

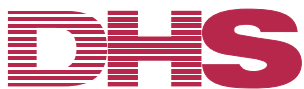
Consumer Labelling and Alcoholic Drinks

RECOMMENDATIONS & CONCLUSIONS



European Commission





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CONSUMER LABELLING AND ALCOHOLIC DRINKS

1. ALCOHOL AS A TOXIC AND DEPENDENCE PRODUCING SUBSTANCE

Of concern to consumer protection, alcohol is a ubiquitous toxin that can harm almost any system or organ of the body leading to more than 60 different acute and chronic disorders. Alcohol can also exacerbate pre-existing mental and physical disorders, adversely interact with other prescribed and illicit drugs in the body, and contribute to a wide range of social problems.

Alcohol is a carcinogen (cancer causing agent) for a wide range of cancers and is toxic to the liver and cardiovascular and immune systems. Alcohol is also teratogenic, being toxic to the foetus, where there is no evidence for a safe level of alcohol consumption. Alcohol is an intoxicant, leading to a wide range of adverse effects including risk taking behaviour (such as unprotected sexual activity), accidents and injuries (also while driving vehicles or operating machinery), violence, and acute alcohol poisoning that also pose a significant risk to third parties.

There is wide individual variation in the toxic effects of consuming a given amount of alcohol. Further the effects of alcohol show no threshold below which alcohol can be regarded as entirely risk free. Therefore, the adverse effects of alcohol are highly unpredictable, and lead to the conclusion that there is no scientific means of identifying what is a “safe” or “sensible” level of alcohol consumption for any one individual.

While knowledge of the precise mechanisms is yet to be fully understood, there is clear evidence for the capacity of alcohol to produce a state of dependence, CNS depression and stimulation, ill effects, and abuse liability. A wide range of genetic, physiological, psychological, environmental, cultural, gender and other factors are known to mediate the dependence potential of alcohol. There is therefore no simple means of identifying individuals definitely at risk, or not at risk, of alcohol dependence.

2. CONSUMER PROTECTION IN EUROPE

The background to consumer policy in Europe includes the Commission’s Consumer Protection Policy¹ and the Consumer Aquis, which is currently under review². One of the objectives of the Consumer Protection Policy is to protect consumers effectively from the serious risks and threats that they cannot tackle as individuals. The Policy proposes that this can be achieved through a simple legal framework, better monitoring of the consumer market, improved evidence, better consultation and better representation of consumers’ interests, and through ensuring an effective application of the rules notably through enforcement, cooperation, information, education and redress. The Directive on general product safety requires produ-

1 http://ec.europa.eu/consumers/overview/cons_policy/EN_2099.pdf

2 http://ec.europa.eu/consumers/cons_int/safe_shop/acquis/green-paper_cons_acquis_en.pdf

cers themselves to provide consumers with the relevant information to enable them to assess the risks inherent in a product, where such risks are not immediately obvious without adequate warnings, and to take precautions against those risks³.

Labelling is viewed as an important market tool being an integral part of communication between societal players (for example, producers to consumers, directly and via intermediaries, and authorities to consumers). Labelling is a means of delivering a clear message to consumers that alcohol is not an ordinary commodity; for example a message about alcohol and pregnancy or a message informing young people that alcohol is toxic. Warning labels have been defined as “Messages printed on alcoholic beverage containers warning drinkers about the harmful effects of alcohol on health”⁴.

Nutrition labelling is currently not compulsory unless a nutrition claim is made. Tobacco labelling is governed by Directive 2001/37/EC in which each unit packet of tobacco products must carry a general warning and an additional warning taken from the list set out in Annex I to the Directive. For the moment there is no obligation at European level to use colour photographs or other illustrations on tobacco packages to depict and explain the health consequences of smoking; it is up to each Member State to decide, as some are doing.

Current EC Directives require that all alcoholic drinks over 1.2% volume state their alcohol content on their label, and all products containing certain allergens should list these on the label. In addi-

tion, wine and spirits must indicate “contain sulphites”. Further requirements relating to ingredients listing may also be impending, following a recommendation that the feasibility of mandatory listing of ingredients on alcoholic beverages should be investigated.⁵ At present, there is no obligation to mention any health warnings, although a number of countries, for example, Finland and France, are doing this, and the United Kingdom is planning this.



