

ALCOHOL IN MARLBOROUGH

A supplementary report

This report is a supplement to:

Reducing alcohol-related harm in the Marlborough District - report to the Marlborough District Council, ACC and Marlborough Alcohol Advisory Committee

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August 2012

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1. PURPOSE OF THIS REPORT

The purpose of this part of this supplementary report is to provide a snapshot of the role that alcohol plays in Marlborough with a view to informing the development of a local alcohol policy should Marlborough District Council decide to pursue developing one.

2. BACKGROUND

In August 2008, the Law Commission initiated a comprehensive review of New Zealand's alcohol laws, culminating in the production of a comprehensive report, 'Alcohol in our lives: curbing the harm.' In response to this report, the Alcohol Reform Bill was introduced to Parliament on 8 November 2010. On 18 December 2012, the Sale of Liquor Act 1989 was repealed and replaced by the Sale and Supply of Alcohol Act 2012.

A key development of the Act was the provision allowing territorial authorities to have local alcohol policies, relating to the sale, supply or consumption of alcohol within their districts. A local alcohol policy (LAP) may include policies on any or all of the following matters relating to licensing (section 77 (1)):

- a. Location of licensed premises by reference to broad areas,
- b. Location of licensed premises by reference to proximity to premises of a particular kind or kinds,
- c. Whether further licences (or licences of a particular kind or kinds) should be issued for premises in the district concerned, or any stated part of the district,
- d. Maximum trading hours,
- e. The issue of licences, or licences of a particular kind or kinds, subject to discretionary conditions, and
- f. One-way door restrictions.

Marlborough District Council already has a liquor policy that articulates both community expectations and legislative requirements around alcohol availability. With the passing of the new alcohol act and the statutory status ascribed to LAPs within this Act it is an appropriate time to revisit that policy.

This section of the report provides a snapshot of alcohol-related statistics relevant to Marlborough District. The purpose of the snapshot is to satisfy the information requirements set out in section 78 (2) of the Sale and Supply of Alcohol Act 2012 (below).

3. SECTION 78 SALE AND SUPPLY OF ALCOHOL ACT 2012

78 Territorial authorities must produce draft policy

- (1) A territorial authority that wishes to have a local alcohol policy must produce a draft policy.
- (2) When producing a draft policy, a territorial authority must have regard to—
 - (a) the objectives and policies of its district plan; and
 - (b) the number of licences of each kind held for premises in its district, and the location and opening hours of each of the premises; and
 - (c) any areas in which bylaws prohibiting alcohol in public places are in force; and
 - (d) the demography of the district's residents; and

- (e) the demography of people who visit the district as tourists or holidaymakers; and
- (f) the overall health indicators of the district's residents; and
- (g) the nature and severity of the alcohol-related problems arising in the district.

(3) For the purposes of subsection (2), a district's residents include people who have holiday homes there.

(4) The authority must not produce a draft policy without having consulted the Police, inspectors, and Medical Officers of Health, each of whom must, if asked by the authority to do so, make reasonable efforts to give the authority any information they hold relating to any of the matters stated in subsection (2)(c) to (g).

4. MEETING THE INFORMATION REQUIREMENTS OF SECTION 78 (2)

This section of the report follows the layout of section 78 (2) providing relevant information under each heading.

(a) Objectives and policies of the District Plan

According to the Marlborough District Council website the District Plan is under review at present. It is unclear what, if anything will be identified in the plan around issues associated with licensed premises across the district.

(b) The number of licences of each kind held for premises in its district, and the location and opening hours of each of the premises

At May 2013 there were a total of 296 licensed premises in Marlborough District. Information available shows that Marlborough has a much higher number of licensed premises per 10,000 of population than the average for New Zealand with 69.7 licensed premises per 10,000 of population compared with a national average of only 34.0. This is a bit skewed by the fact that Marlborough has a very high number of wineries with an off licence. Of the total number of off-licences in Marlborough, many of which are wineries, only 38 have cellar doors and 20 of those provide restaurant facilities. The proportion of on- licences per 10,000 of population is 30.9 where the national average is 18.5. Club licences are much closer to the national average.

