European Commission

State of play in the use of alcoholic beverage labels to inform consumers about health aspects

Action to prevent and reduce harm from alcohol

Written by *GfK Belgium*

Health and Consumers

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1. Abstract

This study reports on an audit of 60 retailers across 15 European countries regarding the health-related messages that inform and educate the consumer on labels of alcoholic beverages. Overall, only one in five alcoholic beverages holds a health-related message on its label. A warning about drinking alcohol during pregnancy is the most popular message. It was found that messages are usually clearly visible, easy to understand and are placed on the back of beverage packaging. There is no clear pattern in terms of whether messages are presented as a logo or text, though warnings for pregnant women are mostly presented as logos. The size of a message relative to the label varies between package types, but most are very small. Market share analyses revealed sharp differences between countries in the labelling of the top selling beers and spirits.

To conclude, only a minority of alcohol labels include health-related messages. When beverages do carry messages, there is wide divergence in their form and formatting. While there is a clear need for guidelines and standardisation, the first goal is to increase the prevalence of health-related messages on labels. The possible means to do this should therefore be explored; legal requirements for messages on alcoholic beverages are the ultimate means of doing this.

2. Executive Summary

2.1 Purpose

This study audited the use of health-related messages on alcoholic beverage labels. It aims to further inform the current EU strategy to support Member States in reducing alcohol related harm by addressing a lack of existing information on the extent to which alcohol labelling is implemented,.

Following research into the variation in labelling practices across EU Member States (undertaken by the 2011 PROTECT project), five health health-related messages were audited:

1. Messages warning about drinking during pregnancy;
2. Information about alcoholic strength in units or grams;
3. Information about legal age limits for purchasing alcohol;
4. Messages about drinking in moderation; and
5. Messages warning against drinking and driving.

The messages were, amongst other things, assessed in terms of their visibility, clarity, layout and relative size – all of which are considered to potentially affect consumer behaviour.

In addition, where products carried health-related messages, assessments were made of the supply and market shares for alcoholic beverage categories and for other relevant groupings (e.g. domestic vs. imported products).

2.2 Methodology

A sample of alcoholic beverage labels was collected from 15 Member States: Belgium, Czech Republic, Denmark, France, Germany, Greece, Ireland, Italy, Latvia, the Netherlands, Poland, Portugal, Romania, Spain and the UK. The countries selected cover 89% of the EU population and have all made a number of commitments under the European Alcohol and Health Forum. These countries also represent a good geographical and cultural cross-section of the EU population.

Data was collected on alcoholic beverages within the 3 main alcohol categories – beer, wine and spirits. In order to ensure an appropriate spread of data, 4 retailers of differing sizes were audited in each country.

All package sizes and types were included in the audit to include brands with high, medium and low market shares in each country. Thus care was taken not to bias the sample in favour of brands from larger manufacturers so that all labelling practices were represented.

In order to ensure that the data collection procedure was valid and reliable, a two-step approach was employed. This included an initial pilot fieldwork phase organised in the UK and the Netherlands during which the assessment procedure was verified. Subsequently, fieldwork was completed in all countries between June and August 2013.

2.3 Data analysis

The data collected has been analysed at the aggregate level for the 15 EU countries as well as for each individual country.

In addition, a market share analysis was completed to examine the proportion of the top 5 beers and top 5 spirits sold, that included a health-related message, in each of the 15 countries.

2.4 Main findings

2.4.1 Presence of health-related messages

A total of 25,730 beverage packages were audited across the 15 European countries – around half were wines, a quarter spirits and a quarter beers. Less than 5 per cent were alcohol pops and ciders (the ‘other’ category).

Overall, fewer than one in five alcohol labels (17%) contained a health-related message in addition to the alcohol content information mandatory in each country. Wine labels most often carried health-related messages (19%), with messages less frequently found on spirits (15%) and beers (14%).

Some variations were evident between countries. In France, due to legislation that requires all alcohol labelling to contain a warning about drinking during pregnancy, all beverages contained health-related messages. In all other countries studied, there is no legal compulsion for alcohol labels to include any health-related messages. Substantial variations in the presence of health-related messages exist between these countries. The countries with the highest proportion of labels with messages were Belgium (35%), Portugal (30%), the Netherlands (29%) and Germany (21%). In contrast, Greece (5%), Ireland (5%), Romania (6%) and the UK (7%) have the lowest rates of health-related messages.

2.4.2 Types of messages

The most common health-related message on labels was a warning about drinking alcohol during pregnancy; 17% of all labels included this message. All other message types were present on less than one in twenty labels (5%).

The message types least likely to appear on labels were legal age limits for purchasing or consuming alcohol and warnings against drinking and driving (both present on 1% of all labels).

Some alcohol labels contained two or more messages. Beer labels had the highest rate of messaging with an average of 1,38 messages. There were an average of 1,27 messages on spirits labels, and 1,25 messages on wine labels.

2.4.3 Additional nutrition information

In the EU, alcohol is exempt from the obligation to list its ingredients and provide nutritional information. However, over four in five (82%) of beer labels 39% of spirits and 32% of wines (containing one or more health-related message) had an ingredients list on the label.

Information on sulphites was present on almost all beers and spirits containing messages, and on over half of wines. Information on calories was rare (present on only 6% of beer packaging, 3% of spirits and 1% of wine) and no vitamins information at all was found on any labels in the sample.

2.4.4 Visibility and clarity of messages

When assessed, the majority of messages were judged to be clearly visible. Warnings for pregnant women were judged to be clearly visible on over three-quarters of the packaging on which they were present. All types of messages are least likely to be clearly visible on beer packaging than the other main alcohol categories. The widest variation occurs with messages about legal age limits, which were clearly visible on all wine packages, but under two thirds of beer packages.

The vast majority of messages were judged to be easy to understand. At least 80% of labels were assessed as clearly understandable across all alcohol categories and message types. The highest ratings were for messages concerning legal age limits (over 95% were assessed as understandable) and warnings for pregnant women (over 90%). These findings are perhaps not surprising since the legal age for consuming alcohol is a fairly straightforward fact, easy to convey clearly in a number, and pregnancy messages were most often conveyed using a conventional logo.

2.4.5 Layout of messages

The audit recorded the placement of messages (location on the package), their form (a logo, text or both) and their framing (whether or not they were set in a frame).

Considerable differences were found in the placement of messages on beer labels compared to both wine and spirit labels. On beer labels, around half of messages were located on the back, but significant proportions were on the sides or top of packages. Large differences were further found between the types of beer packaging: the majority of beer bottles carried labels on the back (62%); the majority of beer cans had labels on the sides (57%); and the majority of beer cartons/boxes contained labels on the top (52%). For wines and spirits (all packaged in bottles) the vast majority of health-related messages were on the back (over 90%).

The majority of messages were in the form of either logo or text – this was the case for the majority of beverage categories. There was, however, a notable exception for age limit information on beers – well over half of these messages (61%) were presented with both a logo and text. Messages about drinking in moderation were more likely to be presented in text than logo form. Perhaps this is not surprising since such a message does not easily lend itself to graphical representation. Warnings about drinking during pregnancy were more likely than others, across all beverages to be presented as a logo only. Messages about drinking and driving were more commonly presented using solely texts on wine, and solely logos on spirits.

Overall, health-related messages were not often set in frames. Less than one in five (18%) of messages on spirits were framed, with only a slightly higher proportion of messages framed on wine labels (21%). Messages on beers were most often framed with this most often the case on cartons/boxes (43%). Across all alcohol categories, messages referring legal age limits were most often framed and warnings for pregnant women least often framed.

2.4.6 Size of messages and labels

For each of the alcohol beverage containing a health related message, the size of the label was assessed in relation to the size of the packaging. Subsequently, the size of the message was assessed in relation to the size of the label.

Alcohol labels generally cover less than a tenth of the overall size of the packaging. This varies very little across alcohol categories – the median size of the label on all beers, wines and spirits was 7% of the package. Slightly more variation in the relative size of labels can be observed when looking across the different type of packages. Beer cans and vessels (kegs) tend to have a large label relative to the packaging – both with a median of 10%. This contrasts with bottles, which have a median of 6.5% of the total package size.

Health-related messages usually cover around a fifth of the overall label size. However, messages on spirits tended to be slightly larger, covering almost a tenth (9%) of the label. When we consider the specific messages per type of alcohol, there is some variation, as warnings about drinking during pregnancy are more often proportionally larger on beer labels than on wine or spirit labels. In contrast, messages informing consumers about units and grams are generally smaller, in relative terms, on beer and wine labels, compared to spirit labels.

2.4.7 Market share analysis for beers and spirits

In each of the 15 countries, the messaging on the top five most purchased beers was assessed. This market share analysis highlighted sharp country differences in the labelling of the top selling beers: in Belgium, Spain, France, Ireland and Poland all top selling beers included a health-related message and in Portugal 95% did. In contrast, none of the most popular beers in Greece contained a health-related message, and less than two-thirds in Italy (55%) and Denmark (60%) carried such messages.

In each country assessed, the market for spirits is more highly distributed, meaning that in none of the countries did the top five sprits combined have a market share of above 50%. As a consequence, the proportion of spirits that carried a health-related message refers to less of the total market than the top five beers. The results of the analysis show that the top 5 spirits containing a health-related message varied from none in Latvia and Romania to 83% in Belgium. Thus in no country did every top 5 spirit assessed carry a health-related message. In 9 out of the 15 countries, less than half of the top 5 spirits carried a health-related message.

2.5 Conclusion

This research has highlighted the limited presence of health messages on alcohol labelling. Any standardisation or guidelines for messaging will have limited impact if, as is currently the case, less than one in five alcohol labels carry messages. The possible means to increase the proportion of beverage labels including health related messages should therefore be explored; legal requirements for messages on alcoholic beverages are the ultimate means of doing this.

The research has also revealed wide divergence in the type and form of health-related messages on alcohol labelling across Europe. Thus, there may be a need for the development of guidelines or standardisation for each of the five types of health-related messages studied. Any such guidelines/standards would need to provide the industry with clear parameters for message placement, form, framing, relative size, language, etc. In light of the huge variety of alcohol labels in the market – and the considerable impact that standards could have on labelling – it is recommended that the alcohol industry be closely consulted throughout any process of developing guidelines for message standardisation.

The process for developing such guidelines would need to further explore the impact of messaging on demand i.e. how can messages best be presented to have the greatest impact consumer behaviour? And, what would be the impact of such messaging on alcohol consumption and sales?

It is recommended that the development of guidelines should be informed by consumer behaviour research, such as behavioural experiments and consumer surveys. Such methods would enable empirical testing of the impacts of messages on consumer attitudes and behaviours i.e. how do consumers respond to messages? Do messages influence consumers' consumption or purchasing behaviour? Do consumers' attitudes change when they are aware of the health-related messages on the alcoholic beverages they buy in stores? What are the differential effects of logos versus text messages (or a combination of the two) on consumer behaviour?

In addition, further supply-side research could use the audit data provided by this research to explore questions relating to suppliers and producers of alcoholic beverages i.e. are there public-private agreements? If so, do these agreements affect the behaviour of other suppliers and producers? What are the impacts of cross-border trade on alcohol labelling?

Continued research could also examine remaining questions in relation to alcohol labelling policy i.e. what is the most effective policy mechanism for implementing alcohol labelling? Regulation or public-private partnership? What impacts would the presence of any labelling requirements have on Member State policy?

3. Introduction

3.1 Introduction to the project

This document reports on work that sought to examine the state of play in the use of alcoholic beverage labels to inform consumers about the health aspects of alcohol consumption. This work is set in the context of the EU strategy to support Member States in reducing alcohol related harm (1) which emphasised the need for further action to inform and educate the consumer on the impact of harmful and hazardous alcohol consumption and on appropriate consumption patterns. Labelling of alcoholic beverage packaging is one means that may help consumers to make informed decisions about their alcohol use.

Product labels serve a number of purposes. These include provision of basic information about the product, marketing of the product, and provision of warnings about the dangers and health risks from the product (2). The Commission White Paper of 30 May 2007 on a Strategy for Europe on Nutrition, Overweight and Obesity related health issues, highlighted nutrition messaging as one way to better inform consumers and ensure that information is available to "support healthy decision-making in relation to the purchasing of food and drink" (3). Indeed, consumers have the right to know information about the contents of the product that they are purchasing (2).

In 1987 the European Commission issued Directive 87/250/EEC on the indication of alcoholic strength by volume in the labelling of alcoholic beverages for sale to the consumer. The Directive stipulated that the labelling of alcoholic beverages should include an indicative message of alcoholic strength by volume (4). More recently, in 2011, this has been replaced by Regulation No 1169/2011 on the provision of food information to consumers (5). As before, beverages containing more than 1.2% by volume of alcohol are required to include the package the actual alcoholic strength by volume. However, alcoholic beverages are currently exempt from provision of a list of ingredients and a 'nutrition declaration' containing information on energy content and the amounts of fat, saturates, carbohydrate, sugars, protein and salt contained, which are required for other food products. The regulation sets out the need for further analysis of the information requirements for alcoholic beverages and asks for a Commission report on this subject, and if appropriate an accompanying legislative proposal to be produced by December 2014.

Thus, the only requirement currently in place at EU level for inclusion of information about the health aspects of alcohol consumption on alcoholic beverage packaging is the requirement for information on alcoholic strength by volume (4). Provision of other health information varies between countries and between manufacturers (6-7). Data on the provision of health information on alcoholic beverages comes mostly from the US, where a standardised warning message on all alcoholic beverages was introduced in 1988 (8). This warning message is text only and warns against drinking during pregnancy, against drinking while driving a car or operating machinery, and warns of health problems. More recently, research in Europe and Canada suggests that warning messages increase the awareness of the risks of alcohol consumption, in particular those highlighted in the warnings (9-10-11). Evidence of awareness and recall of the messages is found particularly among high risk and target groups such as adolescents (12) and pregnant women (13-14). There is as yet little evidence of changes in attitudes or behaviour in response to warning labels (15-16-17-18).

Surveys have found high levels of public support for health information and warning messages on alcoholic beverages, including for nutritional information, alcohol content and health warnings (19). A Eurobarometer survey found that 79% of the EU citizens support warnings on bottles to alert pregnant women and drivers of the dangers of drinking alcohol (20).

Several studies have examined the different factors that might affect the effectiveness of health warnings. Suggested principles for the design of warning messages on labels include (21):

- Simple, clear and direct language.
- Provide new information, including evidence where possible.
- A factual and serious tone, rather than humorous.
- Aim to educate and inform, rather than be authoritarian or prescriptive of behaviour.
- If images are used they should be informational in style, and if taken from current or recent televised public education campaigns this would enhance their effectiveness.
- Initial communication objective being to increase awareness of health consequences and recommended safe drinking guidelines.

A recent review of the evidence has identified five elements which would be useful to include on labelling for alcoholic drinks (22):

1. A list of ingredients
2. Nutritional information
3. Serving size and servings per container
4. A definition of ‘moderate’ intake
5. A health warning

This study notes that alcohol labelling, and in particular information on standard drink and serving size, needs to be combined with other health education efforts as part of a broader alcohol policy (22).

In the EU, several Member States have introduced mandatory labelling for alcoholic products but the nature and scope of what is covered varies (7). For example, France requires that labels include a warning against using alcohol while pregnant, while Germany requires a statement about restriction of sales to those under the age of 18 years for alcopops. In the UK, there is an agreement that labels include a statement of the ‘units of alcohol’ contained, drinking guidelines, and advice about alcohol and pregnancy.

In a similar vein, alcohol producers have developed their own codes and commitments concerning alcohol labelling. For example, the German Brewers’ Association have introduced specific labels to be used on their products (6). In addition, voluntary commitments concerning labelling have been made by manufacturers under platforms such as the European Alcohol and Health Forum (23).

Variations in regulations and voluntary labelling initiatives across countries, types of alcohol and brands mean that it is difficult to gain an overall understanding of labelling patterns across Europe. This is further confounded by the increasingly global nature of the production and sale of alcoholic beverages, which means that alcoholic beverages sold in individual EU Member States, may carry health warnings that are determined by policies elsewhere, with implications for the usefulness of information for the end consumer. Farke (6) provided a review of labelling practices across European Union Member States. However, this study did not report on the share of products or packages carrying health-related information across the different Member States. The current study aims to paint a more comprehensive picture of the current practice on alcoholic beverage labelling across Member States of the EU.

3.2 Aims and objectives

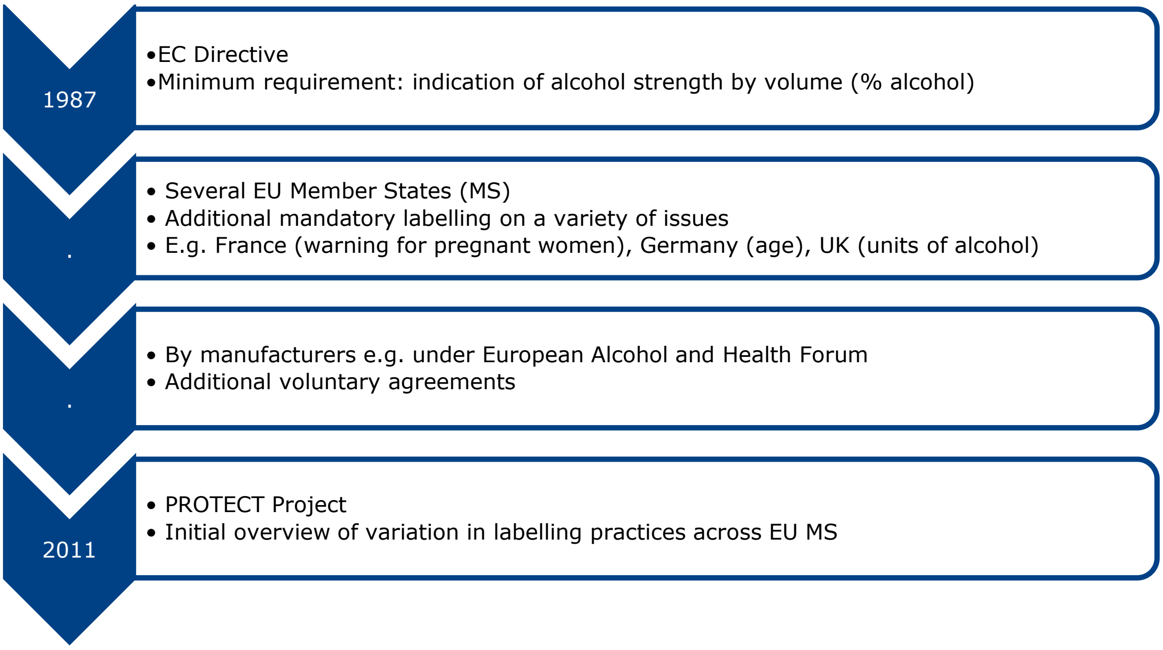
3.2.1 Landscape

The overarching aim of this study was to examine the state of play in the use of messages on alcoholic beverage labels to inform consumers about the health aspects of alcohol consumption.

> The EU strategy to support Member States in reducing alcohol related harm set out the need for more information to inform and educate the consumer on the impact of harmful and hazardous alcohol consumption and on appropriate consumption patterns (1).

An overview of the labelling practices is given below:

Figure 1: Overview of labelling practices



<u>1987</u>:
In 1987 the European Commission issued a Directive that the labelling of alcoholic beverages should include an indication of alcoholic strength by volume (4) and this minimum requirement has since been supplemented by both national regulations (7) and voluntary agreements by alcohol producers.

<u>Later on</u>:
Several EU Member States have now introduced mandatory labelling on a variety of issues.

For example: France requires that labels include a warning against using alcohol while pregnant, while Germany requires a statement about restriction of sale to those under the age of 18 years for alcopops. In the UK, labelling requirements include a statement of the 'units of alcohol' contained, drinking guidelines, and advice about alcohol and pregnancy. However alcohol labels may also contain additional information provided by manufacturers of alcoholic beverages or information required by countries outside of the EU, for example the US.

<u>In addition</u>:
Under platforms such as the European Alcohol and Health Forum (24), manufacturers have undertaken voluntary agreements on labelling. For example: the company AB InBev, producer of well-known beer brands such as Budweiser, Stella Artois and Beck's which has committed to placing pictorial warning labels on drinking during pregnancy and drink driving on the packaging of products of European origin by early in 2015 (24).

2011:
An initial overview of the variation in labelling practices across European Union Member States was undertaken by the PROTECT project in 2011 (25). The messages observed concerned legal age limits when purchasing alcoholic beverages, health warnings for target groups like pregnant women and general health warnings on alcoholic beverages.

However, this study did not report on labelling practices in two key areas: the proportion of products or packages carrying health-related information and the effectiveness of such information in terms of visibility and value.

There is a need to advance the understanding of the extent to which labelling is implemented in practice (examining different product types available from retail outlets across Member States) and to assess the effectiveness of health-related information conveyed and presented on products.

3.2.2 Research objectives

Labelling alcoholic beverages with health information could be an important tool in a strategy to reduce alcohol related harm. Health warnings and information raise awareness and could influence social norms.

Overall, the aim of this study is to build a more comprehensive picture of the health-related messages provided on alcoholic beverage labels and to understand the potential effects of the information by assessing the presentation of messages.

The focus of our study is on specific health warnings: drinking during pregnancy; information about alcoholic strength or drinking guidelines via the use of units or grams; legal age limits for purchasing alcoholic beverages; drinking in moderation; and drinking and driving.

The scope of the current study does not include assessing whether messages on labels of alcoholic beverages result in changed drinking behaviour or a changed attitude towards alcohol consumption.

4. Methodological approach

4.1 Overview of the methodology

To examine the state of play in the use of messages on alcoholic beverage labels, this report presents analysis of a sample of alcoholic beverages labels, collected from 15 Member States.

Information on alcoholic beverage labels and messages was collected from all products categorised as beers, wines and spirits. A sample of 4 retailers in each of the 15 European countries under study was drawn. The focus was on the collection of factual data on health-related information and warnings. The data was analysed at the aggregate level and per country.

Firstly we examined the label for any consumer information about the health aspects of alcohol consumption. Alcoholic beverages on which this information was not present were not examined in further detail. Alcoholic beverages on which this information was present were examined in further detail and the messages on these alcoholic beverages were analysed one by one, gathering data on size, presentation and layout.

4.2 Sampling strategy

4.2.1 Audit approach

A sampling strategy was used that allowed collection of information on a wide range of beverage labels, whilst restricting data collection to a manageable level.

The consideration that less common brands might be more variable in the types of health information displayed meant it was important to collect data on all products available in each store. This audit approach informed an understanding of the prevalence of different brands, and enabled capture of the range of practice in providing health information. Unlike research strategies in which only the big manufacturers or retailers are included, products were selected for audit on the basis of whether or not information was present on the package, regardless of manufacturer or visibility of the specific alcoholic beverages within the shop. Alcoholic beverages are categorised as beer, wine or spirits, with the addition of a fourth category (ciders, alcoholpops) in some countries. Within each retailer data was collected from all products in the specified product categories. Detailed assessment reports were completed only for packages that included health-related messages.

This sampling strategy was designed to ensure the data collected was as comprehensive as possible within each store. All sizes of beverage and all packaging types were included and less common brands as well as more common brands were assessed. It was believed that a similar range of beverages may be available across any one country, and that covering 4 retailers of different sizes would give an appropriate spread of data.

4.2.2 Countries

First and foremost it was important that this study covered as many markets as possible. Further, it was important to offer a sufficient number of observations in each country and product category within the available budget. We therefore selected 15

European countries that represent 89% of the European Union population and have a number of commitments under the European Alcohol and Health Forum. These include the 12 most populated Member States: Germany (82 million inhabitants), France (64m), UK (61m), Italy (60), Spain (45m), Poland (38m), Romania (21m), the Netherlands (16m), Greece, Belgium, Portugal (all 11m) and the Czech Republic (10m) - as well as Denmark (5m), Ireland (4m) and Latvia (2m) (26). Not only are these Member States the largest in terms of population, but this mix of countries also represents a good spread in terms of geography, with all major cultural areas represented.

