

Te Whatu Ora submission on FSANZ Proposal for Energy Labelling of Alcoholic Beverages (Proposal P1059)

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1. Thank you for the opportunity to provide Te Whatu Ora's view on the FSANZ proposal for energy labelling of alcoholic beverages.
2. Te Whatu Ora leads the day-to-day running of the health system across Aotearoa New Zealand, and either provides or commissions services at local, district, regional and national levels. Under the Pae Ora (Healthy Futures) Act 2022, one of the key objectives of Te Whatu Ora is "to promote health and prevent, reduce, and delay ill-health, including by collaborating with other agencies, organisations, and individuals to address the determinants of health." The National Public Health Service (NPHS) is a Division of Te Whatu Ora and leads the delivery of Health Protection, Health Promotion and Prevention services, as well as working with the Public Health Agency and Te Aka Whai Ora on intelligence, population health and policy.
3. Te Whatu Ora's NPHS has extensive experience in community health promotion to achieve healthy weight and to address alcohol related harm in Aotearoa, New Zealand. The NPHS, through its Medical Officers of Health, is a statutory entity in the Sale and Supply of Alcohol Act 2012 and makes enquiries on every alcohol licensing application in Aotearoa New Zealand.
4. Energy balance is important for achieving and maintaining a healthy body weight. As alcohol is energy dense, the Australian and New Zealand guidelines recommend limiting alcohol intake. Additionally, alcohol is a known carcinogen that causes acute and chronic harm to individuals, whānau and communities. In Aotearoa New Zealand, alcohol related harm is inequitable, with priority communities such as Māori, Pacific and young people experiencing greater amounts of harm.¹ Interventions to reduce alcohol related harm must consider the impact on equity for these populations.
5. Māori have the right to monitor the New Zealand Crown's progress on protecting health and eliminating health inequities – this extends to regulatory practices and codes such as Aotearoa New Zealand's participation in FSANZ. Relevant to this proposal, under te Tiriti O Waitangi, the New Zealand health system have a responsibility to uphold principles of:

¹ Alcohol Healthwatch. (2020). Evidence-based alcohol policies: Building a fairer and healthier future for Aotearoa New Zealand. Auckland: Alcohol Healthwatch.

- a. Tino rangatiratanga - Māori self-determination in the design of health systems and interventions
 - b. Equity
 - c. Active protection (requiring Te Whatu Ora to act to the fullest extent practicable to achieve equitable health outcomes)
 - d. Options – ensuring culturally appropriate health interventions, including labelling
 - e. Partnership – co-designing health services and interventions²
6. Te Whatu Ora supports a harm minimisation approach to alcohol labelling policy. Energy content information enables consumers to make informed choices about alcoholic beverages. However, there is limited evidence that such labelling will have an impact on consumers' behaviour, and evidence is particularly lacking for priority populations.³ Additionally, there is evidence that consumer awareness of other facts around alcohol is low, such as that alcohol is carcinogen.⁴ Consumers have a right to this information so they can make informed choices about consuming such a product. Any changes to energy labelling must ensure that existing health warnings and standard drink information regulations are protected, and that space remains for further health warnings on alcoholic beverages consistent with World Health Organization (WHO) recommendations.⁵

Te Whatu Ora submits that the following recommendations are considered:

7. Te Whatu Ora is broadly supportive of energy labelling on alcoholic beverages, for the purpose of informing consumers of the energy content of alcohol. However, we are concerned there isn't currently enough evidence for the impact on priority populations.³ There are significant inequities in the distribution of alcohol related harm in New Zealand.¹ We strongly recommend that FSANZ considers the impact of energy labelling on priority populations. This should include ensuring that consumer testing on label design and format is completed with these populations.
8. Te Whatu Ora recommend taking a health-based harm minimisation approach to alcohol policy. The most effective interventions to reduce alcohol harm are SAFER as described by the WHO.⁶ Relevant to this area, any actions to restrict or minimise the exposure of populations to advertising of alcohol are beneficial, and beverage labels are a form of advertising in and of themselves.
9. Te Whatu Ora is concerned that current evidence on the effect of energy labelling on alcoholic beverages on consumer behaviour remains unclear, mainly due to limitations in the studies.³ Research by Walker and colleagues (commissioned by Te Hīringa Hauora, now part of the NPHS) suggests certain forms of energy labelling could **increase** the likelihood of

² Waitangi Tribunal. 2019. Hauora: Report on Stage One of the Health Services and Outcomes Kaupapa Inquiry. Wellington. Waitangi Tribunal. pp. 163–164

³ Robinson, E, Humphreys, G, Jones, A. Alcohol, calories, and obesity: A rapid systematic review and meta-analysis of consumer knowledge, support, and behavioral effects of energy labeling on alcoholic drinks. *Obesity Reviews*. 2021; 22:e13198.

