



21 August 2024

Local Alcohol Policy  
Hutt City Council  
30 Laings Road  
Lower Hutt 5010

Via email: [alcohol.feedback@huttcity.govt.nz](mailto:alcohol.feedback@huttcity.govt.nz)

**RE: Local Alcohol Policy**

Tenā koe,

Hospitality New Zealand ("Hospitality NZ") is a not-for-profit organisation representing approximately 2,500 businesses, including cafés, restaurants, bars, nightclubs, commercial accommodation, country hotels and off-licences. We champion hospitality, serving our members and communities, and seek to see hospitality recognised and celebrated for its contribution to Aotearoa, attracting fresh talent and generating sustainable returns for businesses and communities. We have a 122-year history of advocating on behalf of the hospitality and tourism sector.

We are writing to you on the proposed Local Alcohol Policy ( LAP )

We support Hutt City Council's proposal to maintain the status quo.

As you'll be aware, under the Sale and Supply of Alcohol Act 2012, Hutt City Council has the ability to deal with each Licence holder and application on its merits, without making wholesale changes across all operators. Given HCC has these tools at its disposal, we support maintaining the existing measures and do not deem further changes necessary.

I would welcome the opportunity to present my submission in person.

Please do not hesitate to contact us if you have any further questions.

Ngā mihi nui,

**Shane Phillips**  
**Regional Manager**  
**Hospitality New Zealand**

**M 021 192 3941**



## **Submission on the Hutt City Council Local Alcohol Policy Review**

25 August 2024

Tēnā koutou

Thank you for the opportunity to provide feedback on the review of the Council's 2018 Local Alcohol Policy. We would like the opportunity to speak (virtually) to our submission.

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

Andrew Galloway  
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Alcohol Healthwatch  
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### **About Alcohol Healthwatch**

Alcohol Healthwatch is an independent national charity working to reduce alcohol-related harm and inequities. We are contracted by Health New Zealand–Te Whatu Ora 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.

### **General Comments**

1. Alcohol Healthwatch commends the Hutt City Council on its commitment to reviewing the Council's Local Alcohol Policy (LAP).
2. We wish to acknowledge the efforts of Council members and staff generally in reviewing the LAP on behalf of their communities.
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 LAPs are

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. In this regard, we acknowledge the comprehensive approach of the Council in reviewing and making bylaws for alcohol bans and licensing fees as well as reviewing the 2018 Local Alcohol Policy.

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 Aotearoa New Zealand have been inequitably distributed to the most deprived neighbourhoods and the unequal harms from this must be addressed.<sup>1</sup>
5. By incorporating evidence-based measures to address both the physical (location) and temporal (operating hours) 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. Alcohol Healthwatch supports provisions in the LAP that are aligned to the object of the Sale and Supply of Alcohol Act 2012, that reflect the needs of the community and are supported by evidence for reducing alcohol-related harm.
7. We are aware that the public, licensing bodies and regulatory agencies as well as licensees see the benefits of a LAP as it provides greater certainty and clarity and supports a consistent approach across the district and statutory agencies and between licensees.
8. We believe that the review of the LAP is timely and provides an opportunity for the LAP to reflect:
  - The Supreme Court decision on the Auckland Council Provisional LAP,<sup>2</sup>
  - The Sale and Supply of Alcohol (Community Participation) Amendment Act 2023,<sup>3</sup>
  - The desirability of ensuring greater consistency and synergy with LAPs (and proposed LAPs) in the region and across Aotearoa New Zealand, and
  - The changing environment and emerging issues in the district/region since 2018.
9. **In summary** we recommend that the LAP:
  - Include a mandatory policy to prevent further licenced premises (particularly off-licensed bottle stores) from locating within a radius or within a distance of other licensed premises (s77(1)(b) of the Act);

- Include a mandatory policy to prevent licensed premises from locating within a radius or within a distance of a “sensitive site” such as an educational facility, place of worship, Marae, health facility, or community facility (s77(1)(c) of the Act);
- Retain the cap on numbers of off-licences in Naenae, Stokes Valley, Taita, Avalon, Hutt Central and Wainuiomata;
- Include trading hours for clubs and a suggested maximum hour for special licences (s77(1)(e) of the Act);
- Reduce trading hours for on- and off-licences to reduce availability and associated alcohol-related harm (s77(1)(e) of the Act);
- Include additional discretionary conditions including restricting Buy Now Pay Later services and alcohol advertising, adding conditions on special licences for family-focused events, and referencing Crime Prevention Through Environment Design (CPTED) principles (s77(1)(f) of the Act); and
- Include a mandatory one-way door policy for on-licensed premises (s77(1)(g) of the Act).

## Specific comments

### Location of Premises

#### ***Proximity to premises of a particular kind or kinds*** (s 77(1)(b))

10. There is a body of national and international evidence that demonstrates the relationship between density and a range of alcohol-related harms. **We recommend** (as other Councils have done) that a policy be included on the proximity of licensed premises to other licensed premises, as this can address the harm arising from the clustering of premises. The policy could also include a specified distance/radius from any existing licensed premises.

#### ***Proximity to facilities of a particular kind or kinds*** (s 77(1)(c))

11. Most Councils’ LAPs include a policy on location and proximity to a “sensitive site” such as an educational facility (e.g. school, early childcare centre), place of worship, Marae, health facility (e.g. an addiction and treatment facility), community facility (e.g. public park, playground or reserve, urupa, or cemetery) or similar sites. **We recommend** that the Council likewise include a similar provision, and also include a specified distance/radius from any existing licensed premises.<sup>4</sup>

#### ***Further licences (or licences of a particular kind or kinds)*** (s 77(1)(d))

12. **We support** the retention of the policy capping the number of off-licences in Naenae (4), Stokes Valley (3), Taita (3), Avalon (1), Hutt Central (11) and Wainuiomata (6). Section 77(1)(d) of the Sale and Supply of Alcohol Act enables Councils to consider

whether further licences (on, off and club licences) should be issued for licensed premises, or whether there should be a cap/maximum limit or sinking lid policy to halt or reduce the existing numbers of outlets, particularly in areas where licensed premises have reached saturation levels or are in areas of high socio-economic deprivation, where there is high number of children and young people, where there is high crime rate, or where there would generally be an impact on the amenity and good order of the area.<sup>5</sup>

### ***Maximum Trading Hours***

13. **We recommend** that the trading hours be reviewed, with on-licences to open later than 7am (the default in the Act is 8am) and close earlier than 3am (the latest trading hour for a LAP in the district, and amongst the latest in the country); and off-licences to operate no later than 9pm. Reducing trading hours is a key strategy for reducing alcohol-related harms.<sup>6</sup> International and national studies have shown that hazardous drinking increases with longer hours and greater availability, and that extended trading hours at on-licence premises was typically followed by increases in the incidence of assault, unintentional injury or drink driving offences.<sup>7 8</sup>
14. **We recommend** that trading hours for premises with a club licence be included, and suggested hours for special licences that should align to the hours of any existing licence for the venue.

