadcast alcohol advertisements are pre-approved and regulated by the Australian Communications and Media Authority, rather than by an industry-run group.

Family First is disappointed that the Committee has ducked the important issues raised in the *Alcohol Toll Reduction Bill*. The Bill identifies key deficiencies in the regulation of alcohol advertising and the lack of consumer health information labels on products that are known to be dangerous if misused.

The Committee's recommendations do not even set out a clear position on whether the loophole that allows alcohol advertising with daytime live sports broadcasts should remain. The Committee should have recommended this loophole be deleted from the code, so that children are protected. There is clear evidence of the harm this loophole causes.

By adopting Family First's changes, the Federal Government could encourage a healthy drinking culture and cut the human and financial toll of alcohol on the Australian community.

#### **The alcohol problem**

The Royal Australasian College of Physicians says Australia's binge drinking problem is serious, with "far more years of life ... lost to alcohol in the form of death and

disability than for tobacco or other illegal drugs ... Each year there are an estimated 3,500 alcohol related deaths."<sup>1</sup>

The Alcohol and other Drugs Council of Australia pointed out that:

... another 10 000 [people] need ongoing medical treatment through alcohol-related harm. The annual cost in alcohol related absenteeism is 7.5 million working days and the economic impact of its abuse is \$15.3 billion. Alcoholic beverages cause substantial health and social harm to the drinker and to others.<sup>2</sup>

The World Health Organisation has also identified alcohol as a major problem, saying "... alcohol is the third most important avoidable cause of death and disability in developed societies like Australia. Given this finding, alcohol is not an ordinary commodity and should not be treated as one."<sup>3</sup>

A report published by the Australian Institute of Health and Welfare last year stated that:

... binge drinking is highly prevalent among teenagers and young adults in Australia. In short, the report found that in the case of alcohol:

- 84% aged 14 years and over had consumed alcohol in the year prior to the survey
- 9% drank alcohol on a daily basis
- 41% on a weekly basis
- 33% on a less than a weekly basis
- the proportion of daily drinkers in the 12 months prior to the survey, 10% of Australians aged 14 years and over drank alcohol at risky or high levels; and
- the average age of initiation to alcohol was 16 years for males; 18 years for females.

The report noted that in 2003 some 3430 deaths were attributable to alcohol, compared with 1705 deaths as a result of illicit drug use (AIHW 2007).<sup>4</sup>

A counselling centre gave a picture of the human cost of alcohol abuse:

... we see the terrible end result of alcohol abuse [in] ... marriage breakdown, physical abuse related to alcohol or simply parents sharing their deep concern about one of their teenagers who is drinking too much. We facilitate support groups for families struggling with this and hear the

---

1 Royal Australasian College of Physicians, submission 67

2 Alcohol and other Drugs Council of Australia, submission 9

3 Alcohol and other Drugs Council of Australia, submission 9

4 Alcohol and other Drugs Council of Australia, submission 9

---

stories. It is time government stepped in and took this issue seriously for the sake of the community. It is time the government listened to those affected by alcohol abuse and not just the alcohol industry.<sup>5</sup>

### **Effect of alcohol advertising**

Alcohol advertising is a very powerful method used by the alcohol industry to influence the consumption of alcohol in the Australian community.

The Committee was told that there is clear evidence "... that links the advertising and promotion of alcoholic beverages and hazardous and harmful use of alcohol. This is of particular relevance to the youth market (both underage as well as young adults)."<sup>6</sup>

Professor Sandra Jones told the inquiry that:

... we have clear evidence that young people are exposed to alcohol advertising and we have clear evidence, from small-scale studies in Australia, that children are very much aware of it and that it influences their drinking. We also have evidence ... from some very extensive longitudinal studies in the US that that exposure leads to increased drinking amongst underage drinkers.<sup>7</sup>

Further to that, Professor Jones said that the "... longitudinal studies from the US ... have been able to put specific numbers on [the very strong link with exposure to advertising and drinking] through the number of advertisements that children see and the direct link to their increased alcohol consumption—they consume alcohol earlier."<sup>8</sup>

The National Centre for Education and Training on Addiction states that:

Image advertisements ... attempt to engage the target audience by developing an idealised image or lifestyle associated with the product that reflects the target audience's goals. For young people, the goals are generally focused on fun, relaxation, romance, adventure and sexual or social acceptance. Importantly, it is these same themes and appeals that appear most prominently in alcohol advertising, particularly in youth-oriented television programs and magazines. Young people find meaning in their lives through their patterns of consumption, and alcohol marketing is believed to influence the formation of their social identity. In addition, the pervasiveness of alcohol advertising is likely to have a cumulative effect not only on the target audience, but also on others who may be incidentally exposed to it.<sup>9</sup>

