

Portman Group response to WHO consultation on draft action plan to implement the Global Strategy to Reduce the Harmful Use of Alcohol – September 2021



Executive Summary

1. The Portman Group welcomes the opportunity to respond to the latest draft of the action plan to strengthen the implementation of the Global Strategy to Reduce the Harmful Use of Alcohol. As the UK alcohol industry voluntary regulator and social responsibility body committed to promoting responsible drinking for over 30 years, we have been working in conjunction with others to reduce harms and have seen significant declines over most metrics in the decades we have operated.
2. We are disappointed that the latest draft continues to frame the industry negatively. It fails to recognise the ongoing work of the industry to promote moderation as well as tackling alcohol harm, and its engagement as a constructive partner. We also recognise that there has not been a substantial change in the draft since the working document and will re-emphasise the case we made in the previous consultation.
3. We are responding from the perspective of the UK market. It is an example of industry best practice and the substantial progress that has been made to tackle the harmful use of alcohol in the country. This has been achieved, in part, through the ongoing success of voluntary cross-industry initiatives, as well as public-private partnerships implementing public health initiatives which should not be downplayed in the current action plan.
4. Whilst there is more work to be done, the progress made so far in tackling alcohol-related harm and ensuring that the moderate majority of consumers drink responsibly should be recognised and used as a foundation for further work. This also reinforces the need for the action plan to focus on reducing harmful alcohol use rather than unhelpfully diluting its focus to emphasise a reduction in overall use and the blunt measure of alcohol consumption per capita. This is especially pertinent given the polarisation in alcohol consumption and harm witnessed under COVID-19. A focus on alcohol consumption overall, with an unrealistic 20% target to be achieved in less than a decade, needlessly focuses capacity and resources on those individuals already drinking at moderate levels and who are most likely to reduce their drinking. By shifting focus away from harmful drinking, it may undermine the commitment of the strategy to a harm reduction approach.
5. In the spirit of focusing on harm, we also welcome and are supportive of the inclusion of taking appropriate action to 'prevent drinking in pregnancy and prevent fetal alcohol spectrum disorders (FASD)' in the action plan, as an important targeted step in order to prevent alcohol harm. We welcome the removal of the previous wording regarding the 'prevention of drinking among women of childbearing age', as this was language that was counterproductive to the vital intention to prevent FASD. This point echoes the need for the strategy to return to a focus on alcohol misuse and harm, rather than a broad attempt to reduce all consumption regardless that the majority of drinkers drink within Government recommended guidelines. When encouraging moderation and responsibility, it is essential that the steps seem reasonable, proportionate and appropriate, otherwise it may result in the counterproductive situation where people potentially ignore public health advice.
6. We believe the WHO should also take note of the success of the self-regulatory and co-regulatory system which exists in the UK, with the Portman Group working alongside the Advertising Standards Authority and Ofcom to ensure that alcohol marketing is covered in the round across all platforms. Portman Group and ASA data shows widespread

industry compliance and support for this system, ensuring that alcohol is only marketed to adults in a responsible manner.

7. The success of self-regulatory and voluntary measures, combined with a variety of initiatives from the UK Government to tackle alcohol-related harm, also underscores that the action plan should recognise the broad suite of policy options and interventions included in the Global Strategy for reducing harmful alcohol use. This has proved more far ranging and successful than the narrower set of restrictive policies under the SAFER initiative.
8. Finally, the success of industry initiatives also demonstrate that the sector has a serious commitment to tackling harm in the UK and across the world and should continue to be seen as an active and willing partner as part of a 'whole-of-society' approach to tackling harmful alcohol use, which should be reflected in the Global Strategy.

