



**Australian Government**  
**Department of Health and Ageing**

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Australian Government Department of Health and Ageing  
Submission to the  
Australian Senate Community Affairs Committee for inquiry into the  
*Alcohol Toll Reduction Bill 2007*

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## A. Introduction

Alcohol use is embedded in Australian culture. It generates employment and income, and plays a central role in traditions and customs. However, it also generates significant costs for society by adding to the burden of mortality, morbidity, violence, crime, and many other areas of health and welfare. The challenge facing health authorities is how to deal with a widely accepted legal product that also causes harm.

According to the 2007 survey, over 80% of Australians report they drink alcohol. About 35% drink at least once a year at levels that risk harm in the short term from such events as accidents and violence. About 10% drink at levels that risk harm in the long term from conditions such as cancer, cardiovascular disease, and dependence<sup>1</sup>.

The 20–29 year age group shows the riskiest drinking patterns with about 60% drinking at risk of short term harm on at least one occasion a year and about 16% drinking at risk of long term harm. Adolescents are at higher risk of harm from alcohol than adults drinking the same amount because of their smaller physical size and emotional and intellectual inexperience. Young Australians aged 14–19 show roughly the same risky drinking profile as adults.

According to the National Drug Strategy Household Surveys risky alcohol consumption for both short and long term harm has remained fairly stable for the general population between 2004 and 2007. Risky alcohol consumption for harm in the short term in the 14–19 year age group has also remained stable, while the 20–29 year age group has shown a very small increase from 59.4% in 2004 to 61% in 2007. A small decrease for the 14–19 age group (10% to 8.8%) and a small increase 20–29 year age group (14.7% to 16%) for risky drinking for long term harm have been observed between 2004 and 2007. No statistical testing has been published for the risky drinking rates from the Household Survey. However, about 20,000 girls aged 12–15 years drink alcohol daily or weekly. About one in five girls aged 14–19 drink at a risky or high risk level for short-term harm at least monthly<sup>2</sup>.

Across a number of surveys a change in the type of alcohol consumed by young people has been observed. Ready-to-drink alcohol products have become much more popular. The statistics, particularly for young girls drinking ready-to-drink alcohol products (RTD), are alarming. In 2000, about 14% of female drinkers aged 15–17 reported drinking RTD at their last drinking occasion. By 2004, this has increased to 60%<sup>3</sup>.

Most people do not suffer ill-effects from modest consumption, however, the risk of harm increases exponentially as consumption increases. During the ten years between 1992 and 2001, it is estimated that 31,133 Australians died from alcohol-caused disease and injury. Liver cirrhosis, road-crash injury, suicide, and dependence were the most common causes of death over the ten year period. Over 570,000 hospitalisations were caused by alcohol use between 1993–94 and 2000–01. Alcohol dependence, injuries caused by assaults, road crash injury and attempted suicide were the most common diagnostic reasons for the hospitalisations<sup>4</sup>.

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<sup>1</sup> National Drug Strategy Household Survey 2007, published 2008

<sup>2</sup> National Drug Strategy Household Survey 2007, published 2008

<sup>3</sup> Alcohol Consumption Patterns Among Australian 15–17 Year Olds 2000–04

<sup>4</sup> Australian Alcohol Indicators, 2004

These and other harms contribute to an estimated social cost to Australian society of \$15.3 billion caused by alcohol misuse<sup>5</sup>. These harms occurred in an atmosphere where per capita consumption of alcohol has been slightly declining.

## **B. Alcohol Policy**

### *B1. Policy Framework*

Reducing harms from alcohol misuse is a responsibility shared among all levels of government. The Commonwealth Government has a role in providing leadership, policy direction, research, and national education campaigns. State and territory governments have responsibility for matters such as liquor licensing regulations, and the provision of treatment services.

The Commonwealth and the States and Territories work together through the mechanisms of the Ministerial Council on Drug Strategy to implement initiatives in response to the *National Alcohol Strategy 2006-2009*. The Strategy is a plan for action developed collaboratively between governments, industry, and community partners. The four identified priority areas of the Strategy are intoxication, public safety and amenity, health impacts, and cultural place and availability.

