

EUROCARE BUSINESS PLAN



2017-2020



INTRODUCTION

The European Alcohol Policy Alliance (EUROCARE) is an alliance of non-governmental and public health organisations with around 60 member organisations across 24 European countries advocating the prevention and reduction of alcohol related harm in Europe.

Member organisations are involved in advocacy and research, as well as in the provision of information and training on alcohol issues and the service for people whose lives are affected by alcohol problems.

Eurocare's **vision** is a Europe where alcohol related harm is no longer one of the leading risk factors for ill-health and pre-mature death. European decision makers recognise the harm done by alcohol and apply effective and comprehensive policies to tackle it. Eurocare is recognised as the leading European public health organisation in alcohol related dialogue and policy development.

The **mission** of Eurocare is to promote policies to prevent and reduce alcohol related harm, through advocacy work. The message, regarding alcohol consumption, is "less is better". To achieve its mission Eurocare:

-  Advocates for the prevention and reduction for alcohol related harm in Europe.
-  Influences European policy makers by advocating effective evidence based alcohol policy.
-  Monitors policy initiatives and informs its members
-  Creates and nurtures ties between organisations at EU level concerned with alcohol related harm
-  Disseminates information on alcohol related issues
-  Publishes reports and position papers

EUROCARE CORE VALUES

Public health is about creating the conditions for a healthy society as stated in the Universal Declaration of Human Rights¹. Basic medical care and adequate living conditions are important. But, public health is far more and should be the core business of every government.

Good health means that people live longer and enjoy more healthy years of life. A healthy population is a precondition for economic growth and prosperity and will reduce the pressure on health and social care systems.

Equality in health is vital, unfortunately there are still large differences between population groups, regions and countries. Many threats to health cannot be solved by national authorities, coordinated action at EU level is increasingly important.

Participation of civil society is significant in shaping and delivering health outcomes at all levels. Eurocare seeks to mobilise civil society for the promotion of alcohol policies which safeguard individuals, the family and society from the negative consequences of alcohol use.

The public good must take precedence over commercial interest. Eurocare seeks to build a Europe where the collective social and health interests take precedence over commercial interests.

Evidence based policies should be the basis for alcohol policies across Europe and Eurocare advocacy efforts.

¹ Article 25 in Universal Declaration of Human Rights – adopted and proclaimed by General Assembly resolution 217 A (111) of 10 December 1948

ALCOHOL - A CAUSE FOR ACTION

Alcohol is the world's number one risk for ill-health and premature death amongst the 25-59 year old age group, a core of the working age population (World Health Organization Europe, 2012). The harmful use of alcohol has been linked to more than 200 disease and injury conditions, and causes a large economic and social burden in societies. Globally, 5.9% of all deaths are attributable to alcohol. However, given Europe's higher rates of consumption of 10.9 litres of pure alcohol per person (well-above the global average of 6.2) the total proportion of deaths attributable to alcohol in Europe rises to 13.3% (World Health Organization, 2011, 2014).

Alcohol is the third main contributory factor to NCDs (World Health Organization Europe, 2012) which are in the top of global risks next to such threats as fiscal crises (World Economic Forum, 2014). Alcohol is strongly associated with liver diseases, especially liver cirrhosis, and there is a clear causal link between harmful use of alcohol and a number of cancers – 10% of cancers in men and 3% of total cancers in women are directly attributable to alcohol (British Medical Journal, 2011). Underage drinking and heavy episodic drinking of alcohol is of particular concern in Europe because it is related to the health and welfare of the population. There is a likely causal relationship between alcohol use in adolescence and damaging structural changes to the brain (SHAAP, 2012).

It is estimated that 23 million people in the EU are dependent on alcohol and 9 million children live in families where at least one parent is addicted to alcohol (Eurostat, 2015).

Alcohol is a severely obstructing factor towards fighting social exclusion and has negative impact on well-being and living conditions of European citizens. People with lower socioeconomic status are more vulnerable to negative consequences of alcohol consumption, and approximately 25% of the difference in life expectancy between Western and Eastern European men aged 20-64 has been attributed to alcohol (World Health Organization, 2010). Harmful alcohol use affects work performance, drains healthcare systems and is a contributory factor in crime, accidents and injuries.

The harms from alcohol are therefore multidimensional, and require a range of policies to contribute towards having a healthy work force and reduce costs for health care services, in line with the strategic aims of the Europe 2020 Strategy (http://ec.europa.eu/europe2020/index_en.htm).

