

POSITION STATEMENT

Consumer information and labelling of alcohol



Key messages and recommendations

Cancer Council recommends:

- 1) Consistent with the recommendations of the National Preventative Health Taskforce, health information and warning labels should be mandatory under the Australian New Zealand Food Standards Code.
- 2) Health information and warning labels need to follow strict guidelines about:
 - a) wording;
 - b) format;
 - c) legibility;
 - d) colours used; and
 - e) size of the label and position on the bottle.
- 3) The introduction of health information and warning labels should be part of a wider alcohol control strategy that includes advertising and sponsorship bans and targeted pricing and taxation measures, in line with the recommendations of the National Preventative Health Taskforce.
- 4) Cancer Council is concerned about the limitations of the current labelling approach to alcohol. Currently, alcohol labeling requirements are less stringent than those applied to many food. Instead these fail to recognise or acknowledge that alcohol is a high-risk product. A more effective approach to alcohol labelling could be based on the approach taken to tobacco under the consumer protection provisions of the *Trade Practices Act 1975* (Cth).
- 5) An implementation time frame for the industry to include health information and warning labels should occur within 12 months of the decision to include such labels.
- 6) In relation to health information labels they should include:
 - a) a full list of ingredients and nutritional information, in accordance with Standard 1.2.8 of the Food Standards Australia New Zealand code,¹ including the energy content per container and per 100mLs. This is particularly important in relation to overweight, obesity and allergy concerns.
 - b) Consistent and uniform information about the estimated number of standard drinks in relation to the size and legibility, using a clear, consistent logo across all products
- 7) In relation to warning labels:
 - a) warning labels should be compulsory on all alcohol products so consumers can be informed that the product they are purchasing and/or consuming can have a serious impact on their health and wellbeing.
 - b) warning labels should include health messages based on the 2009 NHMRC guidelines for low risk drinking including:
 - medical side effects of alcohol;
 - risks during pregnancy;
 - increased risk of physical violence;
 - risks to safety when operating machinery, driving, swimming etc.; and;
 - social, health and injury problems.

- c) Cancer Council proposes, in order to maximise impact, awareness and comprehension of the warning labels; they need to be:
 - placed on the main label (as opposed to the neck label);
 - boxed;
 - of letters no less than 3mm high;
 - textual and graphic;
 - attention-getting;
 - full colour or black writing on white background to ensure written messages stand out
 - occupying a considerable portion of the package surface, with the minimum size of labels stipulated;
 - rotated with different messages; and
 - easy to comprehend - they need to be tested with consumers to ensure they are understood especially by people with low literacy or who speak languages other than English.
- d) warning labels should address social as well as health and safety issues, such as risk to third parties, as well as to the drinker themselves.
- e) alcohol warning labels should be reinforced by warning posters and signs in licensed premises.

Background

In 1988 alcohol was classified by the World Health Organization International Agency for Research on Cancer as a Group One carcinogen. This is the highest classification available and means that it is a cause of cancer.² Since then, a large body of evidence has consistently shown that consumption of alcoholic drinks is a risk factor for cancer. Drinking alcohol increases the risk of cancers of the mouth, throat (larynx and pharynx), oesophagus, bowel (colon and rectum), liver and breast.^{3,4,5} Accordingly, access to information on how to use alcohol is crucial for the consumer and should accompany the sale and supply of all alcohol products as a public health promotion message and disease prevention measure.

In this statement, alcohol labelling includes:

1. factual information such as a list of ingredients (health information labelling) and
2. directional information, including advice and recommendations about drinking (warning labelling).

The introduction of health information and warning labels on alcohol products has the potential to increase the awareness of alcohol as a potentially harmful product and should be an important component of a comprehensive public health strategy to educate the community on safer alcohol consumption. Placing health information and warning labels on alcoholic drinks and containers targets the appropriate audience (the drinker) at the appropriate time, when purchasing and using the product.

Health information labelling

Health information labels can assist to reinforce and complement messages, information and education delivered through other strategies such as media campaigns, school and community education programs and websites. This is especially the case if the health advice is compatible and consistent with the broader health messages being delivered.

In 2009, the National Preventative Health Taskforce recommended health advisory information labelling on all containers and packaging of alcoholic beverages.⁶

In Australia, Standard 2.71 of the Food Standards Australia New Zealand (FSANZ) Act 1991 "Labelling of Alcoholic Beverages and Food containing alcohol" stipulates that an alcohol label is to include alcohol by volume (expressed in mL/100g or % alcohol by volume) and the estimated number of standard drinks contained.⁷ However the size and legibility of this information varies greatly between products. Also, the packaging of alcoholic beverages, unlike that of non-alcoholic beverages, is not required to display a list of

ingredients or nutritional information, such as the amount of sugar, kilojoules or any preservatives contained in the drink.⁸

Warning labelling

In March 2008, the Australia New Zealand Food Regulation Ministerial Council asked FSANZ to consider mandatory warnings on packaged alcohol. As at 30 November 2009, FSANZ has not made any recommendations. Internationally, a number of countries have introduced mandatory warnings on the labels of alcoholic beverage containers.

