

Date: Thursday 20 June 2024
Time: 1.30pm
Meeting Room: Manurewa Local Board Office
Venue: 7 Hill Road
Manurewa

Manurewa Local Board

OPEN MINUTE ITEM ATTACHMENTS

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Fetal Alcohol Spectrum Disorder (FASD) and signage in off-licence premises

*“So as to be easily read” – strengthening the salience of pregnancy warnings
Communities Against Alcohol Harm, May 2024*

Summary

Alcohol consumption during pregnancy poses significant risks of developmental disabilities known as Fetal Alcohol Spectrum Disorder (FASD).

FASD is a neurodevelopmental disorder caused by exposure to alcohol before birth. The main effect from exposure to alcohol during pregnancy is to the brain, but other parts of the body are also affected. People living with FASD can experience a range of complex physical, behavioural, learning and intellectual problems through their lives. FASD shapes the life of the person affected and those who care for them.

This disorder and its disproportionate impact on Māori communities in New Zealand calls for a robust public health response. Using point-of-sale and/or in-store warning signs as a regulatory tool could mitigate the prevalence of FASD. By drawing on international approaches, Communities Against Alcohol Harm (CAAH) propose their adaptation to Auckland and more widely in Aotearoa.

Internationally, studies highlight the efficacy of point-of-sale warnings in reducing prenatal alcohol use and FASD rates. Examples from countries like the USA and Canada demonstrate the effectiveness of pregnancy warning signage (especially if it is part of more comprehensive frameworks that integrate warning signs into holistic support services for pregnant and postpartum individuals). These initiatives offer valuable insights for informing an approach to FASD prevention in Auckland and more widely.

This report makes the following recommendations:

1. That the Manurewa Local Board advocate for discretionary conditions regarding point-of-sale and/or in-store FASD warning signage to be included in any future review of Auckland’s Local Alcohol Policy.
2. That the Manurewa Local Board advocate for point-of-sale and/or in-store FASD warning signs to be included as a discretionary condition for alcohol off-licences in the Manurewa Local Board area.

Introduction

Fetal Alcohol Syndrome Disorder (FASD) is a lifelong condition that results from prenatal exposure to alcohol. It can cause a range of physical, cognitive, and behavioural challenges, including difficulties with learning, memory, attention, and social skills. FASD is a serious public health issue that requires a comprehensive and coordinated response to address its prevalence and impact, particularly on marginalised communities. This report aims to shed light on the prevalence of FASD in New Zealand, its inequitable outcomes for Māori, and the urgent need for a public health response to mitigate its effects. By exploring regulatory tools, such as point-of-sale and in-store warning signs (as well as the role of public health campaigns), we hope to highlight some effective strategies that can be implemented to promote equitable outcomes and reduce the burden of FASD in our communities.

International approaches

FASD is highly prevalent globally despite public health efforts designed and implemented to address the issue in various settings (Adebiyi et al., 2019). Central to efforts to reduce FASD are health warnings on alcoholic beverages and advertisements, point-of-sale warnings and pictorial alcohol warning labels. Of some note is the Canadian approach of using point-of-sale warning labels as a contribution to a four-part, person-centred and multi-sectoral effort to lower rates of FASD.

Dossou, Gallopel-Morvan, and Diouf (2017) explore the efficacy of health warning labels to regulate alcohol consumption and abstinence during pregnancy. Of note are the findings of the article that, unsurprisingly, current measures to regulate alcohol consumption during pregnancy have been unsuccessful due to the size, location and competition of alcohol marketing compared to health warning information. It found that current warning labels in France are informationally vague and are typically limited to “Alcohol use [being] harmful”, with no information of potential effects being long-lasting and some irreversible in the case of pregnancy and FASD. The study finds that the ability of alcohol warning labels to encourage abstinence from drinking in pregnant women was dependent more so on individual drinking profiles. Due to the insignificance of the warning labels, abstinence from drinking was less likely in excessive or problem drinkers. The majority of qualitative evidence also found that current alcohol warning label measures were insufficient in changing alcohol behaviour and being dissuasive. This article also highlighted the influence of the alcohol industry lobbying in preventing the introduction of informative health warning labels.