The Ministerial Council on Drug Strategy, which includes law enforcement and health ministers from all Australian governments, has endorsed the Strategy as well as key action areas for the first year – 2007. Key action areas include:

- Monitoring and review of alcohol promotions;
- Increase community awareness and understanding of the extent and impacts of intoxication;
- Improve enforcement of liquor licensing regulations;
- Support whole-of-community initiatives to reduce alcohol-related health problems; and
- Develop and implement social marketing campaigns to reduce alcohol-related harms.

The scope of the Strategy is broad and covers a range of issues that the Department has responsibility for, including alcohol advertising, managing Australia's relationship with international bodies that develop policy on alcohol such as the World Health Organization (WHO), industry liaison, research, and health promotion.

One of the main sources for population level advice to health professionals and consumers is the Australian Alcohol Guidelines. The Guidelines are designed to:

- Enable Australians to make informed choices about their drinking and health;
- Enable health professionals to provide evidence-based advice on drinking and health; and
- Promote individual and population health, and minimise harm from alcohol.

The National Health and Medical Research Council developed the original Australian Alcohol Guidelines in 2001, and a process to revise and update the guidelines using the latest scientific information is now underway. Revised draft Guidelines were released for a 60 day public consultation period in October 2007.

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<sup>5</sup> The costs of tobacco, alcohol and illicit drug abuse to Australian society in 2004/05, 2008

Compared to the previous version (2001), there are significant changes in the revised draft Guidelines. The advice has been simplified with one overarching guideline for all adults and two guidelines with special precautions for children and adolescents, and for women who are pregnant, hoping to become pregnant, or breastfeeding.

This new approach has led to a simplified single guideline level for alcohol intake for both immediate and long-term risks (*Guideline 1*), which is significantly lower than the 2001 guideline levels. The new guidelines recommend two standard drinks a day or less to minimise lifetime risk of harm. This compares to the 2001 guidelines which recommended no more than 4 standard drinks on an average day and never more than 6 per day for men; and no more than 2 standard drinks on an average day and never more than 4 per day for women. The draft guideline for pregnant and breastfeeding women has also been made more conservative than the 2001 guideline which recommends no more than one drink per day. The draft guideline states that based on the scientific evidence “not drinking is the safest choice”. The revised guidelines are due to be published in June 2008.

The Commonwealth also implements the *National Alcohol Harm Reduction Strategy* – a program of funding for activities to inform Australians about the Australian Alcohol Guidelines, low risk drinking, and what constitutes a standard drink. These activities help people better understand the impact of alcohol on their health and motivate them to monitor their drinking.

Recently, the Prime Minister responded to community concerns about levels of youth binge drinking. Funding of \$53.5 million will support the National Binge Drinking Strategy which includes three measures:

- \$14.4 million to invest in community level initiatives to confront the culture of binge drinking, particularly in sporting organisations;
  - \$2 million will be invested in Club Champions – two members from each major sporting club competing in the national competitions across all six sports to help foster leaders in responsible drinking at the elite level.
  - \$5.2 million will be invested in a significant expansion of the Good Sports initiative of the Australian Drug Foundation – to support local sporting clubs to build a culture of responsible drinking at the grassroots level.
  - \$7.2 million for a community based grants round, which will provide an avenue to establish sustainable partnerships between non government organisations, local government, sporting groups, police and interested parties to work together to develop local solutions to address youth binge drinking within their own community.
- \$19.1 million to intervene earlier to assist young people and ensure that they assume personal responsibility for their binge drinking; and
- \$20 million to fund advertising that confronts young people with the costs and consequences of binge drinking.

The community level initiatives under the National Binge Drinking Strategy include an agreement with Australia’s six major sporting bodies; the Australian Football League, Australian Rugby Union, the National Rugby League, the Football Federation of Australia,

Cricket Australia and Netball Australia, to work together to support the National Binge Drinking Strategy. To support the Strategy, Australia's six major sporting bodies have agreed to:

- establish a nationally consistent code of conduct on alcohol use for peak sporting bodies and community sports organisations; and
- provide high-profile sporting personalities to assist the Government's hard hitting advertising campaign warning young people of the dangers of binge drinking.

Further, at the Council of Australian Governments (COAG) meeting on 26 March 2008, it was agreed that the Ministerial Council on Drug Strategy be asked to develop options to reduce binge drinking including in relation to closing hours, responsible service of alcohol, reckless secondary supply and the alcohol content in ready to drink beverages. COAG has requested the Ministerial Council on Drug Strategy report back by 15 December 2008 on progress on these initiatives. COAG also asked the Australia New Zealand Food Regulation Ministerial Council to request Food Standards Australia New Zealand to consider mandatory health warnings on packaged alcohol.

