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AMA submission to the ABAC Scheme Limited -Responsible Alcohol Marketing Code Review

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Introduction

The health, social, and economic harms of excess alcohol consumption are significant and warrant serious measures. Australians drink a large volume of alcohol overall. While patterns of alcohol consumption during COVID-19 are still emerging, reports are showing that some people increased their use. One in five people aged 18 years and over reported an increase in alcohol consumption during COVID-19.¹ In 2020, 1,452 people died from an alcohol induced death – the highest in 10 years. In 2018, alcohol use accounted for 4.5% of the total burden of disease in Australia.²

The AMA believes in a harm minimisation approach to alcohol consumption, best reduced through targeted prevention and early intervention.³ This includes tighter regulation around alcohol marketing and promotion.

A major responsibility lies with the alcohol manufacturing and retail industry to take concrete and serious steps to make sure that it does not profit at the expense of those who may be harmed by excess alcohol use.

Discussion questions

1. Does the Code continue to meet its stated objective? If not, why not?

There is strong evidence that:

• Alcohol marketing is associated with increased alcohol consumption, particularly among young people,⁴ and

¹ Australian Institute of Health and Welfare (2021) <u>Alcohol, tobacco & other drugs in Australia: impacts of COVID-19</u> on alcohol and other drug use.

² Australian Institute of Health and Welfare (2021) <u>Alcohol, tobacco & other drugs in Australia: Health impacts.</u>

³ Australian Medical Association (2012) <u>Alcohol consumption and alcohol-related harms – 2012.</u>

⁴ Jernigan, D et al (2016) <u>Alcohol marketing and youth alcohol consumption: a systematic review of longitudinal</u> <u>studies published since 2008.</u> Addiction: Society for the study of addiction.

• Self-regulation and voluntary codes are not effective in stemming inappropriate and irresponsible promotion of alcohol.^{5, 6,7,8}

Therefore, the AMA recommends that the regulation of alcohol marketing and promotion should be statutory and independent from the alcohol and marketing industries and should carry meaningful sanctions for non-compliance. The current Responsible Alcohol Marketing Code (the Code), as it is not independent or statutory, is not fit for purpose to reduce alcohol consumption and its associated harms. The evidence is that it is run by the industry, for the industry.

2. <u>Does the objective outlined in the Preamble need to be amended? If so, explain how and how it should be amended?</u>

The Code's objectives are not clearly defined and it is unclear how the ABAC Scheme has determined the Code objectives have been met. The ABAC Scheme appears to rely on complaints from the community rather than actively monitoring alcohol marketing for compliance with the Code.⁹ Therefore, the data collected by the ABAC Scheme is insufficient to determine whether the Code and its objectives are being upheld by the alcohol industry.

The AMA believes that the Code's stated objectives are too vague and subjective. The preamble uses the words 'spirit' and 'intent' when describing a signatory's commitment, instead of signatories committing to the specific wording of the Code. 'Responsible marketing' requires further definition, including the industry's responsibility to reduce, and not contribute to, the harms of excess alcohol use.

3. <u>Is the coverage of the Code clearly defined by Part 2 and associated definitions in Part 6? If</u> <u>not, explain where clarification is required.</u>

No comment.

4. <u>Is the extent of coverage of the Code to alcohol marketing communications appropriate</u> given the shared regulatory environment? If not, explain how Code coverage should be revised.

Sponsorship

Alcohol marketing regulation should cover a prohibition on the sponsorship of sporting events, youth music events and junior sports teams, clubs and programs by alcohol companies or brands. Organisations should be encouraged and assisted to source alternative funding.

⁵ Noel et al (2016) *Industry self-regulation: who is it really protecting?* Addiction: Society for the study of addiction.

⁶ Noel et al (2016) <u>Does industry self-regulation protect young people from exposure to alcohol marketing? A review</u> <u>of compliance and complaint studies.</u> Addiction.

⁷ Noel et al (2016) <u>Industry self-regulation of alcohol marketing: a systematic review of content and exposure</u> <u>research.</u> Addiction.

⁸ Pierce et al (2018) <u>Regulation of alcohol marketing in Australia: a critical review of the Alcohol Beverages</u> <u>Advertising Code Scheme's new placement rules</u>. Drug and Alcohol Review.

