How we drink, what we think
Public views on alcohol and alcohol policies in the UK
The Alcohol Health Alliance UK (AHA) is an alliance of more than 50 non-governmental organisations whose mission is to reduce the damage caused to health by alcohol. Our members include royal medical colleges, charities, treatment providers and alcohol health campaigners. AHA members work together to:

► highlight the rising levels of alcohol-related health harm;
► propose evidence-based solutions to reduce this harm; and
► influence decision makers to take positive action to address the damage caused by alcohol.
The big picture

Alcohol has become one of the three biggest lifestyle risk factors for disease and death in the UK. Its impact on people and society is high: every day, more than two dozen people die of alcohol-related causes and 33 people are diagnosed with alcohol-related cancer.¹ The financial cost to the NHS in England alone is estimated at £3.5 billion per year.² Moreover, alcohol affects innocent bystanders by contributing to rates of child abuse and neglect, domestic violence, family breakdown, and crime and disorder.

Yet, despite this, alcohol continues to be an accepted part of everyday life. This survey, carried out by the Alcohol Health Alliance UK (AHA), aims to give some insights into what people in the UK think about alcohol, how aware they are about the risks associated with alcohol, and what they would like to be done to address the harms caused by alcohol.

Worryingly, awareness of the low-risk drinking guidelines remains low: only 19% of people know that it is 14 units a week. Awareness of the link between alcohol and cancer has increased, which is positive; yet, still only 3 in 10 people spontaneously link alcohol with cancer. More needs to be done to increase people’s awareness of the health harms linked to alcohol so they can make informed choices about what and how much they drink.

The majority of the public want the government to take action to address the harms caused by alcohol. There’s widespread support for legal requirements to include more information on alcohol labels and packages, such as health warnings, unit content, nutritional information and calories, product information and drink-driving warnings. Most people also support the introduction of measures to decrease the affordability of alcohol, including minimum unit pricing and increasing alcohol duty if the funds raised go into public services. Furthermore, people want to see stricter advertising regulations, such as a 6am-11pm TV advertising ban, to ensure children and young people are protected from alcohol marketing.

The message is clear: the UK Government will have the support of most people in the UK, if it steps up and produces a comprehensive, evidence-based new Alcohol Strategy for England, which introduces measures to:

► reduce the affordability of alcohol;
► restrict the promotion of alcohol to protect children and young people; and
► increase people’s awareness of the risks associated with alcohol.
Methodology

The findings in this report were, unless otherwise stated, collected through an online survey of 1,633 people in September 2018, undertaken by YouGov. The figures have been weighted and are representative of all GB adults (aged 18+). YouGov is a member of the British Polling Council and abide by their rules. Some of the figures may not add up to 100% due to rounding.
Alcohol and society

Alcohol is taken for granted in the UK today, and its consumption is an established part of life. In 2017, consumption of pure alcohol per adult (aged 15+) reached 9.7 litres. This is the equivalent of 427 pints of 4% ABV beer or 100 bottles of red wine (13% ABV) per person per year - or more than a bottle of vodka every two weeks.

Despite this, the majority of the population recognise the harm alcohol causes: almost 7 in 10 people surveyed think that, as a society, the UK has an unhealthy relationship with alcohol. Only 5% think it is a healthy relationship.

Interestingly, younger people seem less concerned: only 58% of 18-24-year-olds think the UK has an unhealthy relationship with alcohol, compared to 71% of 50-64-year-olds.
The majority of people link alcohol closely with a range of social problems, including anti-social behaviour (81% strongly or very strongly related), domestic abuse (74%), ill health (64%), violent crime (60%), road traffic accidents (59%), and sexual assault (58%). Slightly fewer (49%) think alcohol is strongly or very strongly related to child abuse and neglect. This is despite research showing that 37% of child deaths and serious injuries due to neglect are linked to parental drinking.
Alcohol consumption

Asked about their own alcohol consumption, one in five respondents typically drink more than the recommended Chief Medical Officers’ (CMOs’) low-risk drinking guidelines of 14 units a week. This includes double the number of men (28%) than women (14%). In addition, slightly more (22%) state that they do not drink at all. However, it is important to note that there is always a level of under-reporting in surveys. When looking at alcohol sales data, it becomes apparent that a lot more alcohol is sold than what people admit they consume.

Worryingly, only 14% of drinkers are to some extent concerned about how much they drink. In London, this rises to 21%, and it drops to only 11% in both the Midlands/Wales and Scotland.

Of those who are concerned about how much they drink, most are concerned because of health reasons, because they want to watch their weight or lose weight, or because they want to save money. Others want to avoid feeling hungover and are concerned because they have made poor decisions in the past whilst drinking, because their sleep is affected by their drinking, because they sometimes can’t remember what they did whilst drinking, or because they want to be more focused at work.

