

**EUROCARE RESPONSE TO
SECOND WHO CONSULTATION ON MONITORING FRAMEWORK AND TARGET FOR THE
PREVENTION AND CONTROL OF NCDs**



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The European Alcohol Policy Alliance (EUROCARE)

EUROCARE (The European Alcohol Policy Alliance) is an alliance of non-governmental and public health organisations with around 50 member organisations across 21 European countries advocating the prevention and reduction of alcohol related harm in Europe.



EUROCARE believes that decrease in per capita alcohol consumption needs to be included among the global priority targets and indicators to tackle NCDs.

Alcohol is one of the 4 risk factors for developing NCDs particularly cancer, cardiovascular disease, pancreatitis and diabetesⁱ. Moreover, alcohol is a key health determinant and is responsible for 7.4% of all ill - health and early death in Europe, which makes it the third leading risk factor after tobacco and high blood pressureⁱⁱ. Amongst the 25-59 year old age group, a core of the working age population, it is a number one risk factor for ill- health and premature death.

By decreasing the level of alcohol consumption, as well as being physically active and having a healthy diet:

- 75% of deaths from cardiovascular disease could be avoided
- 30-40% of cancers could be avoided.

There is strong epidemiological evidence to suggest a reduction in per capita alcohol consumption will reduce levels of health and social harm caused by alcohol in a populationⁱⁱⁱ

Per capita alcohol consumption (APC) is a valid proxy of harmful alcohol consumption

There is a strong evidence and acceptance among the experts of the “total consumption model”: When total alcohol consumption increases in a society, there tends to be an increase in the prevalence of heavy drinkers, defined in terms of a high annual alcohol intake. Because heavy drinkers account for a significant proportion of total alcohol consumption, it would be difficult for the total consumption level to increase without an increase in their drinking^{iv}

It has been reported that there might be difficulties in accurate measure of APC^v nevertheless Eurocare believes that work of the WHO since 1974, on the data collection proved to the contrary. The three Global Status Reports (1999, 2004, and 2010) and Global Information System on Alcohol and Health provide a valuable knowledge base on the status of alcohol consumption.



Eurocare welcomes the opportunity to contribute to the **‘Second WHO consultation on monitoring framework and target for the prevention and control of NCDs’** and trust that WHO will include **PerCapita Alcohol consumption as global priority target and indicators for tackling NCDs.**

The target, as in previous versions of the document, should be **to achieve a 10% relative reduction in persons aged 15+ alcohol per capita consumption (APC) with an indicator: Per capita consumption of litres of pure alcohol among persons aged 15+ years.**

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ⁱ Parry, C. D., Patra, J. and Rehm, J. (2011), Alcohol consumption and non-communicable diseases: epidemiology and policy implications. *Addiction*, 106: 1718–1724

ⁱⁱ Top 9 risk factors for ill-health in the EU, Adapted from WHO’s Global Burden of Disease study (Rehm et al 2004 Alcohol in Europe Anderson P, Baumberg B, Institute of Alcohol Studies, UK June 2006

ⁱⁱⁱ Anderson, P., Chisholm, D., Fuhr, D.C. (2009) Effectiveness and cost-effectiveness of policies and programmes to reduce the harm caused by alcohol. *Lancet*, 373: 2234–46.

^{iv} Babor, T. et.al. (2010) *Alcohol: No ordinary commodity; Research and public policy*; Second edition, Oxford University Press.

^v WHO: Summary of feedback from member states on the first discussion paper on the proposed global monitoring framework and indicators and targets for the prevention and control of Noncommunicable diseases, Version dated 22 March 2012