Figure 2: Countries under study

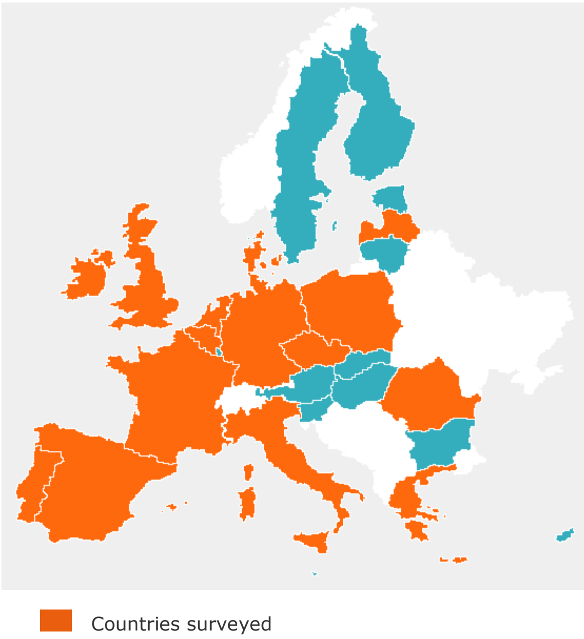


Table 1: Countries under study

	Countries	Inhabitants
1	Belgium	11m
2	Czech Republic	11m
3	Denmark	5m
4	France	64m
5	Germany	82m
6	Greece	11m
7	Ireland	4m
8	Italy	60m
9	Latvia	2m
10	Netherlands	16m
11	Poland	38m
12	Portugal	11m
13	Romania	21m
14	Spain	45m
15	UK	61m

4.2.3 Retailers and cities

Labels were unlikely to differ significantly in relation to retail outlet, as the labels are included on the product packaging during the manufacturing process. In addition, the brands with the largest share of the market were considered likely to be available throughout the country. The final sampling design included large, medium and small size retailers.

- Large retailers: hypermarkets with a very wide product range
- Medium retailers: supermarkets with a wide product range
- Small retailers: local shops with a rather limited product range

For each country, 4 retailers were visited. These 4 retailers consisted of 1 “large” retailer and 3 retailers in the “medium/small” retailer category. A large retailer was included in each country as this is generally where the widest variety of products is available.

4.2.4 Beverage categories

All the major categories of alcoholic beverage consumed across the EU Member States were covered:

1. Beers: lager, ale, stout, etc.
2. Wines: light wines, sparkling wine, fortified wines, etc.
3. Spirits: white, dark, liqueurs, etc.
4. Other: cider, flavoured alcoholic drinks, alcopops, low-alcohol drinks, etc.

The three main categories were covered in all countries. Products in the ‘other’ category were covered where relevant, based on the consumption figures of e.g. cider, which is a popular drink in the United Kingdom (27). In total, 78 other alcoholic beverages were assessed that included messages informing the consumer about health aspects, broken down as follows:

- Czech Republic: Beer-based mixes (N = 13)
- Ireland: Cider, alcopops (N = 12)
- Spain: Wine-based mixes, alcopops (N = 4)
- UK: Cider, alcopops (N = 24)

The inclusion of this ‘other’ category is important since these types of alcoholic beverage are of particular relevance in relation to harmful drinking amongst younger people. Nevertheless, authors like Anderson et al. (27) nuance this opinion in their article on alcohol appeal to minors and suggest that alcopops are not a particular problem. However, our audit found a limited number of packages compared to the beers, wines and spirits categories: our sample size is therefore too small to generate significant and generalised results. As a result, this category is often excluded from our analysis.

4.2.5 Brands and products

With an audit approach all brands and products were considered within each alcoholic beverage category. Hence, aside from the large, well-known brands with the highest market shares (from manufacturers such as AB InBev, SABMiller, Heineken, Carlsberg, Diageo, Pernod Ricard, Bacardi,..), smaller brands with a lower overall market share such as regional and retailer brands were assessed and included in the final sample. In that way, care was taken not to bias the sample in favour of particular labelling practices of larger.

4.2.6 Definition of health-related message

Five specific health-related messages were audited. Initially, others were included (see the assessment sheet in the Annex), but five were withhold for this report. These are summed up below, with some illustrative examples.

Figure 3: Health-related messages -"pregnancy warning"

Figure 4: Health-related messages - "units/grams"

Figure 5: Health-related messages - "legal age limits"

Figure 6: Health-related messages - "Drinking in moderation"

Figure 7: Health-related messages - "Drinking and driving"

4.2.7 Other criteria

Besides the sampling criteria described above, we considered the packaging of the alcoholic beverages; both in terms of the type of packaging (i.e. bottles or cans) and the size. Although including different package sizes might affect comparability, it was considered more important to include different sizes in order to assess whether labels vary according to size.

Different packages, namely cans, bottles, cartons/boxes, box in bag, vessels[1] and others, were assessed. The briefing document (see the Annex) included pictures of all types of packages). In the analysis, a selection was further made distinct between the more common package types:

- beers in bottles, cans, and cartons or boxes
- wines in bottles
- spirits in bottles

[1] A vessel is kind of pitcher, a container with a handle and spout or lip for holding and pouring liquids, mostly beer.

And the following common sizes were included:

- bottles of beer with a volume of 33cl and 50cl
- cans of beers with a volume of 33cl and 50 cl
- carton or boxes with a volume of 25cl or 33cl
- bottles of wine with a volume of 75cl
- bottles of spirits with a volume of 50cl, 70cl and 75 cl

Specific gift packages were excluded from the audit such as “1 meter beer” and “Easter gifts”.

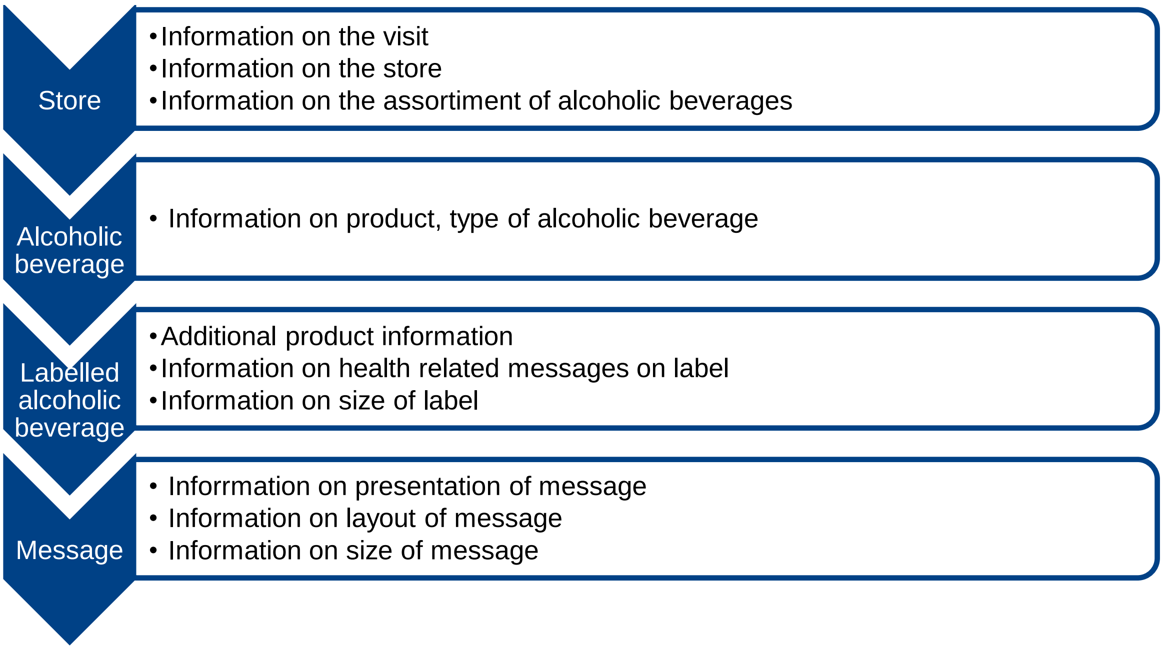
4.3 Data gathering

4.3.1 Assessment sheet

To record the information gathered by the team of assessors in a structured and detailed manner, an assessment sheet was developed. The nature and content of the sheet was discussed with the EAHC team at the kick-off meeting. The assessment sheet was also thoroughly discussed by the project team and a small group of experienced fieldwork managers to ensure its suitability for the task and that it was easy to understand for the assessors.

The assessment sheet is included in the Annex and was built around the following topics:

Figure 8: Assessment sheet structure



4.3.2 Fieldwork

Fieldwork was conducted using small specialist panels of well-trained assessors in every country to visit the retailers and to conduct the observation exercise.

Prior to the assessor team commencing the observation exercise, they were briefed by the project team and provided with a briefing document. The briefing provided the assessors with a short project background and clear guidelines on how to answer the questions on the assessment sheet and on how to take the pictures (including examples).

The briefing document included the following sections:

- **Background and objectives**
  A short project background: briefly explaining the research objectives and context behind the survey, examples of messages.

- **Product categories**
  Information on product categories (alcoholic beverages) to be assessed to ensure that the assessor understands the markets they are assessing.

- **Methodology**
  This topic instructed the assessors on the methodology they should use in order to ensure that the exercise was conducted in a uniform manner in all countries and for all product categories. The assessors were provided with an accreditation letter in case they were asked any questions. The assessment sheet was used to gather the information. Besides the assessment sheet, the assessors were provided with a list of retailers to be visited.

  The task of assessors in each country consisted of:
  - ✓ Visiting the retailers on the list
  - ✓ Completing the assessment sheet correctly and fully
  - ✓ Taking pictures
  - ✓ Uploading the assessment sheet and pictures on the online platform
  - ✓ Debriefing after the first day of fieldwork; communication/updates during fieldwork

  The different product categories were assessed in each shop. During their visit, the assessors searched for health-related information on labels, as instructed during the briefing. The assessor firstly counted the number of products in each category then examined each for the presence of health-related messages; where messages were present the assessment sheet was completed either on paper or electronically via an application on smartphone. Hence, there is one completed assessment sheet per product that displayed health-related messages. For the products not carrying health-related messages besides the % alcohol, no information was recorded.

- **Assessment sheet**
  The building blocks and all questions within each building block of the assessment sheet were discussed in detail.

- **Date and time requirements**
  This section instructed the assessors about the practical survey requirements.

- **Contact details**
  The contact details for the GfK project team were provided to ensure that the assessors and their supervisors could contact the project team in case of any queries.

- **Annexes**
  The annexes contained a list of the retailers to be visited and a copy of the assessment sheet.

The final briefing document can be found in the Annex of this report.

4.3.3 Pilot survey

A pilot phase was conducted before launching the main field phase (2-step approach). The goal of this pilot phase was to simulate the real study and to test and verify all fieldwork materials. The materials tested in the pilot included the assessment sheet, the accreditation letter and the briefing document.

The pilot was carried out in two countries (the UK and the Netherlands) between 23 May and 7 June 2013. The team of assessors in the pilot countries received a personal briefing on the assignment, based on the briefing document. The assessors were instructed to complete the audit as they would in the main field phase of the study. In each pilot country, 4 retailers were visited. The retailers were to be selected from the list below.

Table 2: Pilot countries, retailers and cities

Pilot country	Retailers		Cities
Netherlands	Albert Heijn (XL) C1000 Jumbo	Plus Deen Lidl Jan Linders Local small shops	Amsterdam, Rotterdam
UK	ASDA TESCO Sainsbury's	Waitrose Londis Co-op Costcutter Eurospar Local small shops	Birmingham, London, Glasgow

Beers, wines, spirits and the other category (cider and alcopops) were covered during the pilot in the UK. In the Netherlands, beers and wines were covered, as spirits are sold only in separate liquor stores; during the main field phase liquor stores were included. Within each category, all products containing health-related information (apart from the mandatory percentage of alcohol) were audited.

Based on the feedback of the national assessor teams and outcomes of the pilot phase, the field documents were updated. These revised documents are appended to this report:

- The assessment sheet
- The briefing document

A summary of the main revisions and/or learnings is presented below:

Table 3: Topics and revisions after the pilot phase

Topic	Revision/learnings/instructions
Overall	Retailers per country are to be spread among the cities mentioned in the list.
Assessment sheet	Product count: it works best if the assessor first counts all products per type of alcohol and then continues with the detailed audit of each category. The type of packaging needs to be indicated to have a better understanding of the audited product. The exact number should be written down (instead of '1' or 'more than 1'). Besides the categories 'logo' and 'text', the combination of logo and text is interesting to add as an answer category. Routing was clarified/visualised (to skip questions about a logo where there was no logo displayed).
Precoded lists	The pre-coded lists were updated based on the frequently mentioned answers during the pilot.
Brand lists	Important instruction to the shopper: not only the brands on the pre-coded lists need to be evaluated/audited. These lists serve as a help for the assessor and for the analysis afterwards, and need to be used. The assessor can tick the appropriate brand name (from the drop down menu) and if he/she encounters a product for which the brand name is not available on the list, he/she needs to write it down/type it in manually.
Letter	Clarification to the assessors that this letter does not require the authorization of the retailer, neither does this letter need to be signed by the retailer owner/manager. The letter has solely an informative purpose.
Products	Products that need to be assessed include the low alcohol versions of beers, wines and spirits.

Topic	Revision/learnings/instructions
Label	A label may be paper or be printed on the bottle or can itself. For example, this is the case for Desperados. Where it is printed direct on the package, it does not mean that the size of the label compared to the packaging (e.g. bottle) is 100%.

After implementing the feedback on the pilot, the main fieldwork phase was launched.

4.3.4 Main survey

Fieldwork in 15 Member States was supervised and coordinated centrally by the GfK project team and in each individual Member State was overseen by national project managers/supervisors who were in close contact with the central project team.

An online central platform was used to coordinate and monitor the fieldwork in each country and for communication between the central coordination team and the national supervisors. All project documents (such as the assessor briefing document and project planning) were posted on this platform. Additional briefing information and last minute updates were provided in the same way. Assessors entered the study results (observations written down on the assessment sheet) and uploaded the pictures of the product labels on the platform.

Fieldwork was completed in all countries by 20th August 2013. The final countries to finish fieldwork were Poland, Portugal, Germany, Romania and Spain (where difficulties were experienced when visiting the retailers).

In the table below the following fieldwork information is presented for each country:

- Fieldwork period: start and end date of the fieldwork period
- Number of assessors: the number of assessors recruited to visit the retailers
- Number of retailers contacted: the number of retailers contacted by the assessors to obtain a complete audit in 4 retailers per country as specified in the survey requirements
- Name of the audited retailers: the name of the stores where the assessors conducted the audit
- Fieldwork description: short overview of the field progress per country including the main challenges (e.g. not allowed to take pictures, approval needed from headquarters to conduct the audit) if any and how these were handled (actions taken).

Table 4: Fieldwork details per country

Country	Fieldwork period		# auditors	# retailers contacted	Name of the audited retailers	Method	Fieldwork issues
Belgium	25/06/2013	2/07/2013	5	5	1.Colruyt 2.Lidl 3.Match 4.Lidl	A & B 3 paper 1 tablet	One auditor was denied access to a store. However, during the second attempt in another store the auditor was allowed to perform the audit. The store itself, rather than the headquarters refused permission. Lidl in Brussels has the special policy that the spirits are behind the cash desk and the shopper cannot access them.
Czech Republic	25/06/2013	4/07/2013	4	4	1. Billa 2. Penny Markt 3. Penny Markt 4. Spar	A All paper	No real issues appeared in Czech-Republic. No audit was hindered.
Denmark	25/06/2013	24/07/2013	4	5	1. Fortex 2. Irma 3. Netto 4. Netto	A & B 3 paper 1 tablet	One of the headquarters of the retailers was contacted by mail as an audit was denied by the store itself. Headquarters replied positive and access was granted from the headquarters to perform the audit. There was no similarity between stores of the same retailer.
France	25/06/2013	15/07/2013	4	4	1. Intermarché 2. Carrefour 3. Local small store 4. Mono Prix	A & B 3 paper 1 tablet	No real issues appeared in France. No audit was hindered. However, assessors were hindered to take pictures of specific products.

Country	Fieldwork period		# auditors	# retailers contacted	Name of the audited retailers	Method	Fieldwork issues
Germany	25/06/2013	15/08/2013	6	7	1. Lidl 2. Penny Markt 3. Edeka 4. Penny Markt	A & B 2 paper 2 tablet	Auditors were denied access based on the fact that the stores needed an authorization letter from the retailers' headquarters. Our own authorization letter was not sufficient. There was no similarity between stores of the same retailer.
Greece	25/06/2013	8/07/2013	5	7	1. Sklavenitis 2. Lidl 3. Lidl 4. Local small store	A All paper	Retailers in Greece need an authorization from their headquarters, which was granted.
Ireland	25/06/2013	9/07/2013	5	5	1. Dunnes 2. Centra 3. Londis 4. Spar	A All paper	Auditors were denied access based on the fact that the stores needed an authorization letter from the retailers' headquarters. Our own authorization letter was not sufficient. One auditor could perform the audit but not take pictures of the products.
Italy	25/06/2013	3/07/2013	4	4	1. Esselunga 2. PAM 3. Conad 4. Local small store	A All paper	No real issues appeared in Italy. No audit was hindered.

Country	Fieldwork period		# auditors	# retailers contacted	Name of the audited retailers	Method	Fieldwork issues
Latvia	25/06/2013	7/07/2013	4	4	1. IKI 2. Elvi 3. Supernetto 4. Local small store	A All paper	No audit was hindered.
Netherlands	4/06/2013	16/06/2013	5	8	1. Jumbo 2. Lidl 3. Plus 4. Local small store 5. Albert Hein XL	A & B 3 paper 1 tablet	Stores in the Netherlands do not sell spirits; the auditor had to try a few "slijterijen" before being able to get an audit including spirits. No audit was hindered.
Poland	25/06/2013	9/08/2013	9	16	1. Auchan 2. Biedronka 3. Local small store 4. Local small store	A All paper	In Poland some stores asked for their headquarters' approval, other stores refused permission for audits. Requests to headquarters were never answered (positively). The fieldwork area was enlarged, so we were able to audit local small stores.
Portugal	25/06/2013	16/08/2013	5	6	1. Pingo Doce 2. Lidl 3. Lidl 4. Local small store	A All paper	Retailers in Portugal need an authorization from their headquarters. Headquarters replied positive and access was granted from the headquarters to perform the audit. However, assessors were sometimes hindered to take pictures of specific products.

Country	Fieldwork period		# auditors	# retailers contacted	Name of the audited retailers	Method	Fieldwork issues
Romania	25/06/2013	2/08/2013	5	8	1. Kaufland 2. Lidl 3. Lidl 4. Penny Markt	A All paper	Auditors were denied access by the stores themselves (not by the headquarters). In other stores, auditors were prevented from taking pictures.
Spain	25/06/2013	30/07/2013	8	10	1. Hipercor 2. DIA 3. Spar 4. Eroski	A All paper	A lot of stores were not willing to let the audit be performed; in other stores auditors were not able to take pictures.
UK	4/06/2013	16/06/2013	3	15	1. Tesco 2. Costcutter 3. Waitrose 4. Costcutter	A All paper	Headquarters' approval was in some stores a topic and in others it was not mentioned. No similarities in the reason why an auditor was denied access. Costcutter has the policy to place the spirits behind the cash counter and customers cannot reach these items without approval of the store staff. Therefore, there was no similarity between stores of the same retailer, as one auditor was granted access, another was not. Tesco had a delivery problem during the time of the audit, so no cider or alcopops were in store.

4.3.5 Visualisation of data gathering

The pictures on the next page show shop racks of beverages. Shop 1 and shop 2 have the same assortment of beverages, yet a different stock. Every type of beverage was assessed, so the assessment outcome is the same in shop 1 and shop 2: 24 different beverages are assessed to see how many of them have health-related messages on their labels.

Furthermore, the orange brand is sold in two package types (cans and bottles) and both are included in the assessment. If these ‘orange’ beverages in cans in rack 1 and rack 4 are the same, only one assessment sheet is completed. If the beverage in orange bottles in rack 2 and rack 3 are different in volume, two assessment sheets are completed.

Suppose that the beverage circled in red on rack 3 and the ‘orange’ bottles next to it on rack 3 both have health-related message(s) on their labels. Whether there is one bottle of a beverage or many in a store, the same weight per product is applied. So, for the single bottle circled in red, one assessment sheet is completed and for all the orange bottles next to it, only one assessment sheet is completed.

Figure 9: presence of alcoholic beverages in shop racks

4.4 Data analysis

4.4.1 Quality control

Quality control measures were implemented throughout the fieldwork period.

At the fieldwork start, briefings were held with the supervisors of the countries where audits were to be performed. Afterwards, these supervisors had briefing calls with the assessors that would visit the retailers. The survey specifications were explained and the assessment sheet was discussed in detail. The assessors were also provided with a detailed briefing document and opportunities to perform some exercises and tests.

During the fieldwork period, the supervisors were in close contact with the assessors and issues were reported to the central coordination team. Issues arose for instance when assessors were not allowed to take pictures or to assess spirits behind the cash registry.

Before each assessment sheet was accepted, it was checked by the project team for quality, consistency and completeness. These checks included: verification of the store name, address, city/country; the number of messages; the routing of the assessment sheet; and the use of pre-coded lists. The data were checked for wrong, inconsistent or missing answers and cleaned where necessary before being included in the analysis. Data quality checks were conducted across countries, product categories and assessors. Furthermore, 10% of the assessments were fully checked by comparing the pictures to the assessment sheet answers for each question.

4.4.2 Representation of data

As the value of this study is to relate the data to the EU Regulation 1169/2011 (5) on the provision of food information to consumers, a meaningful representation of the data is to take into account the market share of the most common alcoholic products in each country.

A market share analysis examined specifically whether the top 5 consumed beers and top 5 consumed spirits in the 15 European countries include health related messages. In relation to the market share of the alcoholic products in each country, we calculate the share of products displaying health-related labelling.

For this specific type of market share analysis, the data were analysed against data provided by Euromonitor (28). Established in 1972, Euromonitor International is one of the leading providers of global strategic intelligence on industries, countries and consumers. As an independent company, Euromonitor offers unmatched detail and unbiased content coverage. The information is collected by research experts in 80 countries, based on robust and proven methodologies.

Euromonitor provided market share data in terms of the number of litres of beer and spirits per brand sold. This data follows the purchase process, during which the decision to buy a certain alcoholic beverage is made. As we only assessed alcoholic beverages in retailers in this report, we were mostly interested in the off-trade sales of alcohol. "Off-trade" is a term typically used in reference to sales of alcoholic drinks and refers specifically to sales through retail outlets. Off-trade sales represent total sales through the following channels: Supermarkets/Hypermarkets, Discounters, Convenience Stores, Independent Small Grocers, Forecourt Retailers, Food/drink/tobacco specialists, Other Grocery Retailers, Non-Grocery Retailers, Vending, Homeshopping, Internet Retailing and Direct Selling.