Why are you concerned about how much alcohol you drink?

- Health reasons
- I want to watch my weight / lose weight
- I want to save money
- I want to avoid feeling hungover the day after drinking
- In the past I have made poor decisions whilst drinking
- My sleep is affected by my drinking
- Sometimes I am concerned I can’t remember what I did whilst drinking
- I want to be more focussed at work
- I want to spend more time with my children/family
- Other
- Don’t know
Public views on alcohol and alcohol policies in the UK

**Public awareness**

**Units & guidelines**

Most people are aware that alcohol content in the UK is measured in units, with 91% of respondents having heard of units before. People with higher socio-economic status are more likely to know about units than those of lower socio-economic status (94% for ABC1 versus 88% for C2DE). Younger people are also less likely to know about units, while almost all of those aged 50-64 have heard of units before.

![Awareness of units](image)

However, despite having heard of units, only 19% of people are able to correctly identify the CMOs' low-risk drinking guidelines of 14 units a week. Women are more likely to know the guidelines than men (22% versus 16%), as are older people. While around a quarter of people aged 50+ correctly identified the guidelines, only 7% of 18-24-year-olds did. People of higher socio-economic status are also more likely to know the guidelines than those of lower socio-economic status.
Awareness about the guidelines for drinking during pregnancy is much higher (67%), yet still almost a third of people do not know that the CMOs recommend it is safest not to drink during pregnancy (or when trying to conceive). Positively, women are more aware of the guidelines than men (72% versus 63%). However, people of lower socio-economic status are again less likely to know the guidelines. At a time when more than 40% of women in the UK continue to drink during pregnancy and four times more children suffer alcohol-related birth defects than the global average, more needs to be done to spread the message and ensure people are informed.5

The Chief Medical Officers’ guideline for both men and women recommend that:

► It is safest not to drink more than 14 units a week on a regular basis to keep health risks low.
► It is best to spread drinking evenly over three or more days. Having one or two heavy drinking episodes a week increases the risk of death.
► The risk of developing a range of health conditions increases the more you drink on a regular basis.
► A good way to help cut down is to have several drink-free days each week.
► The safest approach when pregnant or trying to conceive is not to drink alcohol at all.
Health risks

Asked about which health conditions people think can result from drinking alcohol, liver damage / failure got most unprompted mentions, followed by cancer; heart disease / problems / attack; obesity; mental health problems; cirrhosis; kidney damage / failure; diabetes; and dementia / memory loss.

![Health conditions linked to alcohol, unprompted mentions](image)

It is encouraging to see that cancer is the second-most mentioned condition, with 31% of people generally mentioning cancer unprompted and more listing specific cancers. Although this represents an increase in the awareness of the link between cancer and alcohol, it shows that a large majority of the public still do not link cancer and alcohol spontaneously.

The picture looks better when prompting: given a list of different health conditions, 66% identified cancer as linked to alcohol. Younger people and those of lower socio-economic status are less likely to link alcohol and cancer.

Asked about specific cancers, 84% of people know that alcohol increases the risk of developing liver cancer. However, just under a quarter (23%) know that alcohol can cause breast cancer – this was the second lowest result of all prompted cancers, including some which are not linked to alcohol.

Indeed, it seems that people are just as likely to tick cancers which are not linked to alcohol. For example, substantially more people think that alcohol increases the risk of developing bladder cancer than those who said it increases the risk of developing colon & rectal or breast cancer.
Considering other diseases and illnesses, when prompted, most people know that drinking alcohol increases the risk of developing liver disease (94%), being overweight or obese (83%), depression or anxiety (75%), high blood pressure (72%), heart disease (72%), fertility problems (66%), type 2 diabetes (61%) and stroke (60%). However, fewer than 4 in 10 people know that alcohol increases the risk of developing dementia.
Given the considerable harm alcohol causes to society and people’s health, we wanted to know whether people think it is the government’s responsibility to do more to reduce alcohol harm.

The results show that the majority of the public (55%) think the government should be doing more to tackle problems that society has with alcohol.

This view is held by the majority of people across political party lines: While 50% of people who voted for the Conservative Party in the 2017 General Election said the government should be doing more, this rose to 59% for those who voted Labour and to 63% for those who voted Liberal Democrats. This suggests that ‘nanny state’ arguments, which are used by some parts of the media to counter calls for regulation to protect public health, are not supported by the majority of the public, irrespective of their political affiliations. Indeed, only 3% of people think the government is doing too much to address alcohol harm. Split by political affiliation, this comes to 4% for those who voted Conservative or Liberal Democrats and to 2% for those who voted Labour in the 2017 General Election.
Moreover, 67% of people think that the government should be responsible for communicating the health risks and harms associated with alcohol – almost the same as those who think it is the responsibility of healthcare professionals (68%). Interestingly, most people (53%) also think that the alcohol producers should be responsible for communicating the risks and harms of their products.

