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ALCOHOL POLICY SOLUTIONS
The evidence for alcohol warning labeling

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Introduction

This background briefing contains latest science in seven categories to inform a science-based conversation about alcohol warning labeling.

1. Overview studies and key messages
2. A country overview of alcohol labeling solutions
3. Detailed look at Yukon, Canada
4. Alcohol industry interference against alcohol labeling
5. Perception of alcohol users on alcohol labeling
6. Label design and content – policy considerations
7. Additional resources from the World Health Organization

Overview studies

Alcohol labeling – health warnings, other alcohol harm warning, such as pregnancy or traffic crash warnings, product information, nutrition information, standard unit information – is not among the three alcohol policy best buys, according to the WHO. Alcohol labeling does not belong to the five SAFER interventions that are proven cost-effective.

But the WHO classifies alcohol labeling as “other recommended intervention”. Cost-effectiveness analysis for alcohol labeling is not available (yet) – also because so few jurisdictions have implemented consistent alcohol labeling.

The WHO alcohol policy best buy solutions, other cost-effective interventions, and other recommended interventions:

<https://apps.who.int/iris/bitstream/handle/10665/259232/WHO-NMH-NVI-17.9-eng.pdf>

Health warning labels (HWLs) on tobacco products reduce smoking. But there is an absence of evidence concerning the impact of alcohol warning labels on selection

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or purchasing in naturalistic settings. <https://psyarxiv.com/kr578/> and <https://onlinelibrary.wiley.com/doi/full/10.1111/add.15519> But a new study protocol has now been developed through the work in Yukon, Canada: <https://www.researchprotocols.org/2020/1/e16320/>

A scoping review published in August 2021 examined novel or enhanced alcohol health warning labels. Researchers found that most studies were undertaken in English-speaking populations, with the majority conducted online or in the laboratory setting as opposed to the real world. Seventy percent of the papers included at least one cancer-related message, in most instances referring either to cancer in general or to bowel cancer. Evidence from the only real-world long-term labelling intervention demonstrated that alcohol health warning labels designed to be visible and contain novel and specific information have the potential to be part of an effective labelling strategy. Alcohol health warning labels should be seen as tools to raise awareness on alcohol-related risks, being part of wider alcohol policy approaches. <https://www.mdpi.com/2072-6643/13/9/3065>

In addition, a systematic review with meta-analysis using Cochrane methods that was published in 2020 also found “significant potential for HWLs to reduce selection of food and alcoholic drinks, but all experimental studies to date were conducted in laboratory or online settings with outcomes assessed immediately after a single exposure. Studies in field and naturalistic laboratory settings are needed to estimate the potential effects of food and alcohol HWLs.” <https://www.tandfonline.com/doi/full/10.1080/17437199.2020.1780147>

Some key messages - On alcohol harm and labeling

Labelling of alcoholic beverages, a WHO-recommended practice, is not mandatory in many countries of the Region. This lack of critical information is concerning. Consumers deserve to know the contents of alcoholic beverages and the possible risks of consuming them.

The WHO European Region has the world’s highest levels of alcohol consumption, the highest proportion of alcohol use disorders and the most alcohol-attributable deaths in the population – around 10% of deaths from all causes. In 2016, alcohol

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consumption was the cause of over 900.000 deaths in the Region and about 3 million deaths worldwide.

Alcohol consumption increases the risk of cancer, stroke, heart disease and communicable diseases, and weakens the immune system. Heavy use of alcohol increases the risk of acute respiratory distress syndrome (ARDS), one of the most severe complications of COVID-19. Alcohol is also associated with injuries, violence, and a range of mental health disorders including depression and anxiety.

Alcohol causes cancer (carcinogen), damage to the unborn child (teratogen), dependence and addiction (psychoactive, addictive), and harms to others than alcohol consumers (social harm).

Some key messages – On alcohol labeling

Alcohol consumers have the right to information about the products they are buying and consuming. It is the obligation of public authorities to protect and ensure that right to information.

Alcohol labeling is a part of a comprehensive strategy to prevent and reduce alcohol harm. Such a strategy addresses the affordability, availability, and marketing of alcohol. These efforts are best supported by efforts to inform an evidence-based public discourse about alcohol harm and alcohol policy solutions, raise awareness and increase public recognition of the extent and magnitude of alcohol harms. Alcohol warning labeling, for instance, plays an important part in supporting implementation of the alcohol policy best buy solutions. It is best seen not as an intervention that will modify behavior and reduce alcohol use immediately, but as an integral part of facilitating gradual change over time.

