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**Proposal P1050 – Submission by DrinkWise****Proposal P1050 – pregnancy warning labels on alcoholic beverages****A. Contact:**

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**B. Submission authorised by:**

Chief Executive Officer

**C. Summary:**

DrinkWise supports the decision by the Food Minister's Forum to introduce a mandatory labelling standard for pregnancy warning labels on packaged alcoholic beverages, recognising that DrinkWise introduced a voluntary pregnancy warning program in 2012. This voluntary system has resulted in the significant majority of alcohol products sold in Australia featuring either the pregnancy pictogram or National Health and Medical Research Council (NHMRC) guideline statement, including an additional 600 producers that have downloaded the labelling messaging during the past 18 months.

With respect to pregnancy warning messaging, DrinkWise supports the Australian Government's careful and deliberate messaging for consumers about alcohol and pregnancy - *that not drinking is the safest option*<sup>1</sup>.

In developing a mandatory labelling standard, DrinkWise believes that any statement must reflect the evidence and risks of drinking alcohol when planning a pregnancy, while pregnant and breastfeeding. In particular it needs to be consistent with the Australian Government advice as outlined in the NHMRC's alcohol guidelines<sup>2</sup> and the evidence that has emerged over the last ten years.

The National Drug Strategy 2017-2026, endorsed by all governments, as a ten-year framework to reduce and prevent the harmful effects of alcohol, tobacco and other drugs, highlights that promotion of the NHRMC's alcohol guidelines is an evidenced based strategy for reducing demands associated with alcohol<sup>3</sup>.

*It's safest not to drink while pregnant* reflects guideline four of the NHRMC's alcohol recommendations that resulted from an assessment of the evidence, the limitations of the evidence, and the need to avoid unnecessary anxiety and unintended outcomes. The following two extracts from the guidelines are particularly highlighted:

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<sup>1</sup> <https://www.health.gov.au/health-topics/alcohol/alcohol-throughout-life/alcohol-during-pregnancy-and-breastfeeding>

<sup>2</sup> <https://www.nhmrc.gov.au/about-us/publications/australian-guidelines-reduce-health-risks-drinking-alcohol#block-views-block-file-attachments-content-block-1>

<sup>3</sup> <https://www.health.gov.au/resources/publications/national-drug-strategy-2017-2026>

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*A 'no-effect' level has not been established, and limitations in the available evidence make it impossible to set a 'safe' or 'no-risk' drinking level for women to avoid harm to their unborn children, although the risks to the fetus from low-level drinking (such as one or two drinks per week) during pregnancy are likely to be low. A conservative, public health approach has therefore been taken in recommending that 'not drinking alcohol is the safest option' for pregnant women and women planning a pregnancy. This decision was not based on the fact that substantial new evidence had emerged since the previous guidelines were published, but on limitations of the existing evidence. Women who drank alcohol before they knew they were pregnant or during their pregnancy should be reassured that the majority of babies exposed to alcohol suffer no observable harm. The risk to the fetus from low level drinking is likely to be low. Women who find it difficult to decrease their alcohol intake will require support and treatment. It is important that they are referred to the appropriate services.*

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*Efforts should be made not to induce unnecessary anxiety for isolated episodes of drinking. Women who drank alcohol before they knew they were pregnant or during pregnancy should be reassured that the risk to the fetus is likely to be low if they had drunk at low risk levels.*

A review of the NHMRC's alcohol guidelines is currently underway. DrinkWise is concerned that the recommended messaging from FSANZ has not been informed by the completion of the NHMRC review of the evidence informing future alcohol guidelines.

DrinkWise believes there should be one pregnancy warning message in the marketplace to aid consumer comprehension. Given this - and DrinkWise supporting the existing and any new NHMRC pregnancy guideline – it would seem logical and appropriate to ensure any pregnancy warning message is consistent with NHMRC advice, given their status as the leading authority on public health guidelines in Australia.

DrinkWise is also concerned that the proposed messaging has not addressed the potential for inducing unnecessary anxiety or unintended outcomes for women who may have consumed alcohol before their pregnancy was confirmed.

**D. Literature review:**

DrinkWise notes that the FSANZ literature review has not yet undergone a peer review process.