---

5 Someone Who Cares Inc, submission 21

6 Centre for Behavioural Research in Cancer Control, submission 30

7 Professor Jones, Committee Hansard, 15 May 2008, page 5

8 Professor Jones, Committee Hansard, 15 May 2008, page 2

9 National Centre for Education and Training on Addiction, submission 26

It is clear that alcohol advertising can influence alcohol consumption and in particular can have an effect on young people including those who are under the legal age for drinking alcohol.

### **Current regulation of alcohol advertising**

Alcohol advertising is regulated by a number of voluntary industry codes including the Australian Association of National Advertisers Code of Ethics, the Commercial Television Industry Code of Practice, the Commercial Radio Code of Practice and the Alcohol Beverages Advertising Code (ABAC).<sup>10</sup>

For example, the Commercial Television Industry Code of Practice puts restrictions on the broadcast of alcohol ads during the day in children's viewing times, but permits an "... exemption for live sport, for weekends and public holidays [which] allows alcohol advertising as an accompaniment to a 'live' sporting broadcast, [to be] shown at any time of day."<sup>11</sup>

The main code dealing with alcohol advertising is the Alcohol Beverages Advertising Code (ABAC). The code sets out detailed requirements for alcohol ads with the aim of supporting "... the responsible use of alcohol and ensuring that alcohol advertising does not encourage irresponsible use of the product."<sup>12</sup> The Australian Associated Brewers offered a summary of the operation of the ABAC scheme:

... there are four potential decision points to test compliance with the standards of the Code:

1. Proposed advertisements are checked by company and advertising agency staff against the Code, then;
2. Pre-vetted by non-company assessors using the Alcohol Advertising Prevetting Service (AAPS).
3. Any complaints (by consumers or non-consumers, e.g. the Community Alcohol Action Network - CAAN) are referred to the ABAC Chief Adjudicator.
4. Where a complaint is upheld, the company is asked to withdraw or modify an advertisement ...<sup>13</sup>

Free TV Australia notes in addition to these points that complaints to the Advertising Standards Board (ASB) on alcohol advertising are sent to ABAC, but some are determined to be taste and decency matters and are returned to the ASB.<sup>14</sup>

---

10 Department of Health and Ageing, submission 96

11 Free TV Australia, submission 56

12 ABAC Scheme Management Committee, submission 70, Attachment 1

13 Australian Associated Brewers, submission 36

14 Free TV Australia, submission 56

---

### ***Pre-vetting or pre-approval of advertisements***

The Department of Health and Ageing notes that pre-vetting of alcohol advertisements is not universal and that 20 per cent of the top 50 alcohol advertisers are not members of the ABAC scheme:

Pre-vetting of alcohol advertisements is encouraged under the Scheme for all ABAC signatories. Of the top 50 alcohol advertisers, 40 are ABAC signatories. Pre-vetters consider proposed advertisements against the ABAC at an early stage of campaign development to assess their compliance with the Code before they are published or broadcast.<sup>15</sup>

Further, the ABAC Management Committee notes that "individual alcohol beverage producers may use the AAPS [Alcohol Advertising Pre-vetting Scheme] pre-vetting service"<sup>16</sup>, rather than *must* use the service.

It is difficult to determine the detail of how pre-vetters make their judgements given "... any opinion expressed by a pre-vetter in respect to a matter which is submitted for pre-vetting is confidential to the producer, the pre-vetter and the representative of their respective industry association."<sup>17</sup>

The Committee received evidence that "... the current industry prevetting system is ineffective in protecting young people from inappropriate messages about alcohol ...".<sup>18</sup> Professor Jones noted that:

We have recently completed a series of studies assessing the apparent compliance of alcohol advertising with the revised ABAC code which show no improvement since its introduction in 2004, either in terms of expert assessment of board decisions (Jones et al. 2008) or young people's perceptions of messages in alcohol advertising (Jones et al. under review).<sup>19</sup>

Family First believes the pre-vetting system is not effective in screening out all advertisements that breach the ABAC.

### ***Complaints from the public***

Regulation of alcohol advertising in Australia is also a complaints-based process that implies that if there are no complaints, or if a complaint is rejected, there is no problem. Some submissions emphasised pointed to a lack of complaints as proof that the system is running well.