⁴ Scheideler, J. K., & Klein, W. M. (2018). Awareness of the link between alcohol consumption and cancer across the world: a review. *Cancer Epidemiology, Biomarkers & Prevention*, 27(4), 429-437.

⁵ World Health Organization. (2022). Health warning labels on alcoholic beverages: opportunities for informed and healthier choices

⁶ World Health Organization, 2019. The SAFER technical package: five areas of intervention at national and subnational levels.

purchase of alcoholic beverages, including by Māori participants, although there was no impact on likelihood of consumption.⁷ Te Whatu Ora strongly recommends consideration is given to this research, and the underlying inequitable distribution of alcohol harm in New Zealand¹, in the design of label requirements in the Code.

10. Te Whatu Ora recommend that energy labelling of alcoholic beverages is considered as part of a wider suite of consumer protection measures that support harm reduction from alcohol.^{5,6} Consumers do have a right to information about the product they are consuming. Labelling to include other information, such as cancer risk, would provide consumers with a more accurate picture of the health harms from alcohol.⁵
11. We support a “per 100ml” measure on the energy information panel for all alcoholic beverages. A “per 100ml” measure provides consumers with the ability to compare energy content of products and is a familiar measure to those who use Nutritional Information Panels.
12. Currently, there is insufficient evidence to provide a recommendation for a second measure (e.g. per serve, per container or per standard drink measure) in which we can be confident would not potentially undermine harm minimisation strategies. Te Whatu Ora recommends undertaking further research that includes consumer testing (with sufficient representation of New Zealand priority populations) and modelling will ensure any second measure used on the energy information panel is clear and easy to use for consumers and importantly, does not cause harm or confuse alcohol harm minimisation messages.
13. When determining the second measure, Te Whatu Ora strongly recommends industry should not be involved. Although this is standard practice for food and non-alcoholic beverage products, alcoholic beverages are also a drug which has no safe level of consumption.^{5,8}
14. Te Whatu Ora strongly recommends that the existing mandatory pregnancy warning label is protected and no part of the specifications for this are eroded through any changes to other parts of the label.
15. Similarly, Te Whatu Ora recommends space must be protected for standard drink information. Standard drink messaging is used by healthcare organisations to provide guidance on low-risk drinking and provides important information for people to assess their own alcohol intake (see alcohol.org.nz). This information should remain prominent on the label of an alcoholic beverage and ensure any risk of confusion with provision of serving sizes is minimised.
16. Te Whatu Ora recommends that the labelling space must also be protected for future health warnings as per WHO labelling recommendations for reducing alcohol related harm.⁵ Energy labelling should not be considered a substitute for other important health warnings, such as

⁷ Walker N, McCormack J, Verbiest M, Jiang, Y, Lang B, Ni Murchu C. (2018) Energy labelling for alcoholic beverages in New Zealand: Impact on consumer purchase and consumption. Phase 2 report: Randomised trial. Wellington: Health Promotion Agency

⁸ Levy, D. T., Tam, J., Kuo, C., Fong, G. T., & Chaloupka, F. (2018). Research full report: the impact of implementing tobacco control policies: the 2017 tobacco control policy scorecard. *Journal of Public Health Management and Practice*, 24(5), 448.

cancer risk. There is good evidence from tobacco control about the effectiveness of graphic health warnings.⁸

17. We note that industry has already been consulted in the proposed design of the energy label. We support a mandatory approach to labelling proposals on alcoholic beverages. Experience from other voluntary commitments, including food and beverage labelling practices, has consistently shown that any voluntary commitments are ineffective.⁵
18. Te Whatu Ora does not support the proposal to require energy labelling on only one layer of packaging. We recommend that energy labelling is mandatory on both outer packaging and individual vessels. While single layer labelling may be used for food products, alcohol should not be considered as a food product, as it is an addictive drug that causes harm. Every container should have consistent labelling to ensure consumers can make informed decisions at both the time of purchase and consumption.
19. Finally, Te Whatu Ora strongly recommend that a full voluntary Nutritional Information Panel (NIP) is prohibited on alcoholic beverages. Alcohol is a type 1 carcinogen and should not be considered to have any nutritional benefits to consumers. Many of the values are likely to be zero, which may mislead consumers to consider alcohol as a 'healthy' choice. A truncated NIP (with energy labelling only) will minimise opportunity for health claims and the 'health halo' impact on alcohol products.⁹

⁹ Keric, Danica, Gael Myers, and Julia Stafford. "Health halo or genuine product development: Are better for you alcohol products actually healthier?." Health Promotion Journal of Australia 33, no. 3 (2022): 782-787.