



RESPONSE TO THE UK GOVERNMENT DEPARTMENT FOR DIGITAL, CULTURE, MEDIA & SPORT CONSULTATION ON THE ONLINE ADVERTISING PROGRAMME

Alcohol Focus Scotland (AFS) is Scotland's national charity working to prevent and reduce alcohol harm. We want to see fewer people have their health damaged or lives cut short due to alcohol, fewer children and families suffering as a result of other people's drinking, and communities free from alcohol-related crime and violence. AFS welcomes the opportunity to respond to the Department for Digital, Culture, Media & Sport consultation on the Online Advertising Programme.

1. Do you agree with the categories of online advertising we have included in scope for the purposes of this consultation?

No.

The list of categories should be broadened to include brand marketing in addition to product-specific marketing.

In contemporary marketing, alcohol advertising has shifted from a product sales model to the brand being the dominant feature.¹ Brand marketing focuses on building brand identity and emotional connection with the consumer, which means that advertising does not need to directly promote an alcohol product to be successful in achieving its aims. In addition to general brand advertising where no products are featured, brand marketing also includes:

- Brand-sharing, where non-alcoholic products and services are used to promote a brand. For example, marketing campaigns for Heineken 0.0 served to promote the Heineken brand, with consumers struggling to differentiate between the alcohol-free and alcoholic products due to the similarity of the branding.²
- Alibi marketing, where the brand name is replaced with key, identifiable components of brand identity. For example, Carlsberg's use of its '*Probably*' slogan throughout the UEFA EURO 2016 tournament achieved a successful 50% prompted brand recall, despite omitting the brand name.³

With brand identity much more sophisticated than simply brand names and logos, people are easily able to identify alcohol brands simply from visual cues (e.g., font type, straplines, colour, and shape). Marketing communications therefore do not need to directly promote an alcohol product to be successful in promoting an alcohol brand, or alcohol consumption more generally.

As demonstrated, these forms of advertising can serve to circumvent marketing restrictions and encourage brand allegiance, including amongst consumers under the legal drinking age.⁴ It is therefore fundamental that all forms of brand marketing are explicitly covered by new online advertising regulations.

Furthermore, owned media (online property owned and controlled by a brand, such as social media accounts) should not be excluded from the proposals. The consultation refers to the ASA continuing to regulate advertising and communications on owned media. We oppose this suggestion, as it would lead to inconsistency and fail to reduce harm from online advertising.

Companies' own social media can be promoted by users through liking, sharing, and commenting on branded content. This participatory nature blurs the boundaries between official marketing content and user interactions, as users support the distribution of alcohol marketing messages.⁵ Owned media can have significant reach, with brands on Facebook able to expect their posts to be seen by 5.5% of their followers.⁶ For example, a major spirit brand's UK Facebook page has over 18 million followers, meaning that each post could be reaching almost 1 million people.⁷ Owned media also presents issues around mis-targeting, or targeting vulnerable groups, as brands have no reliable way of knowing the characteristics of their followers (e.g., age), especially considering extensive research that age-gating processes are easily circumvented.⁸ Therefore, it is critical owned media is subject to the same online advertising restrictions as paid media.

2. Do you agree with the market categories of online advertising that we have identified in this consultation?

No.

See response to Question 1 regarding expanding the categories of online advertising to include brand marketing and owned media.

6. Do you agree that our taxonomy of harms covers the main types of harm found in online advertising, both in terms of the categories of harm as well as the main actors impacted by those harms?

Yes.

We agree that the consultation has highlighted the diverse ways in which alcohol advertising online can be harmful, through reference to products that are harmful but legal, and to harmful advertising targeting and placement (specifically mis-targeting and targeting vulnerable people). Alcohol use was the leading risk factor for death in 2019 for 15-49 year olds in Scotland.⁹ As well as health harms, alcohol consumption has a significant social impact; one in two people in Scotland report being harmed as a result of someone else's drinking.¹⁰ Alcohol is also involved in 44% of violent crime in Scotland,¹¹ and can increase the occurrence and severity of domestic violence.¹² Overall, alcohol harm is estimated to cost Scotland £3.6 billion every year,¹³ and the UK at least £27 billion every year.¹⁴

7. Do you agree that our above description of the harms faced by consumers or society cover the main harms that can be caused or exacerbated by the content of online advertising?

Yes.