### ***Discretionary Conditions***

15. **We support** the continued inclusion of discretionary conditions that address safety and management of the premises. **We recommend** the inclusion of a reference to Crime Prevention Through Environmental Design (CPTED) principles in the LAP as it provides guidance for the District Licensing Committee on reducing external signage at bottle shops.<sup>9</sup> Not only does prolific advertising obscure the view into/out of the premises (a safety issue), but exposure to alcohol signs and marketing at licensed premises is a key source of alcohol advertising exposure to children<sup>10</sup> and other vulnerable people. The effect of alcohol marketing on youth alcohol initiation and heavy drinking is established as causal.<sup>11 12</sup> In New Zealand, there is evidence that alcohol advertising is prevalent in urban settings, with tamariki Māori and Pasifika children disproportionately exposed.<sup>13</sup> Research also shows that heavy or problem drinkers can be more responsive to alcohol advertising and imagery, placing them at risk of triggering alcohol use in relapse and maintaining alcohol dependence.<sup>14 15</sup> The pervasiveness of alcohol signs and advertising at liquor stores is also likely to have a negative impact on community well-being and can significantly lower the aesthetic value of an area, which in turn has flow-on effects for the community through reduced amenity values and community welfare.

16. **We recommend** additional discretionary conditions be included in the LAP that could prohibit single sales and the use of Buy Now, Pay Later (BNPL) payment schemes for the purchase of alcohol from off-licensed premises. The research shows that the use of BNPL services to purchase alcohol - at an apparent and often advertised low cost and no interest - increases its perceived affordability, which can lead to greater consumption and related harms.<sup>16</sup> This is compounded where both BNPL and (rapid) delivery of alcohol is offered. Young adults are particularly vulnerable as they among the heaviest drinkers<sup>17</sup>, they are currently the main consumers of BNPL and are also likely to use rapid delivery for their purchases (often without ID checks).
17. **We recommend** the LAP include provisions that protect children and youth in the district, by not allowing special licences to be granted for family-focussed events, namely those events where a significant proportion of attendees are aged under 18 years.

### ***One-way door restrictions***

18. We note the reference to a one-way door condition as being at the discretion of the District Licensing Committee (clauses 1.3 and 2.1) but **recommend** that there should be a *mandatory* one-way door restriction for all premises including where there are more than 100 people attending an event. One-way door restrictions would help prevent a large number of people coming out of licensed premises at the same time (as would be the case with a universal maximum closing time) and the potential for intoxicated patrons migrating between venues or interacting with others with an increased likelihood of disorder and crime. These conditions also have the potential to reduce the burden on Police, ambulance and hospital services and can have a positive benefit for not only the patrons of premises but the community generally.
19. **We recommend** that (as is the case with most council LAPs with a mandatory one-way door policy) the restriction should be for every night of the week and district-wide, which recognises that patrons are mobile and can move around to other licensed venues.

### **Conclusion**

20. Alcohol Healthwatch supports provisions in the LAP that cap off-licence numbers, but recommends some additional protections be put in place for the duration of the policy to address availability and associated alcohol-related harm.
21. Strengthened measures can be effective in meeting the object of the Sale and Supply of Alcohol Act 2012 and reduce the significant burden placed on communities from alcohol-related harm.

## References and notes

<sup>1</sup> New Zealand Law Commission. Alcohol in Our Lives: Curbing the Harm [Internet], New Zealand Law Commission, 2010. NZLC Report No.: 114. Available from:

<https://www.lawcom.govt.nz/sites/default/files/projectAvailableFormats/NZLC%20R114.pdf>

<sup>2</sup> Courts of New Zealand. Foodstuffs North Island Limited v Auckland Council, Woolworths New Zealand Limited and Alcohol Regulatory and Licensing Authority – SC 140/2021 [Internet]. Wellington (NZ): Supreme Court of New Zealand; 2023 [cited 2023, Sep 18].

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15 August 2024. Available from:

<https://ourauckland.aucklandcouncil.govt.nz/news/2024/08/local-alcohol-policy-due-to-go-before-council/>

<sup>3</sup> Sale and Supply of Alcohol (Community Participation) Amendment Act 2023, No. 60.

Available from: <https://www.legislation.govt.nz/act/public/2023/0060/latest/whole.html>.

<sup>4</sup> Most LAPs have some provision for distances that range up to 150 metres or otherwise include a general provision regarding proximity to sensitive sites. Examples from other Council LAPs include:

- 150 metres - Gisborne District Council
- 100 metres - Dunedin City Council, Horowhenua District Council, Ōpotiki District Council, Kawerau District Council Whakatāne District Council, MacKenzie District Council, Timaru District Council, Waimate District Council, New Plymouth District Council, Stratford District Council, Waikato District Council
- 50 metres - Gore District Council, Invercargill District Council, Southland District Council, Waipa District Council
- 40 metres - Ōtorohanga District Council, Waitomo District Council.

<sup>5</sup> Huckle T, Huakau J, Sweetsur P, Huisman O, Casswell S. Density of alcohol outlets and teenage drinking: living in an alcogenic environment is associated with higher consumption in a metropolitan setting. *Addiction*. 2008;103(10):1614-21. Available from:

<https://doi.org/10.1111/j.1360-0443.2008.02318.x>

<sup>6</sup> Hahn RA, Kuzara JL, Elder R, Brewer R, Chattopadhyay S, Fielding J, Naimi TS, Toomey T, Middleton JC, Lawrence B, Task Force on Community Preventive Services. Effectiveness of policies restricting hours of alcohol sales in preventing excessive alcohol consumption and related harms [Internet]. *American Journal of Preventive Medicine*. 2010;39(6):590-604.

Available from: <https://doi.org/10.1016/j.amepre.2010.09.016>.

<sup>7</sup> Nepal S, Kypri K, Tekelab T, Hodder RK, Attia J, Bagade T, Chikritzhs T, Miller P. Effects of extensions and restrictions in alcohol trading hours on the incidence of assault and unintentional injury: systematic review [Internet]. *Journal of studies on alcohol and drugs*. 2020;81(1):5-23. Available from: <https://doi.org/10.15288/jsad.2020.81.5>

<sup>8</sup> Casswell S, Huckle T, Wall M, Yeh LC. International alcohol control study: pricing data and hours of purchase predict heavier drinking. *Alcoholism: Clinical and Experimental Research* [Internet]. 2014. 38(5):1425-31. Available from: <https://doi.org/10.1111/acer.12359>

<sup>9</sup> Refer Auckland District Licensing Committee. Off-licence Premises External Advertising Practice Note. 21 July 2023. Available from: <https://www.aucklandcouncil.govt.nz/licences-regulations/business-licences/alcohol-licences-fines/docsdlcpracticenotes/dlc-practice-note-external-signage.pdf>.

<sup>10</sup> Chambers T, Stanley J, Signal L, Pearson AL, Smith M, Barr M, Ni Mhurchu C. Quantifying the nature and extent of children's real-time exposure to alcohol marketing in their everyday lives using wearable cameras: Children's exposure via a range of media in a range of key places. *Alcohol and Alcoholism*. 2018; 53(5):626-33. Available from: <https://academic.oup.com/alcalc/article/53/5/626/5056455>.

