



## SUBMISSION TO THE LAW COMMISSION ON THE REFORM OF NEW ZEALAND LIQUOR LAWS OCTOBER 2009

### 1.0 Introduction

- 1.1 The New Zealand Council of Christian Social Services (NZCCSS) has six foundation members; the Anglican Care Network, Baptist Churches of New Zealand, Catholic Social Services, Presbyterian Support New Zealand Inc and the Methodist and Salvation Army Churches. Through their networks and approximately five hundred social service delivery sites NZCCSS members make a significant contribution to New Zealand's social wellbeing.
- 1.2 Collectively, our six members represent 639 organisations that operate a total of 1214 social service programmes throughout New Zealand. Our members deliver a wide range of services that cover such areas as child and family services, services for older people, food bank and emergency services, housing, budgeting, disability, addictions, community development and employment services. (Further information on NZCCSS can be found in Appendix 1.)
- 1.3 Many Christian social service providers work with individuals and families affected negatively by alcohol in their lives. Our members provide range of direct and indirect supports. These include specialist addiction programmes such as The Bridge programme run by The Salvation Army, alcohol and drug centres (e.g. Christchurch City Mission's Thorpe House) and home based detox services. Additionally our members provide practical help for people with addictions and their families through social work services, counselling and parenting support and the like.
- 1.4 NZCCSS commends the Law Commission on the very informative *Alcohol in Our Lives* issues papers and for inviting submissions on the review of the Sale of Liquor Act 1989. We welcome the opportunity to provide our views on the changes needed to minimise the unnecessary social harm caused the abuse of alcohol.
- 1.5 Contact details for this submission are: Trevor McGlinchey, Executive Officer, NZCCSS, PO Box 12 090, Thorndon, Wellington, ph 04 473 2627 or [eo@nzccss.org.nz](mailto:eo@nzccss.org.nz). We became aware of the review via various forms of media. This is our first submission to the Law Commission.

### 2.0 The Harm

- 2.1 Does the level of alcohol related harm we are experiencing justify a new approach to the law? Yes. There is substantial literature highlighting the social and economic cost of excessive alcohol consumption on New Zealanders including the Law Commission's own report. For many families and individuals who are struggling to cope with a range of stresses in their lives, easy access to alcohol which has become more affordable in the last decade exacerbates their problems. We endorse moves to change the drinking environment in New Zealand and make alcohol less readily available.
- 2.2 Do you agree that getting drunk is considered acceptable drinking behaviour in New Zealand? Yes, it can be argued that there remains an acceptance of binge drinking and its consequences. Historically, becoming dangerously intoxicated has been seen as almost a 'rite of passage' for adolescents. Statistics on the level of drinking by young people suggests that this has not changed and has become worse since alcohol laws were liberalised. About half of drinkers aged under 25 years binge drink (compared with 25% of all drinkers), the amount

being consumed has increased and young people bear the heaviest burden of alcohol related harm (as borne out in the statistics on alcohol related deaths, accidental injuries, self harm, crime and antisocial behaviour).

2.3 Do you think the risks associated with heavy drinking are well known? If not what could be done to make more people aware of them?

No, the risks are not well known or understood. A whole of population public health approach is needed to change the culture of drinking in New Zealand. Lessons can be learned from previous public campaigns to change behaviours such as drink driving and anti smoking campaigns. A public education campaign of the effects of heavy drinking could piggy back on the highly successful *It's Not Okay* anti violence campaign. There are strong links between excessive alcohol use, domestic violence and violence in public spaces.

2.4 Do you think the cumulative risks associated with drinking are well-known? If not what could be done to make people more aware of them?

No. This is probably less well known than the above. Again, relevant messages could be included in a long term public education campaign. Both the risks associated with heavy drinking and its longer term accumulative effects could be made explicit in schools' health curriculum.

2.5 Is the management of intoxicated people an acceptable use of a large part of the police resources? If not what are the alternatives?

No. Most people would agree that we currently spend far too much public money on dealing with intoxicated people and the associated behaviours. This extends beyond the Police and includes health professionals (such as A and E hospital staff, plastic surgeons), Justice staff and the like. There is also a very real cost for social service agencies who offer emergency support such as women's refuges. It is undeniably essential to provide resources, however the investment would be more wisely channelled in the medium to long term at strategies to reduce and/or prevent the current levels of intoxication alongside the management of people who are drunk and present a danger to themselves and others.

NZCCSS supports the high level alternative framework put forward by Alcohol Action NZ. AANZ proposes a **5+ Solution**. This involves:

- Raising the price of alcohol
  - Raising the age of purchase
  - Reducing alcohol accessibility
  - Reducing marketing and advertising
  - Increasing drink-driving counter-measures
- PLUS: Increasing treatment opportunities for heavy drinkers.