In Marlborough there are:

- Club Licences – 32
- Off- licences – 130
- On Licences – 134

As well, in the year ended June 2012 the Marlborough District Licensing Agency dealt with 191 special licences, 393 manager's certificates and 16 temporary authorities.

While the hours of many premises vary, and in some cases they actually close earlier than their licence allows, the Marlborough District Council Liquor Licensing Policy does set out maximum hours.

Following is an excerpt from the current Marlborough District Council Liquor Licensing Policy¹.

Where the Marlborough District Licensing Agency has the discretion to restrict hours it is the current policy of Marlborough District Licensing Agency that the following hours will apply:

On Licence	Monday to Sunday	7.00 am to 3.00 am the following day
Off Licence	From the Bottle Store:	
	Monday to Sunday	7.00 am to 11.00 pm
	Across the Bar:	
	Monday to Sunday	7.00 am to 3.00 am the following day
	Supermarket/Grocery:	
	Monday to Sunday	7.00 am to 12.00 midnight
Club Licence	Monday to Sunday	8.00 am to 12.00 midnight
Special Licence	The Marlborough District Licensing Agency does not have a policy imposing general restrictions on the hours of operation for special licence events, however restrictions on hours will be imposed if the Licensing Agency consider it appropriate in respect of any environmental or other considerations which may require constraints on hours of operation. Such issues may be raised by the Licensing Inspector, Police or other relevant affected parties.	

- **Note 1:** Where an on or off-licence is in force prior to 1 December 1999 the hours of operation shall be 9.00 am to 10.00 pm on Sunday (other than Easter Sunday) and after 1.00 pm on Anzac Day. These hours can only be changed by way of a variation.
- **Note 2:** The Marlborough Sounds Resource Management Plan restricts hours in the area covered by that Plan to 1.00am.
- It shall be the policy of the Marlborough District Licensing Agency to further restrict hours from 8.00 am to 1.00 am the following day where a premise is adjacent to any residential zone or activity unless the applicant has obtained the written consent of all affected parties.

ASSOCIATION BETWEEN OUTLET TYPE AND ALCOHOL-RELATED HARM

Ministry of Justice research² found that at a national level, night clubs were 22 times more likely to have alcohol-related offences than restaurants, and taverns were 11.6 times more likely. During the period examined (2009/10–2011/12), taverns made up 71 percent of the locations where attributable alcohol-related offences occurred. This was followed by hotels with 14

¹ Marlborough District Council Liquor Licensing Policy

² Ministry of Justice, 2013, Risk based licensing fees – Identifying risk factors for the New Zealand context, Wellington

percent. Some of the offences included in the analysis were disorder offences (54 percent), serious assaults (12 percent), minor assaults (8 percent) and property damage (7 percent).

ASSOCIATION BETWEEN OUTLET DENSITY AND ALCOHOL-RELATED HARM

Density and social deprivation

A number of surveys have found an association between alcohol consumption levels and areas of high deprivation³. For instance, the Alcohol and Drug Use Survey 2007/08 found that people living in⁴ neighbourhoods of high deprivation were significantly more likely to have consumed alcohol in the previous year, than people living in neighbourhoods of low deprivation. Similarly, a 2010 Health Sponsorship Council⁵ survey found significant differences in drinking prevalence, with higher levels of drinking prevalence for those in the high deprivation group, compared with the low deprivation and middle deprivation group. One reason for high consumption may be the availability of alcohol in areas of high deprivation. In Marlborough, high rates of licences per 10,000 populations are seen across the district.

A 2009 report on socio-economic indicators at the top of the south showed that in Marlborough the range was deciles 1 – 8 with decile 4 being the median (1 = least deprived area, 10 = most deprived area). No census unit areas in the Top of the South Island fell into the most deprived decile – decile 10.

