

Building Capacity for Action: European Alcohol Policy Conference  
Barcelona, 3-5 April 2008

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Effectiveness of alcohol health warning labels  
as consumer information

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Parallel session: Labelling

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# Consumer information on products

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## Purpose

- help purchasers make informed decisions
  - basics on the products: ingredients, nutritional value...
- help consumers avoid or reduce risks when using the product
  - allergenics, proper use of household chemicals...
  - risks to health or safety of individuals
  - risks to the environment

## Giving information on the product's package

- cost-effective compared to any media campaign
- does not reach those who do not handle the package
  - e.g. food or drink served in bars and restaurants
- does not reach non-users of the product

# Health warnings on alcoholic beverages

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- mandated by law in 9 countries in 1997, in ca. 25 countries in 2007
- US: Surgeon General's warning since 1989
- introduction in progress: Poland, New Zealand, Australia...
- in the form of text; pictogram as an option only in France

**GOVERNMENT WARNING: 1) According to the Surgeon General, women should not drink alcoholic beverages during pregnancy because of the risk of birth defects. 2) Consumption of alcoholic beverages impairs your ability to drive a car or operate machinery and may cause health problems.**

# What types of risks are addressed

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- avoid excess / drink with moderation (3)
- risk / harm to health from consumption / excess / abuse (10)
- may cause specific disease: liver cirrhosis or liver cancer (1)
- harmful during pregnancy (4)
- prohibited or harmful to minors (6)
- driving or operating machinery (6)
- accidents at work (1)
- adverse effects to family or others (2)

**Warning: Excessive consumption of alcohol may cause liver cirrhosis or liver cancer and is especially detrimental to the mental and physical health of minors.<sup>1</sup>**

<sup>1</sup>South Korea

**Advertencia. El Consumo excesivo de alcohol limita su capacidad de conducir y operar maquinarias, puede causar daños en su salud y perjudica a su familia.<sup>2</sup>**

<sup>2</sup>Ecuador

# Research on effectiveness in the US

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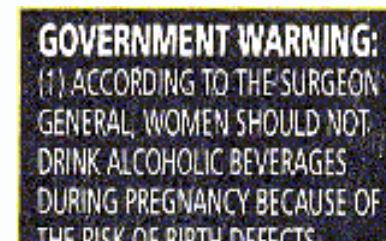
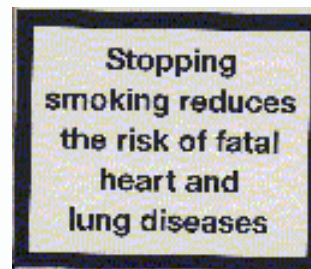
- before & after the implementation; follow-up 5 years
- dozens of published articles, several reviews<sup>1</sup>
- experimental research on response to different warning messages
- survey studies: awareness, recall of messages, risk perceptions
- general population and specific subgroups
  - young people,
  - (young male) drivers
  - women of childbearing age/pregnant women
- thousands of respondents
- Canada as control site

<sup>1</sup>e.g. Graves 1993; Hankin & al. 1993; Hilton 1993; Kaskutas 1993; Laughery & al. 1993; MacKinnon & al. 2000; Stockwell 2006.

# To have any effect, the warning needs to be seen

- 9 months after implementation: warning in place in only part of containers: 86% of beer, 34% of wine, 30 % of liquor<sup>1</sup>
- most warning labels obscurely placed, small and difficult to read
- experimental research: warning label more noticeable when<sup>2</sup>
  - printed horizontally on the front
  - large enough to allow readable text
  - surrounding area is not too “cluttered”
  - contrasting colours are used - no more than two
  - icon or layout element is used to signal out the warning

black border  
red triangle  
pictogram  
text in block letters



<sup>1</sup>Hankin % al. 1993; <sup>2</sup>Laughery & al. 1993

# Awareness > recall > discussion

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US findings:

- five years after introduction: 43% of the general population had **noticed** the warning
- **recall** of message five years after
  - birth defects 81%
  - drink driving 46%
  - operating machinery 39%
- young people, pregnant women, heavy drinkers particularly likely to recall the message
- the warning prompted **discussion** about alcohol-related risks
- a **cost-effective** way of conveying information about risks to consumers

# New information or just a reminder?

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Potential for effect depends on level of risk awareness

