

EUROPEAN ALCOHOL POLICY

Sofia, 9 June 2008

eurocare

Outline presentation

1. Eurocare
2. EU law is relevant for domestic alcohol policies
3. Alcohol on the EU Agenda

EUROCARE – European Alcohol Policy Alliance

- Alliance of some 50 NGOs
- Members are involved in research, advocacy, provision of counselling services and residential support for problem drinkers, provision of workplace and school based programmes and provision of information to the public
- Formed in 1990 by organisations concerned with potential negative impact of EU policies on national alcohol policies
- 1995 office in Brussels
- 17 years - foremost non-governmental agency tackling alcohol-related harm at an EU level

Goal

- Raise awareness among decision makers of the harms caused by alcohol (social, health and economic burden) ensuring that these are taken into consideration in all relevant EU policy discussions
- Promote the development and implementation of evidence-based policies aimed at effectively preventing and reducing this burden

Activities

- **Policy influencing:** Monitor policy developments + engage dialogue with policy makers
- **Exchange** of information, experience and best practice
- Collection, collation, analysis, dissemination and utilisation of **data** on alcohol consumption and related

office in centre of EU policy making

EU law is relevant for domestic alcohol policies - Advertising; Labelling; Health and nutrition claims; Minimum excise duties / Travellers allowances; Pricing; Road safety

Alcohol Strategy / Alcohol and health forum

Alcohol advertising

TWF Dir (89/552/EEC) - AMS Dir (2007/65/EC)

Commercial communications:

Art 15 - Tv advertising & teleshopping for alcoholic beverages:

- (a) may not be aimed **specifically at minors** or, depict minors consuming;
- (b) not link the consumption to **enhanced physical performance** or to **driving**;
- (c) not create impression consumption contributes towards **social or sexual success**;
- (d) shall not claim that alcohol has **therapeutic qualities** or is a stimulant, sedative or a means of resolving personal conflicts;
- (e) shall not encourage **immoderate consumption** of alcohol or present abstinence or moderation in a negative light;
- (f) shall not place emphasis on high alcoholic content as being a positive quality of the beverages.

New article 3 d (linear and non linear) MSTs shall ensure that commercial communications provided under their jurisdiction e) must not be aimed specifically at minors and may not encourage immoderate consumption of such beverages

- **Sponsorship**
- **Product placement**

Labelling

Proposal Commission 30 January 2008: Regulation on food information to consumers: information that has to be on the labels

Beer, wine and spirits exempt from: list ingredients / nutrition information

Allergens: exemptions for alcoholic beverages

No health warning labels

Health and nutrition claims

Regulation 1924/2006

labelling and commercial communications (advertising, promotional campaigns...)

3. Beverages containing more than 1,2 % by volume of alcohol shall not bear health claims.

As far as nutrition claims are concerned, only nutrition claims referring to low alcohol levels, or the reduction of the alcohol content, or the reduction of the energy content for beverages containing more than 1,2 % by volume of alcohol, shall be permitted.

4. In the absence of specific Community rules regarding nutrition claims referring to low alcohol levels, or the reduction or absence of alcohol or energy in beverages which normally contain alcohol, relevant national rules may apply in compliance with the provisions of the Treaty.

Shall apply from July 2007

Excise duties

September 2006, proposal from Commission to update the existing Directive 92/84/EEC on the approximation of the rates of excise duty on alcohol and alcoholic beverages

increase minimum rates - bring them in line with inflation - 31% (majority unaffected - affected minimal: beer - biggest increase - € 0.01 on half a litre of beer)

Commission Council agreement 4,5%

EP: rejected proposal

Excise duties / Traveller allowances

Proposal Commission 14-02-08 review: [Dir on general arrangements for products subject to excise duty \(1992\)](#)

Aim: liberalise existing rules for alcoholic beverages bought in one MSt and transported to another

Current legislation, individuals are entitled to bring back alcoholic beverages which have been bought tax paid in a MSt without incurring further charges, provided the goods are transported by the individuals themselves and are for their own use. (Art 8 Dir. 92/12/EEC "When alcoholic beverages acquired by private individuals for their own use* and transported by them, the duty must be charged in the country where they are acquired")

Proposal: private individuals could have the goods transported on their behalf and still be exempted from paying excise duties in the State of importation

The proposal needs to be approved by the Council acting unanimously and after consulting the European Parliament and the Economic and Social Committee (art 93 EC Treaty).