In Marlborough there are two decile 1 areas, both rural. This is not where there is a concentration of licensed premises.

Density and crime

The Health Promotion Agency has recently published research on the effect of the density of licensed premises on alcohol-related harm⁶. While focussed on the North Island it does give an insight into the impacts of alcohol outlet density.

The researchers studied crime patterns across the North Island to look at the relationship between different licensed premises (clubs, bars and night clubs, supermarkets and other off-licence premises).

The findings suggest that in areas where there are a large number of liquor outlets, there is likely to be a higher number of violent offences than in areas where there are few. This has significant implications for local policy. For example, the research found that, on average, an additional bar or night club is associated with at least five additional violent offences per year and an additional supermarket or grocery store is associated with more than 11 additional violent offences per year.

ASSOCIATION BETWEEN LICENSING HOURS AND ALCOHOL-RELATED HARM

Another mechanism for controlling liquor licensing in Marlborough District is through licensing hours – how long licensed premises can open. One of the key changes of the Act was to introduce default national maximum trading hours (8am–4am) for on-licences, unless a LAP is in place that sets maximum trading hours.

³ The Social Deprivation Index is a measure of socio-economic status calculated for small geographic areas. The calculation uses a range of variables from the 2006 Census of Population and Dwellings which represent nine dimensions of socio-economic disadvantage to create a summary deprivation score. 10 represents the most deprived, while 1 represents the least deprived: <http://profile.idnz.co.nz/Default.aspx?id=366&pg=8530&gid=10>

⁴ Ministry of Health, 2010, 'The 2007/08 New Zealand Alcohol and Drug Use Survey: Online Data tables, Available: <http://www.health.govt.nz/publication/2007-08-new-zealand-alcohol-and-drug-use-survey-online-data-tables>

⁵ Health Sponsorship Council, 2011, Health and lifestyles survey: alcohol related attitudes, Wellington: Health Sponsorship Council

⁶ Cameron, M.P., Cochrane, W., Gordon, C., & Livingston, M., 2013, The locally-specific impacts of alcohol outlet density in the North Island of New Zealand, 2006–2011, Hamilton: National Institute of Demographic and Economic Analysis

On-licences

Research at a national level by the Ministry of Justice shows that an increasing number of offences occur the later that on- and club-licensed premises are open. Not only do the percentage of premises where offences occur increase as the closing time moves later, but the percentage of premises with higher numbers of offences increase as well.⁷

The research also found that there was a significant positive relationship between closing time and the number of alcohol-related offences. Using 7:01am to 12 midnight as a base, bars closing at 2am were 2.2 times more likely to have offences than those closing between 7:01am and midnight. Bars closing at 3am were 4.2 times more likely. For bars that closed between 3:01am and 5am, the likelihood increased to 8.9 times more likely and bars that closed between 5:01am and 7am were 8.3 times more likely. Further, the analysis showed that 70 percent of offences occurred between 10pm and 5am, with 64 percent of that being between midnight and 4am.⁸ No data specific to Marlborough is available.

LOCATION OF ALCOHOL PURCHASING

Ministry of Justice research⁹ found that approximately 76 percent of alcohol purchases were from off-licence premises, with most alcohol purchased at bottle stores or supermarkets.

PUBLIC VIEWS

Marlborough District Council, along with other councils across the Top of the South, has conducted a community survey designed to establish the views of the community and its aspirations for the future of the 'alcohol scene' in Marlborough including hours, number of premises and location in respect to sensitive sites.

(c) Any areas in which bylaws prohibiting alcohol in public places are in force

The Marlborough District Council has a liquor control bylaw as provided in the Marlborough District Council Bylaw 2010. Drinking and/or possession of liquor is prohibited at all times in any public place within the town centres of Blenheim and Picton.

