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Alcohol Advisory Council of New Zealand

**Annual Report**  
for the Year Ended 30 June 1992

Released under the Official Information Act 1982

ALAC • Helping people make healthy choices about alcohol



Report of the  
**Alcohol Advisory Council of New Zealand**  
for the year ended  
30 June 1992

Presented to the House of Representatives  
Pursuant to Section 38 (1) and (2)  
of the Alcoholic Liquor Advisory Council Act 1976

Released under the Official Information Act 1982

## CHAIRMAN'S MESSAGE

My first year as Chairman of the Alcohol Advisory Council has been a very eventful one.



John Collinge

During this year, the Council has moved from an organisation which had a very broad base of functions, to one which is streamlined and highly focused.

The ministerial review was a major factor in this new direction. While it reinforced the value of our previous activities, it also suggested that the Council should concentrate more of its energies on providing policy advice to the Government, treatment agencies, health professionals and the public. It recommended that ALAC put more emphasis on joint venture activities to promote the moderation message and that ALAC's focus be on funding of services rather than providing them.

I am pleased to say the Council has fulfilled these goals. ALAC has succeeded because it is approaching the crucial issues of alcohol misuse as a team – both internally, with its own group of highly committed people, and externally, by working closely with the health sector and the alcohol industry.

Granted, there are tensions from time to time – particularly between the alcohol beverages industry and community health interests. But these are healthy tensions which ALAC is harnessing and resolving through a researched, reasoned and professional approach. It is ALAC's role to be objective in relation to such competing pressures.

In the last year we have significantly raised the level of awareness of alcohol issues through the Host Responsibility campaign, which focuses on the prudent serving of alcohol.

This success has been achieved through the co-operation of the Beer, Wine and Spirits Council, the Department of Health, the Public Health Association, the Federation of Service Workers Unions, the Hotel Association, the Ministry of Transport, the Hotel and Catering Industry Training Board and the Licensing Trust Association. I look forward to the continuing success of this campaign and to continuing co-operation with such bodies.

I must also pay tribute to our chief executive officer, Keith Evans, for this accomplishment. He has worked tirelessly to bring the moderation message to the fore.

The high regard in which he is held has been evident. His expertise and energy have been a key factor in the Council's achieving its stated aims.

Next year we will be faced with new challenges. We are prepared for those. We will continue to marshal our resources to minimise abuse by attacking the problem areas.

The Council has acknowledged that we are entering a new era in the alcohol debate where the beneficial effects of moderate alcohol consumption have to be recognised.

It is not alcohol per se that is the problem, but the abuse of it.

Our role will be to emphasise the consequences of misuse and find practical ways of assisting the community in solving these problems.

The continued goodwill and co-operation of all agencies and industry-related organisations will be essential if we are to build on our work so far and achieve these goals.

*John Collinge*  
Chairman

## CHIEF EXECUTIVE OFFICER'S MESSAGE

It has been a landmark year for the Alcohol Advisory Council.

A ministerial review, the introduction of health reforms and the advent of alcohol brand advertising have all influenced the Council's life over the past 12 months.

ALAC has become more tightly focused in its

direction to decrease the problems associated with alcohol use.

The review, the first in the Council's 15 year history, endorsed ALAC's role in the liquor debate, restating that to function effectively it needed to remain autonomous, retain its alcohol only focus, and continue to be funded by a levy obtained from alcohol consumers.

More importantly the review reinforced ALAC's role as advisor and researcher in the public interest.

It also gave ALAC the opportunity to change with the times – removing references like 'evils' from its legislation – and to change its name to the Alcohol Advisory Council of New Zealand. But more importantly, it refined our roles; reinforcing drinking practices which are unlikely to lead to alcohol-related problems and focusing efforts on the minority of consumers who have significant problems with alcohol.

The health reforms also heralded change – most of which will not be felt until 1 July 1993 when it is expected ALAC will hand over maintenance funding of treatment agencies to the new Regional Health Authorities. ALAC is committed to working with the new structures. It will continue to provide 'seed' funding for new and innovative treatment programmes. ALAC will continue to focus on the needs of the treatment sector.

The alcohol brand-advertising debate was another turning point in the Council's year. Although the Broadcasting Standard's Authority's decision to allow brand advertising was contrary to ALAC's submission, ALAC decided its responsibility was to focus attention on the outcome of the changes. The Council initiated seven research projects to monitor and assess the effects brand and moderation advertising has on the nation. The results of these will not be known until the end of the two year trial period.

The decision to allow advertising included a provision to make available almost \$2 million worth of television and radio advertising airtime for the promotion of moderation messages. Some of this airtime has been used for this year's successful 'Host Responsibility television campaign. This focused on the responsible dispensing of alcohol in a social environment. According to research commissioned by ALAC, the television component of this campaign reached more than 60 per cent of its target audiences – namely, young men and women aged between 15 and 39 years of age.

But the promotion also reached into the heartland of the alcohol industry

– the taverns and liquor stores – and we must thank those in the industry for that. The Council realises that it cannot spread its message without the continued cooperation of the alcohol industry, the public health sector and the service workers.

The success of our work reflects the dedication of the ALAC staff. I would like to acknowledge their commitment in providing a high level of quality service in a year which saw many difficult changes.

It has been a fruitful 12 months and I would like to conclude by outlining what I consider ALAC's major achievements to have been.

