

ALCOHOL ALERT

JANUARY 2020

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DRY JANUARY®

#LeDéfiDeJanvier



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DRY JANUARY 2020: A CHALLENGE FOR SOME

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COVER STORY

Dry January 2020 – a challenge for some

Campaign goes ahead in France despite some resistance

Seven years on from [Alcohol Change UK's first Dry January](#), the movement has taken root abroad – in France, around 20 associations, including the Société Française d'Alcoologie (SFA), Association Nationale de Prévention en Alcoologie et Addictologie (ANPAA), Fédération Française d'Addictologie (FFA) and La Ligue Nationale contre le Cancer (UICC), have come together to support the initiative. But the popular rise of the movement in France has not been without controversy.

New Year, new kit

Back in the UK, pioneers of the concept – Alcohol Change UK – have expanded on their success to date by creating an app called [Try Dry](#), aimed at helping users track their time away from drinking alcohol.

Free to download on Apple and Android smartphones, the application can:

- Track your units, calories and money saved when you cut down or cut out alcohol
- Understand your drinking pattern and track your progress by using the 'My charts' feature to see how much money you spend, units you drink and calories you consume over a time period
- Use the health quiz to check up on your drinking
- Keep track of your current and best dry streaks
- Use the app for Dry January and beyond

The charity have also produced calendars freely available in pharmacies all over the country.

What are the benefits of Dry January?

Dry January invites those concerned about their alcohol intake who wish to monitor it more closely to challenge themselves to forego drinking alcohol for the month.

Alcohol Change UK state that the objective is not to stop definitively, but rather to take a break and to study the place occupied by alcohol in our daily lives.

The organisers highlight the many advantages to stop drinking alcohol; like having better skin and better sleep, weight loss, and ultimately, greater control over one's drinking habits.

What's happening in France?

The concept of Dry January was taken on by Public Health Agency France under the moniker of 'Le mois sans alcool #LeDéfiDeJanvier' (A month without alcohol: The January Challenge).

However, Health Minister Agnes Buzyn was reported to have denied that any official campaign would be approved until a ministerial health prevention committee meeting in February. Buzyn told [Franceinfo radio](#) that the campaign is being developed, but that the Dry January version is 'not necessarily the format we'll decide on.'

Health campaigners blamed the department's hesitation on 'intense lobbying' from the Association nationale des élus de la vigne (National Association of the Elected Officials of Vineyards), an influential group of politicians representing France's winemaking regions.

Indeed, [it was reported that President Emmanuel Macron made the decision to distance the government from Dry January](#) after a lunch with the champagne producers in Epernay in which he was reported to have said: 'Vous pouvez faire savoir qu'il n'y aura pas de « Janvier sec »' (You can let it be known that there will be no "Dry January").

Undeterred by the absence of support from the government, the health associations decided to unite to promote the campaign. As of this month, #LeDéfiDeJanvier has attracted thousands of followers. Whether the French Government takes up the challenge of promoting Dry January to the nation in 2021 remains to be seen.

Click on the microphone icon to listen to Samy Amri from Action Addictions France explain the situation in our [New Year edition of the Alcohol Alert podcast](#). 



Lancet: youngest and poorest nations worst affected by alcohol



Findings of global study on alcohol-attributable burden of disease

As a leading risk factor for the burden of disease, alcohol use disproportionately affects those living in low ranking nations on the Human Development Index (HDI), and young people, according to new findings published in *The Lancet*.

The global comparative risk assessment study estimated the alcohol-attributable burden of disease, estimating population-attributable fractions (PAFs) by combining alcohol exposure data obtained from production and taxation statistics and from national surveys with corresponding relative risks obtained from meta-analyses and cohort studies.

Mortality and morbidity data were obtained from the WHO Global Health Estimates, population data were obtained from the UN Population Division, and human development index (HDI) data were obtained from the UN Development Programme.

The report calculated an overall total of three million alcohol-attributable deaths and 131.4 million disability adjusted life years (DALY) lost in 2016, corresponding to 5.3% of all deaths and 5% of all DALYs.

