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“Enabling our isolation”

Alcohol Remote Selling Services: Perspectives of people on a recovery journey

Dr Eric Carlin

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Foreword

This report asks a question that is only now coming into view for policymakers: what is the impact of alcohol delivery services on people who are trying to recover from alcohol dependence?

Alcohol remote selling, whether online or by telephone, with associated delivery systems, has been identified by the World Health Organization as an emerging challenge for alcohol availability. In the UK, supermarkets, online grocers, food delivery platforms, and taxi apps now offer alcohol for rapid delivery at almost any hour. Research on how these services affect the people at greatest risk of harm is limited, and in England it is close to non-existent.

This study begins to address that gap. Between May and November 2026, Dr Eric Carlin undertook a rapid review of the literature and, working with the charity WithYou, held five focus groups with 25 people in recovery from alcohol dependence in the North East of England. Participants described being able to order spirits within minutes while too unwell to leave the house, and receiving deliveries while severely intoxicated. One told us:

> **"It destroyed me. Being able to get it, these services destroyed me, and that is God's own truth… I wouldn't have been able to drink as much if it wasn't so easy… I could be mortgage free in 8 years and now I'm selling my house. It's too easy. You wake up at two in the morning and, 'I want a drink', and then you can get access to it, within 15 minutes, half an hour."**

Participants consistently described these services as reinforcing the isolation and shame that recovery depends on overcoming. In the words of one group, they are "enabling our isolation".

The findings also bear on commercial practice. Participants reported alcohol promotions in food delivery, taxi and shopping apps, and on social media, often while looking for unrelated products. The companies they named include Tesco, Sainsbury's, Amazon, Uber, Just Eat, Facebook and TikTok: some of the UK's largest supermarkets and global technology platforms. Participants perceived this marketing as personalised and algorithm-driven, and as hardest to resist when they were most vulnerable. They also described weaker checks than those in a pub or shop.

Regulation has not yet caught up with these developments. The Licensing Act 2003 makes it an offence to sell alcohol to a person who is intoxicated, but the duty rests with licensed premises and requires that the sale be "knowingly" conducted. Delivery drivers have no legal responsibility to refuse an intoxicated customer, and, as Alcohol Change UK has noted, "it seems there is no offence of delivering alcohol to a child." These gaps are not yet widely recognised.

Participants were clear about what they wanted. Most favoured a total ban, or, short of this, limits on delivery speed, quantity and hours of delivery, and the option to opt out of these services. Many of these measures are consistent with WHO guidance and with proposals already made in Australia. The Government has a timely opportunity to act on this evidence and to reduce the number of people who experience alcohol dependence in isolation.

Dr Katherine Severi, Chief Executive, Institute of Alcohol Studies

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Thanks also to Dr Rachel O'Donnell and Crispin Acton for undertaking an expert external review of a late draft. Their insights have been invaluable in clarifying and refining the report's narrative and conclusions. I also wish to thank Jem Roberts of the Institute of Alcohol Studies for his invaluable editing of the final draft of the report.

More than anything, I wish to thank the focus group participants. I heard very clearly from you that your experience has been that alcohol remote selling services damage your social connections, but that recovery is possible and, through that, these connections are being rebuilt. You showed great generosity in describing your lived experiences for me. I hope that policymakers will listen and learn. It was a privilege to spend time with you, and I wish you all well.

Dr Eric Carlin, University of Edinburgh

Methods

This study to investigate the perspectives of people trying to recover from alcohol problems on alcohol remote selling services (e.g. selling online or by telephone) and associated delivery systems for alcohol (WHO, 2019) was approved by WithYou's research panel in February 2026. The study was conducted between May and November 2026.

A rapid review of academic and 'grey' literature was undertaken to understand key Public Health challenges in relation to alcohol remote selling services[1]. The search was carried out through Google Scholar and University of Edinburgh's DiscoverEd database. A thematic analysis was undertaken, drawing together key themes and findings from papers reviewed. However, this was not a systematic review.

Fieldwork consisted of five focus groups that were conducted by Dr Eric Carlin over the course of two days in June 2026 in three locations in the North-East of England, as laid out in Table one below:

Table one: Research participants

Date	Location	Number of participants	Gender (self-defined)
19th June 2026	Grangetown	3	2 male, 1 female
19th June 2026	Redcar	6	4 male, 2 female
19th June 2026	Redcar	2	2 female
26th June 2026	Darlington	9	4 male, 5 female
26th June 2026	Darlington	5	5 male
Total		**25**	**15 male, 10 female**

The focus groups were enabled and held in premises provided by WithYou. In some, staff members observed and/or supported, but their inputs are not included in this report's summary of discussions.

The focus group discussions were transcribed by the researcher. Direct quotes are attributed in this report to the groups, rather than to specific individuals.

Transcripts were reviewed and coded thematically by the researcher. Themes were identified inductively through repeated reading of the transcripts and comparison across focus groups.

Summaries of key themes that emerged in the individual focus groups were shared with the participants, who also received a gift voucher as acknowledgement of their participation.

The Conclusions in this report draw on both the testimonies of the focus group participants and the literature reviewed.

1. It is noted that there is a more extensive literature related to alcohol online advertising but, although related, that has not been the main focus of this review.

Context

Key themes in literature reviewed

Relevant themes identified in the literature reviewed are summarised below.

Alcohol Remote Selling Services

Alcohol is a leading risk factor for chronic non-communicable diseases. In promoting its SAFER technical package, the World Health Organization (WHO) emphasised that ready availability of alcohol makes increased population consumption and related harms more likely. In 2019, SAFER highlighted the following:

> "An emerging challenge regarding alcohol availability is remote selling (e.g. selling online or by telephone) and associated delivery systems for alcohol" (World Health Organization, 2019, p.8)

A range of research suggests that the ease of access enabled by alcohol remote selling services makes harmful consumption patterns and behaviours more likely (Courtney et al., 2025; Duthie et al., 2023; Pettigrew et al., 2024). With many alcohol remote selling services, consumers experience one single point of contact, payment, and delivery, facilitated by online apps and GPS technologies, which coordinate between consumers, multiple outlets, and third-party delivery services (Coomber et al., 2023; Duthie et al., 2023; World Health Organization, 2021).

Proliferation of Alcohol Remote Selling services

Alcohol remote selling services are increasingly available in many countries, as well as in the UK (Bujalski & Rowicka, 2024; Davies et al., 2024; Duthie et al., 2023; Lemp, Kilian & Probst, 2023; Miles et al., 2022; Reile et al., 2025). Temporary and permanent changes to online retailer requirements during the COVID pandemic led to changes in both business practices and consumer behaviours, with the former extending the availability offer and the latter picking that up (Bujalski et al, 2024; Colbert et al., 2023a; Duthie et al., 2023; Huckle et al., 2021; Lemp et al., 2023; Sharpe et al., 2024; Trangenstein et al., 2023a, 2023b).