### 3.0 Object of the law

3.1. Is the balance in the current law between individual responsibility and providing an environment that is conducive to moderate drinking the correct one? If not, what changes could be made?

No. Current levels of intoxication tell us that the balance is not right. We support the changes as outlined in the proposed **5+Solution**. More detailed information is provided in the answers to the following questions.

#### **4.0 Supply controls – Licensing**

- 4.1 Do you agree with the current system of four types of liquor licence?  
We have no specific issues with the current liquor licence system.
- 4.2 Should the criteria for licences change and, if so, what should the changes be? NA
- 4.3 Do you think the Liquor Licensing Authority should be retained as the regulator?  
We have no official view on the LLA. Any regulating authority operate independently from the liquor industry and must have the mandate and resources to carry out their role in a timely and efficient manner. It appears that the current process is cumbersome and too few licensees who are in breach of the Sale of Liquor Act are identified and dealt with quickly and effectively.
- 4.4 Do you think that local views should be taken into account in respect of licences in that area?  
Yes, local views should be taken into account. It is local communities the often bear the negative impacts of an overabundance of liquor outlets open all hours in their neighbourhoods. This is particularly the case in socio economically deprived neighbourhoods and is evidenced in the findings of the *2007/08 NZ Alcohol and Drug Use Survey*. The density in outlets in communities also impacts negatively on teenagers.

#### **5.0 Supply controls – Hours**

- 5.1 Do you think the hours that restaurants, bars and clubs should be open should be restricted? If so what should the hours be? Yes. As per the 5+ Solution we support restricting on license premises from selling alcohol after 1am
- 5.2 Do you think the hours that off-licence premises (including supermarkets and liquor stores) can sell alcohol should be restricted? If so what should the hours be? Yes – restrict the opening hours of all off licenses from 10am to 10pm nationwide.
- 5.3. Should we continue to have specific days on which alcohol cannot be sold? Yes

#### **6.0 Supply controls – Age**

- 6.1 At what age should a person be able to purchase alcohol in New Zealand? NZCCSS would like to see a restoration of the minimum purchase age to 20 years. There is research to support the effectiveness of using a minimum age of purchase on regulating young people’s access to alcohol (Barbor, Caetano et al 2005)
- 6.2. At what age should a person be able to drink at a pub, club, bar or restaurant? 20 years

#### **7.0 Supply controls – Individual and parental responsibility**

- 7.1 Should it be an offence for anyone other than a parent or guardian to supply alcohol to someone under the purchase age? Yes. Parents/caregivers who supply alcohol for their teenagers have a duty-of-care and must provide adequate supervision. Those who allow alcohol to be abused by their young people need to be held to account.
- 7.2 Do you think there are any alcohol products that should be banned? We are unaware of any products that should be banned.

7.3 Do you think the rules about supermarkets and grocers selling liquor should continue as now? As supermarkets have become a significant source of cheap alcohol they have become part of the problem. We would be opposed to any changes that further liberalised access to alcohol – such as allowing supermarkets to sell spirits or RTDs. NZCCSS would be interested in supporting measures to curb liquor sales – currently estimated to be worth \$1b per annum from supermarkets alone. These could include banning the use of alcohol as a loss leader, restricting advertising, restricting the hours of sale and regulating alcohol displays. For example, supermarkets could be required to remove end of aisle displays and store all liquor in side rooms.

#### **8.0 Demand reduction – Tax/price**

8.1 Do you think the availability of cheap alcohol is contributing to alcohol related harms? Yes – there is a definite link between the increasing affordability of alcohol and increasing levels of consumption.

8.2 Does the difference in price between alcohol bought from retailers such as supermarkets and alcohol bought in a bar or restaurant influence where you drink? The prices differential has made drinking at home or at friends' homes a more attractive option for many. Such environments are often unsupervised. Many young people drink before going out to clubs and bars because it is cheaper – a practice so common as to have names – front loading or pre-loading

8.3 Do you think there is a case for increasing tax or setting a minimum price for alcohol in order to help reduce the amount of alcohol consumed by young people and heavy drinkers? Yes we do. It is no coincidence that young people are drinking at an earlier age and drinking more. A price increase alone will not solve the problem but is one effective tool to reduce alcohol abuse by young people and adults.

#### **9.0 Demand reduction – Advertising**

9.1. Should the way alcohol is marketed (including advertising, promotions and sponsorship) have greater restrictions? If so what restrictions are appropriate? Yes, the marketing of alcohol is insidious and needs to be restricted. For example, it is offensive to see Tui ads around the goal posts of rugby games for 5-7 year olds.