- US baseline survey: 95% of the general population considered all warning label statements “definitely true” or “probably true”<sup>1</sup>

Greater potential with new information

- highest recall for birth defects
- still news in the US in early 1990s
- issue covered by the media
- increased attention in prenatal health services

<sup>1</sup>Graves 1993

**Warning: If this beverage is indulged in consistently and immoderately, it may cause intoxications (drunkenness), later neuralgia and paralysis (neuritis) and serious mental derangement, such as delirium tremens and other curable and incurable mental diseases, as well as kidney and liver damage.<sup>1</sup>**

**Warning: This product contains alcohol and is particularly hazardous in combination with some drugs.<sup>2</sup>**

**Warning: The consumption of this product, which contains alcohol, can increase the risk of developing hypertension, liver disease, and cancer.<sup>2</sup>**

**Warning: Alcohol is a drug which may be addictive.<sup>2</sup>**

<sup>1</sup>proposed in Massachusetts 1945

<sup>2</sup> rotating messages dropped from the US warning label act in 1988

# Recommendations based on US experiences

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- rotating message texts
- risk of specific health effects rather than generic health warning
- information that is not already widely known
- both immediate and long-term consequences
- clear behavioural instructions – ***don't drink and drive***
  
- use health warnings as part of larger strategy
  - “dose-response” effect in US: seeing several types of messages – at point-of-sale, in advertisements, in magazine stories – increased likelihood of discussing the risks<sup>2</sup>
  - success in smoking prevention due to a combination of measures: warning labels, advertising bans, taxation, restrictions on selling, restrictions on smoking, smoke-free policies...

<sup>1</sup>CSPI 2001; <sup>2</sup>Kaskutas & al. 1998

# Necessary but not sufficient

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- US: recall of the warning associated with
  - not driving after drinking<sup>1</sup>
  - reduced drinking among low-risk pregnant women<sup>2</sup>
- warning labels are not a magic wand
- BUT: **consumers have the right to know** what ingredients they are consuming and what the possible health consequences of the product are, so that they can make well-informed, healthy lifestyle choices
- warning labels should be included in comprehensive strategies to reduce alcohol-related harm as a cost-efficient method of informing and educating consumers

<sup>1</sup>Graves 1993; <sup>2</sup>Hankin & al. 1993

# EU regulations: no health claims in alcoholic beverage labelling

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Directive 1924/2006/EC: health claims for foodstuffs permitted only if the label includes:

- (a) a statement indicating the importance of a varied and balanced diet and a healthy lifestyle;
- (b) the quantity of the food and pattern of consumption required to obtain the claimed beneficial effect;
- (c) where appropriate, a statement addressed to persons who should avoid using the food;
- (d) an appropriate warning for products that are likely to present a health risk if consumed to excess.

Does not apply to dietary guidelines or advice issued by public health authorities

## **Beverages containing more than 1,2 % ABV**

- no health claims allowed
- nutrition claims permitted if refer to low alcohol levels, or to reduced alcohol or energy content

# Proposal to overhaul food labelling regulations<sup>1</sup>

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Changes proposed for labelling of **alcopops**

- **list of ingredients** – “to provide consumers with food information that is necessary to make an informed choice”
- **nutrient content** – “in general, consumers are not aware of the potential contribution of alcoholic beverages to their overall diet”

**Beer, wine and spirits exempted**

- Directive 1493/1999/CE gives an exhaustive list of practices permitted in wine production; therefore ingredients listing not needed for wines
- beer and spirits exempted to “ensure a consistent approach and coherence with the conditions established for wine”

**Health warning labels** on alcohol containers

- addressed in the preparatory phase but dropped from the proposal

<sup>1</sup> COM(2008) 40 final

# What about the energy content of drinks?

- Ca. 1% of the population intolerant to sulphites or gluten
- C.f. risk of overweight affects all drinkers
- alcopops are not the only drink with potentially negative contribution to the "overall diet"

**energy of alcohol (7 kcal/g) + energy of sugar (4 kcal/g) = energy of a drink**

- higher math required when alcohol content given in % by volume
- considerable variation between and within categories of drink

	% ABV	Sugar g/l	Kcal in standard drink	Size of standard drink
White wines	8-14	0-160	60-170	12 cl
Liqueurs	15-55	100-520	50-200	4 cl