Aside from the success of our national promotions, we are proud to have assisted in the establishment of a Registration and Accreditation Board which allows publicly funded agencies to register their organisation's programme to a nationally recognised standard.

ALAC also confirmed itself as a world leader with its Maori programme, Kua Makona ('a little is enough'). The programme looks at the causes of alcohol abuse amongst Maori and lets Maori take responsibility for identifying and resolving problems.

Anti-alcohol abuse organisations in Australia and Fiji joined Russia, Canada and the United States, in adopting the Kua Makona model for use within their ethnic communities.

ALAC has made great strides. I think it can claim credit for a major shift in the way alcohol is regarded in this country. As a community we are becoming more conscious of our drinking habits. The subject of alcohol and its related problems are more openly discussed. ALAC has been at the forefront of this development.

New Zealand is at a crossroads, entering a new era in which it is appropriate to acknowledge the benefits of sensible alcohol consumption.

But our optimism is measured. New Zealand is the number one beer drinking country in the English speaking world. It ranks 18 out of 31 in overall alcohol consumption. Forty two per cent of motor accident deaths are attributable to alcohol. Alcohol misuse is implicated in a wide range of health, social and economic problems for the nation.

We know it would be inappropriate to wage war on alcohol itself. New Zealanders are interested in learning to live with alcohol and in putting it in its rightful place in their lives. To do this we have to develop positive strategies that combat alcohol-related problems.

We have to enliven debate, enlighten and educate. ALAC is a group of people who are committed to doing this. We will continue to do so.

*Keith Evans*  
Chief Executive Officer

## OVERVIEW

### ALAC – what it is?

The Alcohol Liquor Advisory Council of New Zealand was established in 1976 as the result of a Royal Commission of Inquiry into the sale of liquor in New Zealand.

The Commission recommended the establishment of a permanent council whose aim was to encourage responsible alcohol use and minimise alcohol misuse. Its goal, as updated in the recent ministerial review, is:

- 'The promotion of moderation in the use of alcohol and the development and promotion of strategies which will reduce alcohol-related problems for the nation.'

The Council is not opposed to alcohol per se, but is committed to reducing its misuse. Hence our mission statement:

- 'Helping people to make healthy choices about alcohol.'

To fulfil this goal ALAC works in the fields of research, data collection and distribution, health promotion, education, public policy, and funding.

The Council is funded by a user pays levy on alcohol which in the last year provided for a budget of \$5.62 million.

Its six members are appointed by, and report to, the Minister of Health.

### The review

In February 1991 the Associate Minister of Health, Hon Maurice Williamson, called for a review of the Alcoholic Liquor Advisory Council.

Since the Council had been in operation 15 years, the Government considered the time opportune for an assessment of progress to date.

The review team comprised two Auckland lawyers, Mr Alan Dormer and Ms Patricia Schnauer.

Review findings were reported back in July.

The team endorsed ALAC's role in promoting the message of moderate alcohol use, praising in particular the Council's treatment programmes, prevention education campaigns (Say When and Host Responsibility), its Maori

programme and its Employee Assistance Programmes (EAPs).

It recommended the Council strengthen its role as a policy and treatment advisor, prevention/education facilitator and co-ordinator of alcohol programmes. It also advised working with the alcohol beverage industry where appropriate.

These recommendations were substantially endorsed by Cabinet. ALAC has recommitted itself to its new 'look'.

In its early years, ALAC focused much of its attention on treatment. Today it plays a stronger role in the promotion of moderation in alcohol consumption and the development of positive strategies to reduce alcohol-related problems.

The review endorsed the Council's status as New Zealand's principal advisor on alcohol-related matters.

Its advisory responsibilities are directed primarily, toward the Government although it advises, where appropriate, the wider health, community, commercial and public interests.

Policy advice is based on analysis of international and locally produced research, clinical, promotional and treatment experience, taking into account New Zealand's unique environment.

### Brand advertising

Alcohol brand advertising on television and radio was approved by the Broadcasting Standards Authority on a two year trial basis beginning 1 February 1992.

Although ALAC did not support the initiative, when it was approved by the Broadcasting Standards Authority, ALAC considered it had a duty to make sure that advertising changes were controlled by strict conditions. ALAC established a research protocol to evaluate the effects of advertising, the results of which will not be known until the end of the two year trial.

Until then, ALAC will act if it considers any advertisement infringes on the public good. Already ALAC has contributed to the withdrawal of one 'irresponsible' television brand advertisement.

The introduction of brand advertising made available \$2 million of free television and radio commercial air time.

This free air time has greatly assisted the Council's promotion of the moderation message. Through the arrangement, ALAC will have spent over \$700,000 and have received another \$1.8 million worth of free television time to March 1993.

### Health reforms

Health reforms contained in the 1991 Budget created a new environment for health service providers like ALAC. The Council's role as treatment funder is to change from 1 July 1993.

The new Regional Health Authorities will have major responsibility for treatment funding. ALAC will provide seed funding for innovative and experimental programmes.

Sobering signs: Erecting one of the nine 'Drive Sober' billboards at Atawhai, Nelson. Photo: courtesy Nelson Evening Mail

### Regional and community-based development

The Council is actively encouraging Area Health Boards to appoint health promotions advisors to deal specifically with alcohol-related issues. There are currently 24 people working in this field.

A paper on future training needs for health promotions workers written early in the year led to an ALAC initiated meeting for representatives of organisations and institutions with an interest in training health promoters.



