



# Public attitudes on policy interventions to reduce alcohol harm

Results from the 2019/20 Alcohol Use in New Zealand Survey (AUiNZ)

In 2018/19, 25% of adults who consumed alcohol in the last year drank at hazardous levels<sup>1</sup> (Ministry of Health, 2019). Experiencing harm from drinking alcohol is commonplace in New Zealand. Alcohol consumption is a leading cause of health loss<sup>2</sup> in people aged 15 to 49 years (Ministry of Health, 2018). In addition to health impacts, alcohol-related harms include injuries and deaths from road accidents and experiencing crimes like robbery, damage to property, and family violence incidents (Te Hiringa Hauora/Health Promotion Agency, 2019b).

In 2018, the World Health Organization (WHO) launched the SAFER initiative (SAFER)<sup>3</sup> to help combat the effects of alcohol-related harm, by focusing on the most cost-effective policy interventions ('best buys'). The best buys focus on drink driving; advertising, sponsorship and promotion; screening; availability; and pricing (World Health Organization, n.d.).

This report presents the attitudes of New Zealand adults to the SAFER policy interventions from the 2019/20 Alcohol Use in New Zealand Survey (AUiNZ).



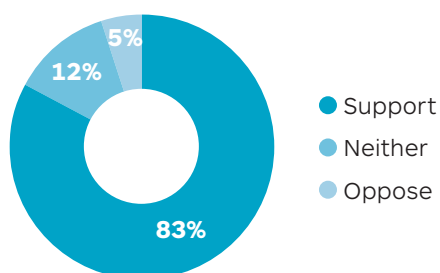
1 Hazardous drinkers are those who have a score of 8 or more on the 10-question Alcohol Use Disorders Identification Test (AUDIT).  
2 Health loss is measured in disability-adjusted life years (DALYs), which is the sum of the number of years lived with disability (YLDs) and the number of years of life lost to early death (YLLs). One DALY represents one year loss of life lived in full health.  
3 For more information about SAFER, go to <https://www.who.int/initiatives/SAFER>

## Best buy #1: Advance and enforce drink driving counter-measures

Four in five (83%) respondents supported tightening restrictions on drink driving by making the penalties harsher. Women, 35 to 44-year-olds, and those 55 years and older were more likely<sup>4</sup> to show support.

Those who didn't drink in the last week<sup>5,6</sup>, and those satisfied with their lives were also more likely to show support to this policy.

### Support for making the penalties for people found drink driving harsher

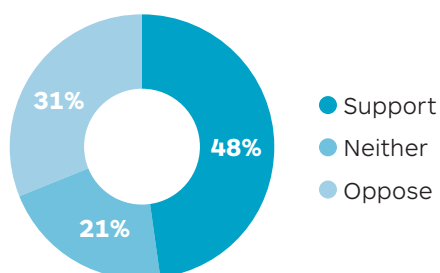


Base: New Zealand adults (n=4,472)

However, there was lower support (48%) for changing the blood alcohol limit when driving to zero. More likely to show support were women, those aged 55 years and older, and those who identified as Asian.

Non-drinkers<sup>7</sup>, and those living in urban areas and in the most deprived areas<sup>8</sup> were also more likely to express support.

### Support for changing the legal blood alcohol limit when driving to zero



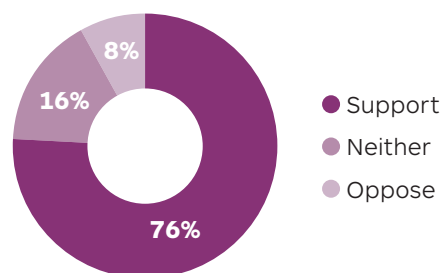
Base: New Zealand adults (n=4,464)

## Best buy #2: Enforce bans or comprehensive restrictions on alcohol advertising, sponsorship and promotion

Three-quarters (76%) of respondents supported banning the promotion of alcohol from social media that under 18-year-olds use.

Women, those aged 25 years and older, and those who identified as Asian were more likely to express support, along with non-drinkers, and those with a tertiary or postgraduate qualification.

### Support for banning the promotion of alcohol from social media that under 18-year-olds use

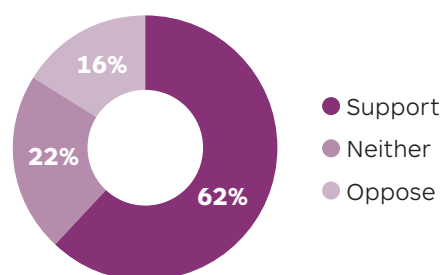


Base: New Zealand adults (n=4,473)

Three in five (62%) respondents supported banning alcohol sponsorship at sporting, community and other events that under 18-year-olds go to.

