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fare

Foundation for Alcohol
Research & Education

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MEDIA CHARTER + PRESS PACK

MEDIA ENQUIRIES

0429 291 120

02 6122 8600

**STOPPING
HARM
CAUSED BY
ALCOHOL**

WHO IS FARE?

The Foundation for Alcohol Research and Education (FARE) is the only independent organisation focused exclusively on alcohol harm in Australia.

Our media-credibility is founded on years of providing research, insights, advocacy and commentary on the multi-faceted issues caused by alcohol use – giving voice to the 'public interest'.

Alcohol has never been cheaper, more available or more aggressively promoted by alcohol companies. Therefore, FARE advocates policy for governments and the health sector to address these three drivers of alcohol harm.

MEDIA OBJECTIVE

FARE's media objective is to focus public attention and policy debate on the burden of alcohol harm at the community level, and away from framing around individual consumption.

The reason for this approach is because alcohol harm is influenced by our broad social and cultural environment and inflicts a heavy cost in terms of community-wide healthcare, public safety, policing, courts and workplace productivity – almost 6,000 lives lost and \$36 billion every year.

LEAD CHANGE

We work with leading researchers, communities, governments, health professionals and frontline service providers, such as police, to bring about change that reduces alcohol harm.

WORLD-LEADING RESEARCH

We monitor and contribute to the global body of knowledge about alcohol and alcohol harm.

STRATEGIC POLICY AND ADVOCACY

We identify and advocate for policies, strategies and programs, which are founded on strong evidence and proven to be effective.

DEFEND THE PUBLIC INTEREST

We highlight where the alcohol industry has ethical and financial conflicts of interest, and advocate for measures to mitigate these in the public interest.

Our position is that the alcohol industry should be excluded from developing public health policy. This position aligns with the World Health Organization (WHO).

THOUGHT LEADERSHIP AND PUBLIC DEBATE

In promoting measures to stop alcohol harm, FARE:

- Undertakes and communicates strategic research
- Increases awareness of the short- and long-term effects of alcohol
- Advocates national and state/territory alcohol policies and measures
- Uses scientific evidence to counter alcohol marketing and industry rhetoric.

OUR EVIDENCE

Together with La Trobe University, FARE funds the Centre for Alcohol Policy Research (CAPR) in Australia, and we collaborate with renowned alcohol researchers and organisations from around the world.



We conduct annual nation-wide polling on attitudes and trends relating to alcohol in Australia.

Our data, research and insights are utilised by the research fraternity, governments, and the corporate and health sectors in Australia and in other jurisdictions.

INSIGHTFUL MEDIA CONTACTS

FARE is an informed media source and a well-respected voice on the global science relating to alcohol and its impact on society. We provide up-to-date alcohol data and research findings on the health impacts, social cost and damage caused by alcohol. In doing so, we ensure the 'public interest' has a voice in debate about alcohol harm in Australia.

Our spokespeople are Canberra-based and regularly provide networks with interviews utilising studio space at the Parliament House Press Gallery. Our key spokespeople have an APH access pass.

ABOUT OUR SPOKESPEOPLE

MICHAEL THORN

Michael Thorn has been FARE Chief Executive since 2011 and is a well-respected commentator on alcohol issues and social/health policy. Michael has extensive experience in both state and national public policy and strategy.



Michael understands the dynamics of political, policy and media cycles and provides informed, evidence-based commentary on alcohol-related topics.

Michael is an approachable, articulate spokesperson and he is adept at providing live commentary and grabs for TV and radio.

TRISH HEPWORTH

FARE's Director of Policy and Research Trish Hepworth is responsible for FARE's policy analysis and development, advocacy, research and research translation.



Trish is a public policy specialist with a legal background and she has worked in government and the non-for-profit and corporate sectors, spanning five countries. Trish has consulted widely on strategic policy, government relations, research and analysis.

Note: High-resolution headshot photos of FARE spokespeople are available by calling 02 6122 8600.

REFERRALS FOR ADDITIONAL TOPIC EXPERTS

FARE is happy to consult its extensive network of researchers and other experts to assist in connecting media with additional spokespeople.