---

15 Department of Health and Ageing, submission 96

16 ABAC Scheme Management Committee, submission 70, Attachment 1

17 ABAC Scheme Management Committee, submission 70, Attachment 1

18 Professor Sandra Jones, submission 47

19 Professor Sandra Jones, submission 47

But it is clear that the number of complaints does not reflect the level of community disquiet with alcohol advertising. Free TV Australia says "... there is little evidence of community dissatisfaction ... the number of alcohol advertisements which are the subject of viewer complaint through the ABAC Scheme remains low"<sup>20</sup> but admitted in the hearings "lots of people do not want to make a formal complaint; they just want to make sure that someone has heard them and listened to what they had to say."<sup>21</sup>

The National Centre for Education and Training on Addiction noted that:

The current ABAC system depends upon complaints being made and upheld before advertisements are withdrawn. Nevertheless, by the time a complaint is made and subsequently upheld, the intended period of advertising for the product is usually completed. In 2006 a total of 53 complaints (relating to 26 adverts) were received by the ABAC Adjudication Panel. The Panel considered that 9 of these complaints fell within the Code and ultimately upheld 2 of the complaints.<sup>22</sup>

The Committee also received evidence from VicHealth that only three per cent of adults know about the ABAC scheme and therefore few have the opportunity to complain. Of the 30 per cent of people concerned about alcohol ads, only two per cent had lodged a complaint. The main reason people gave for not lodging a complaint was they did not think it would make a difference.<sup>23</sup>

The Royal Australasian College of Physicians emphasised the importance of "promoting an advertising system which encourages people to complain ...".<sup>24</sup>

There are however concerns about how complaints are examined once they reach the ABAC Complaints Adjudication Panel:

The Complaints Panel has interpreted advertisements most literally although advertising evokes and conveys meaning through allusion and inference rather than linear logic ... Although the preamble says the spirit of the code is as important as the letter, the Complaints Panel interprets advertisements according to the "black letter" of the code.<sup>25</sup>

Professor Sandra Jones has co-authored a number of published studies on the ABAC scheme which demonstrate that in many cases both experts and young people believe the code is being breached, while the ABAC complaints panel does not agree:

We have recently completed a series of studies assessing the apparent compliance of alcohol advertising with the revised ABAC code which show

---

20 Free TV Australia, submission 56

21 Ms Flynn, Committee Hansard, 15 May 2008, page 23

22 National Centre for Education and Training on Addiction, submission 26

23 VicHealth, submission 37, page 11

24 Royal Australasian College of Physicians, submission 67

25 Australian Drug Foundation, submission 52, page 11

---

no improvement since its introduction in 2004, either in terms of expert assessment of board decisions (Jones et al. 2008) or young people's perceptions of messages in alcohol advertising (Jones et al. under review).<sup>26</sup>

For instance, the makeup of some advertisements was found to appeal more to people under the drinking age than to adults:

Despite the ABAC scheme's rules which discourage advertising that has "strong or evident appeal to children or adolescents", research shows that a substantial amount of alcohol advertising is communicated to young people. For example, several advertisements for alcoholic beverages screened on television in metropolitan Melbourne were found to be more likely to reach 13 to 17 year olds than adults ...<sup>27</sup>

Even in cases where advertisers are found to be in breach of the ABAC, advertisers cannot be forced to stop the ad and there are no sanctions.<sup>28</sup> The Australasian Faculty of Public Health Medicine is concerned that this means advertisers can breach ABAC without any consequences.<sup>29</sup>

Family First believes the ABAC complaints system is not working effectively to screen out all alcohol advertisements that breach the code.

### *Exemption for alcohol ads screened with live televised sport*

The large number of codes that cover the area of alcohol advertising sometimes means that what one says is overridden by the other. Someone reading the Children's Television Standards, for example, would see that:

No advertisement or sponsorship announcement broadcast during a C program or P program that is broadcast outside a C period or P period, or in a break immediately before or after such a C program or P program, may identify or refer to a company, person or organisation whose principal activity is the manufacture, distribution or sale of alcoholic drinks. This requirement is in addition to the requirements of the Commercial Television Industry Code of Practice.<sup>30</sup>

Given the Standards state C programs and P programs are broadcast between 7am and 8.30pm, parents might think their children are protected from alcohol advertising between those times.

