

**Waikato District Council – Local Alcohol Policy submissions from submitters
who wish to be heard**

Submission ID: 4708

Name: Double 9 Limited

Wish to speak to submission: Yes

What is your preferred option for the future of the Local Alcohol Policy?

No option selected

Do you have any other comments to make on the draft Local Alcohol Policy?

See full submission



Attachment: Yes

08 September 2022

To
The Corporate Planner
Waikato District Council

By Email: consult@waidc.govt.nz

Submission – Draft Local Alcohol Policy 2022

Submitter : Double 9 Limited T/a “The Bottle-O Pokeno”
Physical Address : 
Contact Person : 
Presenting in person : YES

Summary:

Double 9 Limited submits **THAT** it **opposes**:

- 1) Clause 5.6.1.i – Opposition on the inclusion proposed Clause 5.6.1.i “buy now, pay later” as an additional discretionary condition for off-licences in Waikato District.

Our opposition is to the **proposed wordings of the clause** and not its intent.

Double 9 Limited further submits **THAT**:

- 2) Clause 5.6.1.i be removed with a note to wait for further directions from MBIE on the issue of “Buy Now Pay Later”, and
- 3) A Definition be included for “Customer” as interpreted by Consumer Guarantees Act 1993

Detailed Submission:

As part of consultation for reviewing its Local Alcohol Policy, Waikato District Council undertook an early engagement process on the proposed draft. We submitted on the questions asked at the time.

The proposed clause 5.6.1.i was not included in the early engagement process. This clause is a later inclusion¹. The proposed clause currently reads as:

*“Licencees are **prohibited** from accepting 'buy now pay later' as a method of payment for the sale or supply of alcohol to **any customer** whether remotely or on premises, **regardless of whether** the 'buy now pay later' is executed through a third party or not. This condition does not apply to payments made by a standard bank credit card.”*

¹ [220801-p-r-open-agenda.pdf \(waikatodistrict.govt.nz\)](#) – Ref page 44 and 47 of the agenda

The above wordings of the clause are concerning. The draft policy does not identify or include a formal definition of terms/words:

- a) "Customer" or "Any Customer"
- b) "Buy now pay later"

To ensure we make an informed submission, clarifications were sought through our agents on the definitions of the above two terms from WDC.

WDC response is:

"As we have already commenced our formal consultation on the Local Alcohol Policy (LAP), we are unable to provide definitions for 'buy now pay later' and 'customer'. However, we welcome any comments, amendments or additions (including definitions) by way of submission on the LAP."

"The definitions were not included as part of the draft LAP so unfortunately, there aren't any official definitions."

Issues:

Issue 1 – Trade Disruption

Currently there are 153 licensed premises² within Waikato Region. Of these there are 64 on-licences, 46 club-licences and 43 off-licences.

Almost all of these licensed premises have trade agreements or supply arrangements either directly or indirectly through various suppliers. For a number of trade reasons, majority of them have inter-supply arrangements within the district from other licencees. E.g., A Bottle-Store would supply on wholesale basis to a club or an on-licensed premises. Typical examples include:

- 1) Golf-clubs
- 2) Restaurants
- 3) Corporate accounts
- 4) Sports clubs and bars
- 5) Trade accounts – A bigger trade entity supplying a smaller trader
- 6) Special Events – like charity events or annual events

The trade payment terms would normally be agreed as per standard industry practice which will be on some form of credit from the suppliers. i.e., Supplied Now and paid at a later date as per the industry practice. These arrangements will typically be known as "On-Account Customers". The arrangement may also include products which are on the basis of sale or return. The "On-Account Customer" will generally be GST registered entities.

The current wording of the clause is problematic as it does not distinguish between a standard day to day customer and a trade customer. In other terms a Business-to-Business (B2B) trade arrangements will be captured within the existing wordings of the clause.

² Refer – WDC Local Alcohol Policy Review Research Report – July 2022 – Page 7

The wordings of the clause appear to be unreasonable and will have unintended consequences including significant impact on the businesses caught by the wordings of the condition where there is not an issue identified.

There are some examples of the definition of customer / consumer which can form the basis for defining a customer for the purposes of this review of Local Alcohol Policy.

Under the Consumer Guarantees Act 1993³, Clause 2 (1),

consumer means a person who –

- (a) *acquires from a supplier goods or services of a kind ordinarily acquired for personal, domestic, or household use or consumption; and*
- (b) *does not acquire the goods or services, or hold himself or herself out as acquiring the goods or services, for the purpose of—*
 - (i) *resupplying them in trade; or*
 - (ii) *consuming them in the course of a process of production or manufacture; or*
 - (iii) *in the case of goods, repairing or treating in trade other goods or fixtures on land*

Trade customers / consumers are not included in the above interpretation.

It is assumed that WDC's intent to suggest exclusion of "buy now pay later" was aimed as "consumers" as defined above. If so

It is submitted **THAT**:

- 1) a definition of Customer on the above lines be included in the adopted Local Alcohol Policy which excludes Business to Business (B2B) entities.

Issue 2 – The intent of the clause

WDC by way of inclusion of this clause in its current form has made it clear of its intention to support the initiatives for reduction of alcohol harm in the district.

However, it appears the late inclusion of the clause is a spot reaction to the recent media attention brought to notice of a not so popular industry practice of accepting payments through various merchants offering "buy now pay later" services.

Again, the wordings do not identify the definition of "buy now pay later". The inclusion of words "regardless of whether the buy now pay later is executed through a third party or not" is ambiguous and presents a challenge on its own.

A typical "buy now pay later" type schemes will be characterized in a category where loan is offered to a customer at the point of sale by the services provider so they can make a purchase on credit but without a credit card. Soft credit checks may or may not be undertaken by these merchant service providers.

³ <https://www.legislation.govt.nz/act/public/1993/0091/24.0/DLM311058.html>

The WDC draft policy documents does not include any risks assessments or detailed data specifically attributed to the harm associated with such “Buy Now Pay Later” services offered through various merchant services.

Generally, there will be very few licensed outlets offering such “Buy Now Pay Later” services. There is no data available or included for the purpose of this consultation. It appears to be a response to a perceived issue without any evidence of the nature, scale or impact of the issue.

We are also aware the discussions are currently underway within the MBIE for this particular issue.

By inclusion of such clause without a detailed assessments and with missing interpretations and definitions, WDC runs the risk of adopting something which may be contradicting to a future overarching rule / law within the specified/relevant Acts or regulations.

Inclusion of “Buy Now Pay Later” can be included as advise note on for the licencees that its Waikato DLC’s view that such services encourage abuse of alcohol and provision of such merchant services by licencees is discouraged.

It is submitted **THAT:**

- 2) WDC holds the inclusion of “buy now pay later” clause and wait for further directions from the MBIE on this issue.

Further suggestions:

- 1.) Clause 5.2.2 – Cap on Bottle-Stores off-licencees only

We submit that the cap limits be extended to all new off-licencees. The proposed restriction on new off-licencees for bottle stores only is discriminating.

When assessing the effects or number of off-licencees within the catchments, supermarkets or pubs and bars are included in the data⁴. However, the proposed wordings suggest that it alright to have any number of off-licencees (other than a bottle Store) within close proximity to other licensed premises as far as elements of clause 5.2.1 of draft LAP are met.

Conclusion:

For the reasons explained above, our submission for the purpose of this Draft LAP is **THAT:**

- 1) **Clause 5.6.1.i be removed with a note to wait for further directions from MBIE on the issue of “Buy Now Pay Later”, and**
- 2) **Definition be included for “Customer” as interpreted by Consumer Guarantees Act 1993**

Sincerely

For Double 9 Limited

⁴ Refer – WDC Local Alcohol Policy Review Research Report – July 2022 – Page 7

Submission ID: 4715

Name: SVVAPP Holdings Limited

Wish to speak to submission: Yes

What is your preferred option for the future of the Local Alcohol Policy?

No option selected

Do you have any other comments to make on the draft Local Alcohol Policy?

See full submission

Attachment: Yes



08 September 2022

To
The Corporate Planner
Waikato District Council

By Email: consult@waidc.govt.nz

Submission – Draft Local Alcohol Policy 2022

Submitter : SVVAPP Holdings Limited T/a “The Bottle-O Tuakau”
Physical Address : [REDACTED]
Contact Person : [REDACTED]
Presenting in person : YES

Summary:

SVVAPP Holdings Limited submits **THAT** it **opposes**:

- 1) Clause 5.6.1.i – Opposition on the inclusion proposed Clause 5.6.1.i “buy now, pay later” as an additional discretionary condition for off-licences in Waikato District.

Our opposition is to the **proposed wordings of the clause** and not its intent.

SVVAPP Holdings Limited further submits **THAT**:

- 2) Clause 5.6.1.i be removed with a note to wait for further directions from MBIE on the issue of “Buy Now Pay Later”, and
- 3) A Definition be included for “Customer” as interpreted by Consumer Guarantees Act 1993

Detailed Submission:

As part of consultation for reviewing its Local Alcohol Policy, Waikato District Council undertook an early engagement process on the proposed draft. We submitted on the questions asked at the time.

The proposed clause 5.6.1.i was not included in the early engagement process. This clause is a later inclusion¹. The proposed clause currently reads as:

*“Licencees are **prohibited** from accepting 'buy now pay later' as a method of payment for the sale or supply of alcohol to **any customer** whether remotely or on premises, **regardless of whether** the 'buy now pay later' is executed through a third party or not. This condition does not apply to payments made by a standard bank credit card.”*

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The above wordings of the clause are concerning. The draft policy does not identify or include a formal definition of terms/words:

- a) “Customer” or “Any Customer”
- b) “Buy now pay later”

To ensure we make an informed submission, clarifications were sought through our agents on the definitions of the above two terms from WDC.

WDC response is:

“As we have already commenced our formal consultation on the Local Alcohol Policy (LAP), we are unable to provide definitions for ‘buy now pay later’ and ‘customer’. However, we welcome any comments, amendments or additions (including definitions) by way of submission on the LAP.”

“The definitions were not included as part of the draft LAP so unfortunately, there aren’t any official definitions.”

Issues:

Issue 1 – Trade Disruption

Currently there are 153 licensed premises² within Waikato Region. Of these there are 64 on-licences, 46 club-licences and 43 off-licences.

Almost all of these licensed premises have trade agreements or supply arrangements either directly or indirectly through various suppliers. For a number of trade reasons, majority of them have inter-supply arrangements within the district from other licencees. E.g., A Bottle-Store would supply on wholesale basis to a club or an on-licensed premises. Typical examples include:

- 1) Golf-clubs
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The trade payment terms would normally be agreed as per standard industry practice which will be on some form of credit from the suppliers. i.e., Supplied Now and paid at a later date as per the industry practice. These arrangements will typically be known as “On-Account Customers”. The arrangement may also include products which are on the basis of sale or return. The “On-Account Customer” will generally be GST registered entities.

The current wording of the clause is problematic as it does not distinguish between a standard day to day customer and a trade customer. In other terms a Business-to-Business (B2B) trade arrangements will be captured within the existing wordings of the clause.

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- (a) *acquires from a supplier goods or services of a kind ordinarily acquired for personal, domestic, or household use or consumption; and*
- (b) *does not acquire the goods or services, or hold himself or herself out as acquiring the goods or services, for the purpose of—*
 - (i) *resupplying them in trade; or*
 - (ii) *consuming them in the course of a process of production or manufacture; or*
 - (iii) *in the case of goods, repairing or treating in trade other goods or fixtures on land*

Trade customers / consumers are not included in the above interpretation.

It is assumed that WDC's intent to suggest exclusion of "buy now pay later" was aimed as "consumers" as defined above. If so

It is submitted **THAT**:

- 1) a definition of Customer on the above lines be included in the adopted Local Alcohol Policy which excludes Business to Business (B2B) entities.

Issue 2 – The intent of the clause

WDC by way of inclusion of this clause in its current form has made it clear of its intention to support the initiatives for reduction of alcohol harm in the district.

However, it appears the late inclusion of the clause is a spot reaction to the recent media attention brought to notice of a not so popular industry practice of accepting payments through various merchants offering "buy now pay later" services.

Again, the wordings do not identify the definition of "buy now pay later". The inclusion of words "*regardless of whether the buy now pay later is executed through a third party or not*" is ambiguous and presents a challenge on its own.

A typical "buy now pay later" type schemes will be characterized in a category where loan is offered to a customer at the point of sale by the services provider so they can make a purchase on credit but without a credit card. Soft credit checks may or may not be undertaken by these merchant service providers.