(d) The demography of the district's residents

The following figures are taken from the 2006 census¹⁰

- Total population – 42558
 - Male – 21216
 - Female – 21345

This is an increase of 3,000 people, or 7.6%, since the 2001 Census. Marlborough's population ranks 15th in size out of the 16 regions in New Zealand and has 1.1% of New Zealand's population.

Taking age ranges covering 4 year periods the population numbers are similar until those who are above 80 years of age. The largest age group in Marlborough is in the 45 – 49 year age group and totals 3345 which is 7.8% of the total population. In the group often acknowledged as most

⁷ Ministry of Justice, 2013, Risk based licensing fees – Identifying risk factors for the New Zealand context, Wellington

⁸ Ministry of Justice, 2013, Risk based licensing fees – Identifying risk factors for the New Zealand context, Wellington

⁹ Ministry of Justice, 2013, Risk based licensing fees – Identifying risk factors for the New Zealand context, Wellington

¹⁰ 2006 census – Statistics New Zealand

at risk, 15 – 29 year olds, there are 8934 or 20% of the total population. Those aged less than 15 years makes up 18.6% of the population, with 65% of the population aged between 16 and 65 years.

In relation to the marital status of the population 26.6% of people aged 15 years and over living in Marlborough Region have never married, 54.7% are married, and 18.7% are separated, divorced or widowed. There are 32.0% of people aged 15 years and over in the Marlborough District who has never been married but live with a partner.

The ethnicity of the Marlborough population is identified as:

- European or New Zealander – 36807 (86.4%)
- Maori – 4275 (10%)
- Pacific, Asian and other ethnicity – 1476 or (3.4%)

The following provides some information on dwellings in the Marlborough District from the 2006 census along with more recent information from rating data.

- Total dwellings from 2006 census – 20700
- Number unoccupied - 3417
- Rate demands for last quarter - 25832
- Of those 5816 were sent outside of Marlborough

In terms of occupancy

- Majority of dwellings are occupied by one family
- Largest proportion of families are couples without children

(e) The demography of people who visit the district as tourists or holidaymakers

The largest proportions of visitors to Marlborough are domestic visitors with the highest numbers coming from Canterbury, Nelson/Tasman and Wellington. Of international visitors the majority come from Australia or the United Kingdom.¹¹

The Ministry of Economic Development forecast that the total number of visits to Marlborough will rise from 1.533 million in 2009 to a total of 1.596 million in 2016, an increase of 4.1% or 0.6% per year. Of this group, international visitors will increase by 22.3% and there will be a slight decrease of domestic visitors. Total visitor nights will increase by 6.1% to a total of 2.209 million per year.

This equates to a total expenditure by visitors to Marlborough of \$245m by 2016.

(f) The overall health indicators of the district's residents

The Medical Officer of Health for the Nelson Marlborough District Health Board, Dr Ed Kiddle, has completed a document that sets out in detail the harms identified in the Marlborough District. A copy of that report is attached as an appendix.

¹¹ Ministry of Economic Development – New Zealand Regional Tourism Forecast 2010 – 2016 – Marlborough RTO

That information shows that at Wairau Hospital around 11% of presentations to the emergency department on a weekend are alcohol related.

(g) The nature and severity of the alcohol-related problems arising in the district

It has been well established that alcohol generates significant harm within our communities in a number of different ways. In economic terms, it is estimated that this harm costs New Zealand approximately \$5.3 billion a year in health and social costs.¹²

An Alcohol Advisory Council of New Zealand (ALAC)¹³ report of the impact of liquor outlet density in Manukau City (2012) found that violent offences are significantly positively associated with all three types of liquor outlet density (off-licence, clubs and bars, and restaurants and cafés). The study also found that on-licence density is consistent with an amenity effect, “wherein the outlets cluster in areas that attract a large number of drinkers, which in turns attracts violence offending owing to over-consumption of alcohol and a greater number of potential targets of violence.”