In relation to the issue of comprehension of the message *Its' safest not to drink alcohol while pregnant* and the conclusion on page 11 that a small proportion has interpreted the meaning of this message incorrectly, it is suggested that consumers have in fact correctly interpreted the NHMRC evidence base that informs this message. That is, (as outlined above) *the limitations in the available evidence make it impossible to set a 'safe' or 'no-risk' drinking level for women to avoid harm to their unborn children, although the risks to the fetus from low-level drinking (such as one or two drinks per week) during pregnancy are likely to be low. A conservative, public health approach has therefore been taken in recommending that 'not drinking alcohol is the safest option' for pregnant women and women planning a pregnancy.*

DrinkWise draws attention to evaluations conducted on its behalf of the *It's safest not to drink alcohol while pregnant* message that finds very high levels of comprehension:

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- A nationally representative sample of 660 Australians aged 18+ years and 515 females aged 18-44 years, conducted in December 2018, revealed 98% understood the alcohol and pregnancy messaging<sup>4</sup>.

This evaluation has been rated as of medium quality by FSANZ due to the limited detail provided about its methodology in the research summary report. This is disappointing given DrinkWise has provided further information about associated sampling and coding of responses in response to questions subsequently raised by FSANZ.

Quantum Market Research employs a systematic quality control program to ensure the highest quality output at every step of the research process. It is accredited (since early 2009) to the International ISO standard for market, social and opinion research AS ISO 20252.

- A targeted sample of 92 patients (aged 18-54 years and mostly female) undertaken in waiting rooms in March 2019, found that comprehension of the message ranged from 92%-100% on DrinkWise posters and brochures promoting the *It's safest not to drink while pregnant* message<sup>5</sup>.

This evaluation was conducted by Tonic Health Media and did not test comprehension on alcohol products and labels; however, it is provided as another example of comprehension of the message in a different setting.

### E. Consumer testing:

DrinkWise notes that the FSANZ consumer research report has not yet undergone a peer review process.

As stated in the summary to this submission, the premise of the FSANZ consumer testing is inconsistent with the evidence base and the Australian Government's careful and deliberate messaging for consumers about alcohol and pregnancy - *that not drinking is the safest option*<sup>6</sup>.

It is a missed opportunity that a possible response that reflects the correct message interpretation of the NHMRC's pregnancy alcohol guideline was not included in the five possible interpretations offered to assess comprehension in the consumer testing. The inclusion of a different interpretation would have allowed a more reasonable assessment of comprehension of the NHMRC's alcohol and pregnancy messaging, rather than including two possible interpretations that are not consistent with the Australian Government advice.

This missed opportunity has implications for any assessments made by respondents about what option best conveys the message to not drink any alcohol while pregnant, as well as the assessments by respondents of the believability, credibility, relevance and convincingness of the *It's safest not to drink while pregnant* message.

It should also be noted that on multiple occasions DrinkWise corrected FSANZ as to the origins of the wording currently used on alcohol beverages, namely that it was not developed by DrinkWise but reflected the NHMRC guideline – and as such, should be included in the consumer research (with the evidence based explained) as a precursor to statement preference.

<sup>4</sup> Quantum Market Research 2019, Pregnancy Labelling Consumer Research

<sup>5</sup> Tonic Health Media 2019, Consumer Research - DrinkWise Pregnancy Information Materials

<sup>6</sup> <https://www.health.gov.au/health-topics/alcohol/alcohol-throughout-life/alcohol-during-pregnancy-and-breastfeeding>

## F. Pictogram:

DrinkWise supports the continued use of the pregnancy pictogram.

## G. Warning statement:

Given the growing awareness and high levels of comprehension of the pregnancy pictogram and the NHMRC's evidence-based recommendation that *It's safest not to drink while pregnant*, DrinkWise supports the continuation of this messaging on alcohol products and packaging, until such time as the NHMRC recommends alternative wording.

## H. Design labelling elements:

DrinkWise's approach to alcohol and pregnancy messaging has been reflective of the need to effectively engage audiences on this issue and avoid unnecessary anxiety and unintended outcomes, consistent with the considerations of the NHMRC's alcohol and pregnancy guideline.

