

Framings of risk and responsibility in newsprint media coverage of alcohol licensing regulations during the COVID-19 pandemic in England

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Abstract

Introduction: Licensing is recognised as a World Health Organization (WHO) ‘best buy’ for reducing alcohol harms. In response to the 2020 COVID-19 outbreak, many countries-imposed restrictions on outlets selling alcohol to reduce virus transmission. In England, while shops selling alcohol were deemed ‘essential’, multiple restrictions were imposed on licenced outlets such as pubs and bars. Media reporting of licensing restrictions during the pandemic might have shaped public discourses of alcohol risks and responsibilities.

Methods: This study aimed to understand how alcohol licensing changes in England were framed in newsprint media. Two hundred and fifty-three relevant articles from UK newsprint publications were identified through the Nexis database, published within six time points between March and December 2020 reflecting key changes to licencing in England. Thematic analysis, drawing on framing theory, was conducted to identify ‘problems’ framed in the reporting of these changes.

Results: Four dominant framings were identified: (i) licensed premises as ‘risky’ spaces; (ii) problematic drinking practices; (iii) problematic policy responses; and (iv) ‘victimisation’ of licensed premises. The presence of these framings shifted across the reporting period, but consistently, social disorder was constructed as a key risk relating to licensing changes over health harms from alcohol consumption.

Discussion and Conclusions: The analysis shows newsprint media reproduced narratives of ‘inevitable’ drinking culture and social disorder, but also emphasised expectations for evidence-based policy-making, in the context of licensing during the pandemic. Discourses of dissatisfaction with licensing decisions suggests potential for public health advocacy to push for licensing change to reduce alcohol health harms, in England and internationally.

KEYWORDS

alcohol, COVID-19, England, licensing, media

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Key Points

- Newsprint media framings of alcohol licensing policy changes during COVID-19 in England shifted from highlighting ‘risky’ premises to ‘problematic’ policy-making between March and December 2020.
- Articles emphasised social disorder arising from changes in access to alcohol from licensed premises amid COVID-19 restrictions, rather than health-related harms.
- Articles reproduced narratives of individual responsibility for risks from drinking, but also highlighted expected government responsibility for evidence-based decisions.
- Frustrations with licensing policy decision-making during COVID-19 may create an opportunity for public health advocacy for revisions to licensing legislation.

1 | INTRODUCTION

In response to the emergence of the 2020 COVID-19 pandemic, many countries introduced restrictions on access to alcohol, to limit social interaction and reduce risk of transmission of the virus. A complete ban on alcohol sales was imposed in a few countries, including South Africa and India. In the United Kingdom and elsewhere, restrictions were placed on where alcohol could be purchased, limiting sales to shops, and closing premises such as pubs and bars [1]. As the pandemic continued, alcohol-related restrictions were variously modified and lifted in different locations, often amid contentious debates about the economic, cultural and health implications of alcohol provision [2]. Given the media’s considerable influence on public understanding of, and policy responses to, public health issues [3], the COVID-19 media coverage presents an important context for considering how public discourses of alcohol consumption and availability might be shaped. This paper describes research which sought to understand how alcohol licensing changes and restrictions in England were represented in UK newsprint media between March and December 2020.

1.1 | Alcohol consumption, licensing legislation and COVID-19 restrictions in England

Alcohol consumption is commonplace in England (and the rest of the United Kingdom) and while the number of people who drink is declining, around a quarter of the population report exceeding the ‘low risk’ drinking guidelines and alcohol-related harms remain high [4]. In the past two decades, ‘problematic’ drinking cultures—often termed ‘binge drinking’—have been the focus of both political and media attention in England [5].

Alcohol policy-making in that time, such as changes to licensing legislation, has consistently reflected competing values of the economic benefits from the alcohol industry, the costs to public finances from alcohol-related harms and protecting individual freedoms [5].

Licensing is the legislative process through which alcohol sales are regulated in England and other countries, and there is international evidence of its effectiveness for reducing multiple health and social harms [6]. Under the *Licensing Act 2003* of England and Wales, local government authorities grant and enforce licences to businesses to sell alcohol for on-premises and/or off-premises consumption. The Act stipulates objectives for the licensing process: to prevent crime, disorder and public nuisance, and to protect public safety and children [7].