Alcohol health labelling – a right to know

One way for alcohol producers to communicate the risks of alcohol is via health warnings on alcohol product labels. International evidence shows that clear labelling of alcohol containers can increase awareness of health messages and may help consumers to make healthier choices – if the labels are clearly legible and understandable.6

However, in the UK, the current self-regulation system is failing to do this: the AHA’s recent report Our Right to Know shows that fewer than 10% of current alcohol labels display the up-to-date CMOs’ drinking guidelines and none contain specific warnings of alcohol increasing the risk of developing certain illnesses and diseases.7

The public generally supports stronger regulation: a staggering 70% of people think warnings that exceeding the drinking guidelines can damage one’s health should be displayed on alcohol labels as a legal requirement. The majority of the public (55%) would also like a specific warning that alcohol can increase the risk of developing cancer. Such a policy will shortly be introduced in Ireland under the Public Health (Alcohol) Act 2018.
General health and specific cancer warnings are again popular amongst the majority of voters across political parties: the majority of people who voted for the Conservative Party, Labour Party or the Liberal Democrats in the 2017 General Election think these elements should be included on labels as a legal requirement.

67% of people also think that alcohol labels should display a warning not to drink when pregnant or trying to conceive. Although 89% of labels surveyed by the AHA contained a ‘no drinking in pregnancy’ pictogram, many of them were small and difficult to see. Fewer than 3% of the products carried the complete information on not drinking while pregnant or trying to conceive. As discussed above, with awareness levels still low and a large proportion of women continuing to drink alcohol during pregnancy, more and clearer information is urgently needed.

Turning to the contents of drinks, 87% of people want to see information on how many units the drink contains. Moreover, 74% want to see product ingredients and 62% want to see nutritional information including calorie content on the labels. Such requirements would bring alcohol labelling in line with food labelling and would help to address the fact that the large majority of adults in the UK do not know or underestimate the calorie content of alcohol.

The majority of people also support a requirement to include a warning not to drink and drive (77%) and information on under-age drinking (55%) on labels.

**Affordability**

One of the most effective policies to reduce demand for alcohol – and with that alcohol harm – is to reduce the affordability of alcohol. This has been recommended among others by Public Health England (PHE), the World Health Organisation (WHO) and the National Institute for Health and Care Excellence (NICE).

Over the last 30 years, alcohol in the UK has become much more affordable: supermarket beer is now 188% more affordable than in 1987, and off-trade wine and spirits are 131% more affordable.
MUP

One of the best ways to address the price of alcohol is through minimum unit pricing (MUP). MUP sets a floor price based on the amount of alcohol in a product. It thereby increases the price of the cheapest, strongest products which are favoured by the heaviest drinkers. A 50p MUP in England is estimated to save 525 lives, prevent 22,000 hospital admissions and cut healthcare costs by £326 million every year.\(^\text{12}\)

Our survey shows that 50% of people support the introduction of MUP in the UK, with only 20% opposing it. Support is even stronger among women (55%) and those above 50 (54%).

The main reasons why people support the introduction of MUP are because they think alcohol costs the NHS and public services too much money (39%), that it will help people’s health (19%) and prevent people becoming alcohol dependent (13%).

The main reasons people oppose the introduction of MUP are because they think it would not be effective (30%) and because they think alcohol is already too expensive (23%). Yet, interestingly, only 9% oppose it because they think it would make their own drinks more expensive.

17% also oppose MUP because they fear it would impact poor people the most. However, the evidence shows that this would not be the case and that poorer groups would gain most from MUP: 82% of lives saved and 87% of quality of life improvements are predicted to come from the lowest income groups.\(^\text{13}\) At the same time, moderate drinkers from the lowest socioeconomic group are estimated to spend, on average, just £1.32 more \textit{per year} on alcohol under a 50p MUP.\(^\text{14}\)
MUP was introduced in Scotland on 1 May 2018, and the Welsh Assembly has passed legislation to implement it in Wales. Before the dissolution of Stormont, the Northern Ireland Government announced plans to introduce MUP, and the Republic of Ireland will be introducing it through the Public Health (Alcohol) Bill which passed the Dáil in October 2018. England needs to act now – we can not afford to be left behind, especially when the majority of the public support the introduction of MUP.

