

**Draft Dunedin Local Alcohol Policy Submission
Dunedin City Council**

**The Salvation Army New Zealand Fiji Tonga and Samoa Territory Submission
14th November 2024**

BACKGROUND

1. The mission of The Salvation Army Te Ope Whakaora is to care for people, transform lives, and reform society by God's power. The Salvation Army is a Christian church and social services organisation that has worked in New Zealand for over one hundred and forty years. It provides a wide range of practical social, community, and faith-based services, particularly for those facing various forms of hardship and vulnerability.
2. In Dunedin, The Salvation Army church and services have supported more than 2,500 families with a myriad of social services over the past year from food support, housing, financial mentoring, positive lifestyle programs, reintegration support, social work and addictions treatment through the Bridge.
3. This submission has been prepared by the Social Policy and Parliamentary Unit (SPPU) of The Salvation Army. The SPPU works towards the eradication of poverty by advocating for policies and practices that strengthen the social framework of New Zealand. This submission has been approved by Commissioner Mark Campbell, Territorial Commander of The Salvation Army's Aotearoa New Zealand Fiji Tonga, and Samoa Territory.

THE SALVATION ARMY PERSPECTIVE

4. The Salvation Army has been providing treatment for alcohol and other drug dependency for over 100 years in New Zealand. We have consistently advocated for sensible and workable legislative reform aimed at minimizing the significant harm caused by the abuse and misuse of alcohol and other drugs in our communities. The Salvation Army Bridge services are dedicated to providing safe, integrated, and high-quality treatment to individuals whose lives have been severely impacted by harmful use or dependence on alcohol, other drugs. Our mission is to work with and support people as they make positive changes in their lives.
5. The trends we are observe among those seeking support through the Bridge programme in Dunedin highlight the significant challenges tangata whai-ora face on their journey to sobriety. Many of our tangata whai-ora turn to alcohol as a coping mechanism for unresolved trauma, grief, and stress, often using it to manage emotional pain when healthier coping skills are lacking. The absence of strong support networks can lead to increased social isolation, which in turn deepens feelings of loneliness and vulnerability, making it even harder to sustain recovery. Relapses are often accompanied by intense guilt and shame, creating barriers to re-engaging with treatment, especially when individuals struggle with self-forgiveness and fear of judgment. A structured, supportive environment is crucial for many tangata whai-ora, as it provides the stability, they need to maintain sobriety.

6. The accessibility, affordability, and availability of alcohol within the community create a slippery slope for many we support. Even for those who have committed to recovery, the easy accessibility of alcohol means that alcohol is always within reach, especially during emotionally vulnerable moments. The affordability of alcohol and its widespread availability in local communities make it difficult for tangata whai-ora to resist temptation. This underscores the importance of broader systemic and regulatory measures, such as the Local Alcohol Policies (LAPs), to address and reduce the harm caused by alcohol accessibility, affordability, and availability. Without addressing these external factors, individuals in recovery are constantly navigating an environment that threatens to undermine their progress.

7. The National Operation Manager of our Bridge Program Michael Douglas says:

“In our Salvation Army Addiction Bridge treatment services... we see and work with the significant harm caused by the proliferation and saturation of off liquor license premises....”

“Alcohol is no ordinary drug, and addiction is a compulsive behaviour that often occurs outside of a person’s conscious thought. The impact of the high density of liquor outlets stores... with discounted alcohol from the early hours of the morning until late at night directly increases the availability, use and abuse of alcohol leading to family/whanau harm, poor health outcomes for people, crime and increased pressure on our health system and emergency departments particularly in the areas of mental health, suicide and addiction, with Māori disproportionately adversely affected.”

“The large majority of alcohol-related research consistently indicates that reducing the trading hours of licensed premises, and also reducing the actual number of alcohol outlets, are two of the most effective measures available that would directly contribute to fulfilling the stated object of the Sale and Supply of Alcohol Act.”

8. The Salvation Army not only addresses alcohol harm in acute cases through addiction treatment but also witnesses its widespread effects in other aspects of our work. We estimate that 60% of those who seek our services are either directly or indirectly impacted by alcohol harm. This impact is evident in our community ministries, where we encounter issues related to financial hardship, food insecurity, and family violence—all of which are often exacerbated by alcohol harm. We believe that promoting safer alcohol sales practices in our communities can lead to long-term benefits for the families we serve.

9. It is important to emphasize that our advocacy is not about prohibition, but rather about harm minimization. We are committed to creating safer environments that reduce the negative impact of alcohol on our communities.

10. We strongly support the implementation of a Local Alcohol Policies (LAPs). In our view effective local alcohol policies serve as barriers on top of the cliff, preventing harm before it happens. These policies can help mitigate the damage caused by alcohol in our communities by providing protective mechanisms that keep people safer. While our services are crucial, we often act as the ambulance at the bottom of the cliff, stepping in only after everything has fallen apart. In our view, Local Alcohol Policies can serve as preventive measures that protect communities.

RESPONSE TO THE LOCAL ALCOHOL POLICY

11. LOCATION

The Salvation Army supports no new alcohol licences being permitted within 100 metres of sensitive sites. We believe that having a licensed premises close to any of our services would create significant challenges, not only for our Tangata Whai Ora but also for the vulnerable families we support. Access to alcohol in such proximity could have a negative impact on those we are helping to rebuild their lives.

