Attitudes to alcohol
Findings from the 2015 British Social Attitudes survey
Summary

This paper presents new findings on attitudes to alcohol. The use of alcohol is part of life for a large proportion of the British public. However, there is relatively strong public support for tighter government regulation of alcohol in some areas, including the introduction of Minimum Unit Pricing and strengthening drink-driving laws.

A majority of the public supports the principle of Minimum Unit Pricing (MUP) for alcohol. Only one-quarter actively oppose the idea.

- Those who drink the most alcohol, classified as ‘increasing-risk drinkers’, are significantly less likely to support the principle of MUP than others. Less than one-third support the idea, compared with over half of ‘lower-risk drinkers’ and non drinkers.
- Nearly half of people (46%) think that MUP would be effective in reducing young people’s drinking.
- Just over one-third of people (36%) think MUP would be effective in reducing heavy drinking.

Over three-quarters of people believe that the amount of alcohol drivers are allowed to drink should be reduced. Just over one in ten (10%) disagree.

- Women (82%) are more likely than men (72%) to think that the drink-drive limit should be lowered. ‘Increasing-risk drinkers’ are slightly less likely (71%) to think that the drink-drive limit should be reduced than ‘lower-risk drinkers’ (76%) and non drinkers (85%).
- Over half (54%) disagree with the assertion that “whatever the law says, most people are safe to drive after a pint of beer”.

![Support Minimum Unit Pricing for alcohol](image1.png)

![Believe the drink-drive limit should be lowered](image2.png)
Introduction

In 2015 Public Health England (PHE) commissioned questions on the British Social Attitudes survey (BSA) to measure public attitudes to four subject areas - alcohol, obesity, dementia and mental wellbeing.

This paper presents analysis of the results of the questions about alcohol. It summarises findings in relation to four key policy areas: Minimum Unit Pricing (MUP); advertising and sponsorship by alcoholic drink companies; drink-driving limits; and health messages.

The survey included 37 questions about alcohol; 20 of these questions had previously been included on the Scottish Social Attitudes (SSA) survey, BSA’s sister survey. The rest of the questions were developed through a process of questionnaire design and piloting.

Carried out annually since 1983, BSA is an authoritative source of data on the views of the British public. It uses a random probability sampling methodology to yield a representative sample of adults aged 18+ living in private households in Britain. The majority of questions are asked by an interviewer face-to-face in the form of a Computer Assisted Personal Interview (CAPI), while a smaller number are answered by respondents in a self-completion booklet. Questions relating to alcohol were included in both sections of the survey.

Data collection was carried out between July and November 2015 and the overall response rate was 51%. 2,161 respondents answered the questions on alcohol delivered face-to-face while the equivalent achieved sample for the self-completion questions was 1,827. The data have been weighted to account for non-response bias and calibrated to match the population profile on the basis of age, sex and region. All differences described in the text (between different groups of people) are statistically significant at the 95% level or above, unless otherwise specified.

Wider context

Drinking alcohol is widespread in Britain. There has been increasing concern in recent years about the impact of alcohol on public health. In England, alcohol was one of the themes of the 2011 Public Health Responsibility Deal (Department of Health, 2011), and the latest government alcohol strategy was published in 2012 (HM Government, 2012).

The potential health harms of alcohol are both immediate and long term. Acute risks include injury through assaults and accidents, particularly road traffic accidents. Long-term health risks include liver cirrhosis, stroke, heart disease, and many cancers (Centre for Public Health, Liverpool John Moores University, 2014). In England in 2013/14 there were more than one million hospital admissions that were wholly or partly attributable to alcohol, more than twice the number in 2004/05. In 2013 there were 6,592 alcohol-related

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1 Apart from in 1988 and 1992 when its core funding was used to fund the British Election Study series
deaths in England, an increase of 10% since 2003 (Health and Social Care Information Centre, 2015).