**Tax**

Another way to decrease the affordability of alcohol is through excise taxes. During 2008-12, the alcohol duty escalator did this by automatically increasing alcohol duty by 2% above inflation. This was highly effective in reducing harm: alcohol-related deaths peaked in 2008 (the year it was introduced), fell while it was in place, and have started rising again after it was abolished.15

Since the duty escalator was abolished, alcohol duty has been cut in real terms for six out of seven years. Accounting for inflation, beer duty is now 18% lower than it was in 2012, cider and spirits duty are 10% lower, and wine duty is 2% lower.16 Cumulatively, these policies will cost the Treasury over £1.2 billion in 2018/19, and a total of £9.1 billion by 2024 – money which is urgently needed for the NHS and other public services.17

In our survey we asked about people’s views on taxation. Perhaps surprisingly, the public are not generally against alcohol tax rises: indeed, a quarter of people said that the current tax levels on alcoholic drinks should be increased. In contrast, only 15% thought the current tax levels should be decreased.

Moreover, the majority of the public (52%) support an increase in alcohol taxes if the money raised goes into funding public services impacted by alcohol use, such as the health service and the police.
Marketing & advertising

Alcohol advertising in the UK is commonplace, appearing everywhere from television and billboards, to music festivals and the internet. It is estimated that the alcohol industry spends more than £800 million each year on advertising alcoholic beverages in the UK.

The alcohol industry argues that its advertising is solely to inform existing drinkers and to increase brand share. However, this is problematic, as advertising normalises drinking, disguises the harms of alcohol and also informs the choices of non-drinkers, including children and young people. The future profitability of the alcohol industry logically requires the continual recruitment of new generations of young heavy drinkers.

There is overwhelming evidence that alcohol advertising influences the behaviour of children and young people: several studies have shown that alcohol advertising increases the likelihood that young people will start to consume alcohol and will drink more if they already do so.

The current regulatory system and codes of conduct in the UK are inadequate and are failing to protect children and young people from exposure to alcohol marketing. More effective controls are needed to ensure that alcohol is marketed responsibly, and, in particular, that alcohol marketing only reaches adults.

This is supported by the majority of the public: 75% of respondents support measures to limit children’s and young people’s exposure to alcohol advertising in general. The public also supports a range of specific measures to reduce children’s exposure to alcohol marketing:

<table>
<thead>
<tr>
<th>Measures</th>
<th>Support</th>
<th>Oppose</th>
</tr>
</thead>
<tbody>
<tr>
<td>Measures to limit children and young people’s exposure to alcohol advertising</td>
<td>75</td>
<td>5</td>
</tr>
<tr>
<td>A ban on TV alcohol advertising between 6am and 11pm</td>
<td>63</td>
<td>12</td>
</tr>
<tr>
<td>Only allowing alcohol advertising in cinemas for films with an 18 certificate</td>
<td>74</td>
<td>7</td>
</tr>
<tr>
<td>Controls to limit the exposure of children to alcohol advertising on social media sites</td>
<td>79</td>
<td>6</td>
</tr>
<tr>
<td>A ban on alcohol advertising in outdoor and public spaces such as streets, parks and public transport</td>
<td>61</td>
<td>13</td>
</tr>
<tr>
<td>A ban on alcohol companies sponsoring sporting events such as football tournaments</td>
<td>51</td>
<td>17</td>
</tr>
</tbody>
</table>

This support is again irrespective of voting intention, suggesting that there is broad cross-party support for the government to act to reduce the exposure of children and young people to alcohol marketing.
Conclusion

This report paints an interesting picture of people’s attitudes to alcohol, awareness of its harms and support for policies addressing these harms.

While awareness of units in general is high, knowledge of the updated CMOs’ low-risk drinking guidelines remains very low. Almost three years after the introduction of the updated guidelines, this is unacceptable. People should be supported to make informed choices about their alcohol consumption and have a right to know the risks associated with drinking.

It is positive that awareness of the link of cancer and alcohol is rising; yet, still too many people do not link alcohol to cancer, and especially when looking at specific cancers – such as breast cancer – public knowledge remains too low.

With 67% of people thinking that the UK has an unhealthy relationship with alcohol, and 55% wanting the government to do more to address the harms caused by alcohol, this is a clear call to action.

The public, irrespective of their voting preferences, wants the government to take action to reduce the harms caused by alcohol. As demonstrated, there is widespread support across political divisions for a range of measures including:

► regulations for more and better information on alcohol product labels;
► policies to decrease the affordability of alcohol, including MUP and in some circumstances tax increases; and
► better alcohol advertising restrictions, such as a ban for TV advertising from 6am to 11pm.

With a new Alcohol Strategy being prepared in England, the UK Government has the opportunity to step up and introduce a comprehensive, evidence-based strategy to make alcohol less affordable, less available and less desirable, and to increase consumers’ awareness of the health and other harms related to alcohol.
References