There is also an article by Cil (2017) that explores the compulsory requirement for alcohol warning signs across 23 states in the USA and the effects on rates of prenatal alcohol consumption. This study uses the variation in adopting FASD policies to examine the effect of alcohol warning signs on particular US states over time. Alcohol warning signs have been mandated in the USA since the 1980s. They require alcohol retailers to independently post signs that warn against the dangers of drinking during pregnancy, often being succinct and saying that “drinking during pregnancy can cause congenital disabilities.” The policies relating to point-of-sale alcohol warning signs are consistent inter-state, clearly requiring certain font size of the text that should be used and the requirement for placement and display. Also in these states in the USA, the alcohol warning signs must be displayed next to the point of sale register and the front door of the store or where liquor is displayed. This all ensures that the visibility of the warning labels on the products themselves is maximised. This study's findings show that with some variation in the adoption of alcohol warning sign strategies over time within and across states, the most comprehensive approaches to alcohol warning sign measures, lowers rates of FASD (or causes a statistically significant reduction in prenatal alcohol use). The significance of this outcome is that the application of point-of-sale and/or in-store warning signs provides a relatively low-cost, relatively low burden and useful initiative that could be used to lower the burden of FASD in New Zealand.

Perhaps the most powerful example internationally is where point-of-sale warning signs are integrated into a comprehensive framework for FASD prevention, such as in Canada (Wolfson & Poole, 2023). The health system's approach to FASD prevention in Canada is holistic as it also provides wrap-around services for pregnant and postpartum mothers that boost alcohol abstinence, creating a supportive rather than restrictive alcohol policy relating to pregnancy. The alcohol industry has argued in the past that warning labels induce guilt and anxiety among pregnant women and should, therefore, be abolished (Wolfson & Poole, 2023). The four-part model for FASD prevention in Canada is expressed as follows:

1. Level 1 relates to awareness and health promotion-related interventions, such as warning labels and point-of-sale signs. This promotion-focused approach to FASD is foundational to the other parts of the framework; however, it seldom works independently of different methods and cannot alter behaviour and perception related to FASD in the population.
2. Level 2 relates to collaborative discussion of alcohol use, prenatal support, available contraception, pregnancy planning and ways to cope without alcohol. Level 2 also includes brief counselling. This is explored as a low-cost way to reduce alcohol consumption in pregnant women and increase rates of referral to specialised programs for alcohol-dependent women who are pregnant.
3. Level 3 prevention is designed to reach those women in the population who are at the highest risk of an alcohol-exposed pregnancy, which is provided through community-based or outreach services.
4. Level 4 involves postpartum support for mothers with a history of alcohol abuse. The article found that women who engage in mentorship programs were less likely to have future alcohol-exposed pregnancies, and it decreased their rates of alcohol use.

Aotearoa/ New Zealand

FASD is likely the leading cause of non-genetic intellectual disability in Aotearoa New Zealand and our response has not adequately ameliorated the negative outcomes our young people experience: increased mortality, abuse and neglect, poor educational achievement, entanglement with the criminal justice system, welfare dependence, mental health and alcohol and other drug issues.

There is no reliable data on the prevalence of FASD in Aotearoa New Zealand but it is estimated that around 3-5% of people may be impacted by alcohol exposure before birth. In Aotearoa New Zealand around 1800-3000 babies may be born with FASD each year. New research concludes that disability from FASD is a major contributor to alcohol's harm to others and that when FASD is taken into account, the health burden of harm to others in Aotearoa New Zealand is [larger than the harms sustained by drinkers](#).

The goals of *Taking Action on FASD: 2016–2019: An action plan* are stated as: “FASD is prevented and people with FASD and their family/whanau live the best possible lives”

New Zealand and Australia have mandated pregnancy warning labels on all alcohol products produced and labelled after 31 July 2023. However older stock is not required to carry the label. The pregnancy warning label or pregnancy warning mark consists of the pregnancy warning pictogram, the signal words “Pregnancy Warning” and the statement “Alcohol can cause lifelong harm to your baby”, on a white background within a black border.



Our proposal is to *reformat the pregnancy warning label to create a pregnancy warning sign* for use in off-licence premises, at point of sale, and in single alcohol areas of supermarkets and grocery stores. An easily printable and easily readable sign could increase awareness of and the salience of the

warnings. We propose reformatting the signs to an A4 size, with a portrait and a landscape option that can easily be printed and displayed by staff at licensed premises. See Appendix 1.

Precedent for Display of Signs in Licensed Premises

The Sale and Supply of Alcohol Act mandates display of a range of signage *so as to be easily read by people*. These signs include trading hours (s56, at each principal entrance), the licence itself (s57, at each principal entrance, see also s150 special licences). The full name of a manager on Duty at a premises *must be prominently displayed inside the premises so as to be easily read by people using the premises* (s214).