As per the **5+ Solution** we support a NZ version of the French “Loi Evin” strategy. This involves:

- No alcohol promotion permitted through television, radio or cinema advertising
- No alcohol promotion permitted through sponsorship of cultural or sporting events
- Limited advertising is permitted in printed media and billboards but must be limited to messages that provide information directly related to the product rather than selling values
- Marketing of alcohol at youth is explicitly prohibited

#### **10.0 Problem limitation – treatment**

10.1 Do you think there is a need for a greater emphasis on treatment for people using alcohol in a risky manner?

Yes. The abuse of alcohol plays a significant role in harming the health and well being of individuals and their families. There are insufficient treatment options and facilities available

to those who want help. Some of our members report large waiting lists for people to access their services. For example, in our last Vulnerability Report (September 2009) we reported an increase in demand from women with alcohol and drug dependency issues for support services provided by Walsh House, a Christchurch City Mission drop-in centre. The number of contacts women had with the centre had risen from 112 in July 2008 to 396 in July 2009.

Insufficient adolescent addiction treatment services was also identified by families as an issue in NZCCSS's 2009 research report - Grassroots Voices.

Treatment is the PLUS part of the **5+ Solution** which NZCCSS supports.

**PLUS: Increase treatment opportunities for heavy drinkers**

- provide centres for temporary supervision for individuals who are not charged with an offence but pose a significant concern to their own or others' safety or health
- require the need for alcohol and other drug assessment and treatment to be taken into account during sentencing in cases where alcohol and other drugs may have contributed to the offending
- develop the workforce to ensure assessment, referral and brief interventions can be delivered by appropriate professionals across [a range of health and social] sectors
- investigate the range of alcohol-specific treatment interventions provided, with a view to determining gaps
- fund primary care providers to deliver screening and brief interventions and referral to specialist treatment
- monitor the prevalence of alcohol use disorders and the delivery of screening, brief interventions, and referrals in primary care and emergency departments.

**11.0 Problem limitation – penalties**

- 11.1 Should there be increased penalties for serious breaches of the liquor law? Yes – there appears to be little incentive for problem premises to change their behaviour.
- 11.2 Should there be greater use of infringement offences for minor breaches of the liquor law? It is one tool that could be used.
- 11.3 Should the Police have greater powers to close down bars where there are serious breaches of law occurring? Yes – where this can be done safely.

**12.0 Problem limitation – liquor in public places**

- 12.1 Should liquor bans be retained? Yes – they are one tool that can be used to improve public safety. However, it needs to be acknowledged that for some people such as street people who are alcoholics, liquor bans are only effective in terms of moving them to different areas and do nothing to address their underlying addictions or any social problems they may be experiencing such as poverty and homelessness.
- 12.2 If so, how can the liquor ban provisions be improved? No comment

### **13.0 General**

- 13.1 Do you think an offence of drinking in a public place, rather than a liquor ban system is preferable? It may have merit. The views of the enforcement authorities should be considered regarding the practicalities.
- 13.2 Do you think it should be an infringement offence to be drunk in a public place? Yes, with the proviso that the people with multiple infringements access treatment services.
- 13.3 Do you have any further comments or suggestions?

Point five of the 5+ Solution relates to increasing drink-driving counter-measures. NZCCSS supports lowering the BAC limit from 0.08 to 0.05 for those 20 years and over, and lowering the BAC limit to zero for those under 20 years.

## **APPENDIX ONE – About NZCCSS**

### **NZCCSS Mission and Role**

NZCCSS works for a just and compassionate society in Aotearoa New Zealand. We see this as a continuation of the mission of Jesus Christ. In seeking to fulfil this mission, we are committed to:

- giving priority to poor and vulnerable members of our society
- Te Tiriti O Waitangi

The key roles of NZCCSS are to represent the common interests and vision of our members at the national level; to supply information and networking opportunities to support members provide quality services; and to develop, critique and advocate for policies that will assist poor, vulnerable and disadvantaged members of society.

A national Council, made up of two representatives from each denomination, governs NZCCSS. A small Secretariat team carries out the day-to-day work of the Council. This includes gathering and distributing information, research on social policy issues, and building relationships with government officials and others working in the community sector.

A Policy Group oversees the policy and research work that NZCCSS does in three key areas: child and family, housing and poverty and services for older people. Each Policy Group is made up of at least two council representatives plus social services managers, academics or others with particular expertise in that area. This means that the work that NZCCSS does is well informed by what is happening in our members' communities.

[www.justiceandcompassion.org.nz](http://www.justiceandcompassion.org.nz)

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