

7 February 2008

Project Officer Application A576
Food Standards Australia New Zealand
PO Box 10559
WELLINGTON 6036

FS350-114-576

Dear Sir/Madam

Application A576 – Labelling of Alcoholic Beverages with a Pregnancy Health Label – Initial Assessment Report

Thank you for the opportunity to comment on this application. The New Zealand Food Safety Authority (NZFSA) has the following comments to make.

This submission has been made in consultation with the Ministry of Foreign Affairs and Trade (MFAT), the Ministry of Economic Development (MED) and the Ministry of Consumer Affairs (MCA). NZSFA has consulted with the Ministry of Health (MOH) on this Application and is aware that the MOH will be submitting a separate submission in support of the Application, outlining in detail the work that they are undertaking in the area of Foetal Alcohol Spectrum Disorder (FASD).

Summary of NZFSA Position

NZFSA acknowledges that in 2003 the New Zealand Government agreed in principle to pregnancy health advisory labels on alcoholic beverage containers. However, this was agreed subject to the process by which amendments are made to the Australia New Zealand Food Standards Code. NZFSA wants to ensure that any decision to require the labelling of health advisory statements on alcoholic beverage containers is based on a robust risk assessment and cost / benefit analysis as part of the FSANZ process.

NZFSA believes that inadequate evidence is provided to support warning labels on alcohol since the evidence does not take account of the complexity of alcohol related health issues and the different messages required for different population groups. NZFSA considers that the Draft Assessment Report (DAR) should provide consumer based evidence that mandatory labelling advisory statements on alcoholic beverages in regards to pregnancy are an effective and efficient means of raising awareness and implementing behavioural change.

NZFSA believes that community targeted education campaigns aimed at implementing positive behaviour change around alcohol consumption may be more effective than mandatory advisory labels. An example of effective community campaigns backed up by policy and law enforcement in New Zealand is demonstrated by the mass media campaigns surrounding drinking and driving. This has been achieved without warning labels on alcoholic beverages. Education of consumers in regard to standard drink labelling and providing information on the labels in the form of standard drinks allows consumers to make informed choices in regard to the amount of alcohol they are able to drink when planning to drive.

New Zealand Initiatives

NZFSA supports the National Drug Policy and ALAC's initiatives in New Zealand to change the culture and reduce harm from drinking alcohol, NZFSA is keen to ensure that any such programmes put in place are measurable and there is evidence to show their effectiveness. Where regulatory requirements are recommended as a part of these programmes, rigorous risk analysis and cost/benefit analysis must be applied to ensure that any such requirements are:

- of benefit to raising awareness and subsequent behaviour change in regard to alcohol consumption;
- consistent with international food standards; and
- promote fair trading.

The Initial Assessment Report (IAR) for this Application indicates that the New Zealand Government National Alcohol strategy (2000 – 2003) supported further examination of the benefits and costs of including additional product information on alcoholic drink containers (e.g. health warnings). NZFSA suggests that if such a cost / benefit examination was undertaken the information would be vital for FSANZ in its risk assessment and cost benefit analysis.

International initiatives

NZFSA notes that the required US advisory label refers to pregnancy and also to alcohol affecting ability to drive a car or operate machinery. NZFSA believes that it would be inconsistent to require a labelling statement for pregnancy and not other forms of alcohol related harm.

In Finland a general statement on alcoholic beverages concerning the harmful effects on health is being proposed together with a statement about pregnancy. By combining the two statements, the intention is to not focus on women specifically. The wider effects of alcohol consumption on both men and women are being targeted in Finland by the proposed label statements.

In the UK, the government is encouraging the alcohol industry to voluntarily provide sensible drinking information for pregnant women on their labels as a part of the country's overall sensible drinking message. NZFSA believes this is a credible approach; to include the alcoholic beverage industry as a partner in social responsibility. NZFSA would like to see New Zealand and Australia take a similar non-regulatory approach to assist in raising awareness of FASD.

IAR Questions

1. What other strategies or programs are there in Australia or New Zealand to advise women of child bearing age of the risk of consuming alcohol when pregnant or if planning a pregnancy?

The MOH and ALAC have outlined their strategies and proposed action plans to target FASD. NZFSA is in full support of any action plan to reduce the risks and prevalence of FASD and other alcohol related harm and will support the strategies within such action plans if they are based on robust risk analysis and cost benefit analysis.