---

26 Professor Sandra Jones, submission 47

27 VicHealth, submission 37, page 10-11

28 Australian Drug Foundation, submission 52, page 11

29 Australasian Faculty of Public Health Medicine, submission 57, page 3

30 Paragraph 23(4), Children's Television Standards, compilation dated 1 July 2005, see: [http://www.acma.gov.au/webwr/aba/contentreg/codes/television/documents/chstdvarn\\_03.pdf](http://www.acma.gov.au/webwr/aba/contentreg/codes/television/documents/chstdvarn_03.pdf)

But the Australian Drug Foundation points out that these Standards are overridden by the Commercial Television Industry Code of Practice, which removes that protection for children and:

... allows alcohol advertising during the day 'as an accompaniment to the live broadcast of a sporting event on weekends and public holidays' and 'may be broadcast as an accompaniment to the live broadcast of a sporting event if the sporting event is broadcast simultaneously across a number of licence areas'.<sup>31</sup>

As a result of this special exemption for alcohol ads during live weekend and public holiday sporting broadcasts:

... children are exposed to alcohol advertising on television between the hours of 5.00 am and 8.30 pm, when watching live sport broadcast on weekends and public holidays or when sport is broadcast live from a different time zone. Given the popularity of sport in Australia, and the amount of sport broadcast on weekends and across time zones, this is a significant fault in the current regulatory code.<sup>32</sup>

This means that "... Australian children who watch televised sport are potentially exposed to a large number of alcohol advertisements – further enhancing the perceived association between alcohol consumption and sport (and between drinking and sporting success)."<sup>33</sup>

Australian Television Audience Management (OzTAM) figures show that more than 12 per cent of the audience for weekend television sport is under 18 and two thirds of that number is 12 or younger.<sup>34</sup>

Professor Jones gave evidence to the Committee at the Canberra hearing that exposing children to alcohol ads does have an impact:

Our research and the research of others clearly shows that children have a very high awareness of and liking for alcohol brands, particularly due to their exposure to them during sporting telecasts and the links that those children make between those products, their sporting heroes and the codes.<sup>35</sup>

In Family First's second reading speech for the *Alcohol Toll Reduction Bill* it was pointed out that David Boon was a great cricketer, but he is just as well remembered for knocking off 52 tinnies on a flight to London. That made him the logical choice to

---

31 Australian Drug Foundation, submission 52, page 5

32 Australian Drug Foundation, submission 52, page 5

33 Professor Sandra Jones, submission 47

34 Free TV Australia, submission 56, page 15

35 Professor Jones, Committee Hansard, 15 May 2008, page 1



---

promote beer. 'Boonie' is held up to be a hero so of course Victoria Bitter used him in their ads. But is this the message we want to send to children?

The National Drug Research Institute states that:

- "children under the age of 12 were exposed to 1 in every 3 alcohol ads seen on average by mature adults";
- "under-age teenagers (13-17 years) were exposed to [alcohol advertising] levels that were virtually identical to that of young adults (18-24 years)";
- that teenagers are in particular danger from binge drinking with "over 80% of all alcohol consumed by 14-17 year olds ... drunk at risky/high risk levels for acute harm"; and,
- "about 50 teenagers a year die from alcohol related injury or disease."<sup>36</sup>

Yet, despite the evidence of the impact television alcohol ads can have on children and teenagers, it has not even been a blip on the ABAC Management Committee's radar. The Federal Government's representative told the Committee "I do not think that during my time on the [ABAC management] committee there has been any discussion on [alcohol advertising during sport programs]."<sup>37</sup>

The 2007 National Drug Strategy Household survey reveals that "72% of the population support restricting TV advertising of alcohol products until after 9.30pm ..."<sup>38</sup>

Family First believes the special exemption which allows alcohol ads to be broadcast with live sport during the day on weekends and public holidays should be abolished.

### **The effectiveness of voluntary industry codes**

The evidence from a range of studies is that industry self-regulation of alcohol advertising, as occurs in Australia, does not work:

- "Various studies both in Australia and internationally have shown that voluntary codes of advertising are an ineffective method of regulating advertising content. It is apparent from such studies and our own observations that the current regulation of alcohol advertising in Australia is seriously inadequate."<sup>39</sup>

---

36 National Drug Research Institute, submission 25

37 Ms Hart, Committee Hansard, 15 May 2008, page 32

38 Australian Institute of Health and Welfare, *2007 National Drug Strategy Household Survey: first results*, 27 April 2008. See: <http://www.aihw.gov.au/publications/index.cfm/title/10579>