Euromonitor data was from 2013 and used the following definitions of beers and spirits:

- **Beer**: An alcoholic drink usually brewed from malt, sugar, hops and water and fermented with yeast. Some beers are made by fermenting a cereal, especially barley, and therefore not flavoured by hops. Alcohol content for beer is varied – anything up to and over 14% abv (alcohol by volume), although 3.5%-5% is most common. Beer is often loosely classified by the nature in which it is made: Top fermented (i.e. ales, bitters, wheat beers, stouts, porters etc.) Bottom fermented (i.e. all lagers) Note: pre-mixed beers such as beer/lemonade, beer/whisky or beer/tequila mixtures are excluded from the data. These are included in flavoured alcoholic beverages (FABs). This is the aggregation of lager, dark beer, stout and LABs/NABs
- **Spirit**: This is the aggregation of whisk(e)y, brandy and Cognac, white spirits, rum, tequila, liqueurs and other spirits.

The consumption of beer and spirits regards the purchase of these alcoholic drinks in one of the following channels (with the following definitions):

- **Store-Based Retailing:** Store-based retailing is the aggregation of grocery retailers and non-grocery retailers. Sales of new and used goods to the general public for personal or household consumption from retail outlets or market stalls.
- **Grocery Retailers:** This is the sum of supermarkets/hypermarkets, discounters, convenience stores, independent small grocers, forecourt retailers, food/drink/tobacco specialists and other grocery retailers.
- **Discounters:** Discounters comprises hard discounters and soft discounters. Hard discounter: first introduced by Aldi in Germany, and also known as limited-line discounters. Stores are typically 300-900 square metres and stock fewer than 1,000 product lines, largely in packaged groceries. Goods are mainly private-label or budget brands. Soft discounter: usually slightly larger than hard discounters, and also known as extended-range discounters. Stores typically stock 1,000-4,000 product lines. As well as private-label and budget brands, stores commonly carry leading brands at discounted prices. Discounters excludes mass merchandisers and warehouse clubs. Example brands include Aldi, Lidl, Plus, Penny, Netto.
- **Food/drink/tobacco specialists**: Food/drink/tobacco specialists includes food and non-alcoholic drinks specialists, alcoholic drinks stores and tobacconists. Food and non-alcoholic drinks specialists are chained or independent retail outlets typically with a selling space of under 400 square metres and with a primary focus on selling mainly one category of food or non-alcoholic drinks. Alcoholic drinks stores are retail outlets with a primary focus on selling beer/wine/spirits/other alcoholic beverages. Example brands include: Threshers Gall & Gall Liquorland Watson's Wine Cellar.
- **Hypermarkets:** N/A.
- **Small Grocery Retailers:** Small grocery retailers are chained or independent retail outlets with a selling space of under 400 square metres and with a primary focus on selling food/beverages/tobacco and other groceries. Small grocery retailers is the aggregation of: convenience stores, independent small grocers, forecourt retailers.
- **Convenience Stores:** Convenience stores are chained retail outlets with a selling space of under 400 square metres and with a primary focus on selling

food/beverages/tobacco and other groceries. Convenience stores have several of the following characteristics: extended opening hours, located in residential neighbourhoods, range includes two or more of the following product categories: audio-visual goods (for sale or rent), take-away food (ready made sandwiches, rolls or hot food), newspapers or magazines, cut flowers or pot plants, greetings cards.

- **Forecourt Retailers:** Forecourt retailers format is an aggregation of: chained forecourt retailers; independent forecourt retailers. Forecourt retailers are chained or independent retail outlets with a selling space of under 400 square metres and with a primary focus on selling food/beverages/tobacco and other groceries and located on a petrol/gas/service station forecourt. Forecourt retailers have several of the following characteristics: extended opening hours, located in residential neighbourhoods, range includes two or more of the following product categories: audio-visual goods (for sale or rent), take-away food (ready made sandwiches, rolls or hot food), newspapers or magazines, cut flowers or pot plants, greetings cards. Example brands include: BP Connect and Shell Select.
- **Independent Small Grocers:** Retail outlets selling a wide range of predominantly grocery products. Owned by an entrepreneur owning and operating one or more (but fewer than ten) retail outlets. Mainly family concerns. Food usually accounts for at least 50% of total retail sales value.
- **Supermarkets:** N/A.
- **Other Grocery Retailers:** Other grocery retailers are chained or independent retail outlets (typically with a selling space of under 400 square metres), kiosks, market stalls or street vendors with a primary focus on selling food, beverages and tobacco. Other grocery retailers also includes health food stores, confectioners/newsagents/tobacconists (CTNs), food & drink souvenir stores and regional speciality stores. Wine sales from Vineyards are included here.
- **Non-Grocery Retailers:** Non-grocery retailers are retailers whose primary focus is selling merchandise which is not food/drink/tobacco from retail outlets, kiosks or market stalls. Non-store retailing is the sale of new and used goods to the general public for personal or household consumption from locations other than retail outlets, kiosks or market stalls.
- **Non-Store Retailing:** Non-store retailing is the aggregation of: Vending, Homeshopping, Internet Retailing, Direct selling.
- **Direct Selling:** Direct selling is the marketing of consumer goods directly to consumers, generally in their homes or the homes of others, at their workplace and other places away from permanent retail locations. Goods are delivered directly to the customer.
- **Homeshopping:** Homeshopping is the sale of consumer goods to the general public via mail order catalogues, TV shopping and direct mail. Homeshopping transactions involve consumers purchasing goods in direct response to an advertisement or promotion through a mail item, printed catalogue, TV shopping programme, or internet catalogue whereby the order is placed and payment is made by phone, by post or through other media such as digital TV. Excludes sales on returned products/unpaid invoices
- **Internet Retailing:** Internet retailing is the sale of consumer goods to the general public via the internet. Internet retailing includes ‘collect at store’ options, where the order is made via the internet and the goods are collected by the customer from a store, providing payment is made via the internet rather than in the store. Internet retailing includes mobile retailing (m-commerce): internet retailing transactions made via wireless devices, such as mobile phone, PDA, BlackBerry.

- **Vending:** Vending (automatic merchandising) is the sale of products at an unattended point of sale through a machine operated by introducing coins, bank notes, payment cards, tokens or other means of cashless payment. Vending includes vending systems installed in public and semi-captive environments only.

4.5 Comparability of the data with previous results: the case of the UK

In the United Kingdom, the alcohol industry entered into an agreement with the Government in 2007 (29) to voluntarily place sensible drinking messages on all alcoholic beverage containers sold in the UK. The ideal sensible drinking message would include the following 5 elements (30):

- Alcohol content in standard units. One unit is equivalent to 10 ml or 8 grams of pure alcohol.
- Sensible Drinking Messaging: “Know Your Limits”, “Enjoy Responsibly”, “Drink Responsibly”.
- Drinkaware Trust website address or logo
- Daily benchmarks: “UK Chief Medical Officers recommend men do not regularly exceed 3-4 units daily and women 2-3 units daily”.
- Pregnancy information: “Avoid alcohol if pregnant or trying to conceive”.

Implementation of the agreement was monitored by Campden and Chorleywood Food Research Association (CCFRA). A survey found that 43% of samples gave information relating to unit content per container and 32.5% of all samples carried a reference to the Drinkaware Trust. However, only 2.4% of the samples carried the Chief Medical Officers (CMO) lower risk guidelines in the agreed format (31). The evaluation was updated in 2009 (32). In 2010, a consultation set out options for further action (30). Further public-private partnership agreements on alcohol labelling were made as part of the Public Health Responsibility Deal, launched in England in 2011 (33). 93 partners have currently (as of 15 Nov 2013) signed up to the pledge on alcohol labelling, stating that: "We will ensure that over 80% of products on shelf (by December 2013) will have labels with clear unit content, NHS guidelines and a warning about drinking when pregnant." (34)

This previous research in the UK focused on assessing a representative sample of alcoholic beverages in stores, giving a higher weight to alcoholic beverages that were more visible in stores. In the current study, the approach is to assess every alcoholic beverage without weighting by numbers present. Therefore, the percentages related to alcohol in general and all alcohol producers are different. The big partners that signed the agreement have a smaller influence on the data in this report. Therefore, the percentages in this report are much lower.

5. Detailed survey results

As described before, labels and messages on alcoholic beverages across a range of types of retail outlet in 15 European countries were audited and information recorded on a detailed assessment sheet. This chapter presents the detailed findings, looking firstly at the presence of health-related messages across the countries sampled and the types of messages present. It then goes on to explore the presentation, layout and size of the messages recorded across the main categories of alcoholic beverages (beer, wine, spirits).

The chapter concludes with an analysis of the market share in the 15 different countries for beers and spirits. The country reports can be found in the Annex.

The research focuses the following units of analysis:

- the alcoholic beverage (some information on all alcoholic beverages within the store, more extended information on the alcoholic beverages that included at least one health-related message)
- the health-related message

In total, we talk about:

- Limited information on all 25,730 alcoholic beverages
- Information on 4,317 alcoholic beverages with at least one health-related message on the label
- Detailed information about 4,796 health-related messages

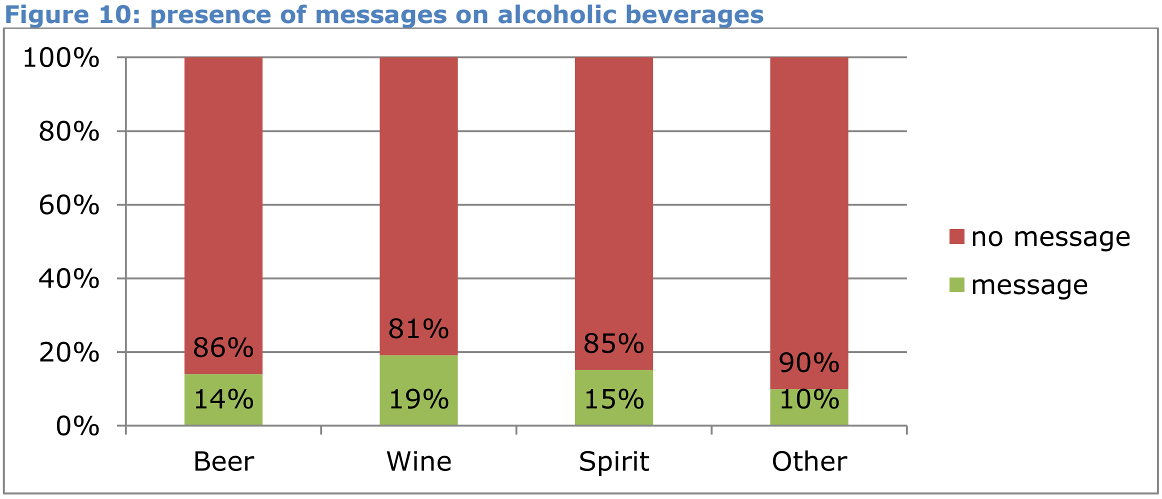
As outlined before, the results at the country level are touched upon within this result chapter, but do not form the focus. More information at the country level can be found in the Annex.

5.1 Presence of health-related messages and origin of alcoholic beverages

A total of 25,730 beverage packages were audited across the 15 European countries. Around half of these were wine, around a quarter spirits and a quarter beers. Less than 5 per cent were alcohol pops and ciders (our ‘other’ category). Fewer than one in five presented one or more health-related messages in addition to mandatory information about alcohol content, with some variation in this proportion across the beverage types. More precisely, 17% all alcoholic beverage packages examined for this study include one of the five assessed messages on their label. The percentages of messages on all types of alcohol are the following for the five health-related messages we audited:

- Warning for pregnant women: 17%
- Information about units/grams: 2%
- Legal age limits for purchasing or consuming alcohol: 1%
- Drinking in moderation: 3%
- Drinking and driving: 1%

Figure 10: presence of messages on alcoholic beverages



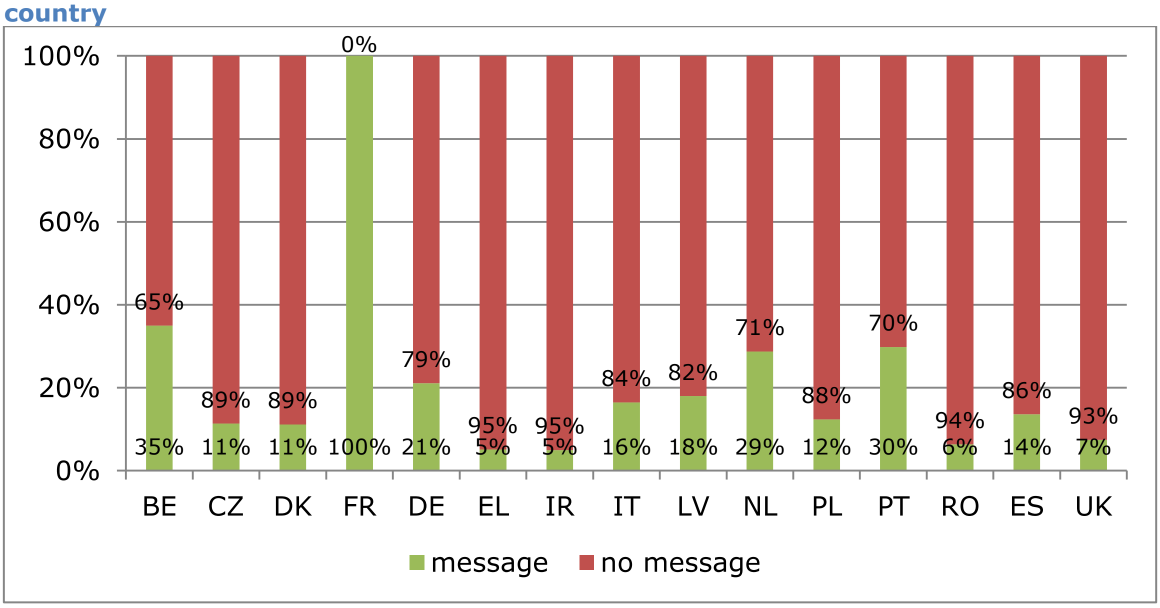
N=25,730 alcoholic beverages audited

Some variation by country is evident:

- Packages in BE, FR, DE, LV, NL, and PT are more likely than the sample as a whole to display at least one health-related message
- Packages in CZ, DK, EL, IR, IT, PL, RO, ES and UK are less likely than the sample as a whole to display at least one health-related message

These findings are interesting given the context of variation in regulation and voluntary agreements in the different countries. For example, UK has strong voluntary agreements in place and yet a lower than average likelihood of health message presence on packaging.

Figure 11: presence of health-related messages on labels of alcoholic beverages per country

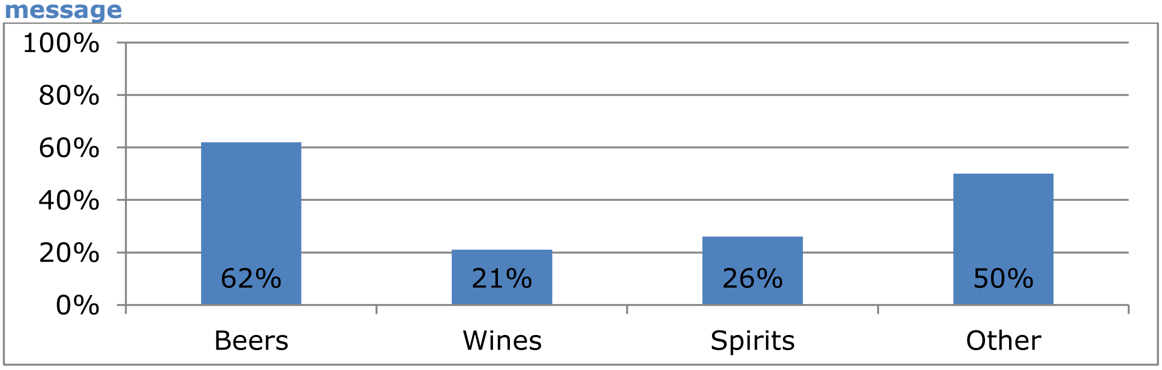


N=25,730 alcoholic beverages audited

In France, a warning about drinking during pregnancy is compulsory on all alcohol labelling. Therefore, health-related messages would be expected to be present on all alcoholic beverages.

Looking at the origin of the product on the 4,317 packages with messages for which we assessed this kind of information, the percentage originating in a different country from the country of sale varies, as might be expected, across beverage types. Beer is most likely to be manufactured and sold in the same country (62%) and wines most likely to be from non-domestic manufacturers (74%). These variances are likely to have impacts on the type and presentation of label information (language, adherence to country specific legislation and guidelines, etc.). For instance, because a warning for pregnant women is compulsory in France, it may affect the presence of this warning on wine originating in France and sold in other countries.

Figure 12: domestic origin of alcoholic beverages which carried a health-related message



N = 4,317 packages with at least one health-related message

This variation should be borne in mind when we examine variations in language and presentation in different countries. It may also go some way to explain the apparent inconsistencies mentioned above between strength of regulation and presence of messages. We do not have data on the product origin where health messages were not present on packaging. Therefore, it is difficult to assume that these beverages would follow a similar pattern to that revealed for beverages with health-related messages. Regulation, guidance and government agreements with manufacturers made on a country-by-country basis may have limited impact on practice since the majority of alcohol sold originates non-domestically, but we cannot be certain about this assumption.

Looking at origin by beverage type and country (for packages with at least one health-related message), there are some wide variations:

- In Denmark, almost all (93%) of the beverages assessed were non domestic in origin
- In France and Italy, over 60% of beverages assessed were domestic in origin (accounted for largely by wine in France and by wine and beer in Italy– only 4% of the wine assessed in Italy was non domestic in origin)
- In Portugal, high proportions of domestically produced wine and beer result in the highest proportion of beverages of domestic origin amongst all the countries included: three quarters (74%) of the beverages we assessed in Portugal were of domestic origin

5.2 Types of health-related messages

There are high levels of public support for health information and warning labels on alcoholic beverages and consumer and public health organisations have called for improved labelling (19). However, there is a lack of consensus about the best elements to include. A recent review of the literature suggests that the following information on alcohol labels is useful to consumers: a list of ingredients; nutritional information; serving size and servings per container; a definition of 'moderate' intake; and a health warning (22). This review noted that none of these elements are legally required in most countries and concluded that:

> *"Current evidence seems to support prompt inclusion of a list of ingredients, nutritional information (usually only kcal) and health warnings on labels. Standard drink and serving size is useful only when combined with other health education efforts. A definition of 'moderate intake' and recommended drinking guidelines are best suited to other contexts.''*

Others have made comparisons with the experience of the introduction of health warning messages on tobacco labels in the USA and have concluded that, unlike tobacco labelling, health warnings on alcohol labels affect awareness, but have little impact on behaviour (35). These authors conclude that:

> *"Alcohol warning labels are an increasingly popular alcohol policy initiative. It is clear that warning labels can be ineffective, but the tobacco experience suggests that effective warning labels are possible. Any introduction of alcohol warning labels should be evaluated in terms of effects on attitudes and behaviour.''*

In this context, our audit looked for the presence of the five health-related messages and for presence of ingredients lists and nutritional information. The table below presents information on the presence of each of the five health-related messages for the whole sample (25,730 alcoholic beverage packages):

- Almost a fifth of wines, and over a tenth of beers and spirits displayed a warning for pregnant women
- Messages about drinking and driving appeared on less than 1% of wines and spirits packaging and only 2% of beers
- Messages about drinking in moderation were over twice as likely to appear on beers and spirits as on wine
- Wines are more likely than other beverage types to display a warning about drinking during pregnancy, but less likely to display any of the other messages (this may be due in part to the dominance of France as a wine producer and the mandatory pregnancy warning there)

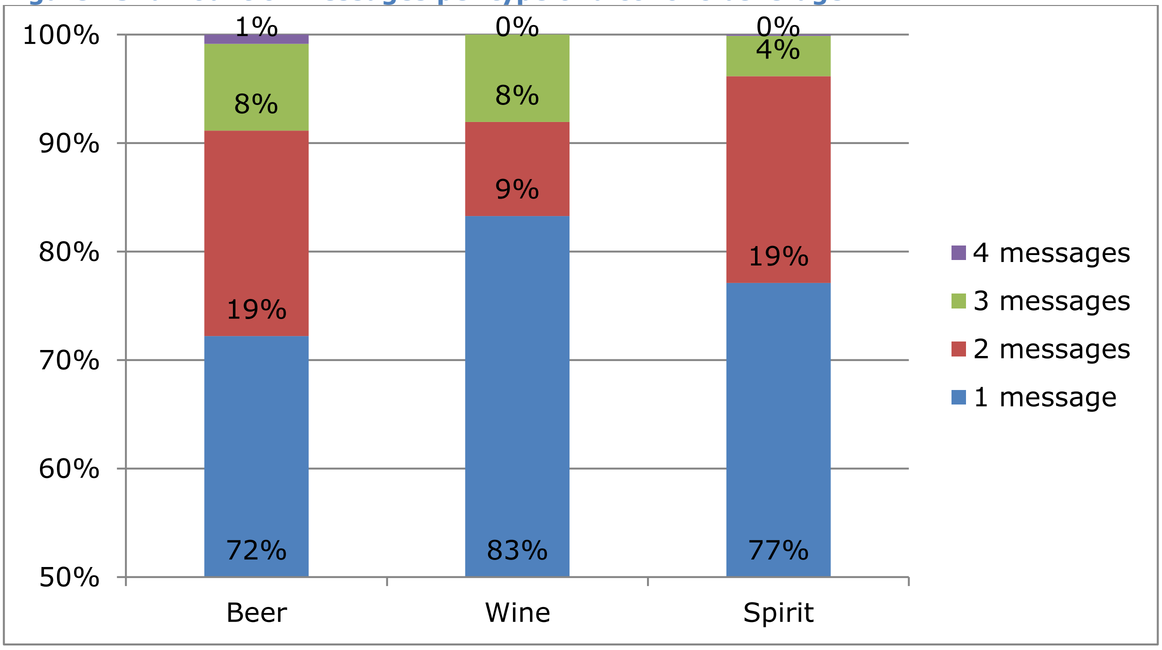
Table 5: presence of type of messages per type of alcoholic beverage

Type of message	Beer	Wine	Spirit	Other
Warning for pregnant women	11.4%	18.7%	13.4%	7.8%
Information about units/grams	2.5%	1.7%	0.9%	4.5%
Legal age limits for purchasing or consuming alcoholic beverages	1.5%	0.0%	1.7%	1.1%
Messages about drinking in moderation	4.5%	1.8%	4.5%	6.9%
Drinking and driving	2.3%	0.1%	0.1%	0.1%

N = 25,730 alcoholic beverages audited

At least one of the 5 health-related messages was present on 4,317 of the 25,730 beverage packages assessed; 14% of all beer packaging, 19% of wine and 15% of spirits contained at least one health-related message. The remainder of this section refers to this data set. Of those 4,317 alcohol packages with messages, we see a variation in the number of messages. On average, there were 1,38 messages on beer packages, 1,25 messages on wine packages and 1,27 messages on spirits packages.

Figure 13: amount of messages per type of alcoholic beverage



N = 4,317 packages with at least one health-related message

The most commonly present message was a warning about drinking alcohol during pregnancy, present on 61% of beers, 68% of wines and 68% of spirits with at least one health-related message (N = 4,317). Messages about drinking in moderation were the second most frequently present, but present on only half as many beer and spirits packages as pregnancy messages (31% and 34% respectively) and only on 10% of wines.

Least likely to appear were messages about drinking and driving (on 16% of beer packages with messages and 1% of spirits) and information about legal age limits for drinking (present on 10% of beers with messages and 13% of spirits). Neither of these messages appeared on any of the wine packages assessed. Since a great deal of alcohol is sold in a country different from its place of manufacture and age limits vary, it is likely that it is easier for manufacturers to omit this information than it would be to produce different information on labels for sale in different countries.

