Introduction

Cancer Council NSW's vision is 'cancer defeated'. Our mission is to defeat cancer by engaging the community. Cancer Council NSW focuses on cancer research, prevention programs, advocacy, and providing information and support for people affected by cancer. Cancer Council NSW seeks to promote simple, consumer-friendly messages to assist Australians to make healthier choices. Cancer Council NSW has developed a series of evidence-based recommendations aimed at preventing cancer at the population level, and one of these is limiting alcohol consumption.

Alcohol increases cancer risk, and is responsible for about 5,070 cases of cancer in Australia each year.\textsuperscript{1} Cancer Council NSW supports evidence-based action to reshape Australian social attitudes towards drinking, and to reduce the burden of morbidity and mortality caused by alcohol use.\textsuperscript{1}

Cancer Council NSW is a member of the NSW/ACT Alcohol Policy Alliance (NAAPA), and as such supports the adoption of the three policy priorities – reducing alcohol availability; consistent alcohol pricing and reducing promotion of alcohol; and increasing community engagement in alcohol solutions.

We welcome the opportunity to comment on the Australian National Preventive Health Agency's (ANPHA) Alcohol advertising: the effectiveness of current regulatory codes in addressing community concerns. Draft Report (herein referred to as the Draft Report). Although our recommendation for the Federal Government to assume full responsibility for the regulation of alcohol advertising in Australia was not suggested by ANPHA, generally we agree with the recommendations tabled in the Draft Report to strengthen the current quasi-regulatory approach. However, there are some further recommendations that should be considered to ensure the regulatory system is effective and responsive to changing technologies.

Cancer Council NSW commends ANPHA for recognising the link between alcohol and cancer. Further, we strongly support all of the ANPHA recommendations.

Cancer Council NSW strongly supports all of ANPHA’s recommendations in the Draft Report

Comments on the ANPHA recommendations

Proposed regulatory options
Cancer Council NSW agrees that regulatory options D (legislate for a new regulatory regime to restrict alcohol advertising) and E (legislate for a total ban on alcohol advertising) would be the most effective in protecting children and adolescents from alcohol advertising. Although we support ANPHA’s recommendation that regulatory option D be implemented,
we are concerned that delaying implementation to allow the media and alcohol industry to respond to recommendations will not be effective. As noted in the Draft Report, “the industry has had ample opportunity to improve the current self-regulatory framework, yet has not reached best practice principles, and the recommendations of previous Reviews have only been partially implemented.” Providing more time will result in further stalling by the alcohol industry and will result in continued exposure of children to harmful alcohol advertising.

Cancer Council NSW recommends that regulatory option D be proposed by ANPHA, as the most appropriate and potentially effective approach to reduce children and adolescents’ exposure to alcohol advertising as quickly as possible.

### Cancer Council NSW recommends:
Regulatory option D is proposed by ANPHA as the most appropriate and potentially effective approach to reducing children’s exposure to alcohol advertising

### Alcohol advertising between 12.00pm and 3.00pm
Currently alcohol advertising is allowed between 12.00 noon and 3.00pm as this is a Mature (M) classification zone. As current provisions in the Commercial Television Code of Practice (CTICP) prohibit alcohol advertising at all other times between 5.00am and 8.30pm, and it has been recommended by ANPHA that the exemption that allows alcohol advertising in live sport broadcasts be abolished, for consistency alcohol should not be allowed to be advertised during this time either.

Although this time period is outside children’s peak viewing times, OzTAM data reported by Screen Australia found that there are still thousands of children aged two to 14 watching television during this time. As many of these children are likely to be younger than school-age, it is even more important that they are not exposed to alcohol advertising.

### Cancer Council NSW recommends:
ANPHA should table the recommendation currently being considered on removing the current provision in the CTICP where alcohol products may be advertised on free to air television on school days between 12.00-3.00pm.

### Appeals process in the Alcohol Beverages Advertising (and Packaging) Code ABAC Scheme
The Advertising Standards Bureau is a member of the European Advertising Standards Alliance (EASA), the body that promotes best-practice in self-regulation of advertising. Under the EASA Charter, an appeals process is noted as a common principle in The EASA Statement of Common Principles and Operating Standards of Best Practice. However, by not having an appeals process for complainants in place, the ABAC Scheme is not following best practice, reducing its effectiveness.

Currently the ABAC Scheme has an appeal process for suppliers who have been complained against. If the supplier is allowed a chance to appeal a decision then the complainant should equally be allowed to appeal a decision. Therefore Cancer Council NSW supports the inclusion of a recommendation on the introduction of an appeal process for complainants.