⁹ Pierce et al (2018) <u>Regulation of alcohol marketing in Australia: a critical review of the Alcohol Beverages</u> <u>Advertising Code Scheme's new placement rules</u>. Drug and Alcohol Review.

Alcohol marketing via sponsorship is common in Australia, particularly in sporting clubs or programs.^{10,11} This can normalise alcohol consumption and produce brand familiarity which, as mentioned, is associated with an increase in alcohol consumption.¹² Alcohol marketing benefits from the association it receives with sport as a health activity.¹³ Alcohol sponsorship has been shown to be positively associated with alcohol consumption.¹⁴

Digital marketing

Alcohol marketing regulation should also include a prohibition on alcohol advertising and promotion in locations, publications, and at times that are likely to influence teenagers and children. This should apply to point-of-sale promotions, branded merchandise, product placement, and digital technologies such as social media, viral campaigns, mobile phone apps, games, and through online behavioural profiling and algorithms.

The government, the ABAC Scheme and the Code itself must do more to stop the alcohol industry using innovative digital marketing techniques that indirectly target children and compliance breaches are not so easily detected. Children are extensive users of digital technology, with most having access to the internet and/or a smartphone. Alcohol advertisements may appear on a child's social media account and if a child clicks on this, their data is collected and the algorithm sends more advertisements.¹⁵ For example, in 2018, Facebook flagged 940,000 children as interested in alcohol products.¹⁶ Studies have reported an association between interacting with marketing pages and risky alcohol consumption.¹⁷ Websites, or social media pages that are 'age restricted' can be easily surpassed by children, and influencers may casually market an alcohol product while they are being paid to do so.¹⁸ Alcohol consumption by children can have devastating consequences to their health, such as damage to the brain during its development, death, and the risk of physical and mental illness in their adult life.¹⁹

The AMA believes that the Code itself is not sufficient to deal with this issue, adding to the call to establish better regulation and compliance responses that are enshrined in legislation.

¹³ Alcohol and Drug Foundation (2020) <u>Alcohol and sport in Australia.</u>

¹⁰ Watson et al (2016) <u>Sponsorship of junior sport development programs in Australia</u>. Australian and New Zealand Journal of Public Health.

¹¹ Gonzalez et al (2020) <u>Alcohol and fast food sponsorship in sporting clubs with junior teams participating in the</u> <u>'Good Sports' program: a cross-sectional study</u>. Australian and New Zealand Journal of Public Health

¹² Jernigan, D et al (2016) <u>Alcohol marketing and youth alcohol consumption: a systematic review of longitudinal</u> <u>studies published since 2008.</u> Addiction: Society for the study of addiction.

¹⁴ Brown (2016) <u>Association between alcohol sports sponsorship and consumption: a systematic review</u>. Alcohol and Alcoholism

¹⁵ VicHealth (2020) <u>Under the radar: harmful industries' digital marketing to Australian children.</u>

¹⁶ VicHealth (2020) <u>Under the radar: harmful industries' digital marketing to Australian children.</u>

¹⁷ Carrotte (2016) <u>Who 'likes' alcohol? Young Australians' engagement with alcohol marketing via social media and</u> <u>related alcohol consumption patterns.</u> Australian and New Zealand Journal of Public Health.

¹⁸ VicHealth (2020) <u>Under the radar: harmful industries' digital marketing to Australian children.</u>

¹⁹ Better Health Cannel (2020) <u>Alcohol and teenagers.</u>

Education around misuse or abuse of alcohol

The Code does not apply when 'materials or activities whose sole purpose is to educate about misuse or abuse of alcohol beverages and which do not include a company's product branding'. The AMA is concerned that the alcohol industry has a direct conflict of interest when communicating to the public around the misuse or abuse of alcohol products, and therefore messaging may be misleading, incorrect, or incomplete.²⁰

Instead, regulation should require that all contexts of alcohol promotion include simple and clearly visible information about the health risks of excess consumption and urge pregnant women not to consume alcohol. Public health messaging should be determined by government based on expert advice and current evidence and include stakeholder engagement with medical practitioners and other public health stakeholders.