A licensing committee or the Alcohol Regulatory and Licensing Authority ('ARLA') may issue licences subject to conditions prescribing steps to be taken with regard to the sale of alcohol to prohibited persons (s116(1)), namely underage persons and intoxicated persons. The Auckland District Licensing Committee has issued a [practice note](#) (dated 6 October 2023) directing licensees to ensure the prominent display of an A4 sign stating the restrictions on the supply of alcohol to minors and intoxicated persons so as to be easily read, by people using the premises (on and club licences), or from every point of sale (off licences).

Various signs are readily available online for display at licensed premises for these purposes and are set out below, for example:



https://resources.alcohol.org.nz/assets/Uploads/2.0-AL1229-Intoxicated-and-minors-venue-sign_Oct-2023.pdf
<https://resources.alcohol.org.nz/resources-research/alcohol-resources/research-and-publications/the-law-on-licensed-premises-a4-sign>

Communities Against Alcohol Harm propose that the display of an A4 pregnancy warning sign be made a condition of licences, particularly off-licences. We see four potential routes to this occurring, through:

- inclusion of discretionary conditions in Local Alcohol Policies;
- licence conditions imposed by District Licensing Committees and/or ARLA;
- practice notes issued by District Licensing Committees;
- regulations developed under s401(b) of the Sale and Supply of Alcohol Act.

Manurewa Local Board

Having regard to the discussion above, the Report now turns to the role the Manurewa Local Board can play in the public health response to FASD locally.

From a strategic/policy perspective, in its 'Local Board Plan 2023',¹ the Manurewa Local Board states that part of their purpose is to collaborate with community partners who target harm reduction associated with gambling, alcohol, drug use and the like. In its previous 'Local Board Plan 2020' the Board said that: "Smoking, gambling, alcohol, drug use and unhealthy diets can all affect personal, family and community well-being" and also says that "We'll keep targeting these issues, working with communities, neighbourhoods and key partners to reduce the harm caused."

In the context of the Manurewa Local Board, public health measures are even more crucial due to their high proportion of Māori residents (26%).

This strategic/policy approach of the Local Board aligns with our proposed intervention of point-of-sale and/or in-store FASD warning signage, as this provides an empirically supported, low-burden intervention for harm reduction associated with alcohol, specifically FASD.

This might be achieved through the Manurewa Local Board's ability to influence alcohol policy through future versions of the Auckland Local Alcohol Policy (LAP) and/or through advocating for conditions in alcohol licences.

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¹ <https://www.aucklandcouncil.govt.nz/about-auckland-council/how-auckland-council-works/local-boards/all-local-boards/manurewa-local-board/Documents/manurewa-local-board-plan-2023.pdf>

APPENDIX 1



Communities Against Alcohol Harm

Fetal Alcohol Spectrum Disorder (FASD) and signage in off-licence premises

Ishita Seth, Chlayton Frans, Nathan Cowie, Grant Hewison



Fetal Alcohol Syndrome Disorder (FASD)

FASD is a serious public health issue in New Zealand (NZ), with disproportionate impacts on Māori communities.

FASD results from prenatal alcohol exposure and can cause lifelong physical, cognitive, and behavioural challenges.

Despite the urgent need for action, NZ's response has been inadequate in addressing the prevalence and effects of FASD.

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International Literature

Wolfson & Poole (2023)

- Four-level comprehensive approach to FASD prevention
- Provides holistic service for prenatal and postpartum mothers

Cil (2017)

- Alcohol Warning Signage in the USA
- Clear requirements for size, placement and clarity
- Statistically significant reduction in prenatal alcohol use

Dossou, Gallopel-Morvan, and Diouf (2017)

Current measures were unsuccessful due to the size, location and competition of alcohol marketing compared to health.

Aotearoa/ New Zealand

- FASD is likely the leading cause of non-genetic intellectual disability in NZ
- Estimated 3-5% of people may be impacted
- Around 1,800-3,000 babies born with FASD each year
- Pregnancy warning labels mandated on alcohol from July 2023
- Includes pictogram, "Pregnancy Warning", and "Alcohol can cause lifelong harm to your baby"
- Proposal: Display A4 pregnancy warning signs at points of alcohol sale
- Based on precedent of signage requirements in licensed premises
- Could be required through local alcohol policies, licence conditions, or regulations

