

# Developing Health First, the UK's independent alcohol strategy: a case study of an effective advocacy initiative

Linda Bauld, Katherine Brown,  
Ian Gilmore & Gerard Hastings



UKCTAS

UK Centre for Tobacco & Alcohol Studies

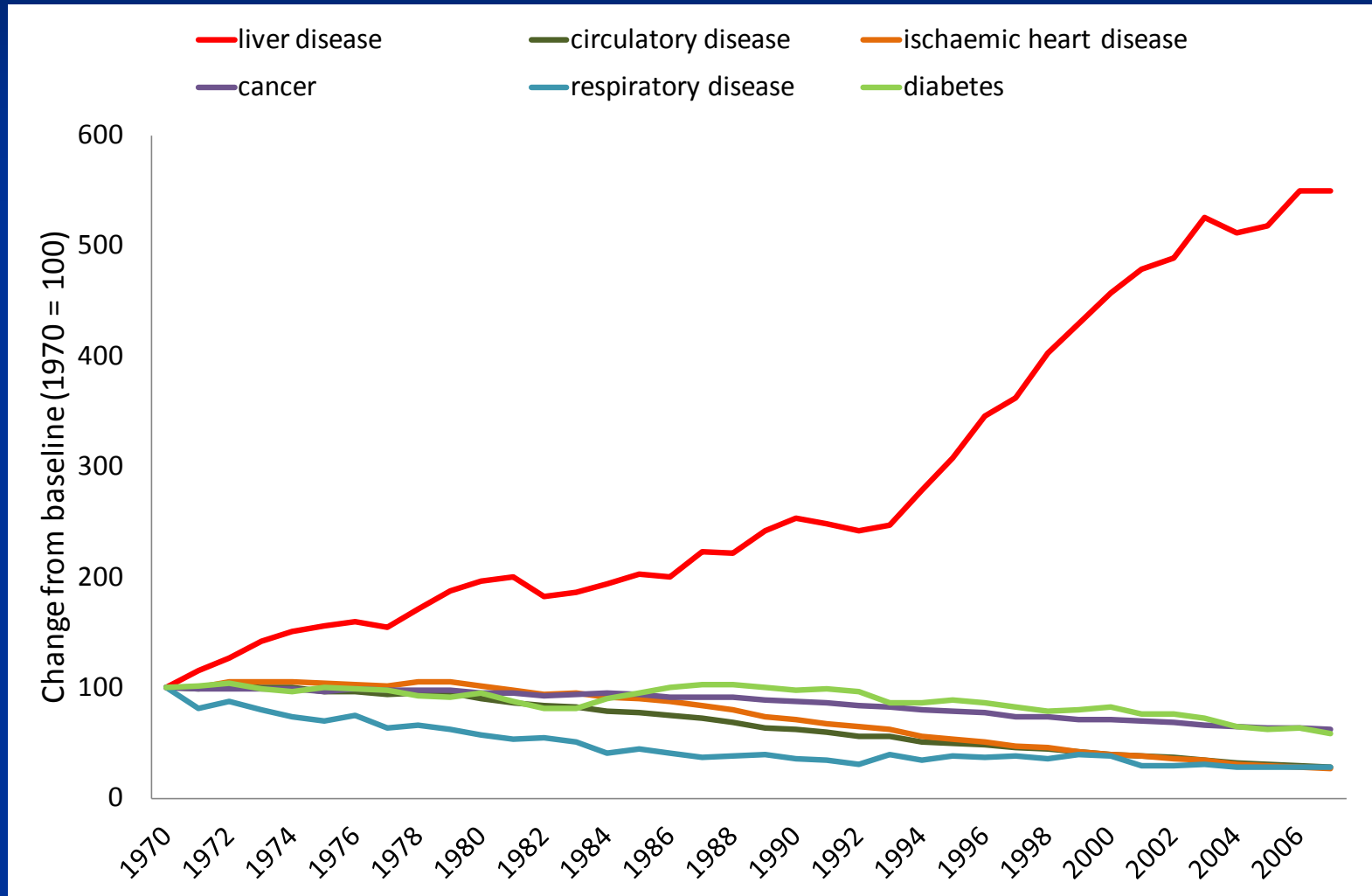


# Outline

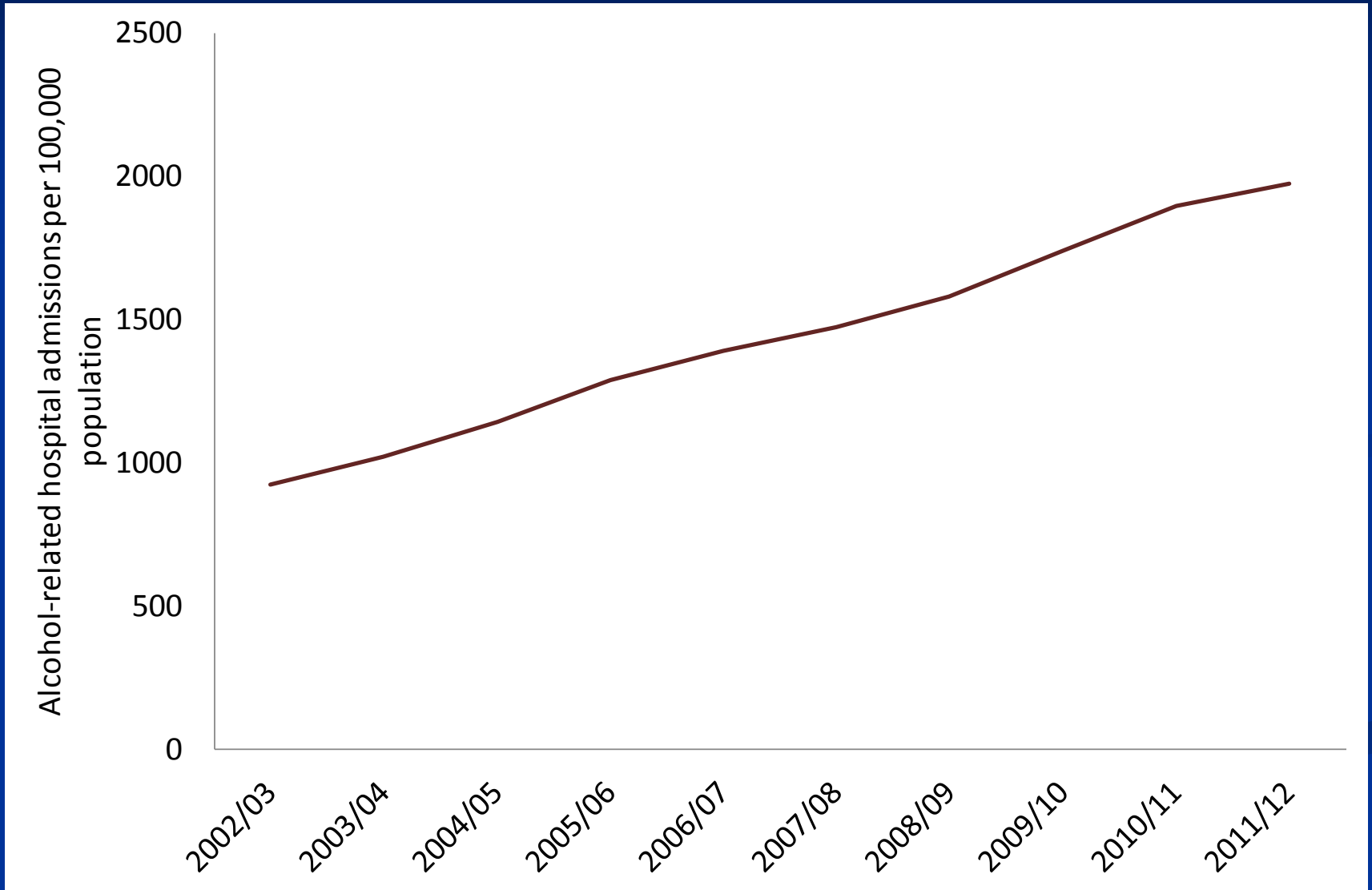
- Why was an independent strategy needed?
- Strategy development
- Recommendations
- Public opinion in the UK
- Next steps



