



Canadian Alcohol Policy Evaluation Community of Practice



Event #34: May 22, 2025

Changing public perceptions of alcohol harms and alcohol policies: novel framing approaches

*The views and opinions expressed as part of this presentation are those of the presenters
and do not necessarily represent those of our funders or other organizations acknowledged.*



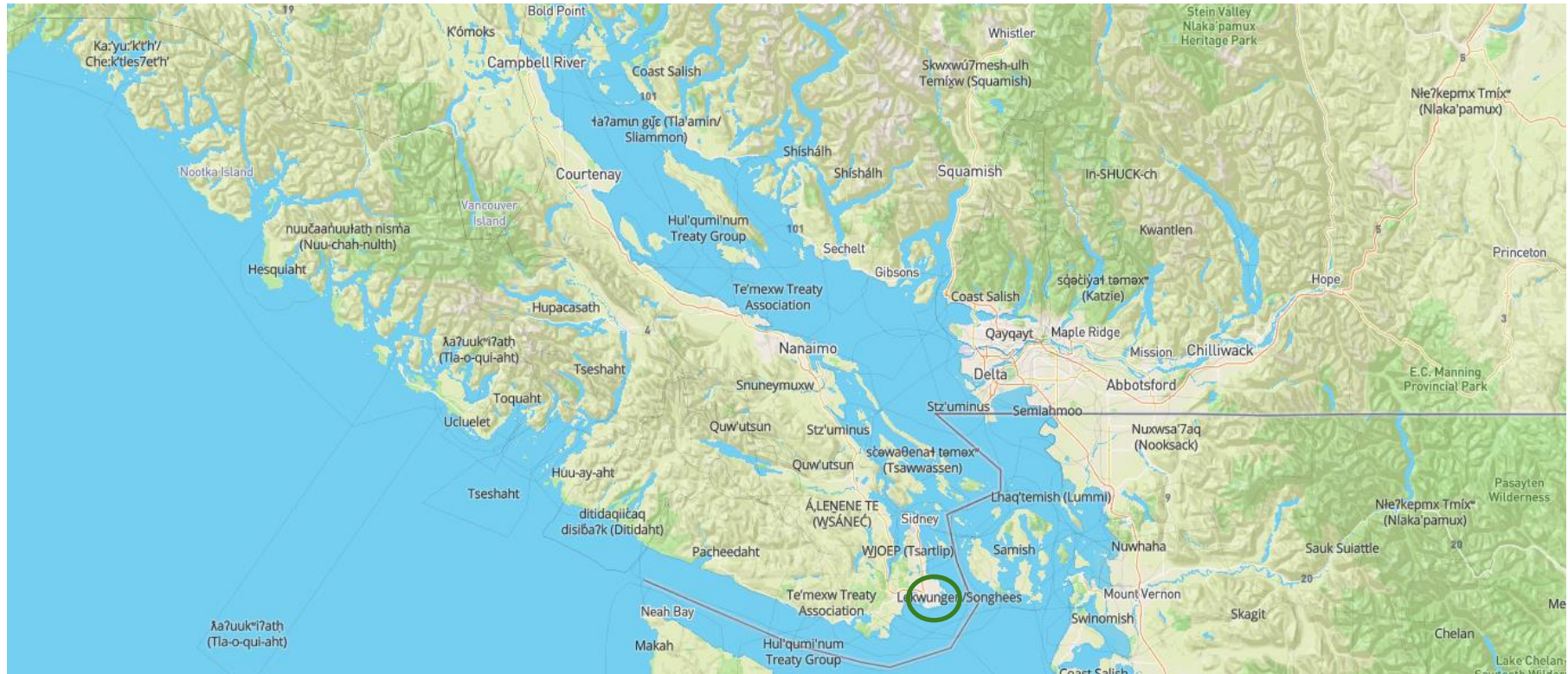
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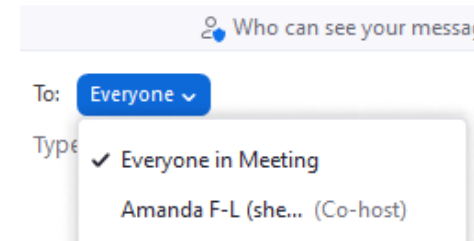
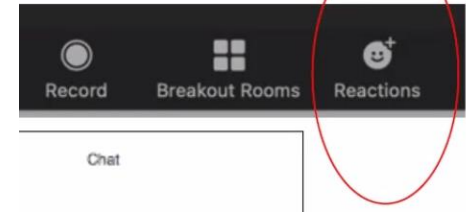
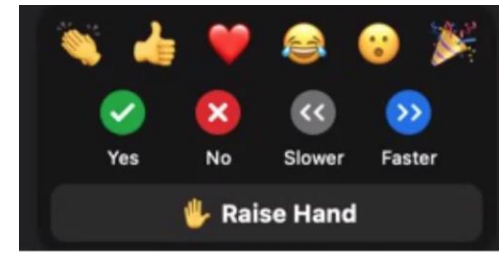


