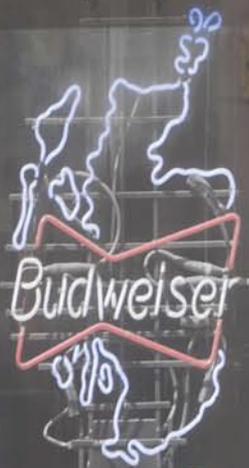
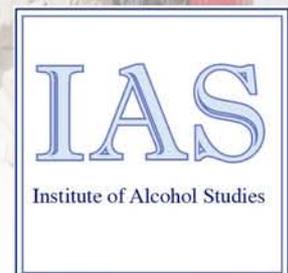


Alcohol Alert

SEPTEMBER 2016



Off-trade beer sales overtake pubs and clubs for the first time



SEPTEMBER 2016

- 3 High alcohol intake linked with slightly lower female fertility**
- 4 Local alcohol treatment services hardest cut**
- 5 YouTube videos promote positive associations with alcohol use**
- 6 Physical activity to offset risk of alcohol-related death?**
- 8 Drunkenness: it's all relative, claim researchers**
- 10 NACOA holds first APPG for Children of Alcoholics**
- 11 Whitehall blocks Welsh minimum alcohol pricing plans**
- 12 ESPAD 2015: Teenage binge drinking levels same 20 years on**
- 14 Richest Scots make for the riskiest drinkers**

COVER STORY

- 17 BBPA: Off-trade beer drinking now the norm for most Brits**
- 18 Wales: Two-thirds of adults harmed by someone else's drinking**
- 19 Carlsberg ad linking beer with building site banned**

Contact us

www.ias.org.uk

To subscribe to the Alcohol Alert mailing list, or for corrections, clarifications, comment and contributions, please contact:

Habib Kadiri, Editor
info@ias.org.uk

High alcohol intake linked with slightly lower female fertility

But total abstinence may not be necessary to improve conception rates

Women who drink 14 or more servings of alcohol a week are slightly more likely to have reduced fertility, suggests a *British Medical Journal* study.

Low to moderate intake of alcohol, defined as one to seven servings a week, seemed to have no effect on women's fertility, nor did the type of alcohol beverage consumed.

But the extent to which alcohol intake affects female fertility remains unclear. The authors still recommend for couples to abstain from alcohol during their fertile window until a pregnancy is ruled out, because the foetus may be particularly vulnerable to alcohol during the first few weeks after conception.

Methodology

A group of Danish researchers carried out a large prospective cohort study to examine the association between pre-conception alcohol consumption and time to pregnancy, which involved a total of 6,120 female Danish residents, aged 21-45 years.

They were all in a stable relationship with a male partner, trying to conceive and not receiving fertility treatment, between June 2007 – January 2016.

The study assessed overall alcohol consumption as well as intake of specific types of alcoholic beverages, including beer, wine, and spirits.

Alcohol consumption was self reported as beer (330 mL bottles), red or white wine (120 mL glasses), dessert wine (50 mL glasses), and spirits (20 mL), and was categorized in standard servings per week (none, 1-3, 4-7, 8-13, and 14/more).

Each female participant completed bimonthly questionnaires for 12 months, or until conception occurred, on alcohol use, pregnancy status, menstrual cycles, frequency of intercourse, and smoking.

Findings

4,210 (69%) participants achieved a pregnancy during follow-up. Median alcohol intake was 2.0 (interquartile range 0 – 3.5) servings per week. Compared with no alcohol consumption, the adjusted fecundability ratios for alcohol consumption of 1-3, 4-7, 8-13, and 14 or more servings per week were 0.97 (95% confidence interval 0.91 to 1.03), 1.01 (0.93 to 1.10), 1.01 (0.87 to 1.16) and 0.82 (0.60 to 1.12), respectively. Compared with no alcohol intake, the adjusted fecundability ratios for women who consumed only wine (≥ 3 servings), beer (≥ 3 servings), or spirits (≥ 2 servings) were 1.05 (0.91 to 1.21), 0.92 (0.65 to 1.29), and 0.85 (0.61 to 1.17), respectively (see Table 2).

Table 2 | Fecundability by amount of alcohol consumed per week and alcohol type (n=6120)

Alcohol servings/week	Pregnancies	Cycles	Fecundability ratio* (95% CI)		
			Unadjusted model	Adjusted model 1†	Adjusted model 2‡
None	1381	8054	1.00 (reference)	1.00 (reference)	1.00 (reference)
Any alcohol:					
1-3	1875	11272	0.95 (0.89 to 1.01)	0.94 (0.88 to 1.00)	0.97 (0.91 to 1.03)
4-7	738	4334	0.96 (0.88 to 1.04)	0.97 (0.89 to 1.05)	1.01 (0.93 to 1.10)
8-13	179	1097	0.92 (0.80 to 1.06)	0.96 (0.83 to 1.11)	1.01 (0.87 to 1.16)
≥ 14	37	307	0.73 (0.54 to 1.00)	0.82 (0.60 to 1.12)	0.82 (0.60 to 1.12)
Wine§ only:					
1	460	2515	1.06 (0.96 to 1.16)	1.02 (0.93 to 1.12)	1.05 (0.95 to 1.15)
2	199	1215	0.93 (0.80 to 1.07)	0.90 (0.78 to 1.04)	0.95 (0.82 to 1.09)
≥ 3	169	926	1.01 (0.88 to 1.17)	1.03 (0.89 to 1.19)	1.05 (0.91 to 1.21)
Beer only:					
1	137	878	0.92 (0.78 to 1.09)	0.91 (0.78 to 1.08)	0.93 (0.79 to 1.09)
2	45	286	0.92 (0.70 to 1.21)	0.95 (0.72 to 1.25)	0.96 (0.73 to 1.26)
≥ 3	28	197	0.86 (0.61 to 1.21)	0.93 (0.66 to 1.30)	0.92 (0.65 to 1.29)
Spirits only:					
1	111	762	0.86 (0.71 to 1.03)	0.89 (0.74 to 1.07)	0.88 (0.73 to 1.05)
≥ 2	32	222	0.83 (0.60 to 1.14)	0.87 (0.63 to 1.21)	0.85 (0.61 to 1.17)

*Cycle specific probability of conception, comparing exposed with unexposed women.