In the EU alcohol packaging requirements should be brought in line with those requirements that apply to non-alcoholic beverage packaging (as per EU Regulation No. 1169/2011). There is no reason that alcohol products do not need to provide consumer information and are less regulated than juice and milk. Policy considerations for the development of successful labelling legislation should

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ideally address both health information and nutritional information, ensure regulated message presentation, and implement independent monitoring and evaluation of measures.

Country overview of alcohol labeling solutions and international conventions, agreements

There are 47 WHO member countries with alcohol warning labels. South Korea is the only one that requires cancer warnings on alcohol containers.

In the WHO European Region, 40% of Member States have some legislation on ingredients listing, 19% have some legislation on inclusion of nutritional values and 28% have some legislation on some health information labelling or warnings on alcohol products (including warnings for pregnant women, on driving under the influence of alcohol and on underage alcohol use or general warnings on harm to health).

Compared with other fields, such as tobacco or foodstuffs, the presence of labelling on alcohol products is insufficient and most labelling legislation still does not align fully with WHO's 2017 discussion paper on policy options for alcohol labelling (Alcohol labelling: a discussion document on policy options), particularly with regards to presentation of the label (in terms of message size and visibility and periodically changing the nature of the message (rotating messages)).

Positive labelling examples

Several Member States are becoming aware of the need to pursue more active policies to regulate labelling practices.

Experience from the Eurasian Customs Union (ECU) (Belarus, Kazakhstan, and the Russian Federation) gives valuable insight on how a functioning multigovernmental approach to alcohol labelling can harmonize different legislative systems. The ECU adopted 3 technical regulations that oblige producers to include a list of ingredients and nutritional values on the labels of food products and alcoholic beverages. By 2019, all 3 sets of technical regulations were finalized. The results of this policy now need to be assessed by an independent audit.

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France has introduced a law mandating labelling for all alcoholic beverages with a warning against alcohol use during pregnancy. The country's authorities embedded the regulation within a wider strategy to raise awareness of the harms of consuming alcohol during pregnancy. Recent studies have already shown improvement in public awareness. The French Health Minister announced the inclusion of a measure to improve the visibility of the pregnancy logo in the National Public Health Plan for 2018–2022.

The Russian Federation has adopted stricter alcohol labelling regulations. It divided the comprehensive process to introduce legislation into smaller requests. Russian Federal Law No. 171 on the production and circulation of alcohol (which also regulates alcohol labelling) was first introduced in 1995 but has since been amended more than 40 times. This step-by-step strategy helped the country to achieve progress in line with WHO recommendations.

To successfully comply with the WHO European Action Plan to Reduce the Harmful Use of Alcohol 2012–2020 and the WHO Global Strategy to Reduce the Harmful Use of Alcohol, countries of the Region should consider adopting strong and comprehensive labelling policy options. The HEN report gives full and up-to-date information that is crucial for policymakers.

International conventions and agreements

The Codex Alimentarius (the Codex) is supervised by the Codex Commission, which is responsible to WHO and the Food and Agriculture Organization (FAO). The Codex Commission's primary purposes are to protect the health of consumers, ensure fair trading practices in the food trade and promote the coordination of international food standards. The Codex has become a highly significant influence on global food law and is also important in settlement of World Trade Organization (WTO) disputes (domestic standards which comply with the Codex are more likely to comply with WTO expectations). Any new regulatory provisions under WTO and EU rules must be justifiable and proportionate to the compliance burden they impose (8).

Article 16 (4) of Regulation (EU) No. 1169/2011 on the provision of food information to consumers exempts alcoholic beverages containing more than 1.2% ABV from mandatory listing of ingredients and the nutrition declaration. Although there is no

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requirement for alcoholic beverages to list their ingredients, food business operators may voluntarily provide this information to consumers. In accordance with Article 36 of the Regulation, such information must comply with the provisions governing the mandatory listing of ingredients (5).

Under the terms of Regulation (EC) No. 1924/2006 of the European Parliament and of the Council of 20 December 2006 on nutrition and health claims made on foods, alcoholic beverages are prohibited from bearing health claims; the only nutritional claims that are permitted are ones referring to low alcohol levels and reduction of alcohol or energy content (9).

Detailed look at Yukon, Canada

Given the absence of real-life alcohol labeling cases and analysis of those, the example of Yukon, Canada is highly important. It elucidates several critical aspects of the alcohol labeling policy debate.

