

Background

Alcohol (waipiro) is a Class 1 carcinogen and a known cause of many cancers^[1-3]. These include cancers of the mouth, throat, voice box, oesophagus (food pipe), bowel, liver, and female breast (pre-and post-menopausal). Bowel cancer is the second most common cancer in Aotearoa, New Zealand and breast cancer the leading cause of alcohol-attributable death for both Māori and non-Māori women in Aotearoa, New Zealand^{4,5}.

Drinking any amount of alcohol regularly, even low levels, can increase the risk of some cancers^{1-3,6}. An example of this is the more than one-third of alcohol-attributable breast cancer deaths that occur among New Zealand women with an average daily consumption of less than two daily standard drinks³. The level of cancer risk increases with the level of alcohol consumption. Alcohol combined with tobacco use also can significantly increase cancer risk⁷. Due to the high energy content of alcohol its use can also contribute to weight gain and weight-related cancers^{2,8}. It is estimated that seven percent of the total cancer burden in New Zealand is attributable to alcohol use⁹. Avoiding alcohol altogether is the best way to reduce the risk of these cancers^{2,3}.

In Aotearoa four out of five adults drink alcohol and almost one in five consume alcohol in a way that could harm themselves or others¹⁰. Māori and Pacific males, youth and low socioeconomic communities are disproportionately impacted by hazardous drinking and alcohol-related harm^{10,11}. Alcohol-related cancer is experienced at higher rates and death is 2.5 times greater in Māori than non-Māori^{3,4}. Past and present impacts of colonisation and

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 9. World Health Organisation. New Zealand Country Cancer Profile. https://www.who.int/cancer/country-profiles/NZL_2020.pdf. Published 2020. Accessed June 10, 2020
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associated structural and environmental factors are identified as key determinants of inequitable alcohol-attributable harm and cancer risk^{12,13}. Alcohol is readily available, affordable and widely promoted in digital media and in our neighbourhoods and more so in low income areas¹⁴⁻¹⁶. This significantly contributes to the inequitable distribution of ill health and death including from alcohol-attributable cancers^{2,10,17}.

There is strong national and international evidence that policies addressing alcohol availability, affordability and marketing are the most effective and cost-effective ways to equitably reduce consumption, and thereby reduce alcohol-attributable harms such as cancer¹⁸⁻²¹. However, despite wide public support for evidence based policies to address alcohol harm there has been little progress made in Aotearoa over the past decades^{13,18,19,21,22}. While commercial pressure from the alcohol industry on government are well recognised, strong policy, regulatory interventions and enforcement remain critical to reduce the affordability, promotion and oversupply of alcohol especially in low socioeconomic communities. Raising awareness of alcohol consumption and cancer risk is also urgently needed, as research demonstrates a low level of awareness of the alcohol-cancer links among New Zealanders²³. Importantly, knowledge of these links is associated with higher levels of public support for population level alcohol harm reduction strategies.

Summary of recommendations

To reduce the incidence and inequitable distribution of alcohol-attributable cancers in Aotearoa, evidence-based population strategies are needed to reduce the availability, affordability and marketing of alcohol. The Cancer Society supports the following:

- a. Raising public awareness of the alcohol-related cancer risks.
- b. Raising the price of alcoholic beverages through taxation and minimum pricing.
- c. Restricting all forms of alcohol promotion (including digital media) and sponsorship and establishing an independent authority to regulate and monitor alcohol marketing.
- d. Reducing the availability of alcohol through restricting alcohol outlet density and trading hours and enabling greater community control to constrain the right of appeal by vested interests such as alcohol producers, suppliers and distributors.

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Recommendations

The Cancer Society supports stronger government leadership to substantially reduce the normalisation and consumption of alcohol across the population. Increasing awareness of alcohol-related cancer risks is also needed to reduce alcohol consumption, harm, cancer and non-communicable diseases.

The Cancer Society supports approaches recommended by the Cancer Action Plan 2019-2029, 2010 NZ Law Commission review, the 2014 Ministerial Forum on Alcohol Advertising and Sponsorship, World Health Organization (WHO) SAFER model and the 2017 Wai 2624 claim by D Ratu and the Māori wardens ki Otara Charitable Trust to reduce alcohol consumption and inequities in alcohol-attributable-cancers^{13,18,21,24,25}. However whānau engagement will be needed to determine the best priorities and solutions to achieve equity and Pae Ora (healthy future) for Māori and protect against unintended consequences^{26,27}.