French motif
Consumption of alcoholic beverages during pregnancy even in small amounts can seriously damage the child's health

³ http://europa.eu.int/eurllex/pri/en/oj/dat/2002/l_011/l_01120020115en00040017.pdf

⁴ Babor TF, Caetano R, Casswell S, Edwards G, Giesbrecht N, Graham K, Grube JW, Gruenewald PJ, Hill L, Holder HD, Homel R, Österberg E, Rehm J, Room R & Rossow I (2003). Alcohol: No Ordinary Commodity. Research and Public Policy. Oxford, Oxford Medical Publication, Oxford University Press.

⁵ pp14, http://ec.europa.eu/comm/food/food/labellingnutrition/foodlabelling/effl_conclu.pdf.

3. EVIDENCE FOR THE IMPACT OF WARNING LABELS

Labelling and consumer information should be understood as only one measure within a more general comprehensive approach to reducing the harm done by alcohol. Health labelling should be considered in the more general sense of consumer information within the context of merchandising, advertising and point of sale, noting that there is not always a clear distinction between product information and the promotion of a product. A label is also not the only way to inform consumers. Packaging, information material and educational approaches are other means. However, labelling is a means of delivering a clear message to consumers; for example a message about alcohol and pregnancy; or a message informing young people that alcohol is toxic.

Advertising

In the context of advertising, it should be noted that there is an increasing amount of evidence that shows that the volume of advertisements increases the likelihood of young people starting to drink, the amount they drink, and the amount they drink on any one occasion⁶. These findings are similar to the impact of advertising on smoking and eating behaviour. For example, amongst US school children, exposure to beer displays in shops predicted drinking onset in the next two years amongst nondrinkers, and exposure to alcohol advertisements in magazines or beer stands at sports or music events predicted greater frequency of drinking amongst drinkers two years later⁷. In a US study, if a 11-12 year old, compared with the average, watched 60% more alcohol advertise-

ments on TV, one year later, they were 44% more likely to have used beer, 34% more likely to have ever used wine or spirits, and 26% more likely to have had 3 or more drinks on one occasion⁸.

Education

A variety of educational approaches have been used in an attempt to inform consumers and to reduce the harm done by alcohol, including education of younger people in classroom settings and information campaigns using mass media, including the use of drinking guidelines. Whilst the provision of information and persuasion to reduce alcohol related harm might seem appealing, particularly in relation to younger people, theoretically it is unlikely to achieve sustained behavioural change in an environment in which many competing messages are received in the form of marketing and social norms supporting drinking, and in which alcohol is readily available. Many careful systematic reviews have evaluated school based education which aimed to reduce alcohol related harm, and found that classroom based education is not an effective intervention to reduce alcohol related harm. On the other hand, there is a body of evidence to suggest how the impact of educational programmes could be enhanced, and educational pro-

6 Anderson, P. (2007) Commercial Communications and Alcohol. Utrecht: National Foundation for Alcohol Prevention.

7 Ellickson PL; Collins RL; Hambarsoomians K; McCaffrey DF (2005). Does alcohol advertising promote adolescent drinking? Results from a longitudinal assessment. *Addiction* Feb;100(2):235-46.

8 Stacy AW, Zogg JB, Unger JB, Dent CW. (2004). Exposure to televised alcohol ads and subsequent adolescent alcohol use. *Am J Health Behav* 28: 498-509.

grammes do play a role in seeking public support for relevant alcohol policy measures.

Public information campaigns

In general, public information campaigns are also an ineffective antidote to the high quality, pro-drinking messages that appear far more frequently in the media. Further, counter advertising (a variant of public information campaigns which provides information about a product, its consequences, and the industry that promotes it in order to decrease its appeal and use) has inconclusive effects.