Harms associated with novel business practices

Risks of harm related to these services are associated with specific business practices (in the UK and elsewhere), including:

- Rapid delivery times (Alcohol Change UK, 2021, 2024; Duthie et al., 2023; Foundation for Alcohol Research and Education, 2026)
- Inadequate age verification systems that enable young people to access alcohol easily, with consequent risks of harms to their health and development (Alcohol Change UK, 2024, 2021; Barry et al., 2015; Centre for Alcohol Policy Research & Foundation for Alcohol Research and Education, 2019; Colbert et al., 2023; Duthie et al., 2023; Foundation for Alcohol Research and Education, 2026; Fletcher et al., 2000; Noel & Rosenthal, 2023; Reile et al., 2025; Sharpe et al., 2024; World Health Organization, 2021; Williams & Ribisl, 2012)
- Inadequate ability to prevent deliveries to people who are intoxicated (Alcohol Change UK, 2021;

Centre for Alcohol Policy Research & Foundation for Alcohol Research and Education, 2019; Duthie et al., 2023; Foundation for Alcohol Research and Education, 2026)
- Services being geographically and temporally more accessible than more traditional alcohol retailing (Duthie et al., 2023)
- Online alcohol advertising, via algorithmic targeting and personalisation of messages, with evidence of targeting of 'high risk' populations, as well as linkages to external events, such as sporting occasions (Coomber et al., 2023, 2026; Rados Krnel et al., 2023) and specific linkages to alcohol remote selling service provision (Coomber et al., 2023, 2026)
- Promotions, including discounting and use of buy-now pay-later schemes (Alcohol Change UK, 2024; Duthie et al., 2023), with some evidence that 'high risk' drinkers receive advertising for alcohol home delivery more frequently than 'low-risk' drinkers (Coomber et al., 2022, 2023; Davies et al., 2024) 2022).
- Lack of restrictions on amount of alcohol that can be delivered (Miles et al., 2022).

The Alcohol Remote Selling ecosystem

The ecosystem of alcohol remote selling commercial actors in the UK and elsewhere is becoming increasingly complex, including supermarkets, online-only grocery stores, on-demand retailers, online food delivery services, convenience stores and specialist retailers, with the relationships and boundaries between each often blurred (Alcohol Change UK, 2021; Duthie et al., 2023). Research in London suggests that platforms such as Deliveroo both increase convenience of existing alcohol retailers but also facilitate the proliferation of new, online-only outlets, thereby increasing overall alcohol availability (Sharpe et al., 2024).

Risks of harms for vulnerable populations

Harms, particularly those related to underage and higher risk patterns of alcohol consumption, are likely to be disproportionately experienced by already disadvantaged populations, including 'heavy' drinkers, with the impact of worsening health inequalities (Coomber et al., 2022, 2023; D'Amico et al., 2017; Duthie et al., 2023; Foundation for Alcohol Research and Education, 2026; Pettigrew et al., 2024; VicHealth, 2020).

Research suggests that use of alcohol remote selling services is associated with substantially increased risky alcohol consumption behaviours, including more frequent consumption and more risky drinking behaviours (Coomber et al., 2022; Courtney et al., 2025). There is UK evidence that many people use these services when already intoxicated, and that regular users drink more than the average drinker in the general population (Alcohol Change UK, 2024). Several Australian studies have suggested that home delivery of alcohol may be particularly harmful for people who are vulnerable to alcohol use problems, with 'high risk drinkers' being more likely to make more frequent online purchases, utilise same-day delivery, receive deliveries while intoxicated, and order alcohol for delivery to continue a current drinking session (Coomber et al., 2022, 2023). One Australian study argued that, as well as facilitating heavy drinking occasions and acute harms associated with these, use of rapid delivery services was associated with reinforcing people's isolation:

> "The most commonly selected reason for ordering via a specialised fast delivery service was convenience and not wanting to leave the house" (Centre for Alcohol Policy Research & Foundation for Alcohol Research and Education, 2019).

Current regulation and possible policy options

The Licensing Act (2003) lays out the provisions under which alcohol can be sold by retail in England and Wales (UK Government, 2003). Recent Government guidance in relation to the Act discusses "Mobile, remote, internet and other delivery sales", specifying restrictions in relation to the sale of alcohol "from a vehicle or moveable structure at a series of different locations (house to house)", as well as emphasising that:

> "Section 190 of the 2003 Act provides that the sale of alcohol is to be treated as taking place where the alcohol is appropriated to the contract. It will be the premises at this location which need to be licensed; for example, a call centre receiving orders for alcohol would not need a licence but the warehouse where the alcohol is stored and specifically selected for, and despatched to, the purchaser would need to be licensed" (UK Government, 2026).

It also advises that:

> "Persons who run premises providing 'alcohol delivery services' should notify the relevant licensing authority that they are operating such a service in their operating schedule" (UK Government, 2026).

However, for "premises with an existing premises licence, which choose to operate such a service in addition to their existing licensable activities", it is left to them to consider whether they wish to contact their licensing authority for its view on whether this form of alcohol sale is already permitted or whether they should apply to vary the licence.

Literature reviewed suggests that the current licensing regulations in England and Wales are, in several ways, inadequate to respond to challenges presented by alcohol remote selling services. Alcohol Change have pointed out that although protecting children from harm is set out as one of the four overall objectives of the Act, "it seems there is no offence of delivering alcohol to a child" (Alcohol Change UK, 2021, p.7). A 2024 study in London also noted that delivery drivers often have no legal responsibility for age verification (Sharpe et al., 2024).

Alcohol Change have also noted that although the Licensing Act 2003:

> "states it is an offence for a licensee to sell, or attempt to sell, alcohol to a person who is drunk, or to allow alcohol to be sold to such a person…determining whether someone ordering alcohol online is intoxicated is extremely difficult, perhaps impossible" (Alcohol Change UK, 2021, p.10).

It is also the case that the Act specifies that the offence is to "knowingly" serve alcohol to someone who is drunk (UK Government, 2003), which could be difficult to prove in licensed premises, let alone when dealing with remote selling contexts. In any case, the Act only applies to licensed premises and not to remote selling, where delivery staff, for example, would have no legal responsibility in relation to sales to a drunk person (UK Government, 2003).

In the UK and elsewhere, many researchers argue that new policies to protect public health interests, notably vulnerable populations, are required (Alcohol Change UK, 2021, 2024; Centre for Alcohol Policy Research & Foundation for Alcohol Research and Education, 2019; Coomber et al., 2023; Courtney et al., 2025; Duthie et al., 2023; Huckle et al., 2021; Sharpe et al., 2024).

In 2021, Alcohol Change called for policy actions to enable delivery drivers to check and refuse to hand over alcohol to anyone underage or showing visible signs of intoxication, supported by police

and trading standards teams' test purchase operations (Alcohol Change UK, 2021). However, it has been suggested that this approach to policy does not go far enough (Coomber et al., 2022, 2023):

> "rather than relying on individual delivery drivers to apply responsible service of alcohol appropriately, jurisdiction level policy, such as minimum delivery times (e.g., 2–3 h between order and delivery, or next day delivery only), should be implemented to reduce the opportunity for consumers to use home delivery to continue a drinking session and reduce the risk of intoxicated individuals being delivered alcohol" (Coomber et al., 2023, p.413).