The inclusion of a 'Health Warning' in combination with a statement about alcohol and pregnancy has been found to have unintended effects. Researchers from the University of California's Advancing New Standards in Reproductive Health (ANSIRH) research group and the Public Health Institute found that six of eight state-level alcohol pregnancy policies (including posting warning signs in retail outlets, bars and restaurants) were significantly associated with poorer birth outcomes, while the remaining two were not associated with any outcomes. Co-author Dr. Sarah Roberts suggested that "[w]e need to be more careful about the health messages related to potential harms from use during pregnancy...Scaring people is not necessarily having the intended effect<sup>7</sup>." Examples from this study provided below:

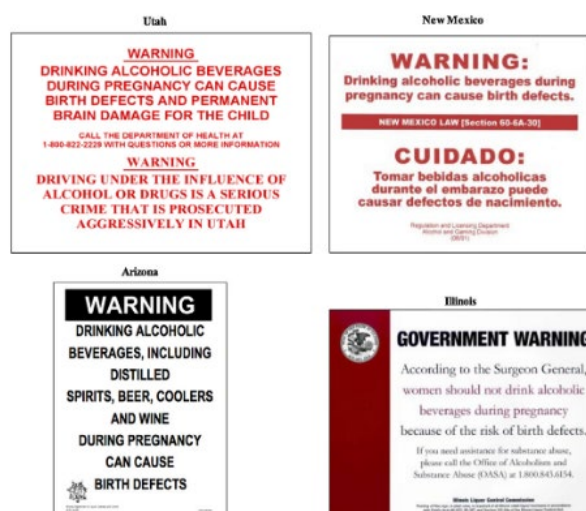


Fig. A.1. Examples of alcohol warning signs.

## I. Proposed pregnancy warning label design:

The concern with the signal words and statement not aligning to NHMRC evidence-based advice has been outlined above. Given the NHMRC is currently reviewing the evidence and guidelines, it would be logical to ensure the NHMRC guideline and FSANZ pregnancy warning statement were aligned to ensure consumer comprehension was maximised.

<sup>7</sup> Costs associated with policies regarding alcohol use during pregnancy. Vital Statistics 1972-2015. <https://www.ncbi.nlm.nih.gov/pubmed/31067248/>

**J. Beverages to carry the pregnancy warning label:**

DrinkWise endorses Option 2 proposed by FSANZ, that where the number of standard drinks appears on products, that the pregnancy messaging and pictogram should also appear.

**K. Application to different types of sales:**

DrinkWise agrees with the proposed approach outlined by FSANZ in Table 11.

**L. Application to different types of packages:**

DrinkWise agrees with the proposed approach summarised on page 41.

**M. Consideration of costs and benefits:**

DrinkWise notes that its estimated costs have been included in the cost benefit analysis presented in this consultation document. However, the reference to 'changed messaging' needs to be considered in the context of DrinkWise response in the Other Comments section, namely that DrinkWise will continue to promote NHMRC guideline advice. This may, based on the proposed FSANZ statement, result in inconsistent messages in the marketplace.

**N. Transitional arrangements:**

DrinkWise agrees with the proposed transitional arrangements.

**O. Draft variation to the Australia New Zealand Food Standards Code:**

DrinkWise reiterates that any recommended messaging that is reflected in the draft variation be informed by the completion of the review of the evidence informing the NHMRC's alcohol guidelines, which is the leading authority on public health guidelines.

**P. Other comments:**

In addition to Australian and New Zealand public health agencies, DrinkWise implements several activities that supplement its alcohol and pregnancy labelling messaging, as part of its wider Fetal Alcohol Spectrum Disorder (FASD) Awareness Program.

Given the current review of the evidence informing the NHMRC's alcohol guidelines, it would be premature of FSANZ to proceed with any activities informing consumers, health professionals and others until the review (and subsequent advice for pregnant women and those planning a pregnancy) has been finalised.

As an evidenced based organisation, DrinkWise supports and promotes the alcohol guidelines, developed by the NHMRC, which is the leading authority on guidelines relating to public health issues such as alcohol and pregnancy.

With respect to the information in 4.3 Education, it would also seem to be premature to calculate that government agencies would stop using and ignore government (NHMRC) messaging and revert to this proposed message. If the future NHMRC guideline and this proposed message do not align, there will be two different messages in market, potentially resulting in confusion amongst the target audience and wider population.