More likely to show support were women, those aged 25 years and older, and those who identified as Asian. Non-drinkers, those living in urban areas, and those with a postgraduate qualification were also more likely to express support.

### Support for banning alcohol sponsorship at sporting, community and other events that under 18-year-olds go to



Base: New Zealand adults (n=4,468)

4 Reference groups used for comparisons, where applicable, were: men; 18 to 24-year-olds; non-Māori non-Pacific non-Asian; drinker; no children in household under 18; least deprived area; no qualification; dissatisfied/very dissatisfied with life; and rural area.

5 A last-week drinker is a respondent who reported having a drink containing alcohol in the last 7 days.

6 This includes non-drinkers.

7 A non-drinker is a respondent who reported they have not had a drink containing alcohol in the last 12 months or have never had a drink.

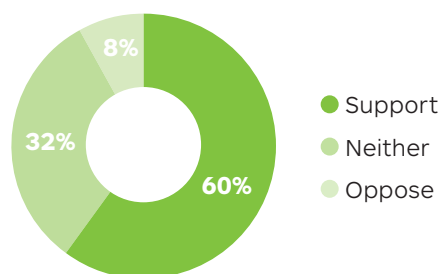
8 Measured using the New Zealand Index of Deprivation (NZDep). The groups include least (1-3), mid (4-7), and most deprived (8-10).

### Best buy #3: Facilitate access to screening, brief interventions and treatment

Three in five (60%) respondents supported requiring health professionals to regularly ask patients about their drinking.

Women, those who identified as Asian, and non-drinkers were more likely to express support.

#### Support for requiring health professionals to regularly ask patients about their drinking



Base: New Zealand adults (n=4,473)

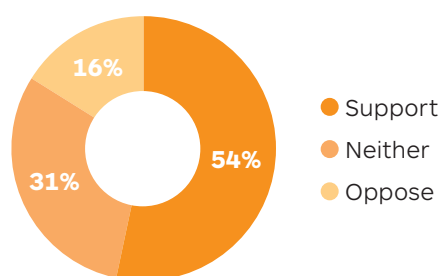
### Best buy #4: Strengthen restrictions on alcohol availability

Just over half (54%) of respondents supported having fewer places selling alcohol in the local community.

More likely to express support were women, those aged 25 years and older, those who identified as Māori, and non-drinkers.

Those satisfied with their lives, and those who live in urban areas were also more likely to support the policy.

#### Support for having fewer places selling alcohol in local communities



Base: New Zealand adults (n=4,480)

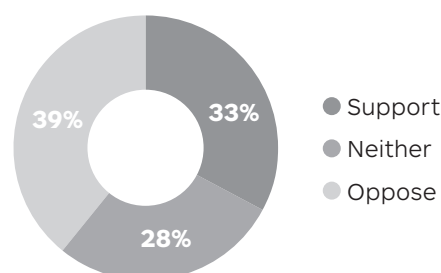
### Best buy #5: Raise prices on alcohol through excise taxes, and pricing policies

One in three (33%) respondents supported raising the minimum price of alcohol.

More likely to show support were women, those aged 25 years and older, and those who identified as Asian.

Non-drinkers, those with children<sup>9</sup> living in their household, those living in urban areas and in the most deprived areas were also more likely to support the policy.

#### Support for raising the minimum price of alcohol



Base: New Zealand adults (n=4,437)

## Implications

These findings show that New Zealand adults aged 18 years and over are generally supportive of the SAFER policy interventions for reducing alcohol harm in the country. Support was generally higher for policies addressing drink driving and alcohol advertising, sponsorship and promotion, and lower for price and availability policies.

These findings are consistent with national and international studies which find lower levels of support for policy interventions that could restrict the physical and economic availability of alcohol, such as increasing the price or reducing the availability of alcohol (Flaherty et al., 2010; Te Hiringa Hauora/Health Promotion Agency, 2019a; Tobin et al., 2011).

Women, those aged 25 years and over, and non-drinkers were consistently more likely to show support for the policies; findings also consistent with national and international studies (Dekker et al., 2020; Flaherty et al., 2010; Li et al., 2017; Te Hiringa Hauora/Health Promotion Agency, 2019a).