An Australian study suggests the policy option of offering customers the ability to self-exclude from alcohol delivery services, including time-limited self-exclusion or an option to self-exclude from ordering more than one delivery per day (Colbert et al., 2023). In Australia, the Foundation for Alcohol Research and Education ("FARE"), has been arguing for "evidence-based policy priorities" for several years (for example, Foundation for Alcohol Research and Education, 2023). On its website, FARE currently argues for what it terms "common sense" measures:

> - A two-hour safety pause between order and delivery, for alcohol-only orders, to prevent the rapid delivery of alcohol into homes;
> - Keep deliveries to between 10am and 10pm, to reduce the risks of alcohol-related family violence and suicide, which increase later at night in the home;
> - Effective digital age verification for online sales of alcohol to ensure alcohol isn't sold to children;
> - ID checks on delivery of alcohol to ensure alcohol isn't supplied to children or intoxicated people;
> - Address predatory, data-driven push marketing to protect people's health and privacy;
> - Support delivery staff with delivery-specific training, not penalising them for non-delivery, and making delivery companies liable for non-compliance (Foundation for Alcohol Research and Education, 2026).

The research participants and their accounts

Key themes that came through the focus groups are discussed below, including with direct personal testimonies. Dominant themes include that:

1. Experiences of alcohol harms, notably a loss of connection with the rest of society, have been really severe for these people, leading many to consider that they have no option other than to abstain if they are to recover.
2. Recovery is a process in which they believe, with the rebuilding of social connections being a vital component in moving forward.
3. The promotion of alcohol and the availability of alcohol remote selling services interfere with personal efforts to recover, including reinforcing people's social isolation and sense of shame.
4. People feel that they are specifically targeted by algorithm-driven services that offer alcohol to be delivered rapidly to them at any time day or night, with no checks in relation to the dangers that this might present.
5. The harms related to the promotion and availability of alcohol remote selling services are experienced as more severe when people are at their most vulnerable.
6. Current regulatory controls, such as age verification schemes, are inconsistently applied, failing to offer adequate protection for minors.
7. Policymakers urgently need to prioritise a range of actions to restrict alcohol remote selling services to save lives and to support recovery.

Experiences of alcohol-related harm and recovery

All of the participants in the groups described having had serious alcohol problems over significant periods of time, with most describing themselves as 'addicted'. For most, their sense of 'addiction' has led them to conclude that their only option in relation to alcohol is total abstinence. Many shared the number of days that they had been abstinent as a sign of progress on their personal recovery journey.

"I'm in recovery just over 9 months – from all substances, including alcohol, so recovery means total abstinence from alcohol and all substances.

"You can't have one drink, because it leads to another, and another. Unless you get that in your head, if you want to be completely sober, unless you get that in your head, it doesn't work." FG2

A small minority of people suggested that they might be able to reduce harms while continuing to consume in controlled/managed contexts.

"During the week I control my drinking, so it'll be two or three when I'm having a drink, but previously it'd be like a bottle of vodka." FG1

For all, the consumption of alcohol was connected with patterns of behaviour that harmed their self-esteem, often destroying relationships with friends and loved ones and impacting on their social

functioning. Many people described having attempted to recover many times over many years, while stressing the continual difficulties in doing so, and the non-linear nature of any progress. Some described themselves as being somewhere near the start of a recovery journey, others were further along. All emphasised their personal vulnerability to having their lives and those of their loved ones ruined as a result of their alcohol consumption, should they not be able to remain abstinent or (if considered possible by a minority) to control their alcohol use. A constantly recurring theme was a fear of a return to the social isolation, loneliness and shame that people felt when they were in the depths of their 'addiction'.

"The reality of me drinking is something solo, isolating by myself, being violently sick, shaking, not washing, no hygiene, housing completed, and the doors locked, the curtains closed, pushing everybody away from me…it was a case of me not being able to deal with life." FG2

Recovery was repeatedly described as a journey which enabled the regaining of self-confidence and the rebuilding of social networks. However, none of this is easy; while people stressed the need for personal responsibility to make change, they also described the need for support from peers and others and for environments that enable the ability to function and thrive in contexts which do not include alcohol.

"That's all I can do, majority of the time, just live for today and keep connected to sober people. Keep away from people who drink and keep away from the first drink, keep away from establishments…in order to protect myself from going back to those gates of hell, this is what I need today, one day at a time." FG2

"When you're talking about recovery, it's not just about the drugs, nor the alcohol. It's actually about something more positive about your social connections and linking up with people, being with people and them using you and your use of them…even if you don't get it the first time, you might be a bit more encouraged to try the second time, because you've got other people there who share your priorities, they will all support everybody. There's no hierarchy, and so you're more likely to come back and try again and one day you will get it." FG4

Alcohol advertising, and specifically promotion of Alcohol Remote Selling services

All of the groups complained about constant alcohol advertising both on television and in online contexts, mainly on their smartphones.

"If you're on Uber or any takeaway, it comes up. Like a supermarket. Open the app and it says alcohol on the top. With a "Buy one, get one free", or stuff like that." FG2

"Facebook. TikTok. Yeah, Facebook. Alcohol's always coming up on Facebook, the adverts for it, and what's on offer, on my feed. On TikTok, it just comes up, if you want alcohol, and it's local, they advertise all the time. Oh, my God." FG3

"Vodka. Vodka. Vodka. Vodka would always be in there, if you wanted that." FG2

People are conscious of alcohol advertising and promotion of alcohol remote selling services being linked to special times such as summer, Halloween, Christmas or payday, or events, such as the World Cup or Wimbledon.

"Summer's coming up. Barbeque weather. Drink. Book a slot. There you go, book a slot. Father's Day, drink. Bottles of Jack Daniels. There you go, Clubcard, drink." FG1

"At Christmas or Halloween, there's always alcohol and they promote it on a payday." FG1

"England playing, the World Cup. And then at Wimbledon. Stella, 'cause the summer is coming, the warm weather and the World Cup. It's all associated with drink." FG3

Research participants described changes in the alcohol delivery ecosystem from a local provider called 'Moonshine' to supermarket chains, delivery and taxi services. They named Tesco and Sainsbury's, JustEat and Uber. As well as being bombarded with alcohol advertising, constant promotion of alcohol remote selling services has become a social norm for the participants in these focus groups.

"Years ago, if you wanted to have a drink, it was only the Moonshine company, and it would be on a night out or you've been to a nightclub. Now, it's Uber Eats, Tesco. I live in my bedroom, I don't like leaving the house, it's hard for me. I can show you how easy it is (shows mobile phone), and everything here that I've got, three bottles of wine, two bottles of wine, and you don't even have to leave." FG1

"You can get whatever you want. When I first picked up, I'd order so many bottles of wine and I'd get some toilet roll or something like that. But then at the end, I'm ordering three litres of vodka. And they'll come to the door." FG3

Supermarkets and other services, including Amazon, were reported as promoting alcohol remote selling services when people are accessing them for something else.

