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Classification Branch Department of Infrastructure, Transport, Regional Development and Communications Locked Bag 3 Haymarket NSW 1240 consultation@classification.gov.au

**Dear Classification Branch** 

# SUBMISSION TO THE REVIEW OF AUSTRALIAN CLASSIFICATION REGULATION

Thank you for the opportunity to make a submission to the *Review of Australian classification regulation* (The Review). This review provides an important opportunity to address gaps in the current regulation, create clarity around harmful content, and prevent the normalisation and glamorisation of alcohol use in pop culture.

Alcohol is one of the most heavily promoted products in the world. Research consistently shows a doseresponse relationship between young people's exposure to alcohol marketing and their alcohol consumption, meaning the more instances of alcohol consumption they see the more they will drink.<sup>1</sup> Evidence also demonstrates that exposure to alcohol use in movies and pop culture influences drinking behaviours.

The Foundation for Alcohol Research and Education (FARE) is an independent not-for-profit organisation that has been working for more than a decade with communities, governments, health professionals, researchers and police to take action to stop the harm caused by alcohol. Alcohol harm in Australia is significant. Nearly 6,000 lives are lost every year and more than 144,000 people are hospitalised making alcohol one of our nation's greatest preventive health challenges. As an organisation committed to stopping harm, FARE has long supported sensible and evidence-based alcohol policy.

This Review seeks to set classification categories and standards for films and computer games in line with community standards and expectations. This is an opportunity to ensure that the depiction of alcohol use and alcoholic products in films and games are in line with community standards, and that restrictions commensurate with risk are applied.

As advertising grows and changes, integrating with other forms of content and increasing in interactivity, FARE additionally urges a review of the decision to explicitly exclude advertising from the classification system. Alcohol advertising and other harmful content including gambling advertising is frequently placed in video and online games. As such, the exclusion of advertising has the potential to undermine classification regulation. Innovations such as Netflix's self-classification tool indicate that there are

## STOPPING HARM CAUSED BY ALCOHOL

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possibilities that would be worth exploring for new types of media, and it would be timely to revisit whether advertising could now be successfully brought within the classification system.

Alcohol is no ordinary commodity and it should be regulated sufficiently to represent the risks the product poses to individuals and the community. This includes classification regulation. It is paramount that the Government improve its classification categories and standards to ensure that content depicting alcohol consumption is appropriately classified in such a way that people understand the heightened risks posed to children.

## Drug use

Alcohol is an addictive psychoactive drug that diminishes responsible decision-making, leading to greater likelihood of risky behaviours, thereby magnifying the vulnerabilities of children. The *Australian Guidelines to Reduce Health Risks from Drinking* state that drinking from a young age can damage the developing brain, and recommend that not drinking is the safest option for people under 18.<sup>2</sup>

Alcohol is also implicated in the three leading causes of death for adolescents: assaults, accidents and suicide.<sup>3</sup> A systematic review of the literature has found consistent evidence that young people who consume higher amounts of alcohol continue high levels of consumption into adulthood, and are also more likely to have alcohol problems, including dependence later in life.<sup>4</sup>

The average age of first consumption of alcohol for Australians is 16.1,<sup>5</sup> almost two years under the legal age. While there have been pleasing reductions in the number of young people consuming alcohol at lifetime risky levels, young people continue to consume alcohol primarily in high-risk occasions, colloquially known as "binge drinking". The latest National Drug Strategy Household Survey (NDSHS) found that 14.6 per cent of 16-17-year-olds binge drink at least once a month,<sup>6</sup> with 4.6 per cent of 16-17-year-olds binge drink at least once a month,<sup>6</sup> with 4.6 per cent of 16-17-year-olds classed as being at very high risk of alcohol-related harm.<sup>7</sup> The Australian Secondary Students' Alcohol and Drug (ASSAD) survey 2017 reports that 34 per cent of 12-17-year-olds and 61 per cent of 16-17-year-olds reported they had consumed alcohol in a binge drinking occasion at least once, with parties being the most common place to consume alcohol.<sup>8</sup> Almost two thirds (64 per cent) of current drinkers aged 16-17 reported a negative outcome after drinking, from vomiting (44 per cent) and missing school/work (12 per cent) through to trying illicit drugs (27 per cent) and being in trouble with the police (six per cent).<sup>9</sup>