³ <https://www.legislation.govt.nz/act/public/1993/0091/24.0/DLM311058.html>



The WDC draft policy documents does not include any risks assessments or detailed data specifically attributed to the harm associated with such “Buy Now Pay Later” services offered through various merchant services.

Generally, there will be very few licensed outlets offering such “Buy Now Pay Later” services. There is no data available or included for the purpose of this consultation. It appears to be a response to a perceived issue without any evidence of the nature, scale or impact of the issue.

We are also aware the discussions are currently underway within the MBIE for this particular issue.

By inclusion of such clause without a detailed assessments and with missing interpretations and definitions, WDC runs the risk of adopting something which may be contradicting to a future overarching rule / law within the specified/relevant Acts or regulations.

Inclusion of “Buy Now Pay Later” can be included as advise note on for the licencees that its Waikato DLC’s view that such services encourage abuse of alcohol and provision of such merchant services by licencees is discouraged.

It is submitted **THAT:**

- 2) WDC holds the inclusion of “buy now pay later” clause and wait for further directions from the MBIE on this issue.

Further suggestions:

- 1.) Clause 5.2.2 – Cap on Bottle-Stores off-licencees only

We submit that the cap limits be extended to all new off-licencees. The proposed restriction on new off-licencees for bottle stores only is discriminating.

When assessing the effects or number of off-licencees within the catchments, supermarkets or pubs and bars are included in the data⁴. However, the proposed wordings suggest that it alright to have any number of off-licencees (other than a bottle Store) within close proximity to other licensed premises as far as elements of clause 5.2.1 of draft LAP are met.

Conclusion:

For the reasons explained above, our submission for the purpose of this Draft LAP is **THAT:**

- 1) **Clause 5.6.1.i be removed with a note to wait for further directions from MBIE on the issue of “Buy Now Pay Later”, and**
- 2) **Definition be included for “Customer” as interpreted by Consumer Guarantees Act 1993**

Sincerely

For SVVAPP Holdings Limited



⁴ Refer – WDC Local Alcohol Policy Review Research Report – July 2022 – Page 7

Submission ID: 4703

Name: Greg Hoar, Super Liquor Holdings

Wish to speak to submission: Yes

What is your preferred option for the future of the Local Alcohol Policy?

Option 1

Do you have any other comments to make on the draft Local Alcohol Policy?

See full submission

Attachment: Yes

2022 Waikato District Council Draft LAP Submissions

The Waikato District Council submission form to its draft Local Policy includes the question, do you have any other comments to make on the draft Local Alcohol Policy?

Super Liquor Holding makes the following submission

Super Liquor Background

Super Liquor is a New Zealand franchisor with over 175 stores across New Zealand, from Kaitia in the North to Invercargill in the South. Each store is a locally operated business which has entered into a franchise agreement with Super Liquor. Each franchisee receives the benefits of, and honours the obligations of participating in, the Super Liquor branded system. The Super Liquor franchisee offer is based on creating a long-term sustainable retail business.

Super Liquor franchisees represent a broad spectrum of small and medium sized businesses that are positioned in both urban and rural locations. Franchisees pride themselves on being part of the communities they serve, supporting local businesses, charities, and sports clubs. Super Liquor has a co-operative group culture.

As a business, Super Liquor supports Option 1, where the Council retains the current Local Alcohol Policy. However, if the Council chooses Option 2, where the draft Local Alcohol Policy is adopted, then Super Liquor would like to submit the following submission to ensure that the LAP introduced, is introduced on a level playing field.

For ease of reference, Super Liquor refers to the paragraph numbers used in the Waikato District Council document named 'Draft Local Alcohol Policy – tracked changes version'.

3 Definitions – new licence

Super Liquor Holdings (SLH) supports the 'new licence' definition. This being, "A premise that has not been subject to a licence (with the exception of Special Licences) for more than 12 months prior to the filing of an application. Note: a licensed premises that changes ownership but continues to hold a licence is not considered to be a new licensed premises. A change of licence type is considered an application for a new licence".

5 Off-Licence Policies

5.2.2 Restriction on bottle stores

SLH opposes the provision in the draft LAP to differentiate between bottle stores and other off premise licenses such as grocery stores and supermarkets in respect to a suggested cap. SLH supports an open and competitive market. All off-licensed premises should be treated equally. A supermarket should not be given a commercial advantage in terms of location. The policy needs to reflect a fair playing field for all off licence holders. To differentiate between supermarkets and other retail operators (such as bottle stores), would further consolidate supermarkets perceived duopoly retail power and serve to further perpetuate their competitive advantage over other retailers. If a Supermarket is allowed a liquor licence, then so should a bottle store.

Alcohol related harm stems from alcohol, not specific types of alcohol. There is no evidence that SLH can find to demonstrate the sale, supply and consumption of alcohol will be undertaken any more safely and responsibly by differentiating between supermarkets, grocery stores, and bottle stores.

Nor is there any evidence that demonstrates the harm caused by inappropriate consumption is minimised by licence type differentiation. Yet the proposed policy promotes differentiation between types of licence holder. SLH believes that each application should be judged on its merits and not governed by an overriding provision.

SLH also disagrees with the 1km distance criteria and submits that the towns in the Waikato District are growing in population. The district based on population per off licence, is not overrepresented by off licenses. The research report comments on this point on page 7. Specifically, “There **has not been** a dramatic increase in the number of licensed premises since the LAP was developed. In September 2014 there was a total of 141 permanent licences comprising 50 on-licences, 40 off-licences and 51 club licences.” We believe it would be wrong for the Council to impose such a condition, particularly as Te Kauwhata and Tamahere currently do not have a standalone bottle store.

Using the councils report the following table highlights the ratio of off licenses per population:

Township	Population	# off licences	Total # of standalone bottle stores	Population per standalone bottle store
Pokeno	4550	3	2	2275
Tuakau	6478	5	2	3239
Te Kauwhata	3145	2	0	0
Huntly	9307	6	3	3102
Ngaruawahia	8760	6	2	4230
Raglan	4376	7	2	2188
Tamahere	6512	2	0	0

5.3 Location of off-licence premises by reference to proximity to facilities of a particular kind(s)

SLH submits in a similar vein to its submission under 5.2.2 in relation to the differentiation between bottle stores, grocery stores and supermarkets. Alcohol is alcohol and that off licence policies need to be consistent between the different types of retail outlets. Exposure to alcohol in supermarkets and grocery stores is higher for young people as they are allowed, as of right, to enter supermarkets on their own without a parent or legal guardian. However, minors are not allowed into a bottle store as of right. Bottle stores that have specified areas, limiting exposure to alcohol to those people that are not legal drinking age. These being:

1. Restricted area:

(a) means an area that is designated (under section 119 or a corresponding provision of a former licensing Act) as an area to which minors must not be admitted; and

2. Supervised area:

(a) means an area that is designated (under section 119 or a corresponding provision of a former licensing Act) as an area to which minors must not be admitted unless accompanied by a parent or guardian;

SLH submits that consistent application of policy to the three types of off licenses described will ensure a level playing field between these retail outlets and a consistent application of control and compliance.

5.4.1 Further issuing of standalone bottle store off-licences in the district

5.4.1 There is a presumption against the issuing of new off-licences for standalone bottle stores in Tuakau, Te Kauwhata, Huntly, Ngaruawahia and Raglan as well as other district localities where the deprivation level is 7 or higher unless it is demonstrated to the DLC that a new standalone bottle store would not result in significant adverse effects including: (i) the amenity and good order of the locality being reduced to more than a minor extent and ii) any other potential adverse effect which may give rise to alcohol-related harm.

SLH opposes this condition for the same reasons as above, these being a level playing field and that the effects of alcohol from supermarkets, grocery stores and bottle stores associated with a hotel or tavern are the same. SLH submits that the term “significant adverse effects” needs to be clearly defined. It may be interpreted in a range of different ways by applicants, objectors, agencies and the DLC. A definition would assist in clarifying.

Using the councils report the following is the ratio of off licenses per population. We note that there are currently no stand alone bottle stores in Te Kauwhata or Tamahere.

Township	Population	# off licences	Total # of standalone bottle stores	Population per standalone bottle store
Pokeno	4550	3	2	2275
Tuakau	6478	5	2	3239
Te Kauwhata	3145	2	0	0
Huntly	9307	6	3	3102
Ngaruawahia	8760	6	2	4230
Raglan	4376	7	2	2188
Tamahere	6512	2	0	0

5.4.2 For the purposes of clause 5.4.1, a bottle store associated with a hotel or tavern is not a standalone bottle store.

SLH submits that these types of off licenses need to be treated the same as supermarkets, grocery stores and bottle stores.. A level playing field and effects need to be consistently applied and managed.

5.6 Discretionary conditions of off-licences

SLH agrees with the majority of the proposed discretionary conditions for off-licences proposed in the draft LAP, with the exception of the following:

(c) “Kinds of products to be sold” - SLH is concerned that this condition may be applied to some licensees and not others, resulting in an unfair playing field. We believe that if a product is not appropriate for sale and consumption, then it should be applied universally at one point in time, and not by a licence by licence approach.

Buy Now, Pay Later

(i) Licensees are prohibited from accepting 'buy now pay later' as a method of payment for the sale or supply of alcohol to any customer whether remotely or on premises, regardless of whether the 'buy now pay later' is executed through a third party or not

SLH does agree that the **formal 'Buy Now, Pay Later schemes** (such as LayBuy or AfterPay) should not be used as a method of payment to buy alcohol, however *definition of 'buy now, pay later' needs to be clearly defined to avoid confusion of the use of credit cards or customers purchasing on an account basis. Currently, customers, sole traders and companies can be sold products on an account from time to time. These customers may be local business or individuals that may purchase product on a return basis (e.g. Weddings, Function Centres, Funerals, Corporate functions, Real Estate Agents etc) who may be also be affected by this policy. We request that this definition is clearly defined to include **formal 'Buy Now, Pay Later' schemes only.***

5.7.1 Remote sales

The first part of the policy to verify that the buyer and receiver of a delivery is not under 18 years of age repeats section 59 (subsection 3) of the SSAA. SLH submits that the second part, delivering to a received that is not intoxicated is unreasonable. For example, Courier drivers are not trained in intoxication and should not be subject to a requirement to do so.

I request to present Super Liquors submission to Council by myself at the hearing on 28 September 2022.

Thank you.

Yours sincerely



Greg Hoar
National Operations Manager
Super Liquor Holdings Ltd

Submission ID: 4705

Name: [REDACTED]

Wish to speak to submission: Yes

What is your preferred option for the future of the Local Alcohol Policy?

Option 3

Do you have any other comments to make on the draft Local Alcohol Policy?

I support the submission drafted by the local community board.

Attachment: No

Name: [REDACTED] **Submission ID:** 4695

Wish to speak to submission: Yes

What is your preferred option for the future of the Local Alcohol Policy?

Option 3

Do you have any other comments to make on the draft Local Alcohol Policy?

The first objective of the LAP as stated in 2.1 of the policy is to: Reflect the views of local communities as to the appropriate location, number, hours and conditions that should be applied to licensed premises within their communities: This objective is not achieved by the restriction of maximum trading hours for on-licensed venues as outlined in 4.5 of the policy:

- i. Monday to Sunday: 7.00am to 1.00am the following day.
- ii. New Year's Eve: 7.00am to 2.00am the following day.

Raglan is a destination tourist location for people from around the world and New Zealand and the 1am closing time for on-licensed venues is not reflective of Raglan's unique position in the Waikato as a world-renowned tourist destination. Post Covid the entertainment industry has been struggling to get back on its feet and the restrictive opening hours provide a very limited window to operate. In general most people will go out to watch a band or dance to a Dj after dinner and as times have changed so evening meal times have become later, typically finishing dinner around 9pm and heading out for entertainment around 10pm. This leaves a very short window of 3 hours to operate an entertainment venue, which in turn reduces the calibre of artist that venues and promoters can afford to book, and has led some promoters to skip Raglan from their touring schedule, thus in turn having a negative impact on the economic prosperity of the entire community

Other negative effects of the 1am closing time that impact the wider community, is the effective dumping out onto the streets of a venue full of people, energized and not ready to stop enjoying themselves at 1am. This has led to the creation of an 'after party' culture where groups of people go back to someone's house in a suburban area, away from the controlled environment of the venue, creating a disturbance to the surrounding neighbourhood.