†Alcohol intake adjusted for woman's and male partner's age at baseline, vocational training, cycle regularity, parity, current smoking, intercourse frequency, timing of intercourse, body mass index, physical activity, sexually transmitted diseases, caffeine intake, and last method of contraception.

‡Alcohol intake adjusted for woman's age, parity, and timing of intercourse.

§Including red and white wine.

The association between high alcohol consumption and lower fecundability varied by parity status and timing of intercourse. Among women who had never given birth before (nulliparous), the adjusted fecundability ratio was 0.76 (0.51 to 1.11) for consumption of 14 or more servings a week relative to none; among those who had given birth before (parous), the fecundability ratio was 0.96 (0.58 to 1.59).

Limitations

While the sample size was large, only 1.2% of women drank more than 14 servings of alcohol a week, so the estimate for this high level of exposure is imprecise, cautioned the authors.

As it was an observational study, no firm conclusions could be drawn about cause and effect. The study also did not distinguish between regular and binge drinking. This is important because alcohol can affect the menstrual cycle.

In their conclusion, the authors wrote, “because the foetus may be particularly vulnerable to alcohol during the first few weeks after conception, it would seem prudent for women who are actively trying to become pregnant to abstain from alcohol during fertile window until a pregnancy has ruled out.”

Official guidelines in several countries, including the UK and Denmark, recommend that women trying to become pregnant should abstain from alcohol consumption. ■■

Local alcohol treatment services hardest cut

Health Committee: New government must take “bold and brave action” on public health

Local alcohol treatment services face the biggest cuts over the coming fiscal year, according to a report published by the Commons Health Select Committee. This finding comes as part of the committee’s calls for “bold and brave action” to be taken at a national level over the future of public health.

‘*Public health post-2013*’ details how local authorities have suffered cuts to public health budget year-on-year after assuming responsibility from central government. The paper includes a survey commissioned by the Association for Directors of Public Health which shows that 46% of local authorities plan cuts to alcohol treatment services in 2015-16, rising to 72% in 2016-17.

Health Committee Chair Dr Sarah Wollaston said: “Government must match the rhetoric on reducing health inequality with a resolve to take on big industry interests and will need to be prepared to go further if it is serious about achieving its stated aims.”

YouTube videos promote positive associations with alcohol use

Research adds to calls decrying the glamorisation of excessive drinking

You  According to researchers at the UK Centre for Tobacco and Alcohol Studies (UKCTAS), lyrics referring to the consumption of alcohol in YouTube music videos may harmfully influence adolescents in Britain.

Their new study, published in *Springer's International Journal of Behavioral Medicine*, is an extension of previous work which found that UK teenagers were heavily exposed to images of alcohol and tobacco in YouTube music, effectively glamorising the habits and promoting underage drinking and smoking.

Now the researchers have specifically studied the portrayal of alcohol content in popular YouTube music videos, analysing song lyrics and visual imagery in 49 UK Top 40 videos previously found to contain alcohol content.

They found that content involving alcohol was also associated with sexualised imagery or lyrics and the objectification of women, and that alcohol was linked to personal image, lifestyle and sociability. Some videos also showed encouragement of excessive drinking including those with branded alcohol, with no negative consequences to the drinker shown.

The researchers claim that several alcohol companies have adopted marketing strategies that contravene their own advertising codes of practice and have called for the music industry to implement new standards to reduce the use of branded and generic alcohol content in videos, which unlike TV and film, are not classified according to age suitability.

Psychologist Dr Joanne Cranwell, from the UKCTAS, based at The University of Nottingham and lead author of the study said: "Adolescent alcohol consumption, including binge drinking, is a significant health problem in the UK. Among

young people particularly it is also linked to criminal behaviour, unprotected sex, progression to illegal drug use and is a risk factor for alcohol dependence in later life.

"We know that alcohol imagery and references in advertising, films, TV and music videos are a risk factor for uptake of drinking in young people but we wanted to pin down the exact extent and type of content in the Official Singles Chart UK Top 40 and the Vodafone Big Top 40 music chart to explore the true extent to which alcohol is being portrayed and whether UK alcohol industry advertising codes of practice are being violated."

The study also found that the overt use of celebrity endorsement or brand ambassadors of alcohol products in music videos appears to contravene voluntary codes of practice. The music artists involved in this direct promotion in the video sample include Robin Thicke, who is described as a 'brand ambassador' for Remy Martin, Jay Z, who is a 'brand ambassador' for D'USSE and Icona Pop who are the 'brand face' of Absolut Tune.

The researchers accuse the UK Department of Health's Public Health Responsibility Deal Alcohol Network and the advertising codes for failing in its remit to police how third parties use and portray alcohol brands in content that is not developed, sponsored or distributed by the companies themselves. ■■

Physical activity to offset risk of alcohol-related death?

Exercise seems to “lessen” some heightened risks of death linked to drinking

Meeting the minimum physical activity public health guidelines may have a positive impact on some of the cancer and all-cause mortality risks associated with drinking alcohol, according to the findings of an internationally collaborative study.

Published in the *British Journal of Sports Medicine*, the cohort study looked at a decade’s worth of British population-based survey data to investigate whether physical activity is able to moderate the risk between alcohol consumption and mortality from cancer and cardiovascular diseases. It found that while there was an association between those factors, the study’s findings were unable to confirm cause and effect, or whether the links noted were solely down to a direct link between alcohol and exercise.