As a legal but harmful product, the marketing of alcohol has far-reaching implications. Alcohol is heavily advertised, with evidence from the US illustrating that alcohol is marketed around three times as much as the average advertised product.¹⁵ Furthermore, a recent study in Ireland found that 94% of the adult population could recall seeing alcohol marketing in the past month.¹⁶

Advertising is a significant driver of behaviour, and there is a wealth of evidence demonstrating the causal relationship between exposure to alcohol marketing and consumption, including higher-risk drinking.¹⁷ Alcohol marketing serves to foster pro-drinking attitudes, influences drinking behaviour, and normalises drinking cultures. Research has demonstrated that those who viewed alcohol advertisements consumed more alcohol than those who did not.¹⁸ Digital media is an increasingly important element of alcohol marketing. It is predicted to account for 30% of alcohol advertising spend in 2023,¹⁹ and actively participating with online marketing (e.g., sharing social media posts) is more closely associated with increased alcohol use than simple exposure.²⁰ This underlines the need to regulate owned media.

Children and young people are particularly vulnerable to alcohol marketing. As well as experiencing increased physical and mental impacts from alcohol consumption due to their still developing brains and bodies, they are also more susceptible to persuasive advertising.²¹ There is substantial evidence that exposure to alcohol marketing leads to children starting to drink earlier and drink more than they otherwise would.²²

Alcohol use during adolescence can affect brain development processes, which may be long lasting or perpetuate a negative cycle of alcohol use and related harms. Studies have found adverse impacts to young peoples' cognition (e.g. memory, attention, and retention of new information), mood, and decision-making.²³ Drinking earlier and drinking more increases the risk of developing alcohol dependence later in life and is a predictive factor for harmful drinking as an adult.²⁴

Alcohol marketing also causes harm to those with (at risk of developing) an alcohol problem. Those drinking above the low risk drinking guidelines in England account for more than two thirds (68%) of industry revenues, with the heaviest drinking 4% of the population accounting for almost a quarter.²⁵ This financial dependence on heavy drinking means it is in the alcohol industry's interests for people to drink at harmful levels.²⁶

Heavy and binge drinkers are more vulnerable to alcohol marketing: the more someone drinks, the more likely they are to pay attention to alcohol cues,²⁷ which in turn leads to increased cravings,²⁸ and the cycle continues. For heavy alcohol users, exposure to alcohol cues leads to greater brain activity which is associated with severity of dependence, the amount of alcohol consumed, the ability to control urges to drink, and the magnitude of cravings.²⁹ Alcohol marketing can also be incredibly triggering for those in recovery, and exposure to alcohol cues is directly predictive of alcohol consumption and relapse after treatment for alcohol dependence.³⁰ Therefore, as proposed by the World Health Organization, marketing restrictions would reduce the presence of alcohol cues that can induce cravings in people with an alcohol problem.³¹

8. Do you agree that the above description of the harms faced by consumers or society cover the main harms that can be caused or exacerbated by the placement or targeting of online advertising?

Yes.

Despite current self-regulatory codes, the placement and targeting of online advertisements for alcohol is causing significant harm, particularly to children and young people and people with (or at risk of) an alcohol problem, underlining the need for new regulatory structures.

Although alcohol is an age-restricted product, 82% of 11-17-year-olds have seen alcohol advertising in the last month.³² This exposure to alcohol marketing is a cause of youth drinking.³³ Reviews of decades of research have concluded that alcohol marketing leads young people to start drinking earlier, to drink more if they are already drinking, and to drink at heavy or problematic levels.³⁴

Moreover, approximately a fifth (19%) of 11-17-year-olds had interacted with alcohol marketing online in the past month.³⁵ This is particularly worrying, as young people who engage with user-generated promotion of alcohol marketing tend to engage in riskier drinking behaviours.³⁶

An analysis of advertising case studies revealed how, across brands and drink types, alcohol companies target younger drinkers because they are the “heavy-using loyalists” of tomorrow.³⁷ Digital platforms are not only allowing but actively facilitating alcohol marketing to young people, through tagging children and young people (aged 13-17) as being interested in alcohol and approving sponsored content promoting alcohol to be targeted at them.³⁸

As well as targeting young and newly legal drinkers, analysis has demonstrated that alcohol companies target those already drinking at high levels.³⁹ Digital media enables marketers to use dynamic algorithms to identify the preferences and vulnerabilities of consumers, and use these to micro-target people.⁴⁰ These tools disproportionately target people with (or at risk of) an alcohol problem at times when they are most susceptible.⁴¹ For example, following conversations on Facebook Messenger with a software developer who was developing an app to help people moderate their consumption, the next day problem drinkers were served with multiple adverts for alcohol brands in their Instagram feed.⁴² ‘Buy now’ features further increase this risk of harm by enabling instant purchases.

