## **European Alcohol and Health Forum: NGO Resignation Briefing Document**

#### What is the European Alcohol and Health Forum?

The <u>EU Alcohol and Health Forum</u> is a stakeholder platform, chaired by DG Sante. Its members consist of public health experts and NGOs, and alcohol industry trade bodies and representatives. **The Forum was established in 2006 to support the implementation of the previous EU Alcohol Strategy, which expired in 2012**. Members of the Forum make voluntary 'commitments' and pledges for actions that aim to help reduce the burden of alcohol harm in Europe.

#### Why have health experts and NGOs resigned from the Forum?

At the recent Forum meeting on 18 May 2015, Commissioner Andriukaitis announced that the EC has no plans to develop a new EU Alcohol Strategy. Instead, the EC plans to incorporate alcohol into a broader 'framework' for action on non-communicable diseases (NCDs). At the same meeting, several presentations were delivered by independent evaluators which indicated that the Forum had to date achieved no demonstrable benefits for public health or reductions in alcohol harm.

This position marks a continued trend of ignoring the need to address alcohol related harm at EU level: Alcohol was not a priority area in the 2014 Health Programme workplan; the EC has failed to produce the promised report on alcohol labelling – the deadline for which as given in the Food Regulation was December 2014; and revision of the excise duties directives was one of the first items to be scrapped by the Junker Commission.

In response to the EAHF meeting, and following on from years of discontent with the Forum's performance, all health bodies and NGOs decided to resign from the Forum by means of **an open letter to Commissioner Andriukaitis**, giving the following reasons:

- 1) Failing to produce a new EU Alcohol Strategy is ignoring calls from MEPs and Member States
- 2) Incorporating alcohol policy into a broad chronic disease framework will fail to tackle the drivers of numerous alcohol harms such as drink driving, domestic violence, child abuse, accidents and injuries
- 3) There is no evidence to show the Forum has had any impact to date on public health, and with no new Alcohol Strategy planned, the Forum is meaningless.

At the same time, a number of international experts who were members of a Science Group established to support the Forum, Chaired by Professor Sir Ian Gilmore, also resigned.

## Why does Europe need an Alcohol Strategy?

Europe remains the heaviest drinking region of the world. Each year there are more than 120,000 premature deaths related to alcohol in the EU. Alcohol harm costs Europe 125 billion euro each year, which includes costs to health services, costs associated with crime and lost productivity in the workplace.

The responsibility for delivering public health policy lies primarily with individual Member States. Each country in the EU has different requirements and cultural backgrounds and there is no one-size-fits-all strategy that can be applied. However, an **EU Alcohol Strategy could support and complement national alcohol strategies** by focusing on policy areas **where the EU mandate can add value**, for example in relation to trade and cross border issues. The previous EU Alcohol Strategy had a positive impact on drink drive legal limits and minimum purchase age laws. A new Strategy should also provide Member States with the freedom to implement national policies that prioritise the health and wellbeing of their citizens, such as minimum unit pricing in Scotland.

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In May 2015, the Organisation for Economic Cooperation and Development (OECD) published its new report 'Tackling Harmful Alcohol Use: Economics and Public Health Policy', which analyses major trends in alcohol consumption in OECD countries. The OECD report shows that an effective package of alcohol policies, including economic measures such as Minimum Unit Pricing and taxes, as well as improved measures to stop drink-driving, can reduce the total costs to society by over 10% and that these savings would be achieved quickly. The measures are also extremely cost-effective, with short periods to regain the investment made by governments. The benefits to economies would be realised almost immediately — with quick results in terms of improving productivity and avoiding alcohol-related illnesses and disabilities. The OECD report shows that alcohol negatively affects OECD countries' socioeconomic performances as productivity losses associated with harmful alcohol use are in the region of 5% of GDP in most countries.

#### Who has called for a new EU Alcohol Strategy?

A number of calls for a new EU Alcohol Strategy have been made since the previous Strategy expired in 2012. These include:

- **MEPs** Members of the European Parliament adopted a Resolution on 29 April 2015 (Resolution 2015/2543(RSP)) calling for an EU Alcohol Strategy
- Member States have made several requests for a new EU Alcohol Strategy:
  - 17 Health Ministers have written to the EU Commissioner for Health and Food Safety outlining the need for a new Strategy
  - All Member States at the informal health council on 22 April <u>called for a new Strategy</u>, and the Latvian Presidency sent a letter to the EC to reinforce that point
  - The need to address alcohol related harm was been repeatedly raised in Council Conclusions, for instance in 2011 and 2012.
  - The Committee on National Alcohol Policy and Action (CNAPA), devised of Member State representatives, has repeatedly called for a new Strategy, and recently presented a <u>scoping paper</u> to the EC outlining their recommendations for the contents of a new Alcohol Strategy
  - The UK House of Lords Committee on EU Affairs conducted an inquiry into EU Alcohol Policy in December 2014. The Committee made a series of recommendations for a new Strategy in their <u>report</u>, which was fairly critical of the EC.
- NGOs and health groups have repeatedly called for a new Strategy, and have presented the EC with <u>recommendations</u> for what should be included

# Who are the NGOs that have resigned from the Forum?

The European Alcohol Policy Alliance (Eurocare)
European Association of the Study of the Liver
Standing Committee of European Doctors
Scottish Health Action on Alcohol Problems (SHAAP)
United European Gastroenterology
European Midwives Association

European Medical Students Association Alcohol Action Ireland

Estonian Temperance Union NorDAN

Association Nationale de Prévention en Alcoologie et Addictologie (ANPAA) European Mutual Aid Network for Alcohol Related Problems

The European Public Health Alliance (EPHA)
European Cancer Leagues

European Cancer Leagues Alcohol Policy Youth Network Institute of Alcohol Studies Royal College of Physicians

Eurocare Italia No Excuse Slovenia

German Centre for Addiction Issues