There has been a growing body of evidence to support the use of pricing as a means to limit harmful levels of alcohol consumption, specifically by introducing a minimum price per unit of alcohol. Legislation providing for Minimum Unit Pricing (MUP) was passed in Scotland in 2012, although the legislation has not been implemented due to legal challenges (The Scottish Government, 2015). MUP was proposed in England in the 2012 alcohol strategy, but as a consequence of subsequent consultation has not been taken forward (Home Office, 2013).

In early 2016, the Chief Medical Officers of the four UK nations published new guidance for regular drinkers on the amounts of alcohol that could be consumed, based on a systematic review of evidence (Department of Health, 2016). These guidelines recommended that adults who drank regularly should consume no more than 14 units per week spread over several days, a level that was consistent with low risk (not no risk) of alcohol-related health harms.

These guidelines are intended to supersede guidance that had been in place since 1995, recommending that men should not regularly drink more than three to four units a day and women not more than two to three units a day. These were the NHS recommendations at the time of the fieldwork for BSA 2015.

**How much do British adults drink?**

To understand people’s attitudes to alcohol, it is useful to know how much, if any, alcohol they themselves consume. For this reason, we asked respondents how frequently they have a drink containing alcohol and for those who do drink, how many drinks containing alcohol they drink on a typical day when they are drinking.

Eighty five per cent of men and 79% of women report drinking alcohol at least occasionally; this includes 47% of men and 33% of women who report that they drink at least once a week.

The BSA questionnaire asked about drinks, with half a pint of beer or a small glass of wine is defined as one drink, roughly equivalent to a unit of alcohol. On a typical day of drinking, almost half (49%) of drinkers have one or two units only. However 24% of men and 16% of women drink more than four units in a typical day of drinking.

Over half (55%) of people who drink sometimes have six or more drinks in one sitting. This includes 18% of men and 6% of women who say that they have six or more drinks on a single occasion at least once a week. Fewer than 1% of men or women drink this much every day.

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3 In the United Kingdom, a unit of alcohol is equivalent to 8g or 10ml of pure alcohol.
4 This is consistent with the prevalence of drinking measured by other surveys, for example the Health Survey for England, the Scottish Health Survey and the Welsh Health Survey.
5 This is probably an underestimate. The 2014 Health Survey for England estimated that 59% of men and 43% of women drank alcohol at least once a week (Craig, Fuller and Mindell, 2015).
6 Although the questionnaire asked about drinks, this report also refers to units of alcohol; the two are assumed to be equivalent.
The BSA questions on drinking behaviour used an abbreviated version of the Alcohol Use Disorders Identification Test (AUDIT), a widely used instrument designed to detect risk levels in drinkers (Babor et al, 2001). This enabled respondents to be classified into three categories, based on the frequency and amounts of alcohol they drink. Eighteen per cent did not drink at all, 73% were categorised as ‘lower-risk drinkers’ and 9% as ‘increasing-risk drinkers’. These categories are used throughout the analysis to explore how attitudes to alcohol vary by alcohol consumption.

**Minimum Unit Pricing (MUP)**

Minimum Unit Pricing (MUP) is the policy that would set a minimum price for drinks based on their alcoholic content. Its advocates argue this would limit the amount drunk by young people and the heaviest drinkers, without penalising moderate drinkers. Its opponents argue that moderate drinkers would be penalised, that there is no proof that the policy would be effective and that it would contravene free-market principles (House of Commons Library, 2015).

**Support for MUP**

We asked respondents whether they agree with the principle of MUP using the following question:

*One idea for trying to reduce problem drinking is to have a minimum price for different alcoholic drinks. The price would be based on how much alcohol is in each drink. In principle, how much are you in favour or against this idea?*

Around half of the public (52%) supports the principle of MUP, while a quarter are against the idea (25%).