<sup>11</sup> Sargent JD, Babor TF. The relationship between exposure to alcohol marketing and underage drinking is causal. *Journal of Studies on Alcohol and Drugs, Supplement* [Internet]. 2020;19:113-24. Available from: <https://doi.org/10.15288/jsads.2020.s19.113>

<sup>12</sup> Swensen G. Public space and alcohol advertising: Exploratory study of the role of local government [Internet]. *International Journal of Alcohol and Drug Research*. 2016;5(3):117-23. Available from: <https://doi.org/10.7895/ijadr.v5i3.224>

<sup>13</sup> Pasch KE, Komro KA, Perry CL, Hearst MO, Farbakhsh K. Outdoor alcohol advertising near schools: what does it advertise and how is it related to intentions and use of alcohol among young adolescents? [Internet]. *Journal of Studies on Alcohol and Drugs*. 2007;68(4):587-96. Available from: <https://doi.org/10.15288/jsad.2007.68.587>

<sup>14</sup> Babor TF, Robaina K, Noel JK, Ritson EB. Vulnerability to alcohol-related problems: a policy brief with implications for the regulation of alcohol marketing [Internet]. *Addiction*. 2017;112:94-101. Available from: <https://doi.org/10.1111/add.13626>

<sup>15</sup> Witteman J, Post H, Tarvainen M, de Bruijn A, Perna ED, Ramaekers JG, Wiers RW. Cue reactivity and its relation to craving and relapse in alcohol dependence: a combined laboratory and field study [Internet]. *Psychopharmacology*. 2015;232:3685-96. Available from: <https://doi.org/10.1007/s00213-015-4027-6>

<sup>16</sup> Burke S, Roseveare C. Alcohol-related harms now available on demand. Public Health Communication Centre (PHCC). 15 August 2024. Available from: <https://www.phcc.org.nz/briefing/alcohol-related-harms-now-available-demand>.

<sup>17</sup> Ministry of Health. Annual Update of Key Results 2020/21: New Zealand Health Survey. 2021; published online Dec 1. Available from: <https://minhealthnz.shinyapps.io/nz-health-survey-2020-21-annual-data-explorer>.



23 August 2024

**Health New Zealand**  
Te Whatu Ora

Hutt City Council  
Private Bag 31-912  
Lower Hutt 5040

Tēnā koe,

## Hutt City Council Local Alcohol Policy Review

Thank you for the opportunity to provide a written submission on the Hutt City Council Local Alcohol Policy Review.

This submission has been written by Health New Zealand | Te Whatu Ora National Public Health Service (Health NZ) in the greater Wellington region. The National Public Health Service is a directorate within Health NZ. Health NZ believes the submission process provides an opportunity for public health perspectives to be considered by Council in planning and decision making. Incorporating public health aspects helps to support the health and wellbeing of our communities.

Health NZ has statutory obligations under the Pae Ora (Healthy Futures) Act 2022 and the Health Act 1956 to improve, promote and protect the health of people and communities. Of particular focus for Health NZ is embedding Te Tiriti o Waitangi as its foundation toward improving health outcomes for Māori.

The feedback provided in this submission aligns to Health NZ's commitment towards healthier and more resilient communities by reducing inequities and promoting good health, particularly for Māori, Pacific peoples and disabled people. The feedback also reflects the information and recommendations provided under section 78 of the Sale and Supply of Alcohol Act 2012 consultation with the Medical Officer of Health.

For any clarification regarding the submission, please contact Kate Neyland, Health Promotion Advisor, [kate.neyland@tewhatuora.govt.nz](mailto:kate.neyland@tewhatuora.govt.nz).

Ngā mihi,



**Paula Snowden**

Ngāpuhi ki Whāingaroa

**Regional Director, Te Ikaroa-Central Region**

**National Public Health Service**

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**Te Kāwanatanga o Aotearoa**  
New Zealand Government

## Response to consultation questions

Health New Zealand acknowledges that Hutt City Council was one of the first territorial local authorities to develop a Local Alcohol Policy (LAP), and that features of it, such as the probationary period for new licensees, are notable. We encourage Council to continue to strengthen the LAP as part of minimising alcohol-related harm in Hutt City.

### Should we change our trading hours?

Yes. Health NZ recommends reducing trading hours. The Sale and Supply of Alcohol Act 2012 (the Act) allows territorial authorities to set the maximum trading hours in a LAP. However, councils still need to keep their policy in line with the Object of the Act, specifically that the sale and supply of alcohol should be undertaken safely and responsibly and the harm from alcohol should be minimised.

Data provided in the *Public Health Report*<sup>1</sup> as part of the consultation process highlighted that harm from alcohol, particularly alcohol-related injury hospital admissions, is not being minimised. This is evident both in trends over time and with levels of injury harm in parts of Naenae, Taita, Stokes Valley and Wainuiomata being within the top 10–30% across the whole of New Zealand.

Permitted trading hours listed in the Act for on-licences are 8am–4am (the following day) and for off-licences 7am–11pm. The current on-licence hours set in the Hutt City Council LAP are from 7am–1am or 3am the following day, with the opening time outside the permissions set out in the Act. We therefore recommend that the council reduce on-licence opening hours back to 8am (back within the hour of the Act).

Looking at alcohol-related Hutt Hospital Emergency Department attendance for Hutt City residents by day of week and hour of day<sup>1</sup>, there are two key peaks between midnight Friday and 2am Saturday, and midnight Saturday and 2am Sunday. This is a significant trend that should be considered in setting trading hours.

The Supreme Court ruling in 2023 on Auckland Council's Provisional LAP showed that a 9pm closing time (for off-licences) was not unreasonable in light of the Object of the Act. The Court found that the Licensing Authority had extensively reviewed the evidence which indicated that changing the closing time to 9pm was likely to reduce alcohol-related harm.<sup>2</sup>

International and New Zealand studies have found that an increase in hazardous drinking occurs with longer trading hours and increased availability of alcohol. A systematic review of studies found that restricting trading hours of both on- and off-licence premises was typically followed by decreases in the incidence of alcohol-related harm in the form of assault and hospitalisation.<sup>3,4</sup>

International studies found that implementing restrictions in off-licence trading hours was associated with lower consumption of alcohol and a significant reduction in hospital admissions for alcohol-related intoxication, especially in young people.<sup>5,6,7</sup>

### Health NZ recommends reductions in trading hours as follows:

- On-licence premises in the CBD/Petone area to 8am–1am (the following day) ie, not limited to the one-year probation period only.
- On-licence premises in suburbs to 8am–midnight.

- Brothel hours to 8am–1am. Brothels operate under an entertainment-style licence and the sale and supply of alcohol is not the core focus of the business.
- Club licences: Maximum trading hours to midnight.
- Off-licence premises to 9am–9pm.

## **Are there any of the current suburbs with off-licence caps that you think should have their caps removed or changed?**

No. Data provided in the *Public Health Report*<sup>1</sup> as part of the consultation process highlighted that the level of harm is highest for the suburbs that already have a cap (maximum number of off-licences) in place (particularly for alcohol-related injury hospital admissions).