ALCOHOL ON THE EU AGENDA

EU ALcohol Strategy: October 2006

New public health article of the EU Treaty for the 1st time mentions alcohol

"5. **The European Parliament and the Council**, acting in accordance with the ordinary legislative procedure and after consulting the CoR and the ECOSOC, **may also adopt** incentive measures designed to protect and improve human health and in particular to combat the major cross-border health scourges, measures concerning monitoring, early warning of and combating serious cross-border threats to health, and **measures which have as their direct objective the protection of public health regarding tobacco and the abuse of alcohol, excluding any harmonisation of the laws and regulations of the Member States.**"

1995: scandinavian (FIN SW) countries join EU.

SW: Strict alcohol control policies & low consumption restrictions **conflicting** with the creation of a **single market**. Result: 30% increase in consumption. SW concern with alcopops

January 01 – **SW** takes over **presidency of the EU**: proposes develop comprehensive policy

5-06-01 Council Recommendation on the drinking of alcohol by young people, in particular children and adolescents

Council Conclusions on a Community strategy to reduce alcohol-related harm:

Invites the Commission to put forward proposals for a **comprehensive Community strategy** aimed at reducing alcohol-related harm which shall complement national policies and set out a timetable for the different actions

SW not alone: support **FR** and **FIN**

Increase in **youth binge drinking**

Dublin student was kicked to death outside a pub. Irish government, under increasing public pressure to address underage drinking.

January 04: **Irish EU presidency**: priorities - reducing alcohol related harm. June 2004: Council reiterates invitation to Commission

Enlargement EU also focused attention to alcohol

Role of Eurocare

Without Eurocare - no NGO alcohol policy partner for the EU

EU needed political and democratic legitimacy to set alcohol policy process moving

This came from two sources:

- **MS** (FR, SW, FIN, IE), and;
- **NGOs.** The health NGO voice was important since it balanced the industry. Eurocare provided counterbalance to the industry and made the case at EU level which the Commission themselves could not do.

The Commission needs Eurocare to say what they cannot say (WG on Alcohol , Round table and the Forum). Bridging the Gap and the APN. The documents that we produced “counterbalancing the drinks industry” and the Social Aspects Groups – a public health warning”.

Difficult birth of the strategy: no strategy without support of Eurocare

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EU Alcohol Strategy

Despite the implementation of health policies (EU / MSt) level of harm inacceptably high. Studies show in some cases cross border element (sales promotion, tv advertising) therefore better coordination at, and synergies established with, at EU level might be needed

Problems are shared in all MSTs (remain worsened). Some issues are of Community relevance because of the cross border element. This highlights the need for further actions and cooperation at EU and national level

The Strategy recognises that there are **different cultural habits** related to alcohol consumption in the various MSTs

There is **no intention to substitute** Community action to national policies, which have already been put in place in most MSTs (pp subsidiarity & art 152)

The Commission does **not intend** as a consequence of this Communication to propose the development of **harmonised legislation**

The strategy aims at:

- mapping actions already in place
- Identifying good practices / areas further progress

Explains how Commission can further support and complement MSTs

It is a commitment from Commission to further pursue and develop actions + list good practices + establishment of the forum

Goals:

- Protect young people, children and the unborn child
- Reduce injuries and deaths from alcohol-related road traffic accidents
- Prevent alcohol-related harm among adults and reduce the negative impact on the workplace
- Inform, educate and raise awareness on the impact of harmful and hazardous alcohol consumption, and on appropriate consumption patterns
- Develop, support and maintain a common evidence base

Implementation of alcohol strategy

Strong push for action needed to take advantage of improving environment:

- **action in broad range of areas**
- **action by great variety of stakeholders**
- **action at all levels, from local to global**
- **partnerships**

EU approach – three main alleys:

Work across EU policies

- Public Health
- Data and indicators
- Transport, Education, Research,

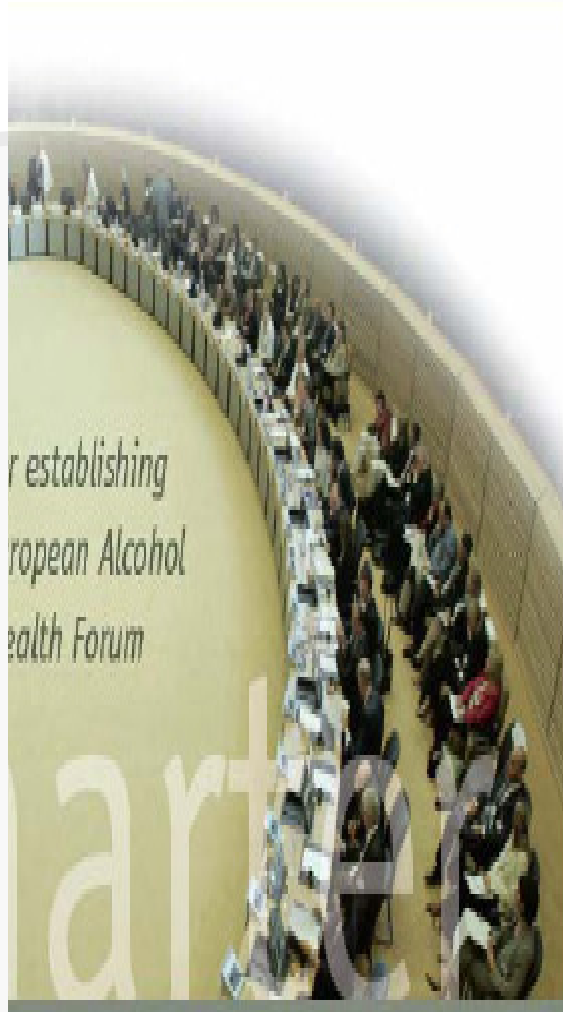
Cooperation with Member States:

- coordination of government-driven policies
- review national and regional alcohol policy development
- dissemination of best practice

stakeholder partnership approach:

- multi-stakeholder platform “European Alcohol and Health Forum”