"I found it when it's advertising for delivery from Sainsbury's...I've got some bread and eggs and it'll show you cans and a bottle. It worked like that. And it doesn't show you food. The main drive of it is the alcohol." FG5

"You know, I've had drinks from Morrisons through Amazon, 'cause they'll do it the same day as well. You just go to Amazon Prime, and there you are, if I go on Amazon now, it'll have booze advertised, it's all about, "Press this button and then just order it straight away. Buy now! Buy now!"" FG5

People believe that they are targeted by algorithm-driven online marketing, with their personal data being shared across different platforms for the purpose of promoting alcohol and alcohol remote selling services.

"For me, it's probably targeted us on social media…just for us, man, whatever we want, really, especially if you bought it previously, it comes up, "Oh, you want it again?" You just click on it – and they know what I want." FG4

"It is a vast database that they're accumulating about your shopping habits, and each individual's shopping habits, so they can target you, that's essentially what they do." FG5

There was a general lack of awareness of advertising of zero alcohol products, as well as scepticism about the usefulness of 'responsible drinking' messages on alcohol advertisements and products.

"The great things, they make it out are all with a drink. Enjoy yourself. So then they'll just put out the advert and "Be Drinkaware" at the end. There's always that message, which I think anyway is funded by the alcohol industry…That's a bit like, "What the fuck?" Excuse me for swearing, but that is, honestly, like, "What the fuck?" That's not going to stop one of us." FG2

Pricing and promotions

Alcohol affordability is generally recognised as being a main driver of alcohol harms (World Health Organization, 2019). Historically, the 'Moonshine' services had been expensive, perceived as appealing to people who were partying, sometimes poly-drug users, who wanted to continue through the night.

"It wasn't only alcohol. I was a kid. I used to get it delivered when I was going out to a nightclub …I reckon it was about early 2000s, so 20 years ago or something. So you'd go out on a night out, wouldn't you? And then you'd go back to a party when you go, "Oh, let's get a 'Moonshine'". And they'd pull up in a car, wouldn't they? You'd just get a phone number, and you'd ring them up, and you'd say, "I want to get about 30 cans". Thirty cans was twenty quid in the shop. They'd sometimes double the price, wouldn't they? But you'd all chip in, so that was all right." FG1

Nowadays, some alcohol remote selling services are perceived as expensive, but discounts and multi-buy deals are also commonly described, again with a sense of algorithmic targeting.

"On Uber deliveries on Tuesday I got asked, I've got like a special offer, like, six bottles, I don't know how many times this week I've seen six bottles of wine for the price of five. In early recovery, it was a huge trigger." FG4

Some discounting deals were associated with special events, such as the World Cup.

"Sometimes they do offers, don't they, where you get a pizza, a side and a bottle of wine. We've got it at the minute for the football, haven't we?" FG5

One group described a strong awareness of price as influencing the specific product to buy:

"For me, it was price, what I could afford for the highest amount of ABV."

Group makes noises to agree.

"Yeah, yeah. So there was alcohol for the lowest price. Basically, I wasn't looking for flavour." FG1

One person described how discounted advertising deals made them switch to products with higher alcohol content:

I'm a wine drinker, mate, but when you just see it there, the vodka, I'm thinking, "Oh, that looks, that's cheaper there than buying the 2 bottles of wine so that, like, oh, so you get the vodka, don't you?" FG1

Speed and times of deliveries

For the research participants who use/have used alcohol remote selling services, getting the alcohol quickly and at any time of the day or night, as well as discreetly, was the most compelling attraction, most notably when they were at their most ill.

"They promote how quickly they deliver. It's all over the website, how long it's gonna take. And you can track it and everything...estimated delivery. It's 5 minutes, 10 minutes, 15 minutes... I always used Uber because of that reason, 'cause sometimes other places would be up to an hour and then you go on Uber and they have 16 to 18 minutes for delivery." FG5

"If I've had a skinful during the day, which is never enough, I could walk into a pub and try and order a pint of beer, or lager, or whatever, and the landlord would say, "You've had too much to drink". I can walk into a supermarket and try to do the same, and the person behind the till would say, "We think you've had too much to drink, we're not serving you alcohol. But on the app, I can order there 24 hours a day and I'm never challenged about my mental fitness, how much I've drunk and that sort of thing." FG2

One person described taking an Uber taxi which would arrange to stop on the way to pick up pre-ordered alcohol:

"Uber, I know when I've booked a taxi previously, you've got five minutes to order from this other place which is on the way for the driver to pick up, and usually it's predominantly alcohol shopping on there." FG4

Age verification

Focus group participants suggested inconsistency in meaningful attempts within alcohol remote selling services to verify the ages of people who have alcohol delivered.

"They went through a stage a couple of months ago where all of a sudden, I don't know what happened. I don't know if it was through the government or something, where they wanted to see ID. And the delivery drivers were fuming and customers were fuming. Because if you didn't have the ID, it was like, "Oh, hey, look at me. I'm older than 18". And then after about a couple of months of doing that, they went back to the old ways when you ordered the alcohol, you put your date of birth in on the website, okay? And when they come to the door with a drink, they'll have a phone with an app thing and they'll clarify it by putting in your date of birth what you've put in." FG1

"I used to be getting them to leave alcohol at 7 o'clock in the morning and they never once asked for a date of birth, and no one's asked to see ID. Never." FG4

"My son's 12 and he could order alcohol and the only reason he wouldn't get it is because when he gets to the door, they'd realise that he wasn't old enough…I can imagine for a kid maybe 15, 16 that does look a little bit older, it would be easy to do that…if it's already paid for, a lot of the drivers, they don't even ask for your fucking verification." FG5

Impacts of Alcohol Remote Selling services on health and well-being

The fact that they could have alcohol delivered to their home any time day or night has had serious impacts on these individuals at the times when they were most ill.

"It destroyed me. Being able to get it, these services destroyed me, and that is God's own truth. Sorry, because I get emotional because I wouldn't have been able to drink as much if it wasn't so easy…you want the impact of it? This is the fucking impact. I could be mortgage free in 8 years and now I'm selling my house. It's too easy. You wake up at two in the morning and, "I want a drink", and then you can get access to it, within 15 minutes, half an hour… I'm starting to get a bit like agitated over it now because now I'm getting angry over it. How easy it is." FG1

"I was too sick to leave the house, so I need deliveries and there's no moderation here. I got deliveries from the Sainsbury's app on the 7th, the 9th, the 10th, the 11th. And I've got multiple bottles of spirits. You know, there's no moderation there, either, in terms of what you can buy. Well, there was no sane person ordering that volume. I know the responsibility is my fault, and I did it. But, you know, the marketing, you know, it is so easy to do, you know. I just order again. I order again. I got 3 bottles of vodka coming in 20 minutes." FG5

Alcohol would be delivered when these people were not doing well, including being in extreme states of drunkenness.