**Health NZ recommends** that current caps in place should not be removed or changed.

## **Should we implement a 'sinking lid' for all or some of the off-licence capped areas?**

Yes for all. Data provided in the *Public Health Report*<sup>1</sup> highlighted that the level of harm is highest for the suburbs that already have a cap (maximum number of off-licences) in place (particularly for alcohol-related injury hospital admissions).

A recent study showed the majority of high-risk drinking occurs from alcohol purchased at off-licence locations.<sup>8</sup> Another study on alcohol-related emergency department presentations found the most common place that patients purchased alcohol from was an off-licence location.<sup>9</sup>

**Health NZ strongly supports** a sinking-lid policy for off-licences in all capped areas.

## **Are there any additional suburbs that should have a cap on the number of off-licences? Where and why?**

Yes. Data provided in the *Public Health Report*<sup>1</sup> highlighted that harm from alcohol is not just limited to the six capped suburbs. Many domicile codes in Lower Hutt show a level of risk ranked in the top 50% across New Zealand.<sup>1</sup> There is therefore an argument for the need to expand the areas which have caps to cover the whole Lower Hutt City area.

Evidence from New Zealand is consistent with international research on the relationship between the density of alcohol outlets, communities, and alcohol-related harm. Where density of off-licences is high, research showed that this is associated with shorter travel distances to outlets, longer opening hours and price competition.<sup>10</sup> Alcohol outlet density is associated with heavy episodic drinking and alcohol-related problems.<sup>11</sup>

**Health NZ recommends** that all Lower Hutt City suburbs have caps on the number of off-licences in place.

## **Additional considerations**

Health NZ recommends consideration of controlling the proximity of off-licences to sites that might be significant to Māori or Pacific Peoples, such as marae and churches. This is important given the disproportionate burden of alcohol-related harm from hazardous drinking for Māori and Pacific Peoples as documented in the New Zealand Health Survey 2022/23.<sup>12</sup>

## References

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12. Ministry of Health. 2023. Annual Data Explorer 2022/2023: New Zealand Health Survey [Data File]. <https://minhealthnz.shinyapps.io/nz-health-survey-2022-23-annual-data-explorer>



## Cancer Society Wellington Division Hutt City Council Local Alcohol Plan Submission

This submission is by the Cancer Society, Wellington Division Along with our other Cancer Society Divisions. We are a registered Charity focused on reducing the incidence and impact of cancer in New Zealand. We are providing comment as alcohol is a key preventable cause of cancer.

### Introduction

We congratulate you for having a Local Alcohol Policy. Local Alcohol Policies are an important tool for managing alcohol harms and the supply of alcohol to protect the community.

We support the review of the Local Alcohol Policy. We hope our submission provides the knowledge and tools for Hutt City Council to strengthen the means to protect the community by implementing evidence-based regulations. The review of the Local Alcohol Policy can better encourage licensed premises to foster positive, responsible drinking behaviour, minimise alcohol-related harm in Lower Hutt, and contribute to Hutt City being a safe and vibrant place to work, live, work and play.

We are mindful that many lives are harmed and lost from alcohol-attributable cancer and that stronger alcohol regulation is needed to minimise the incidence, impact, and inequities of cancer in Aotearoa, New Zealand. In Aotearoa, 2020, an estimated 943 cancers were attributed to alcohol<sup>1</sup> and an estimated 6.6% of cancer deaths were attributable to alcohol<sup>2</sup>. The number of deaths is close to triple that of both the annual road toll and annual deaths from melanoma skin cancers<sup>3,4</sup>.

While addressing the normalisation and glamorisation of alcohol and its significant harms is important, much more is needed. We believe Hutt City Council is taking the right steps to protect its community from alcohol harm by reviewing its Local Alcohol Policy. The Cancer Society Wellington Division supports a much wider review of the Local Alcohol Policy to manage the harms of alcohol. This review aims to equitably impact alcohol availability and advertising as recommended by many national and international reports and research.

In research the Cancer Society New Zealand commissioned (Oct 2023), of the public awareness of cancer risk factors including alcohol, we found that people were generally supportive for stronger

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<sup>1</sup> Rumgay H, Shield K, Charvat H, Ferrari P, Sornpaisarn B, Obot I, Islami F, Lemmens VEPP, Rehm J, Soerjomataram I. Global burden of cancer in 2020 attributable to alcohol consumption: a population-based study. *Lancet Oncol.* 2021 Aug;22(8):1071-1080. doi: 10.1016/S1470-2045(21)00279-5. PMID: 34270924; PMCID: PMC8324483

<sup>2</sup> World Health Organisation. New Zealand Country Cancer Profile;2020. [https://www.who.int/cancer/countryprofiles/NZL\\_2020.pdf](https://www.who.int/cancer/countryprofiles/NZL_2020.pdf) .

<sup>3</sup> Transport. Statistics and Insights; 2023. <https://www.transport.govt.nz/statistics-and-insights/safety-road-deaths>

<sup>4</sup> Arnold M, Singh D, Laversanne, M. Global Burden of Cutaneous Melanoma in 2020 and Projections to 2040. *JAMA Dermatol.* 2022; 157(5):495-503. doi:10.1001/jamadermatol.2022.0160

prevention policies<sup>5</sup>. Furthermore, the Cancer Society Wellington Division completed our own street survey. This followed the 'Less Alcohol, Less Cancer' billboard in Summer 2022/2023 as part of our Alcohol and Cancer Awareness campaign. In response to the billboard, people surveyed volunteered that the harms of alcohol should be treated more like smoking, and there should be reduced accessibility to alcohol<sup>6</sup>.



We are encouraged to read the current Auckland City Council Local Alcohol Policy. This policy reflects their communities' preferences and include:

- restricting trading hours on granting new off-licence alcohol licences. These included a rebuttable presumption against the granting of new off-licences in certain neighbourhood areas.
- temporary freeze on the granting of new off-licences in certain other areas, followed by a rebuttable presumption against granting new off-licences in these areas.

These changes provide an encouraging shift towards protecting the community from alcohol related harms.

**We recommend the Hutt City Council implements the following:**

1. Restrict number of trading hours for off-licences
  - a. Restrict the default maximum trading hours set in the Act to maximum off-licence trading hours from 9am-9pm.
2. Limit the number of off-licensed premises in the Hutt Valley, particularly in specific areas or near certain types of facilities, such as in specific neighbourhoods or near schools or churches.
3. Reduce the density of licensed premises by using the Sinking Lid policy.
4. Improve mechanisms that enable community engagement and feedback.

<sup>5</sup> Peniamina, R., McNoe, B., Signal, L. (2023). Public awareness of cancer risk factors & support for prevention policies in Aotearoa New Zealand: A focus on alcohol and diet. Te Rōpū Rangahau ō Te Kāhui Matepukupuku (Cancer Society Research Collaboration), University of Otago, Dunedin, New Zealand.

<sup>6</sup> Wahab, S. Alcohol causes cancer, so why is it advertised everywhere? 2023. Capital Magazine.

