NUDGES IN AUSTRALIAN ALCOHOL CONTROL POLICY: LESSONS LEARNED FROM TOBACCO CONTROL

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Joint initiative of Cancer Council Victoria and Union for International Cancer Control

Legal responses to:

the global burden of non-communicable diseases and their risk factors: tobacco, alcohol and obesity

Treatment and support issues for people affected by cancer: access to treatment, insurance and workplace discrimination and end of life decision making
The burden of non-communicable diseases

The World Health Organization estimates that in 2008, NCDs were responsible for 36 million of the 57 million deaths that occurred globally – and deaths from NCDs are increasing.

For the most part, NCDs are preventable, and they share modifiable risk factors including tobacco use, unhealthy diet, physical inactivity and the harmful use of alcohol.
Role of law in health promotion

• “The law is all over”

• “…population health is shaped to a significant degree by fundamental social conditions.”

• Plays an important normative role

• Has the ability to affect populations, rather than simply regulate relationships between individuals.

<table>
<thead>
<tr>
<th>Nudging</th>
<th>Regulating</th>
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<tbody>
<tr>
<td>Smoking</td>
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<tr>
<td>Make non-smoking more visible through mass media campaigns communicating that the majority do not smoke and the majority of smokers want to stop</td>
<td>Ban smoking in public places</td>
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<td>Reduce cues for smoking by keeping cigarettes, lighters, and ashtrays out of sight</td>
<td>Increase price of cigarettes</td>
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<td>Alcohol</td>
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<td>Serve drinks in smaller glasses</td>
<td>Regulate pricing through duty or minimum pricing per unit</td>
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<td>Make lower alcohol consumption more visible through highlighting in mass media campaigns that the majority do not drink to excess</td>
<td>Raise the minimum age for purchase of alcohol</td>
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<td>Diet</td>
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<td>Designate sections of supermarket trolleys for fruit and vegetables</td>
<td>Restrict food advertising in media directed at children</td>
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<td>Make salad rather than chips the default side order</td>
<td>Ban industrially produced trans fatty acids</td>
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<td>Physical activity</td>
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<td>Make stairs, not lifts, more prominent and attractive in public buildings</td>
<td>Increase duty on petrol year on year (fuel price escalator)</td>
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<td>Make cycling more visible as a means of transport, eg, through city bike hire schemes</td>
<td>Enforce car drop-off exclusion zones around schools</td>
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Source: Theresa Marteau et al ‘Judging nudging: can nudging improve population health?’ (2011) BMJ 342
Tobacco Snapshot

- Tobacco kills up to half of its users
- Annual death toll is five million
- Death toll to 8 million by 2030
- One billion smokers worldwide
- More than 80% live in low- and middle-income countries
- Consumption is increasing globally but decreasing in some high-income and upper middle-income countries
Tobacco Control Policies

- Taxation
- Smoking bans
- Labelling and disclosure requirements
- Plain packaging
- Advertising restrictions
- Social marketing campaigns
Graphic health warnings and plain packaging
Visual display bans

Many Australian states and territories have introduced bans on the retail display of tobacco products.

Visual display bans change the context of access to cigarettes, by hiding them from public view.
Alcohol harm

- 4-6% of global burden of disease
- 3% of global deaths, 4.6% of DALYs
- Increasing in low income countries
- Middle/high income countries economic costs – 1% of GDP
Alcohol Policies

- Taxation and pricing measures by alcohol volume
- Minimum floor price
- Restrictions on advertising and promotion, including sponsorship
- Packaging and labelling measures
- Availability – regulate production and sale, licensing on sale and consumption; licensing days and hours of sale, minimum age of sale
- Drink driving – blood alcohol levels regulated, testing of drivers
Risk based licensing

• Licensees pay fees related to their likely risk of alcohol-related harm, according to trading hours, occupancy etc
• Risk based licensing = incentive to modify risk factors
• Modified environment impacts on consumers drinking choices
Sports sponsorship buy-outs

16 national sporting organisations providing sporting environments that are alcohol-promotion free.
Alcohol taxation

• by increasing the price of alcohol through taxes, you decrease the affordability of alcohol relative to income.
• alcohol taxation currently encourages wine production, which is taxed less than some mid strength alcohol products
• a volumetric taxation framework may nudge consumption towards low alcohol products
Knowledge of the National Health and Medical Research Council's guidelines for reducing the risk of alcohol related harm is limited, compounded by lack of knowledge about the number of drinks that fit within the guidelines, is ignorance of what exactly a standard drink measure is.

Can nudging be used to contextualise standard drink measures, and drinking guidelines?

• labelling works on the premise that one is ‘expecting error’ in the choices of consumers – labels could be designed to correct that error
• pre-packaged products that are designed to be one or two standard drinks

Other alcohol nudges including making and promoting non-alcohol and low-alcohol beers in pubs, making customers pay at the time of the order rather than running up a tab; ending the culture of rounds.
Drinks companies spread liver disease as surely as mosquitoes do malaria

Food and alcohol firms are obliged to maximise profit. To include them in health policy planning is a recipe for disaster

Anna Gilmore and Jeff Collin

guardian.co.uk, Monday 21 February 2011 21.30 GMT

The products of food and alcohol companies are, alongside tobacco, responsible for this country's the most serious public health problems. Britain now has one of the highest obesity rates in Europe, while alcohol misuse costs over £17bn each year. Whereas rates of tobacco use are falling in the UK, obesity and alcohol use have barely begun to be addressed. Those hoping that we could finally build on progress with tobacco to effectively tackle the alcohol and obesity epidemics will be as disappointed as the corporate sector is delighted.

While the government sees food and alcohol companies as partners in health policy, public health increasingly recognises them as vectors of disease. The vector concept, adapted from infectious disease control, is simple: liver disease and myriad other health and social problems are being spread by alcohol companies just as the mosquito vector spreads malaria. The conduct of these corporate vectors should therefore be studied and where necessary countered just as we study and control the mosquito to reduce deaths from malaria.
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