"Especially when you're in the madness, you don't want to leave the house. I drink an awful lot of alcohol in quite a short period of time. And so I'm not capable of making it to a shop. But once I start using delivery services, obviously, I keep going for longer. It's also the minimal interaction as well, because I've been in the shop before, and I've stumbled in, and I've been called out by a man behind the till. Only once, but he said, "You've had enough", whereas you're only answering the door, aren't you? And they're driving. And they don't give a fuck if you had enough anyway. No, no, no, I crawled to my front door. Opened it, and been, sort of, kneeling on the floor. And he still handed over the package, the brown bag. But he knows it's got bottles in, 'cause he can hear them clanking. Because I'm just sort of painted to the floor because I can barely talk. I'll get my date of birth out and the code. And that's it, but I'm not capable of standing. They still deliver the alcohol." FG4

"Once I start drinking, I can't stop. And I get to that bad place and then I'll be damned even more 'cause it's a depressant, so then I'll drink again. So it's once I've started, that's when I'll start going to the Uber because I know that I look a mess." FG3

Many people argued that these services have impeded and interfered with the likelihood that they might seek help, as well as with their attempts to recover. Recovery is a social process, and these services are perceived by the participants in this study as facilitating their social exclusion.

"You know, I could drink myself to death very easily if I'm not careful, if I drink again. It's getting worse and worse. I could drink, it can be 30, between 30, 40 bottles of spirits in a week, two weeks. After about the first three days, it's all come by delivery. Because they deliver. It's facilitating your killing yourself." FG5

"When you go from being in recovery, to then drinking again, your head completely goes, and some people develop psychosis and stuff from it. And the only way that you can stay away from them feelings is to keep drinking, and you isolate yourself in your house. How are you going to get to drink apart from deliveries?" FG5

"Oh, it's terrible, because when I've relapsed, the only thing you think about is the drink. Because the drink is the only thing that's numbing all your pain. And it's the only thing that for me, it'll stop me going into a fit. And it'll stop all the withdrawals and everything, 'cause I'm terrible with withdrawals. So it's you know you don't have to walk out of that house, so I know that I'm not gonna fall over. I know that I'm not gonna get robbed. I know that I'm gonna make it. Cause if I tried to walk, I'd fall." FG3

Several people compared the provision of alcohol remote selling services to a drug dealing operation that targets vulnerable adults:

"It's a legal drug and it's an addictive drug that actually harms people…the drug dealers clock off earlier than the alcohol suppliers. I've talked to people in the past and they've said, "Oh I wanted something at 4 o'clock in the morning like looking to use cocaine, and I said, "Oh, well, why didn't you get it?" And they're like, the dealer turns his phone off at half past 12. He wants to get his night sleep." FG1

"It's two o'clock in the morning. I've run out of alcohol, I've still got drugs left. I'm still taking drugs, alcohol to bring me down. I can't go to the shop. And it's there really quickly." FG4

Social isolation and loss of networks were among the greatest harms that people described experiencing, related to their alcohol consumption. They were often ashamed of their drinking and related behaviours. To many, alcohol remote selling services are ideally designed to make social isolation more likely, more prolonged and more damaging.

"Enablement. Enabling our isolation. Damaging. Isolating, definitely." FG4

"At the time I used them, I thought they were the best thing ever, you know, how amazing it is when I can order vodka at 4am! You don't even have to leave the house. I thought it was the best invention ever. But, you know, looking back, it was a really scary place to be, and being able to do that allowed me to continue drinking, whereas I would have had to stop." FG4

"I'm just laying in bed, and I can't get up, and it's raining and I'm too drunk. I don't want to stagger into a shop or anything. I just go on there, someone turns up, go back upstairs in 30 seconds, it's so easy. No other people." FG4

One group discussed that these services increase the risks of harm to others in the drinker's household:

"It probably increases domestic situations as well. If you're drinking late, some people get rowdy, and they're gonna start fighting at 4 o'clock in the morning, if they've got a partner who disagrees with the drinking and things like that. So it affects other people as well." FG4

As well as safety issues for delivery drivers, there can be safety issues for the drunk person who is opening their door to an unknown person in the middle of the night. One man told a story about a woman he knew:

"She was so intoxicated and she was inviting the driver in. She put herself in some very vulnerable situations, and she had drivers coming in. So real safety issues. There are real issues in relation to the safety of both the delivery driver checking, and also the person ordering. You know, they're not trained to be able to handle that sort of situation." FG4

Recommendations from research participants

A total ban on all Alcohol Remote Selling services

Most people in all of the groups expressed the opinion that alcohol advertising should be restricted and that alcohol remote selling services should be banned, to protect vulnerable people, like themselves.

"I'd say ban them all together. Yeah, ban them all together. Because they're just advertising it too much for me anyway. I see it all the time. It's literally just a few press buttons. And then within 15, 20 minutes, you don't have to leave the house." FG1

"You know, I was a vulnerable person at that time I was placing those orders. I didn't know I was one, but I'm looking back. I was so vulnerable. I had access to money in my bank account, money wasn't an issue for me, I could just order whatever I wanted. And it was not good for me." FG4

"The government should put new laws in. Because when you've drunk, drunk, drunk, and you think, "Fuck it, I've had enough and you go and take an overdose". That would be prevented. Every time I've ordered online I've been drunk, not thinking straight." FG3

Several people also emphasised that anything short of a ban, e.g. checks by delivery drivers, would be hard to implement and enforce.

"Why don't they just stop doing it altogether? Like, just get rid of it. Personally, I think it should be banned until they can prove how they're gonna regulate themselves. How are they going to prove that a driver has enough knowledge to recognise that someone's already intoxicated and he's at risk? How much are we going to pay the driver to do that? So if you must be able to demonstrate that when you are selling alcohol, you need to be able to assess whether that person is fit to actually consume alcohol. Then the pressure will go down to the driver, who personally, I think, who will be someone on a minimum wage working for cash in hand or something as a delivery driver." FG2

Some of the groups discussed what they thought might be the impact of a total ban on people who didn't perceive themselves as having an alcohol problem. One person suggested that it might infringe the rights of an "established customer", for whom it is "not necessarily causing a massive impact on that person's life." FG4

A few people suggested that it might support their own personal recovery, but might not be fair on the rest of the population, including people with disabilities:

"I'm all for stopping it completely, but there's probably special cases where there's people with mobility issues who can't go and buy their own alcohol who going in cold turkey could be very dangerous." FG4

One man suggested that it wouldn't be fair on "normal people that aren't addicts." (FG5) Another suggested re "normal" people:

"I don't think they'd be bothered, because obviously they won't be using these services like drinking water, like what we're doing. The people that do drink a lot, they would be the ones that are bothered." FG3

A small number of people did raise concerns about what they perceived might be unintended consequences of a total ban. These included that, if it were introduced without adequate coordination with support services, it might make the possibility of alcohol withdrawal more likely for some individuals. One man suggested that, even in the absence of these services, it would always be possible to get alcohol at any time:

"If I want to drink, I'm gonna get a drink. Just now whether it's available to be delivered or not. So yes, the availability of it, and the ease, ordering it, has exacerbated my problem at times, because it's extended binges when I'm not fit to go to a shop, I can get it brought to me instead. But I think there's always been ways around that. There has always been a friendly taxi driver that people would know that would do a credit for them, whatever." FG5

Some people suggested that a total ban might lead to an increase in drink driving, though they did not emphasise this so strongly that it led them not to support a total ban:

"But could it not encourage people drink driving, for example, if they're already having drink, and then they wanted to order again, and they couldn't get it online, they could go out?" FG4

Actions short of a total ban

While a significant majority across groups suggested a total ban on these services as their preferred policy option, several other policies were suggested.