The research team pooled alcohol consumption and physical activity data from 36,370 participants aged 40 or above from editions of the Health Survey for England (HSE) and the Scottish Health Survey (SHS) that were published between 1994 and 2003.

Alcohol intake was defined by six categories (UK units/week): (1) never drunk; (2) ex-drinkers; (3) occasional drinkers; (4) within the old guidelines (<14 (women); <21 (men)); (5) hazardous (14–35 (women); 21–49 (men)) and (6) harmful (>35 (women) >49 (men)).

"Our results provide an additional argument for the role of [physical activity] as a means to promote the health of the population even in the presence of other less healthy behaviours"

Physical activity (PA) was categorised as inactive (≤ 7 Metabolic Equivalent Task (MET) hours per week), active at the lower ($>7.5 \leq 15$ MET-hour/week) and upper (>15 MET-hour/week) range of recommended levels.

The surveys were then linked to the NHS Central Register for mortality data and the participants were followed up until 2009 (HSE) and 2011 (SHS). There were 5,735 recorded deaths; deaths from cancer and cardiovascular disease were of most interest for this study.

The data was analysed for associations between alcohol consumption and the risk of death from all-causes, cancer and cardiovascular disease. The results were then analysed according to levels of physical activity. Potential confounders (such as sex, body mass index and smoking status) were controlled for.

The results showed that in individuals who reported inactive levels of PA, there was a direct association between alcohol consumption and all-cause mortality. However, in individuals who met the highest level of recommended PA, a protective effect of occasional drinking was observed; within this group, there was no link between all-cause mortality and alcohol consumption within the old guidelines, even for hazardous amounts, but the risk was still increased for those drinking harmful amounts.

The risk of death from cancer increased with the amount of alcohol consumed in inactive participants, ranging from a 47% increased risk for those drinking within guidelines to 87% increased risk for those with harmful drinking. In people with higher PA, there was no significant link between any amount of alcohol consumption and cancer mortality.

No association was found between alcohol consumption and mortality from cardiovascular disease, although there appeared to be a slightly lower risk of death in individuals who performed PA.

Compared with lifelong abstinence, drinking in the past and drinking at hazardous levels were associated with a clearly defined heightened risk of death from all causes. And the higher the tally of weekly units, the greater was the risk of death from cancer, even if total alcohol intake fell within the weekly recommended maximum.

As well as being unable to confirm cause and effect, the researchers acknowledged that they didn't account for some crucial possible confounding variables, including drinking patterns and dietary factors, and could not be sure of the accuracy of self-reported consumption figures, as well as extrapolating the data to younger people (the study only looked at those over 40 years of age).

Nevertheless, the findings indicate that physical activity has the potential to promote health and curb some of the associated harmful effects of drinking, even at the minimum recommended weekly level of 7.5 MET an hour, they claimed.

“Our results provide an additional argument for the role of [physical activity] as a means to promote the health of the population even in the presence of other less healthy behaviours,” they wrote. ■■■

Drunkenness: it's all relative, claim researchers

People compare their drinking habits to their peers

When drunk and surrounded by other drinkers, people's judgements of their own levels of intoxication and the associated risks are related to the drunkenness of their peers, not on the objective amount of alcohol they have actually consumed, say Cardiff University researchers.

Published in the open access journal *BMC Public Health*, the team found that whilst in intoxicated and in drinking environments, people's perception of their own drunkenness, the excess of their drinking and the long-term health implications of their drinking behaviour were related to how their own drunkenness ranked in comparison to others around them. People were more likely to underestimate their own level of drinking, drunkenness and the associated risks when surrounded by others who were intoxicated, but felt more at risk when surrounded by people who were more sober.

Professor Simon Moore from Cardiff University said: "This has very important implications for how we might work to reduce excessive alcohol consumption. We could either work to reduce the number of very drunk people in a drinking environment, or we could increase the number of people who are sober. Our theory predicts the latter approach would have greatest impact."

The research claims to be the first to examine how people judge their own drunkenness and the health consequences of their drinking, whilst intoxicated and in real-world drinking environments. Previous research only investigated participants while they were sober and in non-drinking environments, relying on the memory of participants to make comparisons between their drinking and that of others. Also, it was previously unclear whether people compared their own levels of intoxication to how intoxicated others actually were or how intoxicated they believed them to be.

Professor Moore said: "Researchers have historically worked under the assumption that those who drink most alcohol incorrectly 'imagine' everyone else also drinks to excess. It turns out that irrespective of how much someone has drunk, if they observe others who are more drunk than they are, they feel less at risk from drinking more."

Drinking minute-by-minute

The researchers tested the breath alcohol concentration (BrAC) of 1,862 individuals, selected from different social groups, who were on average 27 years old. Alcometer tests were conducted between 8pm and 3am on Friday and Saturday evenings in four locations near large numbers of premises that served and sold alcohol. Gender and location information were used to divide participants into eight reference groups – one group for each gender in each location, based on the assumption that drinkers would compare themselves to others of the same gender in the same location. Individual BrAC levels were ranked within each reference group.

To investigate the relationship between rank and people's judgements, a sub-set of 400 participants answered four additional rank-based questions about how they perceived their level of drunkenness and the potential health consequences of their drinking: "How drunk are you right now?" "How extreme has your drinking been tonight?" "If you drank as much as you have tonight every week how likely is it that you will damage your health / get liver cirrhosis in the next 15 years?" Respondents with a BrAC of zero were not included in the rank-judgement analyses.