ALCOHOL AND HEALTH FORUM

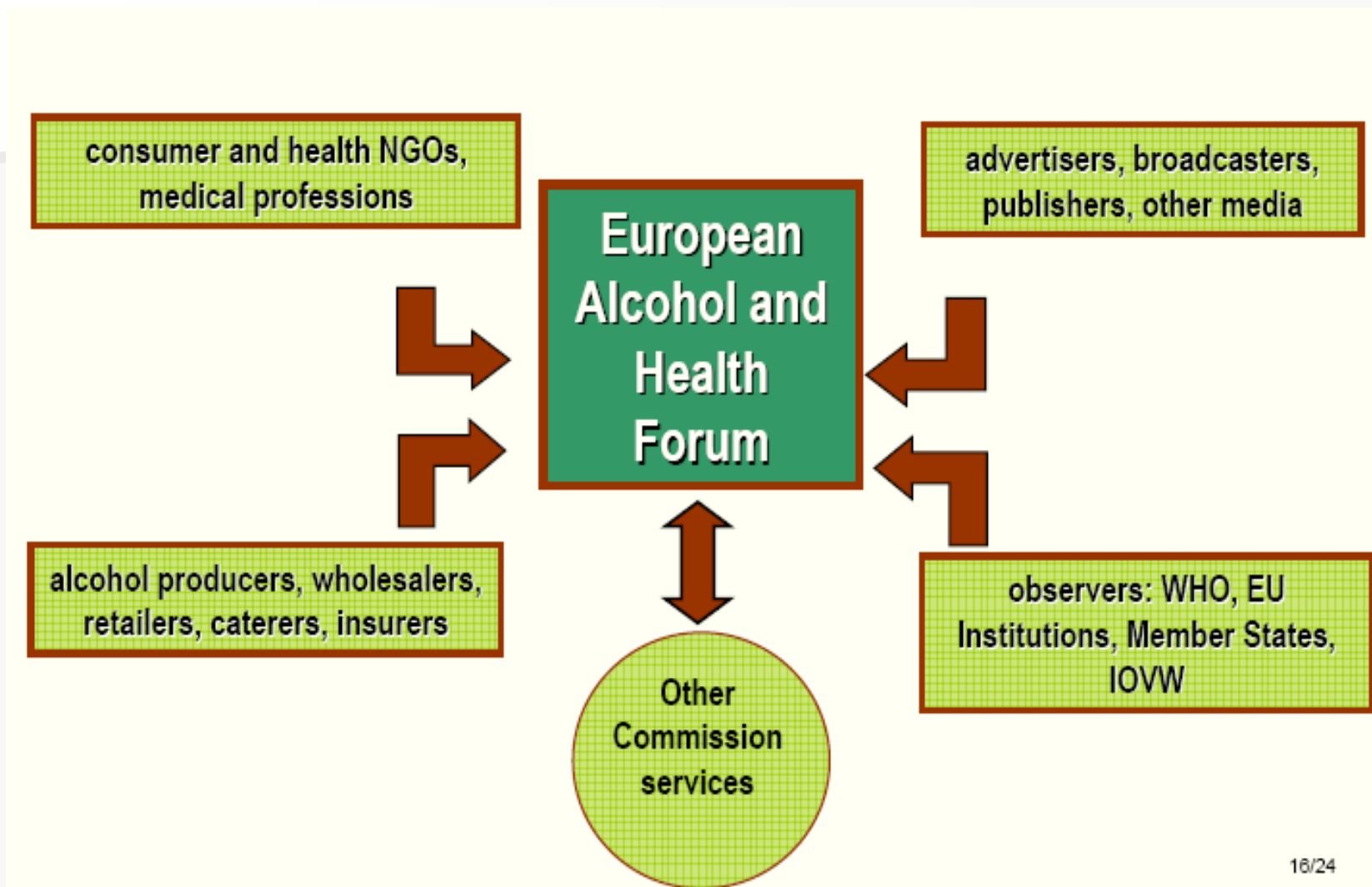


- Backbone of the strategy
- Launched in June 2007
- Forum for action: provide a common platform for all interested stakeholders to step up actions relevant to reducing alcohol related harm
- Members have to make commitments (relevant and proportionate to resources) (78)

Operation



Plenary session - Membership



16/24

NGOS / PUBLIC HEALTH SIDE

EUROCARE as Founding Member

- **Members as Affiliated Members:** Alcohol Action Ireland; ANPAA; Eurocare Italia; Estonian Temperance Union; German Centre for Addiction Studies; IAS; IOGT-NTO; STAP; NorDan

Other NGOS: APYN, EYF, ECL (Cancer), FEANTSA, EPHA (RCP), Midwives, Standing Committee of European Doctors, ETSC, Relief

IMPT: Encouraged other NGOs to participate, Coordinating role of eurocare (members and other NGOs). Taking the lead.

NGO's working to prevent alcohol-related harm in Europe



Europe, European Alcohol Policy Alliance

- Alcohol Action Ireland, Ireland
- Association Nationale de Prévention en Alcoologie et Addictologie (ANPA), France
- Caritas for Addiction Issues (Deutsche Hauptstelle für Suchtfragen - DHS), Germany
- Centrum Triagevan Alcohol, Caronit, Curaçao, Italy
- Institute of Alcohol Studies (IAS), UK
- IOGT-NTO, Sweden
- National Foundation on Alcohol Prevention (NFA), Netherlands
- Nordic Alcohol and Drug Policy Alliance (NADPA), Denmark
- Alcohol Policy Youth Network (APYN)

- European Public Health Alliance (EPHA)
- Royal College of Physicians, UK
- European Youth Forum (EYF)
- National Youth Council Ireland
- European Federation of National Organizations Working with the Homeless (FEANTSA)
- European Transport Safety Council (ETSC)
- European Mutual Help Network for Alcohol-Related Problems (EMH)
- European Alcohol Association (EAA)
- Stimulating Communities of European Doctors (SCPED)
- Association of European Cancer Leagues (AECL)



EUROPEAN COMMISSION
Alcohol and Health Forum

Economic Operators

Alcohol Industry and Social Aspect Organisations (PR)

- ❖ Brewers of Europe
- ❖ European Spirits Organisations (Bacardi, Diageo, Moet, Pernod..)
- ❖ Social Aspects organisations (EFRD and ICAP)

