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| **Online consultation on harmful use of alcohol** |
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| Fields marked with an asterisk (\*) are mandatory. |
| |  |  | | --- | --- | |  | | | ***Web-based consultation on the implementation of the WHO global strategy to reduce the harmful use of alcohol since its endorsement, and the way forward*** |  | | Download the [discussion paper](https://web-prod.who.int/docs/default-source/alcohol/2010-strategy/discussion-paper.pdf?sfvrsn=3a37d598_2) on the web-based consultation.  The web-based consultation is open to WHO Member States, UN organizations and other governmental and intergovernmental organizations and enteties, and non-State actors, but not to individuals. All relevant feedback received may be published on the website of WHO.   The response can be given in any of the six official languages of WHO: English, French, Spanish, Russian, Chinese or Arabic.   The web based consultation will end 4 November 2019.  If you have any problems with the submission, please e-mail rekved@who.int | | |
| |  |  | | --- | --- | |  | | | ***About your organization*** |  | |
| |  | | --- | | **1) Organization name \*** | | |  | | --- | | Cancer Society | | | |
| |  | | --- | | **2) Type of organization \*** | | |  | | --- | | Other nongovernmental organization | | | |
| |  | | --- | | **3) If other organization** | | |  | | --- | | Please fill this field if the type of your organization is not listed above. | | | |
| |  | | --- | | **4) Are you a non-State actor in official relationship with WHO?** | | |  |  | | --- | --- | |  | No | | | |
| |  |  | | --- | --- | |  | | | ***Conflict of interest*** |  | | Skip if an offiical submission from a WHO Member State | | |
| |  | | --- | | **1) Is your organization an economic operator in alcohol beverage production, distribution, marketing or sales or do you receive funding from such economic operators?** | | |  |  | | --- | --- | |  | No | | | |
| |  | | --- | | **2) Additional information** | | |  | | --- | |  | | | |
| |  | | --- | | **3) Is your organization a tobacco company or prooducing firearms or funded by such companies?** | | |  |  | | --- | --- | |  | No | | | |
| |  |  | | --- | --- | |  | | | ***Contact*** |  | |
| |  | | --- | | **1) Contact person \*** | | |  | | --- | | Mike Kernaghan | | | |
| |  | | --- | | **2) Position \*** | | |  | | --- | | Chief Executive Cancer Society National Office | | | |
| |  | | --- | | **3) I confirm that I can submit on behalf of the listed organization \*** | | |  |  | | --- | --- | | Yes |  | | | |
| |  | | --- | | **4) Email \*** | | |  | | --- | | [mike@cancer.org.nz](mailto:mike@cancer.org.nz) | | | |
| |  | | --- | | **5) Telephone number \*** | | |  | | --- | | +64 21822577 | | | |
| |  | | --- | | **6) Address** | | |  | | --- | | Street address/PO Box, Postal code, City | | | |
| |  | | --- | | **7) Country \*** | | |  | | --- | | New Zealand | | | |
| |  |  | | --- | --- | |  | | | ***Questions for consideration*** |  | |
| |  | | --- | | **1) What, in your organization’s view, have been the most important achievements, challenges and setbacks in implementation of the WHO global strategy to reduce the harmful use of alcohol since 2010? \*** | | |  | | --- | | Overarching Achievements:  Development of evidenced based alcohol policy "Best Buys"  New Zealand drink drive legislation strengthened to .05g/L for adults  Greater collaboration between police, health agencies and City Council's licensing inspectors in regards to liquor licensing   Challenges  Lack of progress on adopting "Best buys" Government not progressing excise tax increase, marketing restrictions and reducing availability despite successive Government inquiries recommending these best buys.  Lack on national alcohol plan, targets and timeframes  No global legally binding framework to prevent alcohol industry interference  Transnational alcohol industries lobbying and expansion of marketing in social media  Tobacco, alcohol and food industries collaborating globally  International trade agreements that prevent Governments from action  Lack of awareness of alcohol as a causal link to cancer  Industry self regulation of advertising  Industry interference of Local Alcohol Policies making a mockery of local community input  Disproportionate harm to Maori communities from alcohol with much greater marketing and availability of alcohol in Maori and low socio-economic areas.   Setbacks  Lack of political will and industry interference at all levels | | | |
| |  | | --- | | **2) What, in your organization’s view, should be priority areas for future actions to reduce the harmful use of alcohol and strengthen implementation of the global strategy to reduce the harmful use of alcohol? \*** | | |  | | --- | | The Cancer Society NZ supports development of a WHO global legally binding treaty on alcohol similar to the Framework Convention on Tobacco Control. The Treaty would need to explicitly exclude the alcohol industry in all public health policy development (as in FCTC article 5.3). This would provide alcohol the same status as other harmful and addictive commercial products. | | | |
| |  | | --- | | **3) Any additional comments?** | | |  | | --- | | Please see attached submission from the Cancer Society New Zealand. | | | |
| |  |  | | --- | --- | |  | | | ***Additional information*** |  | |
| |  | | --- | | **1) Attachment** | | |  | | --- | | [CSNZ additional submission on WHO Alcohol Global Strategy.docx](http://apps.who.int/datacol/answer_upload.asp?survey_id=744&answer_id=22048&respondent_id=304096) | | | |