Multiple restrictions were implemented by the UK Government in March 2020 in response to the alarming rise in COVID-19 cases. The Health Protection (Coronavirus, Restrictions) Regulations 2020 for England, in conjunction with the *Public Health (Control of Disease) Act 1984*, came into force following Government instructions to pubs, bars and other venues with on-premises alcohol licences (hereafter referred to as ‘licensed premises’) to close on 20 March. Businesses deemed ‘essential’—including shops selling alcohol for consumption off-premises—were permitted to stay open and continue trading [8]. Similar regulations were implemented in the devolved nations of Scotland, Wales and Northern Ireland. The designation of shops selling alcohol as ‘essential’ in the United Kingdom, and elsewhere such as Canada, prompted concerns about potential harms from increased consumption of alcohol at home [8], and the possible influence of the alcohol industry on these policy decisions [9]. However, it was also argued that allowing shops to sell alcohol would help protect people with alcohol addiction from withdrawal issues, to prevent additional burden on strained health systems [10].

Since the initial lockdown and closure of licensed premises in England in March 2020, there have been multiple modifications and easing of these restrictions as COVID-19 rates in the country fluctuated. These included the re-opening of these premises in early July, then a series of shifting local and national restrictions from August 2020, into 2021. This extraordinary, changing landscape unsurprisingly attracted much media attention in the United Kingdom. Exploring how these changes were portrayed through the media will add to understanding of the health and social issues relating to alcohol during COVID-19, and to how public health policy and practise may intervene to reduce harms from alcohol provision.

1.2 | Alcohol and the media

There is a rich literature of public health research into the media, to explore health debates in the public domain, and the framing and influence of public and policy responses to key issues [3]. The media have a productive function, co-constructing public knowledge about health and social issues, and shaping the positioning of individuals, and policy and political stakeholders in relation to these issues [11]. In the field of alcohol research, the media are seen as a site where different interests around alcohol converge, influencing people's responses to alcohol marketing, campaigns for reducing consumption and research on the impacts of drinking [12–14]. Recent attention has been paid to media reporting of new and/or contested alcohol policies, such as an increase in excise tax on spirits in Poland [15], the minimum unit price for alcohol in Scotland [16] and the 'last drinks' laws in Sydney, Australia [17]. This literature highlights the discursive tactics used within the media by different stakeholders to frame alcohol 'problems' and evidence in particular ways, to influence public and policymakers' opinions.

Research is emerging examining media reporting of alcohol-related issues during COVID-19 in different countries. Media analysis has been conducted to identify health and social impacts of the ban on alcohol in India during its first lockdown in 2020 [18], and to explore public and other stakeholders' views on the subsequent lifting of the ban [19]. In Canada, Ogbogu and Hardcastle's [2] content analysis of media representations of access to 'essential' services during the first lockdown in 2020 found only a small minority of articles discussed the designation of liquor stores as essential, and all of these were supportive of the policy. To date, no similar work has been published on representations in the UK media. The research described in this paper seeks to address that gap within the context of newsprint media, to contribute to understanding how alcohol 'problems' are framed in public

discourse, to help inform public health practice and policy responses towards reducing harms from alcohol.

1.3 | Aim and theoretical framings

In this paper, I report the findings of research guided by the question: how were changes to alcohol licensing policy and regulations, amid the COVID-19 pandemic in England in 2020, represented in newsprint media reports? I draw on constructionist traditions of discourse analysis [12], taking news media articles as discursive representations that both reflect the social and cultural contexts in which they occur, and contribute to the construction of views of the world [20]. In this paper, I focus particularly on the construction and representation of 'problems' in articles reporting on alcohol availability and licencing. By 'problems', I mean the issues that are the focus of news articles, and which take on status through the discursive elaboration, contestation and/or redefinition that occurs within and across articles [21]. Within the construction of these 'problems', I consider the different types of 'risk' and 'responsibility' that are emphasised in reporting of licensing changes. This perspective draws from critical literature on alcohol (among other) policy-making which highlights how the discursive process of 'problematization' within policies involves representations of particular sets of potential harms (risks), and the designation of the responsibility to mitigate those harms [22]. Finally, I also build on the use of framing theory in previous media analyses in alcohol research [23], to identify the wider interpretive frameworks around alcohol during COVID-19 used in newsprint media articles to produce meaning that resonates with readers [11].

2 | METHODS

I used the database Nexis to identify articles from national, regional and local newspapers, trade publications and other news sources that are print-only, or print with an associated online presence. News websites without an associated print publication were not included in this review due to limited capacity to undertake thorough searches of these platforms. Further, while digital news access continues to increase, there is evidence indicating little significant difference between the reporting of news online and in print [24], which suggests that excluding digital-only news sources may not have had considerable impact on the findings of this research. I searched the Nexis database using the terms: alcohol AND licen* AND England AND covid. The search was limited to the period between 16 March and 31 December 2020 (inclusive),

TABLE 1 Time periods and respective key policy changes for articles included in the review