Responsibility for developing training opportunities has been picked up by the Central Institute of Technology and the Health Promotion Forum.

As part of a national training strategy, a series of two day workshops on relapse prevention and management were held in Auckland, Wellington and Christchurch by British clinical psychologist, Steve Rollnick.

ALAC's regional offices have been actively involved in advising outside agencies on funding issues. This included advising funders such as Lottery Welfare, the Roy MacKenzie Trust and the Inter-departmental Committee on Substance Abuse.

ALAC continues to 'seed fund' community health promotion initiatives.

During the course of the year ALAC undertook major reviews of Queen Mary Hospital (Hanmer Springs), the Canterbury Area Health Board's detoxification service, services in Kaikoura and Te Whai Ora in Christchurch.

The Council also assisted the Nelson /Marlborough Area Health Board to develop a plan for its alcohol and drug service.

Through its two regional offices (Auckland and Christchurch) ALAC continues to provide an indispensable service to alcohol and drug workers.

Overwhelming support for the continuation of ALAC regional offices by

alcohol and drug agency workers was noted by the ALAC reviewers.

### Research

ALAC's review reinforced research in the alcohol-related field.

Because the Council has an obligation to provide the Government and the community with the best possible policy advice, it is essential that it maintains its ongoing commitment to research projects.

In May ALAC approved seven research projects on alcohol brand advertising worth more than \$200,000 over the next two years. The projects are part of ALAC's commitment to monitor the new Broadcasting Standards Authority code on radio and television alcohol promotion.

The research is not solely focused on brand advertising. It also addresses moderation messages.

The results of this research will be provided to Government, the Broadcasting Standards Authority and other interested parties. We hope these will provide high quality information for decision-makers.

ALAC funds the collection of information from those attending treatment centres.

The Council works closely with the Health Research Council to meet its research objectives.

### Kua makona 'a little is enough'

The Council's Maori programme, Kua Makona or 'a little is enough' looks at the causes of alcohol abuse amongst Maori and lets Maori take responsibility for identifying and resolving their problem.

The programme urges iwi to take responsibility for alcohol misuse amongst their own people.

Its approach is primarily holistic, acknowledging that the spiritual dimension of Maori is just as important as the physical. The mental, physical, emotional and spiritual wellbeing of the family, or whanau, are thus reinforced.

Geographically programmes which relate specifically to Maori operate where there is easy access to them – specifically the community and the marae. Currently this means 36 of the country's 42 iwi have programmes in place.

ALAC has supported Maori Resource Centres in Christchurch and Rotorua and in the last year has helped found two new Maori units in Auckland and the Hawkes Bay. Units in Invercargill, Christchurch, Porirua, Rotorua and Hamilton have grown with the appointment of managers operating programmes appropriate to each region's particular needs.

Details from three posters of whakatauki, traditional Maori sayings. Top: Te Hau Oranga o te taha tinana, Te Hau Oranga o te taha Hinengaro, Te Hau Oranga o te taha Wairua.



(The healing wind of the body, The healing wind of the mind, The healing wind of the spirit); Middle: Mahia, nga Mahi o Nga Tamariki. (Carry out the work of caring for children); Lower: I Whea Koe i te tangi o te Hororiro? (Where were you when the grey warbler sang?)

Photos: Mark Adams

ALAC has focused considerable energy and resources on health promotion work within Maoridom. By the end of 1992 there will be five full-time workers in this area.

Kua Makona has gained national and international recognition as a programme that works. It has been adapted for use in alcohol advisory agencies in Russia, America, Canada and Germany. In the last year, Australia and Fiji have joined that list.

This success has been attributed to the programme's flexibility in allowing indigenous races to develop programmes appropriate to their particular culture.

The strong 'motivational' component to the programme, encouraging people to take up cultural and social opportunities, is also responsible for the programme's success.

In July 1992 Kua Makona is the subject of a keynote address at the World Indigenous Conference on Addictions in Alberta, Canada.

The Aotea Women's Consultancy Document was completed in June 1992 after two years work. Involving thousands of hours of interviewing and discussion, it identified an increase in alcohol consumption amongst young Maori women. Following further consultation this document will be published.

Research in the last year has studied alcohol impaired driving by Maori men. This is still in progress.

The emphasis of Kua Makona has been on training Maori health workers. The Central Institute of Technology offers a two year Maori addiction studies course in which 50 Maori students are currently enrolled.

### National promotions

In the last year the Council has continued to fund a series of national public health promotions.

These have taken the form of two key messages; *Say When* promoting the consumption of alcohol in moderation, and *Host Responsibility* promoting the serving of alcohol in moderation.

Examples of Host Responsibility promotional materials.



Launched in August, the Host Responsibility programme focused on the sensible provision of alcohol in places where alcohol is served – particularly licensed premises/off-licenses and in the domestic setting. Its key message is: 'hosts want their guests to have a good time that they will live to remember.'

The programme is managed by a national working party made up of representatives from the Public Health Association, the Beer, Wine and Spirits Council of New Zealand, the Department of Health, the Federation of Service Workers Union of Aotearoa, the Hotel Association of New Zealand, the

Col'n Carpenter in the highly successful Host Responsibility television campaign. Photo: Barry Armstrong

Ministry of Transport, the New Zealand Hotel and Catering Industry Board (Inc), the New Zealand Licensing Trusts Association (Inc), the Public Health Association of New Zealand (Inc) and ALAC.