#### *B2. Alcohol advertising in Australia*

In Australia, alcohol advertising is subject to a number of different codes of practice. The Australian Association of National Advertisers Code of Ethics covers general advertising issues. Other applicable laws and codes include:

- the Trade Practices Act;
- jurisdictional fair trading legislation;
- the Commercial Television Industry Code of Practice;
- the Commercial Radio Code of Practice; and
- the Outdoor Advertising Code of Ethics.

The Commercial Television Industry Code of Practice states that advertisements can only be shown during M, MA, or AV classification periods. However, on weekends and public holidays alcohol advertisements can be shown as an accompaniment to the live broadcast of a sporting event.

Alcohol advertising is covered in detail by the Alcohol Beverages Advertising Code (ABAC) Scheme. The main aim of the Scheme is to ensure that alcohol advertising will be conducted in a manner which neither conflicts with nor detracts from the need for responsibility and moderation in liquor merchandising and consumption, and which does not encourage consumption by underage persons.

The ABAC is considered to be a quasi-regulatory system. According to Treasury, the difference between self-regulation and quasi-regulation is the 'perception that Commonwealth involvement in the latter implies that industry must comply with the Code or run the risk of legislation being enacted to make compliance compulsory'.

The ABAC Scheme is administered by the ABAC Management Committee which includes alcohol industry, advertising, and government representation. The ABAC Scheme is funded entirely by the alcohol industry. Commonwealth and state and territory governments are involved through one government representative on the ABAC Management Committee.

The ABAC Scheme consists of two separate elements, a pre-vetting process where potential advertisements are tested against the Code before being published, and a complaints process which operates through the Complaints Adjudication Panel. A copy of the ABAC Annual Report 2006 is at Attachment A and the Scheme has an internet site, [www.abac.org.au](http://www.abac.org.au).

- In May 2006, the Ministerial Council on Drug Strategy established the Monitoring of Alcohol Advertising Committee with the key objective of monitoring the operations of the ABAC Scheme to ensure the alcohol industry complies with recommendations to improve the Scheme. This Committee provides the Ministerial Council on Drug Strategy with reports on research and other major issues surrounding alcohol advertising.

*B3. The operation of ABAC Scheme: From the consumer’s perspective*

Complaints are accepted via email, letter or fax with no cost to the consumer. Complaints received from the Advertising Standards Bureau (ASB) are assessed by the chief adjudicator under the ABAC Scheme. Complaints are then referred to the ABAC Complaints Adjudication Panel unless they relate solely to the Australian Association of National Advertisers Code of Ethics. Complainants are informed of the referral or otherwise and sent a copy of the final determination.

Complainants who request confidentiality will be granted it and members of the alcohol beverage industry are barred from adjudicating and submitting complaints.

Figure 1 illustrates how the complaint management system works.

**Figure 1: ABAC Complaint Management System**



*B4. The operation of ABAC Scheme: From the companies' perspective*

There are four potential decision points for alcohol beverage producers undertaking advertising, as outlined in Figure 2 below. These include internal company checks, pre-vetting of advertisements, assessment of any complaints under the ABAC and, if complaints are upheld, modification or withdrawal of advertisements.

**Figure 2: Decision points for companies**

FOUR DECISION POINTS FOR COMPANIES			
1 <sup>st</sup> decision point	2 <sup>nd</sup> decision point	3 <sup>rd</sup> decision point	4 <sup>th</sup> decision point
Checked by company and advertising agency staff against the Code	Pre-vetted by non-company assessors using the AAPS service	Any complaints are referred (via the ASB) to the ABAC Chief Adjudicator	Where a complaint is upheld, company asked to withdraw or modify an advert within five business days

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.

The Complaints Adjudication Panel, and the pre-vetters are required to interpret and apply the values of the Code in terms of its probable impact upon a reasonable person within the class of persons to whom the advertisement is directed, and others persons to whom the advertisement may be communicated.