Both New Zealand's and Australia's health mandate is to reduce alcohol related harm. New health recommendations in both countries promote nil alcohol during pregnancy and when planning to become pregnant. NZFSA suggests that robust public health campaigns should raise awareness and bring about behaviour change in a more efficient and effective manner than via a requirement for a mandatory advisory statement on alcoholic beverages.

The alcohol industry should be involved as a partner in any strategies to assist in the promotion of responsible drinking and promoting the fact that their products are not suitable for pregnant women. This may encourage industry to voluntarily provide symbols on their products such as the one required in France which if promoted in a public health campaign will be well recognised

and will assist in enabling consumers to make informed choices. Such an approach would lead to improving relationships between government and industry.

2. What information is available to women planning a pregnancy or pregnant women about the risk of consuming alcohol?

The MOH and ALAC produce resources for consumers, parents and health professionals concerning the risk to pregnant women of alcohol consumption. Some alcoholic beverage industry members also provide information via their websites about the risk of consuming alcohol when pregnant.

Question 3 and 4. What published and unpublished information is available that may provide answers to the risk assessment questions regarding FASD to be addressed at Draft Assessment.

The MOH and ALAC are the best resources in New Zealand to provide this information for the Draft Assessment.

5. Are there any other data available on the incidence of FAS/FASD in Australia or New Zealand?

NZFSA does not have access to data on the incidence of FAS / FASD in New Zealand. MOH and ALAC are the best resources for this information in New Zealand.

6. Are there any other data available relating to the level of awareness amongst women of childbearing age of the risk of consuming alcohol when planning to become pregnant and during pregnancy in Australia and New Zealand.

NZFSA does not have access to data relating to the level of awareness among women of childbearing age of the risk of consuming alcohol when planning to become pregnant and during pregnancy. NZFSA is supportive of raising the awareness of FASD and related consumption of alcohol by this target group and would be pleased to see the implementation of a whole of Government Action Plan that addresses the issue in the most cost effective means in partnership with the alcoholic beverage industry.

7. Do you think a health advisory statement about the risk of consuming alcohol when planning to become pregnant and during pregnancy on alcoholic beverage containers should be required?

NZFSA does not agree that a health advisory statement is the most cost effective means of increasing awareness and causing behaviour change. NZFSA notes that the Applicant has

indicated that achieving behavioural change is a complex process and that the labelling initiative is a part of a bigger action plan.

NZFSA encourages the development of a robust public health and safety campaign, with the alcoholic beverage industry as a partner, targeting alcohol consumption during pregnancy along with other alcohol related issues to encourage responsible drinking. The development of a symbol that is easily recognisable and understood referring to alcohol and pregnancy could be voluntarily used in labels of alcoholic beverages as a part of the alcohol beverage industries' commitment to social responsibility.

8. What further evidence is available about the use and/or effectiveness of a health advisory statement on alcoholic beverage containers regarding the risk of consuming alcohol when planning to become pregnant and during pregnancy?

MCA indicates it has carried out some work into behavioural economics, which focuses on decision making processes of individuals and groups, to understand why people make decisions that they sometimes know are not to their own benefit. MCA research indicates that while many women know that alcohol can be dangerous to their health and to that of their unborn child, they persist in drinking. This decision may be influenced by the women's perception of risk and it would be interesting to compare the alcohol consumption of first time mothers to that of mothers with subsequent pregnancies. Older generations consumption during pregnancy may also have an impact on their decision making. Any education should be targeted at those who influence women who are pregnant or planning to become pregnant such as parents, health professionals, friends and spouse.

NZFSA is not aware of any data other than that reported by FSANZ in the IAR in regard to evidence on the use and effectiveness of health advisory statements on alcoholic beverages. However in the Risk Assessment NZFSA suggests investigating further the US experience and any follow up studies that may have been undertaken regarding subsequent behavioural change. It is also suggested that studies concerning consumer behaviour change that may have been undertaken in response to tobacco warning statements and pictorials be investigated as well as any experience in requirements for warning statements on medical products.

Along with this research it is considered that the effectiveness of past public health campaigns also be investigated e.g., drink driving, to determine if statistics in the area of alcohol related harm have reduced as a result, especially where warning or advisory labels on alcoholic beverages have not been a part of the campaigns.