Time restrictions

Many people described speed of delivery as being one of the most compelling attractions of alcohol remote selling services for them. This is also emphasised in the literature as being an important factor contributing to likelihood of harms.

One group (FG4) agreed that if deliveries were not permitted within six hours of an order being placed, that would reduce use of the service. It was also suggested that if delivery were not permitted in less than two days after an order, no one would use the alcohol remote selling service:

"The longer you put between the orders and the delivery, the less people are wanting it. I wasn't capable of thinking past the next five minutes. You know, if you said, oh, I'll drop you three bottles of vodka in two days, I'd have thought, "Oh, I'll see you later"." FG4

There was almost total consensus that licensing laws should restrict the hours when alcohol can be delivered to households.

"It shouldn't be for delivery when you can't get it in a shop…stick to the rules, what the rules are." FG1

"The delivery window, you could have between 12 and eight." FG1

Although some people said that that would help them, others argued that people like them would find a way round those limitations:

"I'll order however much I'm going to need until 11 o'clock the next day and they start delivering again…we as alcoholics would work around that (time restrictions). If you want it, you want it." FG2

Limiting how much alcohol can be delivered to a household in a specified time period

People argued that the technology must exist to be able to limit the amount of alcohol that could be delivered in a set period of time to specific households:

"The shops must know who's getting it regular? Can't they report thinking that there is wine ordered there every day? There could be some things in place where you think, I know she, she's getting wine, wine again where they could put a stop on it." FG1

"Make them (companies) aware of addiction. If you're going back constantly to the same house, you know, you'll be more alert or have something on your phone, that can refuse…like they can have a bit of empathy or a bit of awareness…there should be a system where it comes up to say like that these people had so many deliveries of alcohol. We could put a limit, right? You can only have so many deliveries a week. Or a quantity. You're only allowed so many units a week." FG2

Short of this, delivery services could highlight with a message that people are ordering a lot of alcohol:

"A comment that someone made really piqued my interest about something to do with the apps about flagging, "Did you know you've ordered this 4 times this week? Do you know where to get help and have the units you're drinking?" It can actually be quite useful for people. It makes them think. When you're socially drinking, you're going up to the bar, and there's a landlord, responsibility in an establishment, and you've got barmaids, you come up, you have, like, 6 or 7 drinks, and they go, "I think you've had enough. And they'll show you a bit of concern." FG1

Enabling people to choose not to be able to access these services

It was suggested that people could opt out of being able to access these services, with several people saying this would personally have helped them.

"When you go on, obviously you've got a history of all your orders, and they will as well. So maybe, could you make a request for them for you not to be able to buy this? For me, I think it would help my recovery. For me personally, I'd, at the moment say, "Just block me. Okay. Block me". FG1

However, for some it was suggested that the nature of addiction meant that they would find ways round this restriction once they started drinking:

"You'd use it until you got drunk and then you'd find a way to bypass it, because that's what you would do. Just, like, you know, there's nothing, you would find a way. You'd get a new phone, you'd get your mate to do it. You'd just find a way." FG5

Improved age verification systems

There was general consensus that age verification systems need to be improved, but there was little sense of how that could practically be done to be effective.

"They should be getting ID, but I can't see where there could be rolling out some kind of system that the delivery drivers are going to be able to efficiently do that. Because they're going to want to get to the door, get it dropped off, get back to whatever base, get another delivery and get it out. So I can't imagine none of them are doing efficiently." FG1

"The driver's just a driver who just wants a job, you know, and there's responsibilities, the retailers' responsibilities, not the drivers'. You can't leave it to the delivery driver. No, he's not responsible. They're just trying to make some money." FG4

One person drew on her own personal experience to suggest that asking delivery drivers to check age could put them in positions of danger:

"I think it's an unsafe situation for a delivery driver to be refusing alcohol because we would attack him. I'd kick off. I know. I've done it before with my date of birth, I went mad and he was like, "I'll come back. I'll come back", and then he ran to his car. I was gonna jump on him." FG2

Awareness raising

Several people suggested that the government should support a public awareness-raising campaign, as well as targeted information for companies that are involved in alcohol remote selling services. The latter should include information not only about alcohol harms and addiction but also about support services for people with alcohol problems, encouraging them to make that information available to their staff, associates and customers.

"I think it should be, even if you haven't got a problem, every alcohol delivery has a leaflet in the bag - not about "drinking responsibly". Something with the services because it might not be a problem that day, but further down the line, they might just look in the drawer, and there's that leaflet, it might help." FG4



Conclusions

The participants in this study described in detail serious harms to their health and well-being experience that they attribute to the advertising and availability of alcohol remote selling services. They have used these to have alcohol delivered quickly and at all times of the day and night. They provided evidence that these services enable their social isolation, reinforcing the most damaging impacts on their health and well-being as a result of their dependence on alcohol. They also emphasised that the promotion and availability of alcohol remote selling services interfere with and impede their efforts to recover. Many described the impacts as life-threatening, leading them to argue that, for the sake of Public Health and the protection of vulnerable populations (like themselves), a total ban on all alcohol remote selling services should remain as a possible future policy option.

The World Health Organization (WHO) has highlighted policies to restrict alcohol availability as an essential strategy for reducing alcohol-related harms, including emphasising the need to ensure that, in contexts where alcohol is sold remotely:

> "It is important to ensure that regulations regarding minimum age, selling to intoxicated persons and days and hours of sales are safeguarded in this regard" (World Health Organization, 2019).

The challenge remains about how to achieve that ambition in the complex, dynamic contexts where alcohol is sold remotely, including in England and Wales where existing licensing legislation may be inadequate to respond to existing challenges and to pre-empt problems in the future.

It was not possible through this study to gather reliable data in relation to the proliferation of alcohol remote selling services in England and Wales, how they operate, who uses them, how and at what times. Public health policies, including understanding what regulations are required and within which legal framework, require better data to understand more about the developing ecosystem, policy options that ought to be explored and how to overcome opposition from commercial operators, drawing on national and international evidence, as well as lived experience accounts.

Notwithstanding the data gaps, drawing on evidence from this review, including the personal accounts and the literature included, policy makers are urgently asked to consider the need for policy actions, based on the best available evidence, to:

1. restrict rapid deliveries
2. improve age verification systems, including providing clarity on who is responsible in ways that do not create unsafe situations
3. ban promotion of rapid deliveries (with a clear definition and rationale for what is considered 'rapid')
4. restrict how much alcohol can be delivered to a household in a specified time period
5. prevent targeted marketing of these alcohol remote selling services
6. enable individuals to exclude themselves from being able to access alcohol remote selling services
7. ban deliveries outside licensing hours that are enforced in other retail contexts
8. mandate the provision of public health messaging about alcohol harms and signpost to alcohol support services in all packages of alcohol that are remotely delivered.