1. The Portman Group

9. Founded in 1989, the Portman Group is world leading as the first alcohol industry self-regulator. We are committed to moderation and promoting a sensible relationship with alcohol among those who choose to drink in the UK. We have worked hard to act as a bridge with industry and UK Government to increase awareness and raise standards. This has helped contribute to a downturn in misuse.
10. The Portman Group operates the [Code of Practice on the Naming, Packaging and Promotion of Alcoholic Drinks](#) and the [Code of Practice on Alcohol Sponsorship which applies to the whole sector](#). We are currently celebrating the 25th year anniversary of Code which has helped create an industry that works effectively within the context of a self-regulatory model in a cost-effective, responsive and effective way. The global leading Codes ensure that alcohol is marketed in a socially responsible way, only to those aged 18 and over, and in a way that does not have particular appeal to vulnerable consumers.
11. The industry does not have a say in determining how the Code is considered. Importantly from inception an Independent Complaints Panel made up of lay members has applied the Code and reviews products. This has led to more than 160 irresponsible and inappropriate products either being re-branded or removed from the market, in turn driving industry changes and protecting consumers.
12. The Code is regularly updated to reflect societal changes. The most recent Code update was published in March 2019 following a formal consultation drawing on voices from the UK Department of Health, Public Health England, Alcohol Concern, the Home Office, the Advertising Standards Authority and alcohol trade bodies including the Society of Independent Brewers (SIBA), the Campaign for Real Ale (CAMRA) and the Scotch Whisky Association. This shows that industry self-regulatory initiatives can respond flexibly and quickly to emerging issues and public opinion, compared to statutory regulation, which has significant time associated with the Parliamentary process and is subsequently a static set of regulations which become increasingly ineffective.
13. The Portman Group has more than [130 Code signatories](#) including producers, retailers and membership bodies. The Group is funded by fourteen member companies: Asahi UK Ltd; Aston Manor Cider; Bacardi; Brown-Forman; Budweiser Brewing Group UK&I; Campari; C&C Group; Diageo GB; Heineken UK; Mark Anthony Brands International; Mast-Jägermeister UK; Pernod Ricard UK, SHS Drinks and Thatchers Cider.

2. Positive trends on alcohol-related harm underscore the need to focus on those people facing the highest harm from alcohol misuse

14. We do not seek to minimise the harm that alcohol can cause to some individuals and recognise that excessive alcohol consumption is dangerous and its effects should not be downplayed. People drinking at hazardous levels need professional support to overcome what are often multi-faceted challenges. We therefore believe the most effective way to tackle alcohol harm is to focus on the minority of drinkers whose drinking increases their risk of harm and those who are persistently drinking at the highest and most harmful rates. To this end, we support efforts to promote and support targeted interventions which help tackle the root causes of alcohol misuse.
15. It is welcome to see the draft document acknowledge progress that has been made globally, such as reductions in the number of age-standardized alcohol-attributable deaths and Disability Adjusted Life Years. Such progress is reflected in a wider pattern of an increase in responsible consumption across Europe, such as a 26% fall in the prevalence of Heavy Episodic Drinking across the WHO European Region from 2005 to 2016¹. These positive trends should not be minimised in the working document when discussing the progress made across the world in tackling harmful alcohol use.
16. The WHO should also acknowledge progress on other indicators. There have also been associated declines on many measures of harm across other European countries including on underage drinking² and drink driving³. For example, there has been over a decade of falls on many measures of alcohol-related harm in the UK. The most recent Government curated data shows:
- a. The moderate majority of UK adults (77%) either do not drink alcohol or stay below the UK Government's lower-risk guidelines of 14 units per week⁴.
 - b. There has been a 20% fall in the number of British adults binge drinking (defined as exceeding 8 (men)/6 (women) units on the heaviest day of drinking) between 2007 and 2017 (the most recent statistics available)⁵.
 - c. A 41% fall between 2007 and 2017 in the proportion of British adults who drank alcohol on five or more days in the last week⁶.
 - d. In England, the proportion of 11-15 year olds who drink at least once a week fell by 73% between 2006 and 2014. Under the new methodology it has remained at 6% since 2016⁷. In Wales, the proportion of 11-15 year olds who drank weekly declined by 80% (2002-18)⁸.
 - e. In England and Wales, the number of alcohol-related violent crime incidents has declined by 47% since 2009/10.⁹ In Scotland, the estimated number of incidents has fallen by around half in the last decade¹⁰.
 - f. Since 2000, the total number of accidents caused by drink driving in Great Britain fallen by 54.6%, with the total number of casualties falling by 56.8% to record lows. The number of fatal accidents has fallen by 53.3%, and the number of those killed by 56.6%¹¹.

