



Alcohol Policy Coalition

Submission to Free TV Australia: Review of the Commercial Television Industry Code of Practice

22 September 2009

Executive Summary

The Alcohol Policy Coalition (“the Coalition”) makes the following submission in relation to the regulation of alcohol advertising through the Commercial Television Industry Code of Practice (“the Code”). The Coalition is concerned about the level and frequency of alcohol advertising on television, particularly at times and during programs that are viewed by children and young people.

In relation to the review of the Code, the Coalition recommends:

1. the amendment of clause 6.7 to restrict the broadcast of direct advertisements for alcoholic drinks to AV classification periods (clause 6.7.1); and to remove the exception permitting the broadcast of direct advertisements for alcoholic drinks as an accompaniment to the live broadcast of a sporting event on weekends and public holidays;
2. the removal of clause 6.8 (further outlining the exception in clause 6.7.1) detailing the conditions under which the broadcast of a direct advertisement for alcohol drinks as an accompaniment to the live broadcast of a sporting event is permitted;
3. the Coalition recommends that the Code be amended to give Free TV greater compliance and enforcement measures, particularly in relation to own motion complaints.
4. the amendment of section 7 (in relation to complaints) as follows:
 - a. remove the proposed amendment (clause 7.2.3.1) that requires complainants to identify the date and time an advertisement was broadcast, or the television program in which it was broadcast;
 - b. remove the requirement in 7.2.2 for complaints to be in writing; allow telephone and email complaints;
 - c. a toll-free number should be provided for viewers to submit telephone complaints; and
 - d. all reports of investigations into Code breaches should be published on the ACMA website.
5. that the Code be strengthened to give Free TV greater monitoring capacity including:
 - a. the ability to request that the annual actual and budgeted alcohol industry marketing (television advertising) expenditure and all television advertising marketing plans are to be provided to appropriate government authorities; and
 - b. that this information is made available for public access on the Free TV website.

About the Alcohol Policy Coalition

The Alcohol Policy Coalition is a coalition of health agencies who share a concern about the level of alcohol misuse and the health and social consequences in the community. We have come together to develop and promote policy responses that are evidence-based and known to be effective in preventing and reducing alcohol related problems. Members of the Coalition, which include the Australian Drug Foundation, the Cancer Council Victoria, Turning Point Alcohol and Drug Centre, and VicHealth, have a strong track record in tackling major health issues in the community.

The impetus for the Coalition is the need for a consolidated and coordinated approach and effort by key agencies in preventing and reducing alcohol related problems. The Coalition believes that finding a solution to the problem of alcohol misuse requires governments, the community, individuals and the alcohol industry to all play a part.

The Coalition's long-term goal is to reduce the negative health and social consequences of alcohol.

The Coalition recognises that alcohol is an integral and enjoyable part of Australian culture. However, the contribution alcohol advertising makes to promote and support this culture should not be underestimated. The effects of alcohol advertising go well beyond an individual's drink preferences to influence how we perceive alcohol and its place in society. As noted in the *National Alcohol Strategy 2006-2009*, "the wide-ranging ways in which alcohol is promoted is a major force behind Australia's drinking culture."¹ Research has demonstrated that exposure to repeated high level alcohol promotion inculcates pro-drinking attitudes and alcohol advertising has been found to promote and reinforce perceptions of drinking as positive, glamorous and relatively risk-free.² Such advertising also undermines public health strategies that aim to shape the information environment to enable people to make appropriate alcohol consumption choices.³ Thus, where alcohol may have complemented the Australian lifestyle, it is now a central and at times, harmful element.

Children and young people are highly sensitive to the effects of alcohol, whilst at the same time highly susceptible to advertising. A recent report by the British Medical Association looked at the links between advertising, promotion and consumption of alcohol.⁴ The report concluded that "alcohol marketing is independently linked to the age of onset drinking in young people and the amount they drink."⁵ And while the report makes a number of recommendations to reduce alcohol related harm (such as reducing licensing hours and considering outlet density issues in relation to licence applications), the key recommendation is for a ban on all alcohol marketing communications.⁶ Other evidence indicates that the introduction of alcohol advertising bans

decreases alcohol consumption and has the potential to reduce the harmful social costs of alcohol consumption such as motor vehicle fatality rates.⁷

The Coalition strongly supports all measures that regulate alcohol advertising – including alcohol marketing bans - as an important, component part of an overall, comprehensive strategy aimed at dealing with and minimising alcohol-related harm in Australia. That the loophole permitting alcohol advertising during live sports broadcasts has not been removed from the Code as part of this review is unacceptable. It is contrary to both community and alcohol industry standards of responsible alcohol promotion, particularly at a time in Australia when governments, community groups, and some sections of the alcohol industry have expressed a heightened concern about alcohol advertising and particularly underage drinking.