Consistency in labelling requirements needs to be considered in the DAR. Pregnant women or women planning to become pregnant are advised to avoid several foods, such as soft cheeses, due to the possibility of listeria in these products. In comparison to the alcohol recommendation

no warning or advisory statement is provided on these products that they are not suitable for pregnant women; however, public health campaigns via health professional education have made it widely known that such products are not suitable for pregnant women.

ALAC indicates in information on its website that drink driving and dependency were the dominant concerns a few years ago, that these have reduced in recent years and that now, people recognise that crime, violence, accidents, embarrassment and regret are some of the harmful results of binge drinking. ALAC attributes this to the publicity achieved through ALAC's media work, advertising and intensive stakeholder relations programme and partnerships.

ALAC also reports that Land Transport New Zealand has made progress in stigmatising drink driving and reducing alcohol-related motor vehicle deaths. (ALAC 2005-06 Annual Report). All of this has been achieved without the need and cost of mandatory warning or advisory labels on alcoholic beverages.

Questions 9, 10, and 11 relate to the wording or form of an advisory statement if there is to be one.

NZFSA suggests that in the event that the risk and cost benefit analysis conclude that an advisory statement is needed, several forms of a statement should be consumer tested. Mandating the wording of a statement may lead to trade barriers especially where other countries have not specified the wording of a required statement. Allowing statements required by other countries that have the same effect would be preferable. NZFSA suggests that pictorial statements may reach a wider audience and may have more impact than a written statement. A universally recognised symbol may be useful to reduce labelling costs and to ensure consistency of information being provided.

12. What percentage of alcohol by volume should be used to determine which alcoholic beverages are to carry an advisory statement, if required.

If a statement were to be required NZFSA believes it should be consistent with standard drink labelling and required on all beverages containing more than 0.5% alcohol by volume.

13. What is the most likely impact on consumers, industry and to government if the status quo is maintained.

The New Zealand Government via the MOH has an action plan in place to address FASD. NZFSA supports this action plan proceeding in the absence of a requirement for labelling on alcoholic beverages.

The alcoholic beverages industry has a social responsibility when it comes to educating consumers about sensible consumption of their products. This will continue to be the case in the absence of a requirement for advisory labels on their products.

If the New Zealand Government continues with a public awareness campaign there will be an impact on consumers in terms of increased awareness of FASD. This will be the case with or without a requirement for an advisory statement.

14. What is the likely impact on consumers, industry and government if an advisory statement on the risks of consuming alcohol when planning a pregnancy and during pregnancy is required on alcoholic beverage containers.

In order to be effective and to avoid competitive distortions between domestically produced and imported goods, the labelling requirement should, consistent with section 1.1.1 of the Food Standards Code, apply to all alcoholic beverages sold in Australia and New Zealand, not just those produced in either country.

The Trans-Tasman Mutual Recognition Arrangement (TTMRA) provides that goods that may be legally sold in New Zealand may be sold in Australia, and vice versa. If the labelling requirement were applied only in one country, alcoholic beverages without a warning label could still be sold in that country under the TTMRA, which would defeat the purpose of having the standard

NZFSA, MFAT and MED are pleased to see the IAR takes into account Australia and New Zealand's obligations under the WTO TBT Agreement. As indicated in section 10.3 of the report, any labelling requirement that is approved by the Ministerial Council should be notified to the TBT Committee, and a 60 day comment period allowed for WTO members. Those comments must be taken into account in the final assessment of the Application.

There would be an impact on industry in the form of cost of labelling and write off of old labels. Additional costs would be incurred if the statement wording is prescribed as it may not align with international requirements. There would be a cost to government in development of the standard and enforcement. The impact on consumers is unknown. It may assist in increasing awareness of alcohol intake during pregnancy if accompanied by a wider public health campaign.

15. How would labelling alcoholic beverages compare in terms of effectiveness and cost-effectiveness with other health measures to inform pregnant women of the risks of alcohol consumption during pregnancy?

NZFSA suggests that a robust public health campaign could be more effective than labelling of alcoholic beverages. An advisory statement or symbol would only be effective if it were accompanied by a larger series of initiatives aimed at encouraging women who are pregnant or planning to become pregnant not to drink. If such a campaign exists voluntary labelling could be encouraged by the alcoholic beverage industry.

Yours sincerely

Carole Inkster
Director
Joint Food Standards