Crime

Crime is one of the major areas in which harm from alcohol is evident. In 2010, the Police released a framework for preventing and reducing alcohol-related offending and victimisation. The framework shows that on average every day:

- 8764 breath tests are undertaken
- 340 offences occur where Police note alcohol is involved in the offending, including:
 - 100 drink drive offences
 - 30 breach of liquor ban offences
- 52 individuals are either taken home or detained in Police custody due to their state of intoxication
- 40 licensed premises are visited by Police to monitor compliance with the alcohol licensing legislation
- Four licensed premises are visited by Police to test compliance of serving liquor to minors through a Controlled Purchase Operation; and
- Police make two to three enforcement applications to the Liquor Licensing Authority for suspension/variation/cancellation of liquor licences or manager certificates.

As discussed earlier, research from the Ministry of Justice¹⁴ found that 70 percent of alcohol-related offences occurred between 10pm and 5am, with 64 percent being between midnight and 4am.

More detail about alcohol related offending in Marlborough can be found in the main report. The main offences are public place assaults and disorder offences, breach of the Liquor Ban and drink driving.

¹² Alcohol Healthwatch, 2012, Alcohol, injuries and violence, policy briefing paper

¹³ The Impacts of Liquor Outlets in Manukau City January 2012

¹⁴ Ministry of Justice, 2013, Risk based licensing fees – Identifying risk factors for the New Zealand context, Wellington

The peak times for offending are between 9pm and 3am on Friday night through to 3am Sunday morning. Around 22% of people arrested in the Marlborough District had consumed alcohol prior to the offending taking place. There was a small increase in alcohol related offending in the 2009 calendar year which may have been the result of changes to enforcement practices.

Anti-social offending has remained fairly constant over the past 5 years with again a slight increase in 2009. A further analysis of these data shows that per 10,000 of population Marlborough has the highest level of offending across the Tasman District. In both violence and disorder Marlborough is below the national average when measured per 10,000 of population. It is considerable higher than other areas in the district for disorder offences.

Further information related to harm is addressed in the full report including information recorded by ambulance, NMDHB and ACC .

Alcohol-related crashes and their social costs

Nationally, alcohol plays a significant role in motor vehicle crashes. In 2011, driver alcohol/ drugs were a contributing factor in 77 fatal, 360 serious injury and 970 minor injury traffic crashes, resulting in 85 deaths, 466 serious injuries and 1435 minor injuries. The total social cost of crashes involving alcohol/drugs was about \$685 million in 2011, accounting for 22 percent of all social costs associated with injury crashes for 2011.¹⁵

In 2011, 24% of fatal and serious crashes in Marlborough¹⁶ had alcohol as a contributing factor with similar numbers in both urban and rural settings. In the traffic briefing notes by NZTA¹⁷ they indicated there was an above average individual risk for alcohol and drugs and there was high concern in relation to young drivers. The social cost of all crashes in Marlborough in 2011 was \$62.41M.

5. OTHER CONSIDERATIONS: THE BENEFITS OF ALCOHOL

Alcohol revenue

Every year, the alcohol industry generates a significant amount of revenue, at both the local and national level, and supports the employment of a number of workers for Marlborough and New Zealand as a whole. For instance:

- in 2011, excise duty on alcohol generated \$629 million, accounting for 2.5 percent of all government taxes¹⁸
- in 2010, the beverage industry (including soft drinks, juice and water) achieved a \$4.24 billion dollar turnover, with \$971 million in exports¹⁹
- in 2012, wine had an export value of NZ1,177million²⁰
- the spirits industry generates over \$800 million in wholesale turnover, with the drinks industry comprising around 1 percent of GDP

Employment

Nationally, almost 136,000 people were employed in the hospitality industry in 2006, representing 6.4 percent of the approximately 2.1 million people employed in New Zealand in 2006.²¹

¹⁵ Briefing notes – Road Safety Issues, Nelson, Tasman, Marlborough 2011

¹⁶ Briefing notes – Road Safety Issues, Nelson, Tasman, Marlborough 2011

¹⁷ Briefing notes – Road Safety Issues, Nelson, Tasman, Marlborough 2011

¹⁸ Statistics New Zealand, 'National Accounts for year ended March 2011'

¹⁹ Coriolis, 2011, Food and Beverage Information Project 2011 – Sector Stream Beverages, Final report

²⁰ NZ Wine – Annual Report - 2012

Events

Alcohol consumption also generates significant revenue when associated with high profile public events.