The Complaints Adjudication Panel comprises:

Professor, The Hon Michael Lavarch Queensland University of Technology	Chief Adjudicator
Professor Fran Baum Flinders University	Member
Professor Richard Mattick University of New South Wales	Member
Adjunct Professor Elizabeth Dangar Dangar Research Group	Member
Jeanne Strachan Inview Market Research	Member

The ABAC Management Committee has indicated it intends to introduce a Retailer Alert Scheme (RAS) to become part of an “Alcohol Beverages Advertising and Packaging Code” system. The Retailer Alert Scheme provides a national system for the removal of inappropriately named or packaged alcohol products from the market. If a complaint about the name or packaging of an alcohol beverage is made, and the product is found not to comply with the Code, then a Retailer Alert will be issued and the product removed from sale.



Late in 2007, the Australian Competition and Consumer Commission issued a final determination granting conditional authorisation for a Retailer Alert Scheme to operate. The ABAC Management Committee Chair has stated that the Retailer Alert Scheme will be operational by mid 2008 following a process to legally incorporate the ABAC Scheme.

*B5. The ATR Bill 2007 and the ABAC Scheme*

Compared to the *Alcohol Toll Reduction Bill 2007* (ATR Bill 2007), the current ABAC Scheme contains more detail surrounding the content and process of the regulation of alcohol advertising. For example, the Code specifically covers internet, retail, and print advertisements, as well as promotions and sponsorships for sporting events. The ATR Bill 2007 does not clearly indicate whether it would apply to internet and print advertising.

The ATR Bill 2007 proposes that a new division of the Australian Communications and Media Authority (ACMA) be established, and become responsible for determining alcohol advertising “standards that are to be observed by commercial television (and radio),” and for approving the content of all broadcast alcohol advertising. Pre-vetting would be done by the new ACMA division which will include ‘associate members’ who are individuals from chosen from specific groups. At least one individual must be chosen from the alcohol retail industry, but no representation is required from the alcohol producers who are the largest advertisers. It is not clear if the associate members would be considered to be ACMA employees for any purposes. While the ATR Bill 2007 proscribes a number of features of the composition of the new ACMA Division, there is less detail about its functions.

The changes proposed by the ATR Bill 2007 regarding the time alcohol advertisements can be shown on television has the effect of extending the current rules under the Commercial Television Industry Code of Practice and would represent a tightening of the existing regulations by limiting the times when alcohol advertisements can be broadcast.

Under the rules of the Commercial Television Industry Code of Practice, alcohol advertisements can only be shown during M, MA, or AV classification periods except during live sporting broadcasts on weekends and public holidays. M classification periods are from 9.00pm to 5.00am, plus 12.00 noon to 3.00pm on weekdays (excluding school holidays). The MA classification zone covers every day between 9.00pm and 5.00am. In MA zones, any material which qualifies for a television classification may be broadcast, except that material classified AV may only be broadcast after 9.30pm.

Section 122A (2(b)) of the ATR Bill 2007 states it will limit “the timing of the broadcasting of advertisements for alcohol products to the period 9pm to 5am each day of the week”. There is no further detail in relation to public holidays, delayed telecasts or weekends.

Another significant difference between the provisions in the ATR Bill 2007 and the current ABAC Scheme is that penalties for breaches apply under the Bill, but no penalties or sanctions apply under the ABAC Scheme. Table 1 provides a brief summary of the major differences between the ATR Bill 2007 and the ABAC Scheme.

**Table 1. Selected differences between the ATR Bill 2007 and the ABAC Scheme**

	<b>ATR Bill 2007</b>	<b>ABAC Scheme</b> (and other Codes)
Scope of coverage	Explicitly radio and television	Television, radio, print (including trade publications), internet, promotions/sponsorships
Governance arrangements	ACMA Responsible Advertising of Alcohol Division	ABAC Management Committee
Rules for advertising governed by	Specified in the Bill or determined by ACMA	Decided by the ABAC Management Committee
Rules apply to	All alcohol advertisers	Signatories only
Appointment of experts to pre-vet advertisements	ACMA selects from groups specified in the Bill	ABAC Management Committee is free to choose
Advertisements to be pre-vetted	All	Voluntary
Times when advertisements can be electronically broadcast	Limited to between 21:00 and 05:00	Limited to M, MA, or AV classification periods except during live sporting broadcasts on weekends and public holidays.
Complaints procedure overseen by	Not yet confirmed	ABAC Management Committee
Sanctions for non-compliance	Penalties apply	None

**B6. Outcomes of the ABAC Scheme**

Some data on the operation of the ABAC Scheme is published in the ABAC Annual Reports. Table 2 has been produced using data from the 2006 ABAC Scheme Annual Report and from the ABAC Management Committee submission to this Inquiry. These data show an increase in ABAC activity since 2006.