Crucially, the increased consumption associated with exposure to alcohol marketing can affect the general population. Before the pandemic, around one in four people in Scotland were drinking above the low risk drinking guidelines.⁴³ Early evidence suggests that for some people – particularly heavier drinkers – the pandemic was associated with increased drinking.⁴⁴ An Australian study found that marketing messages used to promote alcohol during the pandemic were promoting known risk factors for harmful drinking, including buying more, drinking to cope, drinking daily and drinking at home or alone in the home.⁴⁵ Alcohol marketing therefore has the potential to push drinkers into higher-risk categories of drinking, and in turn, increase the harm experienced.

There is also a growth of gendered alcohol marketing targeted at women, aligning itself with female empowerment, friendship, feminism, and motherhood.⁴⁶ This is particularly concerning considering growing consumption of alcohol among women, and greater stigma attached to women’s drinking.⁴⁷

11. Should advertising for VoD closer align to broadcasting standards or follow the same standards as those that apply to online?

Broadcasting.

We would suggest regulations for VoD regulations should be closer to broadcasting standards. This should include a level of pre-clearance to maintain consistency with what advert content is viewable to similar audiences no matter how they are watching TV/film.

12. To what extent do you agree with our rationale for intervention, in particular that a lack of transparency and accountability in online advertising are the main drivers of harm found in online advertising content, placement, targeting, and industry harm?

Strongly agree.

Digital advertising is incredibly difficult to regulate due to its ephemeral and hidden nature. Unless a public complaint is made, there is no way to see what has been served to people, including more vulnerable groups. Even when consumers report harm, the current system is limited in its ability to address complaints for personalised adverts, which may only be visible to certain users in a particular location and time, with no public archive. There are no formal investigatory powers currently available to help understand the full picture, and we are left reliant on platforms and publishers being forthcoming with data. Even the marketers themselves may not be aware who their advertising is served to due to it being technology driven, meaning there is little to no control over who sees what.⁴⁸

Furthermore, with no statutory requirements, misconduct is rarely reprimanded. The reliance on public complaints means regulatory controls can only be applied retrospectively, after advertisements have been seen. This can result in large numbers of children seeing inappropriate advertising before action is taken. The lack of meaningful penalties means there is little deterrent from breaching the codes of practice.

Nonetheless, even with the utmost transparency and accountability, some level of harm will still arise from advertising products like alcohol. Alcohol is linked to over 200 diseases and injuries,⁴⁹ including playing a causal role in seven cancers, even at low levels of consumption.⁵⁰

13. To what extent do you agree that the current industry-led self-regulatory regime for online advertising, administered by the ASA, to be effective at addressing the range of harms we have identified in section 3.3?

Strongly disagree.

Research from a variety of countries suggests that industry codes are subject to under-interpretation and under-enforcement, and they are regularly violated.⁵¹

The current codes prohibit the targeting of alcohol marketing to under-18s by using content that is 'particularly' appealing to children, or through the selection of media or context in which the advert appears.⁵² However, this system has been proven ineffective in reducing alcohol marketing exposure.⁵³ Children and young people are not only aware of various alcohol brands, but also find marketing messages appealing. One study found that four in five 11-17-year-olds in the UK had seen alcohol marketing in the past month, and almost half had seen alcohol adverts on social media platforms.⁵⁴ An Australian study found that 28% of Instagram and 5% of Facebook alcohol branded accounts did not have age-restriction controls activated.⁵⁵ Even when age-gating is used,

this is easily circumvented, and in an increasingly digital world, is likely to be a growing route of exposure.⁵⁶

Despite the existing codes, brands have successfully established themselves with children, demonstrated by a high level of awareness of alcohol brands among children of all ages.⁵⁷ Almost seven in ten 11-17-year-olds are aware of the brand Guinness (including 52% of 11-12-year-olds).⁵⁸ Young people have also been found to respond positively to alcohol adverts, increasing their chances of being susceptible to drinking.⁵⁹ A study by the Advertising Standards Authority (ASA) itself highlighted that there is “very concerning” potential for children to be exposed to alcohol marketing in online spaces, despite industry self-regulation. They found that “alcohol campaigns appear to be falling short in minimising the possibility of children [...] being exposed to paid-for alcohol ads through their social media accounts.”⁶⁰

The current system is also ineffective at protecting those with an alcohol dependency, or those at risk of developing risky drinking behaviours. By design, people who purchase harmful and addictive products the most are also targeted by digital marketing models the most.⁶¹ People recovering from alcohol addiction have reported that they feel ‘bombarded’ with alcohol adverts on social media and that the volume of these adverts has increased even when they attempted to remove them from their feed.⁶²

One systematic review found serious conflict of interest and procedural weakness in the self-regulatory system, and a failure to remove marketing materials that have been identified as non-compliant with industry codes.⁶³ The ASA reports it rarely refers a breach to a backstop law enforcement regulator, and it is unclear how effective consumer reporting processes and reactive takedowns are. A report by an international network of alcohol marketing experts, published by Alcohol Focus Scotland, found that the existing advertising codes are inadequate in restricting content, exposure, and enforcing alcohol marketing codes, specifically in the protection of children and young people.⁶⁴ Analysis of industry advertising documents has shown that the use of sophisticated communication techniques make meaningful analysis of content difficult, and the industry can exploit ambiguities in the codes to push boundaries of what is acceptable.⁶⁵ The existing sanctions also require voluntary compliance from other actors, such as search engine compliance in preventing advertisements from appearing in search results, and media compliance withholding advertising space.

Clearly, the current self-regulatory system is not effective, and statutory regulation is necessary to ensure codes are complied with.

14. Do you consider that the range of industry initiatives described in section 4.3 are effective in helping to address the range of harms set out in section 3.3?

No.

With self-regulation ineffective, there are no industry initiatives that would effectively address harms without changing the system. Rather, we call for comprehensive marketing restrictions to explicitly cover all forms of brand marketing, including general brand advertising, brand-sharing with non-alcoholic products, and alibi marketing.

Relying on avatars to identify how much alcohol marketing reaches children and young people is flawed, as the avatars do not reflect children’s or adults’ actual day-to-day browsing behaviour, and so do not provide insight into actual levels of exposure for specific audiences.⁶⁶ Age-

verification requirements are also inadequate. This is, for example, demonstrated by the proportion of under-13s that have a social media account despite being too young (and therefore lying about their age): for example, 64% of 8-11-year-olds in the UK use social media apps or sites,⁶⁷ despite platforms most popular with children (Snapchat, Instagram and Facebook) requiring users to be at least 13 years of age before they can register.

15. a) Which of the following levels of regulatory oversight do you think is appropriate for advertisers?

Statutory regulation.

15. b) Which of the following levels of regulatory oversight do you think is appropriate for platforms?

Statutory regulation.

15. c) Which of the following levels of regulatory oversight do you think is appropriate for intermediaries?

Statutory regulation.

15. d) Which of the following levels of regulatory oversight do you think is appropriate for publishers?

Statutory regulation.

16. Following on from your answer to question 14, do you think a mix of different levels of regulatory oversight may be warranted for different actors and/or different types of harm?

No.

As outlined in question 13, self- and co-regulatory systems do not work to protect children, young people, and others from harm. The regulatory body should be entirely independent of the industry and supported with full legal powers. This could be funded through various measures such as increased fees for platforms, increased sanctions, or a levy on the alcohol industry. Importantly, there is significant public support (77%) for stricter controls to limit the exposure of children and young people to alcohol advertising.⁶⁸

All actors within the digital ecosystem that are listed in the consultation should be held accountable to ensure harmful content does not reach certain audiences to ensure consistency in responsibility.

17. What is your preferred option out of the three permutations described under option 2?

Permutation 1.

18. For each of the actors, which measures (set out in the tables in section 6.1.3 and section 6.1.4 do you support and why?

Any measures that support better transparency and responsibility will be welcome. To be effective in protecting children and vulnerable people, these should be enforced with a statutory system.

19. Are there any measures that would help achieve the aims we set out, that we have not outlined in the consultation?

Comprehensive restrictions are the most effective way to address the harms caused by alcohol advertising online, due to the difficulty in tracking and regulating online advertising. The UK Government recognised this and legislated to ban the advertising of HFSS foods online through the Health and Care Act 2022. As an age-restricted product and one which causes significant harm to public health in the UK, similar restrictions should be applied to alcohol advertising. However, any alcohol restrictions should be extended to address several shortcomings with the HFSS approach: alcohol marketing restrictions should cover brand advertising, owned media, and the exemptions for small businesses, audio-only, broadcast radio, and transactional content should be removed. We were disappointed to see the recent announcement that the commencement of the new regulations will be pushed back by a year and would encourage these measures to be implemented as soon as possible.

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