

Holding us Back: tobacco, alcohol and unhealthy food and drink, 20th March 2024

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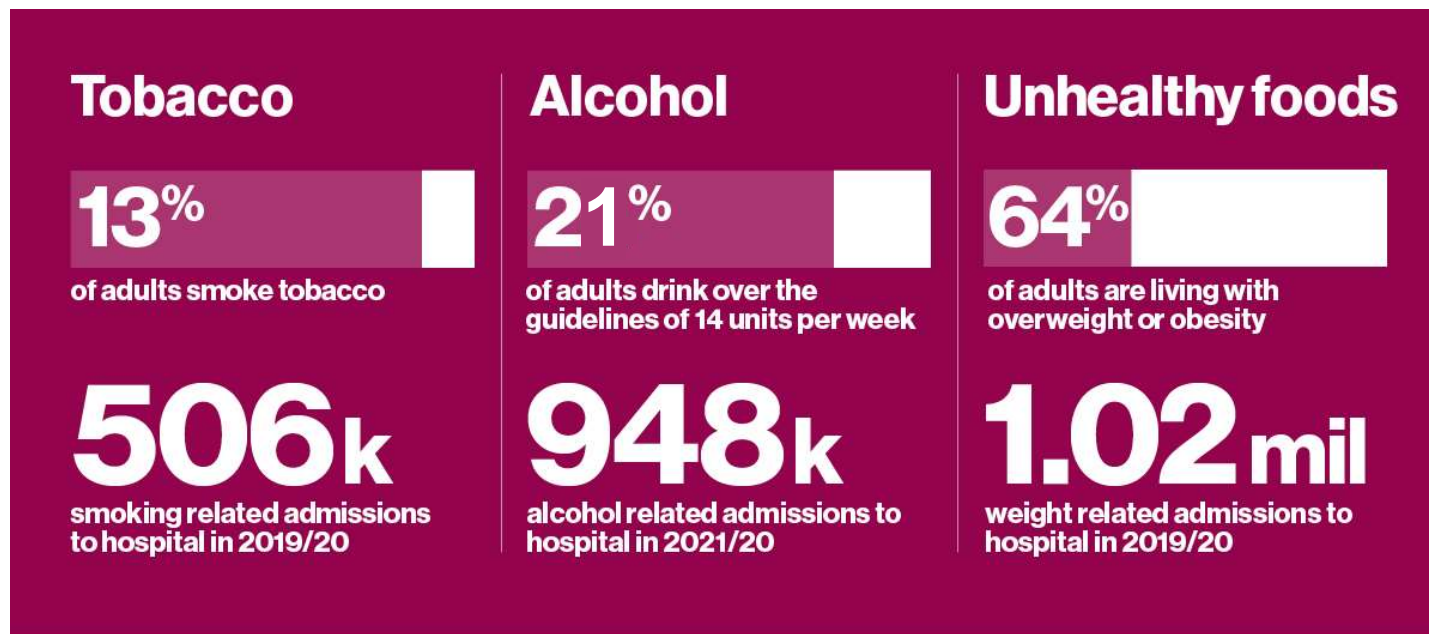


Background

- Identified shared challenges in preventing harms from these products
- Collective impact on poor health and the economy is substantial
- Is there a more collective solution to this challenge?
- Thanks to CRUK for funding



Tobacco, alcohol and unhealthy food and drink are major causes of death and chronic disease



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Our environment is saturated with these products

- Widespread use of these products has been driven by mass production and marketing by profit-making companies
- We are exposed to these products in nearly every aspect of modern-day life
 - Advertising on TV and streaming services, out of home and on public transport
 - Targeted promotions on social media
 - Influencing school educational programmes
 - Sponsored sporting, music, community, and other events
- This marketing strongly changes our behaviour, without our consent, making us ill.

These products are profitable for industry at the expense of wider costs to society

Product Category	Pre-tax revenue (£bn)	Post-tax revenue (£bn)	Estimate of proportion of purchases over guidelines (%)	Revenue derived from purchases above guidelines (£bn)
Tobacco	25.13	7.34	100.0	7.34
Alcohol	45.84	25.70	43.4	11.16
Food	126.74	118.65	28.8	34.17
Total	197.71	151.69	-	52.67

Industry revenue from sales at health-harming levels

These products are profitable for industry at the expense of wider costs to society

	Smoking	Alcohol (AUDIT-C Score ≥ 11)	Obesity (BMI over 40)	Total
Number unemployed or economically inactive due to consequences of health-harming products (to the nearest 1,000)	289,000	99,000	70,000	459,000
Cost of lost productivity (including under-employment) rounded to the closest £0.1bn	£18.1bn	£10.6bn	£2.4bn	£31.1bn

Table 2: Productivity loss, unemployment and economic inactivity due to smoking, high alcohol intake or severe obesity.