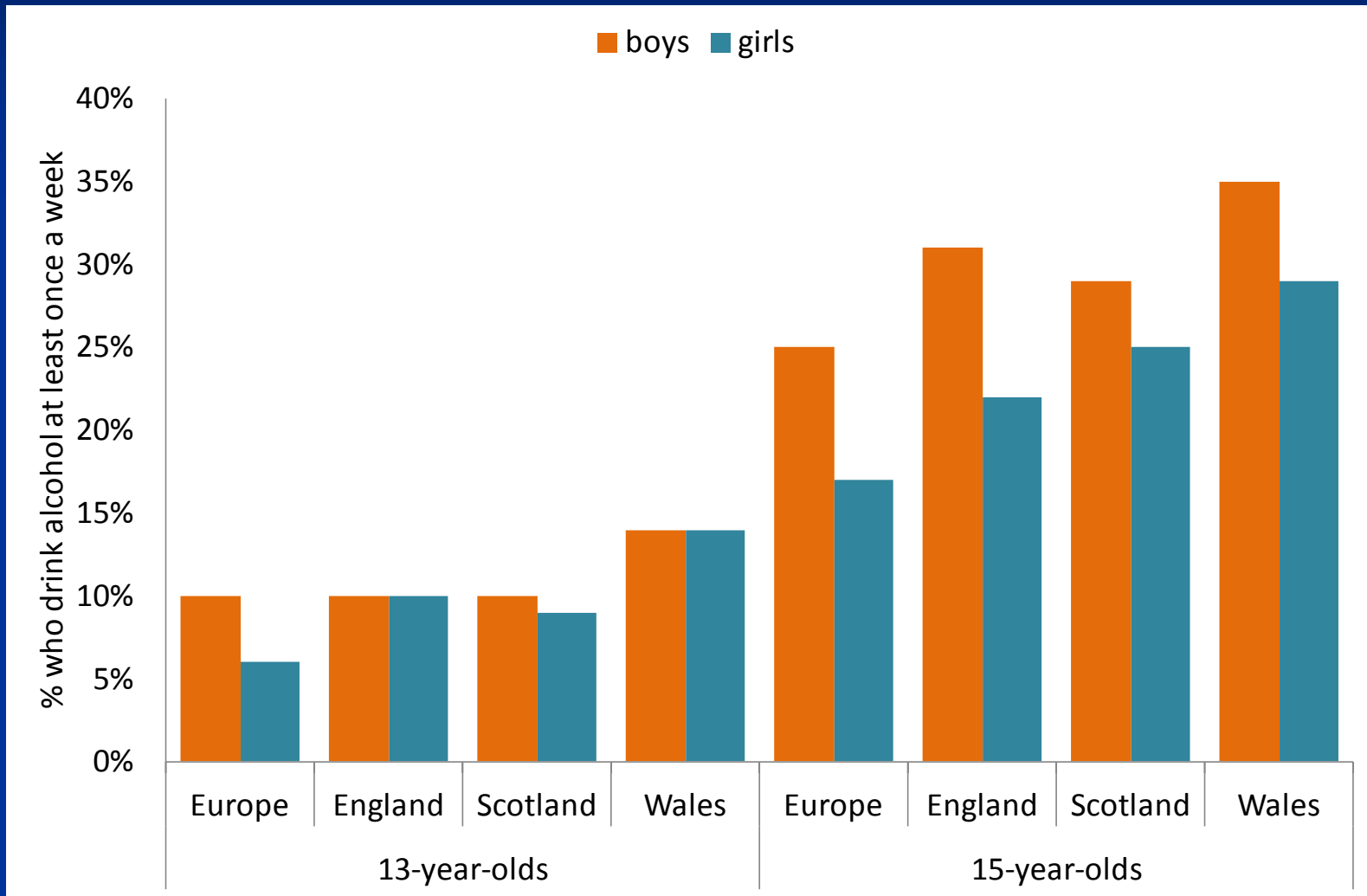
# Deaths among people aged under 65 in the UK for major conditions, compared to 1970