Harms associated with alcohol consumption by young people

Research has found that a high proportion of adolescents and young people in Australia are regular drinkers, and many consume alcohol at risky levels.

New research released on 8 September 2009 by The Salvation Army, shows 2.3 million Australians had their first alcoholic sip or drink when they were just 10 years old or younger, and 12.1 million Australians are not aware of the new national guidelines on alcohol which indicate that for 15 to 17 year olds, the safest option is to delay the initiation of drinking for as long as possible.⁸ The 2004 National Drug Strategy Household survey reported that 24% of all 14-19 year olds in Australia had drunk alcohol in the past week.⁹ Studies conducted between 2000 and 2004 found that 40% of Australian males and females aged from 15-17 years had consumed alcohol at risky levels on their last drinking occasion.¹⁰ Risk levels were based on levels of alcohol consumption likely to cause short- and long-term harm in adults (according to the 2001 National Health and Medical Research Council of Australia Guidelines), and were defined as having more than six standard drinks on any one day for males, and more than four standard drinks on any day for females.

A 2005 survey of Victorian secondary students reported that more than 55% of 15 year-old students, and more than 60% of 16 year-old students, had consumed alcohol in the past month, and about 40% of 15 year olds and 50% of 16 year olds had drunk in the past week.¹¹ The survey also found that 20% of all 16 year-old students and 27% of all 17 year-old students had drunk in the past week at levels risking short-term harm.¹² According to the Victorian Drug Statistics Handbook 2004, 20% of young Victorians aged 16-24 years drink to intoxication most times they drink, and 42% of drinkers report memory loss after drinking.¹³

Alcohol accounts for 13 per cent of all deaths among 14-17 year old Australians; it is estimated that one Australian teenager dies and over 60 are hospitalised each week from alcohol related causes.¹⁴ In 15-34 year olds, alcohol is responsible for the majority of drug related deaths and hospital admissions – more deaths and hospitalisations than all illicit drug use or tobacco, in the same age group.¹⁵ The United States National Youth Survey reported that alcohol use in teenagers, and particularly pre-teenagers, is a strong predictor of suicide ideation and completed suicide.¹⁶ Evidence also suggests that early initiation to drinking is related to more frequent and higher quantity alcohol consumption in adolescence and in turn can result in the development of alcohol related harms as adults.¹⁷

Adolescents and young people are more likely than older people to suffer harm as a result of consuming alcohol. They have little experience with alcohol, less tolerance than older people to the inebriating effects of alcohol, often use alcohol in a risky manner, trivialise or have little understanding of the potential harms associated with drinking, and lack the knowledge and skills needed to minimise harms associated with alcohol.¹⁸ Adolescents only need to drink half as much alcohol as adults to experience equivalent effects. They seem to be more sensitive than adults to learning and memory problems that can be caused by alcohol and more likely to suffer from lack of judgment and memory loss.¹⁹ Consequently, adolescents and young people are at particular risk of suffering serious and acute harms as a consequence of drinking.²⁰

Alcohol consumption by young people can cause a range of serious immediate or short-term harms, including memory loss, accidental injury, violence, assault, unsafe sex, delinquent behaviour, drink driving, disrupted family relationships, poly-drug use, depression and suicide.²¹ Heavy alcohol consumption may also interfere with crucial brain development that occurs during adolescence, and may affect cognitive development and capacity for learning.²²

A major long-term effect of alcohol consumption in adolescence is alcohol dependence. Late adolescent patterns of drinking tend to stabilise or escalate during early adult years, and those who start drinking at a young age are more likely to drink heavily, to suffer alcohol-related harm and to develop alcohol dependence in adulthood.²³ The prevalence of alcohol dependence among Australians aged 18-34 years is estimated to be as high as 11%.²⁴

In the long-term, excessive alcohol consumption also increases a person's risk of suffering from many serious health problems, including different types of cancer (e.g. cancers of the lips mouth, throat, oesophagus, stomach, pancreas and liver), cardiovascular disease, liver cirrhosis, cognitive problems and dementia.²⁵