The 1am closing time also contributes to an increased risk of confrontations between individuals and groups of people, when the whole venue is emptied out onto the street en masse at 1am. Raglan has experienced first-hand massive bloody street brawls that could have been avoided had the venue not

been forced to push everyone out of the venue and onto the street at 1am. There is plenty of widely available evidence that later closing times for controlled on-licensed venues allows people to depart from the venue across a wider range of varying times, reducing confrontations, and allowing security staff to manage any issues that may occur in a more controlled manner.

There has been no attempt by Council to consult with the community about the appropriate hours or conditions for on licensed premises to operate in this review, or in the initial forming of the LAP in 2013. Council's consultation has focused solely on bottle stores and off license premises, completely ignoring the needs and desire of the community for night time entertainment, which is a vital part of creating healthy, vibrant and connected communities. Despite the Raglan Community Board making a submission in the early engagement of this review, specifically asking Council to consider reviewing opening hours for on-license venues, Council has completely ignored this suggestion from the Raglan Community Board in the creation of the draft Local Alcohol Policy. In this instance Council has not met its obligations under the special consultative procedure in the Local Government Act 2002.

There is no obvious reason or need to serve alcohol at 7am, so one possible solution would be to amend 4.5 of the draft policy to:

- i. Monday to Sunday: 9.00am to 3.00am the following day.
- ii. New Year's Eve: 9.00am to 4.00am the following day. This would not increase the number of hours alcohol is served but merely shift the times to better reflect the times we live in and the view of the local community as to the appropriate hours and conditions that should be applied to licensed premises within their communities.

Attachment: No

Submission ID: 4572

Name: [REDACTED]

Wish to speak to submission: Yes

What is your preferred option for the future of the Local Alcohol Policy?

Option 3

Do you have any other comments to make on the draft Local Alcohol Policy?

It's a terrible way to let existing shops control the alcohol market.

- Alcohol store/stores may close down.
- Increased risk of people traveling to other regions while intoxicated.
- Existing stores may not be able to handle demand.

Attachment: No

Submission ID: 4710

Name: General Distributors Limited ('GDL')

Wish to speak to submission: Yes

What is your preferred option for the future of the Local Alcohol Policy?

No option selected

Do you have any other comments to make on the draft Local Alcohol Policy?

See full submission

Attachment: Yes

SUBMISSION ON THE WAIKATO DRAFT LOCAL ALCOHOL POLICY

To: Waikato District Council ("**Council**")

Submitter: General Distributors Limited ("**GDL**")

Summary

1. GDL welcomes the opportunity to submit on the Waikato Draft Local Alcohol Policy ("**Draft LAP**"). As an off-licence holder in the Waikato District, GDL has an interest in the matters raised in the Draft LAP.
2. GDL supports the objectives of minimising alcohol-related harm in the district and the use of local alcohol policies as a tool in ensuring safe consumption of alcohol.
3. GDL generally supports the Draft LAP and in particular the introduction of a discretionary condition to prohibit off-licence holders from offering "buy now pay later" schemes. In relation to remote sales, GDL is concerned the proposed policy in relation to age verification and assessment of intoxication is unworkable and needs to be amended so that it is a discretionary condition, drafted in a manner consistent with remote sales conditions approved by the Alcohol Regulatory and Licensing Authority.
4. GDL wishes to be heard in relation to this submission.

GDL as an off-licence holder

5. GDL is a wholly owned subsidiary of Woolworths and is responsible for operating Countdown stores nationwide. GDL owns and operates 190 supermarkets under the Countdown and Metro banners, and 4 "eStores" across New Zealand. Another subsidiary of Woolworths, Wholesale Distributors Limited, is the franchisor for over 70 SuperValue and FreshChoice supermarkets, which are locally owned and operated businesses
6. GDL has been part of New Zealand communities for more than 90 years. GDL's purpose across its business is to make Kiwis' lives a little better every day. GDL is committed to contribute positively to New Zealand communities, and their team of more than 20,000 people work hard to deliver safe, fresh and affordable groceries to New Zealanders.
7. As a holder of over 175 off-licences in New Zealand, GDL is an experienced licence holder and is committed to being a responsible retailer of alcohol. GDL acknowledges that it has a shared responsibility to prevent alcohol-related harm and ensure that consumption of alcohol is undertaken safely and responsibly.
8. In the Waikato district, GDL holds two off-licences for Countdown Pokeno and Countdown Huntly.

Buy now pay later – Policy 5.6.1(i)

9. An LAP can include policies on discretionary conditions¹ but cannot fetter a District Licensing Committee's ("**Committee**") discretion with respect to conditions when issuing licences.² Before imposing any such conditions, the Committee must be satisfied the condition is reasonable and not inconsistent with the Act.³
10. Draft Policy 5.6.1(i) in the Draft LAP introduces a new discretionary condition prohibiting licensees from offering "buy now pay later" schemes for the sale of alcohol:⁴

Licensees are prohibited from accepting 'buy now pay later' as a method of payment for the sale or supply of alcohol to any customer whether remotely or on premises, regardless of whether the 'buy now pay later' is executed through a third party or not. This condition does not apply to payments made by a standard bank credit card.

11. GDL supports this policy, which may be imposed as a discretionary condition on a case by case basis (as required). In the alcohol context, "buy now pay later" schemes have the potential to increase consumption of alcohol and in turn, increase alcohol-related harm in our communities. As a responsible retailer of alcohol, GDL does not offer "buy now pay later" scheme for any of its products and does not consider it appropriate to offer these payment schemes for alcohol products.

Remote sale of alcohol

Remote sale of alcohol hours – Policy 5.5.2

12. The Draft LAP proposes to introduce a new policy with maximum trading hours for the remote sale of alcohol as follows:

5.5.2 For remote sellers, alcohol may be sold remotely at any time on any day, but alcohol must not be delivered on Christmas Day, Good Friday, before 1pm on Anzac Day or between 11:00pm 6:00am the following day.

13. GDL supports the proposed policy as it reflects the off-licence hours for remote sales as provided for in the Act.⁵

Steps to verify age and assess intoxication – Policy 5.7.1

14. The Draft LAP proposes to introduce the following specific policy in relation to remote sales:⁶

5.7.1 The licensee must take reasonable steps to verify that the buyer and the receiver of an alcohol delivery is not under 18 years of age, and that the receiver is not intoxicated.

15. GDL endorses licensees taking measures to ensure that when alcohol is sold remotely, it is done so in a responsible and safe manner. GDL is an experienced remote seller and has a range of measures in place to ensure alcohol is sold responsibly including age verification processes and

¹ Act, section 77(1)(f).

² *Auckland Council v Woolworths NZ Ltd & Others* [2021] NZCA 484 at [125].

³ Act, section 117.

⁴ Draft LAP, policy 5.6.1(i).

⁵ Act, sections 48 and 49.

⁶ Draft LAP, policy 5.7.1

alert systems to advise delivery drivers when an order contains alcohol. Our internal policy is also that we will not deliver alcohol products to a customer's home after 8pm.

16. The way in which GDL's operates means that alcohol is primarily purchased as part of a customer's grocery shop. For online orders alcohol is present in approximately 8% of orders.
17. While GDL understands the desire to ensure the responsible remote sale of alcohol, it is concerned there is no evidence provided in the Local Alcohol Policy Review Research Report (or any of the consultation material released with the Draft LAP) to suggest remote sales are an issue in the Waikato district or that this proposed policy (relating to age verification and assessment of intoxication) is necessary to address any alleged issues relating to remote sales.⁷
18. Further, the proposed policy is onerous, unworkable and would add significant cost. As currently drafted, the policy would require a delivery driver to return the alcohol to the store if an address is unattended as the driver would be unable to verify age or assess intoxication. This would significantly impact the efficiency of the delivery process, particularly given for Countdown as this would mean the driver would have to either re-deliver the entire order at another time or only deliver the items that are not alcohol. This is unworkable for us, our drivers and our customers.
19. Under the Act it is not illegal to deliver alcohol to an unattended address, but this policy prevents GDL from doing so if no "receiver" is present. The Act also does not require age to be verified on delivery, but rather when the contract for sale is entered into. For GDL, this requirement is achieved by a customer verifying when they create an online account that they are 18 years of age and again on the website (via a tick box system) before the sale is completed that they (and any receiver) are 18 years of age or older. GDL considers the policy needs to be amended so that intoxication is only required to be assessed if the receiver is present, consistent with remote sales conditions approved by the Alcohol Regulatory and Licensing Authority (a copy of the decision is enclosed with this submission).
20. Further, GDL considers this proposed standalone remote sales policy is outside the scope the matters that can be included in an LAP⁸ and is most appropriately included as a discretionary condition that the Committee may consider imposing on an off-licence.
21. GDL seeks that Policy 5.7 be included as a discretionary condition in Policy 5.6 and amended to reflect remote sales conditions approved (shown in blue strikethrough and underline):

~~5.7~~ **Specific policies relating to remote sales**

- ~~5.7.4 j.~~ The licensee must take reasonable steps to verify that the buyer and the receiver of an alcohol delivery is not under 18 years of age, and that the receiver (where present) is not intoxicated.

Restrictions on the number of off-licences

22. The Draft LAP proposes a restriction on the number of standalone bottle stores in the Waikato district. In the original LAP, policy 5.5.3 clarifies this restriction does not limit the number of other types of off-licence premises or restrict the issue of new licences. The Draft LAP proposes to delete this policy.

⁷ Local Alcohol Policy Review Research Report, July 2022.

⁸ Act, section 77.

23. GDL considers this a helpful clarification. Without any guidance provided by Council as to the reason behind the deletion, GDL considers the policy should be included in the Draft LAP for clarity and the avoidance of doubt as follows:

Other off-licences

- 5.5.3 Except for standalone bottle store off-licences as provided in clause 5.5.1, this policy does not limit the number of other types of off- licence premises in the Waikato district or restrict the issue of new licences, provided the other policy criteria are met.

Signature: **GENERAL DISTRIBUTORS LIMITED**



Paul Radich

National Alcohol Responsibility Manager

Date: 9 September 2022

Address for Service: Paul Radich
paul.radich@countdown.co.nz

Submission ID: 4714

Name: Nathan Cowie, Alcohol Healthwatch

Wish to speak to submission: Yes

What is your preferred option for the future of the Local Alcohol Policy?

Option 2

Do you have any other comments to make on the draft Local Alcohol Policy?

See full submission

Attachment: Yes



Submission on the Waikato District Council Draft Local Alcohol Policy

9 September 2022

Alcohol Healthwatch is an independent charitable trust working to reduce alcohol-related harm. We are contracted by the Ministry of Health to provide a range of regional and national health promotion services. These include: providing evidence-based information and advice on policy and planning matters; coordinating networks and projects to address alcohol-related harms, such as alcohol-related injury and fetal alcohol spectrum disorder; and coordinating or otherwise supporting community action projects.

Thank you for the opportunity to provide feedback on the Waikato District Council Draft Local Alcohol Policy.

We would like the opportunity to speak to our submission.

If you have any questions on the comments we have included in our submission, please contact:

Dr Nicki Jackson
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Alcohol Healthwatch
P.O. Box 99407, Newmarket, Auckland 1149
P: (09) 520 7039
E: director@ahw.org.nz

Summary of recommendations

- Alcohol Healthwatch **endorses** Option 2 – Council Adopts the draft Local Alcohol Policy (LAP).
- Alcohol Healthwatch supports the proposed LAP for its control on the location of new on-licences, the protection provided by on-licence trading hours across the district, and the strong controls on the location of new off-licences. Further amendments to the LAP, as outlined below, may be useful for meaningfully and equitably minimising alcohol harm in the district.

On-licence provisions

- Alcohol Healthwatch **does not support** the on-licence opening hour of 7am.
- Alcohol Healthwatch **supports** an off-licence closing hour of 1am – we **recommend** on-licence trading hours of **8am-1am** (within the national maximum trading hours).
- Alcohol Healthwatch **supports** the discretionary conditions for on-licences, but **recommend** additional conditions in our full submission to minimise harm.