**Table 2. Complaints under the ABAC Scheme**

	<b>2005</b>	<b>2006</b>	<b>2007</b>
Received	105 <sup>1</sup>	53	87
Advertisements involved	29	26	38 (campaigns)
Considered by the Adjudication Panel	17	9	25
Upheld	2	2	8

Note: 1. 54 complaints received for one campaign.

**B7. The International Perspective**

Internationally, there are a range of approaches to regulation of alcohol advertising.

In 2001, the International Centre for Alcohol Policies (ICAP) reported on the approaches used by 119 countries to regulate alcohol beverage advertising. Systems of legislation alone comprised the largest category with 46 countries including China, the Koreas, France, and Canada. Twenty-one countries including the United States of America, Brazil, Denmark, and Hong Kong had combinations of legislation and self-regulation. Seventeen countries had

self-regulatory only systems similar to Australia including South Africa, Singapore, Germany, and the United Kingdom. Seven countries ban the advertising of alcohol altogether.

The WHO is currently considering the issue of restrictions on alcohol advertising on a global level. A *WHO Expert Committee on Problems Related to Alcohol Consumption* met in Geneva in October 2006. WHO recommended that governments be supported:

- to effectively regulate the marketing of alcoholic beverages, including effective regulation or banning of advertising and of sponsorship of cultural and sports events, in particular those that have an impact on younger people;
- to designate statutory agencies to be responsible for monitoring and enforcement of marketing regulations;
- to work together to explore establishing a mechanism to regulate the marketing of alcoholic beverages, including effective regulation or banning of advertising and sponsorship, at the global level.

## **C. Food regulation**

### *C1. Implication of the ATR Bill 2007 on the FSANZ Act*

Food standards are mandated in the *Australia New Zealand Food Standards Code* (the Code) and not in the legislation that establishes Food Standards Australia and New Zealand (FSANZ), its functions and powers and the process by which the Code may be amended. Therefore, the amendment proposed in the Bill is not appropriate.

The FSANZ Act is enabling legislation designed to provide FSANZ with powers to develop food standards within the framework of an inter-governmental agreement and a Treaty between Australia and New Zealand. The FSANZ Act has no effect on State or Territory food law due to Commonwealth Constitutional restraints. As a consequence States and Territories are responsible for enforcement of the Code. Therefore there would be no capacity for the States or Territories to enforce the proposed section 87A if it were to be inserted into the Act as it would not be considered a food standard for the purposes of the Code.

Proposed section 87A goes well beyond the enabling legislative scheme by suggesting to obligation on FSANZ to make a standard for the labelling of alcohol and effectively imposing a law on the States, Territories and New Zealand.

### *C2. Health Advisory Labels on Packaged Alcohol*

In light of the decision made by the Council of Australian Governments (COAG) on 26 March 2008, the appropriate process is for the Australia New Zealand Food Regulation Ministerial Council (Ministerial Council) to request Food Standards Australia New Zealand (FSANZ) raise a proposal to consider mandatory health advisory labels on packaged alcohol.

Whilst there are no statutory timeframes for consideration of a proposal, development of a draft standard would generally take from 9 months to 12 months or more, depending on the complexity of the proposal. FSANZ would need to consider the timing of such work in the context of its current workload. Any consideration by FSANZ of mandatory health advisory labels on packaged alcohol would be subject to FSANZ's statutory requirements that

standards be based on risk analysis using the best available scientific evidence and be subject to an appropriate regulatory impact assessment.

The Alcohol Advisory Council of New Zealand (ALAC) has lodged an Application (A576) with FSANZ 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. FSANZ is currently preparing a Draft Assessment Report which is expected to be released in May 2008. It is not possible to 'piggyback' any consideration of a mandatory health warning on packaged alcohol onto the current process.

The National Health and Medical Research Council began reviewing the *Australian Alcohol Guidelines* earlier this year. The current *Australian Alcohol Guidelines* (2001) state that women who are pregnant or might soon become pregnant may consider not drinking at all, but if they choose to drink should have less than seven standard drinks over a week and no more than two standard drinks on any one day.