In particular, alcohol use was found to be a major risk factor for communicable, maternal, perinatal, and nutritional disease (3.3%), non-communicable disease (4.3%), and injury (17.7%). The alcohol-attributable burden of disease was higher among men than among women, and the alcohol-attributable age-standardised burden of disease was highest in eastern Europe and the western, southern, and central sub-Saharan Africa regions, and in countries with low HDIs. More than half (52.4%) of all alcohol-attributable deaths occurred among those under 60 years of age.

Given the variations in the alcohol-attributable burden of disease, The Lancet states, 'cost-effective local and national policy measures that can reduce alcohol use and the resulting burden of disease are needed, especially in low-income and middle-income countries'.



Alcohol impacts children's emotional wellbeing



Scottish study supports growing body of research

Children's emotional wellbeing is affected by parental drinking, even at low levels. These are the findings of an online survey comprising 200 interviews with families in Scotland, based upon the Scottish data and inquiry results from IAS report *Like sugar for adults* (originally published in October 2017). For each family, both a parent and one of their children (aged between 10 and 17 years) were interviewed.

It found that more than half of the children reported seeing their parent tipsy, with a third saying that they had seen them drunk.

Most parents surveyed said they drank within the UK Chief Medical Officers' safe alcohol guidelines of 14 units per week. However, approximately a third of the children whose parents mostly adhered to those guidelines reported having felt embarrassed, confused, angry, worried, scared or ignored as a result of their parent's drinking. Two-fifths of children reported that their parent's drinking had caused them to be unpredictable, paying the child less attention than usual, and even making them late for school among a host of other problems.

Alcohol Focus Scotland say the findings clearly convey the unintentional nature of most of the harm experienced by children as a result of parental drinking, due to a lack of understanding of the impact even lower-level drinking can have on children's immediate emotional and physical wellbeing.

Alison Douglas, chief executive of Alcohol Focus Scotland, said that the report highlights the 'often unintentional' effects of drinking, even at low levels in front of our children.

Douglas told the *Scotsman*: 'As well as the negative impacts on children's wellbeing, seeing how we drink can have a big influence on our children's future drinking habits.'

'We're not suggesting that alcohol is hidden away and becomes never spoken about, quite the opposite - we want to encourage parents to start a conversation with their children. It's important to understand what they notice and how it makes them feel when we drink.'



Commission on Alcohol Harm launched



Part of an inquiry aiming to 'build a solid case for change'

Nurses are among a range of witnesses asked to share their experiences of the consequences of alcohol abuse as part of a new independent inquiry seeking to shine a light on the true costs of excessive drinking in the UK, according to the *Nursing Times*.

Made up of a panel of different experts and chaired by Baroness Finlay of Llandaff (who is a Welsh doctor, professor of palliative medicine and independent member of the House of Lords), the Commission will [examine the current evidence on alcohol harm](#), recent trends and potential solutions to reduce alcohol damage at UK-level. It will also examine the need for a new nationwide alcohol strategy for England, last updated in 2012.

Last summer, professional bodies including the Royal College of Nursing (RCN) and the Royal College of Midwives wrote a letter calling on the government to make producing a new alcohol strategy a priority amid mounting concern over the issue. Figures show that fewer people are accessing vital rehabilitation treatment, despite ever rising levels of alcohol-related hospital admissions and deaths.

In their letter, the professional bodies warned that alcohol misuse posed an 'escalating risk to public health' and demanded an 'updated and ambitious national alcohol strategy'. While the Commission on Alcohol Harm will not be creating a strategy, members hope their work will provide the impetus needed for national leaders to start the process.

Helen Donovan, RCN professional lead for public health, welcomed the launch of the commission as a 'positive step', and one that the college hopes will inform the development of a new alcohol strategy. Labelling the problem a 'growing public health concern', Donovan said nurses saw the 'terrible impact' of alcohol abuse every day of the week.

'The views and the experience of nurses on the front line to dealing with the aftermath of alcohol abuse will provide a valuable insight to the commission as it seeks new ways to prevent the harm caused by alcohol,' she added. 'We will be making clear the impact that nursing shortages and public health cuts have had on the ability of nurses to deliver services to those that need it most. We hope this will in turn lead to a long-term strategy to address the growing impact alcohol is having on the health of the nation.'

The Commission will hold three oral evidence sessions across the UK later this year as well as taking written submissions. The findings will be drawn together in a report, which is expected to be complete by May 2020, and will be sent to the UK government with the intention of informing developments in alcohol policy.