39 Alcohol Education and Rehabilitation Foundation, submission 27

- "A recent review of the self-regulatory framework for alcohol advertising in New Zealand concluded that alcohol advertising contributes to the drinking culture in that country."<sup>40</sup>
- "The Alcohol & Public Policy Group report that countries with greater restrictions on advertising have fewer alcohol-related problems (International Centre for Alcohol Policies 2001). Further, they conclude that industry self-regulation tends to be largely ineffective, and that an effective system requires an independent body with the power to veto advertisements, rule on complaints and impose sanctions (International Centre for Alcohol Policies, 2001)."<sup>41</sup>

Dr Alex Wodak, who daily sees the impact of alcohol abuse as Director of the Alcohol and Drug Service at St Vincent's Hospital in Sydney, stated:

Advertising promotes the view that alcohol can be consumed without risk. The alcohol beverage industry in Australia decides the rules, appoints the judge and jury and then runs the system ... Government regulation of alcohol advertising has been found to be effective whereas voluntary codes are ineffective.<sup>42</sup>

Professor Jones stated that there is a need for "... an externally imposed and monitored ban [on messages which the industry themselves have already stated to be unacceptable] as the industry appears to have been unable or unwilling to enforce their own code despite several reviews and repeated assertions that they would do so."<sup>43</sup>

The evidence is that under industry self-regulation, state and federal governments have largely taken a back seat.

The submission of the Queensland Government revealed that a "Monitoring of Alcohol Advertising Committee" (MAAC) was established by the Ministerial Council on Drug Strategy in May 2006<sup>44</sup>, but this Committee has disappeared without trace, not having issued any public assessments of the effectiveness of the regulation of alcohol advertising.<sup>45</sup>

There is an administrative inertia caused by multiple committees, multiple codes and no central point of responsibility for overall alcohol marketing. The haze of this sort of ineffective regulation suits an industry that would prefer no outside interference.

---

40 National Centre for Education and Training on Addiction, submission 26

41 Professor Sandra Jones, submission 47

42 Dr Alex Wodak, submission 31

43 Professor Sandra Jones, submission 47

44 Queensland Government, submission 94; also noted by the Winemakers' Federation of Australia, submission 28

45 Ms Hart, Committee Hansard, 15 May 2008, page 30-31

---

The Federal Government should take control of regulation of this important area, to ensure an effective, publicly accountable system to protect the Australian public.

### **Health information labels**

Family First wants health information labels on all alcohol products so that all Australians are aware of the dangers of abusing alcohol.

Alcohol companies now publish information on the number of standard drinks in a bottle or can. That's great, but how can people make use that information without knowing how many standard drinks they can have without impacting on their health?

The Australian Drug Foundation argued that:

... access to information on how to use a product (such as alcohol) as safely as possible is a basic consumer right which should accompany the sale and supply of the product. It is especially relevant to products such as alcohol which have known health and safety risks when used inappropriately. Labelling alcohol products is efficacious because the information will be available to those in most in need of it - purchasers and consumers - and at the time when it is most relevant to them.<sup>46</sup>

The Alcohol Education and Rehabilitation Foundation pointed out that alcohol should have at least equal treatment to food products:

Labelling of food products is clearly designed to provide information so that consumers can make an informed choice about using or consuming a particular product. No less a standard should be applied to alcohol.<sup>47</sup>

There has been considerable public support over time for the introduction of alcohol warning labels. The National Drug Strategy Household Surveys for 2001, 2004 and 2007 have shown public support of 71, 69.9 and 71 per cent respectively.<sup>48</sup>

It was also noted that:

A public opinion poll of Victorians found that 68% of those surveyed support the idea of all alcohol products, by law, carrying health warnings with phrases such as "Drinking alcohol regularly whilst pregnant can harm your unborn child" or "Alcohol is a drug and it can be addictive". Thirteen percent of respondents also told the interviewers that they would buy less alcohol if warnings were on products."<sup>49</sup>

---

46 Australian Drug Foundation, submission 52

47 Alcohol Education and Rehabilitation Foundation, submission 27

48 Australian Drug Foundation, submission 52; Australian Institute of Health and Welfare, 2007 *National Drug Strategy Household Survey: first results*, 27 April 2008. See: <http://www.aihw.gov.au/publications/index.cfm/title/10579>

49 Australian Drug Foundation, submission 52

Professor Jones from the University of Wollongong pointed out that alcohol warning labels would be useful if there was enough work done on identifying effective messages:

Messages that resonate very clearly with young people involve things that do happen to them. That sort of thing would be effective ... The other thing that is very clear from our research and from other research that has been done by other organisations is that young people are very concerned about their friends. They need a message that would assist them and empower them to communicate with their friends to raise those things in discussion. That is something that came up very clearly. 'If I was with my friends and I saw those labels on the drinks, it would enable me to bring up that discussion.' Messages like 'Drinking excessive alcohol can lead to unsafe behaviour' and that it can lead to hangovers—that is one they like, though it does not have a particularly negative health consequence in the long-term.<sup>50</sup>

Australian alcohol producers already print warning labels on alcohol exported to the United States<sup>51</sup> and by the end of the year will have to do the same for alcohol exported to Britain.<sup>52</sup>

It is also important to integrate the health information messages into a broader alcohol information campaign, in much the same way as the successful campaigns on smoking:

There are important lessons to learn from the longstanding campaign for tobacco control. The tobacco labelling experience offers strong evidence that warning labels can be effective not only in increasing information and changing attitudes, but also in changing behaviour ...

Labelling will also act to reinforce the messages, information and education being delivered through other strategies such as media campaigns, school and community education programs, websites etc. It is, therefore, important that the wording of the health advice be compatible and consistent with the broader health messages being delivered.<sup>53</sup>

But it is not clear if a coordinated campaign linking health information labels to broader television, radio and print campaigns is possible under the current system of regulation which appears inflexible.<sup>54</sup>

In reply to a question on notice, FSANZ stated that in response to the Council of Australian Governments' request that it "... consider mandatory health warnings on

---

50 Professor Jones, Committee Hansard, 15 May 2008, page 4

51 Australian Drug Foundation, submission 52

52 National Centre for Education and Training on Addiction, submission 26

53 Australian Drug Foundation, submission 52

54 Mr Fladun, Committee Hansard, 15 May 2008, page 33

---

packaged alcohol ..." it "... may only go part way towards a 'best alcohol information labelling system'".<sup>55</sup> This is very disappointing.

FSANZ's response indicated a cumbersome, under-funded system that could get in the way of best practice health information labels for alcohol products:

The Ministerial Council [Australia New Zealand Food Regulation Ministerial Council] is responsible for the formulation of policy guidelines which FSANZ must have regard to in developing food regulatory measures. At present no policy formulation exists on the subject of alcohol labelling. In the absence of such policy it would be very difficult for FSANZ to develop a comprehensive alcohol labelling system.

The development of an alcohol information labelling system would also need to be guided by an assessment of costs versus benefits through a regulatory impact statement (RIS).

This further work would be resource intensive and without additional funding FSANZ would need to reprioritise its current work plan.<sup>56</sup>

FSANZ provided the Committee with a table of food labelling requirements it has already mandated, but these set basic requirements for information that must be provided and do not appear to provide for prominent health information labels like those that apply to cigarettes.<sup>57</sup>

Family First wants best practice prominent health information labels on alcohol products. These labels could be part of a broader coordinated government alcohol information campaign. This appears unlikely to happen with FSANZ as the responsible agency and it may be appropriate to move the responsibility for alcohol to a more responsive agency.

### **Scope of the bill**

A number of submissions suggested the scope of the bill should be widened to cover all forms of alcohol advertising.<sup>58</sup> Family First would welcome the chance to work with the government to expand the coverage of the bill.

### **Conclusion**

Family First is disappointed that the Committee has ducked the important issues raised in the *Alcohol Toll Reduction Bill*. The Bill identifies key deficiencies in the

---

55 FSANZ response to questions on notice asked by Senator Fielding at the hearing on 15 May 2008, received 6 June 2008

56 FSANZ response to questions on notice, received 6 June 2008

57 FSANZ response to questions on notice, received 6 June 2008

58 Eg Foundation for Advertising Research, submission 23; Free TV Australia, submission 56

regulation of alcohol advertising and the lack of consumer health information labels on products that are known to be dangerous if misused.

The Committee's recommendations do not even set out a clear position on whether the loophole that allows alcohol advertising with daytime live sports broadcasts should remain. The Committee should have recommended this loophole be deleted from the code, so that children are protected. There is clear evidence of the harm this loophole causes.

Instead the Committee has recommended referring the problem for consideration by two more committees, both of which have failed to act on this problem in the past.

The Committee received good evidence on how alcohol health information labelling might be effective. It should have made an in principle recommendation for warning labels and called on the government to commit the necessary resources to this important public health problem.

Family First recommends that the *Alcohol Toll Reduction Bill 2007* be passed, with amendments to address the scope of the bill and to ensure that the objectives of the bill are achieved.

Senator Steve Fielding  
Family First Leader