**Chart 1. Support for Minimum Unit Pricing**

![Support for MUP Chart]

Although men and women are equally likely to support the idea of MUP, men are more likely than women to be against it. Almost three in ten men (29%) are either “somewhat” or “strongly” against MUP, compared with just over one-fifth (22%) of women. In particular, the proportion of men who are strongly against MUP (13%) is almost double the proportion of women who report this (7%).

Attitudes to MUP relate to alcohol consumption. Those who drink the most, classified as ‘increasing-risk drinkers’, are significantly less likely to support MUP than other people. Less than one-third (32%) support the idea, compared with over half (53%) of ‘lower-risk drinkers’ and 61% of non
drinkers. Almost half (48%) of ‘increasing-risk drinkers’ are against the idea of MUP, compared with one-quarter (25%) of ‘lower-risk drinkers’.

Income and age are not significantly linked to support for MUP.

We asked respondents why they are in favour of, or against MUP and offered them a choice of reasons commonly used in debates about the issue to explain their stances. Those in favour are most likely to choose: “to help stop young people drinking alcohol or drinking too much of it” (66% of those in favour of MUP); “to help tackle health problems from drinking” (64%); “to help tackle problem behaviour from drinking” (61%); and “to help tackle problems caused by alcohol generally” (61%).

The most commonly chosen reasons for being against MUP are: “that if people want to drink, they will do so whatever the price” (59%); “it won’t make any difference to how much people drink” (49%); and “it won’t make any difference to how much heavy drinkers drink” (47%).

**General attitudes towards MUP**

We asked respondents whether they agree with the following statements about the likely impact of the introduction of MUP, focusing on the issues of fairness and likely efficacy:

*Setting a minimum price for alcoholic drinks is unfair to those on low incomes*
*Setting a minimum price for alcoholic drinks is an effective way of reducing heavy drinking*
*Setting a minimum price for alcoholic drinks is an effective way of getting young people to drink less*
*Setting a minimum price for alcoholic drinks is unfair to sensible drinkers*

**Chart 2. Views on fairness and efficacy of MUP**

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<td>30</td>
<td>21</td>
<td>37</td>
<td>6</td>
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<td>26</td>
<td>17</td>
<td>34</td>
<td>12</td>
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<tr>
<td>Effective at reducing young people’s drinking</td>
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<td>36</td>
<td>14</td>
<td>30</td>
<td>8</td>
</tr>
<tr>
<td>Unfair to sensible drinkers</td>
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<td>17</td>
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</tbody>
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*Unweighted bases: 2161
Weighted bases: 2157*

Even though half the British public is in favour of MUP, it has been argued that it would penalise moderate drinkers (House of Commons Library, 2015). Fifty-two per cent agree that MUP would be unfair to sensible drinkers, compared
The public is not confident that MUP would be effective at reducing heavy drinking.

Men are more likely than women to think that MUP would be unfair to sensible drinkers (59% compared with 47%) or to people on low incomes (41% compared with 31%). Drinking status also relates to perceptions of the fairness of MUP, with ‘increasing-risk drinkers’ most likely to think that it would be unfair to sensible drinkers (74%) or to people on low incomes (48%). Income is not significantly linked to the perception that MUP would be unfair to people on low incomes, however.

The public is not confident that MUP would be effective in reducing heavy drinking. Just over one-third (36%) think that MUP would reduce heavy drinking. Those on lower incomes are somewhat less likely than those on higher incomes to think this. Nineteen per cent of those in the lowest income quartile think that MUP will have an impact on heavy drinking, compared with 26% of those in the highest income quartile. ‘Increasing-risk drinkers’ are also the least likely to think that MUP will reduce heavy drinking; 16% think this, compared with 24% of ‘lower-risk drinkers’ and 33% of non drinkers.