Professor Sir Ian Gilmore, chair of the Alcohol Health Alliance UK, which supports the Commission, said this was an opportunity to 'build a solid case for change'. 'The Commission on Alcohol Harm is an extremely important investigation into how all parts of our society are impacted by our drinking habits, we need to have voices representing the wide range of experiences of alcohol harm; including those on the frontline, researchers and those with first-hand experience of alcohol harm.'

The Alcohol Health Alliance encourages those who wish contribute to submit their written evidence to harms_commission@ahauk.org by noon on 17 February 2020.

Pubs in care homes

Survey reveals widespread availability of alcohol

Almost half of care homes possess a pub or drinking area that serves alcohol, while one-in-six staff claim there is **no limit** on how much the residents can drink, according to the UK's leading care home review website.

Carehome.co.uk **polled more than 2,000 care home owners, managers and staff** about residents' alcohol intake and limits.

On the question of availability, 44% of staff said their care home has a pub or drinking facility where they can get alcohol.

When asked about consumption habits, roughly a fifth (21%) of staff claimed alcohol was prohibited in their care home.

But many more reported that their elderly residents did consume alcohol, in varying amounts. Nearly a quarter said their elderly care home residents drank once a week, 18% said residents were allowed to drink one unit a day and 16% said there is no limit to how much residents can consume

Sue Learner, editor of the review website which carried out the survey, said it was encouraging so many homes had a bar area.

'Life can continue for people when they go into residential care,' she added.

'Going to the pub is a fun and sociable experience. It is good people can still enjoy a chat over a pint of beer and feel they are living a "normal life".'

A quarter of drinkers in Yorkshire exceed guidelines weekly



Poll held by cancer research group

A fifth of drinkers in Yorkshire exceed the government's weekly recommended alcohol limit of 14 units, every week, according to a **survey of 1,171 drinkers commissioned by Yorkshire Cancer Research (YCR)**.

The survey also found that at least one in 10 said they drank daily. However, at least half said they had attempted to cut down during the past five years.

On average, Yorkshire drinkers consume alcohol twice a week, getting through 10 units – one more than the national average – but 40% reported drinking more often.

Furthermore, a fifth (21%) of drinkers said they routinely exceeded the recommended guidelines, while the majority (58%) had no idea how much the recommended weekly limit is – 13% believed that the limit was 21 units.

However, a quarter (26%) of those polled admit they would like to cut down on their drinking, in part due to concerns about the potential impact of alcohol on their health and wellbeing.

And around half of the county's drinkers have successfully managed to do just this at one time or another – having abstained from alcohol for a month or more, although 56% soon reverted back to drinking the same amount.

'It is more beneficial to our health to drink at a low level throughout the year,' said Dr Kathryn Scott, YCR chief executive. 'This is better than abstaining for one month and then go above the government recommendations the rest of the year.'

The study also found that 64% of participants didn't know any amount of alcohol can increase the risk of developing cancer – but upon learning the truth, 84% said they'd continue to drink. As a result, 66% of those polled thought more needs to be done to raise awareness of the health risks associated with alcohol.

'There is no safe level of alcohol consumption when it comes to your health,' Scott added. 'Drinking alcohol is now the leading risk factor for ill health among those aged 15 to 49 – and can cause cancer. Seven different types of cancer are linked to drinking – including 8% of all breast cancer cases and 6% of bowel cancers.'

Southern Comfort social media ads removed

Regulator rules against use of influencers

The Advertising Standards Authority (ASA) has [banned an alcohol advert promoted on social media](#) for breaching its rule on featuring young adults.

The brand in question, Southern Comfort, was involved in two Instagram posts from influencers Francesca Perks and Jack Remmington, on 29 October 2019 advertising their new alcoholic cocktail.

ASA received two complaints alleging that the influencers were under 25 years of age, and therefore the ad breached the Advertising Code.

In response, parent company Sazerac UK Ltd said that the ads were designed to promote a 'Shark Bite' drink served over the week of Halloween, and that they had engaged Francesca Perks and Jack Remmington to develop own their version.