Time period included in review	Key policy change(s), dates and restrictions
1 16 March to 6 July 2020	Closure of licensed premises (20/03); first national lockdown (23/03); end of national lockdown and reopening of licensed premises (04/07).
2 26 August to 24 September 2020	Local lockdowns (various dates); national curfew and other restrictions on licensed premises (24/09).
3 7 to 14 October 2020	Tier system implemented including new local lockdowns and restrictions on licensed premises (14/10).
4 22 October to 5 November 2020	Further local lockdowns (various dates); new national lockdown (05/11).
5 17 November to 2 December 2020	End of national lockdown and start of new tier system of restrictions (02/12).
6 14 to 31 December 2020	Run up to Christmas, including additional tier restrictions (20/12).

and limited to the publication location of United Kingdom. I conducted the search between 27 January and 11 February 2021. Although I recognised that not all articles describing restrictions on alcohol sales would use the term ‘licensing’ or its variants, I used this search term to help keep the search focused on articles relevant to the changes to licensing restrictions and permissions during the pandemic.

Following the initial search, 1638 articles were identified in the database. The inclusion criteria applied at this stage were:

- Relevance to the research question;
- Newsprint articles only;
- Predominant focus on England; and
- Unique articles.

I screened the titles and extracts of each article for relevance to the research question. A total of 1179 articles were excluded at this stage for being: (i) radio or TV news transcripts; (ii) focused predominantly on Wales, Scotland or Northern Ireland; or (iii) exact duplications of other articles. In the latter scenario, I included the first article that appeared in the list and excluded any subsequent duplicates. Following the screening process, 459 full texts were downloaded.

To further refine the sample, I then imposed additional limits by date, to focus on the timepoints of key policy changes (legislation or other restrictions imposed by national Government) between March and December 2020 that affected licensed premises, and which I had already identified prior to starting the study. Six time periods were selected to capture newsprint media coverage of the run up to each policy change plus 2 days after the change; articles published outside these dates were excluded (82). See Table 1 for more details about the time periods and Figure 1 for a timeline of key policy changes and respective time periods included in the review. Initial reading of these included articles led to the exclusion of a further 124 articles, due to: (i) high levels of repetition of the content with other articles (79); (ii) lack of relevance to the research question (32); and (iii) lack of focus on England (13). The full texts of the final sample of 253 articles were imported to NVivo 12 for coding and analysis. See Figure 2 for a flow chart describing the search and screening process.

I followed an interpretivist analytical approach, informed by steps of thematic analysis, to identify codes and then themes from the data [25]. First, I developed a loose coding framework prior to analysis, informed by the research question and existing literature on representations of alcohol policy in the media. This included four broad categories of ‘type of problem framed’, ‘risks’, ‘responsibilities’ and ‘broader discourses and issues’ and I used this as a starting point for developing codes more inductively through close reading of the articles. Reflecting the theoretical framing described above, ‘risks’ were identified as (potential) harms relating to provision and consumption of alcohol depicted in articles, and ‘responsibilities’ as implicit or explicit references in articles to roles in addressing those risks. ‘Problems’ were identified around the main argument or focus of each article, with relevance to the research question. Through this interpretive process, I also identified broader socio-political narratives reflected in the reporting of issues around licensing.

I created a process to categorise the type of publication (broadsheet newspaper, tabloid newspaper, regional/local newspaper, trade publication and other); type of article (news report, commentary and letter); and the type of licencing policy and/or restrictions described. Following the first phase of coding in which I developed codes within the initial framework, I then grouped, merged and refined the codes, to identify four main framings, and explored the presence of these framings over the reporting period. The final coding framework is presented in Table S1, Supporting Information.

As the articles included in this review were all available in the public domain, ethical approval was not required for this research.