A series of journal articles published on the Journal of Studies on Alcohol and Drugs (Volume 81, Issue 2) in March support that when alcohol bottles come with conspicuous labels providing information on the risks of alcohol consumption or alcohol use guidelines, people are better informed about alcohol's harms and may cut down their alcohol use.

Key results from the studies are as follows:

- Large, bright yellow alcohol labels with rotating health messages get noticed by consumers and can increase awareness of national alcohol consumption guidelines, improve knowledge of alcohol-related health risks, such as cancer, and reduce alcohol sales compared to control sites without the labels.
- Such labels to alcohol bottles (300,000 labels in all) decreased total sales of alcohol by 6.9% compared with sales in regions without the new labels (Zhao et al. 2020).
- Awareness of Canada's low-risk alcohol consumption guidelines increased nearly three times in the site in which the labels were placed compared with a control location (Schoueri-Mychasiw et al. 2020).
- Before the label intervention, only about 25% of participants knew alcohol consumption can cause cancer. After the labeling, awareness in Yukon rose

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to 42%, a 10% greater increase in awareness of the alcohol-cancer link relative to the control site in neighboring Northwest Territories (Hobin et al. 2020).

Movendi International has covered the issues here:

1. <https://movendi.ngo/science-digest/labels-on-alcohol-bottles-increase-awareness-of-alcohol-harms-guidelines/>
2. <https://movendi.ngo/science-digest/the-arrogance-of-power-alcohol-industry-interference-with-warning-label-research/>
3. <https://movendi.ngo/news/2020/12/04/big-alcohol-keeps-people-in-dark-about-alcohols-cancer-risk/>

Conclusions and key messages from the Yukon, Canada experiment:

Enhanced alcohol labels get noticed and may be an effective population-level strategy for increasing awareness and knowledge of national alcohol use guidelines. <https://www.jsad.com/doi/full/10.15288/jsad.2020.81.262>

Applying new AWLs was associated with reduced population alcohol consumption. The results are consistent with an accumulating impact of the addition of varying and highly visible labels with impactful messages. <https://www.jsad.com/doi/full/10.15288/jsad.2020.81.225>

Enhanced alcohol labels can improve label salience and processing among alcohol users. Alcohol users exposed to labels were more likely to report consuming less due to labels. Strengthening alcohol labels should be a priority for alcohol control. <https://www.sciencedirect.com/science/article/pii/S0955395920300074>

In a real-world setting, cancer warning labels get noticed and increase knowledge that alcohol can cause cancer. Additional cancer label intervention studies are required that are not compromised by industry interference. <https://www.jsad.com/doi/full/10.15288/jsad.2020.81.249>

- A call to action on alcohol warning labeling in Canada: <https://canlivj.utpjournals.press/doi/full/10.3138/canlivj-4-2-001>

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Alcohol industry interference against alcohol labeling

News coverage of AWLs with a cancer message was more supportive in Canada than Ireland, where alcohol industry perspectives were consistently foregrounded. Industry arguments opposing the cancer label bore similarities across contexts, often distorting or denying the evidence. Increasing awareness of industry messaging strategies may generate more critical coverage of industry lobbying activities and increase public support for alcohol policies. <https://www.jsad.com/doi/full/10.15288/jsad.2020.81.273>

Alcohol industry groups seek to keep their customers in the dark about alcohol-related cancer risks. In Canada, a federally funded scientific study examining the introduction of cancer warning labels on containers was shut down due to alcohol industry interference. But the industry complaints about the study had no legal merit.

This type of Big Alcohol interference is common around the world: Of 47 WHO member countries with alcohol warning labels, only South Korea requires cancer warnings on alcohol containers. However, industry complaints, supported by sympathetic governments, helped weaken the warning labels' implementation. Ireland has legislated for cancer warnings but faces continuing legal opposition expressed through regional and global bodies. Cancer societies and the public health community have failed to counter industry pressures to minimize consumer awareness of alcohol's cancer risks. Placing cancer warnings on alcohol containers could make a pivotal difference in motivating both alcohol users to consume less and regulators to introduce more effective policies to prevent and reduce the serious harms of alcohol consumption. <https://www.jsad.com/doi/full/10.15288/jsad.2020.81.284>

By securing supplementary labeling rules in trade agreements, the alcohol industry is better positioned to claim the space on the standard label as industry 'real estate' and to oppose mandatory health information incorporated into the standard labelling. These risks can be mitigated by stemming the adoption of supplementary labelling rules in further trade agreements; clarifying the text of agreements and

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ensuring that regulators understand that the rules do not prevent the use of ‘best-practice’ warning labels. <https://onlinelibrary.wiley.com/doi/abs/10.1111/dar.13054> Voluntary industry commitments vary in scope, in the information included across product categories and in how the information is displayed. Commitments are mostly not monitored transparently and, where available, do not meet recommendations in the WHO discussion paper on policy options for alcohol labelling.