There are some interesting variations across message and alcohol category:

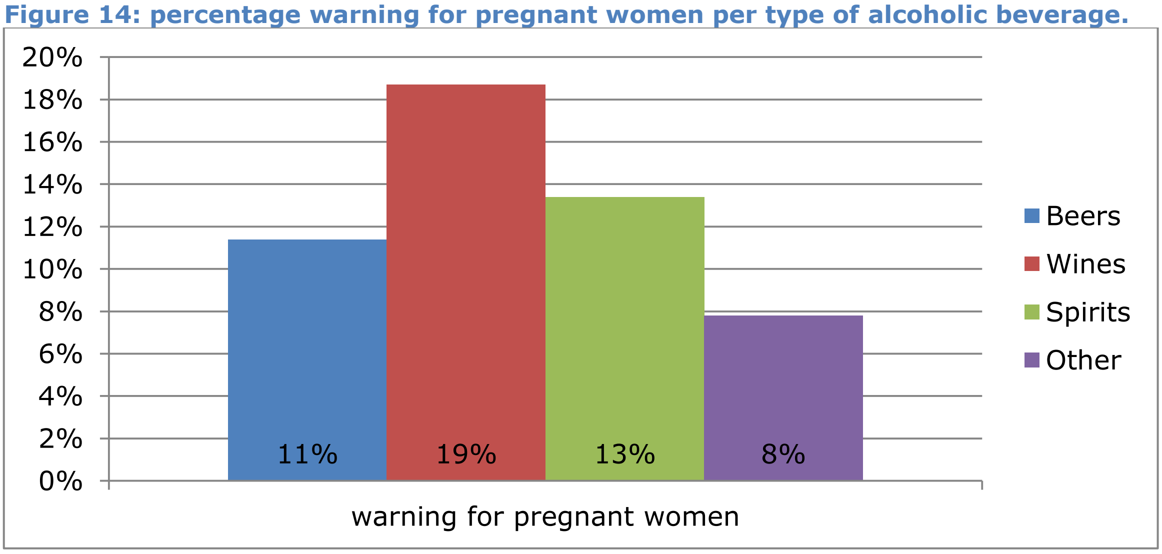
- Wines are less likely than other categories to have specific health-related messages, with the exception of messages relating to drinking in pregnancy
- Messages about drinking and driving appear very rarely on any packaging other than beers, where they are present on 16% of packages with messages

5.2.1 Warning for pregnant women

This is the most frequently and consistently present health-related message across all packages with at least one message. This warning has been mandatory in France since 2007 (36) but is currently not mandatory in any of the other 14 countries (although it is the subject of voluntary agreements in some, such as the UK). In the UK, the preferred pregnancy warning reads: "avoid alcohol if pregnant or trying to conceive", but a logo may be used instead. 93 partners in the UK have currently signed up to the pledge on alcohol labelling, stating that: "We will ensure that over 80% of products on shelf (by December 2013) will have labels with clear unit content, NHS guidelines and a warning about drinking when pregnant" (34).

Almost a fifth of wines, and over a tenth of beers and of spirits in our audit displayed a warning for pregnant women.

Figure 14: percentage warning for pregnant women per type of alcoholic beverage.



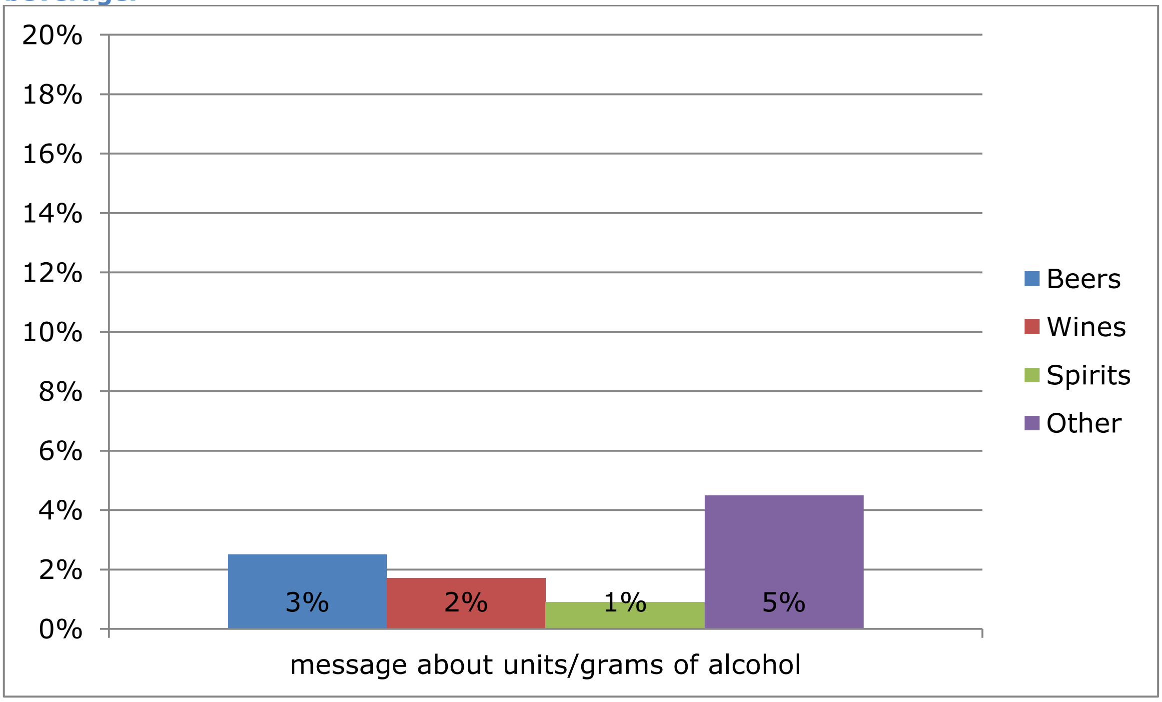
N= 25,730 alcoholic beverages audited

5.2.2 Information about units/grams

A 1987 EU Directive requires that labelling of alcoholic beverages containing more than 1.2 % by volume of alcohol must indicate the alcoholic strength by volume, i.e. the figure corresponding to the alcoholic strength followed by the symbol '% vol.' In addition, some governments have encouraged manufacturers to include further information on alcohol content. The UK Government entered into a voluntary agreement with the alcohol industry in 2007 to encourage inclusion of information on labels relating to 'units' of pure alcohol (1 unit = 8g or 10ml of pure alcohol). In Denmark, members of the Danish Brewers' Association have since 1995 also voluntarily given the alcohol content in each container in terms of units, (equivalent to 12 grams pure alcohol) and since 2009 this is given in precise number of units per container.

Looking at the sample as a whole (25,730 alcoholic beverages audited), very small proportions have a message about units/grams of alcohol.

Figure 15: percentage messages about units/grams of alcohol per type of alcoholic beverage.



N= 25,730 alcoholic beverages audited

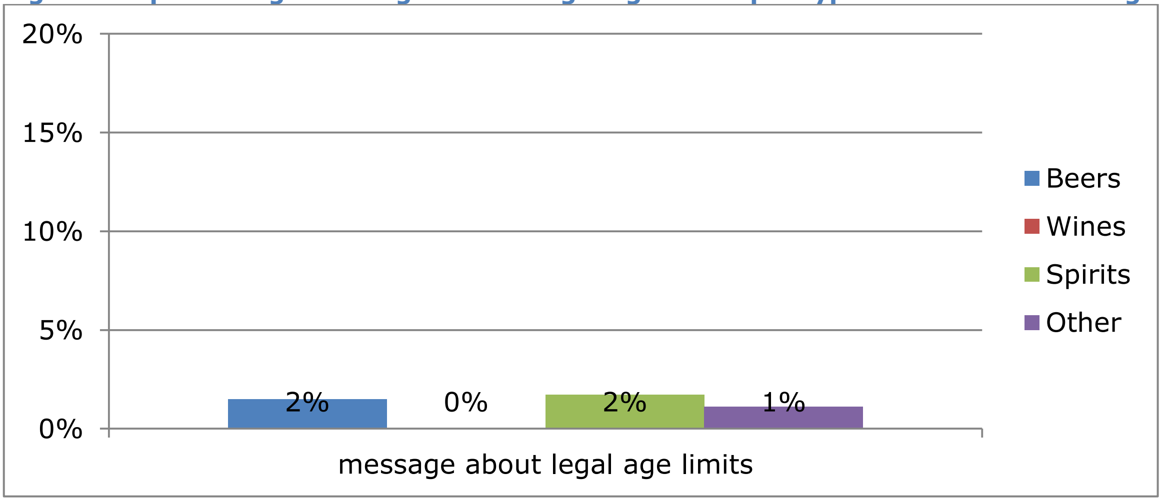
5.2.3 Legal age limits for purchasing or consuming alcohol

Legal age limits for buying alcohol vary across the EU, but are most commonly set at 18 years, varying between 16 or 17 in a few countries and 20 years in 3 countries, for beverages with a higher alcohol percentage. These age limits change regularly and the trend is upwards. Whilst an age limit for buying alcohol exists in all 29 EU countries, limits for possession and consumption are less common. However, it is clear that age limits are a current concern in most countries, with retailer compliance a key issue and a range of strategies and interventions aimed at tackling the problem of underage alcohol consumption (37).

In several countries it is mandatory to establish the age of a customer who may be underage, by asking to see an (official or unofficial) identification card. In Germany uniquely, a legal reference age of (25 years) applies, obliging alcohol retailers to check the identification card of anyone who appears to be 25 or younger (38). Also in Germany mandatory labelling for sprit-based alcopops was introduced in 2004, with requirements for this label to be placed on the front of the bottle and written in the same text size as the brand name (Protection of Minor Act).

Looking at the audit sample as a whole (25,730 alcoholic beverages audited), very small proportions have any message about legal age limits.

Figure 16: percentage messages about legal age limits per type of alcoholic beverage

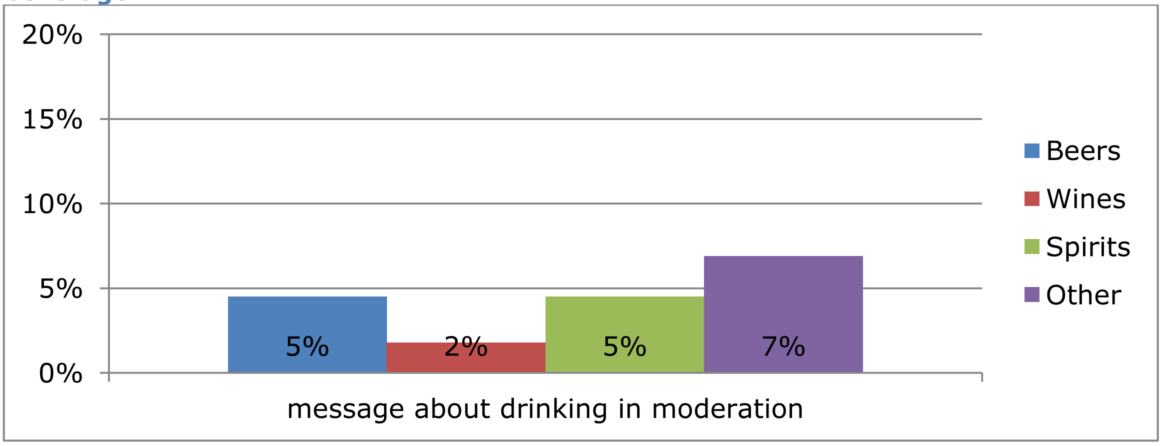


N= 25,730 alcoholic beverages audited

5.2.4 Drinking in moderation

Looking at the sample as a whole, very small proportions have any message about drinking in moderation. Wine has the lowest percentage (2%) of messages about drinking in moderation and other alcoholic beverages the highest percentage (7%).

Figure 17: percentage messages about drinking in moderation per type of alcoholic beverage.



N= 25,730 alcoholic beverages audited

Where they are present, messages about drinking in moderation vary widely. This can be seen in the following examples.

Figure 18: Examples of variation in the message 'Drinking in moderation'

Some take the form of official government health warnings or guidelines:

> *"the Chief Medical Officers recommends that adults do not regularly exceed: Men: 3-4 units daily. Women: 2-3 units daily.''*

… whilst others are an opportunity for additional advertising or slogan on the part of the manufacturer.

> ''Enjoy *xxx sensibly''*
> "Patiently crafted for you to enjoy responsibly''

Sometimes, the message is written in several languages:

> *''Drink responsibly. Trinken sie verantwortungsvoll, drink verantwoord, alkohol bor nydes med omtanke, nytes met ansvar, drick mattpullt och med ansvar, pij rozważnie, À consommer de façon responsible. Beba com responsabilidade, bevi responsabimente.''*

Sometimes, it is written in the local language:

> "Geniet verantwoord."

Sometimes, the text itself is very extensive:

"In UK this pack contains 4X1.8 UK units. The ROI department of health low risk limits for men are up to or less than 21 units per week and for women up to less than 14 units per week. Drinkaware. Visit drinkaware."

This wide range of type and presentation of information on moderation partly reflects the variation in agreements, nature and strength of any guidelines and policy approaches across different countries. In the UK, for example, the 2007 agreement between government and industry encouraged 3 sensible Drinking Messaging: "Know Your Limits", "Enjoy Responsibly", "Drink Responsibly" (30).

The result is an inconsistent and potentially confusing approach to informing or warning consumers about 'moderation' and what that might mean in practical terms, a concern given the finding that a definition of moderation is identified as a key piece of useful information for consumers (22).

5.2.5 Drinking and driving

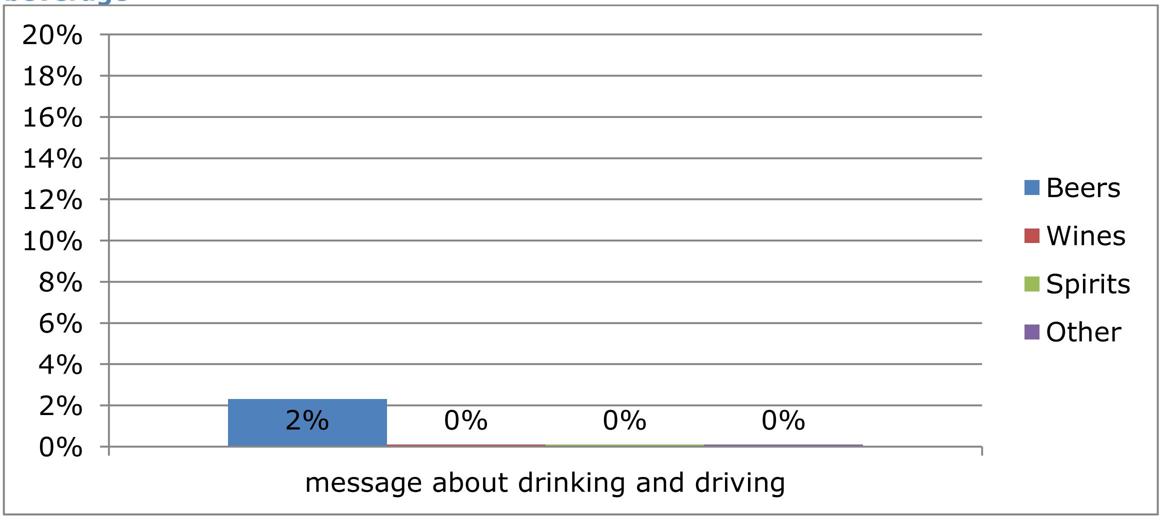
Drinking and driving limits are in operation across most of Europe, although there is variation in the permitted level of blood alcohol across different countries (39).

The European Union (40) has set a target of halving the number of people killed in road traffic accidents from 40,000 a year in the existing fifteen countries of the Union between 2000 and 2010 through proposals for:

- an EU-wide harmonised blood alcohol limit;
- a 0.0g/l limit for novice and professional drivers; and
- the compulsory installation of alcohol interlocks to all new types of commercial passenger and goods; transport vehicles and to the vehicles of road users who already have committed more than one drink-driving conviction (40)

Looking at the sample as a whole, very small proportions have any message about drinking and driving. Only beer (2%) has messages about drinking and driving.

Figure 19: percentage messages about drinking and driving per type of alcoholic beverage



N= 25,730 alcoholic beverages audited

5.2.6 Additional nutrition information

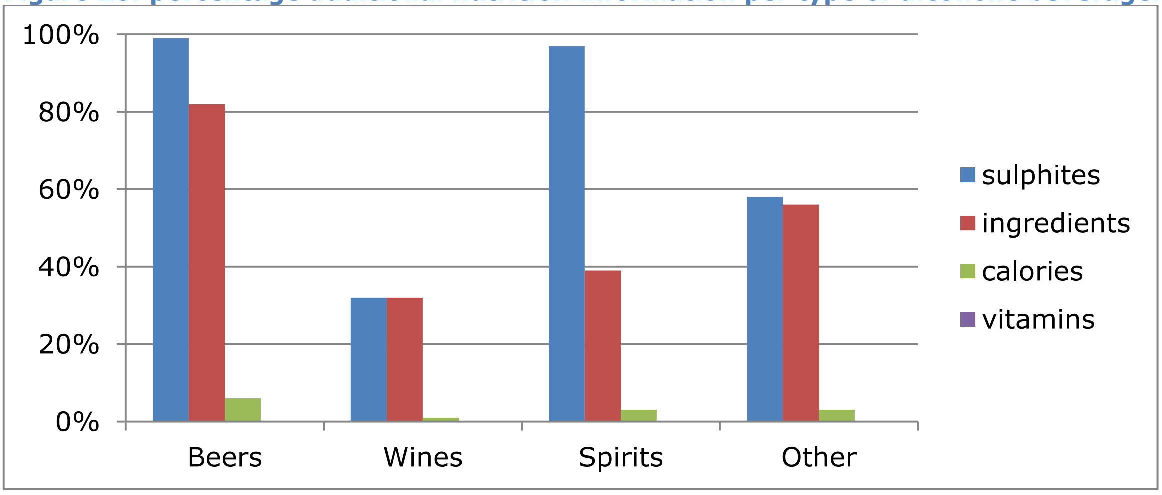
The additional nutrition information was assessed for all alcoholic beverages that included at least one health-related message (n=4,337).

In the EU, alcohol is exempt from the obligation to list its ingredients and provide nutrition information. However, 82% of beers, 32% of wines and 39% of spirits assessed (of the 4,137 that had health-related messages) had an ingredients list on the label.

The presence or absence of information on calories, vitamins and sulphites was also recorded: very few package labels presented information on calories (present on only 6% of beer packaging, 1% of wine and 3% of spirits). We did not observe information on vitamins on any labels in our sample.

Of the 4,137 packages with at least one health-related message, information on sulphites was present on almost all beers and spirits that had health messages and over half the wines with health messages (5).

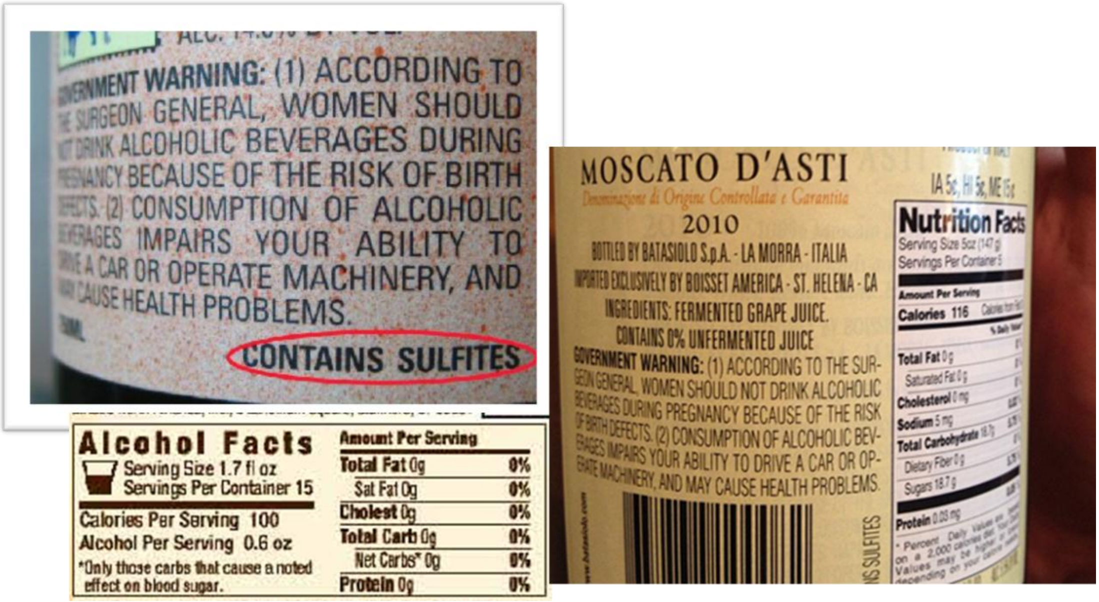
Figure 20: percentage additional nutrition information per type of alcoholic beverage.



N = 4,317 packages with at least one health-related message

Some examples of this additional nutrition information are presented in the figure below. While it is reported whether these types of information were present, they were not assessed in detail.

Figure 21: Examples of additional nutrition information



5.3 Presentation of health-related messages

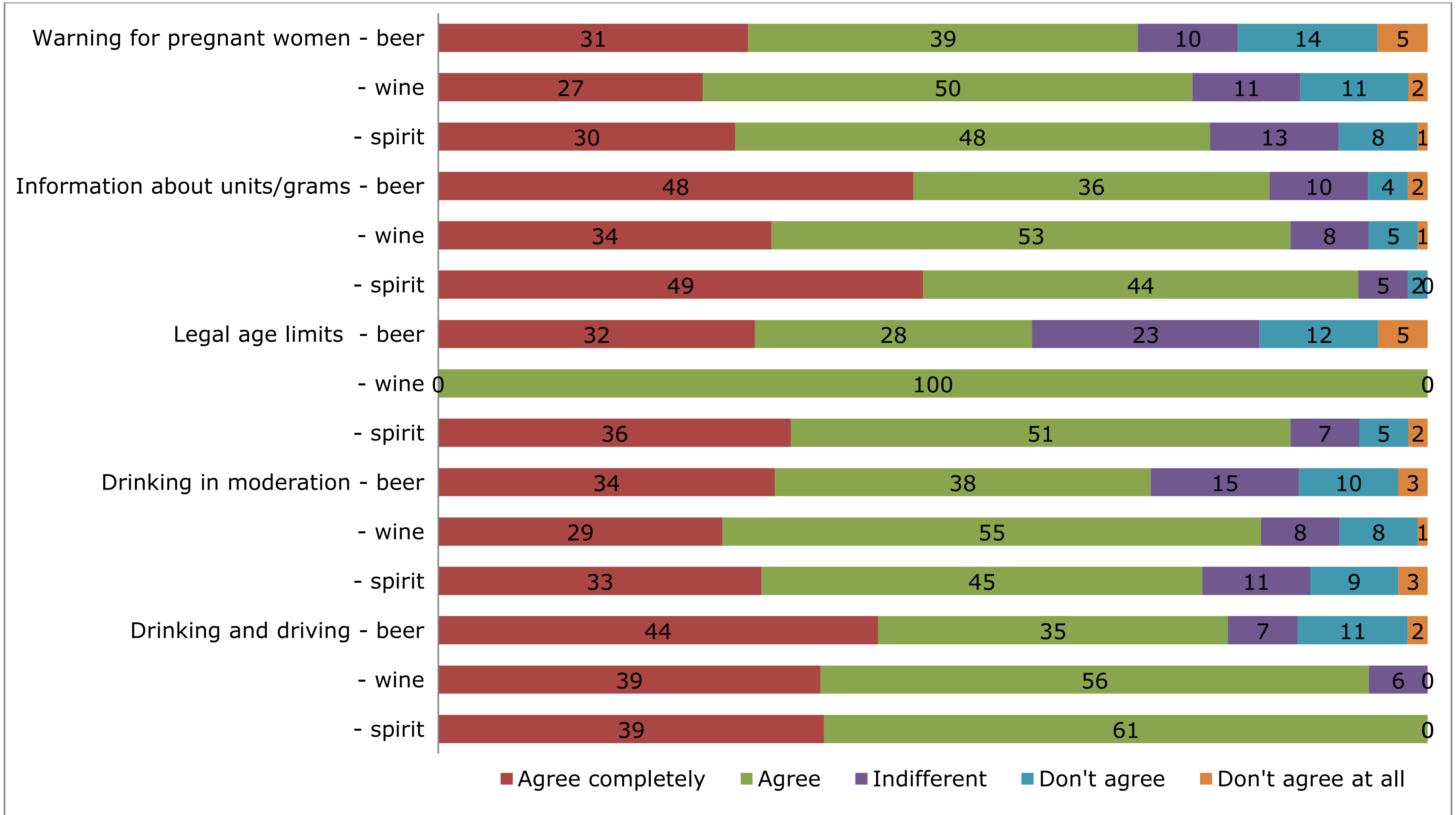
It is recognised that the presentation of messages impacts significantly on the extent to which consumers notice them and is therefore relevant to effectiveness in influencing consumer behaviour and attitudes (31-41). This includes a wide variety of factors such as colour, placement, size, presence of borders, text and pictorial representations, etc. The audit therefore included some of these aspects of labelling and messages in assessments of overall visibility, clarity and ease of understanding. The data set these findings refer to is all 4,796 messages recorded in our audit of 4,317 packages that included a message.