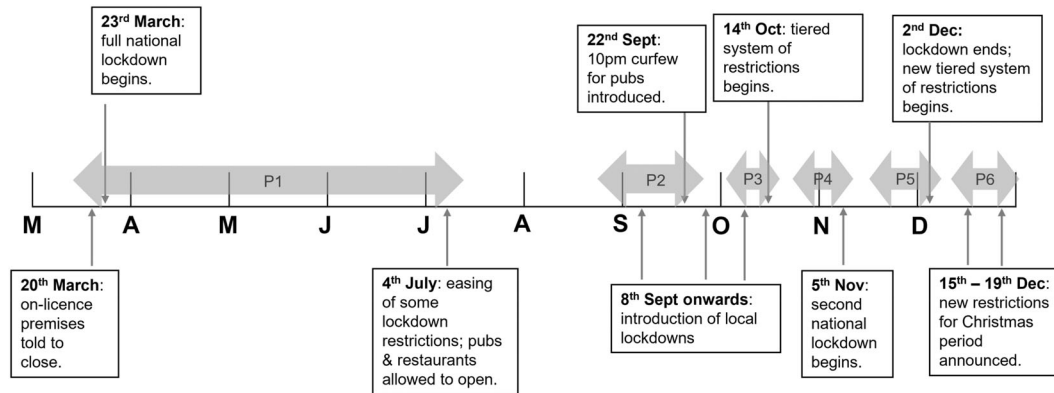


FIGURE 1 Timeline of key policy changes and article review periods

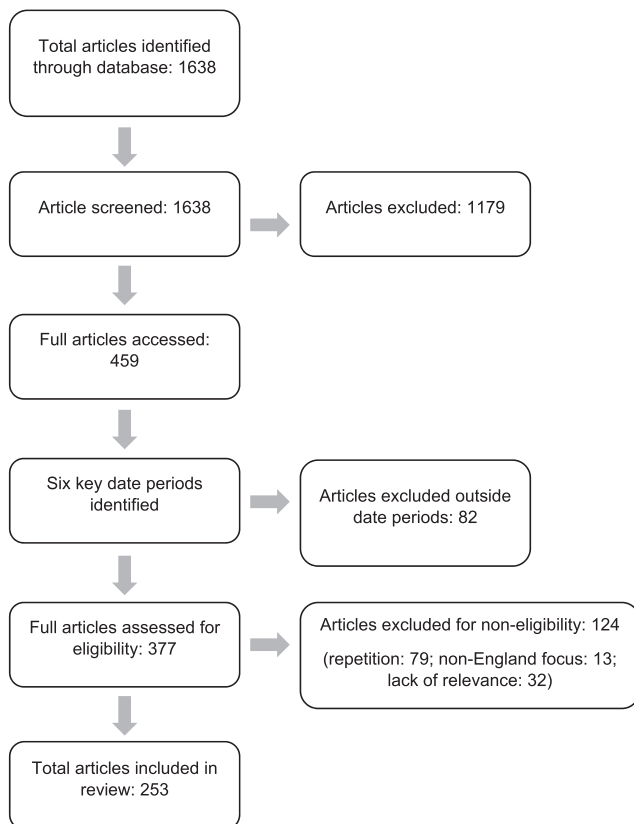


FIGURE 2 Flow diagram of the search and screening process for the review

TABLE 2 Characteristics of the articles included in the review ($n = 253$)

Characteristic	Number of articles (%)
Time period	
16 March to 6 July 2021	104 (41.1)
26 August to 26 September 2021	39 (15.4)
7 to 16 October 2021	39 (15.4)
22 October to 7 November 2021	34 (13.4)
17 November to 4 December 2021	30 (11.9)
14 to 31 December 2021	7 (2.8)
Type of media publication	
National broadsheet newspapers	59 (23.3)
National tabloid newspapers	88 (34.8)
Regional/local newspapers	68 (26.9)
Trade publications	16 (6.3)
Others	22 (9.0)
Type of article	
News reports	244 (96.4)
Commentaries	6 (2.4)
Letters	2 (0.8)
Q&A articles	1 (0.4)

3 | RESULTS

3.1 | Overview

Of the 253 articles included in the final review, 45% (104) were from the first time period, from the initial national lockdown in March, including closure of all on-sales premises, to the relaxation of these restrictions in early July. Eighty-eight articles (34.8%) were from national tabloid* newspapers, 59 (23.3%) from national broadsheet†

newspapers, 68 (26.9%) from regional or local newspapers, 16 (6.3%) from trade publications and 22 (9%) from other sources. Almost all articles (244, 96.4%) were news reports, plus six commentaries, two letters and one question-and-answer article. See Table 2 for a summary of the types of article and publication included in the review. For information about the number of articles by specific publication, please see Table S2.

Four distinct framings of ‘problems’ around alcohol licencing changes were identified, and the prominence of

TABLE 3 Summary of frequency of coded references for the four key framings, by time period

Time period	Frequency of coded references for key framings			
	Licensed premises as risky spaces	Problematic drinking practices	Problematic policy responses	Victimising licensed premises
16 March to 6 July 2020	14	27	11	11
26 August to 24 September 2020	2	8	11	5
7 to 14 October 2020	3	2	13	2
22 October to 5 November 2020	5	5	17	16
17 November to 2 December 2020	1	4	11	17
14 to 31 December 2020	0	0	3	5

these framings shifted over the period of the review; see Table 3 for a summary of the frequency of coded references for each framing across the different time periods of the review. Within articles from the first period (March to July) more emphasis was placed on: (i) licensed premises as potentially ‘risky’ spaces; and (ii) problematic drinking practices. However, later in the year, amid shifting and easing restrictions locally and nationally, the dominant framings centred more on: (iii) problematic policy responses relating to alcohol licensing; and (iv) the victimisation of the hospitality industry, including licensed premises. Further, the main focus of the articles included was on places licensed to sell alcohol for consumption on-premises, rather than shops and off-licences, reflecting the fact that the latter were not affected by COVID-19 restrictions.