5. Restrict alcohol advertising, particularly in certain areas or near certain types of facilities, such as schools or churches.
6. Prioritise protecting residents from alcohol harm over perceived economic benefit.

## Why change is needed

### Alcohol Causes Cancer

Alcohol is a proven but preventable cause of many cancers<sup>7</sup>. Alcohol increases the risk of cancers of the mouth, pharynx, larynx, oesophagus, bowel, liver and breast (in women)<sup>8</sup>.

Any regular alcohol use (even small amounts) can increase the likelihood of cancer. The more alcohol the greater the risk of developing cancer<sup>9</sup>. Additionally, combining alcohol and tobacco use increases cancer risk further and alcohol's high energy content increases the risk of 12-13 weight-related-cancers<sup>10</sup>. There is no safe minimum level of alcohol use in relation to cancer.

Intergenerational experiences of colonisation, discrimination and inequity in structural and environmental factors have contributed to Māori being burdened by alcohol-attributable cancers<sup>11</sup>. Māori were disproportionately affected by alcohol-attributable cancer with Māori 2.5 times more likely to die than non-Māori and suffering a greater average loss of healthy lifestyle than non-Māori<sup>12</sup>.

Despite alcohol causing considerable harm, including cancer, it has become normalised and readily available, affordable, and has high levels of marketing in our neighbourhoods<sup>13</sup>.

## Recommendation One: Restrict number of trading hours

We commend Hutt City Council for reducing off-licence hours of sale from 7am-10pm (guidelines are 7am-9pm) however we strongly encourage Hutt City Council to continue to reduce the number of trading hours to 9am-9pm maximum.

Restricting off-licence alcohol availability is a key strategy to minimise alcohol-related harm. The weight of evidence suggests that restrictions on opening hours and days of sale are important policy

<sup>7</sup> World Cancer Research Fund, American Institute for Cancer Research. Alcoholic Drinks and the Risk of Cancer.; 2018. <https://www.wcrf.org/sites/default/files/Alcoholic-Drinks.pdf>

<sup>8</sup> Connor J. Alcohol consumption as a cause of cancer. *Addiction* 2017; 112: 222-228

<sup>9</sup> Griswold MG, Fullman N, Hawley C, et al. Alcohol use and burden for 195 countries and territories, 1990–2016: a systematic analysis for the Global Burden of Disease Study 2016. *The Lancet* 2018; 392: 1015– 1035

<sup>10</sup> World Cancer Research Fund. Diet, Nutrition, Physical Activity and Cancer: A Global Perspective: A Summary of the Third Expert Report.; 2018.

<sup>11</sup> Connor, J; Kydd, R; MacLennan, B; et al. Alcohol-attributable cancer deaths under 80 years of age in New Zealand, *Drug Alcohol Review*, May 2017. 36(3): 415-423. <https://onlinelibrary.wiley.com/doi/abs/10.1111/dar.12443>

<sup>12</sup> Connor, J; Kydd, R; MacLennan, B; et al. Alcohol-attributable cancer deaths under 80 years of age in New Zealand, *Drug Alcohol Review*, May 2017. 36(3): 415-423.

<sup>13</sup> Health Promotion Agency. (2018). Trends in affordability of alcohol in New Zealand. Wellington: Health Promotion Agency.



levers for managing alcohol-related harm of the mechanisms available to be used<sup>14</sup>. Restricting the trading hours of licensed premises will have the greatest impact on reducing harm.

The evidence also suggests that for every hour of earlier closing, the further alcohol-related harm will be reduced. Subsequently, research in Australia has shown that for every hour a venue is open after midnight, there was a 17% increase in harm (drink driving, assault, and ED attendance<sup>15</sup>). Figures from the Australian Police show that nationally the predicted rate of alcohol-related offending doubles between 1-2am, doubles again between 3-5am.

Additional evidence suggests that earlier closing times, amongst other measures, can also reduce the risk of pre-loading which is a prevalent issue for most communities<sup>16</sup>. We strongly recommend Hutt City Council further reduce trading hours.

#### **Recommendation to restrict number of trading hours:**

1. Restrict number of off-licence trading hours to 9am-9pm.

### **Recommendation Two: Limit the number of licenced outlets**

We recommend that the number of alcohol outlets continue to be managed through the Local Alcohol Policy. The evidence behind decreasing the number of outlets that sell alcohol to reduce alcohol related harm is strong. As Babor et al (2010) found; "Restricting the number of places where alcohol can be sold has been widely used to reduce alcohol-related problems by limiting consumption<sup>17</sup>".

We recommend limiting the number of off-licensed premises in The Hutt Valley, particularly in Wainuiomata. Wainuiomata has high numbers of alcohol outlets and large proportions of vulnerable populations including young people, Māori and Pacific people. As indicated in the Local Alcohol Policy, Wainuiomata has the highest amount of alcohol-related health problems arising in the district and the largest amount of hospital admissions from 2020-2023.

It is estimated that 75% of all alcohol consumed in Aotearoa is sold from off-licensed premises and there is a disproportionately high number of such premises (particularly bottle stores) in more socioeconomically deprived areas<sup>18</sup>. These premises are known to be a significant concern for many communities<sup>19</sup>. Nationally, they are an important contributor to alcohol-related harm in Aotearoa,

<sup>14</sup> Babor et al (2010). Alcohol No Ordinary Commodity: Research and Public Policy. 2nd ed. Oxford University Press. P.131.

<sup>15</sup> Chikritzhs et al (2002). The Impact of Later Trading Hours for Australian Public Houses (Hotels) on Levels of Violence. Journal of Studies on Alcohol and Drugs. Vol 63:Issue 5

<sup>16</sup> Miller, P et al. (2012). Dealing with Alcohol and the Night Time Economy (DANTE). Final report. National Drug Law Enforcement Research Fund: Australia.

<sup>17</sup> Babor et al (2010). Alcohol No Ordinary Commodity: Research and Public Policy. 2nd ed. Oxford University Press. P.131.

<sup>18</sup> Hay G, Whigham P, Kypri K, et al. Neighbourhood deprivation and access to alcohol outlets: A national study. Health Place. 2009;15(4):1086–93

<sup>19</sup> Cameron M, Cochrane W, McNeill K, et al. The impacts of liquor outlets in Manukau City summary report – Revised. Wellington (NZ): Alcohol Advisory Council of New Zealand; 2012

including the disproportionate impact on the health of Māori<sup>20</sup>. Reducing the number of outlets would provide an opportunity for Hutt City Council to honour their obligations to Te Tiriti o Waitangi and actively protect Māori health.

Reducing the number of stores in the community not only protects the user, but also protects the whole community. A recently completed study based across New Zealand reported that residents felt that alcohol supply, public drinking and intoxication negatively impacts their neighbourhoods, detracting from their positive features and making them feel less safe<sup>21</sup>. Residents also felt that the visibility of alcohol outlets close to schools and food outlets visited by children, alongside public drinking, normalised alcohol and contributed to underage drinking. The majority of respondents said there were too many bottle stores in their suburb and that the easy access contributed to alcohol-related harm in the neighbourhood. Adopting these recommendations will allow the Hutt City Council to positively respond to community voice and concerns.