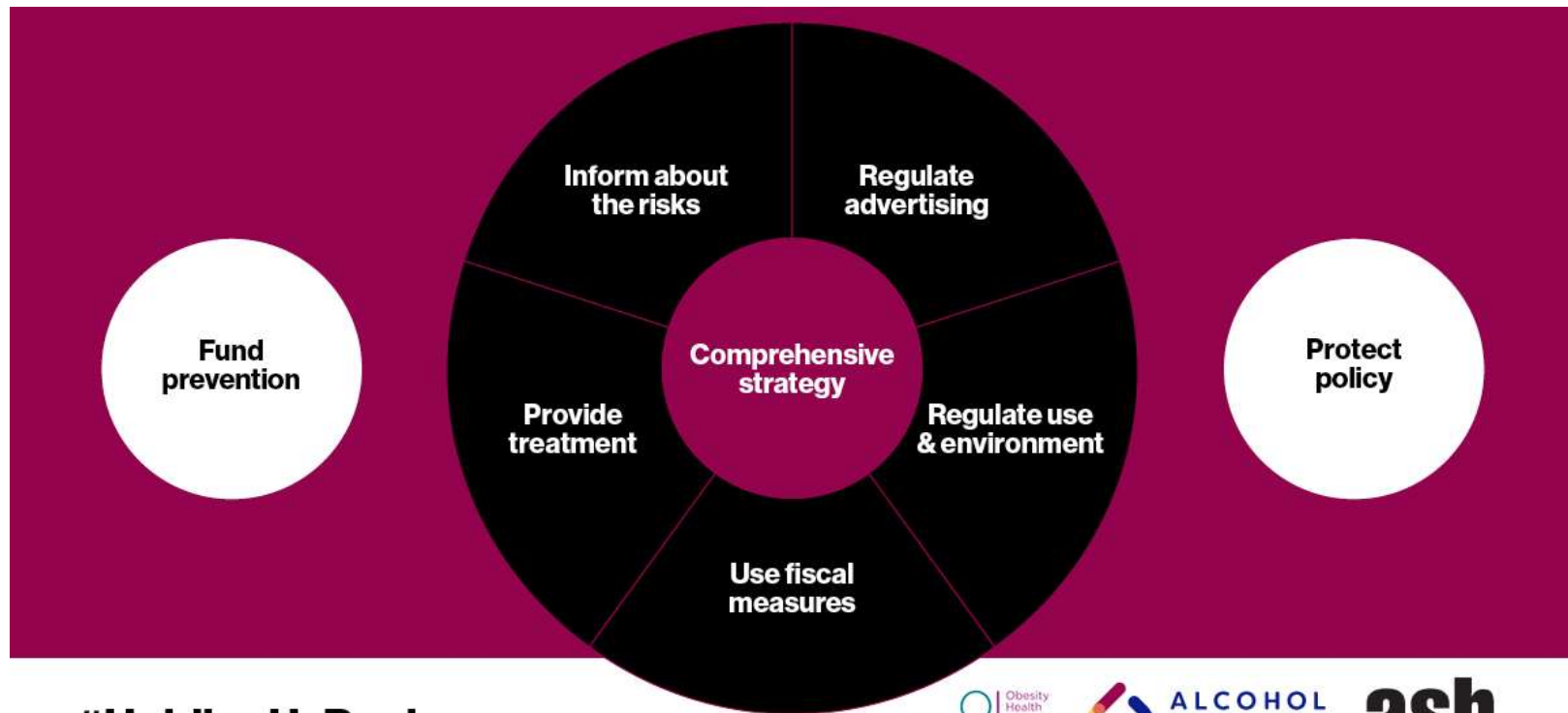
Response to these harms

- Levels of harm vary and policy solutions will also vary
- BUT: Common driver of commercial behaviour
- Existing policy response is insufficient given the scale of the harms

The role of health-harming industries

- Health-harming industries use a ‘common playbook’ of actions to lobby government to prevent regulation.
 - Discrediting scientific evidence or scientists
 - Influencing public opinion through public relations,
 - Promoting alternative policy proposals more favourable to industry
 - Focusing on the positive impact of industry
 - Threatening litigation
 - Influencing through proxies
- This lobbying has delayed and disrupted the policy-making process, contributing to insufficient regulation of health-harming products.