5.3.1 Visibility

The assessment sheet asked assessors to record whether the messages were clearly visible on the beverage. Warnings for pregnant women were judged to be clearly visible on over three quarters of the packaging they were present on, information about units/grams between 84% and 93%, legal age limits 59% to 100%, moderation 72% to 84% and drinking and driving 80% to 100%.

- Across all message types, visibility is least likely to be clear on beer packaging than other types of alcohol
- The widest variation occurs with messages about legal age limits, which were clearly visible on all wine packages, but under two thirds of beer packages
- With the exception of age limit information on beer packages, messages were clearly visible on over 70% of packages

Figure 22: visibility of messages on labels of alcoholic beverages



N=4,796 health-related messages

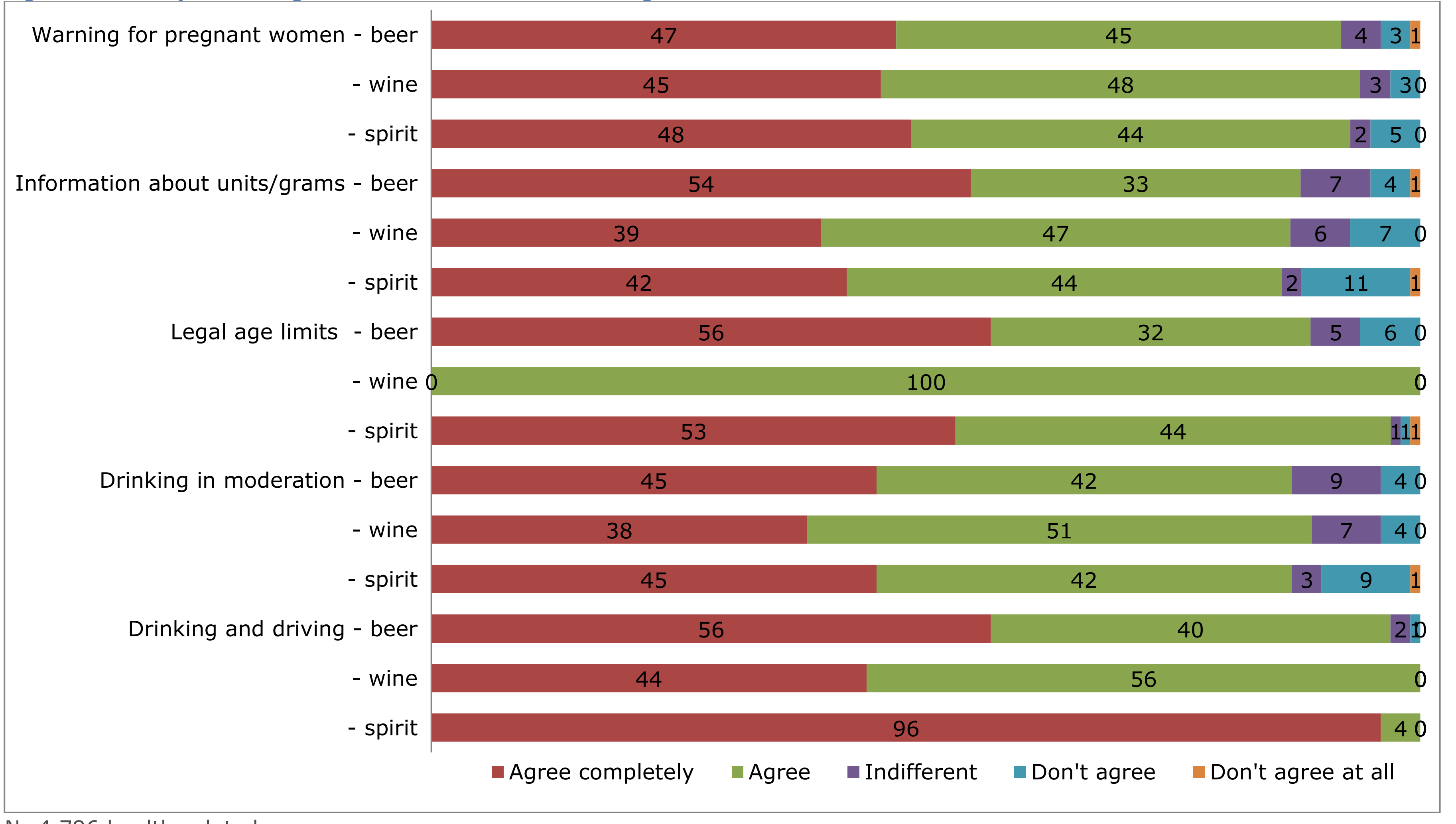
5.3.2 Clarity (understandable)

The assessment sheet included a question about whether messages were easy to understand. For each of the five message types, at least 80% were assessed as easy to understand. There was little variation between messages or beverage types.

The highest ratings were for messages for pregnant women (over 90% were assessed as understandable) and legal age limits (100% and 97% for wines and spirits respectively). This is perhaps not surprising, since:

- pregnancy messages were more likely than others to be conveyed by logo (see following section for further discussion)
- a legal age for consuming alcohol is a fairly straightforward fact, easy to convey very clearly with a number

Figure 23: clarity of messages on labels of alcoholic beverages



N=4,796 health-related messages

5.4 Layout of health-related messages

A study conducted by Laughery et al. (42) looked at the key features that affect the perception and noticeability of warning labels:

- Label clutter: warning labels should not be obscured by surrounding information.
- Location: warnings on the front of alcohol containers are more noticeable than in any other place.
- Orientation: horizontal placement increases noticeability.
- Contrast: a strong foreground-background contrast is more effective in drawing attention.
- Colour: the specific colour used is less important than the colour combination.
- Pictorials attract attention. If paired with written warnings, they may be better remembered.
- Signal icons: a red triangle for instance helps to identify warning-related information.
- Text such as "Government warning" functioned as a signal helping to identify the warning. Texts with a shorter signal (such as "warning" as a single word) are less noticeable.
- Border: the area should be large enough to ensure that the text could be read.
- A combination of salience features is likely to improve noticeability, more than using a single feature.

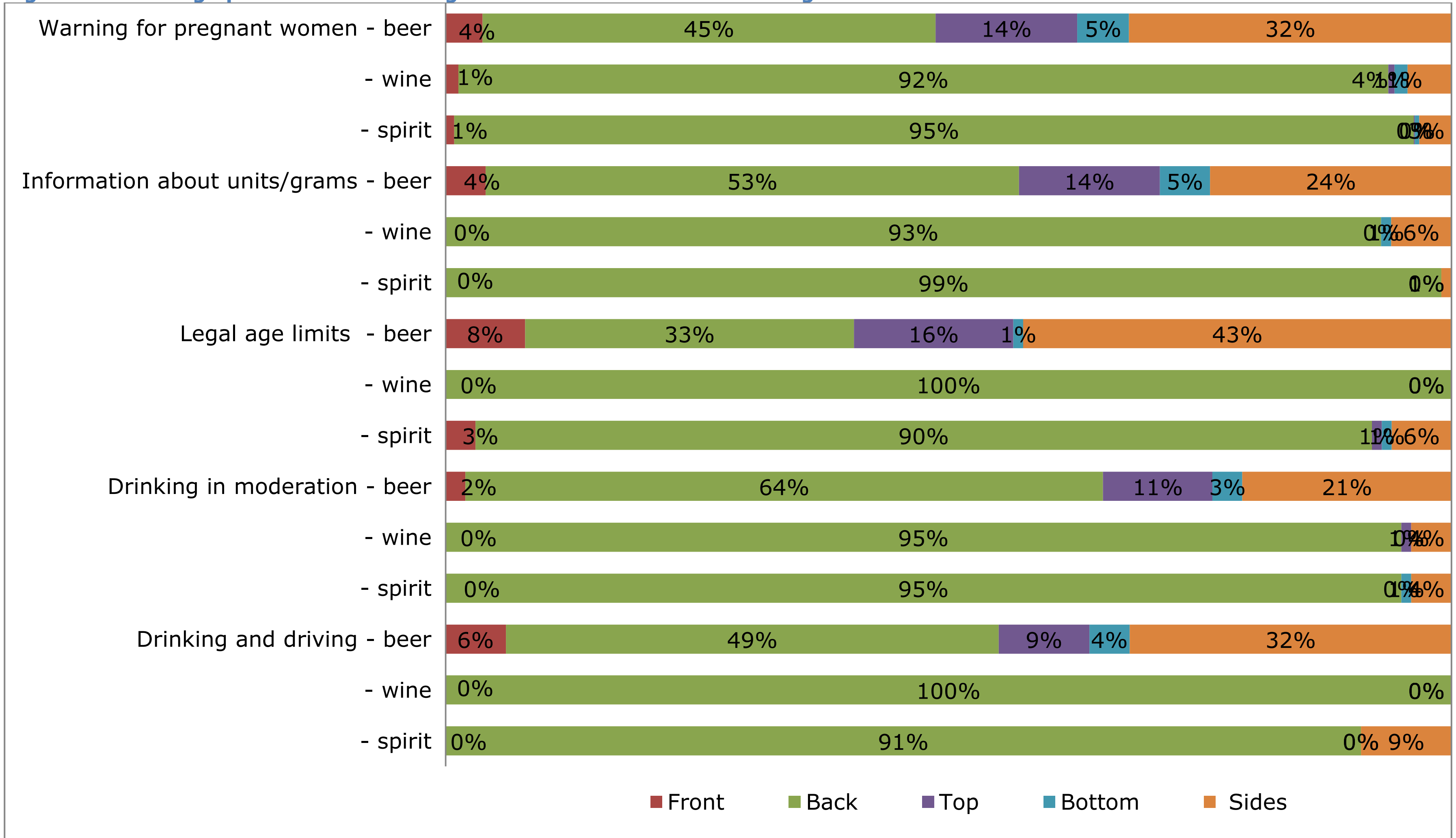
Our audit recorded the format and positioning of warnings: whether logo, text or both, whether framed and where on package messages appeared. The data reported in this section is all 4,796 messages assessed analysed by type of message and by type of package.

5.4.1 Message placement

Assessors recorded whether messages were placed on the front, back, top bottom or sides of the packages:

- For beers, the most common site for all health-related messages was the back of the packaging with around half of messages were placed here, but significant proportions were on the sides (20-40%) or top (10-15%) of packages
- For wines and spirits the vast majority (over 90%) of health-related messages were on the back of the packaging

Figure 24: message placement of messages on labels of alcoholic beverages



N=4,796 health-related messages

These differences are probably largely accounted for by the common shapes and types of packaging used for the different beverages and the practicalities of displaying messages on these. Wines and spirits are largely sold in bottles, which do not have tops of sufficient size and in general are round with no 'sides'. Beer on the other hand is more often sold in packs offering large areas of space on the top, bottom and sides where such information can be printed.

Figure 25: Examples of messages placed on the front, back, top, bottom or sides

Only 1% of the wines display the warning for pregnant women in the front (on this picture, underneath the alcohol percentage, bottom left). So this example is not very common. In contrast, 94% of the pregnancy related warnings are on the back of the bottle.

Here is an example of the warning for pregnant women, displayed on the back of the bottle. This is a very common place to display this warning. 95% of the pregnant warnings for spirits are placed on the back.

Beer, as mentioned before, is often sold in packs. Therefore there is more variation in the placement of the warnings. 14% of the pregnancy warnings are displayed on top (picture on the left). In only 5% of the cases, the pregnancy warning is on the bottom (picture on the right).

In the following table, we look at the placement of messages per type of alcohol and per type of package. One can see that on bottles, regardless of the type of alcohol, the message is most often placed on a label on the back of the beverage, while the most popular place to include a message on beer cans are the sides of the can.

Table 6: Place of health-related message per type of alcoholic beverage and package

		Front	Back	Top	Bottom	Sides
Beers	Can (N=373)	1.1%	34.3%	4.3%	3.8%	**56.6%**
	Bottle (N=638)	3.6%	**62.4%**	12.1%	1.9%	20.1%
	Carton/box (N=121)	11.6%	11.6%	**52.1%**	14.9%	9.9%
Wines	Bottle (N=2,136)	1.9%	**97.2%**	0.1%	0.4%	0.4%
Spirits	Bottle (N=1,157)	0.9%	**95.6%**	0.3%	0.2%	3.1%
Other	Can (N=49)	4.1%	**69.4%**	2.0%	0.0%	24.5%
	Bottle (N=108)	0.0%	**90.7%**	9.3%	0.0%	0.0%

If we consider the specific health-related messages and type of packages together, we notice that the type of packaging rather than the type of message influences the placement of the health-related message. Only the message about drinking in moderation is most often placed on the back, regardless of the type of packaging.

Table 7: Place of health-related message per type of package and message

		Front	Back	Top	Bottom	Sides
Warning for pregnant women	Can (N=164)	1.8%	31.7%	1.2%	6.7%	**58.5%**
	Bottle (N=2,609)	2.3%	**91.1%**	1.8%	0.5%	4.2%
	Carton/box (N=112)	6.2%	18.8%	**29.5%**	13.4%	**32.1%**
Information about units/grams	Can (N=68)	0.0%	42.6%	1.5%	1.5%	**54.4%**
	Bottle (N=368)	0.5%	**93.8%**	1.9%	1.1%	2.7%
	Carton/box (N=42)	4.8%	9.5%	**35.7%**	11.9%	**38.1%**
Legal age limits	Can (N=50)	0.0%	14.0%	12.0%	0.0%	**74.0%**
	Bottle (N=151)	4.6%	**82.1%**	7.9%	0.0%	5.3%
	Carton/box (N<30)	**27.3%**	18.2%	**27.3%**	18.2%	9.1%
Drinking in moderation	Can (N=125)	1.6%	**61.6%**	5.6%	0.8%	30.4%
	Bottle (N=819)	0.5%	**92.1%**	2.2%	0.4%	4.9%
	Carton/box (N=35)	2.9%	**37.1%**	31.4%	11.4%	17.1%
Drinking and driving	Can (N=36)	2.8%	13.9%	2.8%	5.6%	**75.0%**
	Bottle (N=92)	2.2%	**83.7%**	7.6%	2.2%	4.3%
	Carton/box (N<30)	20.0%	6.7%	**33.3%**	6.7%	**33.3%**

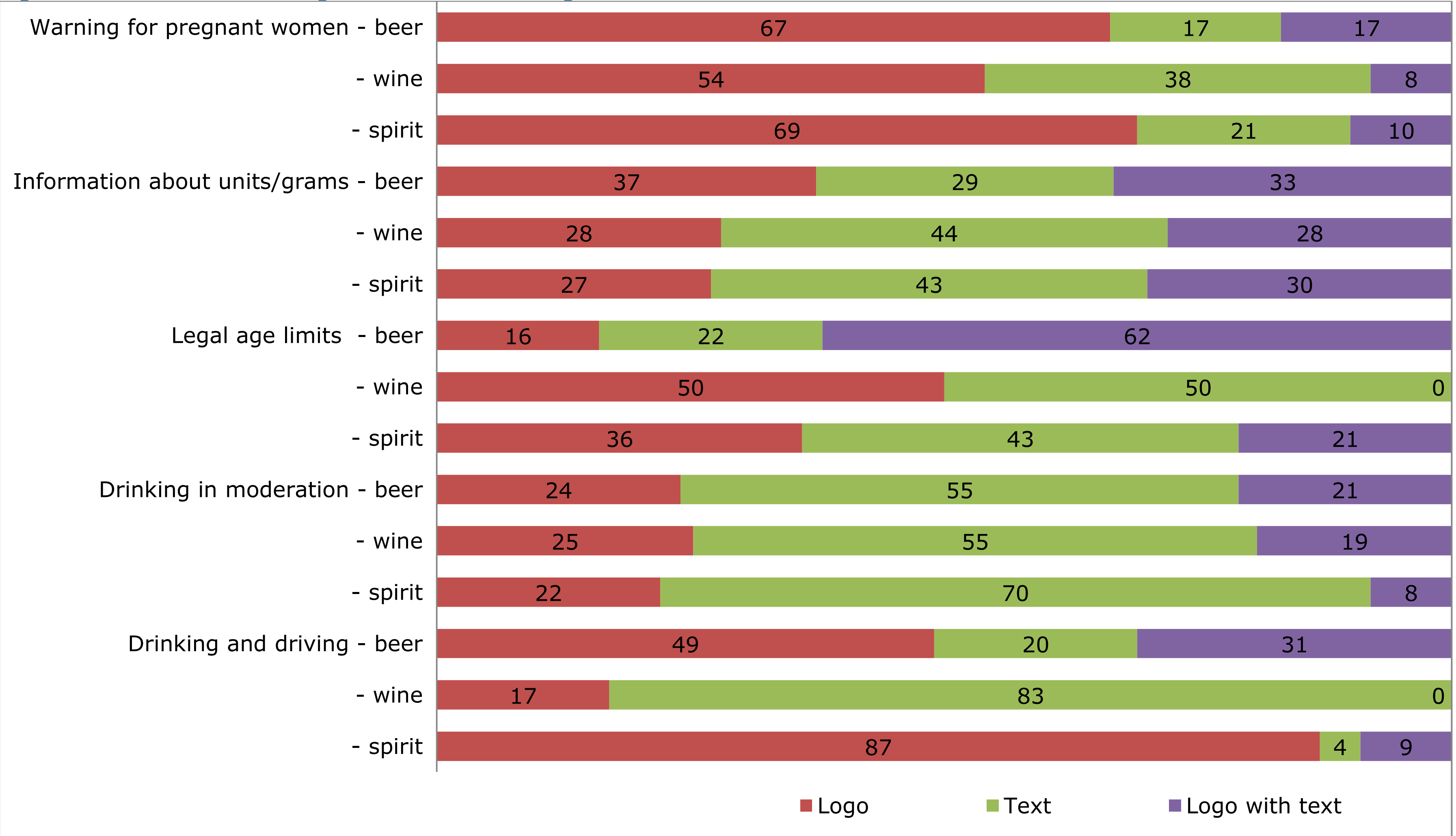
5.4.2 Form of message

Most messages on most beverage types were in the form of either logo or text, with the notable exception of age limit information on beers (where well over half of these messages (61%) were presented as a logo with text).

Other interesting observations include:

- Messages about drinking in moderation were more likely to be presented in text than logo form (not surprising since this is not a message that easily lends itself to graphic representation).
- Messages about drinking and driving are more commonly presented using text only on wine and logo only on spirits.
- Warnings about drinking in pregnancy are more likely than others across all beverages to be presented as a logo only (the message can be clearly conveyed this way, regardless of language and there is a well-established logo)
- Beer packaging is more likely than wines or spirits to employ a combination of logo and text for the message about legal age limits

Figure 26: form of the message on alcoholic beverages.



N=4,796 health-related messages

Table 8: Form of health-related message per type of alcoholic beverage and package

		Logo	Text	Logo with text
Beers	Can (N=372)	**44.4%**	29.3%	26.3%
	Bottle (N=636)	**51.3%**	29.4%	19.3%
	Carton/box (N=119)	**55.5%**	11.8%	32.8%
Wines	Bottle (N=2,132)	**76.6%**	13.2%	10.1%
Spirits	Bottle (N=1,156)	**56.0%**	35.9%	8.1%
Other	Can (N=49)	24.5%	**49.0%**	26.5%
	Bottle (N=109)	33.0%	**45.9%**	21.1%

In the table above, the form of messages per type of alcohol and per type of package is examined. Most messages are presented as a logo regardless of type of package. Messages on labels of beer cans, bottles, cartons or boxes are often formatted as a logo.

In the following table, the form of messages is considered per type of message and type of package. The type of message that warns the consumer about drinking during pregnancy, informs the consumer about units and grams, and informs the consumer about drinking in moderation, most often use a specific format (respectively logo, logo with text, and text), regardless of the type of packaging.