"It turns out that irrespective of how much someone has drunk, if they observe others who are more drunk than they are, they feel less at risk from drinking more." Professor Simon Moore, Cardiff University

Results and limitations

Whilst in intoxicated and in drinking environments, people base judgements regarding their drinking on how their level of intoxication ranks relative to that of others of the same gender around them, not their actual levels of intoxication. On average, people perceived themselves as moderately drunk and moderately at risk, although their BrAC exceeded standard US and UK drink driving limits (35 micrograms of alcohol in 100 millilitres of breath). Thus, drinkers were found to be more likely to underestimate their own level of drinking, drunkenness and associated risks. Men on average had higher BrAC levels than women.

This study was observational, so it can increase our understanding of possible links between perceived drunkenness and drinking environments, but it cannot show cause and effect because other factors may play a role. An experimental study would be needed to show a cause and effect.

The study may be limited by the assumption that people in the same environment who are drinking influence each other, even though most of the people within the eight groups studied here are unlikely to have a social relationship.

The knowledge that people's decisions on whether or not to drink more may be influenced by their environment and their observation of others around them should inform future alcohol harm reduction strategies, according to the researchers. However, factors that influence drinkers' choices about whether or not to keep drinking are complex and only a few may lend themselves to intervention. The researchers suggest further investigation into the influences of more immediate social groups on drinking perception. ■■

NACOA holds first APPG for Children of Alcoholics

By Piers Henriques, volunteer Publications Manager

Who are NACOA?

Nacoa (The National Association for Children of Alcoholics) is a charity founded in 1990 to address the needs of children growing up in families where one or both parents suffer from alcoholism or a similar addictive problem. We provide a free and confidential telephone and email helpline that is open to people of all ages, from all walks of life, to offer support and advice to anybody affected. Professionals or concerned others can contact us for information, advice and support. Soon, we will also host an online message board service, where users may record their thoughts and share experiences online. Nacoa aims to promote research into the problems children of alcohol dependent parents face and the prevention of alcoholism developing in this vulnerable group. It is exciting therefore to be connected with the Institute of Alcohol Studies (IAS) as part of the government's new [All-Party Parliamentary Group \(APPG\) on Children of Alcoholics](#), which wants to put every child of an alcoholic drinker in contact with help that would make a difference.



The problem?

As the IAS report *Alcohol's harm to others* shows, prevalence of alcohol harm on others in the UK is high, and younger people are more likely to report having experienced a number of harms than older age groups. Research suggests that approximately 1 in 5 children in the UK are living in a household where one or both parents drink hazardously ([Manning et al., 2009](#)). Nacoa's survey of over 4,000 respondents also found that those identifying as children of alcoholics, when compared to a control group, were six times more likely to witness domestic violence, five times more likely to develop an eating problem, three times more likely to consider suicide, and four times more likely to become dependent on alcohol themselves.

How do we help?

Since 1990, staff and volunteers have seen profound changes to the way that children of parents with alcohol problems are discussed in the public domain. As well as providing a national service, Nacoa aims to break down social taboos and afford young people the agency to address their problems rather than hiding away. While alcohol problems are often associated with deprivation, Nacoa also hears from young people suffering in families who, to the outside world, seem functional and successful. These individuals can feel stranded between maintaining the family secret and seeking help for themselves. In these cases, more often than not, young people fall between services and feel totally isolated. Nacoa's helpline offers the opportunity to discuss problems confidentially with trained helpline counsellors and make plans for a better future. Our nationwide service delivers help to those suffering in silence to all corners of the UK. Through our campaigns with prominent patrons – such as Calum Best, Elle Macpherson and Liam Byrne MP – we aim to share stories, break down stigma, and let people know they are not alone.

NACOA and the All-Party Parliamentary Group on Children of Alcoholics

From September 2016, Nacoa is hoping to use its breadth of experience to influence major policy change in the UK through the All-Party Parliamentary Group on Children of Alcoholics. Since the APPG's inception, Nacoa has worked hard to encourage people in the public eye to take part as well as facilitating case studies for press and media to change how parental alcoholism is addressed at a national level.

The Group's first meeting took place on the 15th September at the House of Commons, and [the committee heard evidence](#) from IAS, Nacoa patrons – Calum Best, Lauren Booth and Nacoa supporter Kim Woodburn – as well as other charities and research specialists. Nacoa's Chief Executive and co-founder, Hilary Henriques MBE, presented to the committee and argued that government could and should do more to provide vital lifelines direct to children who may feel scared to speak out and compelled to 'keep the family secret'. While locally provisioned adult treatment services and support are in need of reform and further assistance, services also need to be provided directly to young people in their own right. On the [ITV Good Morning sofa](#), Liam Byrne said that he hopes this parliamentary attention 'sends a message out to the 1 in 5 children who are children of alcoholics that says this is not your fault, you are not alone, and there is help available to you, like the brilliant Nacoa helpline.'

Call for evidence

To provide evidence to the APPG from your personal or professional experience, visit: liambyrne.co.uk/coa/. Together, we will be able to reach out to the 2.6 million children living in the UK with a parent who drinks too much and let them know that they are not alone and Nacoa is here to help. Our helpline number is 0800 358 3456 and email is helpline@nacoa.org.uk. You can find further information and research on our website nacoa.org.uk. For regular updates please follow @NacoaUK and like us on Facebook. ■■■

Whitehall blocks Welsh minimum alcohol pricing plans

SEPTEMBER
16

Adapted from LocalGov

Plans for the Welsh government to introduce minimum alcohol pricing have been [blocked by Whitehall](#).

The Welsh Assembly had wanted to introduce a minimum alcohol unit price of 50p but Westminster has boycotted the move, stating that alcohol law falls under policing and criminal justice powers, which are still controlled centrally.

Local authorities in the principality want powers to be devolved, and even put a clause into the Wales Bill earlier this year calling for an extension to policing.