A framework for a coherent approach



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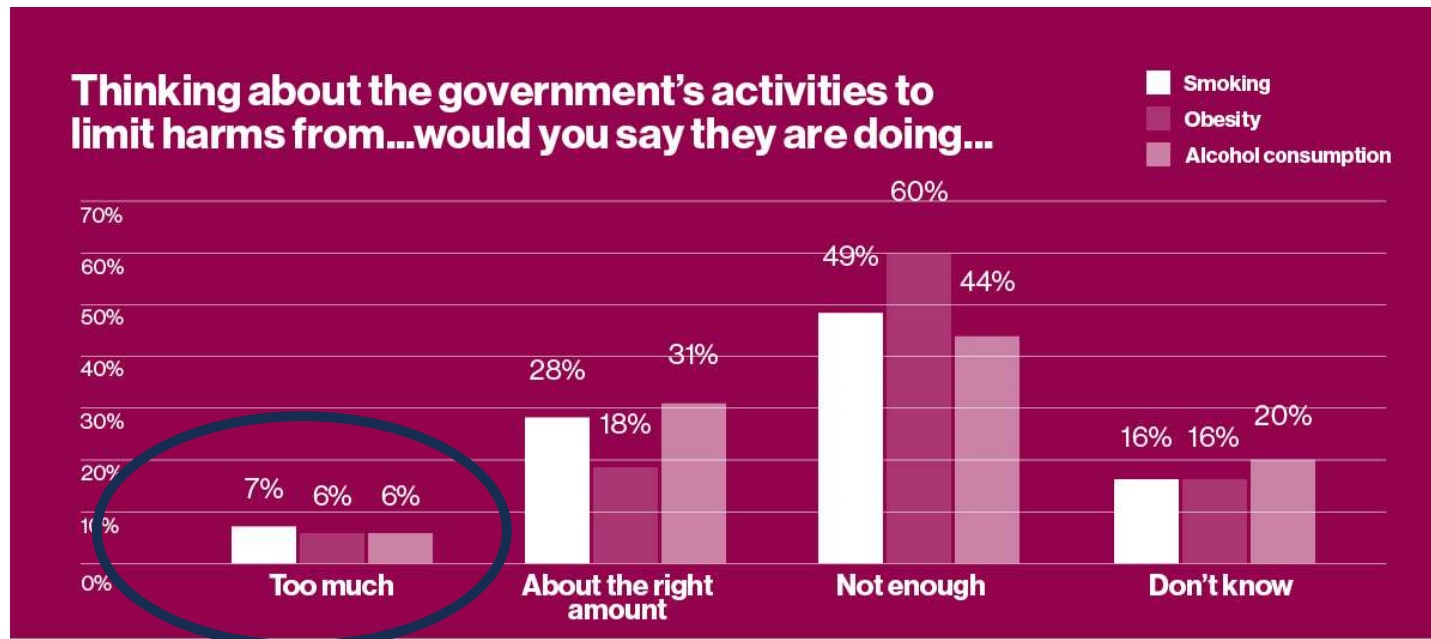
Our current policy approach is incoherent

KEY ENABLERS	Tobacco	Unhealthy food and drink	Alcohol
Secure funding for prevention Ringfenced, long-term funding to enable prevention efforts to reduce impact of harmful products.	Orange	Red	Red
A comprehensive strategy with a focus on primary prevention, which has coherent policies to improve health, clear goals and tangible activities.	Orange	Orange	Red
Protect health policy from industry interference Limiting the ability of vested commercial interests to undermine evidence-based policies designed to reduce the impact of harmful products.	Green	Red	Red

Our current policy approach is incoherent

KEY ACTIONS	Tobacco	Unhealthy food and drink	Alcohol
Regulate advertising to limit harm Use proportionate regulation of advertising across different media forms, to prevent promotion of unhealthy products			
Regulate product use and environments Reduce access to harmful products, particularly from children, and regulate the environments they can be used in to prevent harm to individuals and those around them.			
Inform the public about the risks Use evidence-based communications to raise awareness and inform people about the risks of harmful products			
Use fiscal measures Taxes to raise prices of unhealthy products to reduce use or encourage product reformulation, and/or levies to fund prevention activities.			
Provide treatment Provide treatment services to those already impacted by harmful products to improve health and prevent further harm.			