Table 9: Form of health-related message per type of package and message

		Logo	Text	Logo with text
Warning for pregnant women	Can (N=164)	**95.7%**	4.3%	0.0%
	Bottle (N=2,608)	**98.5%**	1.2%	0.2%
	Carton/box (N=111)	**99.1%**	0.9%	0.0%
Information about units/grams	Can (N=68)	8.8%	5.9%	**85.3%**
	Bottle (N=368)	1.4%	7.9%	**90.8%**
	Carton/box (N=44)	2.3%	6.8%	**90.9%**
Legal age limits	Can (N=50)	18.0%	12.0%	**70.0%**
	Bottle (N=151)	16.6%	**48.3%**	35.1%
	Carton/box (N<30)	0.0%	36.4%	**63.6%**
Drinking in moderation	Can (N=125)	0.8%	**95.2%**	4.0%
	Bottle (N=814)	0.7%	**94.5%**	4.8%
	Carton/box (N=32)	0.0%	**87.5%**	12.5%
Drinking and driving	Can (N=35)	28.6%	20.0%	**51.4%**
	Bottle (N=92)	**40.2%**	33.7%	26.1%
	Carton/box (N<30)	**60.0%**	6.7%	33.3%

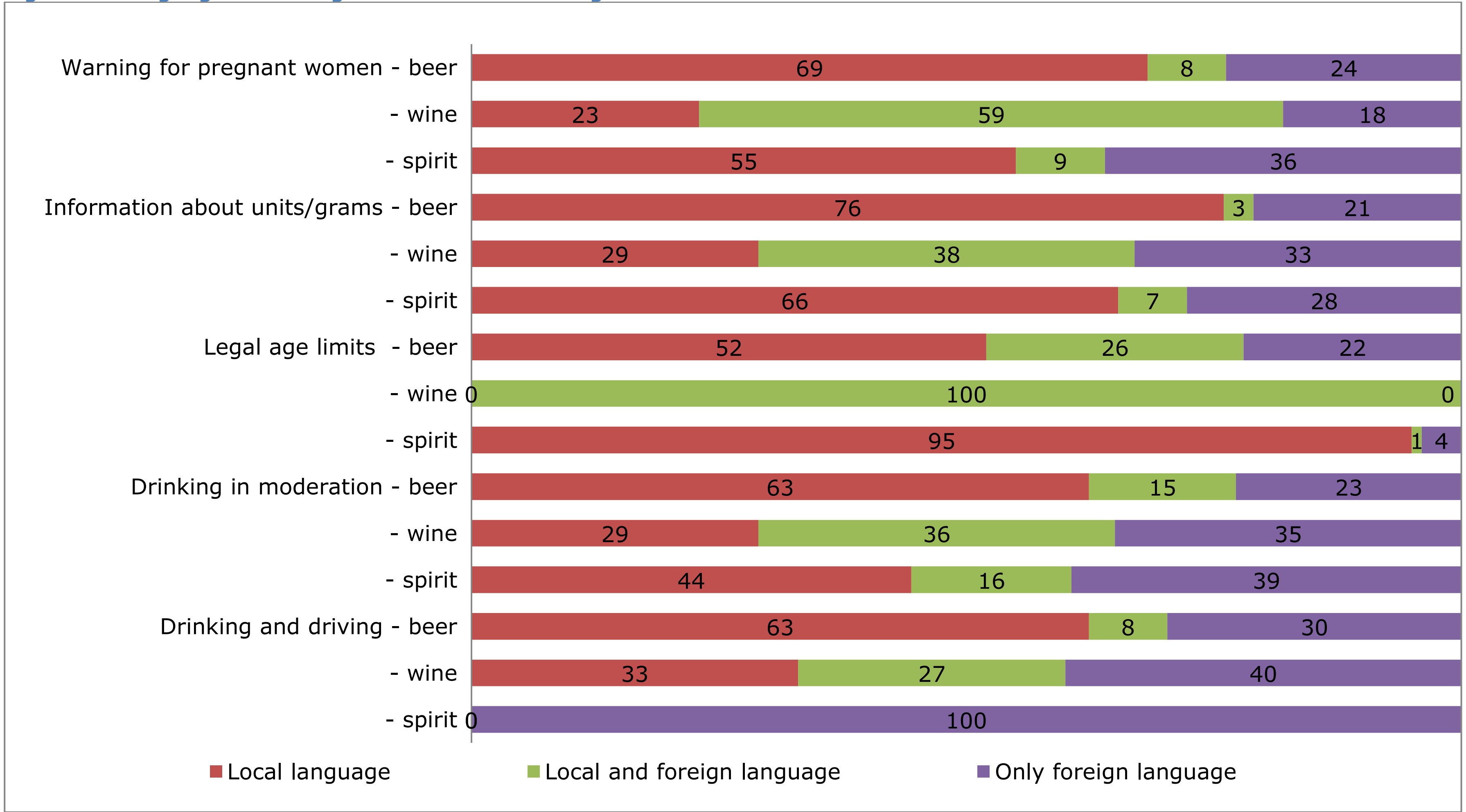
For the 1,773 messages that are in text format, one can further examine whether these texts are written in the local language or include both the local and foreign language. Additionally, it may be that text messages are written in a single language, thus not always in the local language. This can be for commercial reasons or to increase the recognition of messages that are related to a specific brand.

In the following figure, we observe that:

- A varying, but significant percentage is written solely in a foreign language (usually English).
- The most notable variation is that all messages about drinking and driving on spirits were presented only in a foreign language (based on a small sample size).

Additionally, some examples are shown in the figure on the next page.

Figure 27: language of messages on alcoholic beverages.



N=1,773 health-related text messages

Figure 28: Examples of messages in local, local and foreign, or only foreign languages

44% of the spirits with a drinking in moderation warning is written in the local language. This bottle is for the UK market and written in English.

Only 16% of spirits have the drinking in moderation message displayed in the local and foreign language. In this example, the message is written in a lot of languages.

Table 10: Language of health-related text messages per type of alcoholic beverage and package

		Local	**Local and foreign**	**Only foreign**
Beers	Can (N=109)	**60.6%**	12.8%	26.6%
	Bottle (N=181)	**62.4%**	16.0%	21.5%
	Carton/box (N<30)	**93.8%**	6.3%	0.0%
Wines	Bottle (N=263)	36.5%	12.2%	**51.3%**
Spirits	Bottle (N=407)	**54.1%**	13.0%	32.9%
Other	Can (N<30)	**65.2%**	26.1%	8.7%
	Bottle (N=46)	**82.6%**	2.2%	15.2%

In the table above, we see that most messages are written in the local language only, regardless of the type of packaging. Only on wine bottles, different from beer and spirit bottles, we see that half of the text messages are written in a foreign language only and not in the local language.

In the following table, we examine some specific types of packages and messages in relation to the language used. It should be noted that the base sizes are limited (as we select only these three package types and split them per type of message). Most often, text messages are written in the local language. Only for information about units and grams are many messages written in a foreign language only.

Table 11: Form of health-related message per type of package and message

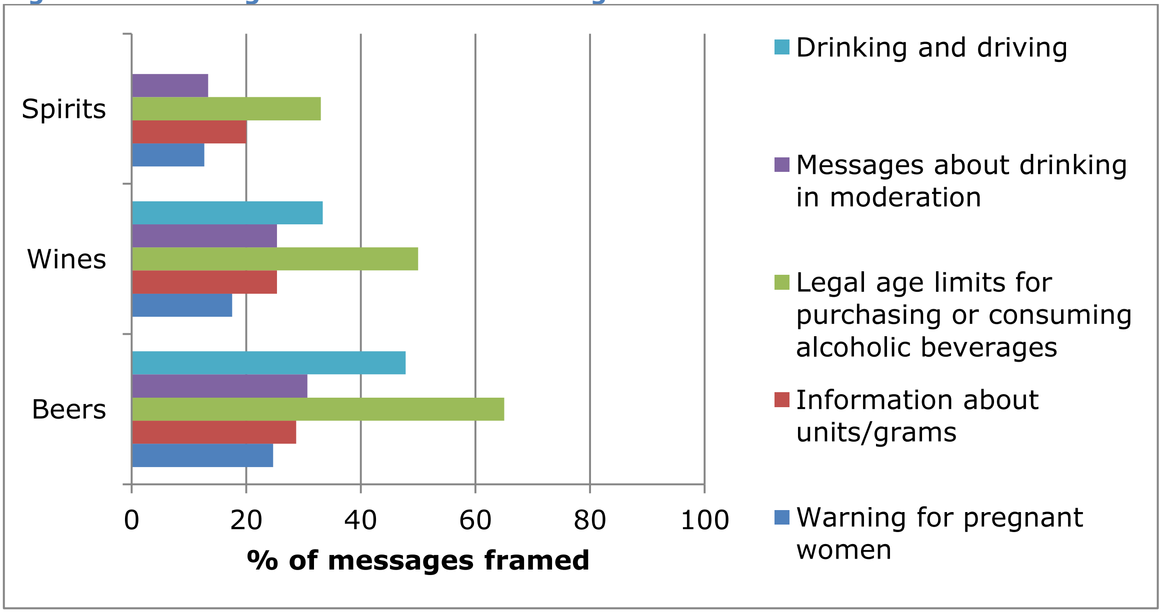
		Local	Local and foreign	Only foreign
Warning for pregnant women	Can (N<30)	**85.7%**	14.3%	0.0%
	Bottle (N<30)	**43.5%**	13.0%	**43.5%**
	Carton/box (N=0)	-	-	-
Information about units/grams	Can (N<30)	**75.0%**	0.0%	25.0%
	Bottle (N<30)	20.0%	8.0%	**72.0%**
	Carton/box (N<30)	0.0%	0.0%	**100.0%**
Legal age limits	Can (N<30)	**100.0%**	0.0%	0.0%
	Bottle (N=71)	**91.5%**	4.2%	4.2%
	Carton/box (N<30)	**100.0%**	0.0%	0.0%
Drinking in moderation	Can (N=118)	**59.3%**	16.9%	23.7%
	Bottle (N=747)	**49.1%**	13.8%	37.1%
	Carton/box (N<30)	**59.3%**	18.5%	22.2%
Drinking and driving	Can (N<30)	**50.0%**	0.0%	**50.0%**
	Bottle (N=31)	**64.5%**	12.9%	22.6%
	Carton/box (N<30)	**100.0%**	0.0%	0.0%

5.4.3 Framing of message

Assessors recorded whether or not messages were framed:

- Messages about pregnancy tended not to be framed – perhaps related to the fact that they were most likely to be presented as a logo
- Messages about age limits were more likely to be framed on beer, more often not framed on spirits and an even mixture of framed and not on wine
- Messages about units or grams of alcohol tended to be not framed
- Messages about drinking in moderation tended to be not framed
- Messages about drinking and driving tend to be not framed on wine, but use a mixture of framing and not on beer and spirits

Figure 29: Framing of health-related messages



N=4,796 messages

Table 12: Framing of messages on different types of packages per type of alcohol

		Framed	Not framed
Beers	Can (N=372)	36.8%	**63.2%**
	Bottle (N=636)	31.1%	**68.9%**
	Carton/box (N=124)	42.7%	**57.3%**
Wines	Bottle (N=2,083)	20.6%	**79.4%**
Spirits	Bottle (N=1,157)	17.5%	**82.5%**
Other	Can (N=49)	24.5%	**75.5%**
	Bottle (N=109)	32.1%	**67.9%**

Most messages are not framed and a quarter to a third of the messages is framed regardless of packaging type, with the exception that on bottles, the percentage of framed messages is somewhat lower.

Table 13: Framing of health-related message per type of package and message

		Framed	Not framed
Warning for pregnant women	Can (N=163)	16.6%	83.4%
	Bottle (N=2,607)	15.8%	84.2%
	Carton/box (N=112)	21.4%	78.6%
Information about units/grams	Can (N=68)	**54.4%**	**45.6%**
	Bottle (N=359)	**44.6%**	**55.4%**
	Carton/box (N=45)	**77.8%**	22.2%
Legal age limits	Can (N=50)	**66.0%**	34.0%
	Bottle (N=151)	**54.3%**	**45.7%**
	Carton/box (N<30)	**72.7%**	27.3%
Drinking in moderation	Can (N=124)	26.6%	73.4%
	Bottle (N=776)	21.1%	78.9%
	Carton/box (N=35)	**45.7%**	**54.3%**
Drinking and driving	Can (N=36)	**63.9%**	36.1%
	Bottle (N=92)	**51.1%**	**48.9%**
	Carton/box (N<30)	**46.7%**	**53.3%**

Figure 30: Examples of messages framed or not framed

Recent studies have found that a border with a tight fit may reduce the legibility of the text (32-43).

5.5 Size of messages and labels

In this section, we discuss the size of labels compared to the full alcoholic beverage package and we discuss the size of a health-related message compared to the full label. The difference is explained in the Figure below. The auditor had to make an estimation of the label size by filling in the estimated proportion of the label, compared to the alcoholic beverage as a whole and an estimation of the message size by filling in the estimated proportion of the message, compared to the label of the alcoholic beverage. The following figures should therefore be looked at with some caution; they give indications of the size but not objective data or exact measures.

Figure 31: Size of label versus size of message

When we look at the size of labels on alcoholic beverages, the data set is alcoholic beverages with at least one health-related message on their labels. We did not collect this information for beverages without health-related messages. The base for examining the size of health-related messages on labels is the number of messages, not the number of alcoholic beverages.

Additionally, we consider the different type of packages and the different volumes that are most important when looking at beers, wines and spirits, focussing on some of the most relevant packages and volumes. In particular we include:

- only beers in bottles, cans, and cartons or boxes
- only wines in bottles
- only spirits in bottles

And we include only the following package sizes:

- bottles of beer with a volume of 33cl and 50cl
- cans of beers with a volume of 33cl and 50 cl; carton or boxes with a volume of 25cl or 33cl
- bottles of wine with a volume of 75cl
- bottles of spirits with a volume of 50cl, 70cl and 75 cl

The range (minimum and maximum) of the proportional size of the health-related information placed on the different types of packages should be considered with caution. Previous results have shown for instance that a small font size can be a reason for a lack of clarity (31).

Some examples are shown in the next figure. We see that there is a wide range of label sizes (as a proportion of package) and of message sizes (as a proportion of label). The text boxes illustrate this with the example of a warning for pregnant women. On a big bottle with a big label, this logo is only a small proportion of the label, while the same logo of the same absolute size covers a much larger proportion of a smaller label. Furthermore, the size of messages can differ when looking at a specific type of message. For instance, the pregnancy warning logo on the bottle of wine in the first picture is much smaller than the framed text message that informs the consumer about drinking in moderation in the third picture.

Figure 32: Examples of size of label and size of message

This bottle of wine with a volume of 75cl has a big label compared to the package (>75%), as it covers almost the entire bottle. If you then look at the message that is placed at the back (a warning for pregnant women), the proportion of the message on the label (as well as compared to the packaging size) is very small.

This bottle with a volume of 25cl has several small labels on the neck of the bottle compared to the whole bottle (proportion <5%). If you look at the messages themselves, the proportions of messages to label are much higher (>5%).

This bottle with a volume of 75cl contains a label that compared is only partly covering the package (<50%). The message is clearly visible in the middle but differences appear when looking at the size of specific messages. The logos are smaller than the text, so sizes of messages to labels vary (5 to 10%)

5.5.1 Label to package size

In this subsection, we discuss the proportion of the size of the label to the size of the package. First, we distinguish between the different types of alcohol. There is not much variation when we look at the type of alcoholic beverage. The labels are often similar when looking at the same type of packages, regardless of the type of alcohol. The median is not influenced by the maximum and minimum so provides a measure that is not unduly influenced by outliers. The median size of the label on alcoholic beverage packages is 7%, i.e. half of the labels assessed have a size below 7% of the packaging and half of the labels have a larger size compared to the entire packaging.

Table 14: Size of label per type of alcoholic beverage

	Size of label (% of package)			
Alcoholic beverage	**Mean**	**Median**	**Minimum**	**Maximum**
Beers (N=826)	9.7%	7.0%	1.0%	90.0%
Wines (N=2,471)	10.6%	7.0%	0.8%	60.0%
Spirits (N=942)	10.4%	7.0%	1.0%	60.0%
Other (N=78)	8.7%	7.0%	1.0%	30.0%
Total (incl. 'other' – N=4,317)	10.3%	7.0%	0.8%	90.0%
Total (excl. 'other' – N=4,239)	10.4%	7.0%	0.8%	90.0%

Some variation is present when considering the type of package. Cans, cartons/boxes, and vessels more often have a larger label compared to the package than labels on other types of packages. There is a lot of variation, but as shown in the above pictures, this can be due to variation in how labels are placed on packages.

Table 15: Size of label per type of package

	Size of label (% of package)			
Package	**Mean**	**Median**	**Minimum**	**Maximum**
Can (N=294)	11.8%	10.0%	1.0%	90.0%
Bottle (N=3,786)	10.2%	6.5%	0.8%	70.0%
Carton/box (N=160)	11.2%	10.0%	1.0%	30.0%
Box in bag (N<30)	8.3%	9.0%	3.0%	20.0%
Vessel (N=55)	9.7%	10.0%	3.0%	15.0%
Other (N<30)	10.7%	9.0%	4.0%	25.0%
Total (N=4,317)	10.3%	7.0%	0.8%	90.0%

Next, we look at variation in size of label relative to package by type of package and type of alcohol for the most common package types. For beers, we can see that cans more often have a slightly higher proportion covered with a label. When comparing bottles of beer, wine or spirits, bottles of beer (and bottles of ciders and alcopops) have on average a smaller label relative to the package size.

Table 16: Size of label per type of alcoholic beverage and package

Alcoholic beverage	Package	Size of label (% of package) Mean	Median	Minimum	Maximum
Beers	Can (N=259)	11.9%	10.0%	1.0%	90.0%
	Bottle (N=474)	8.5%	6.0%	1.0%	70.0%
	Carton/box (N=73)	10.3%	10.0%	2.0%	30.0%
Wines	Bottle (N=2,348)	10.6%	6.5%	0.8%	60.0%
Spirits	Bottle (N=910)	10.3%	7.0%	1.0%	60.0%
Other	Can (N<30)	10.6%	10.0%	5.0%	30.0%
	Bottle (N=54)	7.9%	6.0%	1.0%	30.0%

A similar analysis by the most common volumes shows some variation, though it is not consistent. We cannot conclude that an increase in volume correlates with a relative increase in label size.

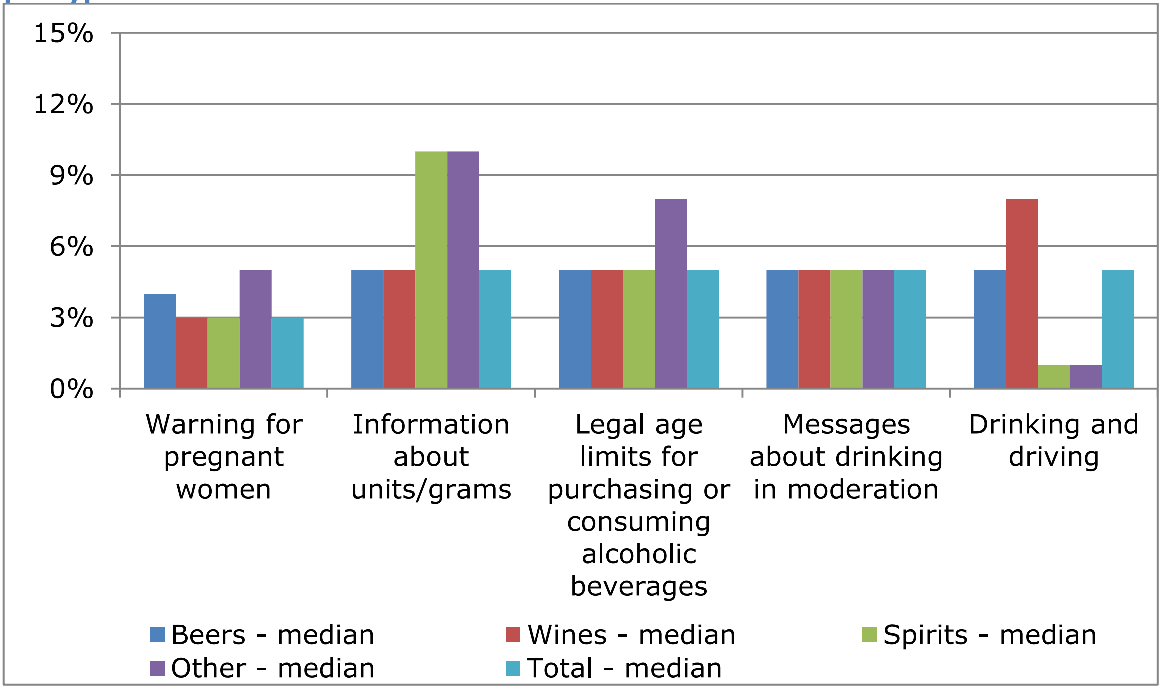
Table 17: Size of label per type of alcoholic beverage, package and volume

Alcoholic beverage	Package	Volume	Size of label (% of package) Mean	Median	Minimum	Maximum
Beers	Can	33cl (N=67)	8.7%	9.0%	1.0%	25.0%
		50cl (N=155)	13.4%	10.0%	1.0%	90.0%
	Bottle	33cl (N=174)	7.9%	7.0%	1.0%	65.0%
		50cl (N=107)	7.5%	5.0%	1.0%	32.0%
	Carton/ box	25cl+33cl (N=43)	11.1%	10.0%	3.0%	30.0%
Wines	Bottle	75cl (N=2,191)	10.6%	7.0%	1.0%	60.0%
Spirits	Bottle	50cl (N=88)	11.5%	8.0%	1.0%	30.0%
		70cl (N=664)	10.5%	7.0%	1.0%	60.0%
		75cl (N=69)	9.2%	8.0%	1.0%	30.0%

5.5.2 Message to label size

In the second subsection on size, we consider the relative sizes of health related messages we assessed. The relative message size on labels varies by type of message. Relative message sizes are smaller for 'warning for pregnant women' than the other messages. However, there is variation by type of alcohol: the message 'warning for pregnant women' is more often bigger on beers than on wines or spirits, while the message about units and grams is more often smaller relative to label size on beers and wines than on spirits.

Figure 33: Size of message as relative proportion to label, per type of message and per type of alcohol



In the tables below, we look specifically at the warning for pregnant women. First of all, we look at this message per type of package. The differences between cans, bottles and carton/boxes are small, though the size of the warning for pregnant women is somewhat bigger in proportion to the label size on cans than on bottles and carton/boxes.

Table 18: Size of warning for pregnant women per type of package

	Size of warning for pregnant women (% of label)			
Package	Mean	Median	Minimum	Maximum
Can (N=164)	4.9%	5.0%	1.0%	30.0%
Bottle (N=2,583)	3.6%	3.0%	1.0%	25.0%
Carton/box (N=110)	4.0%	3.0%	1.0%	15.0%

When we further differentiate between type of alcohol and type of package, we see that once more cans have relatively bigger messages regarding warnings for pregnant women.

Table 19: Size of warning for pregnant women per type of alcoholic beverage and package

Alcoholic beverage	Package	Size of warning for pregnant women (% of label)			
		Mean	Median	Minimum	Maximum
Beers	Can (N=149)	4.7%	5.0%	1.0%	30.0%
	Bottle (N=286)	4.5%	4.0%	1.0%	25.0%
	Carton/box (N=55)	4.0%	3.0%	1.0%	15.0%
Wines	Bottle (N=1,644)	3.4%	3.0%	1.0%	25.0%
Spirits	Bottle (N=617)	3.7%	3.0%	1.0%	20.0%
Other	Can (N<30)	6.1%	5.0%	2.0%	10.0%
	Bottle (N=36)	4.6%	5.0%	1.0%	15.0%

In the tables below, we look specifically at the message with information about units and grams. First, we look at this message per type of package. The differences between cans, bottles and carton/boxes are small, though the size of this type of message is somewhat bigger in proportion to the label on bottles if we look at the median and somewhat bigger in proportion to the label on bottles and cans when we consider the mean.

Table 20: Size of information about units/grams per type of package

Package	Size of information about units/grams (% of label)			
	Mean	Median	Minimum	Maximum
Can (N=67)	8.3%	5.0%	1.0%	30.0%
Bottle (N=363)	8.0%	6.0%	1.0%	30.0%
Carton/box (N=43)	4.8%	4.0%	1.0%	12.0%

When we further differentiate between type of alcohol and type of package, there is not much variation when we look at the median size. Only spirits in bottles seem to have relatively larger messages on their labels than other groups. The ‘other’ category has the biggest relative message size for information on units and grams, though the base size is too small to generalise from this finding. Furthermore, as this category refers to only some countries, it may be that in these specific countries the size is different than in other countries, influencing the result when comparing the group ‘others’ to other alcohol types.

Table 21: Size of information about units/grams per type of alcoholic beverage and package

Alcoholic beverage	Package	Size of information about units/grams (% of label) Mean	Median	Minimum	Maximum
Beers	Can (N=54)	7.4%	5.0%	1.0%	25.0%
	Bottle (N=62)	7.8%	5.0%	1.0%	30.0%
	Carton/box (N<30)	5.3%	5.0%	1.0%	12.0%
Wines	Bottle (N=219)	7.5%	5.0%	1.0%	30.0%
Spirits	Bottle (N=60)	8.9%	9.0%	2.0%	30.0%
Other	Can (N<30)	10.7%	10.0%	4.0%	15.0%
	Bottle (N<30)	11.4%	10.0%	1.0%	25.0%

In the following tables, we study the information about legal age limits. First, we look at this message per type of package, second we differentiate between type of alcoholic type and type of package. The differences between cans, bottles and carton/boxes are considerable, though the base size is too low to come to generalise findings. The same base size issue occurs when differentiating between the different types of packages. While the proportions are smaller when we look at cans (both beers and others) and bigger when we look at bottles, the number of messages is too low to generalise this result.