**Recommendation to limit the number of off-licence outlets:**

1. Restrict the number of off-licences throughout the Hutt Valley (either a temporary freeze and/ or a rebuttable presumption against new licences).

Restricting off-licence alcohol availability is a key strategy to minimise alcohol-related harm and reduce the supply of alcohol to protect the community. This aims to protect the community from alcohol related harm by reducing the proliferation of alcohol outlets in the community.

### Recommendation Three: Reduce the density of licenced outlets

We recommend reducing the density of licenced outlets reduces the accessibility to alcohol. Currently, there are large numbers of outlets that are in close proximity (in Naenae, Taita, Avalon and Stokes Valley), making alcohol easily accessible. These suburbs have large proportions of vulnerable populations including young people, Māori and Pacific people. As indicated in the Local Alcohol Policy, Naenae, Stokes Valley, Taita and Avalon have high rates of alcohol-related health problems arising in the district and high levels of hospitalisation admissions from 2020-2023.

**Recommendation to limit the density of off-licence premises:**

1. Impose a Sinking Lid policy for Wainuiomata to reduce number of outlets and Sinking Lid policy for Naenae, Taita, Avalon, Stokes Valley to reduce density of outlets.

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<sup>20</sup> Connor J, Kydd R, Rehm J, et al. Alcohol-attributable burden of disease and injury in New Zealand: 2004 and 2007. Wellington (NZ): Health Promotion Agency; 2013

<sup>21</sup> Randerson, S., Gordon, L., Casswell, S., Lin, J., Borell, B., Rychert, M., & Huckle, T. (2022) "I feel it's unsafe to walk": Impacts of alcohol supply on public space in eight neighbourhoods, and residents' input to alcohol licensing decisions. Wellington: Te Whatu Ora | Health New Zealand.

## Recommendation Four: Improve mechanisms that enable community feedback

We support the ability for anyone to object to an alcohol licence. We commend Hutt City Council for providing an opportunity for the community to submit to the Local Alcohol Policy. Although the Sale and Supply of Alcohol Act was intended to assist community members to address such harms, alcohol licensing applications can remain largely unseen and the licensing process presents other barriers to successful public engagement, particularly for people with limited resources<sup>22</sup>.

Maynard's Te Tiriti o Waitangi and alcohol law report recommends considerable change of the alcohol regulatory system to become Tiriti-consistent and achieve equity<sup>23</sup>. To increase participation by those who are most affected by the alcohol-harm, we recommend that Hutt City Council provides alternative ways to increase inclusivity for providing feedback.

### **Recommendations to improve mechanisms that enable community feedback:**

1. Utilising the Sale and Supply of Alcohol-Amendment Bill (Community Participation), to have a legislative mechanism to address alcohol harm comprehensively.
2. Enabling Community Participation: Empower diverse communities to influence decisions surrounding alcohol. By streamlining processes and removing special appeals mechanisms, councils can effectively implement controls on alcohol sales, thereby prioritising community health and wellbeing.

## Recommendation Five: Restrict Alcohol Advertising

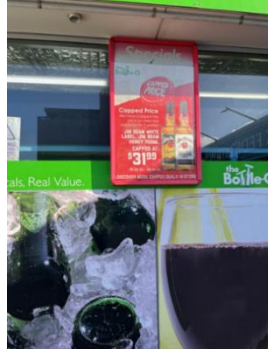
Despite the clear evidence that alcohol products cause cancer, industry spends millions on alcohol advertising, promoting sales and prioritising profit rather than health. Alcohol products are heavily promoted yet alcohol companies often downplay the harm they can cause to health. Research suggests that young people who are exposed to alcohol advertising are more likely to drink more hazardously<sup>24</sup>. We note that there is a large amount of alcohol advertising in the Hutt Valley. Below are some photos of alcohol advertising in Lower Hutt, being more prevalent in lower socioeconomic areas.

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<sup>22</sup> Maynard, K. 2024. Tikanga Māori and alcohol licensing proceedings. Wellington, NZ: Te Whatu Ora | Health New Zealand.

<sup>23</sup> Maynard, K. 2022. Te Tiriti o Waitangi and alcohol law. Wellington, NZ: Te Hīringa Hauora | Health Promotion Agency.

<sup>24</sup> Sargent, J.D, Babor, T.F. (2020). The relationship between exposure to alcohol marketing and underage drinking is causal. *Journal of Studies on Alcohol and Drugs, Supplement*. (s19):113-124.  
<https://doi.org/10.15288/jsads.2020.s19.113>



There is strong public support for stronger restrictions on alcohol advertising and sponsorship, particularly to protect children<sup>25,26</sup>. The Health and Lifestyle Survey study looked at peoples' alcohol related attitudes over time. It reported that 80% of the people surveyed supported increasing restrictions on alcohol advertising and promotion seen or heard by young people. Furthermore, 68% supported banning alcohol related sponsorship of events that people under 18 may attend. We encourage Hutt City Council to protect children and other vulnerable people in the community from harmful alcohol advertising<sup>27</sup>.

#### **Recommendations to restrict alcohol advertising:**

1. Extend the Local Alcohol Policy to a plan that includes banning any alcohol advertising near schools, Marae, community facilities, churches.
2. Implement feedback mechanisms so communities can easily make complaints about alcohol advertising and have processes in place to rectify this.
3. Limiting/prohibiting alcohol sponsorship and alcohol marketing. Council-owned and operated facilities should be shielded from alcohol sponsorship, to promote healthier environments and reduce the exposure of alcohol marketing, especially in settings frequented by children and families.

### **Recommendation Six: Prioritise protecting residents from alcohol harm over perceived economic benefit**

The alcohol industry often downplays the harm of alcohol. We encourage Hutt City Council to prioritise health over profit to protect the community from alcohol harm. The evidence outlines that the large financial burden with the cost of alcohol-related harm remains with the public.

<sup>25</sup> Peniamina, R., McNoe, B., Signal, L. (2023). Public awareness of cancer risk factors & support for prevention policies in Aotearoa New Zealand: A focus on alcohol and diet. Te Rōpū Rangahau o Te Kāhui Matepukupuku (Cancer Society Research Collaboration), University of Otago, Dunedin, New Zealand.

<sup>26</sup> Health Promotion Agency. Alcohol-related attitudes overtime: Results from the Health and Lifestyles Survey. 2018 <https://www.hpa.org.nz/research-library/research-publications/alcohol-related-attitudes-over-time-infographic> (accessed Aug 20, 2019)

<sup>27</sup> Chambers, T, Stanley, J, Signal L, Pearson A, Smith M, Barr M, Mhurchu C. (2018) Quantifying the Nature and Extent of Children's Real-time Exposure to Alcohol Marketing in Their Everyday Lives Using Wearable Cameras: Children's Exposure via a Range of Media in a Range of Key Places. Medical Council and Oxford University Press.



