

**EUROCARE RESPONSE TO
WHO CONSULTATION ON GLOBAL ACTION PLAN FOR
THE PREVENTION AND CONTROL OF NCDs 2013-2020**



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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. Member organisations are involved in research and advocacy, as well as in the provision of information to the public; education and training of voluntary and professional community care workers; the provision of workplace and school based programmes; counselling services, residential support and alcohol-free clubs for problem drinkers; and research and advocacy institutes.

The mission of Eurocare is to promote policies to prevent and reduce alcohol related harm. The message, in regard to alcohol consumption is “less is better”.

Alcohol – a cause for action

Alcohol is one of the world's leading health risks; use of alcohol is especially harmful for younger age groups. Europe is the heaviest drinking region of the world, consumption levels in some European countries are around 2.5 times higher than the global average¹. Alcohol harm is disproportionately high among young people (115 000 deaths per year) alarmingly 43% among 15-16 year old European students reported heavy binge drinking during the past 30 days and alcohol is the single biggest cause of death among young men of age 16 to 24².

Alcohol is one of the 4 risk factors for developing NCDs such as cancer and cardiovascular disease³. It is important to address alcohol in this context and give it the attention needed. 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 avoided⁴
- 30-40 % of cancers could be avoided⁵

Accurate European wide data on the impact of alcohol at workplace is not sufficiently gathered and not comprehensive in its scope. However, the figures from individual countries suggest that the problem might be bigger than expected.

- UK estimates that approximate loss in productivity amounts to 6.4 bn GBP; this includes alcohol related absence, reduced employment, and premature death
- International Labour Organisation estimated that globally up to 5% of average work force is alcohol dependent and up to 25% drink heavily to the risk of becoming addicted
- A 13% increase in work absence can be expected with an increase in consumption of 1 liter pure alcohol⁶

Due to the size of the problem and the universal impact, alcohol requires a comprehensive, coordinated response from policy and decisions makers.

¹ WHO Europe (2012) *Alcohol in the European Union*

² ESPAD (2011) *ESPAD Report: Substance Use Among Students in 36 European Countries*

³ WHO (2009) *Global Health Risks: Mortality and burden of disease attributable to selected major risks*

⁴ O'Flaherty & Capewell S. *Recent levelling of CHD mortality rates among young adults in Scotland may reflect major social inequalities*. BMJ 2009; 339: b2613

⁵ World Cancer Research Fund (2008) *Recommendations for Cancer Prevention*

⁶ Science Group of the Alcohol and Health Forum (2011) *Alcohol, Work and Productivity: Scientific Opinion of the Science Group of the European Alcohol and Health Forum* Retrieved from:
http://ec.europa.eu/health/alcohol/docs/science_02_en.pdf

Eurocare recommendations for Global Action Plan for the Prevention and Control of NCDs 2013- 2020

Eurocare welcomes the opportunity to contribute to the **Global Action Plan for the Prevention and Control of NCDs 2013- 2020** and trusts that World Health Organization (WHO) and Member States will include measures and allocate appropriate investment in reduction or risk factors for NCDs and creation of health – promoting environments.

Priority should be given to strengthen the implementation of key interventions that address the 4 risk factors for development of NCDs. Taking into account the current global financial crises and the challenge it creates, WHO should encourage and provide leadership for Members States in seeking domestic financing methods to prevent NCDs such as increased taxation on alcohol. Such taxes could contribute to substantial additional funding, while directly improving population health.

Given that countries are at different levels of socioeconomic development, they should maintain the flexibility to choose and prioritise from a spectrum of actions to tackle NCDs.

The 2013 to 2020 Action Plan should exclude alcohol industry from stakeholder engagement and multisectoral approaches, similarly as it exempts the tobacco industry.

Below presented are more detailed Eurocare recommendations regarding alcohol policy.

Per capita alcohol consumption (APC) as 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 intake⁷.

RECOMMENDATIONS

Per Capita Alcohol consumption needs to be included as global priority target and indicator for tackling NCDs

Increases in price and taxation

A number of studies have found that increasing the price of alcohol reduces immediate and chronic harm related to drinking among people of all ages. All consumers, including heavy and problematic

⁷ Babor, T. et.al. (2010) Alcohol: No ordinary commodity; Research and public policy; Second edition, Oxford University Press.

drinkers, respond to changes in alcohol prices⁸. Moreover, increase in prices of alcoholic beverages would reduce consumption by young people, and also have more impact on frequent and heavier drinkers than on lighter drinkers.

RECOMMENDATIONS

The 2013- 2020 Action Plan should reinforce the development and implementation of regulatory frameworks to support the use of pricing and taxes from alcohol to support NCD prevention.

Regulation of marketing

Despite being a key health determinant alcohol is still one of the most heavily marketed products and young people are a very important target group for the alcohol industry⁹. They are exposed to sophisticated marketing aimed at creating positive expectations and beliefs not just about the product itself but how it will make them feel. Alcohol marketing ranges from mass media advertising to sponsorship of events, product placement, internet, merchandise, usage of other products connected with alcohol brands, social networks etc.