Off-licence provisions

- Alcohol Healthwatch **supports** giving District Licensing Committees (DLCs) and the Alcohol Regulatory and Licensing Authority (ARLA) direction to have regards to the proximity of other licences when new off-licence premises are being proposed, where this is considered relevant
- Alcohol Healthwatch **supports** restricting new bottle store off-licences being granted, within one kilometre of any existing bottle store off-licence or licensed supermarket or grocery store
- Whilst Alcohol Healthwatch **supports** no new bottle store off-licence application being issued for any premises located within 100 metres of any school, early childcare facility, library, place of worship, or public park, we **do not support** that exceptions regarding demonstrating no significant impact. We would prefer that the policy had a blanket protection for sensitive sites located within 100m of a proposed outlet. We further recommend adding Marae and alcohol and other drug addiction treatment centres to the existing list of sensitive sites.
- Alcohol Healthwatch **recommends** a cap on the maximum number of bottle store off-licences permitted in Tuakau, Te Kauwhata, Huntly, Ngaruawahia, and Raglan. This would be **preferable** to a presumption that an off-licence will not be issued where the good order of the locality would likely be reduced. For localities where the deprivation level is 7 or higher, we propose stating that no further licences will be granted if it exceeds the number at the time of policy adoption.
- Alcohol Healthwatch **recommends** that the restrictions to the issue of further off-licences also apply to tavern off-licences.
- Alcohol Healthwatch **does not support** the proposed off-licence closing hour of 10pm. We **recommend** 9pm.
- Alcohol Healthwatch **does not support** the proposed off-licence opening hour of 7am. We **recommend** 10am.
- Alcohol Healthwatch **supports** the discretionary conditions relating to off-licences but **recommend** additional criteria in our full submission in relation to single sales, and price.
- Alcohol Healthwatch **recommends** measures are put in place to ensure that Council is aware of all premises in the district selling alcohol online, to allow effective monitoring and compliance activities.

Club licence provisions

- Alcohol Healthwatch **recommends** maximum trading hours of 9am to **1am** the following day for club licences. We note the present typo in the draft policy which states 1pm the following day.
- Alcohol Healthwatch **supports** the discretionary conditions for club licences.

Special licence provisions

- Alcohol Healthwatch **recommends** the LAP specify maximum trading hours for special licences, preferably not exceeding 8am to 4am the following day.
- Alcohol Healthwatch **supports** the inclusion of guideline maximum trading hours, but **recommend** these hours be 8am to 1am the following day.
- Alcohol Healthwatch **supports** the discretionary conditions for special licences.
- Alcohol Healthwatch **recommends** a discretionary condition for events with over 1000 attendees (or as otherwise considered appropriate) that requires an Event Alcohol Risk Management Plan.
- Alcohol Healthwatch **recommends** the LAP include provisions that protect children in the region, by not allowing special licences to be granted for child-focussed events.

Introduction

1. Firstly, Alcohol Healthwatch commends the Waikato District Council on their commitment to review their Local Alcohol Policy (LAP).
2. We wish to acknowledge the efforts of the policy team, Council members and stakeholders in reviewing the LAP on behalf of their community. We further acknowledge the provision of data from health authorities and the Police, in the presence of competing commitments resulting from the global pandemic.
3. We strongly believe that a LAP is a package of measures which, when used comprehensively, can significantly minimise rates of hazardous drinking and subsequent alcohol-related harm. For this reason, we recommend that the LAP is considered not just as a collection of isolated elements but as a cohesive package to reduce alcohol-related harm, insofar as can be achieved with measures relating to licensing.
4. A LAP which has the effect of reducing the overall availability of alcohol has significant potential to further minimise alcohol-related harm and improve community well-being. Measures that reduce accessibility and availability of alcohol have particular benefits for those who experience significant inequities in harm (i.e. Māori and those socio-economically disadvantaged). To date, alcohol outlets in New Zealand have been inequitably distributed to the most deprived neighbourhoods and the unequal harms from this must be addressed.
5. By incorporating evidence-based measures to address both the physical and temporal availability of alcohol, a LAP can support other harm reduction interventions in the local area and assist in sending a strong signal to communities regarding the harms associated with alcohol use.
6. The content of a LAP must be determined on its ability to contribute to achieving the object (section 4) of the Sale and Supply of Alcohol Act 2012,¹ that being:
 - (a) *The sale, supply, and consumption of alcohol should be undertaken safely and responsibly; and*
 - (b) *The harm caused by the excessive or inappropriate consumption of alcohol should be minimised.*

For the purposes of subsection (1), the harm caused by the excessive or inappropriate consumption of alcohol includes—

 - (a) *any crime, damage, death, disease, disorderly behaviour, illness, or injury, directly or indirectly caused, or directly or indirectly contributed to, by the excessive or inappropriate consumption of alcohol; and*
 - (b) *any harm to society generally or the community, directly or indirectly caused, or directly or indirectly contributed to, by any crime, damage, death, disease, disorderly behaviour, illness, or injury of a kind described in paragraph (a).*
7. Therefore, a LAP must seek to do two things: Firstly, it needs to **minimise** alcohol-related harm across the Waikato District. Secondly, it needs to **prevent** further alcohol-related harm from happening (where able). Given alcohol is, by far, the most harmful of all drugs available in society,^{2,3} residents deserve the strongest protections available from its range of harms.
8. We note that a recent study published found no significant changes in crime following the adoption of local alcohol policies in New Zealand.⁴ The authors note that the failure to identify significant reductions in crime may partly reflect the lack of meaningful reductions

in trading hours, as many Territorial Authorities explicitly acknowledged that their LAP trading hours reflected actual trading hours at the time of policy adoption. This meant that, in many Territorial Authorities, the majority of on-licences were unaffected by the adopted trading hours in the LAP.

9. Local Government has a mandated role to promote the social, economic, environmental, and cultural well-being of their communities. Inequities in harm from alcohol will significantly reduce wellbeing for current and future generations, and must be urgently addressed. In particular, the council must consider the burden of alcohol-related harm on Māori. Māori are significantly more likely to drink hazardously than non-Māori,⁵ and experience higher levels of both acute and chronic health harm from alcohol.^{6,7} Research on premature deaths and disability attributable to alcohol has shown that alcohol-related mortality in Māori was double that of non-Māori in 2007.⁸ This is especially relevant to the Waikato District, which has a higher proportion of Māori residents (26.4%) than New Zealand as a whole (16.5%).⁹
10. Young Māori males (15-24 years) have been shown to have disproportionately higher risks of hazardous drinking from living close to licensed outlets¹⁰ and tamariki Māori have at least five times the exposure to alcohol advertising compared to European/other children, with a significant proportion of this exposure arising from shop-front advertising and signage.¹¹
11. Alcohol Healthwatch **supports** Councils around the country to develop wider alcohol harm reduction strategies that extend beyond licensing issues covered in a LAP. We further recommend Councils contribute to discussions on alcohol legislation at a national level with a view to influencing alcohol consumption and related harms at a local level. While **alcohol remains more affordable than ever before**¹², it is a hard ask for Territorial Authorities to create a paradigm shift in the local drinking culture. Councils must advocate for evidence-based law change to **address the low price of alcohol, its high availability and pervasive marketing**.
12. As the previous Minister of Justice has announced a review into New Zealand's liquor laws, to be scoped this Parliamentary term, it is especially important that the voice of local government is heard. We encourage all local governments to write to the current Minister outlining their experiences with upholding community wishes for greater control of alcohol availability (e.g. through licence application processes and/or LAP adoption and appeal processes). As an example, we commend the letter to the Minister co-signed and sent by the Mayor of Whanganui District Council on the challenges they have faced upholding community wishes through licensing decisions and LAP processes.
13. Since 24 March 2022, ten Councils have voted in favour of calling on the Government to review the liquor laws and/or endorsing MP Chlöe Swarbrick's Members' Bill (the Sale and Supply of Alcohol (Harm Minimisation) Amendment Bill. This includes Auckland Council, Christchurch City Council, Whanganui District Council, Hamilton City Council, Palmerston North City Council, Waipa District Council, Hauraki District Council, Gisborne District Council, New Plymouth District Council, and Dunedin City Council. More Councils are looking to follow this leadership, in endorsing the following recommendation:

That the Council:

- (a) endorses the Members Bill: Sale and Supply of Alcohol (Harm Minimisation) Amendment Bill, which aims to:
 - i. remove the special appeal process through Local Alcohol Policies.

ii. wind down alcohol advertising and sponsorship of sport.

- (a) requests the Members Bill: Sale and Supply of Alcohol (Harm Minimisation) Amendment Bill, be supported by the Government and Members of Parliament;
- (b) requests the New Zealand Government review the Sale and Supply of Alcohol Act 2012; and
- (c) delegates (an Elected Member) to advocate to central government and to Members of Parliament in support of the proposed Bill. As stated above, the priority objective of the Sale and Supply of Alcohol Act 2012 is to “improve community input into local alcohol licensing decisions”.

14. Alcohol Healthwatch **strongly encourages** Waikato District Council to also show their support for the Bill and call on the Government to undertake a wide review of the Sale and Supply of Alcohol Act 2012 this Parliamentary term.

Importance of community input into the LAP

15. As stated above, the priority objective of the Sale and Supply of Alcohol Act 2012 is to “improve community input into local alcohol licensing decisions”.

16. LAPs were intended as a method for communities to have a greater say on local alcohol availability. This is emphasised in the Court of Appeal decision ([2021] NZCA 484) in relation to Auckland Council’s Provisional Local Alcohol Policy:

[32] The second and more general point is that revealed community preference has an important role to play under the Act. That is shown by provision for local alcohol policies, the extent to which it is permissible for such policies to govern the supply of alcohol, and delegation of decision-making to territorial authorities. As Mr McNamara submitted for the Council, a local alcohol policy is a means by which communities can implement, through participatory processes, some of their own policies on alcohol-related matters in their districts. Because those policies are the product of a process designed to discover and implement a community preference, they need not be evidence-based. If an objectively unreasonable preference finds its way into a proposed local alcohol policy, the remedy lies in an appeal to ARLA.

Local Alcohol Policies within the context of a global health pandemic (COVID-19)

17. It is clear that the global pandemic has had an immediate impact on alcohol consumption in New Zealand, and that it represents a picture of both good news and bad news.

18. Health Promotion Agency research¹³ found that **19%** of New Zealanders (who had consumed alcohol in the past four weeks) reported **increasing their alcohol use** during Level 4 lockdown in April 2020, when compared to consumption patterns pre-lockdown. Almost one-half of drinkers (47%) had consumed the usual amount, and **34% had consumed less** (Figure 1). Although these findings are from a national study, we see no reason why they may not apply to residents in the Waikato District.

19. Post lockdown in July 2020, the proportion of drinkers that had increased their consumption reduced from 19% in Level 4 to 14% in Level 1, while the proportion drinking less reduced from 34% to 22% (Figure 1).

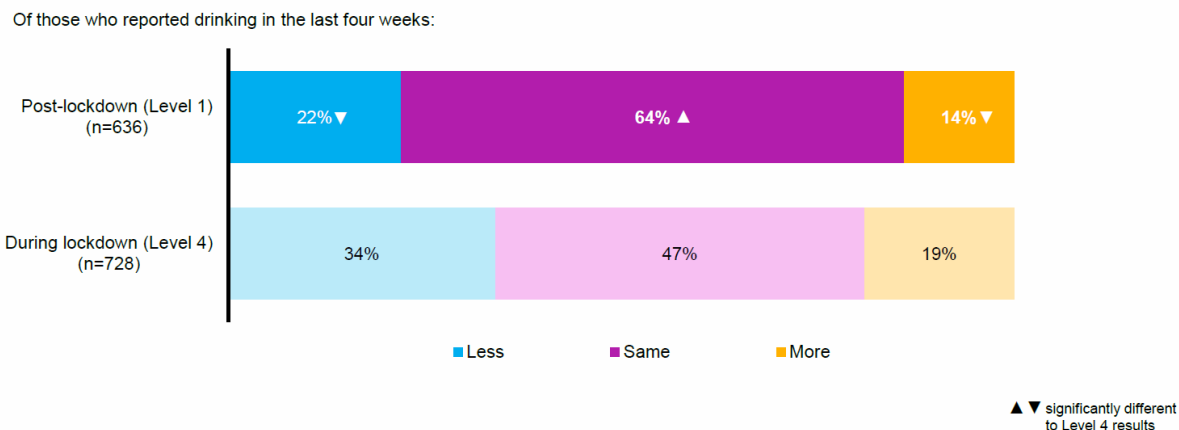


Figure 1. Changes in drinking during Level 4 lockdown and Level 1 of the COVID-19 pandemic.

20. When looking at changes in the average amount of alcohol consumed per week during Level 4 lockdown, results show an increase (from 12.82 standard drinks per week pre-lockdown to 14.09 drinks during Level 4). This reduced to 13.47 drinks per week in Level 1. This finding points towards the reduced intake by many New Zealanders not offsetting the increased volume of alcohol consumed by those who increased their consumption. It is likely that heavy drinkers were the drinkers who consumed more, whilst it was low-risk drinkers that consumed less.