Table 22: Size of information about legal age limits per type of package

Package	Size of information about legal age limits (% of label) Mean	Median	Minimum	Maximum
Can (N=50)	5.4%	5.0%	1.0%	20.0%
Bottle (N=147)	5.6%	5.0%	1.0%	30.0%
Carton/box (N<30)	3.4%	2.0%	1.0%	10.0%

Table 23: Size of information about legal age limits per type of alcoholic beverage and package

Alcoholic beverage	Package	Size of information about legal age limits (% of label) Mean	Median	Minimum	Maximum
Beers	Can (N=37)	5.4%	4.0%	2.0%	20.0%
	Bottle (N=37)	4.9%	5.0%	1.0%	10.0%
	Carton/box (N<30)	3.0%	2.0%	2.0%	5.0%
Wines	Bottle (N<30)	5.0%	5.0%	5.0%	5.0%
Spirits	Bottle (N=103)	5.7%	5.0%	1.0%	30.0%
Other	Can (N<30)	4.3%	3.0%	2.0%	8.0%
	Bottle (N<30)	7.7%	9.0%	3.0%	10.0%

In the following tables, we study the specific message on drinking in moderation. When we look at the different packages, there is almost no difference in the size of messages relative to the total label.

Table 24: Size of information about drinking in moderation per type of package

Package	Size of information about drinking in moderation (% of label) Mean	Median	Minimum	Maximum
Can (N=124)	4.8%	5.0%	1.0%	20.0%
Bottle (N=814)	5.4%	5.0%	1.0%	30.0%
Carton/box (N=35)	5.4%	5.0%	1.0%	30.0%

When we further look at the different packages per type of alcohol, we see almost no differences. This kind of message on bottles of beer and carton/boxes of beer are somewhat smaller in size than others.

Table 25: Size of information about drinking in moderation per type of alcoholic beverage and package

Alcoholic beverage	Package	Size of information about drinking in moderation (% of label) Mean	Median	Minimum	Maximum
Beers	Can (N=96)	4.5%	5.0%	1.0%	10.0%
	Bottle (N=174)	4.0%	4.0%	1.0%	20.0%
	Carton/box (N<30)	5.6%	4.5%	1.0%	30.0%
Wines	Bottle (N=247)	5.1%	5.0%	1.0%	20.0%
Spirits	Bottle (N=350)	6.3%	5.0%	1.0%	30.0%
Other	Can (N<30)	5.5%	5.0%	2.0%	15.0%
	Bottle (N=43)	4.8%	5.0%	1.0%	10.0%

In the following tables, we study the specific message about drinking and driving. Between the different packages, the relative size of these messages compared to the labels is similar and small.

Table 26: Size of information about drinking and driving per type of package

Package	Size of information about drinking and driving (% of label) Mean	Median	Minimum	Maximum
Can (N=36)	7.1%	5.0%	1.0%	20.0%
Bottle (N=87)	6.0%	5.0%	1.0%	30.0%
Carton/box (N<30)	4.7%	4.0%	1.0%	15.0%

When differentiating both package type and alcohol type, we see that the proportion is somewhat bigger for bottles of wine with this kind of message.

Table 27: Size of information about drinking and driving per type of alcoholic beverage and package

Alcoholic beverage	Package	Size of information about drinking and driving (% of label) Mean	Median	Minimum	Maximum
Beers	Can (N=35)	7.3%	5.0%	2.0%	20.0%
	Bottle (N=76)	5.9%	5.0%	1.0%	30.0%
	Carton/box (N<30)	4.7%	4.0%	1.0%	15.0%
Wines	Bottle (N<30)	7.6%	8.0%	3.0%	15.0%
Spirits	Bottle (N<30)	5.7%	1.0%	1.0%	15.0%
Other	Can (N=0)	-	-	-	-
	Bottle (N<30)	1.0%	1.0%	1.0%	1.0%

Whilst a country level analysis is relevant, the aggregated data of 15 European countries shows that the base size becomes too low. Therefore, in the Annex, the country level reports will include only part of the data and tables described above.

5.6 Market share analysis for beers and spirits

The market share analysis for beers and spirits examines the representativeness of the data. We evaluated the percentage of market share in our sample of assessed alcoholic beverages with health-related messages on them. The objective is to examine if the top beers and spirits are also the beers and spirits with more or less likelihood of including a health related message on their label. The market share is defined by the market volume that is consumed both in-home as out-home. In the methodology chapter, it was explained that Euromonitor data of 2013 is used for this analysis and that consumption is measured by Euromonitor as the number of liters sold in the following establishments and outlets (28):

- **Store-Based Retailing:**
  - Grocery Retailers:
    - Discounters
    - Food/drink/tobacco specialists
    - Hypermarkets
    - Small Grocery Retailers (Convenience Stores, Forecourt Retailers, Independent Small Grocers, Supermarkets, Other Grocery Retailers)
  - Non-Grocery Retailers
- **Non-Store Retailing**
  - Direct Selling
  - Homeshopping
  - Internet Retailing
  - Vending

The market volume is the total of all sales volume. The volume is therefore dependent on the number of consumers and their average demand. The market share is calculated by taking the company's sales (volume) over the period (2013) and dividing it by the total sales of the industry (in this case beer or spirits industry) over the same period.

There are two issues that should be taken into account when evaluating the market shares, as they influence the interpretation of the results. The starting point for both is the same: suppose that a market leader is not in our data. What does this mean?

First, it should be noted that we included only a couple of shops per country in one or two cities. As a consequence, it is possible that we did not access all kinds of beers and spirits. A market leader that is not in our data may be explained, because we only have data on packages that include health-related messages. However, it may also be that market leader beverages were not included in our audit because discounters, such as Lidl or Netto, have a smaller range of products and do not sell the more popular brands. They sell private labelled brands that imitate the most popular market brands. To illustrate, Lidl’s Bitterol is an imitation of the popular spirit brand Aperol. When Aperol would be a top 5 market leader in a country where we only visited discounters, the percentage of labelled beverages within the top 5 would be an underestimation of the correct percentage.

Second, it should be noted that different types of packages and different volumes influence the number of products, even when we consider a single brand. Our sampling approach does not take into account the amount of bottles of the top 5 market leaders, only the different types of products affiliated with these brands. This means that if a top 5 market leader sells beers in several types of packages and different volumes, the proportion of brand in our data is higher than if it was sold only in one type of package and one volume. Therefore, we use the Euromonitor data to look at the relative proportion of the five top beers and spirits and use these proportions to calculate the percentage of the top 5 alcoholic beverages that include a message on their label. A visualisation makes clear the rather complicated information structure we have.

Figure 34: Visualisation of top 5 beers

The large red rectangle indicates the data that was assessed on a general level. For this rectangle, we have information on the type of alcohol (in this case beer) and some information on the shop, the city and the country. The large green rectangle includes all the beers with a message on their label. For this selection of beers, we have more information on the brand name, the type of message, the size of the message and so on. A selection is made to look only at the top 5 beers (with a message). However, we do not know the proportion of the small red rectangle that presents the top 5 beers that do not include a message and for which we therefore have no information.

5.6.1 Beers and their market share

According to the Euromonitor data (28), the five most purchased beers in Belgium represent 55% of all bought beers. In our data, the following Belgian shops were assessed: Colruyt (Brussels), Match (Antwerp), Lidl (Antwerp) and Lidl (Antwerp). All five market leaders were present in our sample of four shops. Therefore, all top 5 beers in Belgium are labelled with at least one health-related message.

Table 28: Top 5 beers in Belgium (%)

Belgium	Top 5 beers (Euromonitor data)	% of all bought beers (Euromonitor data)	Label top 5 beers	% of top 5 beers with label
	1st market leader	34.3%	Yes	
	2nd market leader	6.5%	Yes	
	3rd market leader	6.2%	Yes	
	4th market leader	4.8%	Yes	
	5th market leader	2.7%	Yes	
	Total	54.5%	54.5%	100.0%

According to the Euromonitor data (28), the five most purchased beers in the Czech Republic represent 48% of all bought beers. In our data, the following Czech shops were assessed: Billa (Brno), Penny Market (Brno), Penny Market (Prague) and SPAR (Prague). Of the top 5 brands, 82% included a health related message on the label. This means that 18% of the top 5 beers in the Czech Republic do not include a health related message on the label.

Table 29: Top 5 beers in the Czech Republic (%)

Czech Republic	Top 5 beers (Euromonitor data)	% of all bought beers (Euromonitor data)	Label top 5 beers	% of top 5 beers with label
	1st market leader	16.5%	Yes	
	2nd market leader	9.8%	Yes	
	3rd market leader	8.6%	No	
	4th market leader	6.8%	Yes	
	5th market leader	6.4%	Yes	
	Total	48.1%	39.5%	82.1%

According to the Euromonitor data (28), the five most purchased beers in Denmark represent 69% of all bought beers. In our data, the following Danish shops were assessed: Fotex (Copenhagen), Netto (1) (Copenhagen), Netto (2) (Copenhagen) and Irma (Copenhagen). Two market leaders were present in our sample of four shops. Of the top 5 brands, 60% contains at least one health-related message. This means that 40% of the top 5 beers in Denmark do not contain a message.

Table 30: Top 5 beers in Denmark (%)

Denmark	Top 5 beers (Euromonitor data)	% of all bought beers (Euromonitor data)	Label top 5 beers	% of top 5 beers with label
	1st market leader	30.5%	Yes	
	2nd market leader	21.7%	No	
	3rd market leader	10.7%	Yes	
	4th market leader	3.6%	No	
	5th market leader	2.1%	No	
	Total	68.6%	41.2%	60.1%

According to the Euromonitor data (28), the five most purchased beers in France represent 51% of all bought beers. In our data, the following French shops were assessed: Monoprix (Paris), Carrefour (Paris), Local Small Shop (Paris), Leader Price (Marseille) and Intermarche (Marseille). All five market leaders were present in our sample of five shops. Of the top 5 brands, 100% contains a label. This is logical, because the type of message that includes a warning for pregnant women is compulsory in France.

Table 31: Top 5 beers in France (%)

France	Top 5 beers (Euromonitor data)	% of all bought beers (Euromonitor data)	Label top 5 beers	% of top 5 beers with label
	1st market leader	23.7%	Yes	
	2nd market leader	14.3%	Yes	
	3rd market leader	5.6%	Yes	
	4th market leader	4.0%	Yes	
	5th market leader	3.0%	Yes	
	Total	50.6%	50.6%	100.0%

According to the Euromonitor data (28), the five most purchased beers in Germany represent 22% of all bought beers. In our data, the following German shops were assessed: Lidl (Berlin), Penny Market (Berlin), Penny Market (Hamburg), and EDEKA (Hamburg). Two market leaders were present in our sample of four shops. As a result, of the top 5 brands in Germany, 73% do not contain a health-related message.

Table 32: Top 5 beers in Germany(%)

Germany	Top 5 beers (Euromonitor data)	% of all bought beers (Euromonitor data)	Label top 5 beers	% of top 5 beers with label
	1st market leader	6.0%	No	
	2nd market leader	5.6%	No	
	3rd market leader	4.2%	No	
	4th market leader	3.0%	Yes	
	5th market leader	2.9%	Yes	
	Total	21.7%	5.9%	27.2%

According to the Euromonitor data (28), the five most purchased beers in Greece represent 68% of all bought beers. In our data, the following shops were assessed: Lidl (1) (Athens), Lidl (2) (Athens), Local Small Shop (Athens), and Sklavenitis (Athens). None of the market leaders in Greece were present in our sample of four shops. In Greece, none of the top 5 beers contain a health-related message.

Table 33: Top 5 beers in Greece (%)

Greece	Top 5 beers (Euromonitor data)	% of all bought beers (Euromonitor data)	Label top 5 beers	% of top 5 beers with label
	1st market leader	30.9%	No	
	2nd market leader	13.8%	No	
	3rd market leader	11.4%	No	
	4th market leader	7.9%	No	
	5th market leader	4.3%	No	
	Total	68.3%	0.0%	0.0%

According to the Euromonitor data (28), the five most purchased beers in Ireland represent 57% of all bought beers. In our data, the following shops were assessed: SPAR (Dublin), Centra (Dublin), Dunnes (Dublin), and Londis (Dublin). The beers that form the market leaders in Ireland were found as the five market leaders were present in our sample of four shops. All top 5 beers in Ireland contain a health-related message.

Table 34: Top 5 beers in Ireland (%)

Ireland	Top 5 beers (Euromonitor data)	% of all bought beers (Euromonitor data)	Label top 5 beers	% of top 5 beers with label
	1st market leader	18.4%	Yes	
	2nd market leader	17.4%	Yes	
	3rd market leader	10.6%	Yes	
	4th market leader	6.8%	Yes	
	5th market leader	4.1%	Yes	
	Total	57.3%	57.3%	100.0%

According to the Euromonitor data (28), the five most purchased beers in Italy represent 39% of all bought beers. In our data, the following shops were assessed: Conad (Rome), Local Small Shop (Rome), PAM (Milan), and Esselunga (Superstore) (Milan). The beers from three market leaders were present in our sample of four stores. 55% of the top 5 beers contain a health-related message, meaning 45% of these brands do not.

Table 35: Top 5 beers in Italy (%)

Italy	Top 5 beers (Euromonitor data)	% of all bought beers (Euromonitor data)	Label top 5 beers	% of top 5 beers with label
	1st market leader	11.9%	No	
	2nd market leader	8.5%	Yes	
	3rd market leader	8.1%	Yes	
	4th market leader	5.5%	No	
	5th market leader	4.6%	Yes	
	Total	38.6%	21.2%	54.9%

According to the Euromonitor data (28), the five most purchased beers in Latvia represent 38% of all bought beers. In our data, the following shops were assessed: IKI (Riga), Supernetto (Riga), Local Small Shop (Riga), and Elvi (Riga). Three market leaders were present in our sample of four shops. Of the top 5 brands, 66% contain a health-related message. This means that 34% of the top 5 beers in Latvia do not contain a health-related message.

Table 36: Top 5 beers in Latvia (%)

Latvia	Top 5 beers (Euromonitor data)	% of all bought beers (Euromonitor data)	Label top 5 beers	% of top 5 beers with label
	1st market leader	11.1%	Yes	
	2nd market leader	9.4%	Yes	
	3rd market leader	8.0%	No	
	4th market leader	5.1%	No	
	5th market leader	4.8%	Yes	
	Total	38.4%	25.3%	65.9%

According to the Euromonitor data (28), the five most purchased beers in the Netherlands represent 61% of all bought beers. In our data, the following shops were assessed: Plus (Amsterdam), Jumbo (Amsterdam), Local Small Shop (Amsterdam), Lidl (Amsterdam), and Albert Heijn (XL) (Rotterdam). Four market leaders were present in our sample of five stores. 91% of the top 5 beers contain a health-related message, meaning 9% of these brands do not contain a health-related message.

Table 37: Top 5 beers in the Netherlands (%)

Netherlands	Top 5 beers (Euromonitor data)	% of all bought beers (Euromonitor data)	Label top 5 beers	% of top 5 beers with label
	1st market leader	21.7%	Yes	
	2nd market leader	13.5%	Yes	
	3rd market leader	11.7%	Yes	
	4th market leader	8.8%	Yes	
	5th market leader	5.7%	No	
	Total	61.4%	55.7%	90.7%

According to the Euromonitor data (28), the five most purchased beers in Poland represent 48% of all bought beers. In our data, the following shops were assessed: Bierdronka (Krakow), Auchan (Krakow), Local Small Shop (Krakow), and Local Small Shop (Warsaw). All five market leaders were present in our sample of four shops. All top 5 beers sold in Poland contain a health-related message.

Table 38: Top 5 beers in Poland (%)

Poland	Top 5 beers (Euromonitor data)	% of all bought beers (Euromonitor data)	Label top 5 beers	% of top 5 beers with label
	1st market leader	13.8%	Yes	
	2nd market leader	12.5%	Yes	
	3rd market leader	8.2%	Yes	
	4th market leader	7.5%	Yes	
	5th market leader	5.8%	Yes	
	Total	47.8%	47.8%	100.0%

According to the Euromonitor data (28), the five most purchased beers in Portugal represent 76% of all bought beers. In our data, the following shops were assessed: Lidl (Lisbon), Pingo Doce (1) (Lisbon), Pingo Doce (2) (Lisbon), Lidl (Porto), and Local Small Shop (Porto). Three market leaders were present in our sample of five shops. 95% of the top 5 beers in Portugal contain a health-related message. This means 5% of these brands do not.

Table 39: Top 5 beers in Portugal (%)

Portugal	Top 5 beers (Euromonitor data)	% of all bought beers (Euromonitor data)	Label top 5 beers	% of top 5 beers with label
	1st market leader	35.3%	Yes	
	2nd market leader	33.6%	Yes	
	3rd market leader	3.3%	Yes	
	4th market leader	2.3%	No	
	5th market leader	1.7%	No	
	Total	76.2%	72.2%	94.8%

According to the Euromonitor data (28), the five most purchased beers in Romania represent 50% of all bought beers. In our data, the following shops were assessed: Penny Market (Bucharest), Kaufland (Bucharest), Lidl (1) (Bucharest), and Lidl (2) (Bucharest). Four market leaders were present in our sample of four shops. In Romania, 82% of the top 5 beers contain a health-related message. Thus, 18% of these beers do not contain a health-related message.

Table 40: Top 5 beers in Romania (%)

Romania	Top 5 beers (Euromonitor data)	% of all bought beers (Euromonitor data)	Label top 5 beers	% of top 5 beers with label
	1st market leader	14.8%	Yes	
	2nd market leader	11.2%	Yes	
	3rd market leader	8.7%	No	
	4th market leader	8.6%	Yes	
	5th market leader	6.2%	Yes	
	Total	49.5%	40.8%	82.4%

According to the Euromonitor data (28), the five most purchased beers in Spain represent 56% of all bought beers. In our data, the following shops were assessed: Dia (Madrid), Hipercor (Madrid), SPAR (Madrid), Dia (Barcelona), Eroski (Barcelona), and Local Small Shop (Barcelona). All five market leaders were present in our sample of five shops. All top 5 beers sold in Spain contain a health-related message.

Table 41: Top 5 beers in Spain (%)

Spain	Top 5 beers (Euromonitor data)	% of all bought beers (Euromonitor data)	Label top 5 beers	% of top 5 beers with label
	1st market leader	16.5%	Yes	
	2nd market leader	12.9%	Yes	
	3rd market leader	10.7%	Yes	
	4th market leader	7.8%	Yes	
	5th market leader	7.7%	Yes	
	Total	55.6%	55.6%	100.0%

According to the Euromonitor data (28), the five most purchased beers in the UK represent 47% of all bought beers. In our data, the following shops were assessed: TESCO (London), Waitrose (London), Costcutter (London), and Costcutter (Brimingham). Four market leaders were present in our sample of four shops. 78% of the top 5 beers in the UK contain a health-related message, meaning 22% of these beers do not.

Table 42: Top 5 beers in the UK (%)

United Kingdom	Top 5 beers (Euromonitor data)	% of all bought beers (Euromonitor data)	Label top 5 beers	% of top 5 beers with label
	1st market leader	13.7%	Yes	
	2nd market leader	10.5%	No	
	3rd market leader	9.5%	Yes	
	4th market leader	8.6%	Yes	
	5th market leader	4.9%	Yes	
	Total	47.2%	36.7%	77.8%

When we look at the presence of the top 5 beers within the separate countries, there are three countries where three or more out of the five top beers were not included in our assessed list of beers with health-related messages on them. These are Denmark, Germany and Greece. Furthermore, the proportion of beers with health-related messages compared to the proportion of the top five beers varies between 0% (no beer within the top 5 beers was assessed as having a health-related label on them) and 100% (every beer within the top 5 beers was assessed as having a health-related label on them). More precisely, in five out of 15 countries (namely Belgium, France, Ireland, Poland and Spain), all top 5 beers are assessed and include at least one health-related message. In only one country out of 15 (namely Greece), none of the top 5 beers are assessed and include at least one health-related message.

5.6.2 Spirits and their market share

According to the Euromonitor data (28), the six (two brands share the fifth place) most purchased spirits in Belgium represent 24% of all bought spirits. In our data, the following Belgian shops were assessed: Colruyt (Brussels), Match (Antwerp), Lidl (Antwerp) and Lidl (Antwerp). Four market leaders were present in our sample of four shops. In Belgium, 83% of the top 5 spirits contain a health-related message.

Table 43: Top 5 spirits in Belgium (%)

Belgium	Top 5 beers (Euromonitor data)	% of all bought beers (Euromonitor data)	Label top 5 beers	% of top 5 beers with label
	1st market leader	4.4%	Yes	
	2nd market leader	4.1%	Yes	
	3rd market leader	4.1%	No	
	4th market leader	4.1%	Yes	
	5th market leader	3.6%	Yes	
	Total	23.9%	19.8%	82.8%

According to the Euromonitor data (28), the five most purchased spirits in the Czech Republic represent 44% of all bought spirits. In our data, the following Czech shops were assessed: Billa (Brno), Penny Market (Brno), Penny Market (Prague) and SPAR (Prague). Only one market leader was present in our sample of four shops. Of the top 5 brands, 14% contain a health-related message. This means that 86% of the top 5 spirits in the Czech Republic do not.

Table 44: Top 5 spirits in the Czech Republic (%)

Czech Republic	Top 5 beers (Euromonitor data)	% of all bought beers (Euromonitor data)	Label top 5 beers	% of top 5 beers with label
	1st market leader	15.7%	No	
	2nd market leader	7.9%	No	
	3rd market leader	7.2%	No	
	4th market leader	7.2%	No	
	5th market leader	6.3%	Yes	
	Total	44.3%	6.3%	14.2%

According to the Euromonitor data (28), the five most purchased spirits in Denmark represent 33% of all bought spirits. In our data, the following Danish shops were assessed: Fotex (Copenhagen), Netto (1) (Copenhagen), Netto (2) (Copenhagen) and Irma (Copenhagen). Three market leaders were present in our sample of four shops. Of the top 5 brands, 26% contain a health-related message. This means that 80% of the top 5 beers in Denmark do not.

Table 45: Top 5 spirits in Denmark (%)

Denmark	Top 5 beers (Euromonitor data)	% of all bought beers (Euromonitor data)	Label top 5 beers	% of top 5 beers with label
	1st market leader	16.1%	Yes	
	2nd market leader	5.2%	Yes	
	3rd market leader	5.0%	Yes	
	4th market leader	3.3%	No	
	5th market leader	3.2%	No	
	Total	32.8%	26.3%	80.2%

According to the Euromonitor data (28), the five most purchased spirits in France represent 26% of all bought spirits. In our data, the following French shops were assessed: Monoprix (Paris), Carrefour (Paris), Local Small Shop (Paris), Leader Price (Marseille) and Intermarche (Marseille). Four market leaders were not present in our sample of five stores. Of the top 5 brands, 9% contain a health-related message or 36% of all spirits. As the law postulates that a warning for drinking alcohol during pregnancy is compulsory, the explanation for this percentage is that the absence of these brands was not present in the stores in our sample and therefore not assessed.

Table 46: Top 5 spirits in France (%)

France	Top 5 beers (Euromonitor data)	% of all bought beers (Euromonitor data)	Label top 5 beers	% of top 5 beers with label
	1st market leader	9.2%	Yes	
	2nd market leader	5.5%	No	
	3rd market leader	4.3%	No	
	4th market leader	3.6%	No	
	5th market leader	2.9%	No	
	Total	25.5%	9.2%	36.1%

According to the Euromonitor data (28), the five most purchased spirits in Germany represent 13% of all bought spirits. In our data, the following German shops were assessed: Lidl (Berlin), Penny Market (Berlin), Penny Market (Hamburg), and EDEKA (Hamburg). Only two market leaders were present in our sample of four shops. As a result, of the top 5 brands in Germany, 68% do not contain a health-related message.