The public is more likely to believe that MUP would be effective in reducing young people’s drinking; 46% think this. This proportion does not vary significantly between men and women or across age groups. Those with lower incomes are somewhat less likely to think that MUP would reduce young people’s drinking, with two in five (40%) of those in the lowest income quartile thinking this, compared with half (50%) of those in the highest income quartile. ‘Increasing-risk drinkers’ are less likely to think that MUP would be effective in reducing drinking among the young (37%), than ‘lower-risk drinkers’ (46%) and non drinkers (51%).

**Does price affect alcohol-buying behaviour?**

Those who drink do not tend to feel that price has much impact on the amount of alcohol they buy. Nearly two-thirds of drinkers (65%) say that the price of alcohol does not stop them buying as much alcohol as they would like. Of the remainder, 3% say that the price of alcohol stops them buying as much alcohol as they would like a "great deal", 7% say it stops them “quite a lot” and 16% to “some extent”.

Nearly one-quarter (24%) of drinkers say that the introduction of MUP would be very or fairly likely to cause them to drink less alcohol. This proportion does not vary significantly between ‘lower-risk drinkers’ and ‘increasing-risk drinkers’.

**Advertising and sponsorship**

Advertising alcohol in Britain is subject to regulation that is “among the strictest in the world”, according to the Advertising Standards Authority (Advertising Standards Authority, 2015). There is particular emphasis across all media on not directing advertising at young people aged under 18, particularly by linking advertising to irresponsible behaviour, social success or sexual attractiveness. Television advertising rules ban adverts for alcohol from appearing in programmes specifically aimed at young people or with a high appeal to them.
The regulatory framework has been perceived as inadequate to deal with the changing media scene. Research by the broadcasting regulator Ofcom in 2013 indicated that children and young people were likely to see alcohol advertising on television, including when watching post-watershed programmes unsupervised on their own devices (Ofcom, 2013). There are indications that social media is increasingly effective in reaching young people with few effective age restrictions (Winpenny et al, 2013). The British Medical Association, the Alcohol Health Alliance UK and others have argued for a ban on sponsorship of sporting and music events by the alcohol industry, which, they suggested, provides an effective way of targeting young people (British Medical Association, 2012, Alcohol Health Alliance UK).

### Advertising by alcoholic drinks companies

The public is evenly split when it comes to the question of whether alcoholic drinks companies should be allowed to advertise on television (TV). Forty-five per cent of people think that TV ads for alcohol should “definitely” or “probably” be banned, while 44% think that they should definitely or probably not be banned. Half of women (50%) think that alcohol adverts should be banned from TV, compared with only two-fifths (40%) of men. Older people are also more likely to think that such adverts should be banned, with 61% of over 65 year olds believing this, compared with only 31% of 18-25 year olds. Only 31% of ‘increasing-risk drinkers’ think that such adverts should be banned from TV, compared with 44% of ‘lower-risk drinkers’ and 60% of non drinkers.

There is stronger support for adverts for alcohol to be banned during programmes watched by young people. Around three-quarters (76%) support this, with only 17% being against it. Although a majority (61%) of ‘increasing-risk drinkers’ agree with this idea, they are somewhat less likely to do so than ‘lower-risk drinkers’ and non drinkers (both 77%). Women (78%) are more likely than men (73%) to support the idea, though this is a smaller gap than that seen in relation to the idea that alcohol should be banned from TV in general. Again, older people are more likely to be in favour of a ban than younger people. Over four-fifths (84%) of over 65s support such a ban, compared with two-thirds of 18-25 year olds.

Over half (55%) think that advertising by alcoholic drinks companies on social media should “definitely” or “probably” be banned. Once again, older people are much more likely to be in favour of such a ban; 68% of over 65s are in favour, compared with 38% of 18-25 year olds. As before, women, as well as ‘lower-risk drinkers’ and non drinkers are more likely to favour a ban, than men and ‘increasing-risk drinkers’.