¹ [WHO Global Status Report on Alcohol and Health](#), 2018

² [IARD Trends Report on Underage Drinking](#), August 2019

³ [IARD Trends Report on Drink Driving](#), October 2019

⁴ [NHS England](#), December 2020 / [Scottish Health Survey](#), September 2020/ [National Survey for Wales](#), September 2020 / [Health Survey Northern Ireland](#), December 2020

⁵ [ONS: Adults drinking habits in Great Britain](#), May 2018

⁶ [ONS: Adults drinking habits in Great Britain](#), May 2018

⁷ [NHS Digital: Smoking, Drinking and drug Use among Young People in England, 2018](#), August 2019

⁸ [School Health Research Network: 2017/18 Health Behaviour in School-aged Children](#), May 2019

⁹ [ONS: Nature of crime: violence](#), September 2020

¹⁰ [Scottish Government](#), March 2021

¹¹ [UK Department for Transport](#), August 2021

17. We are concerned that the working document at present is inconsistent in its use of terminology, resulting in a confusing blurring between a desire to reduce harmful use and the blunt measure of reducing overall consumption per capita, regardless of whether a person is already drinking within recommended Government guidelines.
18. This is starkly illustrated by data collected during the COVID-19 pandemic in the UK in 2020. Data from 33 publicly available polls taken from the start of the pandemic shows that around half (51%) of adults reported no change in their alcohol consumption, whilst over a quarter (26%) report drinking less¹². Further sales data highlights an overall 10.1% drop in alcohol volume sales¹³. However, evidence also suggests that those drinking at the heaviest and most harmful rates increased their alcohol consumption, and there was a 19.6% increase in alcohol-specific deaths in 2020¹⁴. This shows that alcohol consumption per capita is an unhelpful measure when focusing on harmful drinking and its tragic consequences.
19. Furthermore, the action plan is currently setting an unrealistic target of achieving a 20% relative reduction in alcohol consumption by capita by 2030, which is double the previous target to be achieved in less than a decade, without regard to how the majority of the population consumes and enjoys alcohol in a responsible and balanced way.
20. As the moderate majority of drinkers in the UK and across Europe drink within Government recommended guidelines, we believe that the action plan should instead retain a singular focus on measuring and reducing harmful alcohol use and associated measures of harm, rather than diluting its focus with consumption of alcohol per se. This will allow the Global Strategy to retain its effective focus on harm reduction and its Member State mandate to focus on harmful use.
21. Furthermore, a zero-alcohol approach is likely to backfire as lecturing in places such as the UK and elsewhere in Europe conflicts with and misunderstands the cultural place of alcohol in society, as an important part of how we socialise and celebrate. Instead, the action plan should retain a primary focus on tackling harmful alcohol use whilst promoting moderate use within Government guidelines, as it represents a proportionate and sensible approach to risk.
22. Therefore, the WHO should use rates of harmful drinking as a key indicator of success, rather than per capital alcohol consumption, as it currently both unhelpfully suggests all alcohol consumption is negative whilst masking trends in harmful use.
23. In the spirit of focusing on harm, we also welcome and are supportive of the inclusion of taking appropriate action to 'prevent drinking in pregnancy and prevent fetal alcohol spectrum disorders (FASD)' in the action plan, as an important targeted step in order to prevent alcohol harm. We welcome the removal of the previous wording regarding the 'prevention of drinking among women of childbearing age', as this was language that was counterproductive to the vital intention to prevent FASD. To further clarify this point, the WHO could use language modelled on the UK Chief Medical Officer guidance that the safest approach is for women who are pregnant or planning a pregnancy not to drink alcohol at all.¹⁵ We would also reiterate the industry's strong support for this guidance.