The public support more action

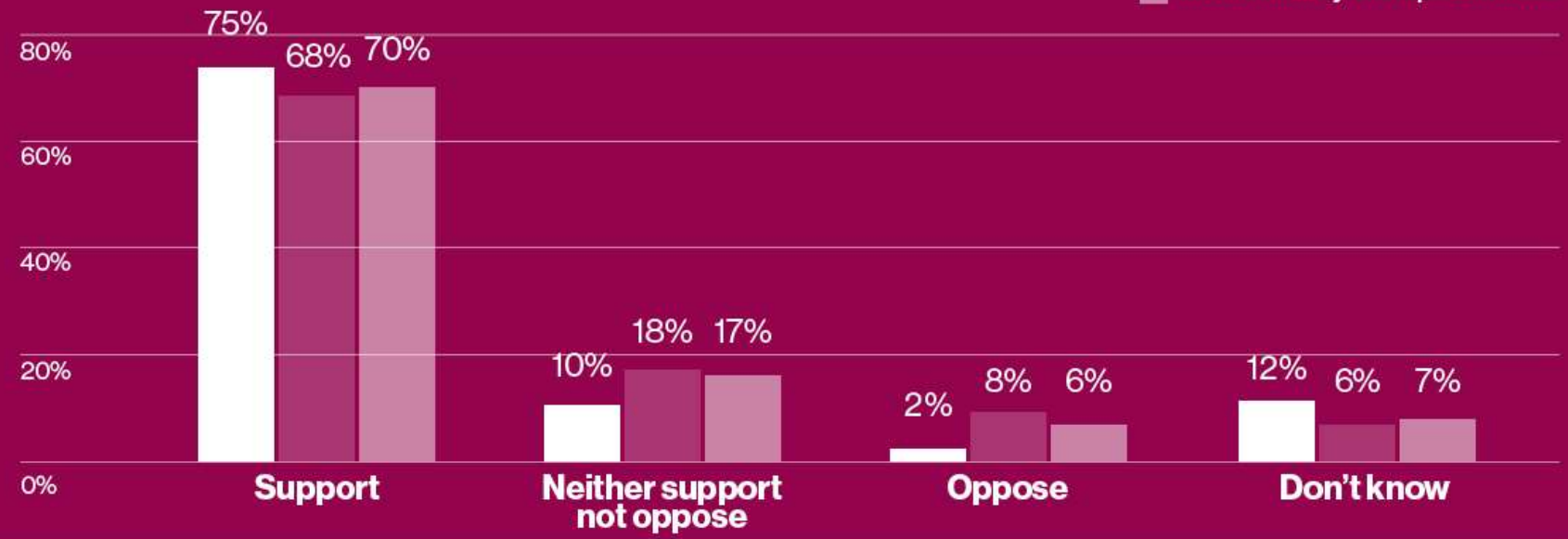


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All government health policy should be protected from the influence of...

- Tobacco industry & its representatives
- Unhealthy food & drink manufacturers & their representatives
- Alcohol industry & its representatives



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A vision for a coherent prevention approach

- Protect policymaking from the vested interests of health-harming industries
- Prioritising health through primary prevention
- A cross-government commitment to improving health
- Investment in prevention
- Leadership across all levels of government

Alcohol industry influence on health policy

The image is a collage of four academic article covers. The top-left cover is from the journal 'ADDICTION', published by the Society for the Study of Addiction (SSA). It features a blue header with the journal title and logo. Below the header, it indicates the article is a 'Review' and is available under 'Open Access' with Creative Commons icons. The title is 'Alcohol industry involvement in policymaking: a systematic review', and the authors are Jim McCambridge, Melissa Mialon, and Ben Hawkins. The top-right cover is from 'THE LANCET Global Health', Volume 10, Issue 3, March 2022, Pages e429-e437. It has a white header with the journal title and a small landscape image. The title is 'Industry influence over global alcohol policies via the World Trade Organization: a qualitative analysis of discussions on alcohol health warning labelling, 2010–19'. The bottom-left cover is from 'CRITICAL PUBLIC HEALTH', Taylor & Francis, 2012 Sep; 22(3): 297–305. It has a white header with the journal title and logo. The title is 'C The Role of the Alcohol Industry in Policy Interventions for Alcohol-Impaired Driving', and the authors are Thomas F. Babor, Ph.D., M.P.H., and Katherine Robain. The bottom-right cover is also from 'CRITICAL PUBLIC HEALTH', Taylor & Francis, 2012 Sep; 22(3): 297–305. It has a white header with the journal title and logo. The title is 'Alcohol industry influence on UK alcohol policy: A new research agenda for public health'. The background of the collage is a dark blue gradient with a faint image of people in a meeting.