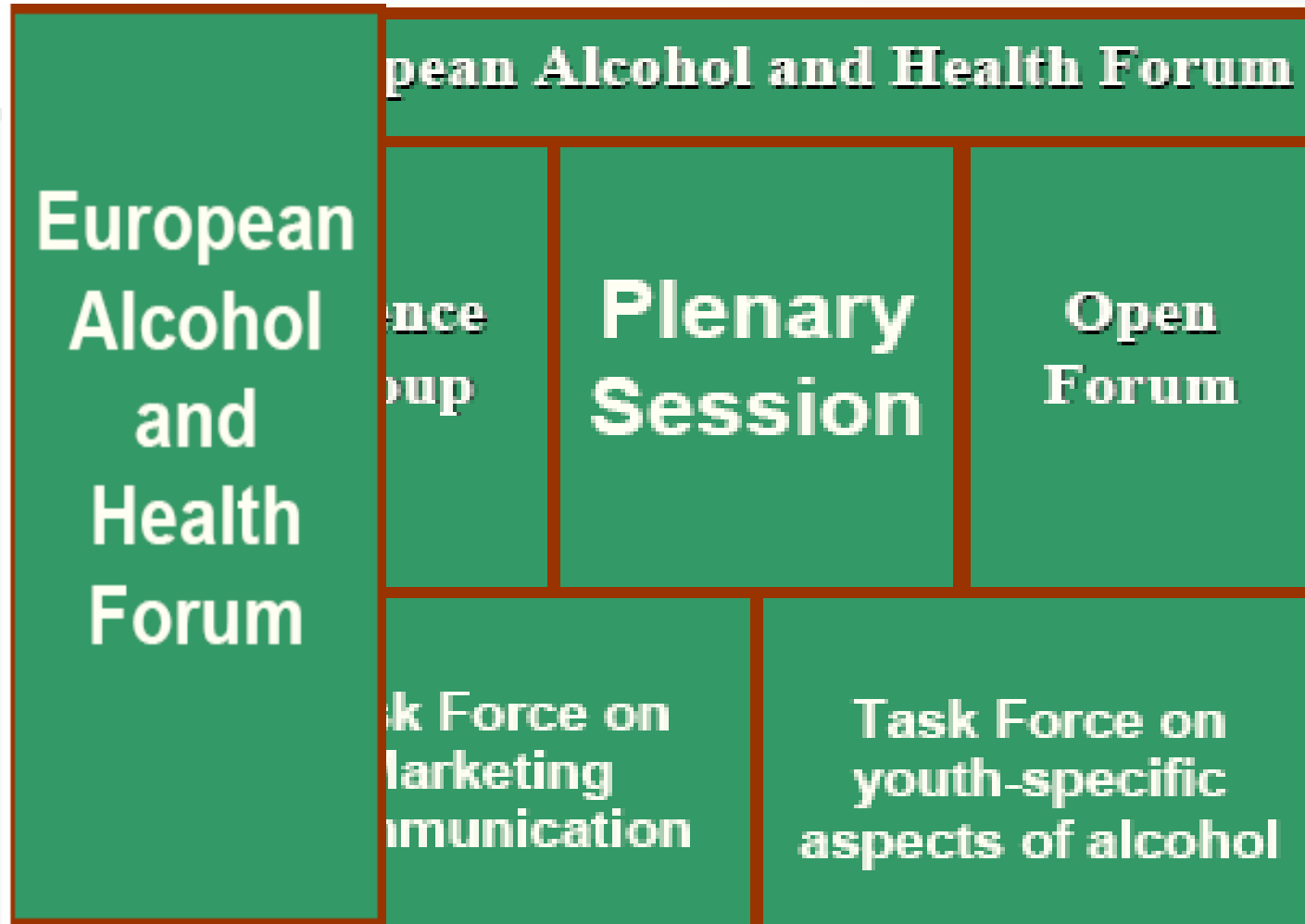
Other Economic Operators

- ❖ World Federation of Advertisers
- ❖ Eurocommerce (BRC, Delhaize)