They went on to admit that Ms Perks was 22 years old when the ad was posted. Upon receipt of the complaint, Southern Comfort said they requested Ms Perks remove the post from her feed to avoid further views. Ms Perks said that the post was removed when she was notified of the complaint by the ASA and confirmed that in future, she would not engage in alcohol-related marketing which would breach the Advertising Code. Mr Remmington confirmed that he was 25 years old.

ASA concluded both ads breached the CAP Code (Edition 12) rule 18.16 (Alcohol), and ordered that they must not appear again in their current form. ■■

Majority of deaths at ports are alcohol-related

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Investigators find alcohol policies for workers lack clarity

The fishing industry has been told to cut down on boozing after nearly two thirds of port deaths were linked to alcohol.

Concerns were flagged up after Andrew Hay, 56, from St Fergus, Aberdeenshire, died in April 2019. He had been onboarding the Artemis in Kilkeel, County Down, Northern Ireland, when he fell onto the deck and suffered serious head injuries. In August 2018 Duncan Matheson, 63, was working as a deckhand on the Fram of Shildaig in Loch Torridon, in the Highlands, when he died after he slipped or stumbled while manoeuvring the small tender alongside a moored fishing boat. An investigation by the MAIB found he was not wearing a life-jacket and was under the influence of alcohol at the time, which was found to be a contributory factor.

New stats from the Marine Accident Investigation Board (MAIB) show that [since 1992, alcohol has contributed to 62% of fatalities on fishing vessels](#) in port. The MAIB has recommended that drug and alcohol policies are made clearer, telling the Sea Fish Industry Authority (SFIA) that 'there appears to be little awareness of the risk alcohol poses or any guidance on its consumption when crew are off duty and living on board a vessel while in port.

'Boarding a fishing vessel from a quayside while under the influence of alcohol, and then negotiating the ladders and hatches on board, poses considerable risk. Regrettably, all too often the dangers of consuming alcohol are overlooked. This has led to a significant number of fatal accident investigations by the MAIB involving fishermen who have consumed too much alcohol ashore before returning to their vessels.'

The MAIB has recommended that the SFIA amends 'generic' drug and alcohol policies contained in safety management folders, saying they do not make clear what the maritime alcohol limit is. The maritime alcohol limit is the same as Scotland's drink-driving laws – set at 50mg of alcohol in 100ml of blood.

For its part, the SFIA has promised to review and update its Alcohol and Drugs Policy and Procedures which provide guidance for fishermen on vessel safety. They said: 'We will use the publication of the revised policy to promote industry awareness of the legal alcohol limits for seafarers and the dangers of alcohol consumption in and around ports and harbours.' ■■

RSPH sets out to help communities tackle alcohol harm

Abridged from Royal Society for Public Health website

Following a successful pilot in Greater Manchester, the Royal Society for Public Health (RSPH) has invited local authorities across the UK to [take part in the 'Communities in Charge of Alcohol' \(CICA\) programme](#) – a community-centred approach to reducing alcohol harm through evidence-based interventions.

AHCs (Alcohol Health Champions) are trained to:

- Provide individual level brief advice, information and support, and
- Champion local action on alcohol availability, such as through influencing licensing decisions.

The programme recruits and trains networks of locally engaged and RSPH-accredited AHCs – residents who learn skills to address issues around alcohol consumption in their communities.

The pioneering pilot programme, which was evaluated by a team led by the University of Salford, delivered the first alcohol-focused health champion role of its kind between 2017-19. The scheme has been responsible for:

- 249 AUDIT-Cs completed by 'Alcohol Health Champions'
- 1,129 brief conversations recorded
- 65 community events attended
- Action on licensing activity

'Our research aims to demonstrate the impact of the intervention. We have been collecting information using interviews, focus groups and observations, and so far, have revealed inspiring stories from people's personal journeys as alcohol health champions, as well as the factors that enable areas to set up the scheme and support alcohol health champions in their role.

'Later on in our evaluation, we will be able to compare alcohol harm data from areas that do and don't have the intervention, so that we can see whether CICA leads to less alcohol-related burden on our hospitals and criminal justice system', said Professor Penny Cook.

RSPH Director on National and Regional Programmes Kiran Kent commented: 'Following the huge success of CICA in Greater Manchester, we are delighted to roll-out this ground-breaking programme and equip Community Alcohol Champions across the country with the resources and skills needed to empower individuals and communities to take back control of their alcohol consumption.