ADDICTION | SSA | SOCIETY FOR THE STUDY OF ADDICTION

Review | Open Access | CC | i

Alcohol industry involvement in policymaking: a systematic review

Jim McCambridge, Melissa Mialon, Ben Hawkins

THE LANCET
Global Health

Volume 10, Issue 3, March 2022, Pages e429-e437

Articles

Industry influence over global alcohol policies via the World Trade Organization: a qualitative analysis of discussions on alcohol health warning labelling, 2010–19

C The Role of the Alcohol Industry in Policy Interventions for Alcohol-Impaired Driving

Thomas F. Babor, Ph.D., M.P.H., Katherine Robain

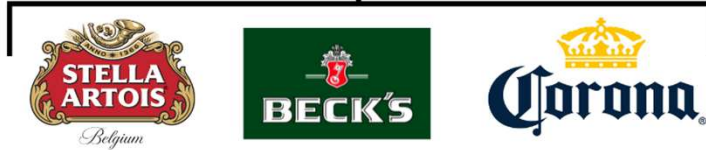
CRITICAL PUBLIC HEALTH | Taylor & Francis

Crit Public Health. 2012 Sep; 22(3): 297–305. PMID: PMC3396356
Published online 2012 Feb 21. doi: [10.1080/09581596.2012.658027](https://doi.org/10.1080/09581596.2012.658027) PMID: [22815594](https://pubmed.ncbi.nlm.nih.gov/22815594/)

Alcohol industry influence on UK alcohol policy: A new research agenda for public health