3.2 | Licensed premises as risky spaces

In newsprint media reports of the mandated closure of pubs, bars and restaurants in March 2020, these premises were framed as being ‘risky’ in relation to COVID-19 transmission, as they ‘bring people together’ (Daily Mail, quoting Boris Johnson, 20 March 2020). It was this, rather than the provision of alcohol, that rendered licensed premises as a ‘threat to public health’ (The Morning Advertiser, 23 March 2020), sometimes presented in contrast to shops designated as ‘essential’. This emphasised the riskiness of licensed premises as spaces, rather than the health harms from alcohol consumption.

In articles published in subsequent months, however, there was a subtle shift in this framing away from licensed premises as ‘risky’ simply by enabling people to

be together, and towards ‘risky’ by enabling socially problematic behaviour by drinkers:

‘... a bar adjacent to a small green public space has been given a licence by the very benevolent council to sell takeaway food and alcohol. On Saturday afternoon this meant social distancing was measured in centimetres, while shouting and guffawing, and sharing picnics, made sure the transmission rate had a terrific time. Toilet facilities were provided by local gateways...’. (Reader’s letter in The Guardian, 31 May 2020).

This excerpt reflected changes to licensing regulations to allow licensed premises to trade via takeaway and delivery under lockdown.

Another dimension of the ‘riskiness’ of licensed premises was constructed through reports of breaches of restrictions on licensed premises during lockdown, typically reported in local newspapers. One example of this (Birmingham Mail, 7 May 2020) quoted a local councillor calling a pub found to be serving drinks in secret a ‘flagrant public nuisance’, and reported that the pub’s licence would be subject to review. Here, premises owners’ non-compliance was portrayed as risky not only from a legal perspective, but also in compromising a social responsibility to adhere to COVID restrictions.

In the latter half of the year the narrative shifted again, with some articles reporting debates around whether licensed premises are actually ‘risky’ in terms of COVID-19 transmission. This will be explored in more detail under the theme of ‘victimising licensed premises’.

3.3 | Problematic drinking practices

Alongside the framing of licensed premises as ‘risky’, drinking practices were typically framed as problematic: (i) due to the chance of increasing COVID-19 transmission and putting the collective at risk; or (ii) because they contributed to social disorder. Again, this framing rarely acknowledged risks of direct health harms from consuming alcohol. Ahead of key licensing policy changes, such as the first national lockdown and later local lockdowns, articles (particularly in tabloid newspapers) reported people ‘disobeying’ guidance around avoiding drinking in public places. This included references to so-called COVID tourists who were ‘risking lives just to go for a pint in a Tier 2 city’ (Mirror, 22 December 2020), following localised restrictions in September onwards.

Amid the first lockdown, a few articles highlighted the risk of people consuming more alcohol at home due to the closure of licensed premises, quoting public health stakeholders, such as the Chair of the Alcohol Health Alliance UK who expressed concern about people ‘stocking up to drink at home in isolation’ (Express, 21 May 2020). However, the emphasis shifted later from home drinking as problematic due to the amount of alcohol consumed, towards the risk of COVID-19 transmission from irresponsible socialising. Here, the voices of those advocating for opening licensed premises were more prominent, describing restrictions on licensed premises as encouraging ‘unsafe’ behaviours:

‘The crackdown on pubs and restaurants will, I expect, ensure that more people, unable to go to the pub, will buy their alcohol at the off licence and drink with their friends in an environment that has not been secured against the virus: their homes’. (Iain Duncan Smith, in The Telegraph, 14 December 2020).

This commentary was written by a Conservative MP and published in a politically right-leaning broadsheet newspaper, reflecting the economic argument for opening up businesses.

A second dimension of problematic drinking practices was the ‘disorder’ arising from changing restrictions. Ahead of the easing of restrictions on licensed premises in July, many articles anticipated considerable social disorder on what was dubbed ‘Super Saturday’—the first day pubs and bars were permitted to re-open. The harms anticipated included ‘violence and lawlessness’ (The Telegraph, 30 June 2020) and ‘pressure on public services’ (The Guardian, 1 July 2020), as well as concerns about a lack of social distancing and risk of COVID transmission.

