**APPG on Alcohol Harm – 25 May 2021**

**2:00PM – 3:00PM**

Daniel Jones:

* Has a new publication in Addiction research and theory.
* Dan is a final year PHD student. Globally alcohol use is associated with health, economic and social burdens.
* It’s a public health issue in the UK. Alcohol packaging is where it is suitable to place health messaging and warning.
* There is research exploring how people interpret different warnings about alcohol.
* Most people did not meaningfully engage with messaging on existing packaging, viewing it as unnoticeable and ineffective.
* Responsible drinking messages were considered unhelpful. There was support for including nutritional information, and it’s useful for those trying to lose weight.
* For instance, counting calories. People were sceptical of alcohol companies’ motivations with respect to health and messaging on products: detrimental to sales. There is an idea that alcohol companies don’t care, and they don’t have a desire to help people with messaging.
* Results: people were surprised to see the warnings yet generally supported their inclusion. It would take away the glamorisation of alcohol and take away the appeal.
* What is effective warning design? The warnings would have to be large and combined in text and visual warning.

Lucy Holmes:

* Director of Research and Policy at Alcohol Change UK.
* The APPG is looking at labelling again.
* Public health is higher on our agenda.
* We need an informed population that can make better decisions for their health, for instance, calorie labelling.
* People don’t realist the extent of how many calories are in popular drinks.
* 80% of people are unaware. It is a good time for a wider review of alcohol labelling.
* Currently, law allows very little labelling for alcohol drinks.
* Other products are required to put lots of information on, like alcohol free drinks.
* The most notably absent is a health warning, like cigarettes. The size of the warning and images has grown on tobacco since 1971.
* We are used to these warnings being in existence and it outlines the potential consequences. There’s a very clear link between cause and effect.
* Alcohol only must show the volume, not a pregnancy warning, calories, or nutrition.
* It doesn’t have to show that it is a leading factor for ill health in 15–49-year-olds. Nearly 4 years after the CMO guidelines were introduced, a sample collection of alcohol bottles had outdated guidelines on them.
* Lucy took a snapshot update of 88 labels last week and took pictures of new products that came out this year as well. 2/3rds now have the up-to-date CMO guidelines.
* There has been some improvement. But big brands are still deciding not to show these guidelines. Brewdog has very little nutrition on their labels besides what’s legally required.
* More of us are shopping online than before, so the other place we can get this info is the product website or supermarket website, but on the website and in store, such as Barefoot Pinot Grigio, there was no nutritional information.
* WKD Blue in a 700ml bottle has 15 teaspoons of sugar, and this can only be found if you test it in the lab because this information can’t be found anywhere.
* What about people who are digitally excluded? Information should be on the bottle and not just online.
* We need a proper review of labelling based on evidence that makes it fair for consumers.

**QUESTIONS:**

# Diane Goslar:

* Health labelling should ‘go through the Achilles heel’. Need a variety of health warnings as people respond differently. For example, some people may be more motivated by learning about the link between alcohol and brain damage, for others alcohol and cancer may be more effective.

# Ian Gilmore:

# Warnings and information needs to be nuanced towards the individual and their needs.

# Lucy Holmes:

* There has been testing for which type of health conditions elicit a response. For men, the threat of stroke elicited more of a response to not drink excessively.

# Ian Gilmore:

* For men who are heavy drinkers, it was stroke that would leave them disabled who had more of a potential impact on their behaviour. Liver disease would cause death, but being disabled was associated with more fear.

# Dan Carden MP:

* There has been some confusion about the consultation on alcohol labelling, what should we be looking at during this consultation?

# Lucy Holmes:

* The report, ‘*Drinking in the Dark*’, contains key recommendations. Those principles I’ve outlined.

# Lord Brooke:

* There is no confusion, they decided they won’t do it, but when they had an outcry from that, they decided to do another consultation. They didn’t want to crucify the drinks industry. Now they are having another consultation. The industry remains to be all powerful.

# Jennifer Keen, IAS:

* The government’s response to this, the date they are thinking of doing this is 2024, says a minister. The industry is dragging their feet saying they need an awful lot of time to change these labels. But this isn’t the case, when they want to update their labels, for example, providing information about a new sustainability initiative, they have proven to do it very quickly. We need better implementation of units. People don’t have a proper understanding of that.

# Richard Piper from Alcohol Change UK:

* This is about power. It is a simple issue between the power of citizens and what we need and deserve versus the power of private interests. It seems so anti-democratic for the industry to decide this by themselves. Us as citizens should decide what we get to put on our labels.

# Dan Carden MP:

* Dan was amazed to learn how alcohol labelling and marketing regulation is done across the industry; it is split between 3 bodies.

# Lord Brooke:

* We should think of getting 2 or 3 of the CEOs from the supermarket to get talking about this on the group. Supermarket own brand products have performed better in terms of labelling.