'CICA offers not only training, but direct action in local communities. The grassroots approach that this innovative programme takes offers vital support to communities in the long-term.'

More lives lost – alcohol-related deaths continue to rise

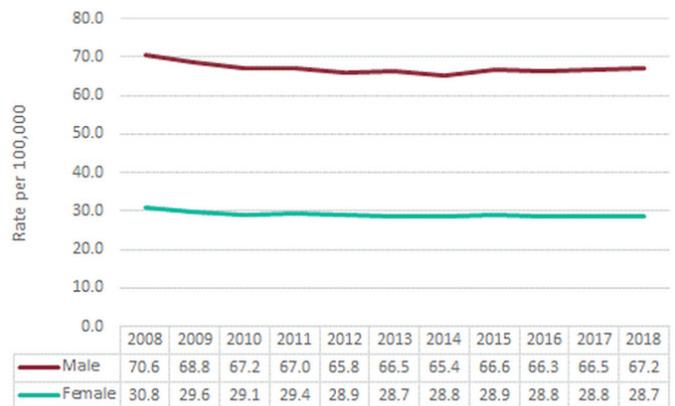
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Men bear burden of deaths in England

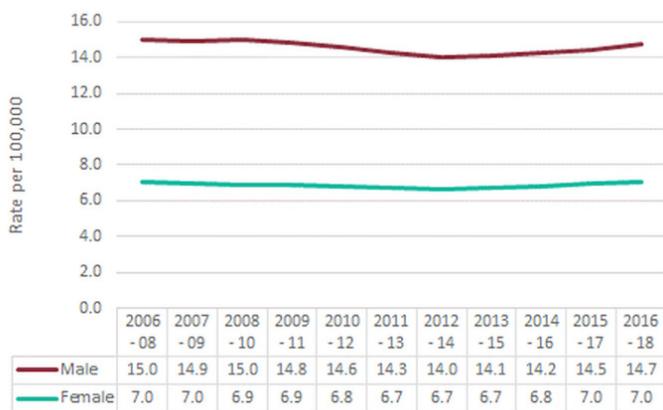
The latest update in mortality data for the Local Alcohol Profiles for England (LAPE) tool has revealed a 'persistent gender inequality' in the rising death rate.

In 2018 there were over 314,000 years of life lost due to alcohol-related conditions in England up to the age of 75. The rate of years of life lost in 2018 (637 per 100,000) reached its highest level since 2011. There were 17,040 alcohol-specific deaths in England between 2016 and 2018, a rate of 10.8 (per 100,000), the third annual rise in a row. The most recent increase is down to a fourth successive rise in male annual death rates, the rate (and number) of alcohol-specific deaths over the period is roughly double that for men (11,370) than it is for women (5,680).

A similar story is emerging with alcohol-related mortality. In 2018 there were an estimated 24,720 deaths of this kind in England. The rate rose for the second consecutive period to 46.5 (per 100,000) in 2018, the result of a 'marked and persistent gender inequality', LAPE observed. The rate for men (67.2 per 100,000) is currently more than double the rate for women (28.7 per 100,000).



Alcohol-related mortality, by gender



Alcohol-specific mortality, by gender

Reformulate sugary alcohol drinks



NGO in call to lower sugar content of RTDs

Popular 'ready to drink' pre-mixed spirits sold in major UK retailers are unnecessarily high in hidden sugar and calories and should be forced to reformulate immediately to soft drink industry levy (SDIL) standards, say Action on Sugar.

The call comes as a new product survey (the first of its kind) launched at Queen Mary University of London to mark Sugar Awareness Week (20 – 26 January 2020).

Researchers surveyed a total of 202 'ready to drink' alcoholic beverages sold in-store and online. Out of the 154 products collected in-store, nutrition information on pack was 'shockingly low', making it difficult for consumers to know exactly what they are drinking:

- Only 63 products (41%) in-store had some form of nutrition information on pack
- Only 14 products (9%) had 'sugar' information on pack
- Nine out of ten pre-mixed spirits don't have on-pack sugar information – certain beverages also contain as many as nine teaspoons of sugar in just 250ml

Due to the lack of information provided on pack (in-store), Action on Sugar commissioned independent laboratory analysis of 21 products (in addition to the information available on pack and on drink manufacturer's websites). You can read the Action on Sugar survey report in full on their website.