Nationally, total societal cost of alcohol harm in 2023 is approximately \$9.1 billion based on increased risk of morbidity and mortality<sup>28</sup>. Productivity losses were nearly \$4 billion. The societal costs of alcohol span a wide range of impacts due to availability of alcohol in people's lives and the wide range of consequences that alcohol consumption may have. Many of these impact drinkers and non-drinkers alike and have ripple effects affecting multiple sectors and even intergenerational outcomes<sup>29</sup>.

The Local Alcohol Policy works to protect the community from alcohol-related harm by adopting bolder approaches. Again, we encourage Hutt City Council to protect its residents from alcohol related harm such cancers, road crashes, crime, mental illness, suicide, and family harm. These changes would foster positive, responsible drinking behaviour, minimise alcohol-related harm in Lower Hutt, and contribute to Hutt City being a safe and vibrant place to work, live, work and play.

**Recommendations to prioritise protecting residents from alcohol harm over perceived economic benefit:**

1. Implement stronger regulations by the Hutt City Council to safeguard communities from the many societal effects of alcohol.
2. Use better language in the Local Alcohol Policy to reflect adequate public health evidence.

## Closing comments

We appreciate the opportunity to submit on the Hutt City Council Local Alcohol Policy. We are grateful for the work the Hutt City Council does to protect the health and wellbeing of the residents. The Cancer Society Wellington Division is offering support to Hutt City Council where needed. We can offer support by sharing the outcomes of the Local Alcohol Policy on our social media, and provide recommendations, evidence-based advice and community voice to support the work of the Hutt City Council.

Thank you again for the opportunity to submit and we hope you find our submission of benefit. If you have any questions on our submissions or would like to meet, please contact:

Hayley Horne  
Senior Health Promoter- The Cancer Society Wellington Division  
52 Riddiford Street, Newtown, Wellington 6021  
E: hayleyh@cancersoc.org.nz

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<sup>28</sup> NZIER. 2024. Costs of alcohol harms in New Zealand: Updating the evidence with recent research. A report for the Ministry of Health.

<sup>29</sup> NZIER. 2024. Costs of alcohol harms in New Zealand: Updating the evidence with recent research. A report for the Ministry of Health.

## Submission on Hutt City Council's Local Alcohol Policy

Name: Pete Matcham

Address:

Email: petematcham45@gmail.com

I would like to speak to my submission.

I thank the Council for the opportunity to have a say on the proposed Local Alcohol Policy (LAP).

### Summary

1. The latest research into the use and abuse of alcohol<sup>1</sup> confirms that there is a strong body of both national and international evidence that shows that reducing availability and accessibility of alcohol through restricting the times of alcohol sales, reducing the number and density of alcohol outlets have significant impacts on the volume of alcohol consumed and on rates of alcohol-related problems such as assaults, antisocial behaviour, adolescent drinking, domestic violence, drink driving, homicide, suicide and child maltreatment.
2. Restricting off-licence alcohol availability is a key strategy to minimise alcohol-related harm. In New Zealand, almost three-quarters (73%) of all heavy drinking occasions occurs in private homes, enabled by highly accessible, cheap off-licence alcohol.
3. Data provided in the background document shows a highly skewed distribution of alcohol related harm by suburb, highly correlated with areas of social deprivation.
4. As an example, analysis of the underlying data for Naenae over the period 2013 -2023 hospital admissions for alcohol related issues shows a slight decline for males. However this should be considered in context of the 2023 data showing the highest rate since 2018. Even more worryingly, the trend for females over the same period shows a steady increase, with the 2023 figure again matching that for 2018.
5. For alcohol related admission to Emergency Room Attendance (ERA), figures for males are steady across the period (2018-2023) for which data is available. Again, the 2023 year shows a worrying return to 2019 levels against a downward trend over the preceding four years.
6. In contrast, data for ERA for females shows a steady decline apart from 2020, when the country was in lockdown and the figure doubled. Although no causal relationship can be substantiated from the data available to me, the occurrence of this spike against a steady trend; and correlating with the national lockdown, suggests that the only source of alcohol would have been from retail stores for home consumption.
7. This supports the contention in the MoH report that *"the costs of harms from others' alcohol use are likely to exceed the costs of impacts on drinkers as a result of their own alcohol use."*, whether related to intimate partner violence or road traffic accidents.
8. It is clear from the data that the current policy is ineffective in meeting the Council's obligation under the Sale and supply of liquor Act (2012) to give effect to the requirement that *"The harm caused by the excessive or inappropriate consumption of alcohol should be minimised"*.
9. A radical change in approach is required to ensure that alcohol related harm, to say nothing of the associated economic cost is reduced. To achieve this the Council should:

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<sup>1</sup> NZIER. 2024. Costs of alcohol harms in New Zealand: Updating the evidence with recent research. A report for the Ministry of Health

- Institute an immediate sinking lid policy for off licences in all areas. This must include supermarkets.
- With particular reference to the recent Supreme court decision in favour of Auckland Council; reduce the hours of trading for off license premises to 10:00 – 21:00 hours. And a reduction in on licence hours to start at 09:00 for all classes apart from hotels, where the use of 'mini bars' in guest's rooms would make this impractical.

25 August 2024



Hutt City Council  
Private Bag 31-912  
**LOWER HUTT 5040**

By email: [alcohol.feedback@huttcity.govt.nz](mailto:alcohol.feedback@huttcity.govt.nz)

## **SUBMISSION ON THE HUTT CITY COUNCIL LOCAL ALCOHOL POLICY**

### **Summary**

1. General Distributors Limited ("**GDL**") welcomes the opportunity to submit on the Hutt City Draft Local Alcohol Policy ("**DLAP**"). As an off-licence holder in the Hutt City district, GDL has an interest in the matters raised in the DLAP.
2. GDL supports the objectives of minimising alcohol-related harm in the district and the general use of local alcohol policies as a tool for the Council to assist with the safe consumption of alcohol.
3. GDL supports the retention of the current Local Alcohol Policy ("**LAP**") provisions as proposed in the DLAP. However, GDL has serious concerns around the consultation process to date. GDL is particularly concerned about the Council's decision to ask particular questions which could materially change the content of the DLAP at the same time as the release of the DLAP for consultation. GDL considers this approach to be in breach of the Council's statutory obligations.

### **GDL as an off-licence holder**

4. GDL is a wholly owned subsidiary of Woolworths and is responsible for operating Woolworths stores nationwide. GDL owns and operates 190 supermarkets under the Woolworths (formally operating as Countdown supermarkets) 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.
5. 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 contributing positively to New Zealand communities, and our team of more than 20,000 people work hard to deliver safe, fresh and affordable groceries to New Zealanders.
6. 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.

7. In the Hutt City, GDL holds four off-licences: Woolworths Petone; Woolworths Queensgate; Woolworths Lower Hutt; and Woolworths Wainuiomata.