### Cancer Council NSW recommends:
ANPHA should include the recommendation currently being considered for an independent appeal process to be established in the ABAC Scheme.
Reporting on alcohol promotions under State and Territory liquor licensing legislation

Cancer Council NSW believes that State and Territory reporting on alcohol promotions conducted at licensed premises, supermarkets, bottle shops, third party channels at events and via digital media (sport and music sponsorships) or directly from alcohol producers via packaging and traditional and digital media would influence the amount of alcohol advertisements children are exposed to. By instituting biannual reporting to the Council of Australian Governments (COAG), the onus will be placed on the States and Territories to monitor alcohol advertising. It may also ensure that breaches of the liquor licensing requirements are more likely to be identified and penalised.

**Cancer Council NSW recommends:**
ANPHA should table the recommendation currently being considered for biannual reporting to the COAG on the regulation and enforcement of alcohol promotions under State and Territory liquor licensing legislation.

Further comments on specific draft recommendations

**Recommendation 7 – Sponsorship of sporting events**
Cancer Council NSW is concerned that the definition of ‘sporting events’ in Recommendation 7 is too narrow. We believe that this recommendation should be expanded to include sponsorship of amateur sport that includes teams or players under 18 years old.

Sponsorship of amateur sport entrenches a drinking culture in an otherwise healthy pursuit. The community supports restrictions on alcohol sponsorship of children’s teams or clubs. Therefore by removing sponsorship associated with junior sport, the links between sport and alcohol can start to be broken, and children will not be subjected to alcohol advertising in this manner.

**Cancer Council NSW recommends:**
Provisions in the ABAC Scheme on sponsorship of sporting events should be expanded to prohibit alcohol sponsorship of children’s sport or teams in amateur clubs who have members or teams under 18 years of age.

**Recommendation 9.1 – ABAC Management Committee**
Under the EASA Best Practice Self-Regulatory Model, the administrative and management functions of a self-regulatory organisation must be independent of the industry that funds it. As the Draft Report states, four out of the five Management Committee members are from either the alcohol or marketing industries. Ideally, all Management Committee members would be independent of the alcohol and marketing industries. In addition to the recommendation for an independent Chair, a minimum of one public health representative should sit on the ABAC Management Committee to balance the industry representatives.

**Cancer Council NSW recommends:**
In addition to the recommendation for an independent Chair, a minimum of one public health representative should sit on the ABAC Management Committee.
Recommendation 9.7 – Monitoring of alcohol marketing
Cancer Council NSW strongly agrees that regular (yearly) monitoring and public reporting of alcohol marketing should be conducted to align with best-practice standards. However, we believe that this monitoring should be conducted by an independent body to ensure impartiality.

Cancer Council NSW recommends:
ANPHA’s recommendation for “regular periodic monitoring of alcohol marketing, preferably yearly, and publicly report on this monitoring” should be conducted by a body independent of the alcohol and advertising industries and the ABAC Scheme.

Recommendation 9.8 – ABAC adjudication
Cancer Council NSW believes that Adjudication Panel Members should be able to raise issues relating to potential breaches of the ABAC Scheme, even when it is not originally raised by the complainant. Allowing Panel Members, who should have good working knowledge of the provisions of the ABAC Scheme, to identify potential breaches should increase the effectiveness of the scheme. As highlighted in the Draft Report, this is in the spirit of good self-regulatory processes, and is aligned with the best-practice principles. The current complaints process outlined by the ASB shows that the ASB Board Members are to consider “all relevant provisions of the Codes and Initiatives” when deciding on a determination. To align the ABAC Scheme with the ASB, we believe that ANPHA’s recommendation should be implemented.

Other remarks
Currently, the ABAC Scheme does not consider issues relating to the drinking culture in Australia, in particular concerns about normalising frequent and excessive alcohol consumption. As a result, this particular public health consideration is not sufficiently addressed in the ABAC Scheme. To assist in reframing a more supportive drinking culture, the ABAC Scheme should include a clause that relates to the drinking culture, in terms of prohibiting advertisements and promotions that normalise frequent and/or excessive alcohol consumption.

Cancer Council NSW recommends:
That the ABAC Scheme includes a clause that relates to the drinking culture, in terms of not allowing advertisements and promotions that normalise frequent and excessive alcohol consumption.

Conclusion
Cancer Council NSW supports stronger regulation of alcohol advertising and marketing that influences or appeals to children and young people. Our position is based on evidence that cancer risk increases with alcohol consumption, that earlier and heavier alcohol use in adolescence increases consumption in later life, and that regulations restricting alcohol availability are effective in reducing adolescents’ alcohol use. In addition, the benefits of addressing the existing excess drinking culture cannot be overlooked.

The recommendations tabled by ANPHA represent a good starting point for reform of alcohol advertising regulation in Australia. However, urgent action is required to ensure that children are not exposed to alcohol advertising on an ongoing basis.
Contact

Clare Hughes
Nutrition Program Manager
Cancer Council NSW
Ph: 02 9334 1462
E: clareh@nswcc.org.au
Reference List