21. It is imperative that we do everything we can to support New Zealanders who have maintained lower levels of drinking during, and after, Level 4 lockdown. This is the 'good news' of alcohol use during the global pandemic.

22. Findings by ethnicity show that 22% of Māori drinkers increased their consumption in Level 4 lockdown, when compared to pre-lockdown. This **prevalence did not decrease** following the cease of Level 4 lockdown, with 22% reporting higher consumption in Level 1 when compared to pre-lockdown (Figure 2). This has important implications for minimising alcohol harm among Māori in the Waikato District and upholding Tiriti obligations to promote and protect the health of Māori.

23. Among Pasifika drinkers, the proportion that increased their consumption had halved at Level 1, from 20% in Level 4 lockdown to 10% in Level 1.¹³ Therefore, there remain significant inequities by ethnicity in post-lockdown drinking.

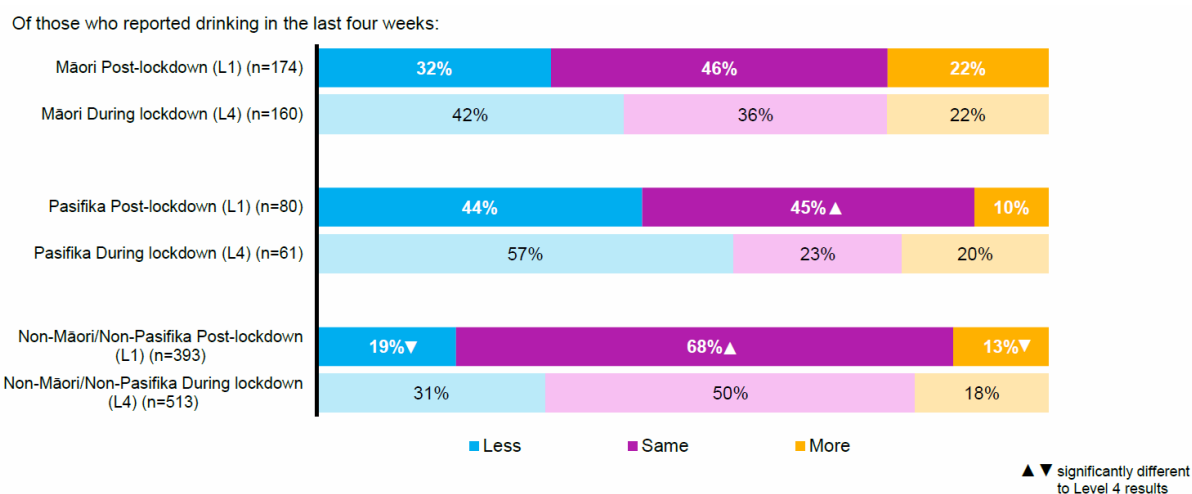


Figure 2. Changes in drinking during Level 4 lockdown and Level 1 of the COVID-19 pandemic, by ethnicity.

24. Age differences in drinking during and post-lockdown were striking. It is clear that a higher proportion of 18-24 year olds reduced their consumption during Level 4 lockdown, when compared to other age groups. However, as Figure 3 shows, the proportion of young adults that increased their consumption did not change between Level 4 lockdown (19%) and Level 1 (23%).¹³

Of those who reported drinking in the last four weeks:

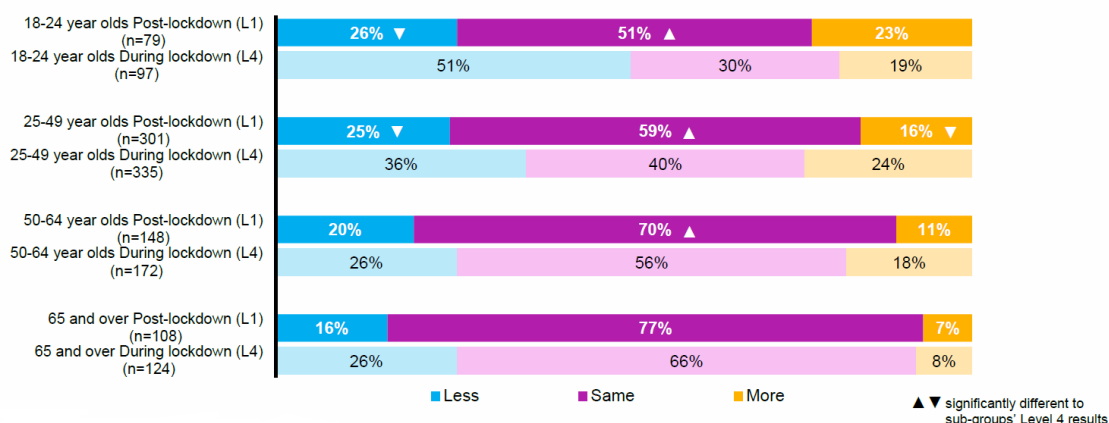


Figure 3. Changes in drinking during Level 4 lockdown and Level 1 of the COVID-19 pandemic, by age group.

25. Across all study participants, reasons given for drinking more included: 1) It helps me relax/switch off, 2) I have been feeling stressed out/anxious, and 3) I have been bored.¹³
26. Reasons given for drinking less included: 1) haven't been able to, or haven't wanted to, socialise as much or go out/visit the pub etc., 2) money/cost, 3) haven't wanted to go out and buy alcohol, 4) physical health reasons (e.g. weight, health condition, to be healthier), and 5) the lockdown period was a good time to reduce how much I drink and I want to continue drinking less.¹³
27. National data from the August 2021 lockdown paint a similar picture. Among those who drank alcohol in the last 4 weeks, 22% reported drinking more than usual during the August 2021 lockdown with 23% drinking less than usual. A larger proportion bought alcohol online (29%) during the August 2021 lockdown when compared to April 2020 (17%). Of particular concern, 10% of drinkers reported that a mental health problem developed or got worse due to their drinking in the August 2021 lockdown.¹⁴
28. We suggest that the context of the global pandemic warrants additional considerations in relation to alcohol licensing decisions and local alcohol policy development and review. A LAP can play a significant role in minimising alcohol harm, particularly among those who have increased their consumption during the pandemic.
29. Previous public health and economic crises inform the predictions of alcohol use going forward. Researchers propose that the COVID-19 pandemic will influence consumption via two main pathways:¹⁵
- (a) *increase consumption*: due to psychological distress triggered by financial difficulties, social isolation and uncertainty about the future
 - (b) *reduce consumption*: due to income reductions from unemployment and reduced working hours leading to tighter budgets.
30. It is suggested that some impacts will be immediate, whilst others will occur over a longer time period.¹⁵ The longer term impacts of the pandemic are believed to include a normalisation of home drinking, reinforcing or introducing drinking as a way to self-

medicate symptoms of stress, anxiety, and boredom and increased prevalence of alcohol dependence.¹⁶⁻¹⁹

31. Many people will use alcohol to cope with the on-going impacts of the pandemic. Research shows that individuals who drink for coping reasons are at a heightened risk of developing problems with alcohol.²⁰ Depression and anxiety have been found to be associated with drinking to cope.²⁰
32. A cross-sectional study in Australia found that depression and anxiety were associated with increased alcohol consumption during the first few months of COVID-19 pandemic.^{21,22}
33. Factors such as unemployment and time spent unemployed may also play a role in increased alcohol harm, in addition to redundancies and job losses leading to increased workloads for others and reduced workplace morale.²³
34. Alcohol use has always played a role in New Zealand's reduced productivity and levels of unemployment, and is inversely related to economic growth. At a time when New Zealand needs full employment and maximum productivity, we need to take alcohol control measures that effectively reduce harm. Persons trapped in the mire of unemployment and debt are likely to have heightened vulnerability to developing new, or exacerbating existing, alcohol and related problems.²³
35. Increases in alcohol use are likely to lead to a long-term increase in newly diagnosed patients with alcohol use disorders.²⁴
36. At a time when New Zealanders are also likely to feel anxious, stressed and vulnerable, efforts should encourage measures that limit alcohol, not facilitate it.²⁵ The World Health Organisation advises that restrictions on access to alcohol should be upheld or even reinforced during the pandemic.²⁶
37. A particular issue in New Zealand has been the expansion of bottle stores selling alcohol online. It has been argued that, in Australia, the licensing system has not kept pace with the changes in the market, and that online sales operate under much lower levels of scrutiny than the traditional bricks and mortar store.²⁷
38. In New Zealand, we witnessed an overnight increase in bottle stores selling online during Level 4 in 2020. However, there remains a lack of knowledge regarding who is selling online as off-licences have the default ability to sell in a physical shop as well as online. Compliance is therefore challenging, as there appears to be no list of online sellers (apart from those with a S40 remote sales only licence).
39. We **recommend** measures are put in place to ensure that Council is aware of all premises in the district selling online, so that monitoring and compliance activities can be effectively carried out.
40. Certainly, alcohol use places a major burden on health care.²⁸ Reducing the harm from alcohol will reduce any future burden on the health services.
41. In relation to the COVID-19 illness, alcohol is an immunosuppressant and increases acute respiratory distress syndrome via multiple pathways.^{29,30} Alcohol use disorders need to be considered as a predictor for COVID-19 disease severity and Intensive Care Unit admission.²⁹

Prevalence of health harms from alcohol in the Waikato District

42. The LAP Review Research Report highlights the involvement of alcohol in fatal and serious injuries in motor vehicle crashes in the Waikato District.
43. In relation to hospital admissions that are wholly attributable to alcohol use, it is shown below (Figure 4) that the Waikato District has a lower admission rate than the national average.

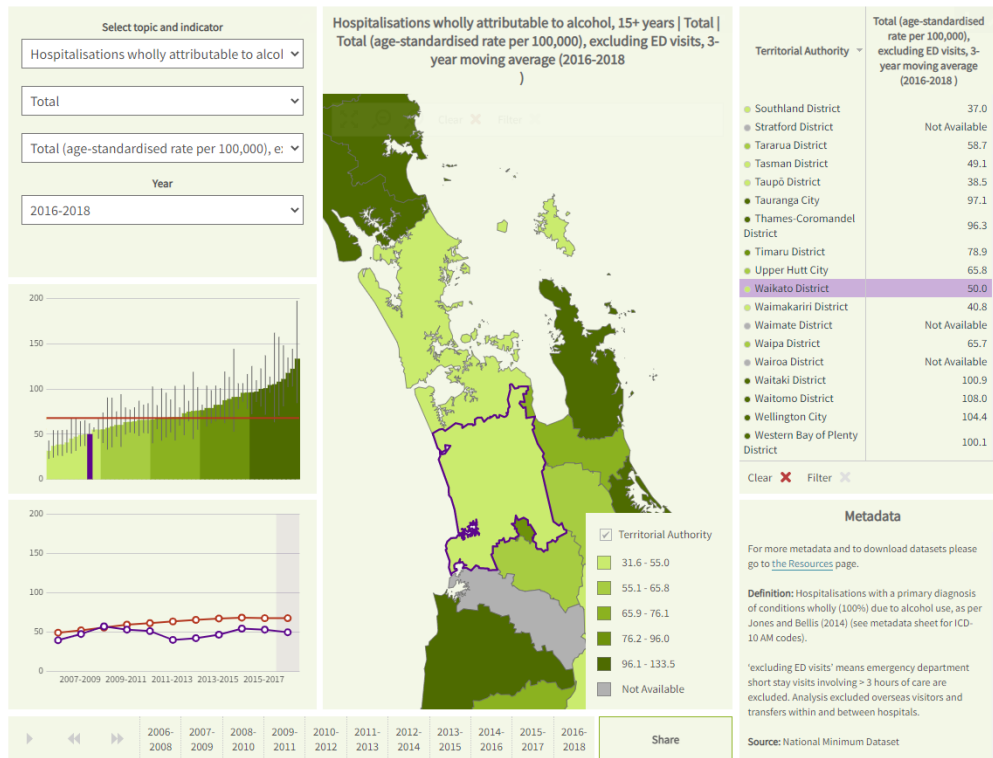


Figure 4. Hospitalisations wholly attributable to alcohol, 15+ years, 2016-2018 (Waikato District Council highlighted).

44. Further analysis by sex shows that the admission rate among males and females (not shown) is lower than many other councils across the country (Figure 5).