A range of promotional material was used to popularise the message of Host Responsibility. These included, information kits, posters, badges, transfers, stationery, leaflets, presentation folders, 'bar-wobblers' (stand-up cards which shake), and a newsletter called *Serve 'em Right*.





A fully illustrated handbook of national guidelines was released to commercial and private hosts, again stressing the need for prudence when serving alcohol to guests.

A range of posters focussing on under-age and intoxicated persons was also developed. These relayed their message through a series of punch-lines, such as: 'The Beer Should Be Drunk – Not You', 'Please Don't Give Us A Minor Problem' and 'A Good Wine Is The Right Age – Are You?'.

Both the Say When and Host Responsibility campaigns effectively incorporated television advertising to convey their messages. In both cases, Australian comedian, Kim Gyngell, alias Col'n Carpenter from the television show The Comedy Company, was used to convey the messages.

Research commissioned by ALAC found that the Host Responsibility commercials reached more than 60 percent of their target audience – 15 to 39 year olds.

In the next year ALAC will be expanding the Host programme to target the serving of alcohol in the workplace.

A Maori component to the campaign, targeting marae, will also be unveiled.

A further television commercial will be introduced, emphasising over-serving and the importance of providing non-alcoholic alternatives in private homes, sports clubs and the workplace.

### **Employee assistance programmes**

Established in 1977, the Employee Assistance Programmes (EAPs) are designed to promote the awareness of alcohol in the workplace by targeting performance problems.

It was recognised early on that the EAP model had the capacity to reach beyond the alcohol specific problem and address the wider range of factors that can influence a persons work performance. This means that EAP services address things like bereavement, trauma, domestic disputes, gambling-related problems, redundancy and financial difficulty.

On 1 November 1991, EAPs became stand-alone enterprises operating throughout a number of organisations around the country.

The decision to allow EAPs to become a stand-alone enterprise is a recognition of the programmes 'broad-brush' nature.

Organisations that have joined in the last year include Magnum Corporation, Fletcher Challenge, Comalco and the DSIR.

Employee Assistance Programmes have been shown internationally to significantly increase the likelihood of positive outcomes for employees experiencing problems at work.

### **Information services**

The Council's information services remain in constant demand.

Requests for books, videos and publicity material are received from schools, district licensing agencies, medical practitioners and health promotion workers at the rate of approximately 200 per week. ALAC's Wellington office is one of the heaviest lenders of material in the New Zealand library interloan network.

Researchers and service-providing agencies are kept abreast of overseas developments through the extensive library network. In the last year the Council's publications budget has been increased and more than 100 new books have been purchased.

Demand for information has increased with the advent of liquor brand-advertising as attention has turned to the nature of the relationship between alcohol advertising and alcohol consumption. There is also an increasing interest in literature related to motivational interviewing.

A system of charging for requests in excess of 20 copies has not diminished the demand for the service and the income generated has enabled further material to be obtained.

During the course of the year ALAC developed a Self Help Manual for people experiencing difficulties with

drinking. This formed the basis of a paper presented to the Perspectives For Change conference in November.

### **Education programmes**

The Council is actively involved in the provision of educational resources in schools.

Teachers in 80 per cent of all New Zealand secondary schools have been trained in the 'Alcohol and Drug Programme' which is administered by the Combined Colleges of Education.

The programme is 'needs based' and relies on students to identify the information they require. Using methods such as role plays, it focuses on the skills of self-direction and decision-making rather than scare tactics.

In 1992 the Council is funding an evaluation of the High School Alcohol and Drug Education programme. Protocols for evaluating other school resources are also being considered.

### **Professional training**

ALAC has been funding the training of alcohol and drug counsellors since 1978. For most of this period the Council has been the sole training fund source.

Currently, training for alcohol and drug workers is carried out by the Central Institute of Technology's locations in Auckland, Hamilton, Wellington,

Christchurch and Dunedin. This provides a national training opportunity for 110 full-time trainees in the alcohol and drug sector. ALAC has funded the appointment of a Maori tutor to the Combined Institute of Technology so that programmes for Maori can be enhanced.

Carol Wilson, manager, alcohol and drug service, Auckland Area Health Board at the Perspectives for Change Conference.



ALAC also funds a lectureship in primary health care at Victoria University's Department of Nursing Studies. A requirement of this funding is that alcohol-related issues are taught as part of the curriculum.

General practitioners are made aware of alcohol-related illnesses through a co-sponsored arrangement with the Royal College of General Practitioners.

In October, more than 300 education, prevention and treatment workers in the alcohol field gathered in Wellington for the 'Perspectives For Change' conference, the first international conference of its type. ALAC co-funded this important initiative with the New Zealand Drug Foundation.

### Treatment

ALAC's treatment programme in the last 12 months has been devoted to linking health promotional activities and prevention initiatives with treatment services. There are approximately 85 treatment agencies operating in New Zealand in 1992.

A major focus of ALAC's treatment programme this year has been the introduction of early and brief interventions, targeting those in difficulty or most at risk from alcohol abuse.

These are operated by training general practitioners and other primary health and social care workers to identify, assess and intervene with those most at risk from alcohol abuse before the problems develop.

Another major new initiative was the introduction of 'motivational interviewing', enabling clients to confront the realities of their situation, and, through this, solve their own problems.

In the last 12 months, 90 per cent of New Zealand's 85 treatment agencies will have been exposed to motivational interviewing techniques.