Marketing of alcohol to young people

Much of the current research surrounding alcohol marketing is concerned with how promotion affects the levels and patterns of alcohol consumption. The debate is focused on young people on the basis that they are considered to be more susceptible to advertising messages and more likely to experience harm as a result of risky drinking behaviour.²⁶

Alcohol marketing significantly influences young people's decisions about drinking and their expectations related to alcohol use – including young people's initiation to drinking, what they drink, how much they drink, where and with whom they drink but also the way they think and feel about alcohol.²⁷ Exposure to alcohol advertising has been found to shape young people's beliefs, attitudes and drinking behaviours²⁸ and several studies have shown that young people, even 10-12 year olds, were adept at interpreting the messages, images and targeting of alcohol advertisements in the same way as adults.²⁹ A review of the research on the influence of alcohol advertising on young people's drinking concluded that the more aware, familiar and appreciative young people are of alcohol advertising, the more likely they are to drink in the short- and long-term.³⁰

Research has also found that adolescents and young people perceive alcohol advertising to be targeted toward them. For example, an Australian study found that 25% of 15-16 year olds thought certain advertisements for alcohol were aimed at their age group, whereas 50% of 19-21 year olds believed the same ads were targeting people younger than them.³¹

While the alcohol industry may argue that they do not deliberately set out to target underage drinkers, this group is nevertheless caught through various forms of marketing exposure.³² In essence, the more aware, familiar and appreciative young people are of alcohol, the more likely they are to drink both now and in the future.

However, there can be significant negative consequences from this early initiation to alcohol consumption. Studies on the long-term impact of adolescent alcohol use consistently show that early and frequent use of alcohol approximately doubles the risk of alcohol related problems later in life.³³ Further, research into lifelong alcohol consumption demonstrates that early initiation of alcohol drinking and heavy drinking in adolescence and young adulthood can have long-term adverse health impacts, including increased risks for a range of diseases.³⁴

Alcoholic beverages are often advertised and promoted in a manner designed to appeal to young people, or during programs whose target audience is young people. It is our view that alcohol products such as 'alcopops' (alcoholic drinks that mimic soft drinks in presentation and taste), are manufactured, packaged and marketed by alcohol companies in a manner designed to appeal particularly to, and encourage consumption by, adolescents and young people.

Alcohol advertising tends to link drinking with attractive symbols and role models for young people, and with social or sexual success. For example, advertising for alcopops and other alcoholic beverages commonly features young, attractive and glamorous men and women having fun together or partying, and uses sexualised imagery that would be likely to appeal to young people. Advertising for alcohol products aimed at young males is commonly associated with sport, female models and/or sexual imagery or innuendo.

Regulation of Alcohol Advertising on Television

Recommendations of the National Preventative Health Taskforce (“the Taskforce”)

The National Preventative Health Strategy (“the Strategy”) was recently released by the Taskforce and announced by Federal Health Minister Nicola Roxon on 1 September 2009.³⁵

The Taskforce agreed that a substantial amount of alcohol advertising is communicated to young people and took the view that, in light of the expansion in free-to-air and digital television channels, and the corresponding increase in advertising opportunities, standards for alcohol advertisements should be strengthened.³⁶ Reducing the exposure of young people to alcohol promotions is seen as an essential element in reducing alcohol-related harm in Australia - a conclusion further reinforced by evidence that young people are highly vulnerable to the effects of alcohol up to the age of 25.³⁷

Of particular concern to the Taskforce is the high levels of alcohol advertising and promotion to which adolescents are exposed during live sport broadcasts; during other high adolescent/child viewing times, through sponsorship or sport and cultural events, such as sponsorship of professional sporting codes; and through youth oriented print media and internet-based promotions. For this reason, the Taskforce recommended a stages approach phase out of alcohol promotions from times and placements which have high exposure to young people aged up to 25 years.