Near-apocalyptic imagery was frequently used to convey the possible extent of disorder, with phrases such as ‘pub-ageddon’ (Daily Mail, 3 July 2020) and ‘total chaos’ (Daily Star, 3 July 2020), and likening the opening of pubs to the disorder associated with ‘an England World Cup football clash’ (The Telegraph, 30 June 2020). In the few days after ‘Super Saturday’, articles did report some scenes of disorder, such as ‘hundreds ignoring social distancing’ (Mirror, 5 July 2020) and fights outside pubs. However, there were also articles centring blame for the disorder on the Government’s policy decision, implying that the (socially) problematic behaviour of drinkers was to be expected. This conveyed a sense of inevitability to the drinking culture in England and related disorder.

3.4 | Problematic policy responses

More prominent in articles published in the latter half of 2020 was the framing of the Government’s decision-making as problematic, in being inadequate or inappropriate for the risks posed by licensed premises. These articles highlighted the confusing and sometimes contradictory nature of these decisions, and contributed to a broader sense of eroding trust in the Government’s decision-making.

At the first national lockdown, articles reported ‘confusion’ among licensed premises owners around whether alcohol sales via takeaway or delivery were permitted. Though this was clarified shortly after, uncertainty around restrictions on licensed premises continued across the review period, especially as takeaway sales were not consistently permitted in later lockdowns. Articles highlighted backtracking by the Government around this issue: ‘pubs cheer government u-turn on takeaway alcohol sales ban’. (The News, Portsmouth, 3 November 2020). Around the restriction on pubs in high-risk areas to sell alcohol only with a ‘substantial meal’, articles ridiculed the various attempts by Government ministers to define this term, presenting this regulation as yet another ‘baffling’ decision around alcohol licencing.

Articles from October onwards also portrayed stakeholders questioning the effectiveness of Government restrictions, highlighting risks of new problems, such as the 10 pm curfew ‘encourage[ing] people to binge drink’ (Daily Mail, 12 October 2020). Amid these reports were explicit calls for ‘evidence’ of the links between licensed premises and COVID-19 transmission. The voices of alcohol industry representatives were strong and numerous in these articles, criticising Government restrictions for being ‘not “evidence-based”’ (Yorkshire Post, 2 November 2020), and citing evidence from Public Health England on COVID-19 infections from hospitality venues:

'Jamie Baxter, the co-owner of two Leicester bars [said] "There is no evidence that bars pose an increased risk of infection. The figures suggest the opposite is true with just three per cent of infections being traced back to hospitality venues"'. (The Telegraph, 25 November 2020).

Here, the concept of 'evidence-based policy' was clearly embedded in narratives around licensing restrictions and was used as discursive tool to challenge the Government. Indeed, in mid-October, multiple articles reported the intention of hospitality industry representatives to pursue a legal challenge of the Government restrictions, based on the argument that 'no evidence supports hospitality venues having contributed to the spread of COVID-19' (Daily Mail, 12 October 2020). There was no further reporting of this legal challenge or its outcome in the articles included in the review.

Interestingly, the voices of public health and alcohol industry stakeholders overlapped slightly here, in questioning the evidence behind certain restrictions. A medical academic was quoted as saying the 10 pm curfew policy for licensed premises would be 'at best ... inconsequential' but could increase transmission as people cluster together when leaving premises (Financial Times, 25 September). Here, the problematic nature of Government policymaking was a focal point for both sets of voices, despite representing different interests in relation to the sale of alcohol. It conveyed a sense of the failure of the Government in its responsibility to make clear, evidence-based decisions.

3.5 | Victimising licensed premises

Articles in the latter months presented a dominant framing of licensed premises as 'victims' of Government policy. This framing emerged around the increasing local restrictions in September and October, the second national lockdown in November, and the varied restrictions in December. Articles (particularly in regional and right-leaning national newspapers) often featured quotations from individual business owners describing feeling that they were being used as a 'scapegoat' for the broader failure of the Government to control COVID-19. Alongside this were depictions of licensed premises as 'safe', and 'regulated' spaces—in direct contrast to the earlier 'risky' framing—emphasising the perceived irrationality of Government decisions:

'Neil Smith, licensee of The Shannon Inn in Bucklesham: "I've just walked around our

local Tesco and I'm utterly convinced it's safer to sit and have a meal in our pub"'. (The Telegraph, 25 November 2020).

The victimisation framing also included the financial harms from restrictions on licensed premises for business owners and employees, and the negative consequences for local economies, typically referenced in articles describing local lockdowns. These articles reflected broader narratives of regional inequalities arising from government COVID-19 policies, amid a persisting sense of north–south economic divide in England [26].