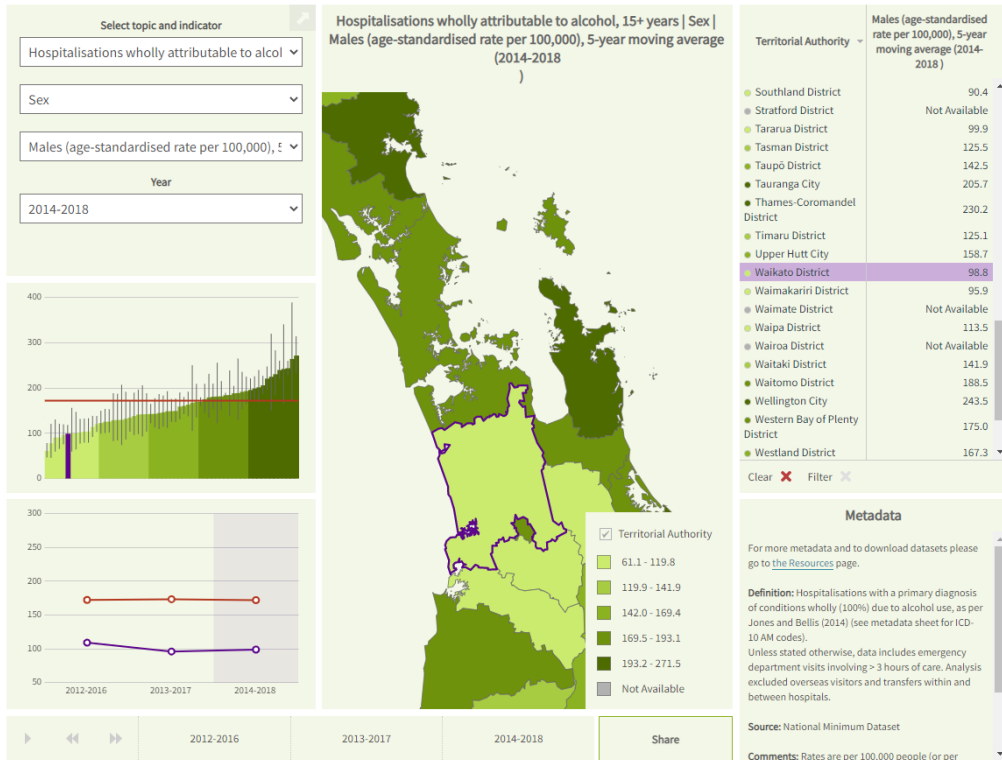


Figure 5. Hospitalisations wholly attributable to alcohol among males, 15+ years, 2014-2018 (Waikato District Council highlighted).

42. Further analysis by drinking pattern shows that the admission rate due to acute intoxication is lower than the national average (Figure 6).

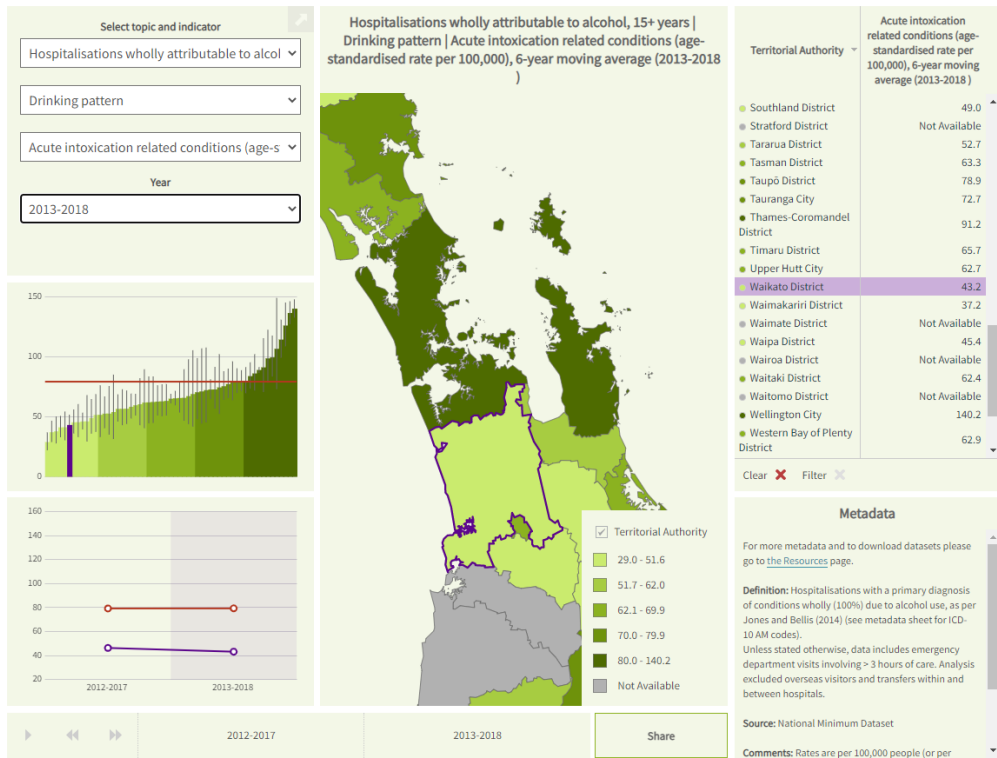


Figure 6. Hospitalisations wholly due to acute intoxication, 15+ years, 2013-2018 (Waikato District Council highlighted).

45. In relation to admissions due to chronic drinking, Waikato District appears to have an admission rate that is lower than many other councils across the country (Figure 7).

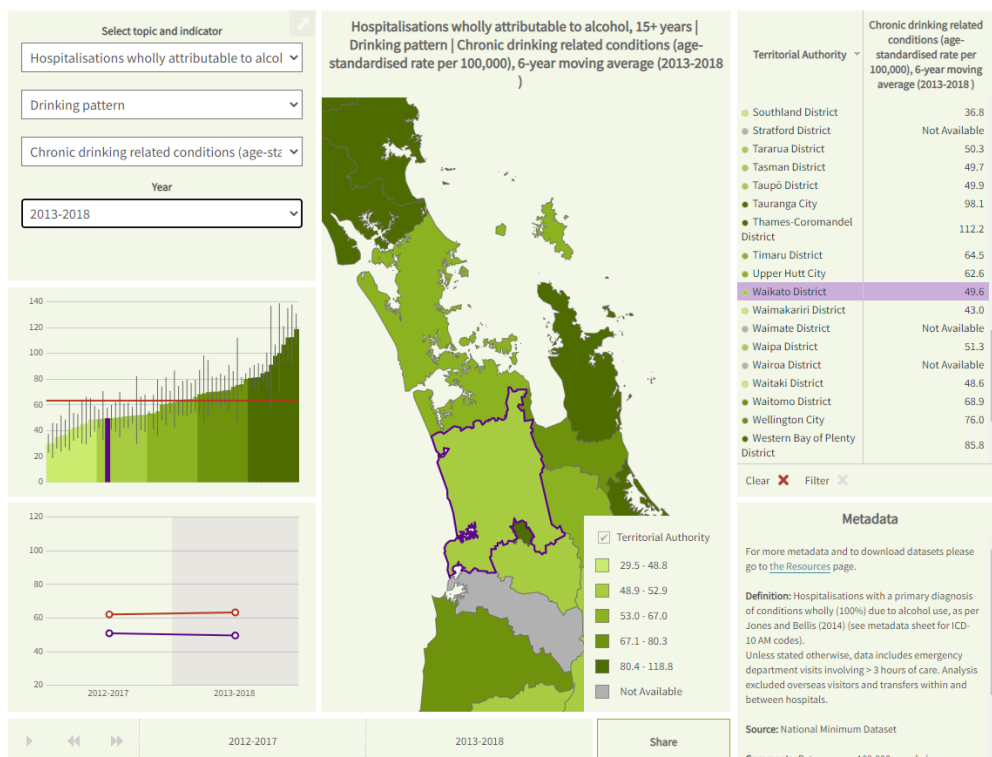


Figure 7. Hospitalisations wholly due to chronic drinking patterns, 15+ years, 2013-2018 (Waikato District Council highlighted).

46. However, no Territorial Authority is immune to alcohol harm. Evidence-based measures that reduce the availability of alcohol will bring about benefits to the region.

Off-licences

48. Off-licences sell over 80% of all alcohol in New Zealand.³¹ This means that the majority of alcohol is purchased (often cheaply) and consumed in situations where there may be little control or supervision, such as private homes or public places.
49. A minority of the alcohol sold is consumed at on-licence premises or at licensed events, where there must be supervision, control and an expectation of host responsibility.
50. New Zealand research³² shows that 73% of all alcohol consumed in very heavy drinking occasions is consumed in private homes. Around one in every ten heavy drinking occasions occurs in bars.
51. The closure of hospitality businesses during COVID-19 lockdowns has meant that off-licence availability became the main supply of alcohol to communities.
52. As such, evidence-based strategies to minimise the harm from off-licence availability are essential and desirable, and can make a meaningful difference to the well-being of local residents. Restrictions to availability are also pro-equity, given the unequal distribution of off-licences to the most deprived areas.

Trading hours - closing

53. Alcohol Healthwatch **supports** maximum trading hours for off-licences that are less than the national maximum trading hours. We recognise that the proposed closing time of

10pm is one hour earlier than the national maximum trading hours. To further reduce alcohol harm, we **recommend** a closing hour of 9pm for Waikato District off-licences.

54. The Court of Appeal decision ([2021] NZCA 484) in relation to Auckland Council's Provisional Local Alcohol Policy stated that there was no onus on Authorities to justify departure from the national default hours:

[32] So far as trading hours are concerned, ss 43–45 establish no presumption in favour of the default hours and nothing in them requires that a local authority justify departure from those hours. The default hours are merely those that apply if a territorial authority has chosen not to establish a local alcohol policy.

55. The decision by the Alcohol Regulatory and Licensing Authority (ARLA) on Auckland Council's Provisional Local Alcohol Policy ([2017] NZARLA PH 247-254), the Authority did not consider that the closing hour restriction of 9pm was unreasonable in light of the object of the Act (see paragraph 146).³³
56. New Zealand research has shown that the purchase of alcohol from an off-licence premise after 10pm was approximately twice as likely to be made by heavier drinkers.³⁴
57. New Zealand research has demonstrated the positive impacts of reduced trading hours on the wellbeing of young people.³⁵ The introduction of the default maximum trading hours in New Zealand in 2013, which saw all bars and clubs close at 4am and no off-licence alcohol sales after 11pm, was found to be associated with a reduction in the number of assault-related hospitalisations by 11%. The decline was the largest among 15 to 29-year-olds (who made up more than half of those hospitalised), at 18%. There was also a reduction in the number of night-time assaults coming to Police attention.
58. While these results point to the role of very late trading hours on alcohol-related harm, we agree with the authors of the study who suggest that further reductions in trading hours could provide many benefits.
59. In Switzerland, the province of Geneva reduced their off-licence trading hours from 24 hours per day to 7.00am to 9.00pm, and also prohibited the sale of alcohol from petrol stations and video stores. An examination of the effect of the policy change to reduce the availability of alcohol demonstrated that it led to an estimated reduction in the rate of hospitalisation due to intoxication by 35.7% among 10-15 year olds, and a 24.6% reduction in 16-19 year olds.³⁶
60. In the Swiss province of Vaud, the capital city of Lausanne reduced the trading hours for all shops (including liquor shops) such that they had to be closed between 8pm on Friday and Saturday and 6am the next morning. Two years later, the hours were reduced across the whole province with restaurants and off-licences selling beer and spirits (but not wine) being required to close between 9pm and 6am every night of the week. However, the shops in the city of Lausanne were still required to close at 8pm. An analysis of its effects found reduced hospitalisations for alcohol intoxication (by 29%) across all age groups in Lausanne. Again, the greatest reduction was found among those aged 16-19 years (56.4%), monotonically decreasing with age. However, as the absolute number of admissions for alcohol intoxication were higher in adulthood than adolescence, the estimated change in number of cases was also relevant to public health among 20–69-year-olds.³⁷
61. In a province of Germany, trading hours for off-licences were reduced from 24 hours per day to 5am to 10pm. When compared to the control provinces, the policy resulted in 7% fewer hospitalisations for intoxication among adolescents aged 15-19 years.³⁸

62. Given the evidence that sales restrictions in the evening are associated with reduced heavy drinking and adverse consequences (especially among young people), Alcohol Healthwatch **strongly recommends** a closing hour of 9pm to every Territorial Authority across the country.
63. Alcohol Healthwatch **recommends** that the opening and closing hours be listed as separate elements in the LAP. We believe this approach to trading hours in LAPs may reduce the potential for appeals to the entire element, although this remains to be tested in the legal appeals.