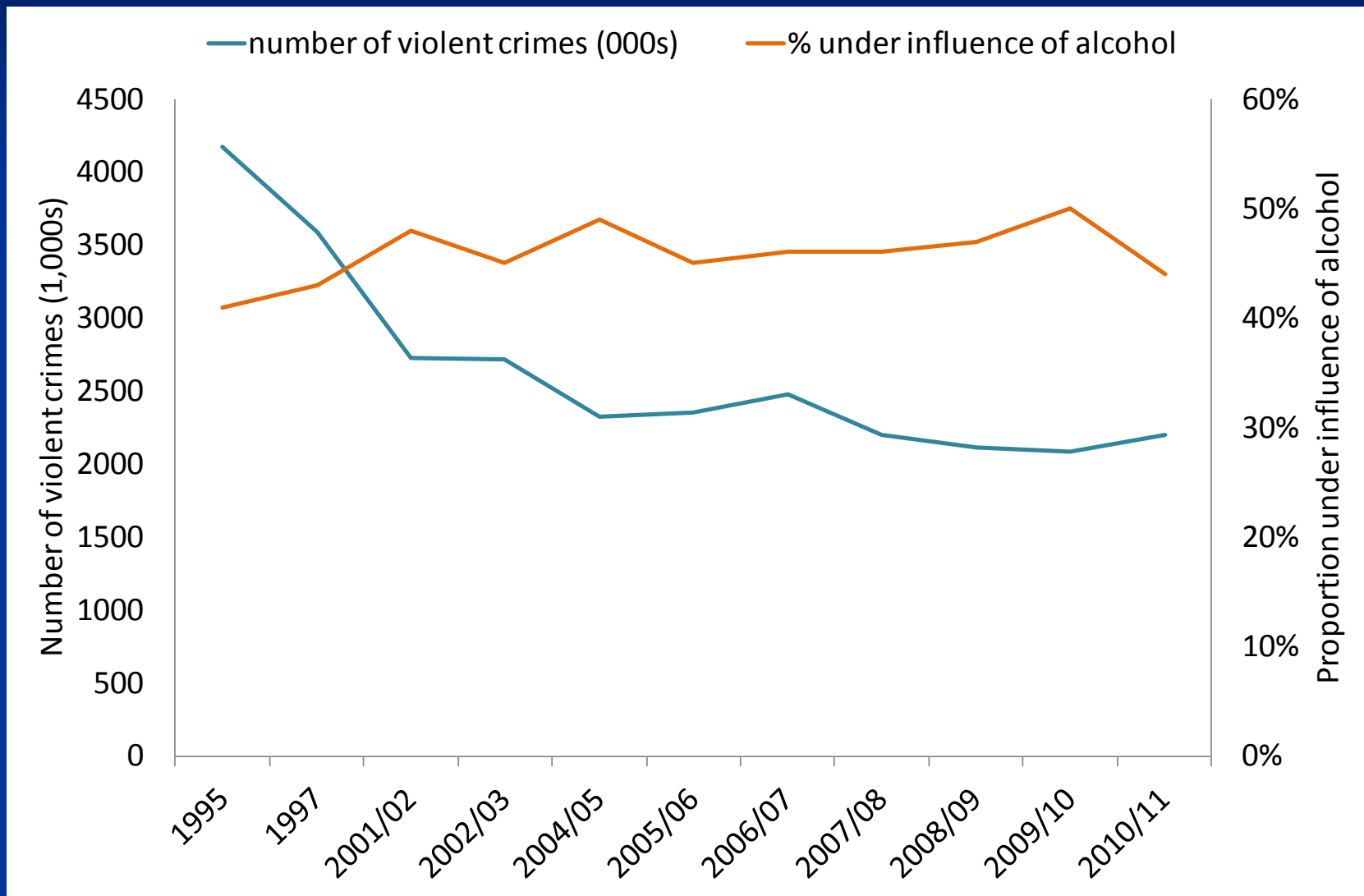
# Alcohol-related hospital admissions per 100,000 population in England 2002-2012



# Weekly drinking by 13-year-olds and 15-year-olds in Great Britain, 2009/10



# Violent crimes and the role of alcohol: England and Wales 2005 – 2011



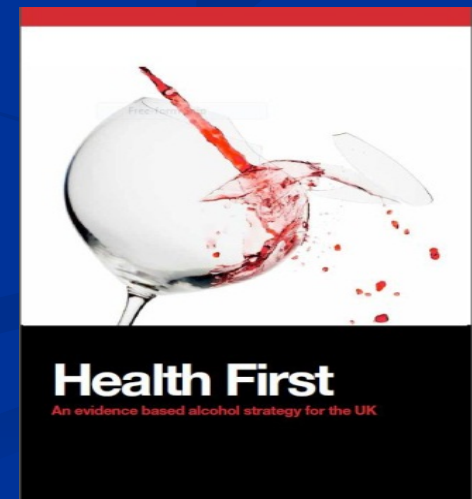
Source: Chaplin et al, 2011 (British Crime Survey)

# Strategy Development

- Meeting of UK tobacco and alcohol researchers, clinicians and advocates in September 2010
- Concern about the UK 'Responsibility Deal' and perceived need for an independent voice
- Funding secured from Cancer Research UK, the British Liver Trust and 6 other organisations
- Strategy group formed, chaired by Sir Ian Gilmore

# Strategy Development

- *Health First* developed over two years through regular meetings of the strategy group, reviews of the literature and consultation with a wider group of stakeholders
- A UK public opinion survey to inform the strategy was conducted by Yougov in June 2012
- Publication and work with the media in March 2013





# Recommendations

- 30 Recommendations developed focusing on price, promotion, place, product and other policy areas
- 10 chosen as key recommendations
- Positioned as a long term strategy for all parts of the UK, with broad policy areas that have international applicability.