RECOMMENDATIONS

Alcohol advertising should only be permitted under precise conditions defined by statutory regulation

When alcohol advertising is permitted, its content should be controlled:

- Messages and images should refer only to information of the products such as degree, origin, composition and means of production
- A health message must be included on each advertisement
- Messages should not mention or link to sexual, social and sports related images

Therefore, we recommend:

- No alcohol advertising on television or in cinemas
- No alcohol advertising on internet except at points of sale
- No alcohol sponsorship of cultural or sport events
- No alcohol advertising should be targeted at young people

Regulations on product placement of alcohol products i.e. films and programs portraying drinking classified as for 18 certificate

A complete removal of intrusive¹⁰ and interstitial¹¹ marketing tools such as: social media, apps on mobile phones

A complete removal of alcohol advertising outdoors and in public premises (i.e. athletes' shirts, bus stops, lorries etc.)

A complete removal of sales promotions such as Happy Hours and Open Bars/Girls Night etc.

⁸ Babor TF et al (2010) *Alcohol: no ordinary commodity. Research and public policy*, 2nd ed. Oxford, Oxford University Press.

⁹ Eurocare defines marketing as a mix of sophisticated, integrated strategies, grouped around four main elements: the product, its price, its place (distribution) and its promotion.

¹⁰ Intrusive here defined as behaviour ad that targets your habits and based on your profile using social net, your own emails, cookies, geolocalisation etc, or brings you to change web page by replacing ads by others.

¹¹ Interstitial here defined as movable ads that appears between two web pages in a plain screen or when you start apps on your smartphone

Consumer protection: provision of comprehensive information

Product labels can serve a number of purposes, providing information about the product to the consumer, enticing the consumer to buy the product and warning consumers of dangers and health risks from the product. Listing the ingredients contained in a particular beverage alerts the consumer to the presence of any potentially harmful or problematic substances. Even more importantly, providing the nutritional information such as calorie content allows consumer to monitor their diets better and makes it easier to keep a healthy lifestyle.

RECOMMENDATIONS

Introduction of health warning labels on containers of alcoholic beverages determined by state/public bodies.

Containers of alcoholic products should be required to provide the following information about the product to consumers:

- their ingredients
- substances with allergenic effect
- relevant nutrition information (energy value kcal)
- alcoholic strength
- include health warnings

Social inclusion and equality in health

Social inclusion is important both as prevention and as rehabilitation. In order to keep people in the workforce and out of treatment, care and social support, programs to socially integrate and rehabilitate people with alcohol problems should be adequately supported. It would benefit the individual, its family and community and the economy as well as reducing inequalities in health. This could be achieved by integration of alcohol harm related dimension in programs aiming at reducing inequalities in health and social exclusion.

RECOMMENDATIONS

Implementation of health objectives in all policies

Fostering of shared understanding of how other sectors impact on health and well being

Strong advocacy and dissemination of information on how tackling NCDs burden will assist other sectors

Establishment of periodic mechanisms to analyse how policies in other sectors impact health

Prevention with special focus on prevention at workplace

Harmful and hazardous alcohol consumption is one of the main causes of premature death and avoidable disease and furthermore has a negative impact on working capacity. Alcohol-related absenteeism or drinking during working hours have a negative impact on work performance, competitiveness and productivity. Often forgotten is the impact of drinkers on the productivity of people other than the drinker. Moreover, about 20 to 25% of all accidents at work involve intoxicated people injuring themselves and other victims, including co-workers¹².

RECOMMENDATIONS

Implementation of alcohol policies within the workplace to focus on health promotion and on different lifestyles rather than on the disease and punitive sanctions

More comprehensive data collection on impact of alcohol related problems on economy and within the workplace

Enforcement and where not existent introduction of zero tolerance policies for BAC levels in industries where alcohol increases the danger of accidents and injuries

Implementation of awareness raising campaigns at work about alcohol related harm and healthy lifestyle

¹² Science Group of the Alcohol and Health Forum (2011) *Alcohol, Work and Productivity: Scientific Opinion of the Science Group of the European Alcohol and Health Forum* Retrieved from: http://ec.europa.eu/health/alcohol/docs/science_02_en.pdf

SUMMARY OF EURO CARE FOR GLOBAL ACTION PLAN FOR THE PREVENTION AND CONTROL OF NCDs 2013- 2020

Eurocare believes that in order to achieve the global reduction target of 25% reduction in premature mortality from non- communicable diseases by 2025 (as adopted by WHO Assembly in May this year) :

- ■ population based interventions which address NCD risk factors need to be strongly emphasizes in the Action Plan for 2013-2020
- ■ WHO should encourage and provide leadership for Members States in seeking domestic financing methods to prevent NCDs such as increased taxation on alcohol
- ■ implementation of NCD ‘Best Buys’ interventions in relation to alcohol should be advanced (tax increases on alcoholic beverages, comprehensive restrictions and bans on alcohol marketing, restrictions on the availability of retailed alcohol)
- ■ Per Capita Alcohol consumption needs to be included as global priority target and indicator for tackling NCDs
- ■ Fundamental conflict of interest should be recognized between advancing public health and private money making objectives of the alcohol and tobacco industry

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