Finally, within this framing was a sense of threat to the longer-term viability of the hospitality industry, due to the 'relentless' financial challenges from enforced closures and costs of making premises 'COVID-safe'. Often accompanying this was a sense of threat to the cultural position of licensed premises in England, with multiple quotations of Prime Minister Boris Johnson's reference to the 'ancient, inalienable right of free-born people of the United Kingdom to go to the pub' (Daily Mail, 20 March 2020). The victimisation framing constructed these businesses as being on the verge of 'total decimation' (Manchester Evening News, 2 November 2020), with industry stakeholders calling for the Government to honour its responsibility to support these businesses financially.

4 | DISCUSSION

In this paper, I have examined UK newsprint media reporting of alcohol licensing changes and restrictions during the COVID-19 pandemic in England in 2020, to identify the problems, risks and responsibilities framed within these articles. The rationale for this work recognised the influential role of the media in shaping public discourses around issues such as alcohol consumption [11, 14]. Analysis of 253 newspaper articles published between March and December 2020 revealed four framings, conveying shifting perspectives on the consequences of restrictions on licensed premises. The initial framings of licensed premises as 'risky' spaces and (socially) problematic drinking practices shifted to framings of policy responses as problematic and licensed premises as victimised. These framings also linked to broader narratives around the cultural position of alcohol in the United Kingdom, and expectations for evidence-based decision making.

The prominent construction of the risk of social disorder in relation to alcohol provision follows several decades of English news media foregrounding issues of social disorder (rather than health) around drinking [27]. This includes intense UK media focus on 'binge

drinking' and problematic social behaviours following the introduction of 24 h licences in 2005 [5, 28]. The narrative depicts an 'inevitability' to drinking culture in England [5], that people's propensity to drink alcohol, and the social disorder that arises from it, are culturally embedded. Yet, the articles also highlighted types of social disorder arising from the changes in licensing restrictions under COVID-19, for example in response to new permissions for takeaway alcohol. This could suggest that frequent changes to alcohol (and other) policies during the pandemic contributing to a sense of uncertainty, which has been shown in multiple contexts internationally to influence social resistance and disruption [29].

Licensing has been identified as effective for reducing health harms from alcohol, as one of the World Health Organization's 'best buys' for addressing noncommunicable disease [30], through its capacity to restrict the accessibility and availability of alcohol. However, risk of health harms from alcohol, beyond the role of alcohol in facilitating COVID-19 transmission, was far less prominent in the articles reviewed than the risk of social disorder. This reaffirms research on media reports of COVID-19 restrictions in Canada and India, which revealed limited consideration of the wider public health impacts from alcohol [2, 19].

On one hand this is somewhat surprising, given the attention paid in news and other media sources to changes in alcohol drinking behaviours during COVID-19 lockdowns in England and elsewhere, and likely impacts on physical and mental health [31]. On the other hand, the paucity of attention to risks to health likely reflects the fact that licensing legislation in most countries and jurisdictions in the world (including England) does not explicitly seek to promote or protect public health [32]. Recent research from England [33] and elsewhere, such as Australia [34], has illustrated the continuing barriers to public health engagement with licensing, even when public health have a formally recognised role in the process [33]. Given the unique context of the pandemic, the minimal public health voice or focus on health harms from alcohol in these articles could reflect the demand on the public health workforce to prioritise the immediate COVID-19 pandemic. However, I argue that the findings also suggest a continuing misalignment between media discourses of managing alcohol provision through licensing, and reducing health harms from alcohol. Whereas individual drinking behaviours are readily associated in media discourses with risk of harm to health [12], the provision of alcohol, and restrictions on it, are not. From a public health perspective this is concerning, undermining international calls for the pandemic to be taken as an opportunity to reduce health harms from alcohol [10].

The review of newsprint articles also revealed a complex picture of different responsibilities towards mitigating the risks relating to the provision of alcohol during the pandemic. In the emphasis on social disorder, narratives depicted 'irresponsible' drinking behaviours and implied that responsibility for reducing harms such as social disorder lies with the individuals enacting these drinking behaviours. This framing follows political discourse of individualised responsibility underpinning changes to licensing legislation in the 2000s and 2010s in England [5]. It also corresponds with the discourses of 'individual choice' and 'responsible drinking' commonly advocated by the alcohol industry in strategies to avoid legislative change affecting alcohol sales [35]. As such, it may reflect what has been identified as the increasing influence of corporations from different industries on media representations of health issues in general [36]. Certainly, the prominence of voices from the alcohol and hospitality industries particularly in the later articles suggests that newsprint media continues to be a strategic space in which these stakeholders can seek to shape public discourse and understanding of alcohol issues [37].