# Price

- A minimum unit price of 50p per unit of alcohol should be introduced for all alcohol sales, together with a mechanism to regularly review and revise the price
- Tax on an alcohol product should be proportionate to the volume of alcohol it contains

**3 for  
£10.00**

On Selected Wines 75cl  
£3.71 each SAVE £1.13  
Buy 6 save 10%

[Click to see promotion](#)

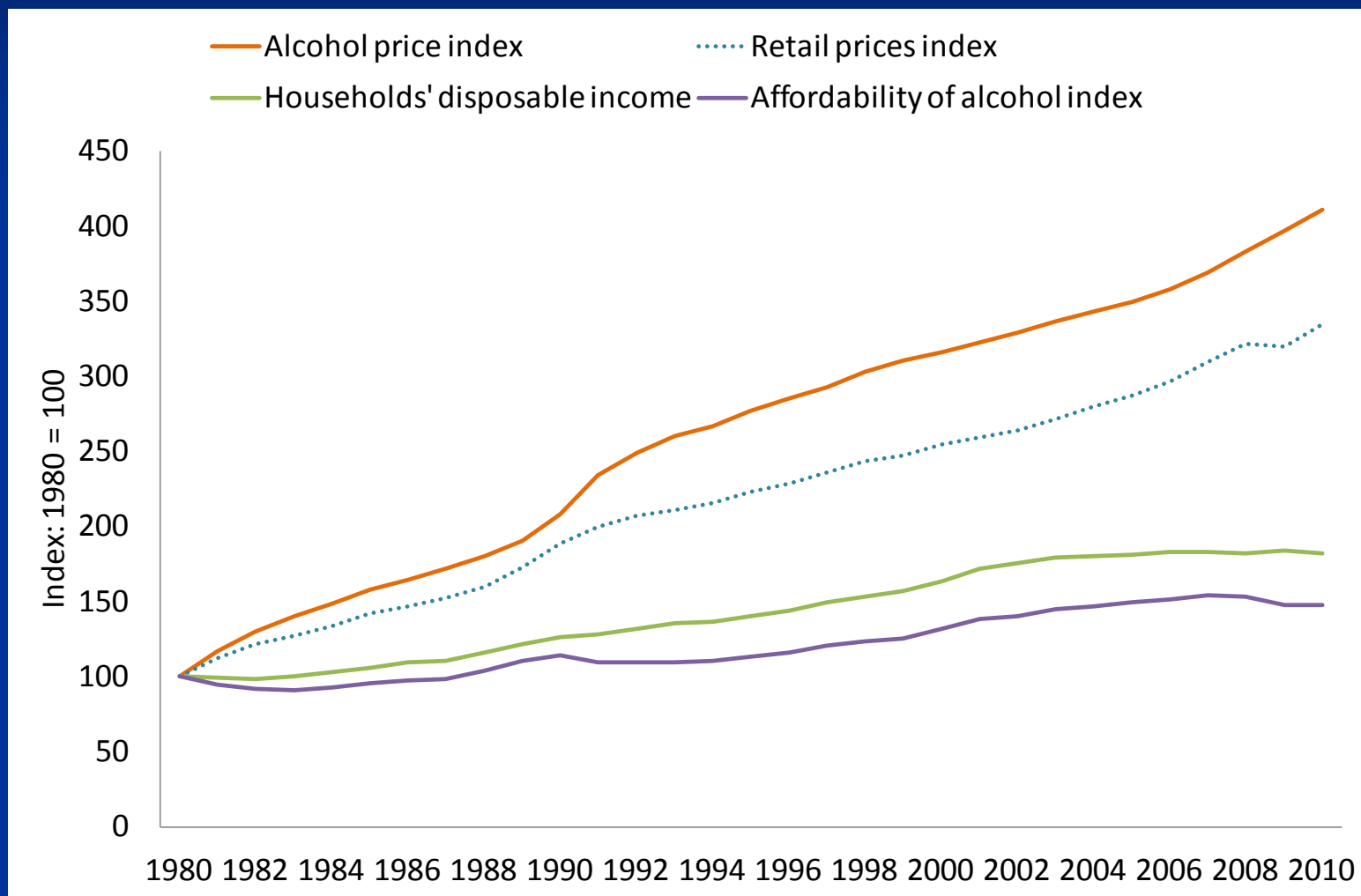
Three cans of beer are shown. Two are 'TWO BEERS' brand 'EXTRA SMOOTH' and one is 'BECK'S' brand 'PILSENER BEER'.