The Assembly wanted the move on health grounds, believing that control of pricing would have significant public health, social and crime related benefits.

A report from the devolved body had suggested as much as £900m could be saved over a 20 year cycle if the unit pricing move was allowed – alongside around a reduction in 50 deaths a year.

The [British Medical Association Cymru](#) has supported the move, also claiming it would save lives.

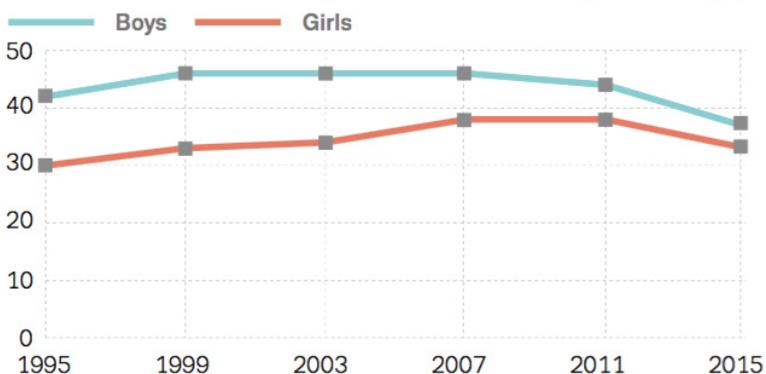
ESPAD 2015: Teenage binge drinking levels same 20 years on

Prevalence of alcohol use in decline, but heavy episodic drinking still a concern

Alcohol consumption levels among 15–16-year-old school students are showing signs of decline, but heavy episodic drinking has stayed unchanged over the last 20 years, concludes the latest report from the *European School Survey Project on Alcohol and Other Drugs (ESPAD)*. The study, published in collaboration with the EU drugs agency (EMCDDA), is based on a 2015 survey in 35 European countries, including 24 EU Member States.

This is the sixth data-collection wave conducted by the ESPAD project since 1995 (every four years), the latest round coinciding with its 20th anniversary. A total of 96,043 students participated in the survey, responding in schools across the continent to an anonymous questionnaire. Alcohol use among adolescents in Europe has softened slightly, but remains high, with four out of every five respondents admitting to drinking alcohol at least once, and trend data shows more girls engaging in heavy episodic consumption of alcohol than was the case two decades ago.*

ESPAD 2015 Heavy episodic drinking (five or more drinks on one occasion) during the last 30 days by gender: 25-country trend 1995-2015 (percentage)



Trend data: Le plus ça change...

Alcohol use among adolescents in Europe remains high, but time trends since 1995 show some positive developments. Lifetime use of alcohol decreased from 89% to 81% between 1995 and 2015 and last-30-day use from 56% to 47%, with a marked decrease seen in both patterns after a peak in 2003.

However, the prevalence of 'heavy episodic drinking'* has remained unchanged over the 20 years, peaking

in the middle of the 2000s before falling back to 1995 levels. Overall rates declined by a single percentage point (36% to 35%) since the first ESPAD in 1995, masking a difference in the fortunes of both sexes. The image above shows that among boys, rates fell (from 42% to 37%) whereas for girls rates of heavy episodic drinking generally increased (from 30% to 33%) during the period, illustrating a narrowing of the gender differences over time.

Underage drinking – the wider picture

The report found that alcoholic beverages were perceived to be easily available in most countries. More than three in four students (78%) stated that alcoholic beverages would be easy to obtain if they wanted to. In the Czech Republic, Denmark and Greece, more than 90% of the students reported easy access. The lowest proportions were found in Moldova (52%), the former Yugoslav Republic of Macedonia (53%) and Romania (60%). In most countries, perceptions of availability among boys and girls were similar.

Nearly half of the students (47%) reported alcohol use at the age of 13 or younger. The highest proportions were found in Georgia (72%), the Czech Republic (68%) and Cyprus (66%). The countries with the lowest rates were Iceland (14%) and Norway (19%). Boys were more likely than girls to have used alcohol at an early age.

One in twelve students had experienced intoxication at the age of 13 or younger. The proportion of students reporting intoxication at an early age varied quite substantially across countries: Georgia (22%) and Estonia (15%) were at the high end of the scale, and Iceland (2%) and Belgium (Flanders) (3%) were at the low end. Higher rates were more likely to be found in the eastern part of Europe.

In all ESPAD countries except Iceland (35%), 50% or more of the students have drunk alcohol at least once during their lifetime. The highest rates of lifetime alcohol prevalence (93% or more) were found in the Czech Republic, Greece and Hungary. In addition to Iceland, countries with relatively low rates (60% or less) were Albania, the former Yugoslav Republic of Macedonia and Norway. A total of 13% of the students reported having been intoxicated during the last 30 days.

Students who reported alcohol use in the last 30 days drank alcohol on an average of 5.4 occasions. Students from Cyprus and Liechtenstein consumed alcohol on 8.2 and 9.1 occasions, respectively, and students from Estonia, Finland, Iceland, Lithuania, Moldova, Norway and Sweden drank alcohol on four or fewer occasions on average. In most countries, boys who drank did so more frequently than girls. Every third student (35%) reported heavy episodic drinking in the past month. This drinking pattern was found more often in Austria, Cyprus and Denmark, where it was reported by about every second student. The lowest figures were found in Norway (19%) and Iceland (8%). The difference between boys and girls was about 5 percentage points on average, with generally higher percentages for boys.