However, the framings identified in this review also highlighted other types of responsibility, beyond the individual. Most prominent was the depiction in the later framings of the responsibility of the government to implement consistent, and evidence-based policies, with explicit criticism and challenge when this was not done. This indicates a wider socio-political imperative that policy-makers have a responsibility to engage in 'evidence-based' policy-making [38]. Previous research into UK alcohol policy-making has highlighted inconsistencies in how evidence has been used, for example the New Labour government ignoring its own commissioned evidence into effective approaches to reduce harms from alcohol, when introducing licensing reforms in the early 2000s [5]. However, expectations for demonstrating the evidence behind licensing decisions arguably also reflects, and reproduces, a culture of public critique and challenge of expertise, and mistrust of public institutions, which characterises the 'risk society' of late modernity [39]. It may also intersect and contribute to aspects of the 'post-truth' agenda, in which citizens increasingly expect to know how and why certain decisions have been made [40].

The framings of problematic policy-making and victimised licensed premises also echo broader criticism of the UK Government's COVID-19 response [41]. The centralised nature of the response disrupted existing governance structures including local government powers, such as for making licensing decisions [42]. Recent research from the United Kingdom has highlighted frustrations felt by those working in licensing roles when decisions about changes

to licensing restrictions were made centrally, without local consultation [43]. Here, there may be potential opportunities for public health advocates to capitalise on these discourses of dissatisfaction with licensing decision-making, and the evidence base behind it. Amid narratives of the 'victimisation' of licensed premises, there may be appetite among alcohol and hospitality industry stakeholders to push for a review of licensing legislation in England. This could open up space for discussion about licensing, potentially enabling explicit consideration of health harms in relation to alcohol provision, and supported by the evidence base indicating licensing as an effective strategy for reducing these harms [30].

4.1 | Limitations

While a wide range of articles were identified through the search strategy described, the use of the search term 'licensing' (and its variants) will have limited the sample. This decision was largely a matter of feasibility with limited resources, but also helped to ensure the focus of the review centred on relevant policy changes. The sample was also limited by excluding broadcast media and other online news platforms that are not included in the Nexis database, again for feasibility reasons. There is need for further research to compare representations of licensing changes across different types of news media platforms and social media, in recognition of the changing ways in which people access information and news.

The analysis described here was not able to identify the impact of these reports on public or policy-maker attitudes or practices, something that will be important to assess to examine any long-term influence on drinking behaviours and licencing policy. Although some interpretation of the relative strength of different stakeholder voices in the news articles was made during the analytical process, the presence of these voices was not coded systematically in the analysis. Further research, drawing on techniques of discourse analysis, could be valuable to interrogate how different stakeholder voices, and their claims in relation to alcohol licensing, were represented in these articles.

The analytical process did not allow for a systematic comparison of framings by newspapers of contrasting political leanings, although through my interpretation there did not seem to be any notable differences by different types of newspaper. This could be an artefact of the search strategy, whereby the term 'licensing' led to the inclusion of more policy-oriented articles, comparable across publications, rather than more discursive articles on alcohol that might have reflected different political and social values more explicitly. However, it could also

reflect the unique landscape of newsprint media reporting on COVID-19, and an emphasis on quick, information-led reporting amid a rapidly unfolding pandemic, rather than on critical or investigative journalism [2]. Further interrogation of the data to examine any influence of the position and type of newspaper would be beneficial.

5 | CONCLUSIONS

The analysis of newsprint media representations of the changing restrictions on licensed premises amid the COVID-19 pandemic in England highlights reproduction of existing public discourses about the risks and responsibilities, prioritising social disorder over health harms from alcohol, despite the prominence of public health amid the pandemic. However, the narratives also reveal dissatisfactions with decision-making processes relating to licensing, and engagement with discourses conveying expectations for evidence-based policy. This suggests potential avenues through which public health advocates can emphasise the limitations of current licensing systems, and increase recognition of licensing as an effective way to prevent health and social harms from alcohol.

ACKNOWLEDGEMENTS

An earlier version of this paper was presented at the Annual Meeting of the Kettil Bruun Society in May 2021. The author gratefully acknowledge the insightful and constructive feedback on the draft version of this paper from Rob Bovens, Tilburg University, and the comments and questions from other delegates at the conference.

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ENDNOTES

* 'Tabloid' refers to popular newspapers, traditionally smaller in physical size, and which typically present news in a condensed form with lots of pictures.

† 'Broadsheet' refers to newspapers with larger page sizes, typically regarded as more serious and less sensationalist in tone than tabloid newspapers.

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SUPPORTING INFORMATION

Additional supporting information can be found online in the Supporting Information section at the end of this article.

How to cite this article: Reynolds J. Framings of risk and responsibility in newsprint media coverage of alcohol licensing regulations during the COVID-19 pandemic in England. *Drug Alcohol Rev.* 2022. <https://doi.org/10.1111/dar.13532>