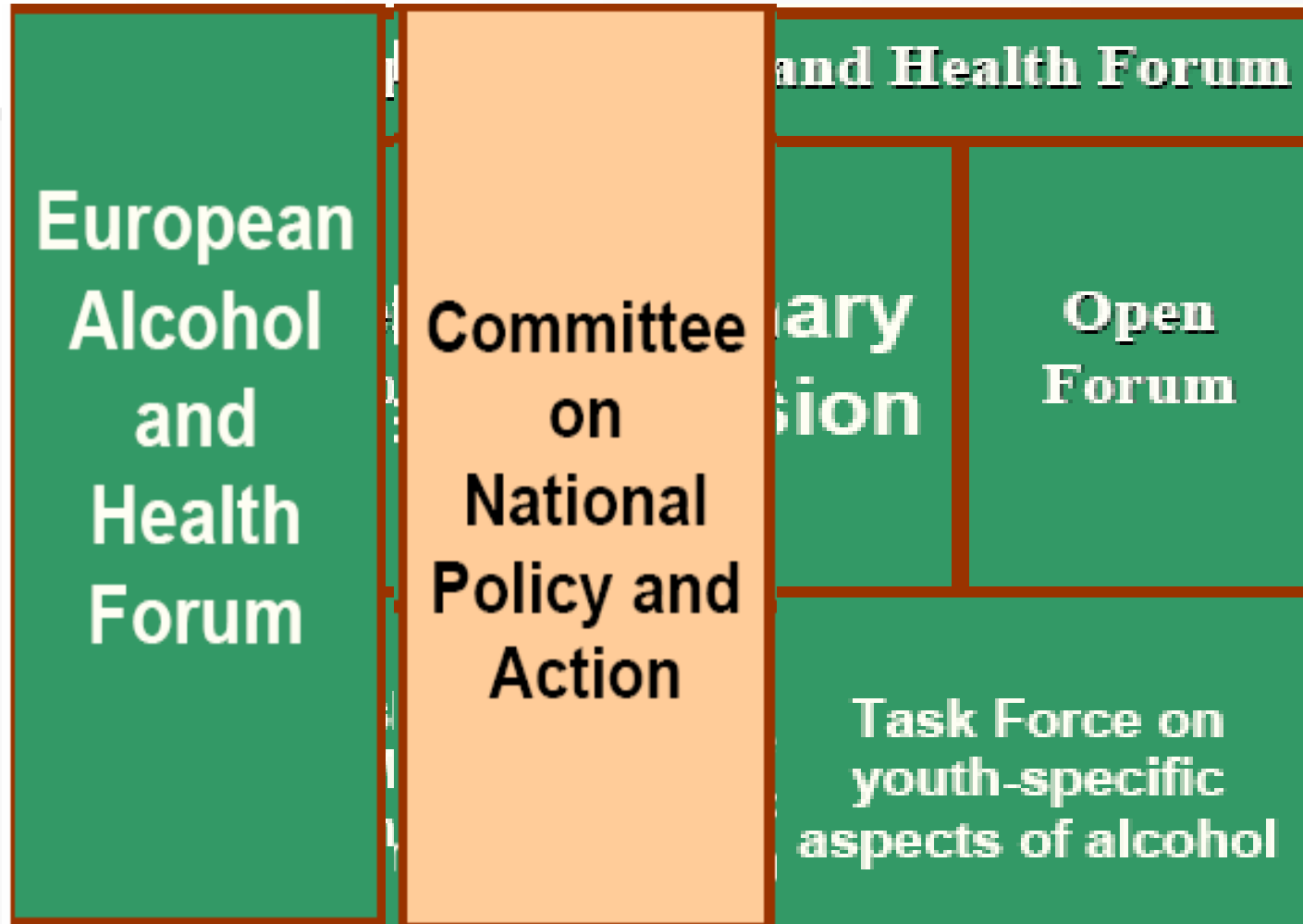
Operation



Implementation Alcohol Strategy



Implementation Alcohol Strategy



Committee on national policy & action

Convened by the DG SANCO

COMPOSITION:

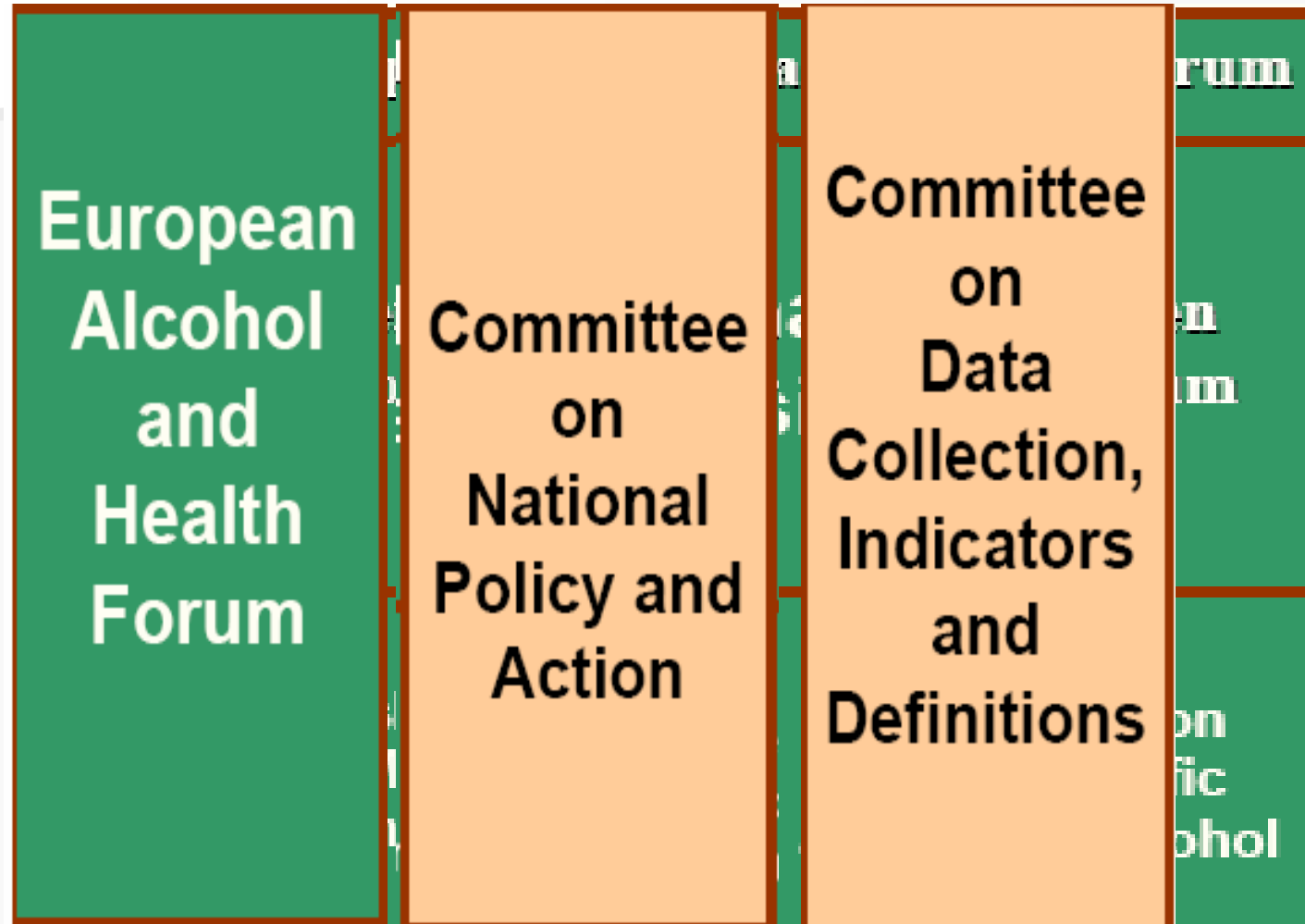
Member State representatives
experts
observers (WHO)

MAIN OBJECTIVE:

Further alcohol policy development and to further coordinate government-driven policies aimed at reducing alcohol-related harm at national and local level, building upon the examples of good practice identified in the Commission's Strategy

It will review national and regional alcohol policy development with a view to disseminating best practice across the EU.