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7 A campaigning organization supported by medical royal colleges, charities and other health campaigners.
Sponsorship of events by alcoholic drinks companies

We asked respondents whether “it’s OK for music festivals to be sponsored by alcoholic drinks companies”. We asked the same question for sports events. In each case, there is a fairly even split between those that agree that it is OK, those that disagree that it is OK and those that do not have an opinion either way. Slightly more people (36%) agree that it is acceptable for an alcoholic drinks company to sponsor a music festival than think it is acceptable for such a company to sponsor a sporting event (30%).

Younger people are far more likely to think that it is acceptable for an alcoholic drinks company to sponsor a music event, than older people. Around three-fifths (61%) of 18-25 year olds think this is acceptable, compared with a quarter (25%) of over 65s. A similar, though less pronounced, pattern is evident in relation to sponsorship of sporting events by alcoholic drinks companies. Around two-fifths (42%) of 18-25 year olds think this is acceptable, compared with around a quarter (26%) of over 65s.

There is a big gap in attitudes between the sexes on whether it is acceptable for alcoholic companies to sponsor sporting events; 45% of men think it is acceptable, compared with 23% of women. There is also a gap between the sexes on the question of sponsorship of music festivals; 52% of men think that this is acceptable, compared with 31% of women.

Attitudes towards drink-driving limits

Laws around drink-driving have been in place for a number of decades and the current legal limit is 35 micrograms of alcohol per 100 millilitres of breath in England and Wales. The limit was reduced in Scotland to 22 micrograms of alcohol per 100 millilitres of breath in December 2014, after the completion of fieldwork for the 2015 survey (HM Government, 2015).
Table 1 How much would you be in favour or against changing drink driving laws to reduce the amount of alcohol drivers are allowed to drink?

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<th>%</th>
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<td>Neither in favour nor against</td>
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<td>Against</td>
<td>8</td>
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<td>Strongly against</td>
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Unweighted base 2161
Weighted base 2157

Over three-quarters (77%) of people believe that the amount of alcohol drivers are allowed to drink should be reduced, including half of people who were strongly in favour of the drink-drive limit being lowered. In addition, over half (54%) disagree with the assertion that “whatever the law says, most people are safe to drive after a pint of beer”. Over three-quarters (77%) of people believe that the amount of alcohol drivers are allowed to drink should be reduced, including half of people who were strongly in favour of the drink-drive limit being lowered. In addition, over half (54%) disagree with the assertion that “whatever the law says, most people are safe to drive after a pint of beer”.8

Women (82%) are more likely than men (72%) to think that the drink-driving limit should be reduced. ‘Increasing-risk drinkers’ are slightly less likely (71%) to think that the drink-drive limit should be reduced than ‘lower-risk drinkers’ (76%) and non drinkers (85%). There is little variation among different age groups, though the youngest appear slightly less likely to be in favour of a reduction in the limit. Seventy per cent of 18-25 year olds support this, compared with 78% of over 65s.

Voices from within the industry have argued that a more stringent drink drive limit would have a disproportionately negative effect on the sustainability of pubs in rural areas (Green, C. 2016; Swinford, S, 2016). However, there was no significant difference in support for a reduced drink drive limit between those who live in rural areas and those who live in towns and cities.9

Health

We asked respondents a range of questions to test public knowledge of the number of units of alcohol in different beverages and the recommended maximum daily alcoholic unit intake. Respondents were also given a list of health conditions and asked which of them a person is more likely to get if they regularly drink more alcohol than recommended in NHS guidelines.

Knowledge of alcoholic units

Just over half (51%) are able to correctly identify the recommended daily alcohol unit limit for women. Slightly fewer (44%) are able to do the same for men. Around one-fifth (21%) admit that they do not know the limit for either men or women and another one-fifth over-estimate the limit for both sexes. Around one in ten people under-estimate the limits for men (11%) and women (9%).