Today's session

- This webinar will be in English and includes one presentation with Q&A, 60mins total.
- The presentation component will be recorded, not the Q&A. Links to the recording and presentation slides will be sent via email.
- We invite your feedback about today's session. A survey link will be shared in the Chat box and via email.
- To receive persons with lived/living experience honorariums, please email capecopcoord@uvic.ca

Q&A format

- Use chat box to submit a question at any time.
- 'raise hand' during Q&A segment.
The moderator may ask you to unmute to pose your question.
- The moderator may read aloud questions typed in the chat box.
- Technical difficulties?
Please message us in the chat.





Presenter

Niamh Fitzgerald

Professor of Alcohol Policy

Director of the Institute for Social Marketing and Health

University of Stirling

Niamh Fitzgerald, PhD., is a Professor of Alcohol Policy and Director of the Institute for Social Marketing and Health at the University of Stirling. Her research interests include population-level alcohol policy (for example, alcohol sales hours and licensing practices, and impacts of minimum unit pricing) and commercial determinants of health (for example, marketing, and conflicts of interest). Niamh is interested in the language used to discuss alcohol problems and policies and how it impacts on public and policymaker attitudes. This is the subject of a [recent publication](#) she co-authored and the focus of today's webinar.



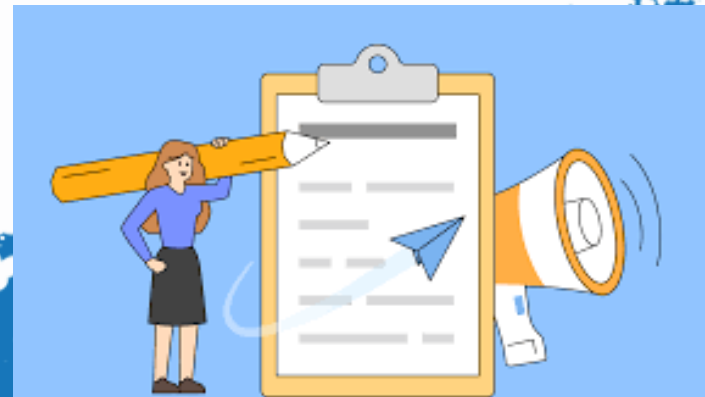
Framing Alcohol Harm: changing public perceptions of alcohol, alcohol harms and policies in the UK.

Prof. Niamh Fitzgerald, Institute for Social Marketing & Health, University of Stirling

Rationale and Aim

Charities, academics and others make day to day decisions about how to frame public health communication about alcohol, but without clear evidence of what messages work best to achieve their goals.

Our aim in this study was:
to inform and enable a ‘reframing’ of conversations about alcohol harm, leading to a deeper understanding of the problem, and greater and more effective action to drive change.



Note: It's easy to get stuck in the language of frames, framing, framing approaches.

- **A 'frame' can be a label, a package of ideas, an argument, a metaphor etc.**
- **Frames are often seen as static, whereas 'framing' is a dynamic process of sense making and narrative.**
- **We were not developing fixed frames to be used word for word, but narrative-based framing approaches to be picked up and used by the field flexibly and dynamically.**

The Research Team

Institute for Social Marketing & Health, University of Stirling

Prof. Niamh Fitzgerald (*PI*)

Dr. Rachel O'Donnell (*qual lead*)

Rebecca Howell

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Dr. Melissa Oldham

Dr. Claire Garnett (*now at Bristol Uni*)

London School of Hygiene & Tropical Medicine

Prof. Mark Petticrew

FrameWorks UK

Maria Castellina

Underpinning beliefs: Public opinion is grounded in ways of understanding or 'framing' alcohol as a policy problem and public opinion can be changed if exposed to new ways of framing.

Framing is about the ideas we have about a topic and how we share them. It is a process of making sense of an issue, expressing that sense by naming selected features of the problem (and excluding others), and weaving them into a narrative (or story).



- Individual members of the public often engage in framing unconsciously.
- As researchers in policy, we must choose what information and concepts to include in public, media and political communications, and how to combine them.
- In effect, we are all engaged in framing.



What we did

What's already known?

Desk-based work: to understand current evidence and practice

Comparing public & expert understandings

Focus Groups & 'Expert Story': to describe and contrast public and expert views & understanding

Developing novel framing approaches

Stakeholder Engagement in workshops & online, informed by the desk-based work

In-depth testing

In-depth online focus group workshops to understand public reactions and ease of use of framing approaches

At-Scale Testing

Randomised online experiment with representative UK adult sample

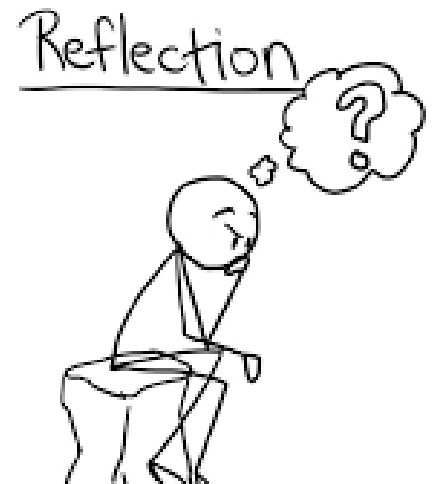
Toolkit

Framing toolkit to communicate findings

Limited prior research on what framing works best

Surprisingly, there is little robust relevant research in the alcohol field:

- **No research specifically examining effective framing approaches for building recognition of alcohol harms and support for alcohol policies.**
 - **Experimental studies from psychological/behaviour change literature – not focused on public opinion or policy support.**
 - **Retrospective reports of reflections on/hypotheses of (but not testing of) ‘what worked’ in past policy successes**
 - **FrameWorks reports on other social issues - robust**



Take a couple of minutes to write down what springs to mind first when you think of the following:

‘Alcohol’?

‘Harms from alcohol’?

‘Causes of alcohol-related harm’?



What we did



Public Understanding of Alcohol, Alcohol Harms & Causes of Alcohol Harms (1)

Public Views

Overarching: positive about alcohol; harms not salient; concentrated in minority at the extreme.

Causes of alcohol harms: individual deficits, v. few mentioned availability, advertising, sponsorship.

Comparing Public & Expert Understanding

Public Views	Expert Views
Overarching: positive about alcohol; harms not salient; concentrated in minority at the extreme.	Alcohol as toxic, addictive substance; harms are diverse – not just health harms, not just for a minority, not just drinkers.
Causes of alcohol harms: individual deficits, v. few mentioned availability, advertising, sponsorship.	Societal and regulatory deficits; inherent properties of alcohol lead to more consumption and addiction.

Public Understanding of Causes & Solutions

Public Views

Did not cite social pressure as a cause except feeling that drinking is normal and that *'its odd not to drink'*.

Focused on treatment/support solutions rather than prevention. Fatalism about people with deficits developing problems, can't prevent this. Some recognition of the role of ease of access, advertising, cheap alcohol. No blame attributed to industry (just seen as responding to demand).

Comparing Public & Expert Understanding (2)

Public Views	Expert Views
Did not cite social pressure as a cause except feeling that drinking is normal and that <i>'its odd not to drink'</i> .	Feel societal pressure to drink arises from sense that alcohol is essential to socialising/life. See <u>not drinking</u> alcohol as a positive choice, that should not be 'odd'.
Focused on treatment/support solutions rather than prevention. Fatalism about people with deficits developing problems, can't prevent this. Some recognition of the role of ease of access, advertising, cheap alcohol. No blame attributed to industry (seen as just responding to demand).	See clear solutions in addressing a deficit of regulation, and controlling industry lobbying activity. Believe in power of society to change.

This comparison generated the 'tasks' for any new framing strategies to deliver.

Overarching Task: Increase the salience and understanding of alcohol harm and public demand for effective action to address it.

6 sub-tasks focused on:

Building understanding of: alcohol as a substance, diverse harms for diverse people, societal pressures to drink alcohol, effective policies, the role of big companies, and

Building positivity about the possibility of change.



What ideas do you have on a framing approach that you think will achieve these tasks?

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Building positivity about the possibility of change.



By “framing approach”, we mean a narrative – what ideas and concepts would you share to tell a story about alcohol & alcohol, and alcohol harms and policies.

BE THE DIFFERENCE

Values-based strategies

1. The truth is that alcohol is not essential to anything.
2. There are more harms from alcohol, of many different kinds, than we are told.
3. We can reduce harms from alcohol and enjoy life.
4. It's not fair that people suffer to make profit for big alcohol companies.
5. People should be free to make choices about alcohol without expectations or pressure from anyone else.

Metaphor-based strategies

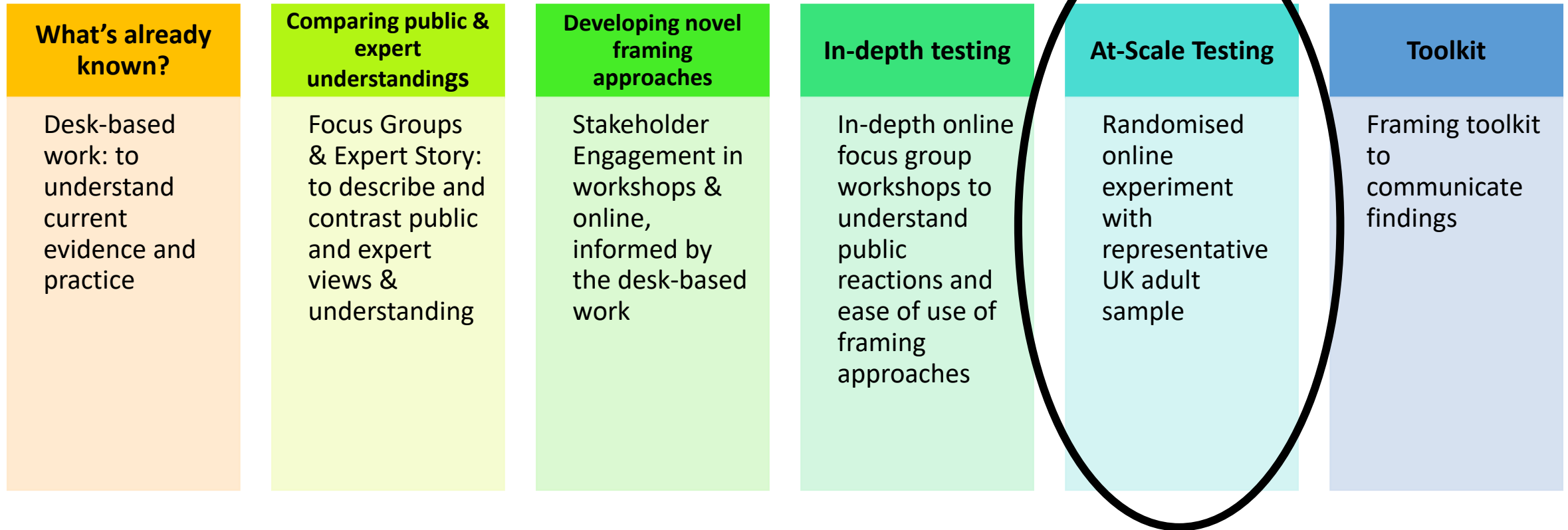
6. When we drink alcohol, it's hard to stay safe in the shallows.
7. Alcohol is disguised as a ticket to happiness, hiding how harmful it truly is.
8. We can move alcohol away from centre-stage in our lives without spoiling the show.

Explanatory Chain – based strategies

9. Anyone who drinks alcohol can experience alcohol harms or problems.
10. The harms from alcohol come about for many reasons beyond individual choices or culture.
11. Alcohol causes a wider range of harms than we often recognise.
12. If we drink less alcohol, fewer people will suffer and die from cancer.

We developed 12 framing approaches (this list is just their titles)

After developing 12 novel framing approaches, we tested them qualitatively & quantitatively



The online Experiment (2,997 responses)

- ✓ Broadly representative of UK population (slightly younger, slightly whiter; good male/female balance)
- ✓ Participants were randomised to be exposed to a control text or one of the 12 framing approaches for at least 30 seconds
- ✓ After this, they rated 15 attitude statements on a 7-point scale.
- ✓ We removed incomplete responses/those failing an attention check
- ✓ We used statistical approaches to minimise the chances of false positives.

Harms & Norms

1. Regularly drinking alcohol, no matter how much, may damage my health.
2. Alcohol is an addictive and dangerous drug.
3. Alcohol harms everyone in the UK.
4. Harm caused by alcohol is one of the biggest health problems affecting the UK.
5. People who don't drink alcohol probably enjoy life less than those who do.
6. People's personal choices are the main cause of alcohol problems.
7. It's disappointing when a friend or family member decides not to drink on a night out.
8. The Government should put people's health first, even if alcohol companies make less profit.

Policies & Interventions

9. The Government should not allow alcohol companies to influence health policy.
10. Alcohol should be more expensive in shops to reduce alcohol consumption at home.
11. There should be fewer places where alcohol is sold.
12. Shops should not be allowed to sell alcohol after 10pm.
13. Advertising alcoholic drinks should not be allowed.
14. Labels on alcoholic drinks should clearly warn people about the risks of alcohol.
15. As a society, we should pay for high quality, free support for all those affected by alcohol.

The survey used 15 outcomes presented in random order to test the frames.

BE THE DIFFERENCE

Findings 1: The three most effective frames:

- **Frame 2. “Truth 2” (a value frame):** There are more harms from alcohol, of many different kinds, than we are told.
- **Frame 10. “Wider Causes” (an explanatory chain):** The harms from alcohol come about for many reasons beyond individual choices or culture
- **Frame 8. “Centre Stage” (a metaphor frame):** We can move alcohol away from centre stage without spoiling the show

Frame 2. “Truth 2” (a value frame): There are more harms from alcohol, of many different kinds, than we are told.

Strongest evidence of positive effect on 9 of 15 outcome statements.

- It's important that we are told the truth about the products that are sold to us. Much of what we think we know about alcohol, is not actually true, and the reality is hidden from us.
- Drinking red wine is not good for our health, and the harms from alcohol go far beyond dependence and liver disease. But this is not what we are told in the media, on alcohol labels, or by the companies selling alcohol.
- Many of us think that alcohol is only harmful for other people, who drink more than we do. The truth is that for all of us who drink, cutting down would reduce our risk of cancer.
- Most people who cut down on alcohol sleep better, lose weight, have more energy and generally feel better. Yet most alcohol products don't have ingredients or calories on the labels, and companies spend millions lobbying to keep it that way.
- Alcohol adverts have multi-million pound budgets to link drinking to friendship, sports and glamour. In reality, alcohol causes anxiety and depression but we're not told that.
- It's time we were told the truth so we can choose for ourselves.

What people said...

“I think it all sounds totally credible, and it makes me feel like I’m probably being duped.” [FG3, M4, p8]

“... we’re not told what ingredients or calories are in it, whereas we now need to know all the ingredients and calories in foods, don’t we? So, it’s not something I’ve ever thought about. I know there are calories in it, but if it was there in black and white, it might make people think more.” [FG3, F1, p8]

“I think there needs to be legislation [...] companies aren’t going to be transparent if they don’t have to [...] I think we need to sort of force these companies into being more transparent, you know, like cigarettes.” [FG6, M3, p24-25]

“I’m at uni as well and its mad how many days are, sort of, structured around drinking. [...] I live in a flat of six, at any given moment at least two people are, like, hung over, which is bizarre...” [FG12, M1, p13]

Frame 10. “Wider Causes”: The harms from alcohol come about for many reasons beyond individual choices or culture.

Strong evidence of likely positive effects on 10 of the 15 outcomes.

Key Message: The high levels of drinking and alcohol harms we experience in the UK have come about for many reasons that go far beyond our individual choices or culture.

Explanation:

- Our choices and culture are hugely influenced by how we manage alcohol as a society –how we allow alcohol to be marketed and sold and how we talk about alcohol to each other.
- This environment strongly shapes our beliefs and attitudes towards drinking alcohol throughout our lives.
 - Global billion-dollar alcohol companies advertise drinking alcohol as a ‘fun’ and harm free activity, and they lobby to keep selling cheap alcohol, wherever and whenever they can.
 - We are not told about the health harms from alcohol – the anxiety, depression, sleep problems, high blood pressure, cancers, stomach ulcers etc. There’s no mention of these on adverts or labels.
 - Most shops have alcohol on display, with attractive packaging and cheap deals calling to us to buy.
 - Young children see alcohol advertising, fancy packaging, and sponsorships giving them a one-sided view that alcohol is only ever positive, glamorous or fun.
- Many of us go along with these ideas. We rarely talk about the downsides of alcohol – the hangovers, the family tensions, the lost days. We go along with the idea that only other people ever have ‘alcohol problems’.
- Because we have this one-sided view, we don’t have good information to make choices. And of course alcohol itself affects our brains, making it harder to resist another drink and undermining our decisions.
- We all like to believe that we are making our own free choices, but in reality when alcohol is heavily promoted, more easily available and at cheaper prices, we buy and drink more of it. And when we do try to cut down or stop drinking, seeing alcohol advertised and available everywhere makes it even harder!

Consequence: Alcohol problems are not just caused by someone’s genes or their own choices. The society we have developed is saturated in alcohol: we need to recognise how that pushes us towards drinking more and more until some of us can’t stop by ourselves. **Solution:** We need to stop blaming people whose drinking causes them problems and start asking the government to take effective action to change the environment: less promotion, reliable information on labels and adverts, and proper support services so that we all have what we need to reduce the harms from alcohol.

What people said...

"It's almost like we're sleepwalking into drinking" [FG1, BR, F3, p3]

"...you got me thinking, why does that same messaging [health warning messages on cigarette packaging] not apply to alcohol? ...even a packet of ibuprofen, it'll have a little leaflet saying these are the potential side effects...So why are we not hearing more about the harmful side of alcohol?" [FG1, BR, F3, p4]

"I like to feel like I'm in control of my own life and levels of drinking and choices. But I can see that these companies are helping people drink more of their products. And what they're telling me, that it's fun and harm-free, is not the case." [FG3, BR, M4, p4]

"When we see the advertising of alcohol, it's just [about] all the benefits about how great it's going to be for us, how wonderful the experience is going to be, but there's another side to that, there's the...you know, the general health issues and its hidden issues as well" [F5, M1, BR, p5]

Frame 8. “Centre Stage” (a metaphor frame): We can move alcohol away from centre stage without spoiling the show

Strong evidence of positive effect on 7 of 15 outcome statements.