A 2021 scientific analysis called “Warning Labels About Alcohol Consumption and Pregnancy: Moving from Industry Self-Regulation to Law” illustrates the importance of governments fulfilling their duty to provide information about alcohol’s health harms, shows the alcohol industry’s inability to protect alcohol users, and emphasizes the need for statutory labeling instead of self-regulation. Alcohol consumption during pregnancy carries known risks to the fetus in the form of fetal alcohol spectrum disorder (‘FASD’). One of the interventions for the prevention of FASD is the application of warning labels to packaged alcoholic beverages.

Between 2011 and 2018, the Australian Government allowed the alcohol organization, DrinkWise, to operate an industry self-regulatory scheme to provide alcohol producers with prototype warnings about alcohol use during pregnancy. In 2018, the government announced that it would be mandating alcohol and pregnancy warnings through Food Standards Australia New Zealand.

A proper appraisal of the DrinkWise Labelling Scheme at the outset would have demonstrated its inherent regulatory incapacity to operate as an effective health information policy. The DrinkWise Labelling Scheme is missing two essential elements of functional industry self-regulation: a strong normative framework and mechanisms for norm creation, implementation, and enforcement.

https://papers.ssrn.com/sol3/papers.cfm?abstract_id=3795151

Perception of alcohol users on alcohol labeling

The Eurobarometer from 2010 on Europeans’ attitudes to alcohol and alcohol policy solutions revealed that of the health conditions addressed in the survey, the risk of cancers was the one with the lowest level of awareness. Only 67% of the population were aware that the consumption of alcohol increases the risk of cancers.

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<https://www.drugsandalcohol.ie/13045/1/Eurobarometeralcohol.pdf>

Few consumers in a 2020 study had key alcohol-related health knowledge; however, there was moderate support for AWLs as a tool to raise awareness. Implementation of information-based interventions such as evidence-informed AWLs with health messages including alcohol-related cancer risk, standard alcoholic drink information, and national alcohol use guidelines is warranted.

<https://www.jsad.com/doi/full/10.15288/jsad.2020.81.238>

A 2020 study showed that the fact that consuming less alcohol could reduce the risk of seven types of cancer was the least well known, and yet was demonstrated to encourage almost 40% of alcohol users to consider consuming less alcohol. Women and high-risk alcohol users were more likely to indicate they would reduce their alcohol use in response to all labels. Personal relevance was identified as a key predictor of individual responses. These findings highlight the potential of a range of health messages displayed on alcoholic beverages to raise awareness of alcohol-related harms and potentially support a reduction in alcohol use. Further research should explore what influences personal relevance of messages as this may be a barrier to effectiveness.

<https://academic.oup.com/alcalc/article/55/3/315/5679785?login=true>

Another study published in 2020 found that for both alcoholic drinks and energy-dense snacks, HWLs depicting bowel cancer generated the highest levels of negative emotional arousal and lowest desire to consume the product but were the least acceptable. Acceptability was generally low for HWLs applied to alcohol, with 3 of 21 rated as acceptable, and was generally high for snacks, with 13 of 18 rated as acceptable. Most free-text comments expressed negative reactions to HWLs on alcohol or energy-dense snacks. Image-and-text health warning labels depicting bowel cancer showed greatest potential for reducing selection and consumption of alcoholic products and energy-dense snacks, although they were the least acceptable. Laboratory and field studies are needed to assess their impact on selection and consumption. <https://link.springer.com/article/10.1186/s12889-020-8403-8>

A 2020 focus group study with young adult alcohol users in Scotland explored

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awareness and use of health information and messaging on existing packaging, and perceptions of novel front-of-package warnings differing in size (small, large), form (text-only, text and image) and message content (general, specific). The study found that unaided recall of some health information and messaging was high (e.g., units, pregnancy symbols); however, most participants did not attend to or meaningfully engage with these, viewing them as unnoticeable, obscure, and ineffective.

Participants were skeptical of alcohol companies' motivations with respect to health messaging on products. They were surprised to see the novel warnings on alcohol products but generally supported their inclusion. Most thought that these warnings could increase awareness of alcohol-related harms, particularly for younger or potential alcohol users. Large, combined (text and image) warnings with specific messages on the front of packaging were considered most engaging and potentially effective. The health-related information and messaging on alcohol packaging in Scotland is failing to inform consumers about the potential risks associated with alcohol use. Prominent warnings on alcohol packaging could help to capture attention, increase awareness of alcohol-related harms, and may support a reduction in consumption and alcohol-related harms.

<https://www.tandfonline.com/doi/full/10.1080/16066359.2021.1884229>

A 2021 study from Australia showed how the general population make sense of information about health risks and uses this knowledge to make decisions about personal behavior.

Alcohol is a modifiable risk factor for cancer. Public awareness of the link between alcohol and cancer risk is poor; thus, alcohol consumers may be unknowingly putting themselves at increased risk of cancer. One way to raise awareness of alcohol-related cancer is through placing labels warning of cancer risk on alcoholic beverage containers.

Seven focus groups discussions were conducted to gauge public attitudes towards the labels and messages relating to alcohol-related cancer risk.

Participants expressed a negative response to the alcohol warning labels, and their talk worked to challenge the legitimacy of alcohol-related cancer messages, and the entities responsible for disseminating the information. These responses functioned to counter any implied recommendation for reduction in speakers' alcohol consumption.

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In combination with other public health initiatives, alcohol-warning labels have the potential to increase awareness of cancer risk and help in the fight against cancer, but any messaging will need to account for probable consumer resistance.

<https://academic.oup.com/heapro/advance-article-abstract/doi/10.1093/heapro/daab024/6155890>

Label design and content - Policy considerations

2021 study: Well-designed alcohol labels can positively influence consumers' attention, comprehension, recall, judgment, and behavioral compliance. The findings have implications for alcohol labelling research and policy.

<https://www.tandfonline.com/doi/full/10.1080/09687637.2021.1932754>

<http://archives.marketing-trends-congress.com/2021/pages/PDF/115.pdf>

The review provides support for large, colorful labels on the front of alcohol products and the use of plain packaging to increase the visibility of health messaging. It also supports the use of explicit, negatively framed statements that link alcohol to specific diseases. Color-coded schemes and pictorial warnings may further optimize the effectiveness of alcohol labels. The study did not find sufficient evidence to support the effectiveness of product information alone in influencing consumer attention, comprehension, recall, judgment, and behavioral compliance.

<https://www.tandfonline.com/doi/full/10.1080/09687637.2021.1932754>

A study from February 2021 examined the role of pictorial warning labels (PWLs) featuring narrative content in communicating alcohol-related cancer risks. In an online experiment, 169 adult alcohol consumers were randomly assigned to view two narrative PWLs, two non-narrative PWLs, or control. Results showed that exposure to narrative PWLs significantly increased participants' worry about, feelings of risk of, and perceived severity of harm of getting alcohol-related cancer but did not affect their intentions to reduce alcohol use. Exposure to narrative PWLs also indirectly influenced intentions through increased worry. Findings suggest that narrative PWLs are a promising strategy in informing consumers about the cancer risks of alcohol. <https://www.tandfonline.com/doi/abs/10.1080/10410236.2021.1888456>

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A study from Germany, published in June 2021 investigated how children and adolescents react to AWL. Exposure to an AWL significantly increased knowledge about alcohol-related risks. AWL exposure did not influence self-reports of alcohol use in the total sample, but older students (15+ years) less frequently reported lifetime (79.8% vs. 84.2%) and current (50.5% vs. 56.6%) use of alcohol if they were exposed to an AWL. Overall, text-only AWL elicited fewer negative emotions than text-and-picture based AWL. The experiment indicates that exposure to an AWL affected alcohol-related cognitions of children and adolescents. This was true for both, text-based or picture-and-text-based labels. Pictorial messages seem to be more potent to elicit emotions, at least for recipients that already have experience with alcohol use.

<https://www.sciencedirect.com/science/article/pii/S0306460321000538>

- This study highlights the importance of cancer awareness for alcohol policy support:

<https://www.sciencedirect.com/science/article/pii/S074937972100430X>

The main policy and practice considerations in the WHO European Region for the development of nutritional and health information labelling on alcohol products are to:

1. Establish labelling that includes all recommended nutritional values and lists all ingredients.
2. Establish labelling that includes the harm done by alcohol relevant to the whole population (e.g., cancer), pregnancy-related harm, harm to minors, driving under the influence of alcohol warnings, and recommendations on lower-risk alcohol use guidelines indicated as standard alcoholic drinks in countries where this would be applicable.
3. Ensure regulations include specific directions about how all information should be presented on labels (e.g., appropriate size and font, front of pack, rotating messages, and easy-to-understand information), ideally following WHO recommendations.
4. Favor mandatory regulation over voluntary commitments as this allows better control over the content and presentation of the message, presentation of stronger evidence and more assurance of good penetration of labelling.

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5. Consider introducing any specific labelling policy as a part of an existing or new, larger policy package and using a stepwise approach to facilitate achieving a full labelling policy.
6. Leverage facilitating contextual factors when developing policy (e.g., public support, political will and/or evidence of alcohol-related harm in the country) and use the best policy window to put proposals forward for the introduction of labelling.
7. Ensure that mechanisms for enforcing implementation, for independent monitoring and for evaluation of the impact of labelling policies are in place regardless of whether labelling is voluntary or mandatory; and
8. Invest in strengthening research on alcohol labelling to identify the most effective form and content of the labelling communication (e.g., photographs, pictograms, and written messages, including the most effective wording).

Standard alcoholic drink information

A paper from October 2020 examined the impact of an alcohol labelling intervention on recall of and support for standard drink (SD) labels, estimating the number of SDs in alcohol containers, and intended and unintended use of SD labels. Participants in the intervention relative to the comparison site had greater odds of recalling and supporting SD labels and lower odds of reporting using SD labels to purchase high strength, low-cost alcohol. Exposure to the labels had negligible effects on accurately estimating the number of SDs and using SD labels to consume alcohol within guidelines. Evidence-informed labels increased support for and decreased unintended use of SD labels. Such labels can improve accuracy in estimating the number of SDs in alcohol containers and adherence to alcohol consumption guidelines. <https://onlinelibrary.wiley.com/doi/abs/10.1111/dar.13165>

A UK study from November 2020 showed that labels with enhanced pictorial representations of alcohol content improved knowledge and understanding of the UK's low-risk alcohol use guidelines compared with industry-standard labels; health warnings did not improve knowledge or understanding of low-risk alcohol use guidelines. Designs that improved knowledge most had the low-risk alcohol use guidelines in a separate statement located beneath the graphics.

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<https://onlinelibrary.wiley.com/doi/full/10.1111/add.15327>

Additional WHO resources

A 2017 discussion document from WHO Europe presents an analysis of the policy options available for introducing warning and product labelling on alcoholic beverage containers. It outlines the existing legal and policy frameworks and the current level of implementation in the WHO European Region.

Alcohol labeling policy options:

https://www.euro.who.int/_data/assets/pdf_file/0006/343806/WH07_Alcohol_Labelling_full_v3.pdf

A 2020 report by WHO Europe synthesizes evidence on alcohol labelling practices in the Region and describes issues affecting implementation. To date, the introduction of alcohol labelling policy as part of a larger package of alcohol policy measures created with strong political support and consumer pressure has proved successful in providing consumers with information, although practices have been hindered by slow procedures in some parts of the Region, opposition from international institutions and the alcohol industry, and the lack of set labelling specifications and monitoring activities. Policy considerations for the development of successful labelling legislation should ideally address both health information and nutritional information, ensure regulated message presentation, and implement independent monitoring and evaluation of measures.

Current labeling practices in WHO European Region:

<https://www.euro.who.int/en/publications/abstracts/what-is-the-current-alcohol-labelling-practice-in-the-who-european-region-and-what-are-barriers-and-facilitators-to-development-and-implementation-of-alcohol-labelling-policy-2020>

More from the WHO, via Movendi International:

<https://movendi.ngo/wp-content/uploads/2021/09/UBFs7h-concept-note-health-warnings-webinar.pdf>

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- Inclusion of a list of ingredients and nutritional information (such as energy content) on containers.
- Provision of information on labels explaining impact on health.
- Label should be placed in a standard location on the container.
- Size of the label should be determined as a minimum percentage of the size of the container.
- Rotating messages should be used, with sufficient vividness and strength to attract consumers.
- Text should be clearly separated from other information on the label (for example, placed in boxes with thick borders).
- Text should be printed in capital letters and bold type; its size should be the same as for all other information provided on the container.
- Text should appear on a contrasting background (for example, red type on white).
- Text should be written in the official language(s) of the country in which the product is sold.
- Images used should be informational in style and taken from ongoing educational campaigns.
- Public health bodies can usefully advise on the content of messages.