Alcoholic Beverages Advertising Code (“the ABAC”)

Although not incorporated in the current Code, the ABAC requirements also hinge on 25 as the watershed age for exposure or involvement in alcohol advertising. Specifically, alcohol advertisements are:

- b) not have a strong or evident appeal to children or adolescents and, accordingly –
 - i) adults appearing in advertisements must be over 25 years of age and be clearly depicted as adults;
 - ii) children and adolescents may only appear in advertisements in natural situations (eg family barbecue, licensed family restaurant) and where there is no implication that the depicted children and adolescents will consume or serve alcohol beverages; and

- iii) adults under the age of 25 years may only appear as part of a natural crowd or background scene; not to have strong or evident appeal to children or adolescents, depict the consumption or presence of alcohol as contributing to personal, business, social, sporting, sexual or other success, or suggest alcohol contributed to a change in mood or environment.³⁸

International Regulation

In New Zealand, alcohol advertising;

1. is not to be shown before 8:30pm;
2. may not exceed six minutes per hour; and
3. no more than two advertisements for liquor in a single commercial break is permitted.³⁹

In the European Union, 21 countries have partial or complete bans on the advertising of alcoholic beverages.⁴⁰ Of those countries employing a partial ban (based on time), the range of times before which alcohol advertisements may not be shown is 7:00pm up to 11:00pm.⁴¹ Of all the European countries, only Lithuania has an exception similar clause 6.8 of the Australian Code – although ordinarily does not permit alcohol advertising before 11:00 at night.⁴²

Broadcasting alcohol advertisements and classification zones

Section 123 of the *Broadcasting Services Act 1992* (“the Act”) requires radio and television industry groups - including commercial broadcasting licensees – to develop, in consultation with the Australian Communications and Media Association (“the ACMA”) and taking account of any relevant research conducted by the ACMA, codes of practice that are to be applicable to the broadcasting operations of each of those sections of the industry. Appendix 1 to this submission outlines the relevant provisions of the Act and Code related to alcohol advertising.

The Code currently provides that a commercial that is a direct advertisement for alcoholic drinks may be broadcast only in M, MA or AV classification periods (i.e. 8.30pm – 5.00am).

Advertisements to children during C or Children classification periods must also not be for, or relate in any way to, alcoholic drinks or draw any association with companies that supply alcoholic drinks.⁴³

Appendix 4 to the Code sets out the Television Classification Guidelines. In relation to the M, MA and AV classifications, the following general guidance is provided:

- M Material classified M is recommended for viewing only by persons aged 15 years or over because of the matter it contains, or of the way this matter is treated.
- MA Material classified MA is suitable for viewing only by persons aged 15 years or over because of the intensity and/or frequency of sexual depictions, or coarse language, adult themes or drug use.
- AV Material classified AV is suitable for viewing only by persons aged 15 years or over. It is unsuitable for MA classification because of the intensity and/or frequency of violence, or because violence is central to the theme. In other respects, the classification's requirements are identical to the MA classification.

It is worth noting that the classification periods outlined above and during which alcohol advertising may be broadcast, identify age 15 as a threshold content age – even though 18 is the legal alcohol purchase age, and age 25 is the threshold age identified in the Strategy and the ABAC (an age which is a good 10 years further on than the Television Classification Guidelines).

Ratings data commissioned for the ACMA's Review of the Children's Television Standards⁴⁴ indicate that high numbers of children watch commercial free-to-air television at all times of day from 6.30am until about midnight. Although the intention of clause 6.7 may be to limit alcohol advertising to periods where children will not be exposed, it is clear that, in practice, this limitation is not effective in relation to children; and it is likely to be even less effective in relation to young people. A complete ban on alcohol advertising television would be the most effective measure to reduce exposure; realistically, the Coalition recognises that this measure is somewhat off. In the meantime, and considering the risk of harm to children and young people associated with alcohol advertising, exposure to this class of viewers could be minimised by restricting alcohol advertising to the classification time period where the least number of children and young people are likely to be watching (i.e. the AV classification zone).

The efficacy of the classification time zone limitation is further eroded by the exception in clause 6.8, to permit alcohol advertising during the day as an accompaniment to the live broadcast of a sporting event on weekends and public holidays or if the sporting event is broadcast simultaneously across a number of licence areas or time zones.⁴⁵ Given the popularity of sport in Australia and the amount of sport broadcast on weekends and across time zones, large numbers of children and young people are exposed to alcohol advertising during these periods. This is substantiated by research that demonstrates the popularity of major sporting events among children⁴⁶ and indicates that, despite the Code's purported restrictions, alcohol advertisements are just as likely to be seen by children and young people as adults.⁴⁷