buy any 3 for  
**£10.00**  
save  
**£4.07**

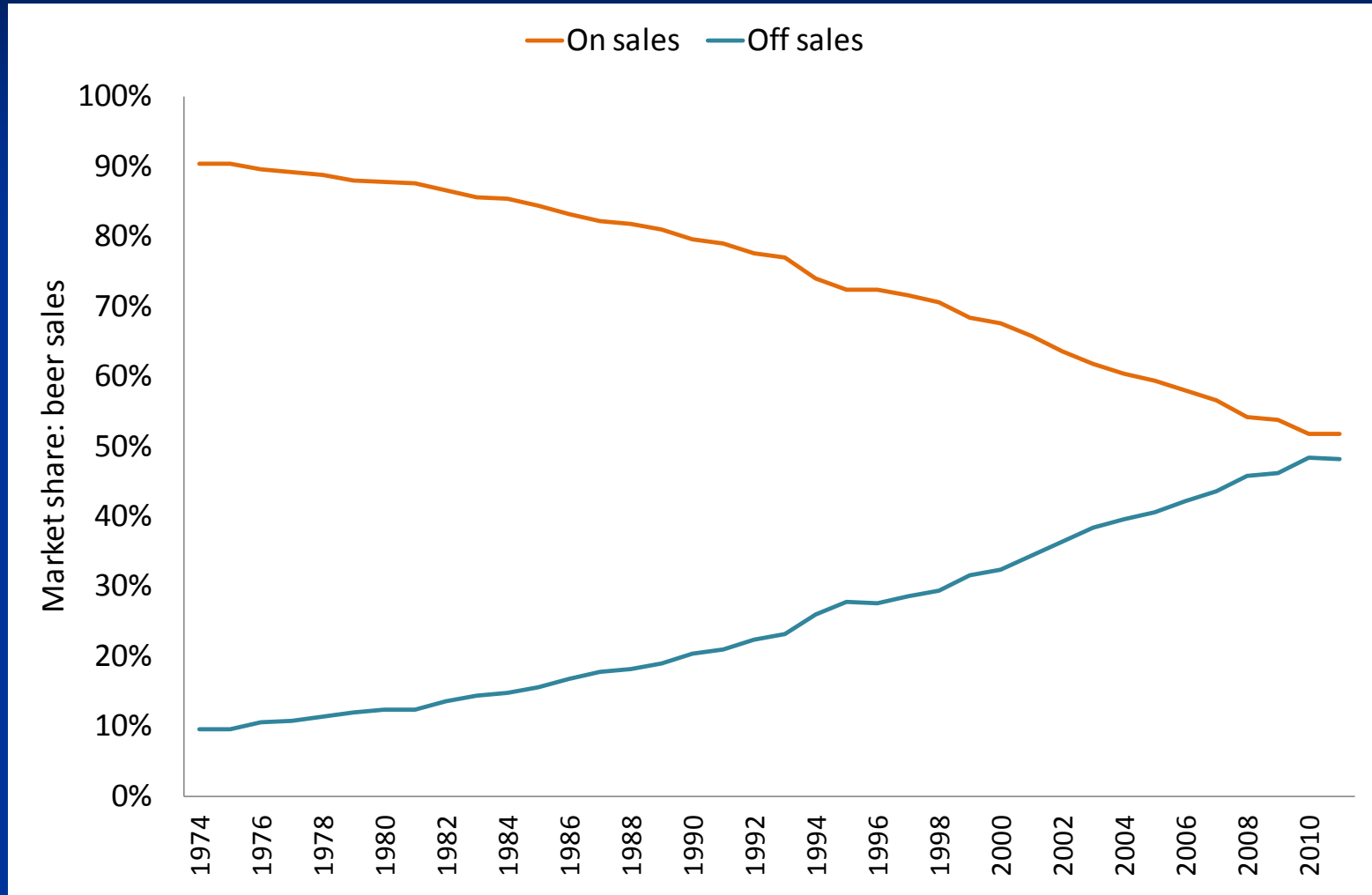
# MUP and Taxation

- Taxes and minimum unit pricing are complementary pricing mechanisms
- Taxes apply to all types of products
- MUP in contrast, targets the cheapest drinks in the cheapest (i.e. retail) setting
- Despite rising alcohol taxes in the UK, it is still possible to purchase drinks for a few cents/pence per unit. MUP would address this.

# Increases in alcohol prices, household incomes and the affordability of alcohol in Britain, 1980 – 2010 (ONS)



# Beer sales in Britain, 1974-2011 by sector market share

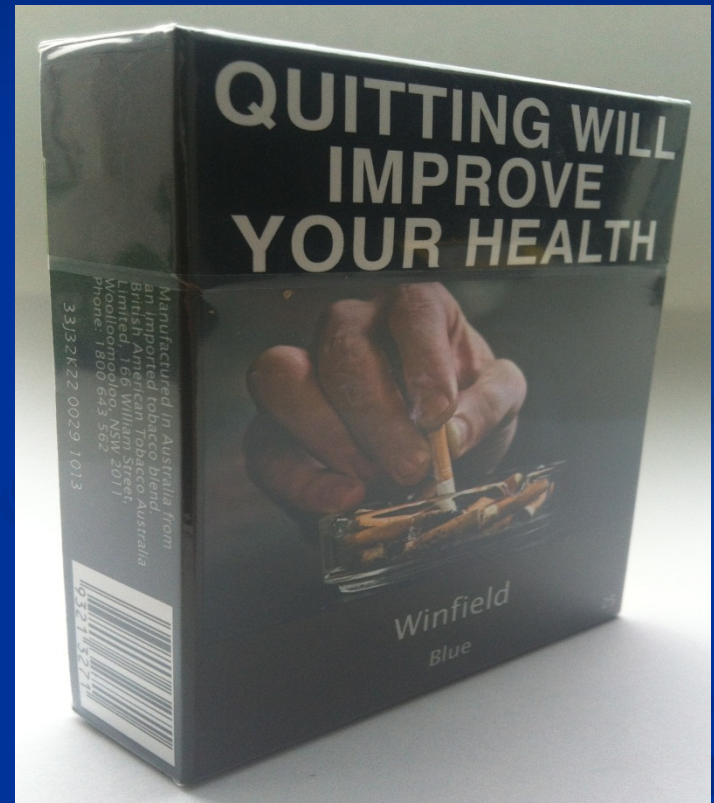


Source: BBPA, 2011

# Products and Packaging

- The sale of alcohol products that appeal more to children and young people than adults should be prohibited
- At least one third of every alcohol product label should be given over to an evidence-based health warning
- Every alcohol product label should describe the product's nutritional, calorie and alcohol content

# Packaging: Australia



**October 2002**

**May 2003**

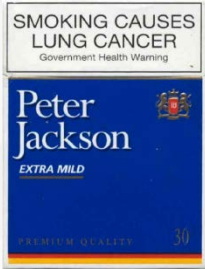
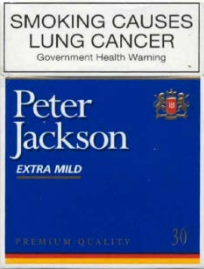
**U.K.**