* *drinking a minimum of five alcoholic beverages in a single drinking occasion at least once in the last 30 days, which corresponds to a cut-off of approximately 9 centilitres of pure alcohol.* ■■

Richest Scots make for the riskiest drinkers

Binge drinking declines, but figures mask wealth gap in drinking attitudes

The new *Scottish Health Survey (SHS)* reveals a gap in risky drinking behaviours between the wealthiest and poorest Scots. The report shows that in 2015, the richest households are roughly twice as likely to consume hazardous amounts of alcohol (35%) compared with 18% of the poorest households.*

The split by sex also shows how men are a lot more likely to drink more than the new drinking guidelines of 14 units a week than women. Nearly half of men from the top income quintile in Scotland (46%) and a fifth of women (24%) consumed more than the recommended 14 units of alcohol a week. 26% of men and 11% of women in the bottom quintile also did so.

Meanwhile, binge drinking – defined as consuming at least 6 units (women) and 8 units (men) on their heaviest drinking day – has decreased four percentage points since 2003 (from 24% to 20%), and the number of teetotal adults has risen five percentage points over the same period (16%).

Some improvements in heavy drinking

Reported hazardous or harmful drinking for adults (based on revised guidelines of over 14 units per week for both men and women) declined significantly from 2003 (34%) to 2013 (25%) but has stayed at similar levels since (26% in 2015) (*illustrated, right*).



Similar patterns were seen for the proportion of adults drinking above three units (women) or four units (men) on their heaviest drinking day (41% in 2003, 36% in 2015), and those drinking twice those levels (women ≥ 6 units, men ≥ 8 units) on their heaviest drinking day in the last week (24% in 2003, 20% in 2015).

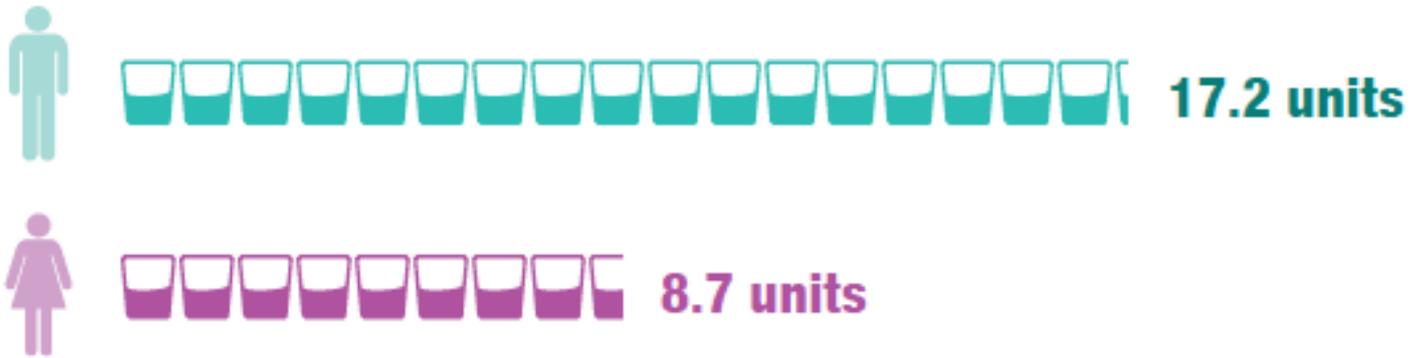
For men, the proportion drinking more than four units on their heaviest drinking day declined from 45% in 2003 to 40% in 2013 and is currently at 41% in 2015. For women, the proportion drinking more than three units on their heaviest drinking day decreased from 37% in 2003 to 30% in 2012 before stabilising (32% in 2015).

For men, prevalence was 29% in 2003 before declining to 24% in 2014 (26% in 2015). For women, there was a decline from 19% in 2003 to 15% in both 2012 and 2013 and was at 14% in 2015.

Average alcohol unit consumption down; abstention up

Non-drinking among adults increased significantly from 11% in 2003 to 16% in 2013 and has remained at that level since.

The mean number of units per week among drinkers has declined from 16.1 units in 2003 to 12.2 units in 2013 and remained at a similar level in 2015 (12.9 units).