Standards and suitability of broadcast material

The provisions of the Code (as outlined above), and the Advertiser Code of Ethics and the code for Marketing and Advertising Communications to Children (by incorporation), require at more than one stage:

- (a) the consideration of prevailing community standards⁴⁸, particularly in relation to health and safety;
- (b) that advertising must not in any way relate to alcohol products or companies that supply alcohol products⁴⁹;
- (c) that material must be suitable for the particular broadcast zone in which it appears⁵⁰; and
- (d) that licensees exercise care in selecting broadcast material, taking into account the likely audience and any identifiable public interest reason for presenting the program material.⁵¹

In a recent VicHealth community attitudes survey, 91% of respondents either strongly agreed or agreed that alcohol is a serious issue in our community.⁵² When asked whether advertisements for alcoholic productions should be restricted so that they are less likely to be seen by people under 18 years of age, 82% of respondents either strongly agreed (51%) or agreed (31%) that there should be a restriction.⁵³

Alcohol abuse and harmful consumption by young people is a pressing health and safety issue facing our community, and studies like the VicHealth survey suggest that a restriction on alcohol advertising has widespread support as a key measure to reduce the impact of harmful alcohol consumption by young people.

The current operation of the Code in relation to alcohol advertising, suggests that there is little consideration of community standards in relation to health and safety; that due consideration and care is not being taken in relation to the selection of broadcast material, the likely audience and public interest issues, and the suitability of material for a particular broadcast zone.

The content of alcohol advertising should comply with the AANA Code of Ethics (as incorporated in the Code) and, independently, with the ABAC. However, it is our experience that these initiatives do little to manage and regulate the content of alcohol advertisements on commercial television. It is our recommendation that Free TV take a more active role in the regulation of the content of alcohol advertisements (see recommendations 3 and 5 in the Executive Summary)

The timing and placement of alcohol advertising on commercial television is governed by the Code and the current review provides an opportunity for the Code to be amended to close the loophole in relation to alcohol advertising during live sports broadcasts, and to bring the Code in

line with Taskforce recommendations and community expectations. The live sports broadcast exception is an extraordinary provision and should be removed. Alcohol advertisement should be limited to a classification period likely to have the least amount of under-25s – that is, the AV classification period.

The Coalition recommends:

- 1. The amendment of clause 6.7 to restrict the broadcast of direct advertisement for alcoholic drinks to AV classification periods (clause 6.7.1); and to remove the exception permitting the broadcast of direct advertisement for alcoholic drinks as an accompaniment to the live broadcast of a sporting event on weekends and public holidays.**
- 2. The removal of clause 6.8, insofar as it operates alongside clause 6.7.1 and details the conditions under which the broadcast of a direct advertisement for alcohol drinks as an accompaniment to the live broadcast of a sporting event is permitted.**

Complaints

Section 7 outlines the complaints mechanism of the Code. Complaints about the content of alcohol advertisements will ordinarily be referred to the Advertising Standards Bureau (incorporating the ABAC). Complaints in relation to the placement of alcohol advertisements are directed to the licensee and/or ACMA if the complaint is not dealt with adequately.

Alcohol advertising is subject to a co-regulatory system. A group of three alcohol industry associations – the Distilled Spirits Industry Council of Australia Inc., Australian Associated Brewers Inc., and the Winemakers Federation of Australia Inc. - administers the voluntary Alcohol Beverages Advertising Code (“the ABAC”) that specifically governs the advertising of alcohol. ABAC incorporates advertising guidelines, a mechanism for pre-vetting of advertisements in development and a complaints panel that adjudicates formal objections to advertisements.

In 2003, a review commissioned by the Ministerial Council on Drug Strategy concluded that the ABAC system was dysfunctional. It found that too many advertisements violated the ABAC and that many complaints were not investigated; when complaints were investigated, the process took too long and decisions were not reported accurately.⁵⁴ As a response to this review, changes were implemented in 2004, which included adding a public health expert to the ABAC complaints panel.

Despite these changes, ABAC remains an ineffective regulatory tool. As a voluntary code, it is difficult to enforce and there are no penalties for non-compliance even if an advertiser has been found to offend the code. This is particularly apparent in the pre-vetting system where only advertisers who are signatories to certain ABAC industry associations are required to submit their advertisements for pre-vetting. The ABAC relies on complaints to identify and address breaches of rules and has no facilities for pro-active investigation of potential breaches. Further, there is a lack of systematic, independent monitoring, auditing and research of ABAC’s processes and outcomes.