Implementation Alcohol Strategy



Committee on Data Collection, Indicators and Definitions

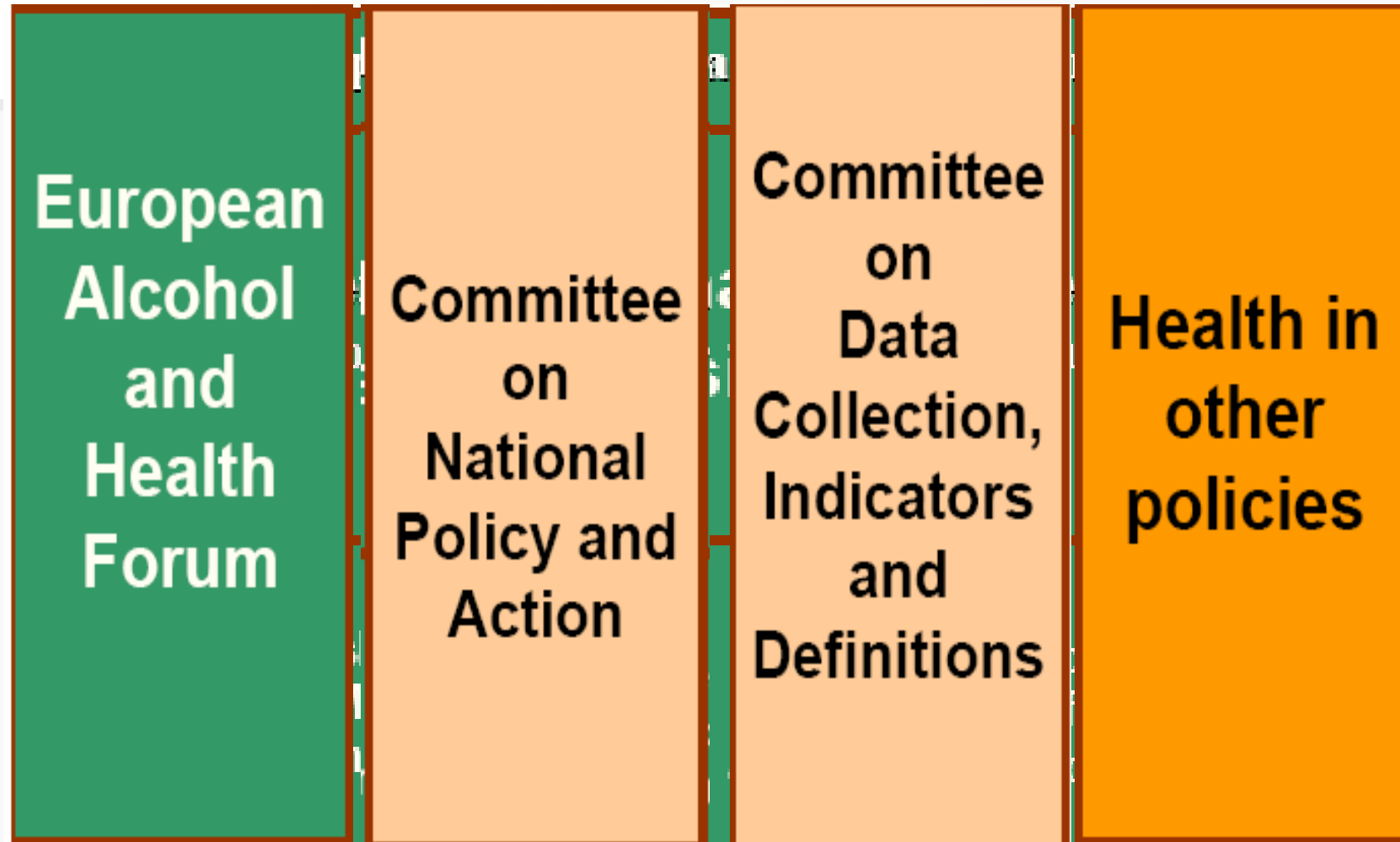
Policy development and concrete action need to be based on:

- reliable, comparable and regularly updated data on alcohol consumption, drinking patterns and alcohol-related harm
- common indicators and definitions.

For this purpose, the DG SANCO convenes this Committee composed of representatives from:

Commission, WHO, the European School Survey Project on Alcohol and Other Drugs (ESPAD), and the European Monitoring Centre for Drugs and Drug Addiction (EMCDDA), and other relevant partners.

Implementation Alcohol Strategy



Conclusions

**THANK YOU VERY MUCH
FOR YOUR ATTENTION**

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