**Canada**



**Australia**

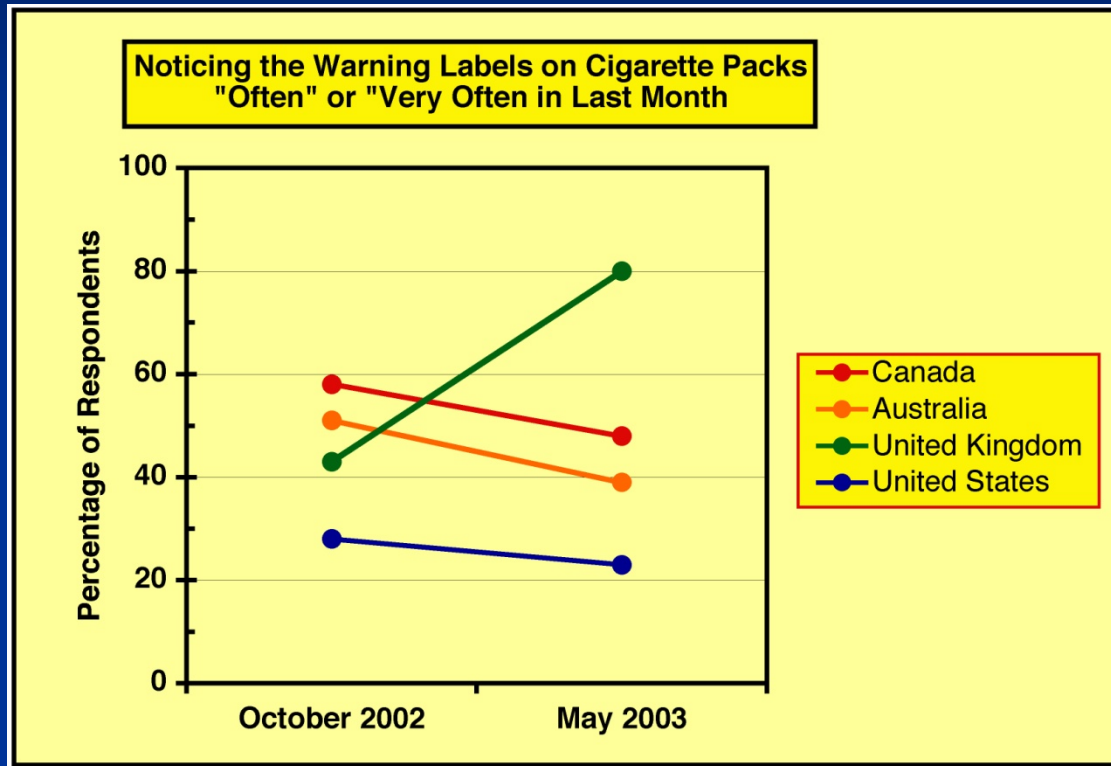


**U.S.**



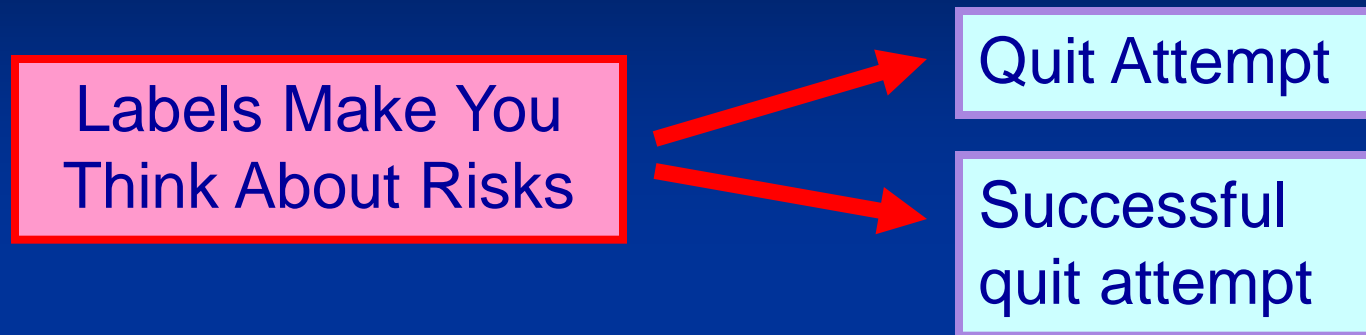


# Enhancing warning labels increases label salience/noticing



**The enhancement of warning labels in the U.K. had a huge impact on labels salience/noticing, way above even Canada.**

# Relationship Between Labels and Quitting



Smokers who report that the labels make them more likely to think about risks of smoking were:

- more likely to **attempt to quit** (OR = 1.14)\*
- more likely to **successfully quit** (OR = 1.89)\*

\* Statistically significant at  $p < .05$


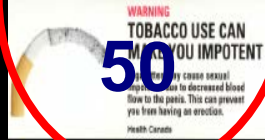
Controlling for Gender, Age, Income, Education, Ethnicity, Prior Quit Attempts, Intentions to Quit

# Do warning labels increase knowledge?

Smoking causes impotence:	Canada	Aus.	U.K.	U.S.
Wave 1	 <p>60</p>	36	36	34
Wave 2				

**Only Canada had a warning label about impotence at Wave 1, but then U.K. added an impotence label between Wave 1 and Wave 2**

# Do warning labels increase knowledge?

Smoking causes impotence:	Canada	Aus.	U.K.	U.S.
Wave 1	 60	36	36	34
Wave 2	 63	45	 50	33

**Substantial increase in knowledge about impotence in the U.K. compared to the other three countries after the label on impotence was introduced in the U.K.**

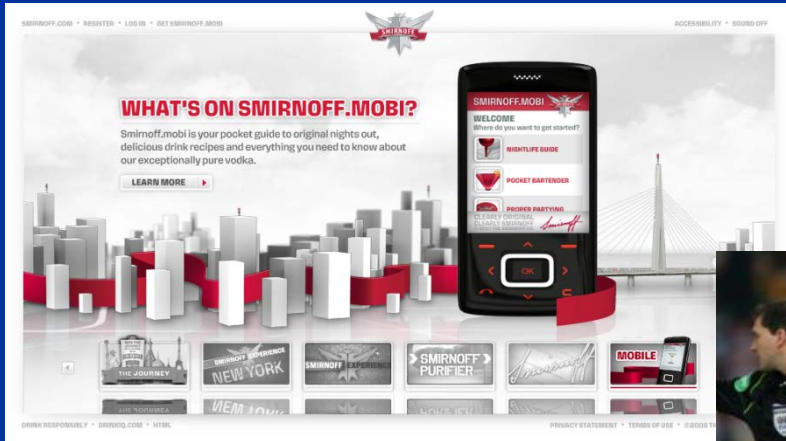
# Caveats: Warning labels

Research on cigarette pack warning labels has also found that:

- Amongst young people, labels have more impact on non smokers or those experimenting with smoking than regular smokers
- Visual warnings on the back of packs are not as effective as on the front
- Visual health warnings need to be changed every few years – salience diminishes over time

# Promotion

- There are very limited advertising restrictions currently in place in the UK. *Health First* recommends that all alcohol advertising and sponsorship should be prohibited (with a phased introduction)



# Place

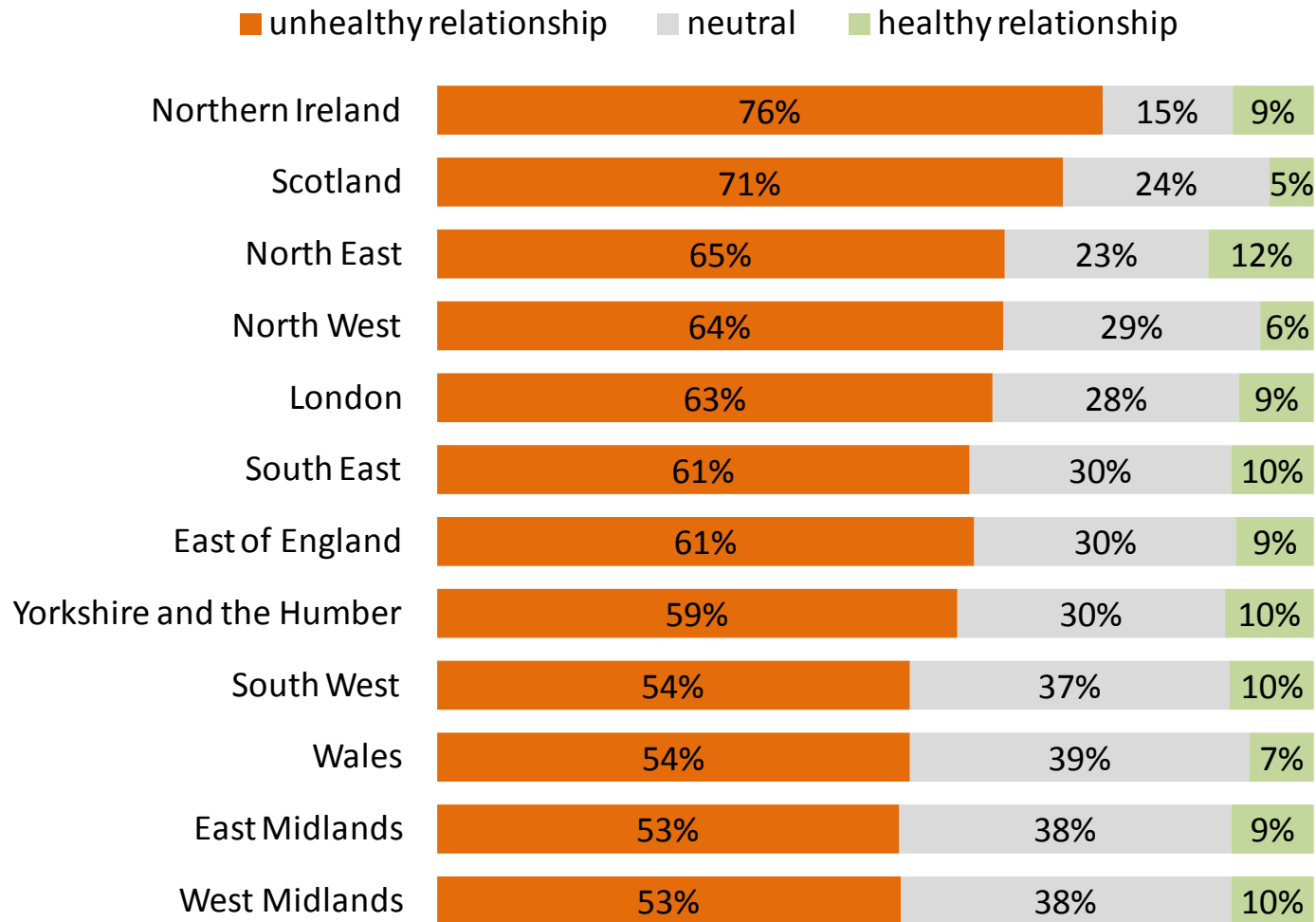
- Public health should be a statutory obligation of licensing
- Licensing legislation should be comprehensively reviewed
- Restrictions on place and time of sale
- Local authorities in the UK need to develop comprehensive alcohol strategies that prioritise public health and community safety

# Early identification and treatment

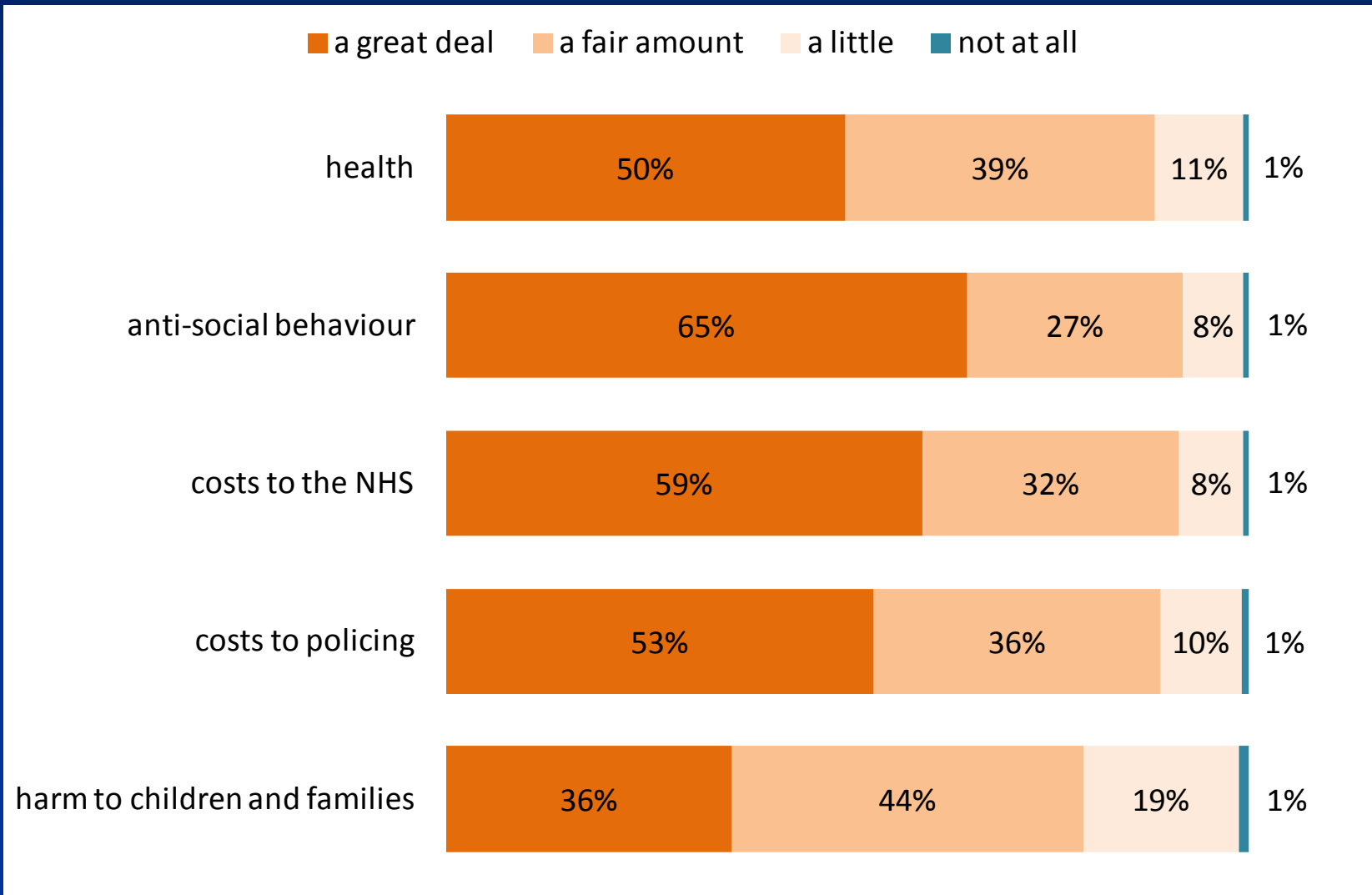
- All health and social care professionals should be trained to provide early identification and brief advice
- People who need intensive interventions should be routinely referred to specialist alcohol services
- Greater investment in specialist community-based alcohol services
- Every acute hospital should have a specialist, multi-disciplinary alcohol care team tasked with meeting the alcohol-related needs of those attending the hospital and preventing readmissions.



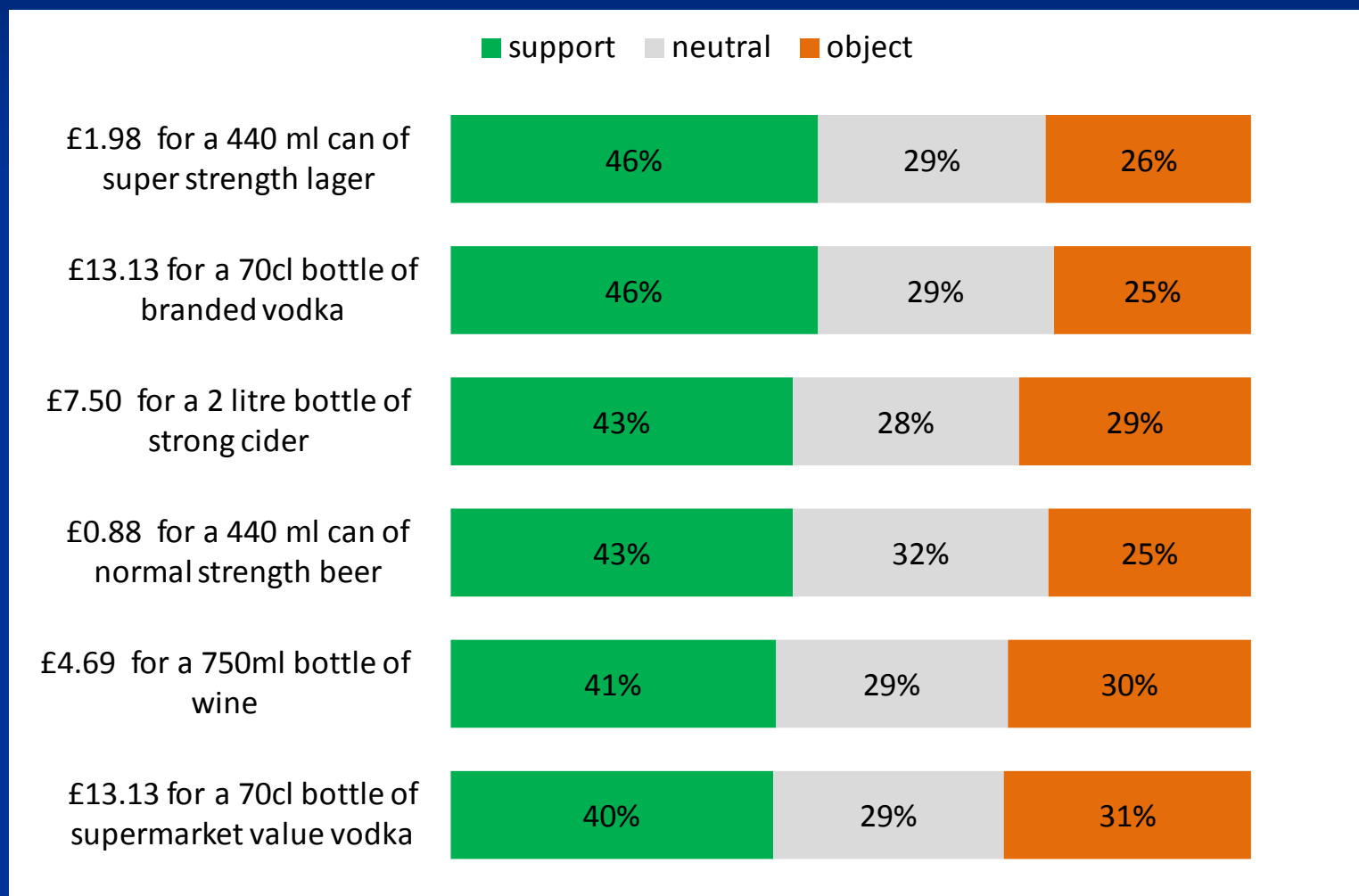
# Assessment of the British people's relationship with alcohol



# Respondents views of the effects of alcohol



# Respondents' support for minimum prices for alcohol products based on a MUP of 50p per unit of alcohol.



# Next steps

- *Health First* is currently being used by members of the Alcohol Health Alliance as their key national strategy and to inform lobbying efforts for party manifestos
- It provides an example of how civil society (researchers, clinicians and advocates, in our case) can come together to call for action, independent of government or the alcohol industry
- There is a need for comprehensive strategies in many countries, and *Health First* may provide one useful example.

# Thank you

[Linda.Bauld@stir.ac.uk](mailto:Linda.Bauld@stir.ac.uk)

[Kbrown@ias.org.uk](mailto:Kbrown@ias.org.uk)

Acknowledgements:

Strategy group members, Will Anderson,  
Martine Stead, Richard Purves,  
Crawford Moodie, Ann McNeill