Trading hours - opening

64. Alcohol Healthwatch **does not support** the proposed off-licence opening hour of 7am.
65. In regards to the early opening hour of 7am, we believe it is not unreasonable to require an off-licence premises to open after 10am (or at least 9am).
66. Core hours for bottle stores and supermarkets in Scotland include an opening hour of 10am,³⁹ and although our average consumption is less than the Scots, we see no reason why a similar approach could not be adopted here.
67. Research in Russia showed that the introduction of later opening hours was associated with reduced alcohol use, but that the magnitude of the effects of restricting the closer hour was 3.5-4 times stronger than the effects of later opening hours.⁴⁰ Unfortunately, there is a lack of New Zealand research on off-licence opening hours and harm.
68. The purpose of the LAP is to minimise harm; one of the ways this can be addressed is through reducing the exposure of alcohol (and its advertising) to children on their journey from home to school.
69. Research has documented the association between exposure to alcohol advertising around schools and intentions to use alcohol among very young adolescents.⁴¹ Exposure to in-store displays of alcohol may also predict an increased probability of drinking.⁴² Existing and new outlets will pose a risk in relation to exposure to alcohol advertising.
70. Protecting the current generation (particularly vulnerable groups such as children) from harm can greatly assist in minimising future harm from alcohol use in Waikato District communities.
71. Furthermore, a later opening hour will restrict the accessibility of alcohol to those with an alcohol dependence. Social service providers in New Zealand have previously described to us the negative impact of early opening hours on persons with alcohol dependence.
72. Alcohol Healthwatch believes that there are many more positive benefits accrued from a later opening hour when compared to any loss of profits from the off-licence sector. Furthermore, economic imperatives regarding the chosen elements included in a LAP (e.g. justifying early opening hours using economic reasons) are not permitted.⁴³ Rather, minimising harm, and reflecting community views should be what determines the shape of a LAP.

Issue of new licences

73. The importance of restrictions to off-licence availability of alcohol are underpinned by a number of New Zealand studies demonstrating a significant association between off-licence density and a range of alcohol-related harms.^{44–48}
74. As described previously, Māori and Pacific young males (15-24 years) have been found to be more negatively impacted by living close to alcohol outlets (note: on-licence and off-licence types combined).¹⁰
75. Research in Manukau, Auckland, found that areas with a higher density of off-licences had lower alcohol prices, longer operating hours, and later weekend closing times.⁴⁹ These factors are strongly associated with alcohol harm.
76. Further, there is an accumulating body of international evidence showing that off-licences are associated with greater levels of harm in deprived areas compared to least deprived areas.^{50–54} Although two New Zealand studies did not find this relationship.^{45,46} Research also shows that low income drinkers experience more harm per litre of alcohol consumed, when compared to higher income drinkers with the same level of drinking.⁵⁵
77. Alcohol Healthwatch recognises the relative stability in the total number of off-licences across the duration of the Waikato District Council Local Alcohol Policy.
78. In spite of the limited growth of off-licences, we support further geographic areas and high deprivation areas being protected from additional bottle stores. However, we **do not support** the policy approach of a *presumption against* the issuing of new bottle stores.
79. We **recommend** that the policy state reinstate the cap for new standalone bottle stores in Huntly, Ngaruawahia, and Raglan and include new caps in Tuakau and Te Kauwhata. We believe this is a stronger approach than having a presumption against the issuing of a new licence and evaluating the significant adverse effects of its issue.
80. For areas of deprivation 7 and above, we recommend the LAP state that no further licences will be granted if it exceeds the number at the time of policy adoption. As each Census may result in new areas of deprivation being identified, it is likely to be difficult to specify caps in the policy.
81. It is important that the policy specify at what level deprivation will be measured. A proposed premises could be classified as being in Statistics New Zealand Statistical Area 1 (SA1) or 2 (SA2). Or a larger surrounding area could be considered, with deprivation examined in the SA2s and SA1s that are within that larger area.
82. Also, we **recommend** the cap also apply to tavern off-licences. These types of off-licence premises have the potential to be similar in appearance to standalone bottle stores.
83. We further **recommend** that an off-licence cap is specified for the district as a whole, rather than relying on the DLC to consider applications for new off-licences. This would be in addition to the above restrictions and would provide a clear message to communities about the limit to the density of licences and signal the serious harms from alcohol.
84. We **support** giving District Licensing Committees and the Alcohol Regulatory and Licensing Authority direction to have regards to the proximity of other licences when new off-licence premises are being proposed, where this is considered relevant.
85. Further, we **strongly support** restricting new bottle store off-licences being granted within one kilometre of any existing bottle store off-licence or licensed supermarket or grocery store.

Sensitive sites

86. Alcohol Healthwatch **supports** protections for sensitive sites regarding the location of new off-licences.
87. Whilst Alcohol Healthwatch **supports** no new bottle store off-licence application being issued for any premises located within 100 metres of any school, early childcare facility, library, place of worship, or public park, we **do not support** that exceptions regarding demonstrating no significant impact. We would prefer that the policy had a blanket protection for sensitive sites located within 100m of a proposed outlet.
88. Also, we **recommend** an extension to the list of premises that are protected under the policy. We **recommend** Marae, medial facilities, and alcohol treatment centres being included in the list of sensitive sites.

Discretionary conditions

89. Alcohol Healthwatch **supports** the discretionary conditions relating to off-licences in the draft LAP.
90. It is recognised that New Zealand's liquor laws already provide for licensing committees to include conditions on a licence on a case-by-case basis.
91. However, we believe that the inclusion of discretionary conditions in a LAP can provide transparency to both the licence applicant and the community as to expectations around the sale of alcohol. Conditions are especially important when outlets are located in vulnerable areas and/or near sensitive sites such as schools.
92. We recommend additional discretionary conditions are included in the draft LAP, as described below.
 - a) Discretionary conditions to restrict advertising and signage
93. Whilst we **support** the CPTED condition, Alcohol Healthwatch **recommends** including a discretionary condition to control the total amount of alcohol advertising that is visible within 500m from schools and early childhood facilities.
94. The Alcohol Regulatory and Licensing Authority (ARLA) issued the following signage and advertising conditions on an off-licence that was within 500m of a primary school and pre-school and nursery ([2021] NZARLA 123):
 - (i) *Signage shall be limited to displaying the store name and logo on the existing roof display.*
 - (ii) *No bright colours shall be used in the external decoration of the premises.*
 - (iii) *No specific product or price specials shall be displayed externally.*
 - (iv) *No external advertising shall be displayed by way of flags or sandwich boards outside the store.*
95. From November 12, 2019, Ireland no longer permits alcohol advertising within 200m of schools, crèches, or council playgrounds.⁵⁶ The Waikato District Council could follow the leadership shown in Ireland and require (in the local alcohol policy) a similar provision to apply to licensed premises.
96. Harm from signage and advertising also extends to Waikato District residents with alcohol use disorders. Research shows that heavy or problem drinkers can be more responsive to alcohol advertising and imagery (particularly of their favourite drink), placing them at risk of triggering alcohol use in relapse and maintaining alcohol dependence.^{57,58}

97. It is suggested that reducing alcohol cues in outdoor advertisements (especially scenes showing drinking and/or alcohol products) could potentially reduce the occurrence of episodes of acute craving and cue reactivity in persons with alcohol dependence.⁵⁸
98. Further, the Law Commission noted⁵⁹ that the pervasiveness of alcohol signs and advertising at liquor stores is likely to have a negative impact on community well-being. They stated that large obtrusive alcohol price advertisements and product branding on shop fronts, adjoining walls and sandwich boards is, in part, due to the pressure to compete with other liquor stores in a local community. They considered that the presence of this advertising can significantly lower the aesthetic value of an area, which in turn has flow-on effects for the community in terms of reduced amenity values and community welfare.
- b) Discretionary conditions to restrict single sales
99. Alcohol Healthwatch **recommends** discretionary conditions in the LAP that restrict the sale of single alcoholic beverages (known as single sales). Restrictions on single sales can greatly assist compliance with liquor bans throughout the region and may reduce pre-loading or side-loading surrounding licensed premises.
100. International research has documented the association between single sales and alcohol-related violence and crime.⁶⁰ Furthermore, an intervention to reduce single sales was found to reduce rates of alcohol-related ambulance attendances among 15 to 24 year olds.⁶¹
101. Single units of alcohol are likely to be favoured by those who are heavy drinkers and also price sensitive; namely adolescents and young adults, and those with an alcohol dependence. Many off-licences include conditions prohibiting single sales. For example, the Auckland District Licensing Committee⁶² imposed a condition on a licence that no single sales of:
- i. Beer or ready to drink spirits (RTDs) in bottles, cans, or containers of less than 440mls in volume may occur except for craft beer; and*
 - ii. Shots or pre mixed shots.*
102. Again, the ARLA decision in the case of a bottle store in Pleasant Point ([2021] NZARLA 123), the following condition on single sales was imposed:
- [157] No single sales of beer, cider, or RTDs priced at, or less than, \$6.00 per unit are to be sold.*
103. The adopted Whanganui District Council Local Alcohol Policy has the following single sales condition:
- The licensee must not break down the retail packaging of packages containing less than 445ml units of beer, cider or RTDs for sale from the licensed premises, except where the retail packaging of those alcohol products has been accidentally damaged and in which case the licensee may re-package those alcohol products for sale in packages containing no less than 4 units.*
104. We see no reason why this provision cannot be included as a discretionary condition within the draft Local Alcohol Policy. We **recommend** any condition on single sales specifies container sizes of 500ml or less, so that 440ml and 500ml containers that can be found littered in parks and public spaces are captured rather than excluded by the condition.

c) Discretionary conditions that relate to the type of product sold and/or its price

105. Alcohol Healthwatch **supports** the discretionary condition that relates to kinds of product sold but **recommend** it is extended to also cover the price that it is sold.

106. Many new bottle store applications around the country are seeking to be 'boutique' bottle stores. In a decision by the Auckland DLC regarding a new off-licence seeking to be a boutique store, the DLC outlined conditions (see paragraph 136)⁶³ around RTDs, pricing, and advertising that would align with it being a store that sold more premium products.

(h) *No sales of:*

RTDs 7% abv or above

No RTDs over 500ml

Shots

Light spirits (being spirits under 14% ABV)

Single sales from packs

Cask wine

(i) *RTD pricing as follows:*

No RTD 4 pack below \$12.99

No RTD 6 pack below \$16.99

No RTD 10 or 12 pack below \$26.99

No RTD 18 pack below \$36.99

(j) *External advertising on the front window is limited to a maximum of 25% and the name/brand of the store.*

(k) *There will be no advertising of alcohol products or brands outside the premises (apart from the trading name of the premises), such as (but not limited to) sandwich boards, billboards, flags, or similar forms of advertising.*

(l) *There will be no floor displays inside the premises.*

107. Discretionary conditions that relate to the type of product sold and/or its price should be considered by the Waikato District Council.

d) Discretionary conditions for remote sales

108. It is clear that the global health pandemic has accelerated the online delivery of alcohol. We recommend that DLC's have available to them conditions that reduce the harm from this high accessibility of alcohol.

109. As example of a condition is shown below, issued by the Hamilton City Council DLC [2021ALC-1803] on a remote seller licence:

The licensee must take reasonable steps to verify that the buyer (and if applicable, the receiver) is not under the purchase age. The licensee must ensure that the sale will not be made unless the buyer (and if applicable, the receiver) completes a declaration that they are 18 years of age or over on first entering the internet site and again immediately before the sale is completed.

The outside of the delivery package must contain the following words:

COURIER WARNING
CONTAINS ALCOHOL

Do not leave at destination without proof of delivery.

Do not leave with persons under 18 years of age. If the receiver appears to be under the age of 25 years check valid identification such as current passport, NZ drivers licence or Hospitality NZ 18+ Card/ Kiwi Access Card, to ensure the receiver is 18 years of age or over.

Do not leave with intoxicated persons.

Contains alcoholic product.

110. Alcohol Healthwatch **recommends** Waikato District Council consider if these types of discretionary conditions can be included with a draft Local Alcohol Policy.