- Alcohol too often takes centre stage. It is cleverly promoted as a hero at the heart of our lives.
- Family events, celebrations, friendships, meals, sport - alcohol is always expected, often seen as front and central to the whole experience.
- But alcohol isn't the true star in our lives – get-togethers would be nothing without friends and loved ones; we don't need advertising hoardings to enjoy a football match; we can cheer life's wins without alcohol taking over the show.
- Too often alcohol is the diva that hoards the limelight, casting shade on what's really important to us. Too often it overstays its welcome, stealing our mornings or messing up our plans.
- We can move the spotlight away from alcohol without spoiling the show.

What people said...

“...that really resonates with me because it’s my sister’s wedding tomorrow and the...a huge part of the discussion has been around alcohol and like, what are you bringing with you, and like, what are you going to drink and stuff like that. And it’s like, hold on, that shouldn’t really be up there with the main thing that’s important. It should be about all our family are coming together that we haven’t seen in so long...[FG10, F2, p14]

“Why would you go to a baby shower for the alcohol? You’re celebrating someone’s...a little child’s life coming in so....you can do all these things and still have a good time without the alcohol [...] I’m a big football fan and every time a major tournament comes up, it’s always advertised with alcohol. It’s never advertised with, you know, selling a t-shirt or selling a football boot.” [FG9, M1, p.16]

It's not easy to predict what works best.

- We had help from a large reference group & ACUK colleagues, as well as having a large team of alcohol research experts, and we all had ideas about what was the best way to shift public views on alcohol harms and policies.
- The best approaches may not be the most obvious or common ones.
- Of the 12 tested, the less successful ones included:
 - My personal favourite 'fairness' – emphasising industry profits
 - A 'deep water' metaphor v. similar to the idea of a 'slippery slope'
 - An explanation of how alcohol increases the risk of car



This finding surprised us because...

- **Awareness of cancer risk and support for effective policies has been linked in cross-sectional surveys; in an uncontrolled a before and after study of a Balance mass media campaign, and in an experimental, controlled study of alcohol warning labels placed on packaging in the Yukon territory, Canada.**

But:

- **Psychological studies suggest that potential backfire effects from defensive processing are a risk when people feel threatened by personally relevant information.**
- **Our findings are the only experimental, controlled study in the UK – so they do suggest the need for caution about a sole focus on cancer.**

FrameWorks UK took our findings and translated them, with us, into a communications toolkit.



How to tell a new story

4



1. Show there are a range of health and wellbeing effects from alcohol

5



2. Invoke a sense that people aren't being told the whole truth about alcohol

8



3. Explain the powerful role of advertising and marketing

12



4. Use a 'centre stage' metaphor to explain how alcohol is promoted in our lives

15



5. Talk about concrete solutions

18



6. Leave some things unsaid

21

There is always room for further evidence, but if we use these findings across the alcohol field, we can have confidence that our efforts stand the best chance of success, based on what we know now.

Thank you!

Happy to take questions now

(or you can email: niamh.fitzgerald@stir.ac.uk)





Q&A





Thank you for attending!

Complete our 3min feedback survey:

English: <https://www.surveymonkey.ca/r/CV657SK>

French: <https://www.surveymonkey.ca/r/CV657SK?lang=fr>



Canadian Alcohol Policy Evaluation (CAPE)

Acknowledgment of funding and support



Health Canada | Santé Canada
Substance Use and Addictions Program | Programme sur l'usage et les dépendances aux substances



Social Sciences and Humanities Research Council (SSHRC) Connection Grant



Public Health Agency of Canada | Agence de la santé publique du Canada



In-kind funding and support from co-investigator institutions, knowledge users, and government stakeholders