¹² [Portman Group / YouGov survey on UK alcohol consumption during COVID-19 and looking to the reopening of UK hospitality](#), April 2021

¹³ [IARD: Alcohol sales declined by 6% globally during pandemic](#), May 2021

¹⁴ [ONS: Quarterly alcohol-specific deaths in England and Wales: 2001 to 2019 registrations and Quarter 1 \(Jan to Mar\) to Quarter 4 \(Oct to Dec\) 2020 provisional registrations](#), May 2021

¹⁵ [NHS England: Drinking alcohol while pregnant](#), accessed 22 June 2021

3. Voluntary industry self-regulation continues to play a valuable role in tackling harm

24. We are concerned by the current draft's unfair and negative portrayal of the alcohol industry as a barrier to rather than a constructive partner in tackling alcohol-related harm. It means that the plan is ignoring the huge reach of producers to its consumers and ability to harness the relationships they have to positive effect. The alcohol industry stands apart from other sectors with its longstanding serious commitment, backed up credible action, to ensuring that its products are marketed and sold responsibly. This demonstrates that the action plan should see the alcohol industry as a valuable and positive partner in tackling the harmful use of alcohol.
25. Over its 30-year history, the alcohol industry's responsibility actions through the work of the Portman Group has been shown to be a world-leading example of voluntary industry action to better inform and protect consumers, whilst tackling inappropriate marketing and promotions.
26. The Portman Group Code of Practice is a prime example of how self-regulatory action, with wide industry buy-in across the supply chain from producers to retailers, can have a demonstrable impact in protecting the most vulnerable in society and is a legitimate model to be included in the Action Plan. The Code is able to adapt faster to change than the usually cumbersome legislative process and all the costs are borne by the industry, at no additional burden to the taxpayer. The Code also has a two-fold impact on the market. First, the direct impact on products judged by the Independent Complaints Panel to have breached the Code, which are either altered or removed from the market. Secondly, the larger impact in continually driving up social responsibility standards across the industry as producers seek to remain on the right side of the Code, in contrast to statutory legislation which is often focused solely on minimum standards.
27. A further example of this commitment to agenda-setting responsibility, the Portman Group launched its 'Commitments to Action' agreement back in 2003 which included a number of industry firsts including ensuring that all member companies placed unit labelling on their drinks and ensured the placement of responsible drinking messaging on packaging and advertising¹⁶.
28. The industry continues to voluntarily provide consumers with health-related information above and beyond that which is required by Government regulation. Collectively the sector has created best practice which we provide to the industry as free advice. The vast majority of the UK market adheres to the Portman Group's best practice guidelines, which includes carrying a pregnancy warning message or symbol and unit information, with 97% and 95% of products in the UK respectively carrying such information¹⁷.
29. Our members, who produce over 50% of the alcoholic drinks in the UK, have committed to voluntarily place the latest UK Chief Medical Officer (CMO) low risk guidelines on their packaging. The vast proportion of the industry are also voluntarily placing CMO statements and calorie and nutrition information on-pack and online as part of Europe-wide agreements¹⁸.
30. The Portman Group also forms part of a wider successful self-regulatory system which ensures that alcohol advertising is captured in the round, with the UK Advertising

¹⁶ [Portman Group: 30 Years of Responsibility](#), December 2019

¹⁷ [AHA: Drinking in the dark](#), August 2020

¹⁸ [Brewers of Europe Memorandum of Understanding with European Commission / SpiritsEurope Memorandum of Understanding with European Commission](#)

Standards Authority (ASA) operating in non-broadcast and online advertising spheres and co-regulating the broadcast sphere with Ofcom¹⁹.

31. Wide industry compliance with this system is demonstrated by the latest ASA data which shows that children's exposure to alcohol advertising on TV has more than halved in the past decade, making up just 0.9% of the number of all TV ads seen by children each week²⁰.
32. Industry initiatives are also able to take action on new frontiers such as digital marketing, which has proven difficult for policymakers due to the inherent cross-border nature of the technology. Digital marketing is a key area of focus for producers at an international level, with the International Alliance for Responsible Drinking (IARD) working in partnership with the largest digital platforms such as Instagram, Facebook and YouTube to raise standards. This includes the introduction of rigorous online safeguards to prevent minors from seeing or interacting with alcohol brands online, as well as opt-outs for all consumers on platforms²¹.