The issues covered in this review are complex and dynamic, and also human. Effective policy solutions will require drawing on a wider range of evidence than is presented here. It is vitally important that actions to develop and implement future policies to prevent and reduce harms caused by alcohol remote selling services are co-produced with people with personal experience of harms due to their own (and others') alcohol consumption, including people engaged in recovery journeys.

Bibliography

Alcohol Change UK (2021) Delivering a problem? Online sales and deliveries of alcohol. https://alcoholchange.org.uk/publication/delivering-a-problem-online-sales-and-deliveries-of-alcohol (accessed, 28th September 2026).

Alcohol Change UK (2024) Research summary: Handle with care: The need for responsible alcohol delivery May 2024. https://alcoholchange.org.uk/blog/handle-with-care-the-need-for-responsible-alcohol-delivery (accessed, 28th September 2026).

Barry, A.E., Johnson, E., Rabre, A., Darville, G., Donovan, K.M. & Efunbumi, O. (2015) Underage access to online alcohol marketing content: a YouTube case study. Alcohol Alcohol. 50 (1), 89–94. https://doi.org/10.1093/alcalc/agu078 (accessed, 28th September 2026).

Best, D. & Ivers, J. (2022) Inkspots and ice cream cones: a model of recovery contagion and growth. Addiction Research & Theory. 30 (3). https://www.tandfonline.com/doi/full/10.1080/16066359.2021.1986699 (accessed, 28th September 2026).

Bujalski, M. & Rowicka, M. (2024) Alcohol purchases through online stores and mobile applications in the late phase of the COVID-19 pandemic in Poland. Nordisk Alkohol Nark. 41 (5). https://doi.org/10.1177/14550725241270204 (accessed, 28th September 2026).

Centre for Alcohol Policy Research & Foundation for Alcohol Research and Education (2019) Alcohol Home Delivery Services: An investigation of use and risk. Alcohol-home-delivery-services.pdf (accessed, 28th September 2026).

Colbert, S., Thornton, L. & Richmond, R. (2020) Content analysis of websites selling alcohol online in Australia. 39 (2), 162–169. https://doi.org/10.1111/dar.13025 (accessed, 28th September 2026).

Colbert, S., Thornton, L., Wilkinson, C., Feng, X. & Richmond, R. (2024) 'The convenience is a double-edged sword': Qualitative interviews with people who use online alcohol delivery services. Drug and Alcohol Review. 43 (2), 425–433. https://doi.org/10.1111/dar.13788 (accessed, 28th September 2026).

Colbert, S., Wilkinson, C., Thornton, L., Feng, X., Campain, A. & Richmond, R. (2023) Cross-sectional survey of a convenience sample of Australians who use alcohol home delivery services. Drug and Alcohol Review. 42 (5), 986–995. https://doi.org/10.1111/dar.13627 (accessed, 28th September 2026).

Colbert, Wilkinson, C., Feng, X., Thornton, L. & Richmond, R. (2022) You've got mail: Drinks are on sale! A study to assess volume and content of direct marketing received from online alcohol retailers in Australia. 105. https://doi.org/10.1016/j.drugpo.2022.103705 (accessed, 28th September 2026).

Coomber, K., Baldwin, R., Taylor, N., Callinan, S., Wilkinson, C., Toumbourou, J.W., Chikritzhs, T. & Miller, P.G. (2023) Characteristics of high- and low-risk drinkers who use online alcohol home delivery in Western Australia. Drug and Alcohol Review. 43 (2), 407–415. https://doi.org/10.1111/dar.13783 (accessed, 28th September 2026).

Coomber, K., Baldwin, R., Taylor, N., Callinan, S., Wilkinson, C., Toumbourou, J.W. & Miller, P.G. (2022) Western Australia alcohol home delivery project: Online survey final report. https://cancerwa.asn.au/assets/public/2023/03/Deakin-University_WA-alcohol-home-delivery-project_Online-survey_final-report.pdf (accessed, 28th September 2026).

Coomber, K., Baldwin, R., Wilson, C., McDonald, L., Taylor, N., Callinan, S., Wilkinson, C., Toumbourou, J.W., Chikritzhs, T. & Miller, P.G. (2024) Test Purchasing of Same-Day and Rapid Online Alcohol Home Delivery in Two Australian Jurisdictions. Journal of Studies on Alcohol and Drugs. 85 (6). https://doi.org/10.15288/jsad.23-00223 (accessed, 28th September 2026).

Coomber, K., Button, K., Masiero, E., Martino, F., Gupta, A., Baldwin, R., Miller, P.G., Backholer, K. & Stafford, J. (2026) Online marketing for alcohol home delivery and alcohol purchasing behaviour: A mixed-methods study. International Journal of Drug Policy. 150 (105202). https://doi.org/10.1016/j.drugpo.2026.105202 (accessed, 28th September 2026).

Courtney, J.B., Roudebush, M., Williams, R.S., Cox, M.J. & Ribisi, K.M. (2025) Effects of Expanding Direct-to-Consumer Alcohol Home Delivery Policies: Evidence From 18 States of Increases in Alcohol Use and Consequences. Journal of Studies on Alcohol and Drugs. (86), 330–339. https://doi.org/doi:10.15288/jsad.24-00273 (accessed, 28th September 2026).

Cristello, J.V., Litt, D.M., Sutherland, M.T. & Trucco, E.M. (2024) Subjective norms as a mediator between exposure to online alcohol and marijuana content and offline use among adolescents. Drug and Alcohol Review. 43 (1). https://doi.org/10.1111/dar.13620 (accessed, 28th September 2026).

D'Amico, E.J., Martino, S.C., Collins, R.L., Shadel, W.G., Tolpadi, A., Kovalchik, S. & Becker, K.M. (2017) Factors associated with younger adolescents' exposure to online alcohol advertising. Psychology of Addictive Behavior. 31 (2), 212–219. https://doi.org/10.1037/adb0000224 (accessed, 28th September 2026).

Davies, T., O'Brien, P., Bowden, J., Petticrew, M. & Pettigrew, S. (2024) The prevalence and magnitude of price promotions in online alcohol retail outlets. Drug and Alcohol Review. 43 (7), 1705–1709. https://doi.org/10.1111/dar.13935 (accessed, 28th September 2026).

Duthie, C., Pocock, T., Curl, A., Clark, E., Norriss, D., Bidwell, S., McKerchar, C. & Crossin, R. (2023) Online on-demand delivery services of food and alcohol: A scoping review of public health impacts. SSM- Population Health. (21). https://doi.org/10.1016/j.ssmph.2023.101349 (accessed, 28th September 2026).

Fletcher, L.A., Toorney, T.L., Wagenaar, A.C., Short, B. & Willenbring, M.L. (2000) Alcohol home delivery services: a source of alcohol for underage drinkers. Journal of Studies on Alcohol. 61 (1), 81–84. https://doi.org/10.15288/jsa.2000.61.81 (accessed, 28th September 2026).