EUROCARE OPERATIONAL OBJECTIVES 2017 - 2020

- ■ Create a broad and competent policy input to the alcohol policy agenda at European level. Eurocare will work with the European Institutions, national European countries and relevant international organisations (WHO, OECD) to recognise and tackle harm caused by alcohol use.
- ■ Eurocare being recognised as a key stakeholder and the leading network of NGOs in the field of alcohol at European level.
- ■ Strengthening the Eurocare structure by improving its governance, increase membership, member commitments and having active members across Europe.
- ■ Eurocare as an organisation should be flexible and respond to ad hoc requests for support from government and external sources quickly. Such support includes written responses to public consultations, policy briefings for parliamentarians and other stakeholders. Given the changeable nature of the alcohol policy field, it is essential that Eurocare maintains this ability to be flexible and adaptable to new challenges.
- ■ Eurocare staff is to reserve time free from fixed project commitments, to use researching developments in alcohol policy and/or building relationships with key stakeholders.
- ■ Strengthening the financial sustainability of Eurocare.

GOALS AND POTENTIAL ACTION AREAS 2017 – 2020

 **Advocating for effective alcohol policy**

 **Increasing support for alcohol policy regulations and raising public and professional awareness about alcohol consumption and harm**

Europe is drinking twice as much as the world average. Patterns of drinking and the harm done are at dangerous levels in many European countries. As such alcohol is a severely obstructing factor towards fighting social exclusion and has negative impact on well-being and living conditions of European citizens. People with lower socioeconomic status are more vulnerable to negative consequences of alcohol consumption, and approximately 25% of the difference in life expectancy between Western and Eastern European men aged 20-64 has been attributed to alcohol (WHO, 2010).

Action: Eurocare will continue to work on prevention and reduction of alcohol related harm.

Opportunity:

- Produce Alcohol Policy Briefs every second year – 2018, 2020
- Promote the European Award for Reducing Alcohol Harm (EARAH) 2018 and 2020
- Co-host the European Alcohol Policy Conference 2018, 2020
- Coordinate Alcohol Awareness Week every third week in November
- Support European FASD Alliance
- Support European Mutual help Network for Alcohol related problems (EMNA)
- Support Alcohol Policy Youth Network (APYN)
- Support Road Safety Initiatives
- Explore opportunities on the link between alcohol and cancer
- Explore opportunities on the link between alcohol and obesity
- Explore opportunities on the link between alcohol and dementia
- Explore opportunities on the link between alcohol and smoking
- Explore opportunities on the link between alcohol and NCD's and Chronic disease agenda



Stricter regulation of alcohol marketing in the EU/EEA area

Alcohol marketing increases the likelihood that young people will start to drink alcohol, and that among those who have started to drink, marketing increases the drinking levels in terms of both amount and frequency.

Action: Eurocare will continue to promote the needs for better regulation, enforcement and monitoring of alcohol marketing that not only deals with the content but which also substantially reduces the exposure of alcohol marketing to young people. Eurocare recommends regulation to ensure that there is no alcohol advertising on television or in cinemas, no alcohol advertising on internet except at points of sale, no product placement and no alcohol sponsorship of cultural or sport events and no alcohol advertising should be targeted at young people.

Opportunity:

- Refit of the Audiovisual media service directive in 2017
- Eurocare lead partner in EU funded project on football, youth and alcohol – FYFA 2017 - 2019



Consumer information

Alcohol labels are not regulated to provide information on ingredient listings nor the harm the product can cause the consumer. 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 nutritional information such as calorie content allows consumer to monitor their diets better and makes it easier to keep a healthy lifestyle. Information about the risks related with alcohol consumption (damages to health, risk of dependence, dangers associated with drinking during pregnancy, when driving etc) should also be provided by the form of better labelling regime.

Action: Eurocare will continue to advocate that containers of alcoholic beverages should be required to provide the following information: their ingredients, substances with allergenic affect, relevant nutrition information (energy value kcal), alcoholic strength and include health warnings.

Opportunity:

- The European Commission to present the long awaited report on labeling of alcoholic beverages.
- Follow up voluntary schemes by the alcohol producers and retailers



Price and taxation

The affordability of alcoholic beverages has increased in Europe over the last 12 years. The real value of excise duty rates for most alcoholic beverages has gone down since 1996 and consequently alcohol has been much more affordable. There has been a decline in the EU minimum excise duty rate in real terms for alcoholic beverages since 1992 as they have not been adjusted for inflation.

Minimum pricing is a 'floor price' beneath which alcohol cannot be sold and is set based on the amount of pure alcohol in a product measured in units or grams so the more grams of pure alcohol in a bottle/can, the higher the price. The relationship between alcohol price, consumption and harm is the foundation on which the policy of minimum pricing is built.

Action: Eurocare will promote minimum alcohol tax rates that should be at least proportional to the content of all beverages that contain alcohol for all alcoholic beverages, and that a minimum tax rates should be increased in line with inflation.

Opportunity:

- Follow and initiate ongoing discussions in the European Institutions
- Support Scotland and Ireland in the ongoing work to introduce minimum unit pricing
- Investigate tax evasion of alcohol industry

Brussels, June 2017