4. Industry initiatives support and contribute to the reduction of harmful drinking through targeted measures

33. The UK alcohol industry has proactively taken steps on a number of different fronts to take targeted action to improve alcohol misuse education and reduce harmful drinking.
34. The Portman Group's campaign work led to the founding of the Drinkaware Trust, now Drinkaware, the independent alcohol advice charity for UK consumers. In 2019 it reached more than nine million people through their website and social media, and 1.2 million people used their online tools to better understand the impact of alcohol on their lives.
35. The Portman Group has been instrumental in discussions with the UK Government to improve the sector, leading to the Public Health Responsibility Deal in 2012. This initiative is a prime example of constructive policy collaboration, leveraging industry knowledge and technical expertise²².
36. A commitment to alcohol responsibility is evident in initiatives across the whole of the sector. This includes the high retailing standards to prevent underage sales operated by the UK Retail of Alcohol Standards Group. They operate the Challenge 25 scheme where 99% of retailers seek evidence that people looking under the age of 25 are of legal age to purchase alcohol.
37. The sector also voluntarily funds a number of partnership schemes at a local level such as Community Alcohol Partnerships (CAP). Over the past 14 years, CAP have worked across 216 projects with local authorities, police, schools and local retailers to prevent underage drinking and alcohol harm to young people through a three-pillar model to educate, prevent underage sales and engage young people in positive activity to enhance their confidence, health and wellbeing²³. These voluntary initiatives have contributed to a 61% reduction in underage drinking among 13-16 year olds and 42% reduction in anti-social behaviour.

¹⁹ [ASA: Self-regulation and co-regulation](#), accessed 24 August 2021

²⁰ [ASA: Children's exposure to TV ads for gambling and alcohol: a 2020 update](#), June 2021

²¹ [IARD: Online marketing](#), November 2019 / [IARD: Actions to accelerate reductions in underage drinking](#), January 2020

²² [DHSC: Units of alcohol sold](#), April 2014

[Portman Group: Encourages industry to include 14 unit CMO guidance on labels](#), July 2019

²³ [Community Alcohol Partnerships 2020 Annual Report](#), accessed July 2021

38. Further industry-funded schemes between local authorities and hospitality operators such as Best Bar None and Pubwatch work to ensure a safe, vibrant and prosperous night-time economy in town centres across the UK.

5. Whole-of-society approach that includes industry is needed

39. We believe that the above underscores that the action plan should recognise the broad suite of policy options available to tackle harm, especially the utility of industry voluntary initiatives, rather than prioritising a narrower set of restrictive policies under the SAFER initiative.
40. However, while we as an industry are proud of our track record, we have always recognised the need for continual improvement. We are by no means defending the status quo. We are calling for the action plan to recognise that the industry is willing and able to play a leading and constructive role with Government and other parties in developing an improved collaborative approach as part of a whole-of-society approach to strengthen regulation.
41. The COVID-19 pandemic has demonstrated the importance of a whole-of-society approach and how the alcohol industry can mobilise its resources to play a vital role in protecting health and supporting local communities. For example, alcohol producers, including many Portman Group members, worked collaboratively with local authorities in the UK and across the world to turn over their production facilities to create high strength ethanol to produce millions of litres of hand sanitiser. Many companies also donated personal protective equipment to hospitals, care homes and community facilities, whilst local pubs played a huge role as community hubs and lifelines to those living in isolated areas or conditions²⁴.
42. Therefore, the alcohol industry should not be side-lined as a passive entity in the action plan but engaged as part of a partner in a whole-of-society approach.

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²⁴ [Portman Group: Supporting Communities: The Drink Sector's Response During the COVID-19 Pandemic](#), February 2021