#### **Proposed DLAP, consultation process**

8. GDL supports the retention of the current LAP provisions as proposed in the DLAP, and in particular, those parts of the DLAP relating to off-licensed premises.
9. However, GDL is concerned the Council will fail to meet its statutory consultative obligations should it choose to make material changes to the DLAP upon receipt of the question responses, without providing the public or affected parties with a reasonable opportunity to consult on the amended DLAP. This will not remain a concern if the Council chooses to adopt the current DLAP as the final LAP. The issue lies in the possibility of materially changing the DLAP without providing the public with another opportunity to consult on an updated version.
10. GDL is particularly concerned with the Council's decision to ask questions pertinent to the drafting of the DLAP at the same time as the release of the DLAP for consultation. Inviting the public to answer significant questions on the DLAP at this stage in the process risks poor outcomes. These questions should have been put to the public and key stakeholders **prior** to the DLAP being drafted and released for consultation.
11. At the same time as issuing the DLAP for consultation, the Council has asked questions like whether there are any additional suburbs that should have a cap on the number of off-licences or whether a 'sinking lid' for off-licence capped areas should be implemented, meaning when an off-licence closes its licence cannot be transferred or a new licence granted. These are material issues.
12. The Sale and Supply of Alcohol Act 2012 ("**SAA**") states a territorial authority that wishes to have a local alcohol policy must produce a draft policy, and have regard to the following: district plan objectives and policies; location and opening hours; the number of each type of licensed premises; areas with bylaws prohibiting alcohol in public places; district resident demography; district visitor demography; district resident overall health indicators; and the nature and severity of alcohol-related problems arising in the district.<sup>1</sup>
13. If after producing a draft policy, a territorial authority continues to wish to have a local alcohol policy, the SAA requires the use of special consultative procedure under the Local Government Act 2002 ("**LGA**") to consult on the draft policy.<sup>2</sup>

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<sup>1</sup> Sale and Supply of Alcohol Act 2012, s78(1)-(2).

<sup>2</sup> Sale and Supply of Alcohol Act 2012, s 79(1). The special consultative procedure is set out in s 83 of the LGA.

14. The special consultative procedure requires the Council to ensure certain information is publicly available, including a description of how people interested in the matter will be provided with a reasonable opportunity to present those views and the time to do so.<sup>3</sup>
15. The LGA also requires the Council undertaking any consultation to do so in accordance with certain principles, which includes providing people who will be affected by the decision with a reasonable opportunity to present their views, encouraging affected people to present their views, and giving due consideration to those views when making a decision.<sup>4</sup> The Council must also provide clear information on the purpose of the consultation and scope of the decisions to be taken after views have been presented.<sup>5</sup>
16. The Council's decision to invite the public to respond to questions on very material matters at the same time as the release of the DLAP undermines the public's right to reasonable opportunity to present their views on the DLAP. The questions openly invite public submissions on critical and very significant aspects of alcohol licensing. If the Council chose to amend the DLAP as it currently stands to include a 'sinking lid' approach to off-licence caps, for example, or to include "additional suburbs" for caps, this would have serious implications for businesses like GDL.
17. If the Council chooses to make significant changes to the DLAP in making its decision on the LAP, it will not have fulfilled its consultation obligations listed above. The Council is fundamentally required to give consideration to the views and preferences of persons likely to be affected by, or to have an interest in, a matter in the course of its decision-making process.<sup>6</sup> GDL is affected by the LAP and the Council must give consideration to its views on the matter.
18. There is no clarity regarding how the Council plans to incorporate the responses to these questions into the process. As set out above, this is an obligation the Council must meet under the principles of consultation.<sup>7</sup> There has been no indication as to what extent, if at all, the answers will influence the DLAP. GDL seeks transparency regarding the treatment of these responses, and confirmation of the opportunity the public will have to submit on any amendments made to the DLAP as a result.

### **Relief sought**

19. GDL seeks the Council retains the current LAP provisions as proposed in the DLAP.

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<sup>3</sup> Local Government Act 2002, s 83.

<sup>4</sup> Local Government Act 2002, Part 6.

<sup>5</sup> Local Government Act 2002, Part 6.

<sup>6</sup> Local Government Act 2002, s 78(1).

<sup>7</sup> Local Government Act 2002, s 82(1)(c).

20. Should the Council choose to make further material amendments to the DLAP (for example including a 'sinking lid' approach to off-licence caps, or including "additional suburbs" for caps) the Council must ensure the public has the opportunity to comment on those changes. Failure to do so is a breach of the Council's statutory obligations.

Yours faithfully



Paul Radich

**General Distributors Limited**

## Submission on Hutt City Council's Local Alcohol Policy

Name: Pete Matcham

Address:

Email: petematcham45@gmail.com

I would like to speak to my submission.

I thank the Council for the opportunity to have a say on the proposed Local Alcohol Policy (LAP).

### Summary

1. The latest research into the use and abuse of alcohol<sup>1</sup> confirms that there is a strong body of both national and international evidence that shows that reducing availability and accessibility of alcohol through restricting the times of alcohol sales, reducing the number and density of alcohol outlets have significant impacts on the volume of alcohol consumed and on rates of alcohol-related problems such as assaults, antisocial behaviour, adolescent drinking, domestic violence, drink driving, homicide, suicide and child maltreatment.
2. Restricting off-licence alcohol availability is a key strategy to minimise alcohol-related harm. In New Zealand, almost three-quarters (73%) of all heavy drinking occasions occurs in private homes, enabled by highly accessible, cheap off-licence alcohol.
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<sup>1</sup> NZIER. 2024. Costs of alcohol harms in New Zealand: Updating the evidence with recent research. A report for the Ministry of Health

- Institute an immediate sinking lid policy for off licences in all areas. This must include supermarkets.
- With particular reference to the recent Supreme court decision in favour of Auckland Council; reduce the hours of trading for off license premises to 10:00 – 21:00 hours. And a reduction in on licence hours to start at 09:00 for all classes apart from hotels, where the use of 'mini bars' in guest's rooms would make this impractical.

Ajay Pratap

Q1. What is your name? Ajay

Q2. Are you representing an organisation? No

Q3. What is the name of the organisation? not answered

Q8. Of the current suburbs with off-license caps, should the caps be changed or removed?

Q9. If you chose to change/remove caps, why? not answered

Q10. Are there any additional suburbs that should have a cap on the number of off-licenses? Please list any and why you think they should have a cap. not answered

Q11. If you have any additional comments on off-license caps please write them below. not answered  
I would support a 'sinking lid' for off-licenses Disagree

Q12. What do you think of a 'sinking lid' for off-licenses in some or all of our capped areas?

Q13. Tick each capped area you think a 'sinking lid' should apply in. not answered

Q14. If you have any additional comments on a 'sinking lid' please write them below. not answered  
Off-license (7am-10pm) Maintain the trading hours On-license: taverns, hotels, nightclubs and function centres (7am-3am) Maintain the trading hours On-license: restaurants and cafes (7am-1am) Lengthen the trading hours On-license: caterers (7am-3am in CBD and Jackson St, otherwise 7am-1am) Maintain the trading hours On-license: hotels (24 hours) Maintain the trading hours Brothels (Match operating hours) Maintain the trading hours Cinemas (7am-3am) Maintain the trading hours

Q15. Should the trading hours be changed or maintained?

Q16. If you chose to change the trading hours, how would you change them and why? not answered

Q17. If you have any additional comments on trading hours, please write them below. not answered

Q18. Would you like to present your feedback to Councillors at a public hearing?