### Young people's exposure to alcohol consumption in pop culture

There is a growing body of evidence demonstrating that exposure to consumption of alcoholic products in movies is a predictor of early initiation and heavy consumption among young people, even after controlling for other variables known to influence consumption.<sup>10,11,12</sup>

A longitudinal study of over 2000 adolescent never-drinkers from six countries revealed that seeing alcohol depictions in movies is an independent predictor of drinking initiation and risky drinking.<sup>13</sup> The study controlled for age, gender, family affluence, school performance, TV screen time, personality characteristics and drinking behaviours by peers, parents and siblings, and found a dose-response relationship between movie alcohol occurrences, trying alcohol and binge drinking. The more occurrences of alcohol in movies that young abstainers were exposed to, the more likely they were to try drinking and the more likely they were to binge drink in subsequent months.

Additionally, research demonstrates that the link between alcohol use in movies and adolescent binge drinking is relatively unaffected by cultural contexts.<sup>14</sup> There is also emerging research showing a link between alcohol exposure on social media and alcohol use in teenagers and young adults.<sup>15</sup>

With increasing access to movies through subscription services, combined with instances of alcohol consumption that children are exposed to through other pop culture, it is likely that rate of exposure and risk of harm has increased significantly in recent years.

## **Classifiable elements**

Under the current classification scheme, 'classifiable elements' are themes, violence, sex, language, drug use and nudity.

Alcohol currently falls into the category of themes, and only specifically in relation to 'alcohol dependency'. Classifying alcohol under 'themes' does not give it the appropriate weight, reflect the importance of issue, or adequately account for its potential damaging effect.

Alcohol use, tobacco use, and abuse of prescription medication should be included under the classifiable element 'drug use'. Alcohol is the single most harmful drug in Australia.<sup>16</sup> Tobacco still causes the most deaths of any drug in Australia. And misuse of prescription drugs is one of the fastest growing sources of addiction in Australia. Alcohol, tobacco and prescription drugs are among the easiest to obtain drugs in Australia, which contributes to their burden of harm. They are also consistently glamorised in films, computer games and other classifiable materials.

Alcohol, tobacco and prescription medication are legal, regulated drugs. Their regulation, including for alcohol prohibition on sale to minors, is due to the severe risk of harm they cause. The current classification scheme does not adequately represent the risk of harm from these drugs.

FARE also recommends that other age inappropriate content, such as gambling, be removed from themes and provided its own classifiable element to clearly demonstrate risk of harm. Community standards and expectations have changed with the changing nature of modern day gambling. These addictive and harmful products and activities should be recognised as harmful content in their own right, under their own 'classifiable elements' and not hidden under a generic term 'themes'.

# Impacts under classification categories

What is allowed under classification categories is also not in line with community expectation. Under the current scheme G rated films can have implied/ discreet drug use. G rated films are targeted towards young children and should not show implied/ discreet drug use of any sort, including alcohol use. Young children do not need to see that use of harmful drugs, such as tobacco and alcohol, is a normal, or even celebrated, part of life. Similarly, they should not be exposed to material that treats gambling as a positive experience.

Currently PG rated films have the same standard for drug use as M and MA15+ despite obvious differences in the appropriateness for children's viewing. Drug use is allowed (whether discreetly or not) if justified by context. While this may be acceptable for classifications aimed at more adult audiences, it is not acceptable for content, such as PG films and computers games, aimed at children. Additionally, a restraint on anything that glamorises drug use, including alcohol and tobacco, should be added.

It is evident from the research provided above that depiction of alcohol in movies does have negative effects on young people's consumption of alcoholic products, and as such should be restricted to age appropriate programs. Alcohol is a restricted product that cannot be purchased by those under 18. Minors should not see depictions of alcohol – a product they legally cannot consume – in G or PG rated films or games.