Key policy approaches recommended include:

- a. **Raising awareness of alcohol and cancer risks** to increase literacy and gain public and political support for population level alcohol harm reduction strategies. The Cancer Society should take a key role in collaboration with others to progress this work.
- b. **Reducing the affordability of alcohol.** International and national evidence finds consumers, including heavy drinkers and young people, are sensitive to changes in the price of alcohol. Pricing strategies such as increases in excise tax and minimum unit pricing specifically targeting the cheapest alcohol are effective ways to reduce population levels of consumption, especially among hazardous and younger drinkers²⁸. To achieve equity, taxation could be ring-fenced and reinvested into Māori waipiro harm reduction.
- c. **Restricting alcohol marketing** in all media (including digital media) and sponsorship of community and professional sports to reduce alcohol exposure and harm. Despite numerous reports and Government-commissioned inquiries calling for stronger action, successive Governments have continued to allow industry self-regulation and a voluntary alcohol advertising code which have long been criticised for being ineffective^{9,13,14,25}. There is strong evidence that young people who have greater exposure to alcohol marketing are more likely to start drinking at an earlier age and engage in binge and hazardous drinking²⁶. Research also finds Māori youth are exposed five times more and Pacific three more to alcohol marketing in their everyday lives, compared to European youth²⁷. These disproportionate levels of exposure significantly impact lifetime risk of alcohol-attributable cancer. Strict and comprehensive controls on alcohol marketing (akin to that required for tobacco advertising) are recommended internationally to limit the uptake and harms of alcohol²⁶. Establishing an independent authority to regulate and monitor alcohol marketing is recommended¹⁴.
- d. **Reducing the availability of alcohol** through recommendations made by the Law Commission (2010) including reforming the Sale and Supply of Alcohol Act 2012 to make alcohol laws more responsive to

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community needs^{14,26,27}. The Cancer Society supports the following:

- restricting alcohol outlet density and trading hours
- increasing the minimum purchase age for alcohol to 20 years
- removing the industry right to appeal a Local Alcohol Policy (LAP) and requiring the Alcohol Regulatory Licensing Authority and District Licensing Commissions across NZ to have Māori representation and inserting a clause that recognises the rights of Māori under Te Tiriti o Waitangi²⁹⁻³¹
- strengthening the monitoring and enforcement of alcohol licences.

Policy priorities that make alcohol less available, affordable and marketed in our communities align with recommendations from national and international research and public health experts in Aotearoa³².

Due to the difficulties in curtailing the influence of the transnational alcohol industry, the Cancer Society strongly supports the international call for a Framework Convention on Alcohol Control^{34,35} to reduce the influence of commercial interests in alcohol policy development.

The role of the Cancer Society of NZ in primary prevention of alcohol-attributable cancers.

The Cancer Society has an important role in advocating for these key strategies to support New Zealanders, particularly Māori, Pacific and low-income communities who experience an inequitable burden of cancer and other alcohol-related harms from their disproportionate exposure to affordable, excessively promoted and highly accessible alcohol.

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This position statement has been reviewed and endorsed by the following Cancer Society Boards and Committees: CSNZ Board, Health Promotion Advisory Committee, National Executive Committee and National Finance Audit and Risk Advisory and Research

External expert reviewers: Nicki Jackson, Executive Director, Alcohol Healthwatch

David Ratuu, Tiamana Whakahaere Executive Chairman, Kookiri ki Taamakimakaurau Trust

Sally Casswell, Professor of Public Health and Social Research, Director, Social and Health Outcomes Research and Evaluation (SHORE), SHORE & Whariki Research Centre, College of Health, Massey University.

Internal reviewers: Health Promotion Leadership Group, NAP Issues Group.

Developed by: Vicki Robinson, NZCS National Office, Wellington

Disclaimer: Expert reviewers are not responsible for the final content of position statements. Views may vary.

32. Health Coalition Aotearoa. Preventing Harm from Tobacco, Alcohol and Unhealthy Food. <https://www.healthcoalition.org.nz/about-us/>. Accessed June 14, 2020.