Table 47: Top 5 spirits in Germany(%)

Germany	Top 5 beers (Euromonitor data)	% of all bought beers (Euromonitor data)	Label top 5 beers	% of top 5 beers with label
	1st market leader	3.6%	No	
	2nd market leader	2.8%	Yes	
	3rd market leader	2.4%	No	
	4th market leader	1.6%	No	
	5th market leader	1.5%	Yes	
	Total	13.4%	4.3%	32.1%

According to the Euromonitor data (28), the five most purchased spirits in Greece represent 28% of all bought spirits. In our data, the following shops were assessed: Lidl (1) (Athens), Lidl (2) (Athens), Local Small Shop (Athens), and Sklavenitis (Athens). The spirits that form the market leaders in Greece were not often present in our dataset. Therefore, in Greece, 16% of the top 5 spirits contain a health-related message. This means 84% of these top 5 spirits do not.

Table 48: Top 5 spirits in Greece (%)

Greece	Top 5 beers (Euromonitor data)	% of all bought beers (Euromonitor data)	Label top 5 beers	% of top 5 beers with label
	1st market leader	10.6%	No	
	2nd market leader	5.0%	No	
	3rd market leader	4.6%	Yes	
	4th market leader	4.0%	No	
	5th market leader	3.7%	No	
	Total	27.9%	4.6%	16.5%

According to the Euromonitor data (28), the five most purchased spirits in Ireland represent 57% of all bought beers. In our data, the following shops were assessed: SPAR (Dublin), Centra (Dublin), Dunnes (Dublin), and Londis (Dublin). Two market leaders were present in our sample of four shops. 70% of the top 5 spirits in Ireland contain a health-related message.

Table 49: Top 5 spirits in Ireland (%)

Ireland	Top 5 beers (Euromonitor data)	% of all bought beers (Euromonitor data)	Label top 5 beers	% of top 5 beers with label
	1st market leader	20.8%	Yes	
	2nd market leader	9.2%	Yes	
	3rd market leader	4.9%	No	
	4th market leader	4.2%	No	
	5th market leader	3.8%	No	
	Total	42.9%	30.0%	69.9%

According to the Euromonitor data (28), the five most purchased spirits in Italy represent 22% of all bought spirits. In our data, the following shops were assessed: Conad (Rome), Local Small Shop (Rome), PAM (Milan), and Esselunga (Superstore) (Milan). Only two market leaders were present in our sample of four shops. 24% of the top 5 spirits contain a health-related message, meaning 76% of them do not.

Table 50: Top 5 spirits in Italy (%)

Italy	Top 5 beers (Euromonitor data)	% of all bought beers (Euromonitor data)	Label top 5 beers	% of top 5 beers with label
	1st market leader	8.5%	No	
	2nd market leader	4.1%	No	
	3rd market leader	3.8%	No	
	4th market leader	2.7%	Yes	
	5th market leader	2.5%	Yes	
	Total	21.6%	5.2%	24.1%

According to the Euromonitor data (28), the five most purchased spirits in Latvia represent 28% of all bought spirits. In our data, the following shops were assessed: IKI (Riga), Supernetto (Riga), Local Small Shop (Riga), and Elvi (Riga). None of the top 5 spirits in Latvia are found or contain a health-related message in our sample of four shops.

Table 51: Top 5 spirits in Latvia (%)

Latvia	Top 5 beers (Euromonitor data)	% of all bought beers (Euromonitor data)	Label top 5 beers	% of top 5 beers with label
	1st market leader	7.8%	No	
	2nd market leader	6.5%	No	
	3rd market leader	4.9%	No	
	4th market leader	4.5%	No	
	5th market leader	4.3%	No	
	Total	28.0%	0.0%	0.0%

According to the Euromonitor data (28), the five most purchased spirits in the Netherlands represent 23% of all bought spirits. In our data, the following shops were assessed: Plus (Amsterdam), Jumbo (Amsterdam), Local Small Shop (Amsterdam), Lidl (Amsterdam), and Albert Heijn (XL) (Rotterdam). Only two market leaders were present in our sample of five shops. In the Netherlands, 39% of the top 5 spirits contain a health-related message. This means 61% of these brands do not contain a health-related message.

Table 52: Top 5 spirits in the Netherlands (%)

Netherlands	Top 5 beers (Euromonitor data)	% of all bought beers (Euromonitor data)	Label top 5 beers	% of top 5 beers with label
	1st market leader	5.9%	No	
	2nd market leader	5.3%	Yes	
	3rd market leader	4.4%	No	
	4th market leader	4.0%	No	
	5th market leader	3.7%	Yes	
	Total	23.3%	9.0%	38.6%

According to the Euromonitor data (28), the five most purchased spirits in Poland represent 43% of all bought spirits. In our data, the following shops were assessed: Bierdronka (Krakow), Auchan (Krakow), Local Small Shop (Krakow), and Local Small Shop (Warsaw). Only one market leader was present or contained a health-related message in these four shops. In Poland, 19% of the top 5 spirits contain a health-related message. Therefore, 81% of them do not contain a health-related message.

Table 53: Top 5 spirits in Poland (%)

Poland	Top 5 beers (Euromonitor data)	% of all bought beers (Euromonitor data)	Label top 5 beers	% of top 5 beers with label
	1st market leader	12.7%	No	
	2nd market leader	11.8%	No	
	3rd market leader	8.3%	Yes	
	4th market leader	5.6%	No	
	5th market leader	5.0%	No	
	Total	43.4%	8.3%	19.1%

According to the Euromonitor data (28), the five most purchased spirits in Portugal represent 29% of all bought spirits. In our data, the following shops were assessed: Lidl (Lisbon), Pingo Doce (1) (Lisbon), Pingo Doce (2) (Lisbon), Lidl (Porto), and Local Small Shop (Porto). Three market leaders were present in our sample of five shops. 64% of the top 5 spirits bought in Portugal contain a health-related message.

Table 54: Top 5 spirits in Portugal (%)

Portugal	Top 5 beers (Euromonitor data)	% of all bought beers (Euromonitor data)	Label top 5 beers	% of top 5 beers with label
	1st market leader	8.2%	Yes	
	2nd market leader	6.1%	Yes	
	3rd market leader	5.2%	No	
	4th market leader	5.0%	No	
	5th market leader	4.1%	Yes	
	Total	28.6%	18.4%	64.3%

According to the Euromonitor data (28), the five most purchased spirits in Romania represent 36% of all bought spirits. In our data, the following shops were assessed: Penny Market (Bucharest), Kaufland (Bucharest), Lidl (1) (Bucharest), and Lidl (2) (Bucharest). Not a single market leader was found or contained a health-related message on their label in these four assessed shops. In Romania, 0% of the top 5 spirits contain a health-related message.

Table 55: Top 5 spirits in Romania (%)

Romania	Top 5 beers (Euromonitor data)	% of all bought beers (Euromonitor data)	Label top 5 beers	% of top 5 beers with label
	1st market leader	10.5%	No	
	2nd market leader	10.2%	No	
	3rd market leader	5.2%	No	
	4th market leader	5.2%	No	
	5th market leader	4.6%	No	
	Total	35.7%	0.0%	0.0%

According to the Euromonitor data (28), the five most purchased spirits in Spain represent 22% of all bought spirits. In our data, the following shops were assessed: Dia (Madrid), Hipercor (Madrid), SPAR (Madrid), Dia (Barcelona), Eroski (Barcelona), and Local Small Shop (Barcelona). Four market leaders were present in our sample of six shops. 82% of the top 5 spirits in Spain contain a health-related message.

Table 56: Top 5 spirits in Spain (%)

Spain	Top 5 beers (Euromonitor data)	% of all bought beers (Euromonitor data)	Label top 5 beers	% of top 5 beers with label
	1st market leader	4.6%	Yes	
	2nd market leader	4.5%	Yes	
	3rd market leader	4.5%	Yes	
	4th market leader	4.3%	Yes	
	5th market leader	3.9%	No	
	Total	21.8%	17.9%	82.1%

According to the Euromonitor data (28), the five most purchased spirits in the UK represent 27% of all bought spirits. In our data, the following shops were assessed: TESCO (London), Waitrose (London), Costcutter (London), and Costcutter (Brimingham). Two market leaders were present in our sample of four shops. 52% of the top 5 spirits in the UK contain a health-related message, meaning 48% of these spirits do not.

Table 57: Top 5 spirits in the UK (%)

United Kingdom	Top 5 beers (Euromonitor data)	% of all bought beers (Euromonitor data)	Label top 5 beers	% of top 5 beers with label
	1st market leader	10.7%	Yes	
	2nd market leader	6.0%	No	
	3rd market leader	3.7%	No	
	4th market leader	3.5%	No	
	5th market leader	3.3%	Yes	
	Total	27.2%	14.0%	51.5%

After reviewing the market share analyses for spirits, we can conclude that it is less likely that within a certain country, the top 5 sold spirits represent more than half of the spirits sold in that country. In fact, none of the countries under study had a market share above 50% when looking at only the market shares of the top 5 most sold spirits. Looking at the market shares of the top 5 spirits, five out of 15 countries even had a market share of less than 25% (namely Belgium, Germany, Italy, the Netherlands and Spain). The highest market share of the top 5 spirits was in the Czech Republic (44%). This means that there is a lot of variation when it comes to the spirits sold in these fifteen countries. The percentage of top 5 spirits with a health-related message on them varies between 0% (this was the case for Latvia and Romania) and 83% (Belgium). In none of the 15 countries did every top 5 spirit carry a health-related message. In 9 out of fifteen countries, less than half of the top 5 carried a health-related message. In 6 out of fifteen countries, more than half of the top 5 carried a health-related message.

5.6.3 Market share analysis of beers and spirits

After presenting the market share analyses for 15 countries regarding beers and spirits, we can consider the results together. The variation in beer in most countries is smaller than the variation in spirits sold. This variation makes apparent that policy agreements between producers of the five most popular beers or agreements between producers of the five most popular spirits within a country may lead to very different effects on the presence of health-related messages on labels of alcoholic beverages. Policy that affects the top beer market leaders may have a much bigger influence than policy that affects the top spirits market leaders.

6. Discussion

This report presented the findings of an audit of health-related messages placed on alcoholic beverage labels to inform and educate European consumers on the impact of alcohol consumption and on appropriate consumption patterns. This examination of the state of play in the use of alcoholic beverage labels to inform consumers about the health aspects of alcohol consumption was set in the context of the EU strategy to support Member States in reducing alcohol related harm (1). Messages related to the impact of harmful and hazardous alcohol consumption and on appropriate consumption patterns. More precisely, the following specific health-related messages were examined:

(1) drinking during pregnancy;
(2) information about drinking guidelines via the use of units or grams;
(3) legal age limits for purchasing alcoholic beverages;
(4) messages about drinking in moderation; and
(5) messages about drinking and driving.

Several Member States, but also several alcohol producers in the European Union introduced codes and commitments regarding labelling for alcoholic products and as a consequence, there is a lot of variation in terms of nature and scope of alcohol labelling within the European Union (7). Variation in regulation and other voluntary labelling initiatives means that it is difficult to gain an overall understanding of labelling patterns across Europe. Furthermore, the increasingly global production and sale of alcoholic beverages means that alcoholic beverages sold in individual EU Member States could carry massages that are determined by policies elsewhere. This report provides the first comprehensive picture of labelling alcoholic beverages.

The report is based on an audit directed at the supply side of alcohol in 60 small, medium and large retailers within fifteen European countries. These fifteen European countries represent 89% of the European Union population, the twelve most populated Member States. They are: Germany, France, the UK, Italy, Spain, Poland, Romania, the Netherlands, Greece, Belgium, Portugal, the Czech Republic, Denmark, Ireland and Latvia. This mix of countries also represents a good spread in terms of geography and cultural heritage. We included in the audit all sorts of alcohol and all types of alcohol packaging. More precisely, information on alcoholic beverage labels and messages was collected from all products from the alcoholic beverage categories of beers, wines and spirits sold in packages such as bottles, cans, cartons, boxes, vessels and so on.

Information was gathered at different levels. Firstly, we examined all alcoholic beverages in each country, city, and shop. Secondly, we examined the label for any information that informed consumers about the health aspects of alcohol consumption. Alcoholic beverages on which this information was not present were not examined in further detail. Alcoholic beverages on which this information was present were examined in further detail, looking at all the data that could be found on the label of the alcoholic package. Thirdly, for every message identified, specific message-related information was gathered, such as the presentation and layout of a message. In total, we audited 25,730 alcoholic beverages with limited information, information on 4,317 alcoholic beverages with at least one health-related message on the label and detailed information about 4,796 health-related messages.

To complement our audit in which all brands were examined, the five most popular brands of beer and the five most popular brands of spirits were investigated via a market share analysis per country. We assessed the market share of the top 5 brands and how many of them were included in our data as alcoholic beverage with at least one health-related message. The results of these analyses are summarised hereafter and subsequently, a general conclusion is drawn, reflecting on the results of this work.

6.1 Summary of the results

6.1.1 Presence of health-related messages found on alcoholic beverages and their origin

First, the presence of health-related messages on alcoholic beverages and the origin of these alcoholic beverages were examined. In general, the presence of health-related messages on labels of alcoholic beverages is very low. Only 17% of all alcoholic beverages examined in this study have one or more messages informing consumers about alcohol consumption or on appropriate consumption patterns. As stated, the messages uncovered referred to drinking during pregnancy; legal age limits for consumption or purchasing alcohol; alcohol content expressed in units or grams; drinking in moderation; and drink driving. These five most popular messages are still not widespread within European countries. This is not very surprising in an environment where there is very limited regulation or agreement in place with respect to health-related labelling of alcoholic beverages. The only mandatory requirement at the EU level is a requirement for display of the alcoholic strength by volume. And as set out in Farke et al. (6), national level regulation is rare, with France being the only country to mandate a particular health warning label across all alcoholic products.

Additionally, it is reported that most alcoholic beverages with health-related messages have only one health-related message on their label. The proportion of alcoholic beverages with multiple messages on their label is small. When examining the alcoholic beverages with messages on labels, less than a quarter have two or more messages. Differences limited across alcoholic beverage types: 19% of wines have one or more messages; against 15% of spirits; and 14% of beers.

The origin of alcoholic beverages with health-related messages on them varies with the alcohol type. Beers with health related messages are more often domestic (62%), while wines (21%) and spirits (26%) are usually non-domestic. National regulation or even European regulations may therefore have more impact for beers than for wines and spirits. Nevertheless, the percentage of health-related messages on the alcoholic labels per alcohol type does not vary greatly.

6.1.2 Type of health-related messages and additional nutrition information

Second, the different types of health-related messages were examined separately. Looking at the data aggregated across all countries, the most frequent message found on labels across all alcoholic beverage types was messages warning consumers of drinking alcohol during pregnancy, regardless of alcohol type. In total, between 8% (for the 'others' category) and 19% (for wine) of labels carried such a warning. All other types of messages were present in less than 5% of alcoholic beverage packages assessed. It seems that the warning for pregnant women to not drink alcohol is the most popular information on the label of alcoholic beverages, yet, the percentages remain low when compared to all alcoholic beverages, including those without any message whatsoever.

The pregnancy warning label has been mandatory on all labelling of alcoholic beverages in France since 2007 (6). It is therefore perhaps not surprising that this is the label that has the greatest coverage across Europe. As shown in this report, a large proportion of the products with at least one health-related message were not sold in the country in which they originated, hence a mandatory warning in one country may have a large impact in such an international market. On the other hand, the effect of the various voluntary agreements in other countries appears to have been small. Although voluntary agreements have been put into place, the proportion of beverage packages carrying at least one warning label in these countries is often below 30%.

The inclusion on the label of information on ingredients, calories, vitamins and sulphites was assessed on those products that carried at least one health-related message. When a health-related message was present, a considerable proportion of packages also included information regarding sulphites and ingredients. Additional nutrition information regarding calories and vitamins was rarely presented on the labels of alcoholic beverages. As noted previously, there is no current obligation to carry any ingredient or nutritional information on alcoholic beverage labels, although this is due to be reviewed at the end of 2014 (5). We found that there were differences between alcoholic beverage types in terms of the ingredient information available. Although over 80% of beer labels assessed included an ingredients list, less than 40% of wine and spirit labels assessed had an ingredients list. There was very little information on any beverage type regarding calorie content or vitamins.

6.1.3 Presentation of health-related messages

Third, the presentation of health-related messages was examined, specifically the visibility and clarity of messages on labels. During the course of the research, assessors were asked to state whether the message itself was visible and easy to understand. In the majority of assessments, messages were judged to be clearly visible and easy to understand, with proportionally few cases to the contrary. Few differences were observed in the clarity of messages across the alcoholic beverage type, with only a minor tendency for messages on beer labels to have lower visibility than messages on labels of wines and spirits. While looking at the messages themselves, they may appear clearly visible and easy to understand, but of course, the layout as well, is interesting to study.

6.1.4 Layout of health-related messages

Fourth, the layout of health-related messages was examined, specifically the position on the label. The majority of messages across the three different alcoholic beverage types were placed on the back of the package. With regard to beer labelling, the sides and top of the beer packages are often used for messages, with cans often having them on the sides, and cartons/boxes on the top. When looking at the different types of messages, only limited variation was observed. When we crossed data regarding placement of message with type of message and type of packaging, some variation appeared, but the numbers were small reducing the reliability of the data.

In terms of their format, messages vary greatly (some are text, some logo and some both) with the exception of the specific warning for pregnant women, which, in the majority of cases, is presented as a logo. There is no clear consistency over the types of alcohol and types of packaging when looking at the format of the message. A combination of both text and logo is less common than either logo or text format alone. When we look at the type of message, the percentage of messages in the form of a logo is somewhat higher than the percentage of messages in the form of a text, but this can be explained since a lot of messages refer to the warning for pregnant women, the type of message that is most often formatted as a logo.

Text messages are mostly written in the local language, but a considerable proportion of them are stated in a foreign language. With regard to the alcoholic type, wines most often carried messages in foreign languages. It seems not the type of message but the type of alcohol that affects this language choice. It is possible that a significant proportion of beers assessed in this study is domestic in origin and thus informs the consumer in their local language. On the contrary, assessed wines may more often originate from non-domestic countries.

Finally, it was found that messages are rarely set within a frame; there are no clear trends when looking at type of alcohol, type of package or type of message.

6.1.5 Size of labels and health-related messages

Fifth, the size of labels and messages was considered. The size of labels compared to the package was small. In general, labels covered 7% (median) of the package. This proportion varied per type of packaging. Cans, cartons and boxes, and vessels had labels that covered more of the total package than for instance bottles (comparing median proportions). It is the type of package, and more precisely the bottle as package that dictates the relative size of the label to the package (smaller on bottles).

Furthermore, the size of the message itself was compared to the total size of the label. This proportion was also found to be rather small. In general, a message took up 7% (median) of the total label size. This result varied somewhat between package types. Cans, cartons and boxes, and vessels had slightly larger messages compared to their labels. Furthermore, the type of message seemed to influence the size of the message compared to the size of the label. The size of the message that warned the public about drinking alcohol whilst pregnant was smaller compared to the size of the messages about other health-related issues. Also the package type seemed to have an impact on the size of the message compared to the size of the label. The differences, however, are limited and it was not possible to see clear trends or come to reliable conclusions. Indeed, the auditors had to make estimations and these subjective indications should be looked at with some caution. They are indications of the size and not objective data or exact measures.

6.1.6 Market shares of beers and spirits

Sixth, the market shares of beers and spirits were researched at the country level. Therefore, the conclusions are drawn looking at fifteen different results and take the different countries into account. First of all, the market shares of the top 5 beers were researched per country. The top 5 market leaders make up a relatively large proportion of the market. The highest market share of the top 5 beers was 76% in Portugal. Still, there are countries in which this market share of the top 5 market leaders is much smaller; the lowest market share was 22% in Germany. This variation makes clear that policy agreements between producers of the five most popular beers within a country will not have the same effect in every country.

When we studied the presence of the top 5 beers within the separate countries, there were three countries of which three or more out of the five top beers were not included in our assessed list of beers with health-related messages on them. These were Denmark, Germany and Greece.

Furthermore, the proportion of beers with health-related messages compared to the proportion of the top five beers was assessed. It varied between 0% (no beer within the top 5 beers was assessed as having a health-related message) and 100% (every beer within the top 5 beers was assessed as having a health-related message). More precisely, in five out of 15 countries (namely Belgium, France, Ireland, Poland and Spain), all top 5 beers were assessed and included at least a one health-related message. On the contrary, in one country out of 15 (namely Greece), none of the top 5 beers were assessed and included at least a one health-related message.

With regard to spirits, a different picture emerged from the market share analyses per country. It was less likely that within a certain country, the top 5 sold spirits represented more than half of total market share. In fact, none of the countries under study had a market share above 50% for the top 5 most sold spirits. Five out of 15 countries had a market share of less than 25% for the top 5 spirits (namely Belgium, Germany, Italy, the Netherlands and Spain). The highest market share of the top 5 spirits was in the Czech Republic (44%). This means that there is a lot of variation when it comes to the spirits sold in these fifteen countries.

As a consequence (and in contrast to the results of the market share analyses of beers), the number of spirits assessed in this study that carried a health-related message did not correspond well with the top 5 spirits. The percentage of top 5 spirits with a health-related message on them varied between 0% (this was the case for Latvia and Romania) and 83% (Belgium). In none of the 15 countries were all top 5 spirits assessed and carried a health-related message. In nine out of fifteen countries, less than half of the top 5 market leaders were assessed and carried a health-related message. And in six out of fifteen countries, more than half of the top 5 market leaders were assessed and carried a health-related message.

6.2 Conclusion

This research highlights the wide divergence in alcohol labelling in Europe. Thus, there appears to be a need for the development of guidelines or standardisation for industry in alcoholic beverage labelling and a European-wide regulation. Guidelines are needed which set out best practice in terms of the message to be conveyed, the method of communication (using text or logos), the language to be used and the presentation of the message in terms of size, position and other factors affecting clarity.

It is recommended that any process of standardization be led by consumer behaviour research, such as behavioural experiments and consumer surveys. Such methods would enable empirical testing of the impacts of messages on consumer attitudes and behaviours i.e. how do consumers respond to messages? Do messages influence consumers' consumption or purchasing behaviour? Do consumers' attitudes change when they are aware of the health-related messages on the alcoholic beverages they buy in stores? What are the differential effects of logos versus text messages (or a combination of the two) on consumer behaviour?

In addition, further supply-side research could use the audit data provided by this research to explore research questions relating to suppliers and producers of alcoholic beverages i.e. are there public-private agreements? If so, do these agreements affect the behaviour of other suppliers and producers? What are the impacts of cross-border trade on alcohol labelling?

Continued research could also examine the most effective policy mechanism for implementing alcohol-labelling policies. Our findings suggest that regulation may be more effective than voluntary agreements. A further question is the impact that the presence of any labelling requirements has on Member State policy?

This research has highlighted the limited presence of health messages on alcohol labelling. The impact of any standardisation or guidelines for messaging will remain limited if, as is currently the case, less than one in five alcohol labels carry it. The possible means to increase the proportion of beverages carrying labels should therefore be explored, with legal requirements for messages on alcoholic beverages the ultimate means of doing this.

Finally, the additional market share analyses on beers and spirits is interesting for several reasons. First of all, it is difficult to assume that an agreement on the inclusion of health-related messages on labels between the top alcohol producers may result in a revolution. A lot of variation exists in market shares and when for instance, the top five beer or spirit producers in a country agree on a certain labelling practice, this may influence between 22% and 76% of the national beer market and between 13% and 44% of the national spirits market. Next, European guidelines may affect the national context of labelling in different ways. The effect may differ with share of imported non-EU beers that do not have to follow European guidelines.

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8. Annex

See http://www.significant.be\presentaties\gfk eu3c\Annex.docx

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