# Modernising classification legislation

The way that young people consume content has changed significantly since the development of the classification scheme. Viewing a movie was once a transient experience, but now films have an indefinite shelf-life and can be viewed across a multitude of platforms. Additionally, the volume of content produced has increased exponentially, particularly through subscription services such as Netflix, and this does not even include the sheer volume of user generated content that is unclassified and viewed on a daily basis. Content that portrays celebrities and influencers using alcoholic products in a plethora of situations and settings will continue to evoke positive feelings about alcohol for many decades to come.

FARE is cautious of the proposals to exclude online content from classification, as this is arguably the majority of content now consumed. While FARE understands that resource constraints mean that it would be impracticable to classify online content in the same way as major works such as films and computers games, this should not negate the fundamental acceptance of the need for some form of classification system. As Netflix's classification tool shows, there are a number of ways that a compromise can be reached between efficiency and maintaining standards, and FARE recommends that further investigation is undertaken as to how that could be applied in advertising and online situations.

A harm standard could be an effective mechanism to provide regulatory oversight over the significant volume of content posted online. However, further consultation should be conducted on the harm standard to ensure it accurately reflects risk and takes into consideration regulated products and activities that are prohibited to minors. Any standard should include products that cause serious harm to children, which includes alcohol, tobacco and gambling.

# Recommendations

Classification is one way to empower consumer choice and ensure children are exposed to ageappropriate content. FARE recommends that in order to improve the understanding among parents and other consumers about the risk of harm from alcoholic products, the following changes must be made to the classification scheme:

- Include alcohol use, tobacco use and abuse of prescription medication under drug use.
- Prohibit the depiction of drug use in G and PG rated films and games.
- Prohibit the glamorisation of drug use, including alcohol and tobacco, at minimum in G, PG and M classifications.
- Allow marketing and online content to be included under classifiable content, in modified form, to ensure that alcohol promotions are not allowed in G and PG rated content.

FARE has been regularly engaging with the Department of Communications regarding protecting children from the promotion and normalisation of alcoholic products across all media formats. We congratulate

the Government on the establishment of the Online Safety Charter and the development of the new Online Safety Act, to which FARE has also made a submission. However, there is still much more work to be done to ensure that regulation is future proof and up-to-date with technology.

Yours sincerely

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<sup>5</sup> Australian Institute of Health and Welfare (2017). *National Drug Strategy Household Survey 2016: detailed findings; Data tables: Chapter 4 Alcohol; Table 4.14: Age of initiation, recent drinkers(a) and ex–drinkers(b) aged 14 to 24 years, 1995 to 2016 (years)*. Canberra, Australia: Author. Retrieved from

<sup>6</sup> Australian Institute of Health and Welfare (2017). *National Drug Strategy Household Survey 2016 – key findings; Data tables: NDSHS 2016 – key findings; Table 18: Alcohol consumption (2009 guidelines), people aged 12 years or older at risk of injury on a single occasion of drinking, at least monthly, by age and sex, 2007 to 2016 (per cent).* Canberra, Australia: Author. Retrieved from https://www.aihw.gov.au/reports/illicit-use-of-drugs/ndshs-2016-keyfindings/data

<sup>7</sup> Australian Institute of Health and Welfare (2017). *National Drug Strategy Household Survey 2016: detailed findings; Data tables: Chapter 4 Alcohol; Table 4.13: People aged 12 years or older at very high risk of alcohol-related harm (consumption of 11 or more standard drinks), by age, 2010 to 2016 (per cent). Canberra, Australia: Author. Retrieved from https://www.aihw.gov.au/reports/illicit-use-of-drugs/ndshs-2016-detailed/data <sup>8</sup> Guerin, N. & White, V. (2018). ASSAD 2017 Statistics & Trends: Australian Secondary Students' Use of Tobacco, Alcohol, Over-the-counter Drugs, and Illicit Substances. Melbourne, Australia: Cancer Council Victoria. Retrieved from https://www.health.gov.au/sites/default/files/secondary-school-students-use-of-tobacco-alcohol-and-other-drugs-in-2017\_0.pdf* 

<sup>&</sup>lt;sup>1</sup> Jernigan D., Noel J., Landon J., Thornton N. & Lobstein T. (2017). Alcohol marketing and youth alcohol consumption: a systematic review of longitudinal studies published since 2008. Addiction 112(Suppl 1):7-20. <sup>2</sup> National Health and Medical Research Council (2009). *Australian Guidelines to Reduce Health Risks from Drinking*. Commonwealth of Australia. Page 58.