The Council has improved the quality of its service to communities with particular needs – particularly women, Maori, lesbian and gay men. ALAC, in conjunction with the New Zealand Aids Foundation, co-wrote and published the book *Making Visible* which promoted prevention and treatment initiatives for lesbians and gay men. *Making Visible* has been sold and reviewed internationally to wide acclaim.

The treatment theme of the 'Perspectives For Change' conference was 'Relapse, Prevention, Treatment and Maintenance' and guest speakers included Professor Larry Wallack (USA), Professor Eric Single (Canada) and Dr Peter Anderson (England), all leaders in the alcohol field.

A Registration and Accreditation Board was established to allow publicly funded agencies to register their programme to a nationally recognised standard. Presently a minimal standard is available for registration. In the next year an optimal standard will be added. Previously nothing was in place to record an organisation's competency to practice.

ALAC has spent more than \$1.2 million in supporting treatment services in the last year.

THE FUTURE

New Zealanders drink more beer than any other country in the English-speaking world. In overall alcohol-consumption terms, New Zealand ranks 16 out of 31 developed countries surveyed in 1991.

New Zealanders drink more than Americans, the English and Canadians and less than the French, Spanish and Germans.

While the Alcohol Advisory Council is not averse to the consumption of alcohol in moderation, it is aware that the level of alcohol consumed by a nation is a reasonable indicator of the level of alcohol-related damage.

In New Zealand this is certainly the case. In the last year approximately 12,000 people have been treated for alcohol-related illnesses in New Zealand. Alcohol was a contributing factor in 42 per cent of all road accident deaths – equivalent to 279 of the 651 people killed in road accidents in 1991.

ALAC acknowledges that it cannot entirely rid society of alcohol-related illness or death. But it believes it can reduce the numbers through an ongoing programme of positive planning.

In the next year the Council will continue to charge its energies to monitoring, evaluating and promoting programmes aimed at fighting alcohol abuse.

ALAC's public education programme will be intensified through its corporate Host Responsibility programme, carried out in conjunction with the alcohol beverage industry and community health promotion workers. Sports clubs and the workplace will be the emphasis of this part of the campaign.

ALAC will be represented at a world symposium on alcohol abuse in Glasgow, Scotland.

The Council will continue to change with the times and the mood of the population in its effort to spread its message.

ALAC believes, and international consensus would agree, that there is a maturing understanding that alcohol has a rightful place in peoples lives.

The population wants to know how to live with alcohol. Clearly approaches which are anti-alcohol or pro-abuse will not and can not solve problems.

Statistics prove that ALAC is making significant headway in its fight to raise the awareness of alcohol issues. But it is realistic enough to appreciate that the fight against alcohol-misuse is one that will never be won by simply assailing the alcohol.

It has to go to the heart of the matter – namely, the people – and appeal to their sensibilities.

We are committed to a public health approach which focuses attention on the product, the consumer and the environment in which the product is consumed.

ALAC cannot do this alone. It requires everyone's help, the policy-makers, the health professionals, the alcohol industries, service workers and yours, as the reader of this passage.

The community must work together if alcohol abuse is to be curtailed.

In 1992/93 ALAC will continue to develop new programmes, and draw on new help, in its effort to satisfy these goals.

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**WHO'S WHO AT ALAC - JUNE 30, 1992**

Chairman  
JOHN COLLINGE

Council  
DR BILL BLACK  
JIM BORROWS

TONY JOHNS (representing the  
Director General of Health)

Chief Executive Officer  
KEITH EVANS

Director Corporate Services  
HELEN MIDDLETON

National Programme Advisor  
IAN MacEWAN

Manager Maori Programme  
MARGARET MANUKA-SULLIVAN

Manager Information Services  
ROGER MARTIN

Manager Northern Region  
JANETTE CURTIS

Manager Southern Region  
GREG ARIEL

Co-ordinator Host Responsibility  
JENNIFER HEWITT

Senior Accounts Clerk  
JENNY HARPER

Information Officer  
BARBARA DEVEREUX

Senior Administrative Assistant  
ADRIENNE ADAIR

Administrative Assistant  
WENDY ARAHANGA

Administrative Assistant  
ROZ BRENSSELL

Administrative Assistant  
MEGAN LANGFORD

**RESEARCH UNDERTAKEN FROM  
ALAC FUNDING 1991 - 1992**

1. Alcohol abuse, defenestration, vitamin A metabolism, cirrhosis and cancer (Professor R. Fraser, Christchurch School of Medicines).
2. Christchurch alcoholism relapse study (Dr. D. Sellman, Sunnyside Hospital and Professor P. Joyce, Christchurch School of medicine).
3. Alcohol tracking survey (APHRU).
4. Omnibus survey ALAC advertisement (APHRU).
5. Longitudinal study (APHRU).
6. Wine sales in supermarkets (APHRU).
7. Sale of Liquor Act (APHRU).
8. Monitoring of brand advertising
  - a. Children and young persons responses (APHRU)
  - b. Adult responses (APHRU).
  - c. Documenting patterns of advertising (APHRU)
  - d. Adherence to the code (Dialogue Consultants)
  - e. Analysis of advertisements (Education Research and Development Centre, Massey University)
  - f. Christchurch late night commercial radio (Health Research Services)

(APHRU = Alcohol and Public Health Research Unit)