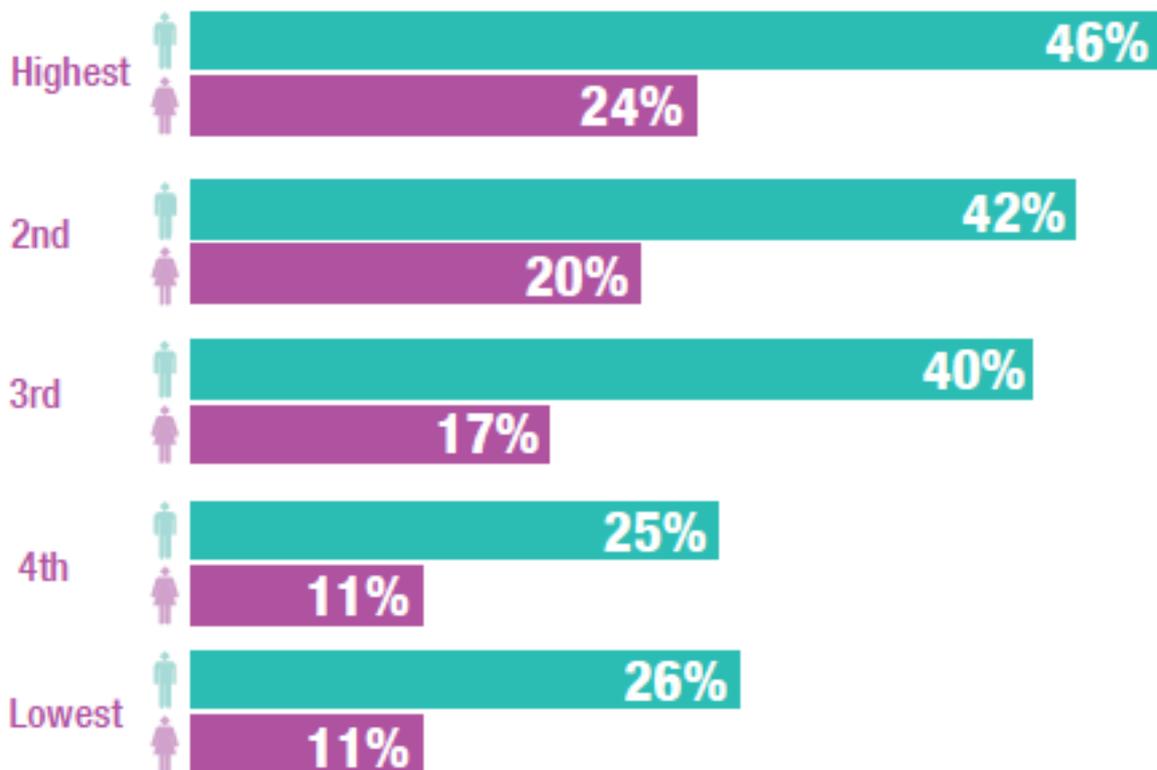


Mean unit consumption per week was around twice as high for male drinkers (17.2 units) than for female drinkers (8.7 units, *illustrated above*).

Twice as many men as women drink to dangerous levels

Hazardous or harmful levels of drinking were reported for 36% of men and 17% of women.

Drinking above the recommended maximum amount declined with age-standardised income for both men (46% in the highest income quintile to 25% and 26% in the bottom two quintiles) and women (equivalent figures as 24% and 11%).



Regional drinking patterns

In the period 2012–2015, the proportion of adults who drank above the low-risk guidelines on weekly alcohol consumption was significantly lower than the national average (26%) in Western Isles (19%), Dumfries & Galloway (21%) and Tayside (22%). In Lothian, 30% of adults drank outwith weekly guidelines – a significantly higher proportion than across Scotland as a whole. In all health boards, a significantly higher proportion of men than women drank outwith the guidelines.

Alison Douglas, chief executive of Alcohol Focus Scotland, said in *The Scotsman* that the number of people drinking above the low-risk guidelines was “concerning”.

She said: “Regularly drinking more than 14 units per week increases the risk of many illnesses including breast, bowel and oral cancers, liver disease and mental health problems.

“We are encouraged to drink to excess by low prices, endless promotions and easy availability.

“Taking action on these issues will reduce our consumption and improve our health and wellbeing.”

The Scottish Government has tried to introduce minimum unit pricing, which would provide a lower level price depending on strength, but the legislation is currently subject to a legal challenge.

The SHS has been designed to provide data on the health of adults (aged 16 and over) and children (aged 0-15) living in private households in Scotland annually. In 2015, 5,000 adults and 1,421 children took part in the survey. Representative data for adults in all NHS Health Board for the 2012-2015 period are also available.

* *The report describes those who drink within the revised weekly guidelines of 14 units a week as ‘moderate’ drinkers, while drinking above this level is described as ‘hazardous or harmful’.* ■■

BBPA: Off-trade beer drinking now the norm for most Brits

Annual alcohol consumption continues to flatline too

The amount of alcohol consumed by Britons has stayed static for another year, with supermarkets and off-licences dominating the sales landscape, according to the [British Beer and Pub Association \(BBPA\) Statistical Handbook 2016](#). The data reveals that British adults consumed 9.5 litres per head of alcohol in 2015, a slight increase on the previous two years, and in particular, the majority of 51% of the 44m hectolitres of the beer sold were in the off-trade, for the first time since industry records began.

The Handbook also reveals that the average Briton drinks the equivalent of 67.7 litres of beer (119 pints) a year, slightly less than the European average of 72 litres, and considerably less than the 144 litres a head consumed in the Czech Republic, the continent's leading beer consumer.

Beer sales in pubs – at the bottom of the barrel, but why?

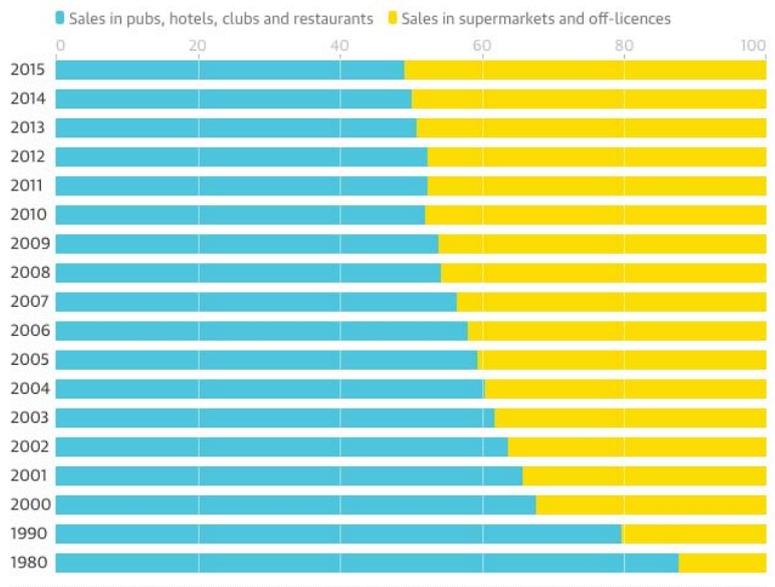
The Guardian writes: “Venues where drinkers can buy and consume beer have been steadily losing ground to supermarkets for many years, due to being unable to compete with aggressive promotions, especially on popular lager brands. In 2000, more than two-thirds of beer was drunk in pubs and other on-trade locations, while the figure was almost 80% in 1990.”

However, the likes of Tesco and Asda sell multipacks for very competitive prices – 18 cans of Stella Artois for £14 (equivalent to about £1 a pint) and 20 Carlsberg cans for £10 (65p a pint). Such pricing may be responsible for the declining number of pubs, from 58,200 a decade ago to just 50,800 public houses opening their doors last year.