Support and acceptance of policy interventions depends on the public's knowledge and understanding of the expected outcomes and effectiveness of the policy. Strengthening public knowledge in the effectiveness of policies, such as media campaigns, may increase support for more restrictive

alcohol controls. In addition, increasing the public's awareness about the health harms of alcohol, such as using alcohol warning labels, may also increase the level of support for alcohol control policies.

## References

Dekker, M. R., Jones, A., Maulik, P. K., & Pettigrew, S. (2020). Public support for alcohol control initiatives across seven countries. *International Journal of Drug Policy*, 82, 102807. <https://doi.org/10.1016/j.drugpo.2020.102807>

Flaherty, B., Homel, P., & Hall, W. (2010). Public attitudes towards alcohol control policies. *Australian Journal of Public Health*, 15(4), 301–306. <https://doi.org/10.1111/j.1753-6405.1991.tb00351.x>

Li, J., Lovatt, M., Eadie, D., Dobbie, F., Meier, P., Holmes, J., Hastings, G., & MacKintosh, A. M. (2017). Public attitudes towards alcohol control policies in Scotland and England: Results from a mixed-methods study. *Social Science and Medicine*, 177, 177–189. <https://doi.org/10.1016/j.socscimed.2017.01.037>

Ministry of Health. (2018). *Health and Independence Report 2017. The Director-General of Health's Annual Report on the State of Public Health*. Wellington: Ministry of Health.

Ministry of Health. (2019). *Annual Data Explorer 2018/19: New Zealand Health Survey [Data File]*. <https://minhealthnz.shinyapps.io/nz-health-survey-2018-19-annual-data-explorer/>

Te Hiringa Hauora/Health Promotion Agency. (2019a). *Alcohol-related attitudes – Results from the 2018 Health and Lifestyles Survey*. <https://www.hpa.org.nz/research-library/research-publications/alcohol-related-attitudes-results-from-the-2018-health-and-lifestyles-survey>

Te Hiringa Hauora/Health Promotion Agency. (2019b). *Key facts about drinking in New Zealand: Infographic*. <https://www.hpa.org.nz/research-library/research-publications/key-facts-about-drinking-in-new-zealand-infographic>

Tobin, C., Moodie, A. R., & Livingstone, C. (2011). A review of public opinion towards alcohol controls in Australia. *BMC Public Health*, 11(1), 58. <https://doi.org/10.1186/1471-2458-11-58>

World Health Organization. (n.d.). *The SAFER initiative*. Retrieved from <https://www.who.int/initiatives/SAFER>

## Citation

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## Methodology

- The AUiNZ is a nationwide survey which uses a sequential multi-method approach that enables respondents to complete the survey either online or on paper. A full description of the 2019/20 AUiNZ survey methodology, questionnaire and further publications can be found at [hpa.org.nz/our-work/research/publications](https://hpa.org.nz/our-work/research/publications) or [kupe.hpa.org.nz](https://kupe.hpa.org.nz).
- The 2019/20 AUiNZ was conducted with a sample of 4,545 New Zealand adults, aged 18 years and over. The sample included 2,826 NZ European/Other, 1,285 Māori, 116 Pacific peoples, and 318 Asian (defined using prioritised ethnicity).
- The level of support was measured using the question: “There are a number of things that could be done to try and reduce problem drinking. To what extent would you support or oppose each of the following types of actions”.
- Response options were as follows: strongly oppose; oppose; neither oppose nor support; support; strongly support. ‘Strongly oppose’ and ‘oppose’ were combined to make the ‘oppose’ category, as was ‘strongly support’ and ‘support’ for the ‘support’ category.
- Results presented are proportions. Only significant differences ( $p < .05$ ) between groups were reported.
- ‘Don’t know’, ‘refused’, and missing responses were not included in the analysis.
- Generalised linear models were used for estimating adjusted risk ratios. Relative risk ratios were used to compare responses between groups.
- Adjustment variables for these analyses were as follows:
  - Gender: male, female, gender diverse.
  - Age: 18-24, 25-34, 35-44, 45-54, 55+.
  - Prioritised ethnicity, that is, each respondent is allocated to a single ethnic group, in the prioritised order of Māori, Pasifika, Asian, and NZ European/Other.

For more information,  
go to [hpa.org.nz/our-work/research](https://hpa.org.nz/our-work/research)  
or [kupe.hpa.org.nz](https://kupe.hpa.org.nz)