<sup>&</sup>lt;sup>3</sup> National Health and Medical Research Council (2009). *Australian Guidelines to Reduce Health Risks from Drinking*. Commonwealth of Australia. Page 58.

<sup>&</sup>lt;sup>4</sup> McCambridge J, McAlaney J, Rowe R. Adult consequences of late adolescent alcohol consumption: a systematic review of cohort studies. PLoS Med. 2011;8(2):e1000413

https://www.aihw.gov.au/reports/illicit-use-of-drugs/ndshs-2016-detailed/data

<sup>&</sup>lt;sup>9</sup> Guerin, N. & White, V. (2018). ASSAD 2017 Statistics & Trends: Australian Secondary Students' Use of Tobacco, Alcohol, Over-the-counter Drugs, and Illicit Substances. Melbourne, Australia: Cancer Council Victoria. Retrieved from https://www.health.gov.au/sites/default/files/secondary-school-students-use-of-tobacco-alcohol-and-otherdrugs-in-2017\_0.pdf

<sup>&</sup>lt;sup>10</sup> Austin EW, Chen MJ, Grube JW. How does alcohol advertising influence underage drinking? The role of desirability, identification and skepticism. J Adolesc Health. 2006;38(4):376–384

<sup>11</sup> Thomsen SR, Rekve D. The relationship between viewing US-produced television programs and intentions to drink alcohol among a group of Norwegian adolescents. Scand J Psychol. 2006;47(1):33–41

<sup>14</sup> Hanewinkel, R., Sargent, J.D., Poelen, E.A.P., Scholte, R., Florek, E., Sweeting, H., Hunt, K., Karlsdottir, S., Jonsson, S.H., Mathis, F., Faggiano, F. & Morgenstern, M. (2012). Alcohol Consumption in Movies and Adolescent Binge Drinking in 6 European Countries. *Pediatrics* 129:4(709-720).

<sup>15</sup> Boers E., Afzali M., Conrod P., (2020) Longitudinal study on the relationship between screen time and adolescent alcohol use: The mediating role of social norms. Preventive Medicine 132

<sup>16</sup> Bonomo, Y., Norman, A., Biondo, S., Bruno, R., Daglish, M., Dawe, S., Egerton-Warburton, D., Karro, J., Kim, C., Lenton, S., Lubman, D.I., Pastor, A., Rundle, J., Ryan, J., Gordon, P., Sharry, P., Nutt, D. & Castle, D. (2019). The Australian drug harms ranking study. *Journal of Psychopharmacology*, 33(7), 759–

768. https://doi.org/10.1177/0269881119841569

<sup>&</sup>lt;sup>12</sup> Hanewinkel, R., Sargent, J.D., Poelen, E.A.P., Scholte, R., Florek, E., Sweeting, H., Hunt, K., Karlsdottir, S., Jonsson, S.H., Mathis, F., Faggiano, F. & Morgenstern, M. (2012). Alcohol Consumption in Movies and Adolescent Binge Drinking in 6 European Countries. *Pediatrics* 129:4(709-720).

<sup>&</sup>lt;sup>13</sup> Hanewinkel, R., Sargent, J.D., Hunt, K., Sweeting, H., Engels, R., Scholte, R., Mathis, F., Florek, E., & Morgenstern, M. (2014). Portrayal of Alcohol Consumption in Movies and Drinking Initiation in Low-Risk Adolescents. *Pediatrics* 133:6(973-982).