**PUBLICATIONS IN PRINT****PERIODICALS**

Say When Newsletter (quarterly)  
Infoaddict (five times a year)  
ALAC Library Periodical Contents Pages (five times a year)

**PAMPHLETS**

ALCOHOL - FACTS AND EFFECTS  
WORRIED ABOUT A DRINKING PROBLEM?  
WHY DO WE DRINK ALCOHOL?  
ALCOHOL AND PREGNANCY  
A SPLASH OF FLAVOUR  
SAY WHEN STICKERS  
HOST RESPONSIBILITY (New for '92)  
HOW MUCH IS TOO MUCH

**POLICY SHEETS**

Responsible Hosts  
Moderation in Action

**POSTERS**

A Few Swallows Can Ruin Your Summer (cartoon poster in colour produced in co-operation with the N.Z. Water Safety Council with the message that 'boozing and boating don't mix')

Effects of Alcohol on the Body (diagram showing the immediate and long term effects of alcohol on various parts of the body)

Alcohol Can Make You ... (cartoon poster showing increasing negative effects as you drink more alcohol)

Having a Party?  
(colour poster illustrating four rules to make sure everyone has a good time)  
NEW FOR '92

You Hit the Booze and the Booze Hits the Baby!  
(colour cartoon poster on alcohol and pregnancy)

Are Your Friends Killing You With Kindness?  
(‘Say When’ Message about the effects of peer group pressure)

Drunken Behaviour  
(black and yellow posters)

Say When Wall Planner 1992  
NEW FOR '92

**BOOKLETS**

Thinking of Drinking Alcohol  
(booklet originally produced for school leavers but now available for wider distribution)

National Guidelines on Host Responsibility NEW FOR '92

Making Visible  
NEW FOR '92  
(how to improve services for lesbians and gay men)

Drinking in New Zealand

Handbook on Alcoholism for Medical Practitioners

N.Z. Alcohol Related Social Research Abstracts  
VOL. 2 NEW FOR '92

N.Z. Alcohol/Drug Outpatient Statistics 1989

**INFORMATION SHEETS**

Thinking About Drinking  
(rules for sensible drinking written for teenagers)

Nutritional Concerns in the Alcoholic  
(reprint of a review article for dietitians, nurses and doctors by Dr A. Roe)

Questionnaire Screening Tests for Alcoholism  
(revised Michigan Alcoholism Screening Test (MAST), short MAST, and CAGE questionnaires)

Non-problem Drinking Outcomes: The Data on Controlled Drinking  
(reprint of an article by Dr P.E. Nathan)

Some Characteristics of Families with Alcohol Abuse  
(reprint of an article by Dr S.J. Wolin)

New Zealand Alcohol Consumption Statistics  
(tables showing consumption since 1955 plus a table of international comparisons for 1987)

Fetal Alcohol Effects in Humans and Animals  
(a 10 page state-of-the-art review directed to doctors and nurses)

Alcohol and the Elderly  
(a review article pointing out the special considerations that older people should take into account when drinking alcohol)

Children of Alcoholic Parents: Inherited and Psychosocial Influences  
(a review article identifying the features that make this a high risk group for becoming future alcoholics and therefore an important target group for preventive efforts)

Why Do People Start Drinking?

Sale of Liquor Act 1989 Summary

Getting Active on Host Responsibility

Alcohol Consumption in New Zealand  
NEW FOR '92

**ALCOHOL ADVISORY COUNCIL OF NEW ZEALAND  
OPERATING STATEMENT FOR THE FIFTEEN MONTHS ENDED 30 JUNE 1992**

|                                | NOTES | 1992<br>\$              | 1991<br>\$              |
|--------------------------------|-------|-------------------------|-------------------------|
| <b>INCOME</b>                  |       |                         |                         |
| Levies                         | 2     | 6,204,923               | 6,184,830               |
| Interest from Investments      |       | 82,770                  | 179,931                 |
| Sale of Publications           |       | 24,559                  | 14,342                  |
| Other                          |       | 1,344                   | 15,882                  |
| E.A.P. Income                  |       | 64,604                  | 139,959                 |
|                                |       | <u>6,378,200</u>        | <u>6,534,944</u>        |
| <b>EXPENDITURE</b>             |       |                         |                         |
| <b>Research</b>                |       | 1,283,960               | 806,140                 |
| <b>Health Promotion</b>        |       | 2,999,262               | 3,201,359               |
| <b>Treatment</b>               |       | 3,083,575               | 2,711,343               |
|                                |       | <u>7,366,797</u>        | <u>6,718,842</u>        |
| Deficit                        | 3     | (988,597)               | (183,898)               |
| Accumulated Funds 1 April 1991 |       | 3,077,339               | 3,261,237               |
|                                |       | <u><b>2,088,742</b></u> | <u><b>3,077,339</b></u> |