In Marlborough events such as the Marlborough Wine and Food Festival, Beers, Brews and BBQ's and the Havelock Mussel Festival contribute to the Marlborough economy.

As an example of that economic contribution, the Marlborough Wine and Food Festival showed strong economic spin-offs, with 60 per cent of attendees from outside the region. On average, they stayed for 3.1 days and each contributed \$911.40 to the region's economy.

6. ALCOHOL CONSUMPTION IN NEW ZEALAND

Alcohol consumption in New Zealand remains high, and alcohol continues to be the most widely used drug. According to a 2008 World Health Organisation (WHO) study²² New Zealand ranked 24th out of 180 countries in alcohol consumption per capita.

In 2010, there were 10.16 litres of alcohol available per person over 18 years of age in New Zealand, which decreased slightly to 10.04 litres in 2011 and even further to 9.85 litres in 2012.²³ Furthermore, in 2009/10, the average household spent \$21.30 a week on alcohol, which represented a 9.2 percent increase from 2006/07.²⁴

WHO data show that the quantity of alcohol consumed in New Zealand was showing a decreasing trend until 1999 when the age of purchase was decreased from 20 to 18. Since then, an increase in consumption is evident, albeit that it has dropped slightly in the last couple of years.

A number of national surveys have reported high levels of consumption amongst respondents. For instance:

- 2004 survey²⁵ found that an estimated 81 percent of New Zealanders aged 12–65 had consumed alcohol in the last 12 months (78 percent females, 83 percent males) – in the 12 month period, approximately 15 percent had consumed alcohol more than seven times a week on average, roughly one-sixth consumed alcohol on average four to six times a week, and a further 38 percent consumed alcohol between one and three times per week.
- 2007/08 survey²⁶ found that 80 percent of adults aged 16–64 years old had had a drink containing alcohol in the past year – in the last 12 months on average, 7 percent had consumed alcohol daily, 22 percent 3–6 times a week and 32 percent 1–2 times a week (Ministry of Health, 2009).
- 2010 Health and Lifestyles survey²⁷ found that more than 80 percent of respondents aged over 15 years reported having consumed a drink containing alcohol in the last year.

While there are no surveys showing consumption patterns in Marlborough the Wellington City Council conducted the 2012 Role of Alcohol survey²⁸ which might provide some insight into

²¹ Infometrics Ltd, 2007, An employment profile of the hospitality industry, Hospitality Standards Institute

²² World Health Organisation, 2008, see: http://www.who.int/substance_abuse/activities/gad/en/

²³ Statistics New Zealand, 'Alcohol Availability,' Available: <http://www.stats.govt.nz/infoshare/SelectVariables.aspx?pxID=d0d9545b-1b46-4be0-a676-92397cb1169>

²⁴ Statistics New Zealand, 2011, 'Average Weekly Expenditure'

²⁵ Ministry of Health, 2007, Alcohol use in New Zealand: analysis of the 2004 New Zealand health behaviours survey – alcohol use, Wellington: Ministry of Health

²⁶ Ministry of Health, 2010, 'The 2007/08 New Zealand Alcohol and Drug Use Survey: Online Data tables, Available: <http://www.health.govt.nz/publication/2007-08-new-zealand-alcohol-and-drug-use-survey-online-data-tables>

²⁷ Health Sponsorship Council, 2011, Health and lifestyles survey: alcohol related attitudes, Wellington: Health Sponsorship Council

consumption patterns. The survey showed 92.5 percent of all survey respondents reporting having consumed a drink containing alcohol in the last year and 62.5 percent of respondents consuming alcohol on a weekly or more frequent basis.