12. OUTLET DENSITY

- a. We support the moratorium on new off-licence granted in the North Dunedin area and recommend extending this freeze to areas with a deprivation levels of 7 to 10. From our experience, hazardous drinking is more prevalent in areas with high deprivation, and the density of alcohol licences in these areas only worsens the situation. Therefore, we strongly advocate not only for the continuation of the freeze in high deprivation areas, including North Dunedin, but also for the implementation of a sinking lid policy in areas with high deprivation. This would help reduce alcohol-related harm in our most vulnerable communities.
- b. It's rare for an off-licence to be removed from a community, making it difficult to gauge the impact of its absence. However, when an off-licence in Tokoroa closed, there was a significant improvement in the community's amenity and good order. Although Tokoroa differs from Dunedin in many aspects, this example highlights the potential benefits of closing a bottle store.
 - i. Evidence that Police presented in opposition to an application for a new off-licence in Tokoroa showed alcohol related occurrences, family harm, and assault occurrences had all declined after the previous Off-licence Black Bull was operating at the premise had closed.

Occurrence	~ 2 years prior to close	~ 2 years after closing
Alcohol Related Occurrences	1098	474
Monthly	45.7	41.21
Family Harm	611	243
Monthly	50.9	21.13
Assaults	224	80
Monthly	9.33	6.95

- ii. The medical officer of health also presented evidence that showed that when two off-licences ceased their operations in Tokoroa there was a decline in alcohol related presentations (188 to 99) and alcohol related deaths (3 to 1) in their emergency department.
- iii. It is in our view given the strong evidence in Tokoroa that increasing the number of off-licences particularly off-licence in a high deprivation area, in close proximity to other licences would cause more harm to the community and would reduce the amenity and good order of the area by more than a minor extent.

13. OFF-LICENCES

- a. The Local Alcohol Policy covers various types of licences, but our submission focuses primarily on off-licences. This is because over 80% of alcohol is sold through off-licences.
- b. **Trading Hours:** We acknowledge that most of the alcohol-related research consistently indicates that reducing the trading hours of licenced premises, and reducing the actual number of alcohol outlets, are two of the most effective measures available that would directly contribute to fulfilling the stated object of the Act.

We acknowledge the Local Alcohol Policy's efforts to reduce trading hours, but we believe it does not go far enough to address the harm we witness in our communities. We recommend trading time of **9 am to 9 pm** for all off-licence stores. This limit would help reduce late-night purchases, which often lead to binge drinking or pre-loading, noise issues, and anti-social behaviour, particularly in vulnerable communities. Restricting hours also reduces alcohol-related incidents like violence and disorder, particularly family violence which are more common late at night. For those struggling with alcohol dependence, shorter hours can deter impulsive purchases.

- c. **Advertising:** Research from Alcohol Healthwatch shows Alcohol advertising is harmful to people of all ages, especially young people. The more exposure they have the more likely they are to start drinking earlier and drink more heavily. Alcohol advertising on outlets is permanent and unavoidable. Additionally, alcohol advertising can trigger those with alcohol use disorders, making it harder for them to stay sober or reduce their drinking¹.

Therefore, we recommend for off-licence advertising the LAP to include:

- i. No external or outward-facing advertising of alcohol products, prices, or related promotions on the building façade, bollards, flags, or sandwich boards.
 - ii. Any alcohol-related branding should not exceed more than 25% of the building's façade.
 - iii. No exterior lighting should advertise alcohol, aside from the business's trading name.
- d. **Single Sales:** Single sales of alcohol are dangerous because they encourage impulsive drinking, especially among vulnerable communities, such as those struggling with alcohol dependence or those with limited finances. The low cost and convenience of single servings can lead to immediate consumption in unsafe places, increasing public disorder, littering, and anti-social behaviour in communities.

We recommend the LAP include the following discretionary conditions on off-licences

- i. No single sales of beer, RTDs or ciders smaller than 500ml and under \$6.00 per unit is permitted.
- ii. Packs of mainstream beers and RTDs must not be broken down and sold as singles.

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<https://www.ahw.org.nz/Portals/5/Resources/Fact%20Sheet/2021/Signage%20Bylaw%20Review%20Factsheet%20Sept%202021.pdf>

- e. **Buy Now Pay Later:** We highlighted the increasing use of Buy Now, Pay Later (BNPL) options among vulnerable communities, particularly those supported by our financial mentors. We have seen how BNPL schemes can make alcohol more accessible and contribute to debt, exacerbating financial hardship. Therefore, we recommend that the Local Alcohol Policy restrict the use of BNPL options at all off-licence premises to reduce the affordability and accessibility of alcohol².
- f. **Pregnancy Warning Labels:** Fetal alcohol spectrum disorder (FASD) is a lifelong disability caused by prenatal alcohol exposure, affecting the brain and body of unborn babies. Though often 'invisible,' individuals with FASD face unique challenges. In New Zealand, around 1 in 2 pregnancies are alcohol-exposed, leading to an estimated 3,000 babies born with FASD each year.
We recommend that the LAP requires all off licences to have clear A4 sized pregnancy warning labels in their stores.
- g. **Remote Sales:** Multiple District Licensing Committees (DLCs) have raised concerns about the lack of oversight in remote alcohol sales, with little assurance of compliance. There are numerous issues, including inadequate age verification and the risk of people ordering alcohol while intoxicated.

To address this, we recommend that alcohol deliveries be carried out only by staff who holds a manager's certificate , or that a 24-hour stand-down period be implemented for alcohol deliveries from the point of sale, or that remote deliveries from off-licence stores be prohibited altogether. While there are various ways to regulate remote sales, we urge the Local Alcohol Policy to acknowledge these risks and include safeguards to protect the community.

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² <https://www.salvationarmy.org.nz/article/uncapping-voices-communities>