NOTES: The accompanying Notes form part of these Financial Statements

**ALCOHOL ADVISORY COUNCIL OF NEW ZEALAND**  
BALANCE SHEET AS AT 30 JUNE 1992

|                            | NOTES | 1992<br>\$       | 1991<br>\$       |
|----------------------------|-------|------------------|------------------|
| <b>Fixed Assets</b>        | 4     | 556,516          | 727,554          |
| <b>Term Assets</b>         |       |                  |                  |
| Mortgage                   | 5     |                  | 134,000          |
| <b>Current Assets</b>      |       |                  |                  |
| Cash in Hand               |       | 200              | 100              |
| Bank                       |       | 727,462          | 512,056          |
| Prepayments                |       | 7,748            |                  |
| Sundry Debtors             |       | 1,145,642        | 2,361,075        |
|                            |       | 1,881,052        | 2,873,231        |
| <b>Current Liabilities</b> |       |                  |                  |
| Sundry Creditors           |       | 264,114          | 400,615          |
| Grants Approved & Payable  |       |                  | 256,831          |
| Income Paid in Advance     |       | 271              |                  |
| GST Payable                |       | 84,441           |                  |
|                            |       | (348,826)        | (657,446)        |
| <b>Net Assets</b>          |       | <b>2,088,742</b> | <b>3,077,339</b> |
| Represented By:            |       |                  |                  |
| Accumulated Funds          | 6     | 2,088,742        | 3,077,339        |

Approved By:

*John Collinge*

J G Collinge, Chairman

*Kevin Evans*

K R Evans, Chief Executive Officer

16 September 1992

NOTES: The accompanying Notes form part of these Financial Statements

**ALCOHOL ADVISORY COUNCIL OF NEW ZEALAND**  
STATEMENT OF CASH FLOWS FOR THE FIFTEEN MONTHS ENDED 30 JUNE 1992

|   | 1992<br>\$ | 1991<br>\$ |
|---|------------|------------|
| <b>Cash Flows From Operating Activities</b> | 7,638,784  | 6,109,344  |
| Less Cash Disbursed to Operating Activities | 7,548,781  | 6,188,486  |
| Less Net Cash Flows from GST                | 28,063     | 34,621     |
| Net Cash Flows from Operating Activities    | 61,940     | (113,763)  |
| <b>Cash Flows from Investing Activities</b> |            |            |
| Cash was provided from:                     |            |            |
| Proceeds from Sale of Assets                | 61,168     |            |
| Proceeds from Repayment of Mortgage         | 134,000    |            |
| Proceeds from Investment Income             | 82,770     |            |
|   | 277,938    | 251,260    |
| Cash was disbursed to:                      |            |            |
| Purchase of Assets                          | 124,372    | 193,188    |
|   | 124,372    | 193,188    |
| Net Cash Flows from Investing Activities    | 153,566    | 58,072     |
| Net Increase/ (Decrease) in Cash Held       | 215,506    | (55,691)   |
| Add Opening Cash Brought Forward            | 512,156    | 567,847    |
| Ending Cash Carried Forward                 | 727,662    | 512,156    |
| Actual Cash Balance                         | 727,662    | 512,156    |

**ALCOHOL ADVISORY COUNCIL OF NEW ZEALAND**  
STATEMENT OF ACCOUNTING POLICIES

**A. General Accounting Policies**

These Financial Statements are prepared pursuant to Section 38 of the Alcoholic Liquor Advisory Council Act 1976. The general accounting principles recognised as appropriate for the measurement and reporting of income and expenditure and financial position on an historical basis are followed. Accrual accounting is used to match expenses with revenues. These financial statements have been prepared on the assumption that levy income will be received in future years as per the existing legislation.

**B. Specific Accounting Policies**

i. Revenue and Recognition

Levy income from locally produced beer, spirits, grape wine, fruit wine and imported liquor are recognised as income in the accounting period for which they are levied.

Interest income includes interest accrued but not yet received.

When funds which were committed in previous years are no longer required for the purpose for which they were committed, they are 'retired' and treated as income in the present financial year.

All transactions are shown net of Goods and Services Tax.

ii. Depreciation and Fixed Assets

Depreciation is charged on a straight line basis over the anticipated useful life of the assets. Land and works of art owned by the Council are recorded at historical cost and are not depreciated. The useful lives of the assets have been assessed as:

|                          |               |
|--------------------------|---------------|
| Fixtures and furniture   | over 10 years |
| General office equipment | over 5 years  |
| Computer hardware        | over 3 years  |
| Motor vehicles           | over 5 years  |
| Library books            | over 10 years |
| Films and videos         | over 5 years  |

iii. Sundry Debtors

Sundry debtors are valued at their estimated realisable value

**C. Changes in Accounting Policies**

There have been no significant changes in accounting policies. All policies have been applied on bases consistent with those used in previous years.

**ALCOHOL ADVISORY COUNCIL OF NEW ZEALAND**  
NOTES TO ACCOUNTS

**1. Change of Balance Sheet Date**

As from 1 July 1992 ALAC comes under the Public Finance Act 1989 as a Crown Owned Entity. This requires a change of balance sheet date from 31 March to 30 June.

These Financial Statements have been prepared for a fifteen month period to effect the realignment of the new balance date. The comparative figures for 1991 cover a twelve month period.