On 13 October 2007, the NHMRC issued revised draft guidelines, titled *Australian alcohol guidelines for low-risk drinking*, for public consultation. The draft guideline for women who are pregnant, are planning a pregnancy or are breastfeeding is: 'Not drinking is the safest option'. FSANZ have stated they will consider the revised guidelines during the assessment of the ALAC Application.

Alcohol products sold in the United States of America have been required to carry a pregnancy health statement since 1989. Other countries requiring health warning statements on labels about the consumption of alcohol during pregnancy include Colombia, South Korea, South Africa and France. Finland is in the process of finalising its labelling requirements.

There is no international consensus on the use of warning labels on alcoholic beverages nor consistency of format and/or wording. Furthermore, there are no specific Codex standards in relation to labelling of alcoholic beverages.

## **D. Sport**

### *D1. The ATR Bill 2007 and Sport*

It has been estimated that sponsorship of sporting events in Australia is worth approximately \$1.25 billion. This figure seems to have gained some currency as the amount spent by alcohol companies. However, while it is certain that sport sponsorship by alcohol companies is a significant contributor, there are many other players in the sport sponsorship market and the contribution of the alcohol industry to this overall figure is likely to be significantly less.

While there is little data available due to the confidential nature of sponsorship arrangements, the great majority of alcohol sponsorship of sport is almost certainly directed to the major professional sports, notably the football codes and cricket. It is unlikely that the remainder of the more than 80 national sporting organisations recognised by the Australian Sports Commission derive significant income in this manner.

The impact of restrictions of alcohol advertising on the major alcohol sponsorships would largely depend on the definition of 'advertising'. Sporting sponsorships typically involve naming rights to events, signage around grounds. In the case of televised events, sponsors

routinely support their sponsorship through paid advertising during breaks. While the latter would be included in restrictions proposed by the draft Bill, it is not clear if the former types of ‘advertising’ would be; the Bill proposes that the guidelines on what constitutes advertising be drawn up by the Australian Communications and Media Authority. If naming rights, signage and so forth are not considered to be advertising and therefore exempt from proposed restrictions, it is possible that alcohol sponsorship of events may continue though likely at a lower level given the reduced ability to support the sponsorship with direct advertising.

There could be a flow on effect if alcohol advertising restrictions are placed on TV and radio coverage of sporting events. The popularity of sport coverage is a major factor in determining the amount that broadcasters can charge for advertisements. The proposal states that restrictions will be in place from 5am to 9pm. The majority of sporting broadcasts occur during these times. This is also when the majority of alcohol companies are major advertisers for these programs. In turn, the revenue derived by broadcasters from advertising largely determines the amount that sporting organisations can command for the sale of broadcasting rights, a very substantial component of income for the relevant sporting bodies.

Advertising restrictions are less relevant to local level sport. Local sporting clubs typically derive the majority of their income through membership fees. If such clubs do have licensed premises, then income from alcohol would be primarily from sales rather than sponsorship or advertising.

The nexus of alcohol and sport in the culture of sport is strong, both at the elite level and at the local sporting club level. However, it is important to recognise that sport can be a positive influence in addressing issues related to binge drinking both at the local and national level.

The Australian Government recognised this in its recent announcement of a partnership with the Australian Football League, Australian Rugby Union, the National Rugby League, the Football Federation of Australia, Cricket Australia and Netball Australia, which represents a new commitment by Government and sport to work together to address binge drinking.

These sports will work closely with the Australian Government in a mix of national and community based activities. High profile athletes will assist the Australian Government’s \$20 million hard hitting advertising campaign warning young people of the dangers of binge drinking.

This will be backed at the local level with \$5.2 million invested in assisting the Australian Drug Foundation to expand its Good Sports program to build a culture of responsible drinking at the grass roots level. The Good Sports program also builds the operational capacity of local sporting clubs, increasing membership and expanding revenue streams; the benefits go well beyond reducing the harm caused by binge drinking.

In conclusion, the impact of alcohol restrictions on sporting sponsorships will not only depend on the definition of ‘advertising’, it will also depend on time restrictions versus the current allowance for live broadcast. Any impact will be primarily on the major professional sports at the elite end both from the perspective of decreased sponsorship revenue from alcohol companies and from a reduction in revenue from broadcasts rights. The impact on community sport is likely to be far smaller. In relation to the objective in the draft Bill of

reducing alcohol related problems in the community, it is noted that sport at all levels can play and is increasingly playing a positive role irrespective of alcohol sponsorship and advertising.