Big Alcohol: An industry dominated by corporate giants

 **ABInBev**



 **Heineken**[®]




Pernod Ricard

DIAGEO

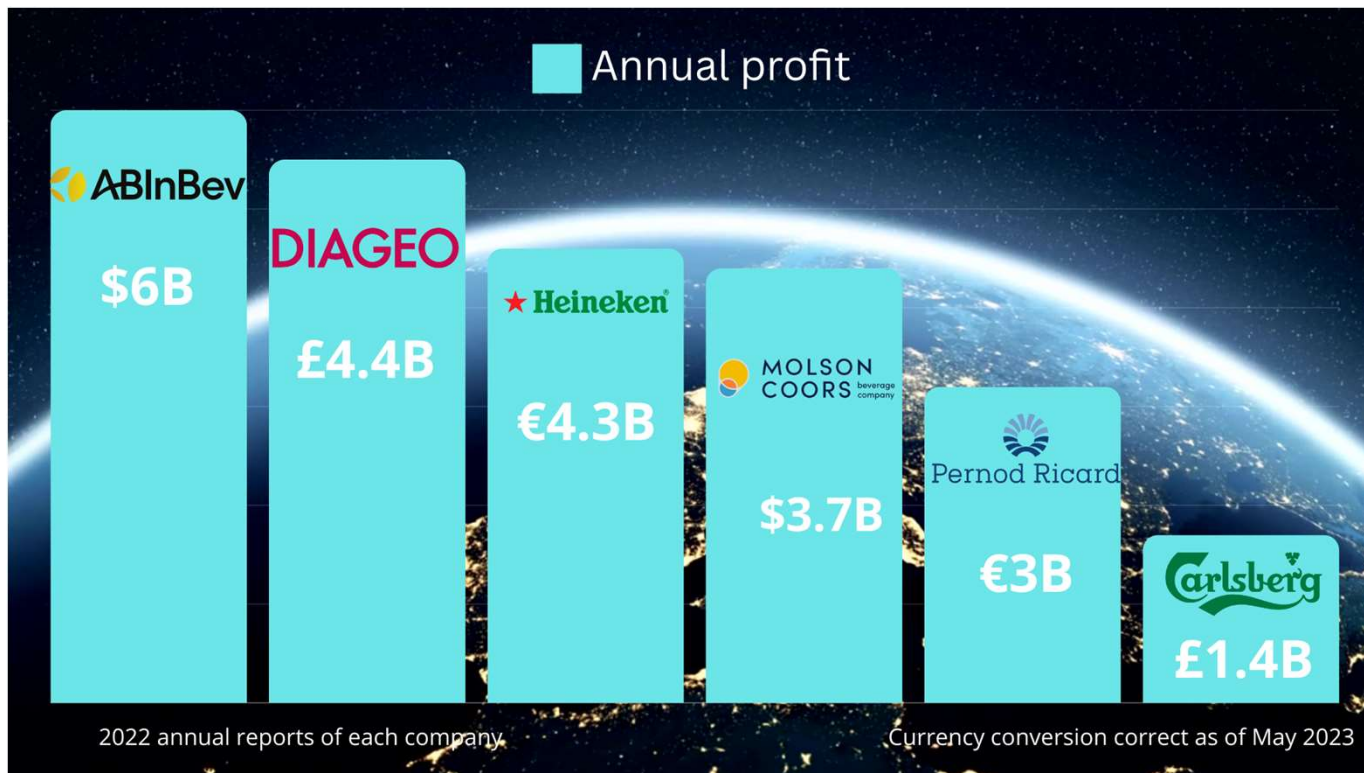


 **MOLSON
COORS** beverage company




Carlsberg

Conflicts of Interest: Profits versus public health



Front groups



Industry framed as 'part of the solution'



However evidence indicates they are a major part of the problem

Community Alcohol Partnerships with the alcohol industry: what is their purpose and are they effective in reducing alcohol harms?

M. Petticrew, N. Douglas, P. D'Souza, Y.M. Shi, M.A. Durand, C. Knai, E. Eastmure, N. Mays

Policy Innovation Research Unit, Faculty of Public Health and Policy, London School of Hygiene & Tropical Medicine, London WC1H 9SH, UK
Address correspondence to Mark Petticrew, Policy Innovation Research Unit, Faculty of Public Health and Policy, London School of Hygiene and Tropical Medicine, 15-17 Tavistock Place, London WC1H 9SH, UK. E-mail: mark.petticrew@lshtm.ac.uk

How alcohol industry organisations mislead the public about alcohol and cancer

MARK PETTICREW¹, NASON MAANI HESSARI¹, CÉCILE KNAI¹ & ELISABETE WEIDERPASS^{2,3,4,5}

Pregnancy, Fertility, Breastfeeding, and Alcohol Consumption: An Analysis of Framing and Completeness of Information Disseminated by Alcohol Industry-Funded Organizations

AUDREY W. Y. LIM, M.A., (CANTAB), M.P.H.,^{a†} MAY C. I. VAN SCHALKWYK, M.B.B.S., M.P.H.,^δ
NASON MAANI HESSARI, M.Sc., Ph.D.,^a & MARK P. PETTICREW, B.A., Ph.D.^{a*}

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^δPublic Health Policy Evaluation Unit, School of Public Health, Imperial College London, London, United Kingdom

Analysis of the accuracy and completeness of cardiovascular health information on alcohol industry-funded websites

Lewis Peake¹, May C.I. van Schalkwyk², Nason Maani^{2,3}, Mark Petticrew^{2,3*}

RESEARCH ARTICLE

Distilling the curriculum: An analysis of alcohol industry-funded school-based youth education programmes

May C. I. van Schalkwyk^{1*}, Mark Petticrew^{1,2}, Nason Maani^{1,2}, Ben Hawkins¹, Chris Bonell¹, Srinivasa Vittal Katikireddi³, Cécile Knai^{1,2}

1 Faculty of Public Health and Policy, London School of Hygiene & Tropical Medicine, London, United Kingdom, 2 SPECTRUM Consortium (Shaping Public Health Policies to Reduce Inequalities and Harm), London, United Kingdom, 3 MRC/CSO Social and Public Health Sciences Unit, University of Glasgow, Glasgow, United Kingdom

* may.vanschalkwyk@lshtm.ac.uk

Industry self-regulation of alcohol marketing: a systematic review of content and exposure research

Jonathan K. Noel, Thomas F. Babor & Katherine Robaina

Department of Community Medicine and Health Care, University of Connecticut School of Medicine, Farmington, CT, USA

Legal challenge and regulatory chill

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Scotch Whisky Association challenges Scotland's minimum alcohol price law

The Scotch Whisky Association (SWA) has said it will challenge legislation on a minimum price for alcohol.