In 1997, the International Center for Alcohol Policies identified nine countries that had some kind of mandated alcohol warning labels⁹ and since then at least eight other countries, or jurisdictions within countries, have passed laws requiring some form of alcohol warning labels.¹⁰

A comprehensive review by Stockwell on the effects of alcohol warning labels concluded that the use of warning labels did actually raise awareness.¹¹ In their review of the efficacy of warning labels, which looked at the international evidence regarding efficacy in changing attitudes and behaviour, Wilkinson and Room¹² make the important observation that apart from any short-term effect, the requirement to have a warning on a product regarding its safe use is a 'symbolic statement concerning the nature of that substance.'¹³ This can be important in helping to shift the culture of harmful alcohol consumption but it is difficult to measure such an impact in the short term.

The evidence around health information and warning labels

The serious health and safety effects associated with alcohol are proven and well documented; however, in relation to the effects of alcohol labelling the available evidence has thus far been limited by the type of labelling initiatives which have been undertaken, and the lack of quality evaluations of those initiatives.

There is evidence to suggest a degree of increased awareness of alcohol related harms due to warning labels.¹⁴ A study of the US warning labels showed that warning labels had an impact on cognitive or behavioural stages necessary for behavioural change, such as intention to change drinking patterns, having conversations about drinking and willingness to intervene with others who are seen as hazardous drinkers.¹⁵ Given the relatively small size of labels, and the obscurity and lack of variation in the label content, the study noted that it was remarkable that any effects were demonstrated.¹⁶

Other studies have shown that warning labels have the potential to influence behaviour but this depends on the label design, the content of the messages, and how well they are targeted at their intended audience.¹⁷

A 2009 study found that young people are aware of the existence of standard drink labelling; notice standard drinks labels; and take these into account when choosing what to purchase.¹⁸ However, this was predominantly to help them choose the strongest drinks for the lowest cost.¹⁹ This study provides initial evidence to support the view that standard drink labelling, in isolation of other modifications to product packaging and marketing, is likely to serve to further increase heavy drinking among young people.²⁰

Although the available evidence reveals some unintended consequences of alcohol labelling, it also shows that consumers are reading and taking note of nutritional information labelling. An opportunity exists therefore to target specific warning messages to drinkers who are reading and assessing the nutritional information in such detail. Therefore, to have any real impact, alcohol labelling requirements must be comprehensive (i.e. health *and* warning labels) and targeted, so that the appropriate warning message is specifically reaching consumers who drink at risky levels.

Achieving behavioural change is a complex process and health information and warning labels need to be just one part of a multi-strategic approach to informing people about the harms of alcohol. The tobacco labelling experience compelling evidence that health information and warning labels can be effective not only in increasing information and changing attitudes, but also in changing behaviour.²¹ A Canadian study found that nine months after the introduction of tobacco warning labels, 91 per cent of smokers recalled reading the labels and had a good knowledge of their content.²² Smokers who recalled the labels reported stronger intentions to quit, while smokers who had read and discussed the labels were significantly more likely to have stopped smoking.²³

Implementation

The principle of alcohol health information and warning labels is popular with the public both internationally and in Australia.^{24, 25} Support for labelling alcoholic containers, with information from the National Drinking Guidelines, has been strong and consistent. For example, more than two thirds of respondents in the past three National Drug Strategy Household Surveys (71.0% in 2001, 69.9% in 2004²⁶ and 70.9% in 2007²⁷) have supported the addition of health information labels on alcoholic products. In addition, a public opinion poll of Victorians found that 68% supported a law change requiring all alcohol products to carry health warnings and 13% said they would buy less alcohol if warnings were on products.²⁸

Overall, the costs associated with implementation of warning labels are low.²⁹ Australian wine producers and manufacturers that export their alcohol products to the United States of America (USA) already label their products with a health warning to meet the requirements of the government of the USA. In addition, alcohol labels are often changed to support promotions or different types of one-off or limited marketing strategies.

Acknowledgment

This position statement is based on the Consumer Information and Labelling position statement developed by the Alcohol Policy Coalition, a coalition of health agencies consisting of Cancer Council VIC, VicHealth, Australian Drug Foundation and Turning Point Alcohol and Drug Centre.

Cancer Council Australia, GPO Box 4708, Sydney NSW 2001
Ph: (02) 8063 4100 Fax: (02) 8063 4101 Website: www.cancer.org.au

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