The group of experts warn that alcoholic drinks are contributing to obesity, type 2 diabetes, various cancers, liver damage and tooth decay as drinkers are unknowingly consuming large amounts of sugar. The soft drinks industry levy was successful in reducing sugar in soft drinks like lemonade, yet drinks that contain alcohol, such as a vodka and lemonade, are exempt, which critics say is 'absurd'. Action on Sugar is now urging the government to prove it really is committed to prevention and reducing inequalities by stepping in and taking control of the situation and preventing alcohol producers 'from exploiting vulnerable young adults'.

Responding to Action on Sugar's latest research, Professor Sir Ian Gilmore, Alcohol Health Alliance UK chair, said:

'Consumers have the right to know exactly what they are drinking. This latest research demonstrates – once again – that the current system of the self-regulation of alcohol labelling isn't working and the industry is not taking its responsibilities seriously. Shoppers who buy alcohol get less information about what's in their drink than those who buy milk or orange juice; this is simply outrageous.

'We urge the government to introduce mandatory labelling on alcohol products in order to give all of us easy access to the information needed to make healthier choices.'

Action on Sugar is calling on the new government to ensure that all alcoholic drinks are included in vital public health policies to reduce obesity and ill health and tackle this huge missed opportunity.

Registered Nutritionist, Holly Gabriel at Action on Sugar, says: 'This is the first time a survey of this kind has been conducted and the results highlight an immediate need for alcoholic drinks to be included in vital public health policies.

'Customers should be able to purchase better options and reformulating these drinks with less sugar, calories and alcohol is one way to achieve this. Our survey clearly shows that similar drinks can be made with less sugar and calories, yet drink manufacturers are failing to take the appropriate action. Urgent attention is required from the government to ensure that gaps in the law do not contribute to the rise in obesity and related health conditions, as well as alcohol harm.' ■■■

No change in underage drinkers' behaviour in age of MUP

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Limited impact on cohort as their preferred beverages are priced above base level

A small-scale study into the drinking habits of Scottish teenagers since the introduction of minimum unit pricing (MUP) found no change in their consumption habits. This is because many of the beverages favoured by the young people were, on average, already being sold above the MUP baseline of 50 pence per unit of alcohol.

The NHS Scotland study is [the first to look at underage drinking in Scotland](#) since the minimum unit policy was introduced in May 2018. The survey was carried out by Iconic Consulting.

Researchers interviewed a group of 50 children aged between 13 and 17 years of age about any changes in the price or availability of what they drink; any changes in their acquisition and consumption of alcohol; their experiences of harm after drinking; and the lived experience of the young people who took part. It's not an assessment of the impact of MUP that is representative of all young people in Scotland.

Despite a limited awareness of the implementation of MUP, the young people interviewed reported being largely price aware, and had observed changes in products price, and to a lesser extent changes in product availability.

Director at Iconic Consulting Ian Clark said: 'Overall, our findings suggest that the introduction of MUP had limited impact on the alcohol consumption of the children and young people participating in this study, and no reported impact on their related behaviour. This study provides an important understanding of the wider context surrounding those young people's experiences with alcohol – and it is clear that price is only one factor in the often challenging life circumstances of young people who drink.'

'Whilst several of the alcoholic drinks popular with young people were already being sold above 50 pence per unit, where they did observe the price of their favoured drink rise after May 2018 – as was the case before the introduction of MUP – the young people reported being able to fund the additional cost.'

Scotland was the first country in the world to implement a minimum unit price for alcohol in May 2018, following a 10-year campaign by health bodies. The law, which was delayed by legal challenges, increased the price of cheap, high-strength alcohol products, which the Scottish government said attracted problem drinkers.

In response to the study, Scotland's Public Health Minister Joe FitzPatrick said: 'Initial national sales data for 2018 have already shown an overall 3% drop in sales of pure alcohol per adult. We want to go further to protect our children and young people from alcohol harms and that is why I intend this year to consult on potential mandatory restrictions on alcohol marketing and advertising.'