TOPIC AREAS

Most effective policies to reduce alcohol harm

- Alcohol pricing and Minimum Unit Price
- Alcohol taxation
- Density of alcohol outlets
- Marketing control
- Harm prevention, including health promotion

Child and maternal health

- Alcohol consumption during pregnancy
- Fetal Alcohol Spectrum Disorder (FASD)
- Alcohol product health warning labelling
- Alcohol and breast cancer

Population data and information

- Alcohol and alcohol consumption
- Research and insights on the magnitude and types of alcohol harm in Australia
- What Australians think about alcohol and how they perceive alcohol harm (FARE Annual Alcohol Poll)
- Consumer awareness of alcohol harm
- Long-term health harm to self and others, including cancers, cardiovascular diseases (heart disease and stroke), digestive diseases (liver disease) and mental health problems
- Short-term health harm to self and others, including road fatalities, injury, assaults, family and domestic violence, and child maltreatment

Protecting children from alcohol marketing and advertising

- Protecting children and young people from prolific alcohol marketing
- Alcohol advertising in sport and e-sport
- Glorification of alcohol and the social responsibility of sporting codes

Emerging digital alcohol market and promotion

- Online shopping, afterpay, home delivery services
- E-marketing

International experience

- Reducing the harm of alcohol through the global preventative health agenda (WHO/UN)
- Successful international policies, programs and health promotion strategies to reduce harm

CONTENT PLATFORMS AND MEDIA ASSETS

twitter

FARE

FAREAustralia

PREVENTION 1ST

Prevention1stAU

FARE MEDIA

FAREMedia

DRINK TANK

DrinkTankAU

END ALCOHOL ADVERTISING IN SPORT

EndAlcAdInSport

PREGNANT PAUSE

PregnantPauseAU

facebook

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FAREAustralia

PREGNANT PAUSE

PregnantPauseAU

END ALCOHOL ADVERTISING IN SPORT

EndAlcAdInSport

Instagram

END ALCOHOL ADVERTISING IN SPORT

EndAlcAdInSport

vimeo

FARE

vimeo.com/FARE

FARE-SUPPORTED WEBSITES

FOUNDATION FOR ALCOHOL RESEARCH AND EDUCATION www.fare.org.au

DRINK TANK www.drinktank.org.au

CAMPAIGNS

END ALCOHOL ADVERTISING IN SPORT

www.endalcoholadvertisinginsport.org.au

No Alcohol Ads to Kids. No Exception. National campaign to remove alcohol advertising/sponsorship from our favourite sports.

PREGNANT PAUSE

www.pregnantpause.com.au

Encourages Australians to go alcohol free during their pregnancy, or the pregnancy of their partner, family member, friend or loved one.

WOMEN WANT TO KNOW

www.fare.org.au/women-want-to-know

Encourages health professionals to routinely discuss alcohol and pregnancy with women and to provide advice that is consistent with the National Health and Medical Research Council's Australian Guidelines to Reduce Health Risks from Drinking Alcohol.

PREVENTION 1ST

www.fare.org.au/prevention-1st

Advocates public health prevention to reduce Australia's burden of chronic disease.

FARE PARTNERS

CENTRE FOR ALCOHOL POLICY RESEARCH (CAPR) www.capr.edu.au

FARE MEMBER ALLIANCES www.fare.org.au/get-involved/member-alliances



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COMMON TERMS EXPLAINED

There are many terms used to describe alcohol consumption and problems caused by alcohol use, which vary across the public policy arena, the health sector and media commentary and content.

The media has an important role to play to ensure that public debate about alcohol is realistic and accurately helps Australians to make informed choices about drinking.

FARE uses advice, tools and terminology derived from the World Health Organization (WHO), the National Health and Medical Research Council's *Australian Guidelines to Reduce Health Risks from Drinking Alcohol*, and the clinical tools used by Australian mental health experts.

ALCOHOL USE

Refers to any ingestion of alcohol.

STANDARD DRINK

A drink containing 10 grams of alcohol (equivalent to 12.5ml of pure alcohol).

DRINKING PATTERNS

How people drink and the circumstances in which they drink, including amount and frequency.

ALCOHOL HARM

Adverse health outcomes, including death, injury, disease and exposure to violence from alcohol use.

ALCOHOL BURDEN

The health, social and economic cost of alcohol harm.

SINGLE DRINKING OCCASION

A period of alcohol use when a person's blood alcohol concentration remains above zero in between drinks.

BINGE DRINKING

Drinking more than 4 standard drinks in a single occasion, which is the starting point for short-term risk according the Guidelines.

SHORT-TERM RISK

The risk of harm from drinking a specific amount of alcohol in a single drinking occasion.

LONG-TERM RISK/LIFETIME RISK

The risk of developing alcohol-related diseases from drinking specific amounts of alcohol on a regular basis over a lifetime that may cause death or reduce quality of life.

RISKY DRINKING

Drinking more than recommended in the Guidelines.

PROBLEM DRINKING

A drinking pattern that exceeds the Guidelines and increases short-to-long term risks of harm.

ALCOHOL IN PERSPECTIVE

GREATEST KILLERS OF PEOPLE AROUND THE GLOBE ANNUALLY



Sharks kill an average of six people



Around 2000 people die in plane incidents



Influenza kills around 145,000 people



169,000 deaths attributable to drug use



Mosquitos (vector-borne diseases) kill more than 700,000 people



Motor vehicle accidents kill more than one-million people



Around three million people die as a result of harmful use of alcohol

Note: Information drawn from various sources and timeframes.