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8 The blood alcohol level after drinking a pint of beer will vary between individuals and according to the length of time between drinking and driving. However, most adults should be within the legal limit after drinking one pint of normal strength beer.
9 Based on respondents in England and Wales.
When it comes to estimating the number of units in popular alcoholic drinks, accuracy varies considerably across the public. While around a quarter of people admit that they do not know how many units are in a pint of beer or in a bottle of wine, more than half (58%) are able to accurately identify the number of units in a pint of beer, compared with only 19% of people who are able to do the same for a bottle of wine. While only 6% of people underestimate the number of units in a pint of beer, two-fifths underestimate the number of units in a bottle of wine.

**Knowledge of potential impacts of excessive drinking**

There is a big variation in the extent to which people were able to identify conditions that a person is more likely to get if they regularly drink more alcohol than recommended by NHS guidelines. Nearly everyone (93%) knows that liver disease can be caused by excessive drinking. However, less than two-fifths (37%) accurately identify that some cancers can be caused by excessive drinking. The proportions thinking this in relation to other conditions were as follows: high blood pressure (72%); heart disease (62%); depression (58%); stroke (44%); and diabetes (42%).

The low level of public awareness of the link between alcohol consumption and the risk of cancer is particularly concerning, given the increasing weight of evidence highlighted by the UK CMOs (Department of Health, 2016).

There is strong support for more regulation in the form of the requirement for all bottles and cans of alcohol to show information about the risks of drinking too much, with nearly three-quarters (74%) in favour of this.

**Discussing drinking with a GP**

In recent years, GPs have taken an active role in identifying potentially problematic drinkers as part of their day-to-day contact with patients.

We asked respondents how comfortable they feel about talking to their doctor about their alcohol consumption by asking “how would you feel about your doctor asking you how much alcohol you drink?” Most people report that they feel comfortable discussing their alcohol consumption with their GP, with 75% feeling “very comfortable” about this and a further 20% feeling “fairly comfortable”. Only 2% would feel “fairly uncomfortable” or “very uncomfortable”.

| Table 2 How would you feel about your doctor asking you how much alcohol you drink? |
|---------------------------------|---|
|                                 | % |
| Very comfortable                | 75 |
| Fairly comfortable              | 20 |
| Neither comfortable or uncomfortable | 3  |
| Fairly uncomfortable            | 1  |
| Very uncomfortable              | 1  |

Unweighted base 2161

Weighted base 2157
We also asked respondents how honestly they would answer if their doctor asked them about their alcohol consumption.

**And if they asked about how much alcohol you drink? How would you answer?**

Over four-fifths (85%) of people say that they “would answer completely honestly”, while 14% say that they would “bend the truth a little”. Responses to this question vary with drinking status: 98% of non drinkers and 85% of ‘lower-risk drinkers’ said that they would answer honestly, compared with 62% of ‘increasing-risk drinkers’. More than a third of potentially problematic drinkers said that they would probably not accurately report their consumption when asked by their GP.

**Conclusions**

As drinking alcohol is a widespread activity among the British public, attitudes and opinions regarding the regulation of alcohol use are of great interest.

The public has mixed views regarding the possibility of tighter government regulation of the use of alcohol in a number of areas. There is strong support for the lowering of the amount of alcohol that drivers should be allowed to drink within the law; three-quarters of people are in favour of this while slightly over half disagree with the assertion that “whatever the law says, most people are safe to drive after a pint of beer”.

People are more divided about the idea of MUP. Just over half are in favour of this in principle. However, there is some doubt around the potential effectiveness of MUP to tackle some of the issues around drinking being targeted by advocates of the policy. In particular, just over one-third think that MUP would be effective in reducing heavy drinking.

Views about advertising by alcoholic drinks companies are nuanced. The public is evenly split on whether alcoholic drinks companies should be banned from advertising on TV but around three-quarters support the idea of such companies being banned from advertising during programmes watched by children and over half think that this type of advertising should be banned on social media.
References


Home Office (2013), Next steps following the consultation on delivering the Government’s alcohol strategy, available at:


