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Introduction from the Chair

Drinkaware has come a long way since its inception in 2007.

While broadening our funding base and deepening our commitment to partnership, we have strengthened our independence and governance to ensure that our Board of Trustees alone is responsible for our direction and our work. We have invested also in enhancing the scale and professionalism of our research and evaluation capability which the Board believes is a critically important part of our work, and have been supported throughout by our independent Medical Advisory Panel.

While the Board is pleased by this progress, and by the increasing recognition of Drinkaware as an effective and independent organisation, we are conscious also of the scale of the challenge that remains, of the very considerable harms to which alcohol continues to give rise both for individuals drinking to excess and for society more widely, and of the fast changing nature of the society in which we work. That is why the Board took the decision last year that we needed to think through and set out clearly our goals, values and objectives for the years up to the end of this decade and beyond. We believe that doing so will help our employees, funders, partners and government to understand better what we are seeking to achieve, and how we may both seek help from and give help to others in pursuing our objectives.

Our strategy will remain a living document, and we will change it in the years ahead if that is desirable and necessary, but we hope that it will enable everyone, both inside and outside of Drinkaware, to better understand who we are and what we are aiming to achieve.

Sir Leigh Lewis

Chair of Trustees

Introduction from the CEO

Drinkaware's world continues to change. In preparation for developing our five year strategy, we have undertaken a wideranging review of the external environment in which Drinkaware operates; we have spent time learning from where we are now; and we have thought hard about the unique role that Drinkaware plays to address the complex issue of reducing harm from alcohol. I'm deeply grateful to my staff team for this.

The purpose of this document, for Drinkaware staff members and our associates and advisers, is to set out the overall direction of travel for the organisation over the next five years. We have made considerable progress since, in 2014, we set out a strategy of focusing on three pillars – tackling under-age drinking; reducing the harm of drunken nights out, and equipping people to moderate their drinking. This strategy has provided clarity for our funders, partners and supporters, and has been transformative for the organisation.

In evolving this, we have taken into account how quickly attitudes towards and behaviours around alcohol are changing in the UK, and the sustained impact of a generation of younger adults who now drink significantly less than the generation before them. People are seeking information and advice in new ways; and interest in alcohol, whilst waning on the political agenda, continues to be of growing interest to consumers who are concerned about their health and wellbeing. In this context, Drinkaware is uniquely placed to make a difference. We are digitally-led, innovative, we have a growing number of partners who are able to amplify and reinforce our messages, and we have the most trusted brand in the UK in terms of providing alcohol information and advice.

We are also fortunate in having a dedicated, hard-working team and a expert body of advisers on hand to help us navigate an exciting future ahead. I thank all of you for your commitment to Drinkaware and this important endeavour.

Elaine Hindal

Chief Executive





Recent trends

The UK alcohol market is a mature market but a dynamic one. As measured by duty and tax receipts, alcohol sales in England and Wales have increased by around 42% from roughly 400m litres in the early 1980s, peaking at 567m litres in 2008 and declining significantly since then (PHE, December 2016). Although consumption has declined in recent years, levels of abstinence have also increased; estimates of the proportion of the population who are non-drinkers vary from 11 – 16%. Levels of under-age drinking have changed most dramatically in the past ten years; only 4% of 15 year olds claim to have drunk alcohol in the last week, the lowest level for more than a decade. Amongst adults, drinking habits are also changing, with most alcohol now bought from shops and consumed at home.

Levels of alcohol – related harm tend to lag changing consumption habits. Since 2003/04, alcohol-related hospital admissions have been steadily increasing, accounting for over 1 million admissions in 2014/15; approximately half of all hospital admissions occur in the three lowest socio-economic groups who are disproportionately represented in admissions for alcoholic liver disease, mental and behavioural disorders due to alcohol use, unintentional injuries and alcohol-related complications in pregnancy and childbirth.



Rates of alcohol-related mortality are falling however, after a peak in the 2000s, but despite improvements in the last decade (particularly in Scotland) alcohol-related death rates were still higher in 2014 than in 1994. The rate of alcohol-related mortality for men remains double the rate for women in the UK; and significant regional variations persist with rates highest in the North East and lowest in London.

Attention is beginning to shift from under-age drinking and 'binge' drinking amongst younger adults, towards middle-aged audiences at risk from the longer-term health impacts of excessive alcohol use, and particularly where drinking above low risk guidelines coincides with other risk factors. Evidence from the Health Survey for England suggests that amongst people aged 40 - 60, 33% of men and 18% of women are drinking above the Low Risk Guidelines; the health impacts of this are compounded by the fact that 28% of adults in this age group are also inactive and 69% are overweight or obese.

Consequently, our consumer focus is shifting towards older adults (Drinkaware's Have a Little Less campaign is a reflection of this) with a greater need to present alcohol information in the context of other lifestyle considerations. There is encouraging evidence from the Drinkaware Monitor pointing to changing attitudes towards alcohol with one in five of UK drinkers currently cutting down (9%), or thinking about it (11%), yet the majority of these people appear to be doing so without getting any support or guidance. Among those trying to reduce their drinking right now, 56% are not looking for help and appear to rely solely on willpower to achieve their goal; by contrast, only one in seven (14%) are talking to their GPs or nurse about it; one in ten (10%) are seeking help and support from those close to them and just five per cent have joined a support group.

There is also increasing consumer interest, particularly amongst adults under 34, in low and no-alcohol versions of popular drinks; Kantar estimate that the UK market for low/no alcohol drinks has grown by 19% in 2016, and Drinkaware Monitor data suggests that 50% of the Risky Coping and Social Drinkers are open to trying these drinks.

Working with Government

As the leading independent charity for alcohol information and advice, Drinkaware is an important adjunct to Government efforts to reduce the harms and costs of alcohol, and as such, we work closely with the Home Office, the Department of Health and other government departments.

Drinkaware is recognised as a partner to Government in the Modern Crime Prevention Strategy (MCPS) and is committed to supporting the second phase of Local Alcohol Action Areas, announced in 2017, which is a central plank of the MCPS. In addition, we continue to work closely with the Department of Health and the UK Chief Medical Officers on the continued dissemination of the CMOs Low Risk Drinking Guidelines which were revised in 2016.

In the life of this Strategy, local and regional efforts to reduce alcohol harm will be impacted by the implementation of the Sustainability and Transformation Plans in England and Wales; and by changes to alcohol strategies in the devolved nations. Most notably, this may include the introduction of minimum unit pricing in Scotland, and other regulatory changes designed to incentivise or facilitate behaviour change on the part of UK consumers.

We also anticipate that the Department of Health's focus on obesity and health inequalities will continue to dominate public health. It is important that Drinkaware continues to highlight the well-evidenced links between alcohol and obesity, and that our digital information becomes an increasingly important asset for consumers wishing to learn more about nutritional information; equally, as social media continues to become more widely adopted by all socio-economic groups, we have new opportunities to extend the reach and influences of our campaigns to people most at risk of alcohol harm.



In addition, the Department for Work and Pensions has recently reviewed evidence on the impact of alcohol on employment and productivity (as set out in the Independent Review into the impact on employment outcomes of drug or alcohol addiction, and obesity, December 2016). The review noted that "Employers are clear that alcohol (and drugs problems) cost them money. In one survey, four out of ten employers saw alcohol as a significant driver of lost productivity through absenteeism, and a third of respondents reported similar concerns for drugs. This is supported by evidence provided by Drinkaware of the increased absence and reduced reliability of high-risk drinkers".

Over the life of this Strategy, we anticipate that there will be increasing interest from Government and employers on the impact of alcohol on productivity and on workplace health and wellbeing, and our partnership with the Ministry of Defence, in place until 2018, will reach more than 20,000 MoD employees through an adaptation of Drinkaware's Have A Little Less campaign.

Finally, our industry partnerships and donors are impacted by continued uncertainty surrounding Brexit over the life of this Strategy. In addition, the commercial impact of regulatory changes (most notably, increases in the National Living Wage, the Apprenticeships Levy and changes to business rates) mean that donations are likely to be subject to even greater scrutiny in the coming years.







Our 5 year plan

Drinkaware Strategy 2017 - 2022

Drinkaware Vision, Mission and Values

Drinkaware's vision, mission and values were adopted by its Board in 2014. We envisage that they will continue throughout the life of this Strategy.

Vision

make better choices about their drinking.

Mission

We will achieve this by:

 Providing impartial, evidence-based information, advice and practical resources

We are here to reduce alcohol-related harm by helping people

- Raising awareness of alcohol and its harms, and
- Working collaboratively with partners.

Values

 $\label{lem:continuous} \textbf{Drinkaware values are used to guide our behaviour and shape everything we do. Our values are:}$

- **Driven to make a difference:** We seek ways to maximise our impact and are committed to making information, advice and resources relevant and accessible to our audiences.
- **Led by the evidence:** We are informed by expert guidance and critically engage with, and make decisions supported by, evidence.
- **Resourceful:** We seek to find more effective ways of doing things; set and report upon targets; and ensure Drinkaware gets value for money to make our resources go further.
- Working positively with others: We work with stakeholders to maximise impact; and take stakeholders perspectives into account.

Our recent achievements

Since 2009 Drinkaware has seen a very large and continuing increase in the reach of its website; with 9.4m unique visitors in 2016, web traffic has quadrupled since 2010 and almost doubled since 2012.

In 2016, more than 1 in 10 UK adults accessed our web information and advice. In key cities such as Manchester and Newcastle, this increases to more than 1 in 5.

In addition, Drinkaware has since 2013:

Provided NHS and other front-line services with:

1.6 million

Drinkaware unit and calorie calculators

over 800,000

Drinkaware measuring cups

300,000

Drinkaware advice booklets for parents and children.

Supported some

300,000

people to moderate their drinking with the

Drinkaware app



Launched Drinkaware for Education, a free resource for teachers in primary and secondary schools



Created Drinkaware Crew, which is now in 17 local areas and over the life of this Strategy, we anticipate significant expansion of Drinkaware Crew in venues in the night-time economy, festivals and sports events



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70% of adults aged 18 – 65 years have heard of Drinkaware; this far exceeds that for any other alcohol-education charity and confirms Drinkaware as by far the leading source of consumer information about alcohol in the UK.

Our value is increasingly recognised by the UK alcohol industry; the number of organisations funding Drinkaware has increased from 60 in 2014 to more than 100 today.

Understanding our audiences

Our strategy is founded upon an in-depth understanding of our audiences, stemming from the Drinkaware Monitor and other research evidence, and in 2017 we will add to our understanding of audience segments to provide an even stronger basis for the next five years. This evidence has identified two segments of concern in the UK adult population, identified by drinking at levels significantly above low risk guidelines: Risky Career Drinkers and Risky Coping and Social Drinkers.



Risky Career Drinkers (RCDs)

RCDs are typically over 35, and drink frequently. This segment has been the main beneficiary of Drinkaware strategic campaign development 2016 / 17; this has primarily been focused on a sub-segment of men aged 45 - 65, who represent a significant proportion of Risky Career Drinkers and are disproportionately affected by alcohol-related health harms.

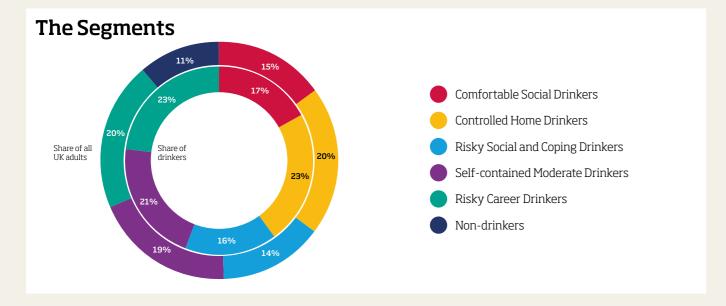
A secondary audience of women aged 35-65 has also been identified, both to address their own drinking and also to engage them as influencers for men in this age group.



Risky Coping and Social Drinkers (RCSDs)

RCSDs are typically under 35 (although one-third are over 45); they drink less frequently than RCDs but the use of alcohol to cope with stress and anxiety is a defining feature of this segment, which speaks to issues of mental and emotional wellbeing. This group is more likely to 'binge' drink than Risky Career Drinkers.

Drinkaware has done good work targeting a sub-segment of this audience, but there are significant opportunities for alcohol-harm reduction within the wider segment. Our Wouldn't Shouldn't campaign and Drinkaware Crew address the audience 18-24 year were developed to engage with younger adults who drink intentionally to get drunk, but this is not the whole of the RSCD audience; as yet, Drinkaware has not targeted these older drinkers.



Desired social impact

The desired outcome of our work over the life of this Strategy is that the number of people drinking at hazardous and harmful levels is reduced; and that, consequently, we see fewer Risky Career Drinkers and Risky Coping and Social Drinkers in the adult population over time.

This represents a significant shift for Drinkaware and will require us to focus on reducing the number of people who drink in risky ways; developing new partnerships in the health and wellbeing sector; and creating new products to support alcohol-reduction as part of a healthier lifestyle.

Risky Career Drinkers



Our goal is to reduce the number of Risky Career Drinkers, who currently make up 20% of the UK adult population (including non-drinkers); in 2017, we will set a target for the following five years. This will require us to develop a deeper understanding of people drinking at increasing and higher risk levels, and extend our scope beyond the mid-life men target audience over time.

Risky Coping and Social Drinkers



Our goal is to reduce the number of Risky Coping and Social Drinkers, who currently make up 14% of the UK adult population; in 2017, we will set a target for the following five years. This will require us to extend our scope beyond the Drunken Night Out audience; and to evolve our DNO campaign and Drinkaware Crew.

Information and Advice



Our goal is to extend the reach of the Drinkaware website, our resources and online/app tools from 10m unique visitors in 2017 to 15m consumer engagements by 2022; and to demonstrate the impact of providing trusted and accessible information and advice in supporting behaviour change.

Our 5 year plan

Strategy 2017 - 2022

Overarching ambition

Working with our partners, to be one of the UK's top charities in promoting healthier lifestyles and wellbeing by 2022.

We will achieve this, in partnership with others, by substantially increasing our information and advice to 15m people by 2022; supporting 1m people in our two 'at risk' groups to develop personal strategies to reduce harm; and influencing 500,000 people, over the life of this Strategy, to drink in less harmful ways.

drinkaware

Working with our partners, to be one of the UK's top charities in promoting healthier lifestyles and wellbeing by 2022.

Expanding our provision of best practice information and advice from **10m unique website visitors** in **2017 to 15m consumer engagements by 2022**

Reducing the number of **Risky Career Drinkers**





Reducing the number of Risky Coping and Social Drinkers

Research and impact assessment

Working in partnership

Enhance our leadership in Alcohol Information and Advice

Goal

Our goal is to extend the reach of the Drinkaware website, social media, resources and online/app tools from 10m in 2016 to15m by 2022; and to demonstrate the impact of providing trusted and accessible information and advice in facilitating behaviour change.



By 2022 Drinkaware aims to have:

delivered personalised information and advice accessible and of use to people of all ages and education levels whatever their need. The information will be packaged and distributed to make it easy to understand, timely and contextually relevant;

embedded our information as tools, widgets and videos as 'best in class' alcohol information on other charity sites, publishers, healthier lifestyle organisations, wherever alcohol moderation could be discussed as a contributing factor impacting health and wellbeing;

established a growing community from amongst the millions of people who have engaged with Drinkaware via the Drinkaware app, tools, face to face and on social media, allowing for more efficient and effective engagement with the breadth of our audiences;

established best in class, innovative tools for monitoring drinking and supporting behaviour change that will link in to other health and wellbeing systems and initiatives (e.g. Apple Health Kit or equivalent). Drinkaware will be leading the field in providing digital support and tools to those who wish to track their drinking for health and wellbeing reasons;

continued to deliver an improved user experience for the Drinkaware website (through better developed user journeys and offering more personalised information), and be able to integrate our digital systems with routine data capture; and

worked closely with other organisations providing information in the fields of health; mental and emotional wellbeing; community safety; and workplace productivity.

Our 5 year plan

Drinkaware Strategy 2017 - 2022

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Reducing the number of Risky Career Drinkers

Goal

Our goal is to reduce the number of Risky Career Drinkers through personalised information and targeted social marketing interventions grounded in consumer insight. This will require us to develop a deeper understanding of all Risky Career Drinkers and extend our scope beyond the mid-life men target audience over time.



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By 2022 Drinkaware aims to have:

developed and shared a deep understanding of the Risky Career Drinkers (RCD) audience so that we understand not only alcohol attitudes and drinking behaviour, but to understand the interaction between general health and wellbeing and alcohol harms, and how alcohol moderation fits in the context of their other health –related behaviours and readiness to change;

completed and published the results of the three-year Have a Little Less Campaign (2016 – 2018) and will, in 2019, publish our full campaign results to contribute to the evidence base of what works in terms of changing knowledge, attitudes and behaviour amongst older adult audiences.

created new products and initiatives aimed at mid-life men and delivered these through strategic partners; and have a portfolio of digital and physical products, supported by robust and impartial evaluation and systematic data collection to allow greater routine data capture and analysis of what works. We will have established partnerships these products to scale and to support healthier lifestyles amongst RCDs.

delivered evidence-based innovation to expand the reach and impact of Identification and Brief Advice (IBA), including through the launch of a digital IBA (pending 2017 pilot results);

enhanced our information provision and media reach on key issues of interest to Risky Career Drinkers, including alcohol and cancer; alcohol and mental health (including stress; sleep; emotional wellbeing; and other aspects of mental health);

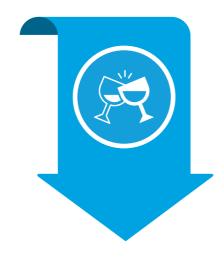
provided support and information to third-party health providers, where possible, ensuring that Drinkaware resources are available to anyone wishing to live a healthier lifestyle, and develop the role of employers as a key influencer to promote alcohol moderation as part of healthier lifestyles and wellbeing through workplace information and advice; and

developed our brand as a key asset which is widely seen as synonymous with alcohol moderation as part of a healthier lifestyle.

Reducing the number of Risky Coping and Social Drinkers

Goal

Our goal is to reduce the number of Risky Coping and Social Drinkers building upon learning from the 2015 – 2017 'Wouldn't Shouldn't' campaign; continuing to expand Drinkaware Crew to new cities and venues; and in particular, addressing the importance of mental health and emotional wellbeing for this audience.



By 2022 Drinkaware aims to have:

developed a better understanding of the alcohol-related social and health harms experienced by this audience; and importantly, the development of attitudes, behaviours and emotional wellbeing in adolescence that contribute to risky drinking behaviours in early adulthood;

completed a full evaluation of the three-year Wouldn't Shouldn't Campaign (2015 – 2017) and decided based on this how to evolve or continue the campaign; we will, in 2018, publish our full campaign results to contribute to the evidence base of what works;

enhanced our information and media reach in key subjects of interest to Risky Coping and Social Drinkers, with a focus (though partnership) on alcohol, mental health and emotional wellbeing;

more effective digital information and advice to engage this audience with the emphasis on personalised experiences delivered through video, mobile, social media and real world (e.g. in venue), rather than traditional media advertising campaigns;

expanded Drinkaware Crew in partnership with relevant stakeholders and in line with findings from ongoing evaluation work; with a view to ensuring that Drinkaware Crew is self-financing and sustainable from 2018;

educate employees in the licensed and hospitality sectors about alcohol vulnerability, though the expansion of e-learning and training;

provided support and information to partners to help promote healthier lifestyles amongst a younger(under 34) adult audience.

Our 5 year plan Drinkaware Strategy 2017 - 2022 **13**

Working in Partnership

Since our partnership strategy has been in place (from April 2015), it has provided Drinkaware with new audiences and wider reach with those organisations who are interested in working in partnership to reduce alcohol related harm. In 2015/16, Drinkaware has developed 20 strategic partnerships in the night time economy (crime prevention) and one major flagship partnership with the Ministry of Defence (supporting healthier lifestyles).

Our partnership work has begun to diversify Drinkaware income where now 5% of income is from non-industry sources (from less than 2% in 2015).

This Strategy provides a platform for Drinkaware to widen our reach and seek new opportunities with companies and organisations. A new focus on healthier lifestyles and wellbeing means that Drinkaware will have (or will adapt/develop) existing information which can be used in a range of new settings such as national sports associations, gyms, private health assessments, private sector workplaces, occupational health advisors and public sector employers.

It provides an opportunity to go directly to those organisations that the general public engage with and trust to amplify our campaigns, develop new programmes and reach our target audiences. It also provides an opportunity to focus our limited capacity and resources on those which would deliver on the following objectives: providing larger, sustainable and measurable reach for our assets and programmes.

By 2022 Drinkaware aims to have:

- deepened our existing partnerships;
- built new partnerships with third party health and wellbeing providers based on shared value propositions;
- diversified Drinkaware income so that about 10% of total income is from non-industry sources by 2022; and
- developed partnerships with large employers to support employees to make better choices about their drinking.



Research and Impact Assessment

Drinkaware is on a strong path towards robust usage of research and impact data to underpin and guide our work, and we have started developing good practices to ensure that our work is founded by segmentation insights and that we are successfully engaging experts to support this work. Key campaigns in 2015 – 17 were informed by rich research insights (available as detailed reports) and we routinely produce 'evidence packs' in support of campaigns. We have now begun attracting influential researchers who can publish findings from the work in peer-reviewed journals.

Drinkaware has also begun to articulate its impact in terms of Theory of Change models and specifying KPI data capture. We have been successful in engaging expert academic teams to undertake evaluations of our activity, and are beginning to use process evaluation to inform our development of new intervention activities such as the Drinkaware Crew 2015/ 16 and the Drinkaware Identification and Brief Advice in 2017. We are responding effectively to evaluations by either making recommended improvements (Drinkaware Crew) or stopping activity where findings suggested limited impact. In 2017, we have begun to commission research to assess societal impact including costbenefit analysis; this will be a key priority for our five year research strategy. We have established survey tools for routine collection of website user, stakeholder and brand feedback to inform our work.

By 2022 Drinkaware aims to have:

- ensured that all our information and resources are supported by good quality research that is widely recognised as such and contributes to the expert knowledge community.
- developed a reputation with the public and experts alike as the leading UK source of well-presented up-to-date alcohol-harm facts and evidence-based support tools. We will have commissioned or undertaken significant research and evaluation work and ensured it is routinely published as high-quality outputs (in peer-reviewed journals);
- engaged actively with Theory of Change models and KPI data capture and become confident in using and applying evidence;
- monitored and assessed the outcomes and impact of our activities, allowing us to direct our efforts towards audiences and activities that bring the greatest return on investment.

Income Generation

Principles

Drinkaware set out four underlying principles relating to its 2015 – 2020 funding: certainty; durability; universality and quantum. Against these principles:

Certainty / Durability

We have made very good progress against this principle, with most funders committed to funding Drinkaware for six years (in two three-year tranches, 2015 - 2017 and 2018 - 2020). A small number of funders however, are able to commit funding only for one year; and we are required to restate our case for support every year.

Universality

We have made excellent progress expanding funding from 61 funders in 2014 to more than 100 in 2017 although some key gaps remain. Expanding funders from across the breadth of the UK alcohol industry, including hospitality and sports) will continue to be a key tenet of our five year income generation strategy.

Quantum

Increasing the total funds is challenging given commercial pressures in the UK alcohol sector and we anticipate this level of challenge to continue over the five year strategy period. In 2016 / 2017, an increase in donations has been achieved from some key funders only in relation to restricted activities.

In the long-term, our desire to diversify Drinkaware income should be balanced against a shift towards restricted income and the importance of retaining Drinkaware's independence.

By 2022 Drinkaware aims to have:

- at least £5.5m of net income per annum to support our strategic ambitions.
- diversified income so that 10% of our income by 2020 will be from services and partnerships (not donations), through the development of Drinkaware Crew; Drinkaware for Employers and a focused portfolio of products and services.
- invested 10% of expenditure each year in research and /or evaluation
- have been awarded its first independent research grant in support of evaluation.

In the life of the Strategy, we do not anticipate that Drinkaware will seek either public donations (unless part of wider efforts to promote healthier lifestyles); or funding from Government.

Measuring Performance

Drinkaware has a framework of 13 Key Performance Indicators (KPIs) against we asses our outcomes and impact; visibility and reach; the quality of our outputs and our reputation.



1. Outcomes and impact

- 1.1. People have a better understanding of alcohol and what they drink
- 1.2. People have a better understanding of the effects of drinking
- 1.3. People have available social and psychological strategies
- 1.4. People drink in less harmful ways



2. Visibility and reach

- 2.1. People accessing our information
- 2.2. Users of our self-help and monitoring tools
- 2.3. Use by professionals
- 2.4. Evidence of reaching different segments in the population
- 2.5. Drinkaware recognition



3. Quality and organisational reputation

- 3.1. Overall quality of and satisfaction with outputs
- 3.2. Relevance to the public and professionals
- 3.3. Acceptance as trustworthy
- 3.4. Acceptance as independent

The most important indicators are those that are most closely associated with harm reduction, namely that people have available social and psychological strategies to help them reduce harm; and that people drink in less harmful ways.

We have set a target that in the life of this Strategy, Drinkaware will support more than 1m people to develop available social and psychological strategies to avoid or reduce harm; and that 500,000 people drink in less harmful ways.



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A. Our theory of change

The Drinkaware theory of change shows the key aspects of what we do, outlines the assumptions behind our reasoning for undertaking these activities and sets out the immediate and longer term outcomes and impact these lead to in order for Drinkaware to achieve its organisational objectives.

Resources

Unrestricted income provides the foundation for Drinkaware activity and some of the materials we produce are sold to cover the cost of their production. Staff expertise and time enables the organisation to undertake its work, and partnership working provides critical external expertise and ensures that we can deliver and implement our activities effectively. Partnerships also offer important opportunities to add value and extend our reach.

Activities

Drinkaware presents facts about alcohol and provide tools to assist the public in assessing their alcohol consumption. In addition, we provide tools and interventions to support people making better choices about their drinking; provide our logo for advertising and produce media and PR stories to raise awareness of Drinkaware resources and messages. We develop integrated campaigns which pull together our information, tools, interventions and communications for target audiences where evidence suggest that we can have the biggest impact.

Outputs

People use our information to make informed and better choices about their drinking behaviours, and the information may also lead them to our tools and resources which may help people better understand what they are drinking and the effect alcohol has on them. The tools may be used directly by the public as self-service, or their usage may be facilitated by another person in a professional or private role.

Outcomes

Obtaining knowledge about alcohol helps people better understand what it is they are drinking and the amount they drink, and understanding its effects is critical in assisting people to reflect on their drinking and making informed choices. Accessing advice and guidance helps people to develop strategies on what to do to prevent harm from alcohol. Our information and tools help people to consider a wide range of options and make a decision that works for them at that time and given the specific individual circumstances. As a result, they are supported to drink in low risk ways.

Societal outcome and impact

We may change social norms through affecting individual choices, but can equally seek to change culture through influencing the wider societal debate. This can happen through social advertising or through stimulating media debates in support of alcohol harm reduction. Minimising alcohol-related harm through reducing risky drinking practices and encouraging a more moderate approach to alcohol consumption supports a wider effort to help people to lead healthier lives. As a result of individual and societal change towards low risk drinking there will be reduced harm and cost of alcohol consumption.



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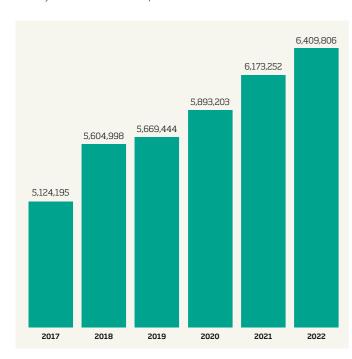
B. SWOT analysis

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C. Income Projection 2017 - 2022

The 2017-2022 Income Projection reflects our aim to consolidate existing income from donations, logo licensing and online shop sales whilst continuing to diversify into additional income streams from strategic partnerships and initiatives. Whilst donation income is projected to increase over the life of the Strategy, we have recognised the threats from the external environment through a conservative contingency which we will continue to monitor. It is our intention to enhance the quality and sustainability of our revenue model by diversifying into new income sources although it is recognised that these additional income streams are likely to be restricted for specified purposes.

Revenue from non-industry sources (Online Shop sales and Additional Income) has been projected to total £500,000 in aggregate by 2022 although it is acknowledged that this is a speculative target. We do not anticipate any public fundraising activity or income over this period.



Notes:

- 1 Assume Inflation of 3.2% in line with Funding Model
- 2 New Donation amounts are rolled into the Confirmed Donations figure in the subsequent year (e.g 2018 £5,531,621 includes £17,500 new donations from 2017)
- 3 Assume increase in line with Jan17 RPI%

2.6%

- 4 Assume need for contingency will reduce in the short term but from 2019 will be set at 10% of Confirmed Donations
- 5 Assume income from 2018 onwards will be enhanced by income derived from Additional Income streams
- 6 N.B. Prior to 2017 logo licensing from current funders included within donation income Pricing for 2017 is based on budget and will be subject to a review during 2017 for the years 2018-2022.
- 7 N.B. Relates to new licenses
- 8 Assume that aggregate funding from Online Sales and Additional income will achieve £500k by 2022
- 9 2017 amount per budget, 2018 amount based on "most likely" forecast per the Drinkaware for Employers business case. 2019-2022 are extrapolated to achieve £120k by 2022.
- 10 Income stream noted for completion but no values forecast due to uncertainty.
- 11 Based on lower revenue range per 'How we diversify our income' report 28 April 2015 Commence income from 2019 as this is only at research stage
- 12 Assume no material increase
- 13 Assume bank interest constant % of donation income **0.12%**

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