The article also speculates that as well as more drinkers opting to buy supermarket beer to drink at home, “changing tastes in pubs and bars have also had an impact on beer sales in recent years.

Beer sales in pubs, hotels, clubs and restaurants have **shrunk by 44%** since 1980

Percentage of total UK beer sales



Guardian graphic | Source: British Beer and Pub Association

The popularity of wine has been steadily building, while cider and alcopops have fluctuated in and out of fashion, on each occasion taking market share from traditional beer choices.”

The BBPA has called on Chancellor Philip Hammond to repeat his predecessor George Osborne's [surprise cut to beer duty](#) three years ago in an attempt to boost the pub trade, noting that the tax is 54% higher than it was in 2000”. But this position has been challenged in an IAS blog as being a [false economy](#), suggesting that there is reason to suspect that further cuts would in fact backfire on pubs and accelerate the shift in consumption towards supermarkets.

This view is supported by the pub owners responsible for over 100 public houses in the UK, who who wrote an [open letter](#) to the Government earlier this year, claiming that they had seen few benefits from previous duty cuts as they had not been passed on by brewers, and that cutting duty “exacerbates the on-trade / off-trade price differential with consequent social and health impacts.” ■■

Wales: Two-thirds of adults harmed by someone else's drinking

Town centres are “no-go areas” after dark due to alcohol-related trouble

Nearly two-thirds (59.7%) of adults in Wales have suffered some form of harm or negative experience in the last year as a result of someone else being under the influence of alcohol, a new report has found. This equates to **over 1.4 million Welsh adults**.

The *Alcohol's Harms to Others* report found that in Wales last year, among a survey of 1,071 adults:

- Almost one in five (18%) had felt physically threatened by someone who had been drinking;
- More than one in ten (11%) had their property damaged by a drinker; and
- 5% had suffered physical violence at the hands of someone under the influence of alcohol.

5% of people also reported being concerned about a child's wellbeing because of someone else's drinking. The report, co-produced by Public Health Wales and Liverpool John Moores University, is the first study into the broad range of harms caused to adults in Wales as a consequence of someone else's drinking.

Professor Mark Bellis, Director of Policy, Research, and International Development at Public Health Wales, said: “People are increasingly aware of personal risks from cancers and other diseases associated with drinking alcohol. However, this report shows how alcohol can harm not just the drinker but also those around them.”

Andrew Misell, Director of Alcohol Concern Cymru, said:

“Even those of us who don't drink, or who drink very little, will feel the effects of other people's drinking from time to time, from low-level disruptive behaviour to full-on aggression and violence.

“When we've asked people in Wales nearly half say that their town centre is a no-go area after dark due to alcohol-related trouble.

“Drinking is a feature of most people's social lives, and the big drinks companies are keen to find more and more reasons for us to drink, but it has to be time to ask whether we want alcohol to play such a prominent part in so many areas of life.”

According to the report, the risk of experiencing any harm or negative experience in the past 12 months was highest in younger age groups, with 70% of 18-30 year olds and 75% of 35-44 year olds reporting harms or other negative effects from others' drinking.

Dr Zara Quigg, Reader in Behavioural Epidemiology at the Public Health Institute, Liverpool John Moores University, added: “Identifying the broad impact that alcohol use can have on individuals, those around them and wider society is important to informing the development, implementation and targeting of interventions to reduce and prevent alcohol-related harms.

“The prevalence of alcohol's harms to others identified in this report should act as a catalyst for policymakers, practitioners and the public, to start working towards addressing the wide ranging effects of alcohol use, and ultimately improve the public's health.” ■■■



Carlsberg ad linking beer with building site banned

ASA rules online advert “must not be shown again in its current form”

The UK Advertising Standards Authority (ASA) has banned a Carlsberg’s Euro 2016 YouTube advert for breaking advertising rules.

It appeared on the YouTube channel of builders’ merchant [TradePoint](#) on 18 June 2016, promoted as part of Carlsberg’s sponsorship of the Euro 2016 tournament, and featured former England International footballer Stuart Pearce arriving at a building site with a large crate of Carlsberg for the builders working on the site.

An informal football game took place, after which workers on the site were shown carrying away one pack of Carlsberg each on their shoulders. On-screen text stating “BULK BEER” appeared twice during the ad. Further on-screen text at the end of the ad stated “If Carlsberg did substitutions”.

The video was banned after [Alcohol Concern](#) raised a complaint to the Advertising Standards Authority that it broke ad rules for linking alcohol with a building site. The charity challenged whether the ad was irresponsible because it encouraged excessive drinking, because it implied that drinking alcohol was a key component of the success of a social event, and because it showed a large quantity of alcohol being delivered to a building site and linked alcohol with the use of potentially dangerous machinery.

In defence, TradePoint – part of B&Q – argued that there was no suggestion anyone would drink alcohol in the ad and it was not irresponsible to stage it at a building site. There was no use of machinery after the beer was delivered and the builders were shown leaving the site with their packs of Carlsberg unopened.

The ASA’s verdict indicated that a building site “would be an unsafe and unwise location in which to consume alcohol”, and that the delivery of the crate of Carlsberg to a building site implied that alcohol could be consumed on such premises, “even though none was shown to be opened and drunk”.

The regulator ruled that because the advert linked alcohol with that location, it breached CAP Code (Edition 12) rule 18.12 (Alcohol), and “must not appear again in its current form”. ■■



An Institute of Alcohol Studies publication

Alliance House
12 Caxton Street
London SW1H 0QS

Telephone | 0207 222 4001
Email | info@ias.org.uk
Twitter | [@InstAlcStud](https://twitter.com/InstAlcStud)
Web | www.ias.org.uk

The Institute of Alcohol Studies is a registered charity no. 1112671