The 2012 Role of Alcohol survey also found that residents were more likely than average (40 percent) to consume alcohol a few times per week or more include:

- those aged 50 years or over (55 percent)
- those living in high income households, with an annual income over \$120,000 (54 percent)
- older couples, with no children living at home (62 percent).

In addition, men are more likely than women to consume alcohol a few times per week or more (45 percent, compared with 36 percent of women).

Location of alcohol consumption

Private residences remain the most popular location for consuming alcohol for New Zealanders, with licensed premises featuring less prominently.

- A 2004 survey²⁹ found that 92 percent had consumed alcohol in their own home in the last 12 months, while 85 percent had consumed alcohol at someone else's home. When it came to consuming large amounts of alcohol in the last 12 months, 47 percent did so in their own home, 42 percent at someone else's home, and a further 16 percent at pubs/hotels/taverns
- A 2007/08 survey³⁰ found that large amounts of alcohol were consumed in the last 12 months at the respondents' own home (42 percent), someone else's home (36 percent), followed by pubs, hotels, restaurants and cafés (19 percent). In terms of licensed premises, pubs, hotels, restaurants or cafés were the most frequently visited (65 percent), followed by nightclubs or bars (28 percent), groups, workplaces or meetings (25 percent) or sports clubs or events (19 percent)
- Ministry of Justice research³¹ found that, where an alcohol-related offence had occurred, 45 percent of offenders had drunk their last drink at home, followed by 15 percent at a licensed premise and 14 percent in a public place

New Zealand Health Survey

A later survey in 2011/12 on hazardous drinking: Finding from the New Zealand Health Survey showed there have been some changes.³²

Selected key findings from that survey showed that:

- In 2011/12, most adults had consumed alcohol in the past 12 months (80%). This is fewer than in 2006/07 (84%). Decreases in past-year drinking were generally seen across all age groups, but particularly among 15–17 year olds.
- Among people who had consumed alcohol in the past 12 months ('past-year drinkers'), one in five (19%) had hazardous drinking patterns. This is about 532,000 people.
- Since 2006/07, the level of hazardous drinking among past-year drinkers has significantly decreased for men (from 30% to 26%), but not among women (13% to 12%).
- People aged 18–24 years (particularly men) are at higher risk of hazardous drinking. Among past-year drinkers, about 44% of men and 26% of women aged 18–24 years have hazardous drinking

²⁸ 2012 Role of Alcohol survey of residents in Wellington city

²⁹ Ministry of Health, 2007, Alcohol use in New Zealand: analysis of the 2004 New Zealand health behaviours survey – alcohol use, Wellington: Ministry of Health

³⁰ Ministry of Health, 2010, 'The 2007/08 New Zealand Alcohol and Drug Use Survey: Online Data tables, Available: <http://www.health.govt.nz/publication/2007-08-new-zealand-alcohol-and-drug-use-survey-online-data-tables>

³¹ Ministry of Justice, 2013, Risk based licensing fees – Identifying risk factors for the New Zealand context, Wellington: 143pp

³² Hazardous drinking in 2011/12: Findings from the New Zealand Health Survey

patterns. However, the rate of hazardous drinking has decreased significantly in past-year drinkers aged 18–24 years from 2006/07 (49%) to 2011/12 (36%).

- Māori have similar rates of past-year drinking as the total population, but have higher rates of hazardous drinking. Rates of hazardous drinking among Māori adults have decreased since 2006/07, (from 33% in 2006/07 to 29% in 2011/12).
- While Pacific adults are less likely to drink alcohol, those who do are more likely to have hazardous drinking patterns (35%) than adults overall (19%).
- People living in more deprived areas are less likely to have consumed alcohol in the past 12 months, but are more likely to have hazardous drinking patterns (18%), than people living in less deprived areas (11%).