Dr Peter Rice, consultant psychiatrist at the Royal College of Psychiatrists in Scotland and chair of SHAAP, said: 'Young people were never a target for minimum pricing, this is because we knew that young people's drinking habits have been in decline for a number of years. Our concerns were more about rising rates of harm in middle age and older adults.'

'For young drinkers over the age of 18, they tend to do their drinking in pubs rather than middle-aged people who tend to drink at home and so were already paying higher prices for their alcohol. For those under 18 such as those interviewed for this study, surveys showed that their most common source for alcohol was supply from adults of legal purchase age, including family members, rather than buying directly themselves with their own money.'

'This study included young people involved in offending and leaving care and for these groups their use of alcohol is more likely to be part of a complex range of issues for which they require help and support.'

'We're now starting to get data through, which is showing encouraging changes among heavier drinking adults, which was the specific group we were hoping would benefit from this legislation.'

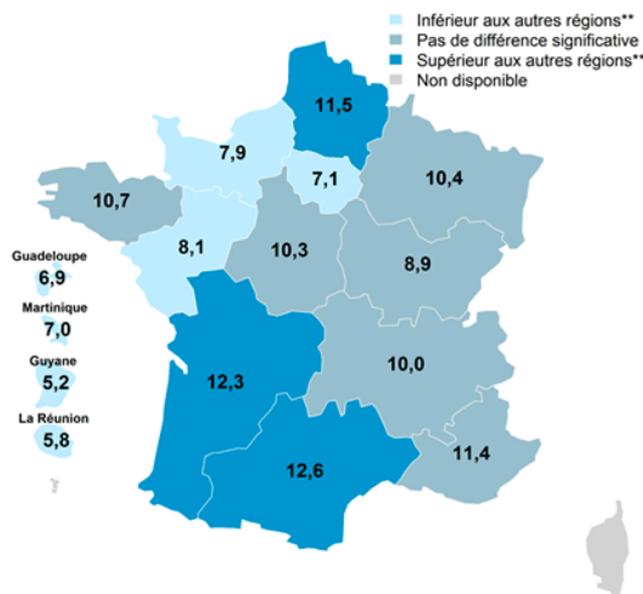
You can watch a video of Ian Clark and NHS Health Scotland Public Health Intelligence Adviser Jane Ford [explaining the key findings of the study on Twitter](#). 

ALCOHOL SNAPSHOT

Mapping alcohol consumption patterns in France

France is well known for its drinking culture, as evidenced by the ongoing row over Dry January. Yet a new graphic from Santé Publique France (the French public health agency), shows that patterns of drinking vary substantially across different parts of the country.

Prévalences régionales standardisées* de la consommation quotidienne d'alcool chez les adultes de 18 à 75 ans en France métropolitaine en 2017 et dans les départements et régions d'outre-mer en 2014



Standardised prevalence of 18–75-year-olds drinking alcohol every day (Rate per 100 people)

The chart above shows the proportion of adults (18–75-year-olds) that drink alcohol on a daily basis (standardising for differences in age and sex) in each region of the country. The data for mainland France comes from the 2017 Public Health Survey France, and the data for overseas territories comes from the Health Survey DOM for 2014. Regions are shaded light blue if their rate of drinking is significantly lower than the rest of the country, and dark blue if the rate is significantly higher.

The chart shows that drinking is lowest in France’s overseas regions – Guadeloupe, French Guyana, Martinique and Reunion – where the prevalence of daily drinking ranges from 5.8% to 7.0%. Of the mainland regions, drinking is by far lowest in Ile-de-France, the region surrounding Paris, where 7.1% drink every day. As with London and the UK, this may reflect demographic and lifestyle differences between the capital and the rest of the country. Normandy and Pays de la Loire in the North West also have significantly lower rates of daily drinking.

By contrast, the highest proportion of people drinking every day are found in the South-West of the country – Nouvelle-Aquitaine (12.3%) and Occitanie (12.6%), traditional wine growing regions that cover the area around Bordeaux. However, these regions have also seen the greatest decrease in daily alcohol consumption since 2000. Hauts-de-France, in the North-East, is the other region that has significantly higher rates of everyday drinking.

You can read the full analysis [here](#).

An Institute of Alcohol Studies publication



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