The law, which was overwhelmingly backed by MSPs earlier this year, would increase the price of some cheaper drink brands in Scotland.

The SWA said it had lodged a formal complaint to the European Commission over the legislation.

It will also seek a judicial review of minimum unit pricing for alcohol in the Court of Session in Edinburgh.

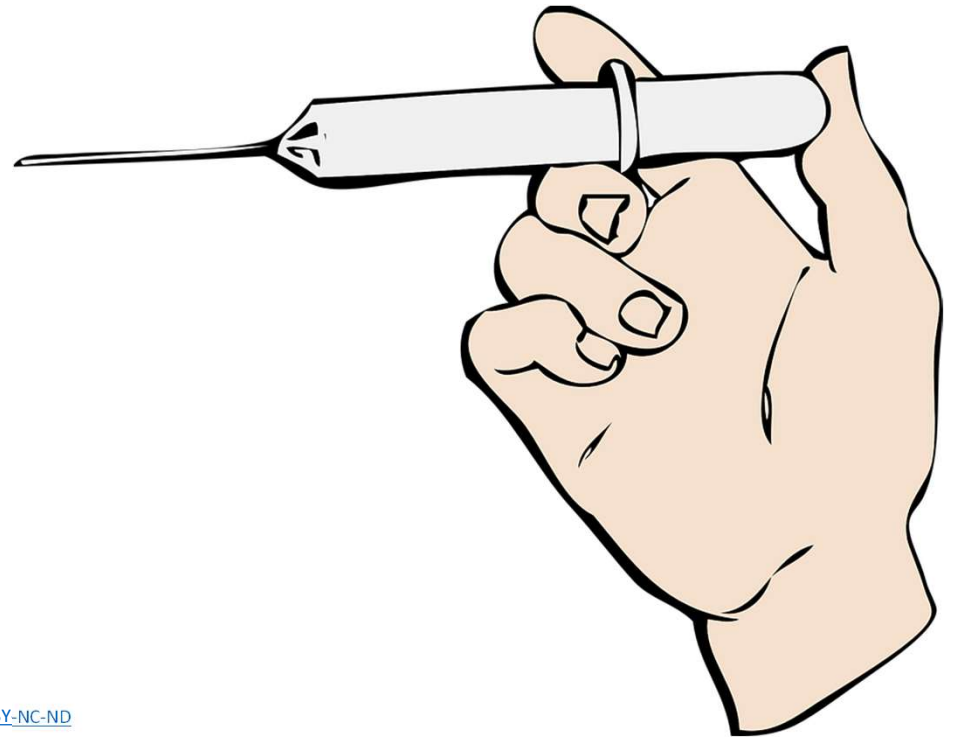


The Scottish Whisky Association lodges a formal complaint with the European Commission

Next steps



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**A Case Study:
The role of
the Food
Industry in our
broken food
environment**



A 30 year recap

- 689 UK Government obesity policies since 1992
- 63.8% of UK adults living with excess weight in 2021 (25.9% obesity, 37.9% overweight)
- 2 in 5 children leaving primary school above a healthy weight
 - Deprived children twice as likely to be impacted than richer children

Marketing Mix

- Product
- Price
- Place
- Promotion

2020 Obesity Strategy

- Led by Boris Johnson in response to Covid
- Focussed on marketing of food and drink high in fat, salt and sugar (HFSS)
- 9pm advertising watershed on TV and total ban online

2022 Timeline

- May 2022 – Health & Care Act becomes law
- June 2022 – Johnson Government announces delay to planned policies
- September 2022 – Truss Government attempts to repeal existing policies
- December 2022 – Sunak Government confirms delay to planned policies

Industry Tactics - Deny

- Industry Tactics - Deny Cast doubt on evidence
- Create alternative explanations
- Claim regressivity and negative economic impact

Industry Tactics - Dilute

- Call for exemptions
- Create loopholes
- Cast doubt on enforceability, economic impact & “unintended consequences”

Industry Tactics - Delay

- Demand long implementation timelines
- Exploit crises
- Legal challenges

How does this playout in local government?

- TFL Advertising Policy
- Outsmart
- KFC & the Planning Inspectorate