Australia’s experience with an ineffective self-regulatory advertising system is consistent with international research that indicates that attempts to restrict alcohol marketing primarily through voluntary codes are inadequate.⁵⁵ Experiences in other countries show that these kinds of codes work best where the media, advertising and alcohol industries are all involved and an independent body has powers to approve or veto advertisements, rule on complaints and impose sanctions. Few countries currently have all these components.⁵⁶

The Taskforce has accepted the inadequacies of the current alcohol advertising regulatory model and notes that:

[G]iven the significant shortcomings of the ACAB Scheme to date, it is appropriate to plan the future regulation of alcohol advertising in Australia along a continuum that began with self-regulation, moving towards co-regulation....and then to independent regulation if co-regulation is found to be ineffective. This form of responsive regulation begins with the regulator attempting persuasion, escalating with greater regulation if persuasion proves to be ineffective.

Considering the concerns surrounding the effectiveness of the current alcohol advertising scheme, and calls for strengthened alcohol advertising restrictions, the current review of the Code presents an opportunity for Free TV to take a stronger position on alcohol advertising on television, a position that is consistent with the recommendations of the Taskforce, and that shows a commitment to the effective and fair regulation of alcohol advertising on commercial television stations.

In general terms, the Code should be amended so that Free TV can commence own motion complaints to the licensee and/or ACMA, in relation to the content and placement of alcohol advertisements. Appropriate sanctions and penalties should apply and be actively enforced and Free TV should take a more proactive role to ensure licensees comply with the requirements of the Code. To improve the transparency and accountability of the complaints system, information about complaints procedures on the Free TV and ACMA websites should be more accessible. Currently, this information is buried amongst the huge amount of information on the websites and may be difficult for viewers to locate.

Procedurally, the complaints provisions should operate to meet the needs, expectations and rights of commercial television viewers.⁵⁷ Importantly, the complaints procedure should be easy to use, and accessible to all. Complaints should be accepted in both oral and written form, to account for varying language skills and access to technology.⁵⁸ There should be no cost to the person making the complaint; therefore, and for example, a telephone complaints number should be toll free.⁵⁹

The Coalition recommends that the Code be amended to give Free TV greater compliance and enforcement measures.

Specifically, section 7 should be amended to:

- 1. Remove the proposed amendment (clause 7.2.3.1) that requires complainants to identify the date and time an advertisement was broadcast, or the television program in which it was broadcast should be deleted.**
- 2. Remove the requirement in 7.2.2 for complaints to be in writing; allow telephone and email complaints.**
- 3. A toll-free number should be provided for viewers to submit telephone complaints.**
- 4. All reports of investigations into Code breaches should be published on the ACMA website.**

Overall monitoring and regulation of marketing activity

Recent studies suggest not only that underage television viewers (13-17) are equally likely to be exposed to alcohol TV advertisements as young adults (18-24), but also that the overall level of exposure of this target age group to alcohol television advertising is extremely high.⁶⁰

Great benefit is derived from being able to monitor the overall budgeted and actual television advertising activity of the alcohol beverages industry. The Commonwealth Department of Health & Ageing, in its oversight role, has previously commissioned reviews of the overall advertising activity in the alcohol beverage industry.⁶¹ Given that the co-regulatory approach does not protect children from alcohol advertising exposure,⁶² introducing annual monitoring would enhance the timeliness of regulatory responses, provide a strong evidence base for decision-making and potentially reduce costs to Government. Regular monitoring would also be consistent with the recommendations of the National Preventative Health Taskforce for a responsive regulatory approach.

The Coalition recommends that the Code be strengthened to give Free TV greater monitoring capacity including:

- 1. the ability to request that the annual actual and budgeted alcohol industry marketing (television advertising) expenditure and all television advertising marketing plans are to be provided to appropriate government authorities; and**
- 2. that this information is made available for public access on the Free TV website.**

Conclusion

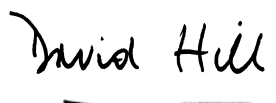
Imposing reasonable limits on the advertising of alcohol on commercial television is but one component of an overall strategy aimed at dealing with, and minimising, alcohol-related harm. Free TV has the opportunity to establish a model for the regulation of alcohol advertising that recognises the importance of public health and the protection of children and young people, and the influence that advertising can have on the perception and consumption of alcohol.

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