Discretionary conditions relating to Buy-Now, Pay-Later services

111. We support licensees being prohibited from accepting buy now pay later (BNPL) as a method of payment for the sale and supply of alcohol to any customer, purchasing remotely or in person.
112. The buy now pay later sector is emerging and regulatory authorities are at early stages in their response to this novel market innovation.
113. Alcohol Healthwatch believes that alcohol retailers should not be allowed to offer BNPL services as an alternative payment method.
114. Alcohol Healthwatch's perspective is that the availability of alcohol products on BNPL platforms may enable alcohol purchases and/or trigger the desire to purchase alcohol (and purchase more alcohol than planned) at a perceived lower price.
115. The price of alcohol and its affordability are well-known to be key drivers of consumption in Aotearoa New Zealand.⁶⁴ Of particular concern, alcohol has been regularly increasing in affordability over many years and in 2020, was more affordable than at any other time since the late 1980s.¹²
116. Nielsen research shows that, in New Zealand supermarkets, alcohol products are the most sensitive of all products to price promotion.⁶⁵ It has also been found that the majority (55%) of New Zealand drinkers purchase their alcohol when sold on promotion (cited in⁶⁶).
117. We therefore believe there are fundamental risks in having alcohol available at (perceived) reduced prices, akin to the negative impacts of discounting and promotions of alcohol on increasing alcohol use. Alcohol Healthwatch is concerned that vulnerable drinkers are at an especially high risk when alcohol products for sale are perceived to be at a lower cost (as they would be using BNPL services).
118. The availability of alcohol at low alcohol prices facilitates moderate drinkers becoming heavy drinkers, and heavy drinkers transitioning to dependent drinkers. We suggest that BNPL services are, in effect, offering alcohol products at a low price even if the full cost is received later.
119. The alcohol industry is technologically innovative, as seen from the large increase in the number of off-licences that offer internet sales and deliveries since the COVID-19 pandemic. Likely, online alcohol purchases via BNPL services and rapid online delivery will continue to evolve and expand in New Zealand. Whilst there are only a few alcohol retailers (mainly boutique wine retailers) currently offering BNPL services as an alternative payment method, we believe there is a risk that this will change.

120. Alcohol Healthwatch strongly believes that BNPL services can impose financial hardship on hazardous drinkers and dependent drinkers if the BNPL sector is left unregulated or without any control over alcohol products sold on these platforms.
121. It is important to note that 7% of male drinkers and 5% of female drinkers in 2012/13 reported experiencing financial harms from their drinking. This equated to 165,000 drinkers.⁶⁷ Increasing any further financial impacts, through BNPL, would be unacceptable.
122. From the Ministry of Business, Innovation and Employment discussion document on BNPL, results from a survey conducted in January 2021 showed that 63% of BNPL consumers were extremely, or somewhat concerned, about their level of debt compared with 38% of the general population. Data covering around 35 to 40 per cent of the New Zealand BNPL market, suggested that consumers who had both BNPL and credit cards were more likely to be in arrears with their credit card debt (late or missed instalments) compared to consumers who only hold credit cards.⁶⁸

On-licence hours

123. Of the mechanisms available in a LAP, restricting the trading hours of licensed premises is likely to have one of the greatest impacts on reducing harm.^{69,70} This is because a consistent and strong body of high-quality evidence has demonstrated the impact of on-licence trading hours on alcohol-related harm.
124. Alcohol Healthwatch **recommends** that the opening and closing hours be listed as separate elements in the LAP. We believe this approach to trading hours in LAPs may reduce the potential for appeals to the entire element, but recognise this is yet to be tested.
125. Alcohol Healthwatch **supports** the proposed (continuation of) on-licence closing hour of 1am. Research shows that late trading hours increase the amount of time alcohol can be consumed and a patron's level of fatigue, lowering their ability to inhibit aggression.⁷¹
126. Alcohol Healthwatch **does not support** the proposed on-licence opening hour of 7am. This opening hour is outside the national maximum on-licence trading hours of 8am to 4am.
127. Alcohol Healthwatch **supports** the discretionary conditions for on-licences in the proposed LAP.

Club licences

128. Club licences, in particular those held by sports clubs, have been shown in research to contribute to the risky drinking behaviours among participants at the club.⁷²
129. In addition, club licence density in New Zealand has been shown to be significantly associated with higher levels of violence and a range of alcohol-related offences.^{45,73} In New Zealand, the effects of club licence density on violence are shown to be stronger in areas with low populations (e.g. rural areas and small towns).⁴⁵ Analysis of Pasifika youth drinking patterns in New Zealand found that participation in a sports team or club outside of school was independently associated with increased risk of binge drinking.⁷⁴
130. Alcohol Healthwatch **recommends** maximum trading hours of 9am to **1am** the following day for club licences. We note the present typo in the draft policy which states 1pm the following day.

131. Club licences have fewer obligations than on-licences, as they are afforded some leniency under the Act. Minors are also present in the drinking environment. For these reasons, club licences should not have the same privileges as on-licence taverns, without operating under the same conditions as these premises. Clubs seeking a level playing field with taverns should seek a tavern licence.
132. Alcohol Healthwatch **recommends** that the opening and closing hours be listed as separate elements in the LAP. We believe this approach to trading hours in LAPs may reduce the potential for appeals to the entire element, although we recognise it is yet to be tested in the appeals process.
133. Alcohol Healthwatch **supports** the discretionary conditions for club licences, particularly the requirement for a certified manager to be on duty at particular times and circumstances.

Special licences

134. Alcohol Healthwatch **do not support** special licence trading hours being determined on a case by case basis. We recommend that maximum trading hours for special licences be specified in the LAP.
135. I/we support a guideline of **8am** to 1am the following day as maximum trading hours for special licences. A 7am opening hour is outside the national maximum hours for on-licences.
136. Any extension of trading beyond these guideline maximum hours should only be issued in exceptional circumstances as determined by the District Licensing Committee.
137. Alcohol Healthwatch **supports** the discretionary conditions for special licences.
138. Alcohol Healthwatch **recommends** a discretionary condition for any event with over 1000 attendees (or as otherwise considered appropriate), to require an Event Alcohol Risk Management Plan.
139. Alcohol Healthwatch **strongly recommends** the Council adopt special licence provisions that protect children in the region, mirroring the approach used in Wairoa. The Wairoa District Council Local Alcohol Policy requires that:

Licences will not be granted for child-focussed events. A child focussed event is an event that is centred around minors. This includes but is not limited to galas, children's sports games, school kapa haka events, etc.

Monitoring, evaluation, and review

140. Alcohol Healthwatch **recommends** the Council develop a monitoring and evaluation plan for the LAP. It is important that monitoring occurs throughout the six-year duration of the LAP, with results regularly reported to Council.
141. Alcohol Healthwatch suggests to every Council to include a broad range of indicators in a monitoring and evaluation plan, e.g.:
 - number/rate of alcohol-related police events (e.g. drunk custodies, breach of liquor ban, late night assaults, drink-drive offences);
 - alcohol-related Emergency Department presentations, wholly-alcohol attributable hospitalisations, ambulance pick up data;
 - crash-analysis data (single, night time vehicle crashes);
 - alcohol consumption data (annual New Zealand Health Survey)

- feedback from community members and local enforcement agencies (licensing inspectors, Medical Officer of Health, and Police).
142. However, Alcohol Healthwatch **recommends** a cautious approach to interpreting monitoring and evaluation data. Changes in reporting practices around alcohol-related Emergency Department presentations, for example, could indicate a higher number of presentations due to more consistent data collection practices. Some indicators may require a longer lead time before harm reductions become detectable, for example alcohol-related chronic diseases may take a long time to show any change. However, some alcohol-related chronic diseases (e.g. gastritis) may be more responsive to short term changes in the regulation of licensed environments.
143. As stated earlier, the pandemic will greatly affect alcohol use in the coming years. Having up-to-date data is essential to monitor trends in alcohol harm, with the option to bring a review of the LAP forward if necessary.

Conclusion

144. Alcohol Healthwatch **supports** many provisions in the draft LAP, but recommends some additional protections to be put in place for the duration of the policy. These measures will help minimise the harms from alcohol, especially those exacerbated by the effects of the global health pandemic.

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Submission ID: 4711

Name: Waikato Public Health Service, Te Whatu Ora (Health NZ)

Wish to speak to submission: Yes

What is your preferred option for the future of the Local Alcohol Policy?

Option 2

Do you have any other comments to make on the draft Local Alcohol Policy?

See full submission

Attachment: Yes

Submission
Waikato District Council Local Alcohol Policy 2022

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Hearing: Waikato DHB wishes to verbally support its submission

Date: 12 August 2022

Introduction

1. Waikato Public Health Service is now part of National Public Health Services, Te Whatu Ora – Health New Zealand. Te Whatu Ora leads the day-to-day running of the health system across New Zealand with functions delivered at local, district, regional and national levels. It weaves the functions of the 20 former District Health Boards into its regional divisions and district offices, ensuring continuity of services in the health system.

National Public Health Services is a division of Te Whatu Ora. The National Public Health Service and its partners work alongside whānau, communities and other sectors to consider all the factors that impact on health and wellbeing, and deliver national, regional and local programmes to achieve pae ora (healthy futures). It works towards pae ora by engaging with the wider determinants that impact on people's health, focusing on oranga/wellbeing, prevention, protection and population-level intervention.

The National Public Health Service partners with the Māori Health Authority and the Public Health Agency to work alongside whānau, communities, and other sectors, drawing on Mātauranga Māori and data to provide health promotion, prevention and health protection at local, regional and national levels.

The Waikato Public Health Service is part of the Te Manawa Taki region which comprises the Waikato Public Health Services, Toi Te Ora Public Health Service (Bay of Plenty and Lakes / Taupo, Taranaki Public Health and Hauora Tairāwhiti Public Health.

Waikato Public Health Service welcomes the opportunity to provide further comment on Council's proposed Local Alcohol Policy 2022.

Submission and recommendations

2. Waikato Public Health Service **supports** option 2 *council adopts its draft Local Alcohol Policy*. Our organisation fully supports the changes proposed by Council and acknowledges Council's leadership in consulting thoroughly to improve and strengthen its current policy.

Key Information

3. The harmful use of alcohol is associated with a significant health burden resulting in physical, psychological and social impacts.
4. Hospital Emergency Departments (EDs) often bear the brunt of alcohol-related harm. For the two-year period 1 June 2020 to 31 May 2022 there were 574 alcohol-related presentations for patients who reside in the Waikato District, to Waikato's five hospital EDs. Sixty percent of these were male and 45% of presentations were for people with a recorded prioritised ethnicity of Māori. The highest number of presentations to ED were those aged 18-34 years.¹ There were 16 alcohol-related deaths at the Waikato Hospital ED facility in Hamilton during this time.²
5. It is now well established that people living in deprived areas of New Zealand live closer to pubs, bars, clubs and off-licensed premises than those living in wealthier areas.^{3 4}
6. Hay et al (2009) reports that most alcohol outlets have other outlets located within 2km. In poorer areas of New Zealand there is greater access to pubs and bars than restaurants which are more common in wealthier areas. As a consequence, those living in poorer areas are more routinely exposed to alcohol promotion via signage, advertising, price competition and marketing of events such as happy hour than those living in wealthier areas.
7. For those residing in the Waikato District, 45% (261) of alcohol-related ED presentations were from those living in NZ Deprivation 2018 deciles 8-10; 34% (194 presentations) were from those living in deciles 4-7, and 21% (119 presentations) were from those living in deciles 1-3.

¹ Inpatient Management System (iPM) via Costpro database, Waikato DHB

² Deaths are ED episodes that were flagged as alcohol-related and during which time the patient died.

³ Cameron, M.P.; Cochrane, W., Livingston, M. (2017). The relationship between alcohol outlets and harm: a spatial panel analysis for New Zealand, 2007-2014. Commissioned Research Report Prepared for the Health Promotion Agency. Department of Economics, University of Waikato.

⁴ Hay, G., Whigham, P., Kypri, K., Langley, J. (2009). Neighbourhood deprivation and access to alcohol outlets: A national study. University of Otago, Dunedin

Conclusion

8. Our organisation applauds Waikato District Council for the strength of their proposed LAP. Young people, those living in areas of social deprivation, and Māori are some groups disproportionately affected by alcohol harm. Health, Police and ACC are the key agencies that bear the brunt of alcohol-related harm. We are in full support of the proposed changes to improve and strengthen the district's LAP.

Yours sincerely



Dr Richard Hoskins

Medical Officer of Health