Drinking guidelines

Whilst drinking guidelines have been used in a number of countries, there have been no evaluations that find an impact of these guidelines on alcohol related harm. The United Kingdom's 'sensible drinking guidelines' when relied upon as a key prevention strategy in a liberalizing policy environment failed to deter increases in alcohol consumption.

Responsibility advertising

In a number of countries, the alcohol industry has engaged in 'responsibility advertising'. However, these advertisements are often ambiguous, and young people's evaluative responses about the producers who placed the advertisements are predominantly favourable, while interpretations taken from the advertisements are mostly pro-drinking.

Warning labels in general

Research on warning labels in general has found that warnings can attract consumers' attention, with the presence of vividness enhancing characteristics in

warnings being more likely than the absence of the characteristics to attract consumers' attention⁹. However, familiarity was found to moderate attention; thus, when consumers were familiar with a product, they were less likely to notice the warning. In general, it seemed that warnings could moderately influence behaviour, with consumers being more likely to comply when they were familiar with a product than not.

Tobacco labels

A study across Australia, Canada, the United Kingdom and the United States found that health warnings on cigarette packages were a prominent source of health information, with a significant association between the strength and size of package health warnings and the likelihood of citing packages as a source of health information¹⁰. Finally, health knowledge was strongly associated with intentions to quit among smokers in all four countries.

Food labels

A systematic review that was undertaken to explore consumer understanding and the use of nutrition labelling found that the reported use of nutrition labels is high but more objective measures suggested that actual use of nutrition labelling during food purchase may be much lower¹¹. Consumers who do

9 Argo, J.J. & Main, K.J. (2004). Meta-analyses of the effectiveness of warning labels. *Journal of Public Policy & Marketing* 23 193-208.

10 Hammond, D., Fong, G.T., McNeill, A., Borland, R. & Cummings, K.M. (2006). Effectiveness of cigarette warning labels in informing smokers about the risks of smoking: findings from the International Tobacco Control (ITC) Four Country Survey Tobacco Control 2006;15(Suppl III):iii19-iii25.

11 Cowburn, G. & Stockley, L. (2005). Consumer understanding and use of nutrition labeling: a systematic review. *Public Health Nutrition*: 8(1), 21-28.

look at nutrition labels can understand some of the terms used but are confused by other types of information.

Alcohol labels

With regard to alcohol, the US warning label legislation required a series of before and after surveys to be conduc-

ted to evaluate whether the legislation was achieving its stated objectives¹². Public support for warning labels was very high, with, after their introduction, some 9/10ths of the population agreeing that alcoholic beverages should have warning labels about possible health hazards.



US Warning label

US Warning label

Awareness of the warning labels was also high, with, after three years of labels, over two-fifths of the population reporting having seen the warning label, amongst whom four-fifths recalled the message for birth defects, just under half the drink driving message, and two-fifths the message regarding operating machinery. However, despite the high rates of support and awareness, no

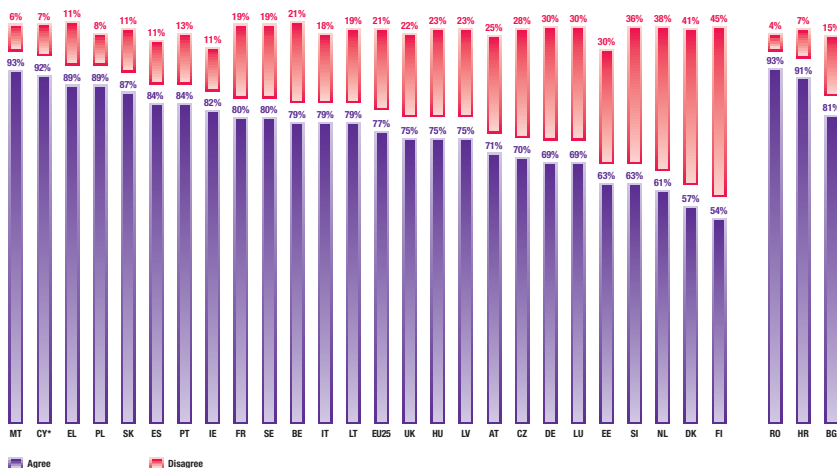
direct impacts of warning labels on consumption or alcohol-related problems were found. This finding of lack of an impact on behaviour contrasts with the experience from tobacco, but this may reflect the nature of the warning labels, where recent research suggests that the introduction of more graphic and larger warnings for cigarettes has impacted on behaviour¹³.

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- 12 Greenfield, T., Graves, K. and Kaskutas, L. (1999). Long-term effects of alcohol warning labels: Findings from a comparison of the United States and Ontario, Canada. *Psychology & Marketing*, Vol 16(3), 261-282.
- 13 Hammond D, McDonald PW, Fong GT, et al. The impact of cigarette warning labels and smoke-free bylaws on smoking cessation: evidence from former smokers. *Can J Public Health* 2004;95:201-4.



Despite the present limited evidence for an impact of alcohol warning labels, there is a body of research to inform how the impact of warning labels could be enhanced, and consumer protection principles would suggest, that, where there is a risk to health in consuming al-

coholic beverages, and, in particular, during pregnancy, when taking medication or when driving or operating machinery, consumers should be informed about the risks, a measure supported by three quarters (77%) of the European Union population.



Would you agree or disagree to put warnings on alcohol bottles and adverts with the purpose to warn pregnant women and drivers of dangers of drinking alcohol?¹⁴

¹⁴ Eurobarometer (2007). Attitudes towards Alcohol. http://ec.europa.eu/health/ph_determinants/life_style/alcohol/documents/ebs272_en.pdf. Accessed June 2007.

4. RECOMMENDATIONS

Health messages and warning labels

- 1.1. Effective legislative, executive, administrative and other measures necessary to ensure appropriate packaging and labelling¹ should be implemented, with precise and consistent, but culturally sensitive health messages and warnings across the European Union.
- 1.2. Health messages and warnings on alcohol product packaging and labelling should be part of an integrated strategy to provide information to consumers about alcohol and should be part of integrated policies and programmes to reduce the harm done by alcohol.
- 1.3. Alcohol product packaging and labelling should not promote an alcoholic product by any means that are false, misleading, deceptive or likely to create an erroneous impression about its characteristics or health effects, including any term, descriptor, trademark, figurative or any other sign that directly or indirectly creates the impression that a particular alcoholic product is more attractive or healthier than another alcoholic product.
- 1.4. Alcohol product packaging and labelling should not promote an alcoholic product by any means, including any term, descriptor, trademark, figurative or any other sign that directly or indirectly appeals to minors².
- 1.5. Each unit package of alcoholic products should carry rotating warnings determined by ministries of health, or appointed public health bodies, describing the harmful effects of alcohol when driving or operating machinery, and during pregnancy or other appropriate messages, such as the risk of dependence.
- 1.6. Each unit packet and package of alcoholic products and any outside packaging and labelling of such products should, in addition to health warnings, contain information on its alcohol concentration (% by volume), alcohol content (grams of alcohol), and ingredients that might lead to allergies.
- 1.7. All messages or warnings should be pre-tested throughout Member States and the Union as a whole before being implemented, and should be re-evaluated over time as part of an ongoing strategy to reduce the harm done by alcohol.
- 1.8. A consistent health warning should be given across the Union to reinforce the message that alcohol is a toxic substance.
- 1.9. Article 5 of European Directive 2001/95/EC which states that producers shall provide consumers with the relevant information to enable them to estimate the risks inherent of a product..., where such risks are not immediately obvious without adequate warnings should be enforced at European and Member State level.
- 1.10. Precise public health messages need to be developed for alcohol across Europe, in concept similar to the tobacco messages, such as 'Smoking Kills'.

1 "packaging and labelling" means each unit container (bottle, can, box or other type of container), text, characters or graphics on the unit container, labels on the unit container, and any outside packaging and labelling, where a number of unit containers can be placed in wrapping or in a box.

2 "minor" is a person under the age set by domestic law, national law or eighteen years, whichever is the higher, to whom the sale of alcoholic products is prohibited.