**2. Income From Levies**

|  | 1992               | 1991               |
|--|--------------------|--------------------|
| Locally Produced Beer, Spirits and Imported Liquor | \$4,591,742        | \$4,959,178        |
| Locally Produced Grape Wine                        | \$1,592,223        | \$1,198,505        |
| Locally Produced Fruit Wine                        | \$12,114           | \$27,147           |
| Other  | \$8,844            |                    |
| Total  | <u>\$6,204,923</u> | <u>\$6,184,830</u> |

**3. Operating Results**

The deficit for the period is arrived at after charging:

|              | 1992        | 1991      |
|--------------|-------------|-----------|
| Depreciation | \$190,875   | \$157,170 |
| Rent         | \$268,481   | \$214,785 |
| Salary Costs | \$1,048,677 | \$880,766 |
| Audit Fees   | \$25,000    | \$15,490  |

**4. Fixed Assets**

| i)                              | Historical<br>Cost | Accum<br>Deprecn | Net Book       | Net Book       |
|---------------------------------|--------------------|------------------|----------------|----------------|
|                                 |                    |                  | Value<br>1992  | Value<br>1991  |
|                                 | \$                 | \$               | \$             | \$             |
| Land and Buildings              | 27,014             | —                | 27,014         | 27,014         |
| Artwork                         | 10,707             | —                | 10,707         | —              |
| Motor Vehicles                  | 97,035             | 22,363           | 74,672         | 138,297        |
| Library Books & Films           | 212,312            | 85,368           | 126,944        | 126,099        |
| General Office Equipment        | 107,584            | 58,201           | 49,383         | —              |
| Computer Hardware               | 171,151            | 127,156          | 43,995         | —              |
| Fixtures, Furniture, Equipment* | 482,128            | 258,327          | 223,801        | 436,144        |
| Total                           | <u>1,107,931</u>   | <u>551,415</u>   | <u>556,516</u> | <u>727,554</u> |

\*Fixtures, Furniture and Equipment this year has been reclassified into the following classes – Artwork, Fixtures and Furniture, General Office Equipment, Computer Hardware

**ALCOHOL ADVISORY COUNCIL OF NEW ZEALAND**

ii)

Depreciation rates for the following classes of Assets have been changed this year:-

|                   | 1991/92                          | 1990/91 |
|-------------------|----------------------------------|---------|
| Computer Hardware | 33 <sup>1</sup> / <sub>3</sub> % | 10%     |
| Artwork           | —                                | 10%     |
| Office Equipment  | 20%                              | 10%     |

The effect of this change is an increase in the depreciation charge for the period of \$58,414.

Land and Buildings are held pending transfer to Canterbury Area Health Board and therefore not depreciated.

**5. Term Asset**

Finance of \$134,000 at an interest rate of 9.7% per annum was provided in 1988 to the Chief Executive Officer of ALAC to purchase a property at Whitby. This loan was fully repaid in April 1991.

**6. Excess of Income Over Expenditure**

Accumulated funds are made up of:

|                                       | 1992      | 1991      |
|---------------------------------------|-----------|-----------|
|                                       | \$        | \$        |
| Alcoholic Liquor Fund Brought Forward | 2,541,152 | 2,725,050 |
| General Reserve                       | 536,187   | 536,187   |
| Accumulated Funds 1 April 1991        | 3,077,339 | 3,261,237 |
| Transferred from Operating Statement  | (988,597) | (183,898) |
| Accumulated Funds 30 June 1992        | 2,088,742 | 3,077,339 |

**7. Grants and Programme Costs**

\$4.8million was disbursed to Council approved organisations in respect of grants and programme costs:

|                  |              |
|------------------|--------------|
| Research         | \$0.7million |
| Health Promotion | \$1.9million |
| Treatment        | \$2.2million |

**ALCOHOL ADVISORY COUNCIL OF NEW ZEALAND****8. Statement of Commitments**i) **Grants:**

Council has approved funds for disbursement to individuals and organisations after 30 June 1992. Payment of these funds is subject to:

- Fulfilment of agreed performance criteria by the applicant
- Continuation of ALAC's levy funding at the anticipated level

Note: In some cases the funds approved are estimated amounts only and less funds may be actually disbursed.

The amount approved as at 30 June 1992 was \$2,149,284.

ii) **Rental Expenses Committed:**

|  | \$      |
|--|---------|
| Not later than one year                            | 212,993 |
| Later than one year and not later than two years   | 210,872 |
| Later than two years and not later than five years | 414,010 |
| Later than five years                              | 899,833 |

iii) **Capital Commitments**

There were no capital commitments at 30 June 1992.

**9. ALAC Review**

During the year a comprehensive Review of ALAC was undertaken. The costs of this Review and the resulting redundancy payments amounted to \$488,812.

**10. Statement of Contingent Liabilities**

There were no contingent liabilities outstanding as at 30 June 1992.





**REPORT OF THE AUDIT OFFICE  
TO THE READERS OF THE FINANCIAL STATEMENTS OF  
ALCOHOL ADVISORY COUNCIL OF NEW ZEALAND  
FOR THE FIFTEEN MONTHS ENDED 30 JUNE 1992**

The financial statements on pages 25 to 31 as required by section 38 of the Alcohol Liquor Advisory Council Act 1976, were prepared by the Council's management, and are the responsibility of the Council. The Audit Office's responsibilities include a requirement, pursuant to section 23 of the Alcoholic Liquor Advisory Council Act 1976, to express an opinion on the financial statements based on the results of our audit.

We conducted our audit in accordance with generally accepted auditing standards, with the objective of obtaining reasonable assurance that the financial statements are free from significant errors or omissions. In our audit we reviewed the evidence to support the amounts and disclosures in all statements. We also assessed the accounting practices used.

In our opinion, the financial statements of the Alcohol Advisory Council of New Zealand fairly reflect:

- The financial results of the operations and cash flows for the period to 30 June 1992; and
- The financial position as at 30 June 1992.

Peter Nankivell  
for Controller and Auditor-General

18 September 1992

Wellington  
New Zealand

Released under the Official Information Act 1982