5. <u>Are the Code standards in Part 3 and associated definitions in Part 6 clearly understood? If</u> <u>not, explain which provisions require clarification and specific areas of confusion.</u>

No comment.

6. <u>Are any changes required to the standards in Part 3 of the Code? If so, please explain the basis for any changes suggested.</u>

See question 7.

7. <u>Should any additional standards be included? If so, please explain the standard and the reasons it should be included.</u>

The following regulations, in addition to those outlined in question 4, should be established:

- limit the amount of alcohol marketing as well as its content. The volume of alcohol marketing that young people are exposed to has consistently been shown to affect their drinking behaviours,^{21,22} and is not sufficiently addressed through content regulations. 23,24,25
- require that alcohol advertising encourages no more than the daily levels of consumption recommended by the National Health and Medical Research Council (NHMRC) for low-risk drinking, and indicates what those levels are.²⁶

²⁰ For example, see Han (2018) '<u>Utterly wrong: what happens when the alcohol industry makes pregnancy warning</u> *posters.* The Sydney Morning Herald.

²¹ Jernigan, D et al (2016) <u>Alcohol marketing and youth alcohol consumption: a systematic review of longitudinal</u> <u>studies published since 2008.</u> Addiction.

²² VicHealth (2020) <u>Under the radar: harmful industries' digital marketing to Australian children.</u>

²³ Noel et al (2016) *Industry self-regulation: who is it really protecting?* Addiction: Society for the study of addiction.

²⁴ Noel et al (2016) <u>Does industry self-regulation protect young people from exposure to alcohol marketing? A</u> <u>review of compliance and complaint studies.</u> Addiction.

²⁵ Noel et al (2016) <u>Industry self-regulation of alcohol marketing: a systematic review of content and exposure</u> <u>research.</u> Addiction.

²⁶ National Health and Medical Research Council (2020) <u>Australian guidelines to reduce health risks from drinking</u> <u>alcohol.</u>

8. <u>Are any changes required to the No Fault Breach clause? If so, please explain the basis for</u> <u>any changes suggested.</u>

It is difficult to determine whether the No Fault Breach clause as it is written is currently fit for purpose. There is no available data on how many times it has been used and whether it has been used appropriately. The AMA recommends that more transparent information is shared on the ABAC Scheme website to assess how many times the No Fault Breach has been used, and whether it has been used appropriately.

9. <u>Are any changes required to the interpretation clause? If so, please explain the basis for any changes suggested.</u>

The interpretation clause should be expanded to include that compliance interpretation should also consider the public health and safety impacts of the marketing communication.

10. <u>Are any changes required to the Code definitions in Part 6? If so, please explain the basis for</u> <u>any changes suggested.</u>

The accurate title for the National Health and Medical Research Council's *Australian Guidelines to Reduce Risks from Drinking Alcohol* should be used instead of the 'Australian Alcohol Guidelines'. It is important to be consistent in title wording to reduce confusion, and to not avoid deleting important messaging that consuming alcohol comes with risks.

11. Do you have any general comments on the content and structure of the Code? If so, please explain the basis for any comments.

The Code does not explain the penalties that come with Code non-compliance. An explanation is needed of the decision-making process for the application of different penalty levels – that the marketing communication is taken down, or modified, or the complaint is not upheld. These should be included to improve governance processes and transparency. Further, marketing communications that are subject to a complaint are permitted to continue advertising until the determination is made.²⁷ This means that the marketing communication in question is permitted to continue to cause harm.

Conclusion

The AMA believes that alcohol marketing regulation should be independent from the industry, statutory, and include meaningful sanctions for non-compliance. The current Code is voluntary, industry-run, and does not have any real consequences for marketers in breach of the Code.

In the meantime, several improvements to the current Code are needed. The Code should include sponsorship, a specific section on digital marketing to protect children, and education around misuse or abuse of alcohol. Alcohol marketing should be limited and should encourage no more

²⁷ Pierce et al (2018) <u>Regulation of alcohol marketing in Australia: a critical review of the Alcohol Beverages</u> <u>Advertising Code Scheme's new placement rules</u>. Drug and Alcohol Review.

than the levels of consumption outlined by the NHMRC. Further, decision making, accountability, and governance processes need to be clear and transparent to the public.

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