Foundation for Alcohol Research and Education (2020) 2020 Annual Alcohol Poll Attitudes and behaviours. https://fare.org.au/wp-content/uploads/ALCPOLL-2020.pdf (accessed, 28th September 2026).

Foundation for Alcohol Research and Education (2026) Online Sale and Delivery of Alcohol. https://fare.org.au/policy/online-sale-and-delivery/ (accessed, 28th September 2026).

Foundation for Alcohol Research and Education (2023) Online sale and delivery of alcohol – A growing risk to our community April 2023. https://fare.org.au/online-sale-and-delivery-of-alcohol-

a-growing-risk-to-our-community/ (accessed, 28th September 2026).

Huckle, T., Parker, K., Romeo, J.S. & Casswell, S. (2021) Online alcohol delivery is associated with heavier drinking during the first New Zealand COVID-19 pandemic restrictions. Drug and Alcohol Review. 40 (5), 826–834. https://doi.org/10.1111/dar.13222 (accessed, 28th September 2026).

Lemp, J.M., KIlian, C. & Probst, C. (2023) Here to stay? Policy changes in alcohol home delivery and 'to-go' sales during and after COVID-19 in the United States. Drug and Alcohol Review. 43 (2), 434–439. https://doi.org/10.1111/dar.13789. (accessed, 28th September 2026).

Malechwanzi, J., Guyo, A. & Mwangangi, C. (2024) Exposure to alcohol promotions on web-based media, sex and college risky drinking. Journal of American College Health. 72 (2), 446–450. 10.1080/07448481.2022.2039158 (accessed, 28th September 2026).

McLellan, Lyons, A., Sciascia, A., Nicholls, R., Maani, N. & Huckle, T. (2026) Hidden Persuasion: Big Alcohol's Tactics on Social Media. Drug and Alcohol Review. 45 (4), 1–4. https://doi.org/10.1111/dar.70157 (accessed, 28th September 2026).

Miles, H., Apeldoorn, B., McKerchar, C., Curl, A. & Crossin, R. (2022) Describing and characterising on-demand delivery of unhealthy commodities in New Zealand. Australian and New Zealand Journal of Public Health. 46, 429–437. https://doi.org/10.1111/1753-6405.13230 (accessed, 28th September 2026).

Noel, J.K. & Rosenthal, S.R. (2023) Impact of alcohol home delivery and other methods of obtaining alcohol in young adults. Alcohol and Alcoholism. 58 (6), 606–611. https://doi.org/10.1093/alcalc/agad035 (accessed, 28th September 2026).

Personal Licence Online Examinations (2026) Selling Alcohol Online: Delivery Licensing Rules Explained. 2026. https://personallicence.co.uk/selling-alcohol-online-delivery-rules/ (accessed, 28th September 2026).

Pettigrew, S., Booth, L., Farrar, V., Brown, J., Godic, B., Vidanaarachchi, R., Karl, C. & Thompson, J. (2024) Australians' perceptions of the potential effects of increased access to alcohol via autonomous delivery services: A multi-method study. Addictive Behaviors. 148 (107872).https://doi.org/10.1016/j.addbeh.2023.107872 (accessed, 28th September 2026).

Rados Krnel, S., Levicnik, G., van Dalen, W., Ferrarese, G. & Tricas-Sauras, S. (2023) Effectiveness of Regulatory Policies on Online/Digital/Internet-Mediated Alcohol Marketing: a Systematic Review. Journal of Epidemiology and Global Health. 2 (13), 115–128. https://doi.org/10.1007/s44197-023-00088-2 (accessed, 28th September 2026).

Reile, R., Kuusik, T., Mall, T., Tarlap, K. & Sammel, A. (2025) Age verification in alcohol online sales and delivery: results from a mystery shopping study in Estonia. Public Health Practice (Oxford). 30 (10:100656. https://doi.org/10.1016/j.puhip.2025.100656 (accessed, 28th September 2026).

Rinaldi, C., D'Aguilar, M. & Egan, M. (2022) Understanding the Online Environment for the Delivery of Food, Alcohol and Tobacco: An Exploratory Analysis of 'Dark Kitchens' and Rapid Grocery Delivery Services. 19 (9). https://doi.org/10.3390/ijerph19095523 (accessed, 28th September 2026).

Scottish Government (2005) Licensing (Scotland) Act 2005. https://www.legislation.gov.uk/

asp/2005/16/section/1/enacted (accessed, 28th September 2026).

Sharpe, C., Bhuptani, S., Jecks, M., Sheron, N., Henn, C. & Burton, R. (2024) Availability of Alcohol on an Online Third-Party Delivery Platform Across London Boroughs, England: Exploratory Cross-Sectional Study. JMIR Formative Research. 8. https://doi.org/10.2196/54587 (accessed, 28th September 2026).

Trangenstein, P.J., Greenfield, T.K., Karriker-Jaffe, K.J. & Kerr, W.C. (2023a) Beverage- and Context-Specific Alcohol Consumption During COVID-19 in the United States: The Role of Alcohol To-Go and Delivery Purchases. Journal of Studies on Alcohol and Drugs. 84 (6), 842–851. https://doi.org/10.15288/jsad.22-00408 (accessed, 28th September 2026).

Trangenstein, P.J., Karriker-Jaffe, K.J., Greenfield, T. & Kerr, W.C. (2023b) Characteristics associated with buying alcohol to-go and for delivery during the first year of the COVID-19 pandemic among a national sample of US adults. Drug and Alcohol Review. 42 (5), 1252–1263. https://doi.org/10.1111/dar.13659 (accessed, 28th September 2026).

UK Government (2003) Licensing Act 2003. https://www.legislation.gov.uk/ukpga/2003/17/contents (accessed, 28th September 2026).

UK Government (2026) Statutory guidance: Revised guidance issued under section 182 of the Licensing Act 2003 (November 2026) - accessible version Updated 3 November 2026. https://www.gov.uk/government/publications/explanatory-memorandum-revised-guidance-issued-under-s-182-of-licensing-act-2003/revised-guidance-issued-under-section-182-of-the-licensing-act-2003-september-2026-accessible-version (accessed, 6th November 2026).

VicHealth (2020) On-demand alcohol delivery services and risky drinking. https://www.vichealth.vic.gov.au/research-impact/research-at-vichealth/research-highlights/on-demand-alcohol-delivery-services-and (accessed, 28th September 2026).

Williams, R.S. & Ribisl, K.M. (2012) Internet alcohol sales to minors. Arch Pediatr Adolesc Med. 166 (9), 115=128. doi:10.1001/archpediatrics.2012.265

World Health Organization (2021) Digital marketing of alcohol: Challenges and policy options for better health in the WHO European Region. https://apps.who.int/iris/bitstream/handle/10665/350186/9789289056434-eng.pdf (accessed, 28th September 2026).

World Health Organization (2019) The SAFER technical package: Five areas of intervention at national and subnational levels. https://iris.who.int/handle/10665/330053 (accessed, 28th September 2026).