

EUROCARE AGM MEETING : LONDON 20 – 21 OCTOBER 2004
ANPAA France – Country Report
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LOI EVIN

◆ **Commercial communication**

Law : When allowed, the message must be informative and limit itself to the following indications :
degree of alcohol, origin, naming, composition of the product and fashion of elaboration.

Amendment :

- It authorizes references and representations of natural and human factors as well as sensory characteristics of products opening to positive representations: feats, sport, youth, femininity, virility etc. ...
- It is going to benefit at first the more powerful spirits (are concerned “label of origin” and the “geographic indications”).

Chronology:

In April, 2004: the Senate adopts within the framework of the development of the rural territories an amendment which establishes new rules of wine communication.

In July, 2004:

➤ ANPAA met the Prime Minister who says that the government agrees not to modify the Loi Evin and agrees to work on the definition of moderation in order to inform better the population. The Prime Minister himself reminded the commitment of his government in a public health policy and underlined that alcohol is a risk factor common to the three priority programmes engaged at the request of the President: cancer, road safety and handicap.

➤ White book handed to the Prime Minister:

It asserts that the regulation of the crisis of vine goes through a recognition of **wine as a food** and by a softening of the law Evin to profit to wine.

➤ Governmental plan 2004 – 2008 against illicit drugs, tobacco and alcohol with as objective:

- the reduction of 20 % of the alcohol consumption average per capita in the next five years as well as the will « to make comprehensive the notion of moderate consumption » but without making however reference to the thresholds of risks recommended by WHO
- the will to develop and to respect the law Evin to serve better the objective of reduction of the consumption and not to diminish the implications in order to support the wine as demanded by the industry and some members of the parliament.

In August, 2004: the **law of public health** aims to reduce the risk and the harmful of alcohol consumption and prevention of dependence.

In September, 2004:

➤ The committee of the economic affairs of the parliament proposes a new amendment in favor of wine communication

➤ ANPAA demands the Prime Minister to reject the text.

In October, 2004:

- ANPAA sends a file to the members of the parliament
- Vote of the amendment by the Parliament
- ANPAA appeals to the President and reminds him its commitment (priorities: cancer, road safety and handicap)

In January, 2005: final vote.

ANPAA position :

- 1) *to maintain the Loi Evin such as it is and restore the ban on posting overruled in 1994,*
- 2) *to not get to the wine a particular status and consider it in the same way as the other alcoholic drinks,*
- 3) *to put the thresholds of risk of WHO to define the notion of moderation on the packaging of all the alcoholic drinks and mention the alcoholic equivalences in the different glasses*
- 4) *to make coherent the measures of prevention and the plan of public health*
- 5) *to increase and put back taxes collected on the alcoholic drinks to the organizations in charge of health, as it is foreseen for tobacco, to allocate to the programs of prevention, care and research.*

◆ **Advertisement and TWF: European Court of justice**

Court decision of European Justice in the cases CCE / FRANCE, Baccardi France / TV France 1 SA (TF1) - July, 2004.

The French ban on the indirect broadcast advertisement in favour of the alcoholic drinks is compatible with the community law.

The Loi Evin forbids the broadcast direct or indirect advertisement of the alcoholic drinks. A code distinguishes between the multinational sports events which images are broadcast in several countries and the bi-national events which aim specifically French public.

The code foresees that the French diffusion hinder advertisement for alcoholic drinks to appear at TV. The European Court states that such a ban constitutes a restriction on free provision of services, but is justified by the aim of health protection.

FOETAL ALCOHOL SYNDROME (FAS)

In the North of France further mothers complain having given birth to children affected by malformations, a preliminary inquiry was hold by the public prosecutor's department of Lille based on lack of information on the bottles about danger of toxicity for the foetus by alcohol drinking when pregnancy.

Their lawyer bases the action on the scientific studies proving that the alcohol consumption is toxic for the foetus and attacks the industry for deceit on the goods (code of the consumption) and, aggravating cause, for carelessness of the human health (code of health service).

The industry says that it is the role of the government to inform people.

Ministre of Health undertakes to improve the information of the pregnant women and to reduce the effects of alcohol.

The foreseen measures are:

- to set up a vigilance of the foetal alcohol syndrome
- to develop a campaign of prevention of the excessive consumption
- to adopt a legislative measure which will allow to put on the packaging a sanitary warning in direction of the pregnant women to inform them about risks and to recommend abstinence

According to expertise of the National Institute of Medical Research (INSERM) on 2001 “alcohol, the effects on health”, the FAS has an incidence estimated from 0.5 to 3 for 1000 births with higher rates in certain populations.

***ANPAA** agreed but asked for a complete information on all the packaging of alcoholic drinks: « the alcohol abuse is dangerous for health – abstinence for pregnant women – alcoholic equivalence of the various glasses - thresholds of consumption recommended by WHO.*

October, 2004):

- the Senate votes in favor of a sanitary message to advice abstinence for pregnant women.
- European Parliament, october 26
 - Catherine STIHLER, UK and ex-chair of the Health Intergroup had a question on FAS, its dangers and made reference to the various studies led to this subject in UK, USA, South Africa and Scandinavia where the estimated incidence is around 1 for 300 births. She asked for that this question need to be seriously handled at the European level.
 - Commissioner David BYRNE answered (in “verbatim report of proceedings”26.10.2004) that:
“...The Commission is at present developing a working paper on a coordinated approach in Europe to tackle alcohol-related harm. FAS is one of the possible topics to be addressed in the paper. The Commission is carefully studying the types of information that should be provided in addressing this problem. Possible guidelines on these could be included in the Commission’s working paper on alcohol, which is planned for next year. The Commission also intends to prepare a report on the application of Council recommendations on alcohol and young people from 2001, which, among other things, will address the need for further action. In addition, the possibility of having a conference on alcohol next year, together with the WHO European office, is being explored”....
He also mentioned “draft proposals concerning the legal and practical feasibility of having health warnings on the containers of alcoholic beverages, as well as at points of sale. These would include information on, for instance, pregnancy”.
He finally said “...if the public health authorities do not move in and occupy the field, it might be occupied by industry. That is not entirely satisfactory, because the information being made available by the industry might not be consistent with best public health practice”...

DRINK DRIVING :

2003

- **Law : Penalties :**
 - Fines : BAC [0.5 – 0.8g/l] : removal 6 points – 3 years cancelling/interruption of licence – 750 €
 - Offences : BAC > 0.8g/l : removal 6 points – 2 years of prison / 3 years c/i of licence – 4 500 €
 - If recurrence : removal 6 points – 4 years of prison / 3 years of licence – 9 000 €
- **Probationary driving licence : 3 years (young drivers) :**
 - the school certificate
 - a licence to give evidence : 6 points then 12 after 3 years
 - removal of points

Example : BAC > 0.5g/l : removal 6 pts + licence cancelled 3 years + fine [135€ - 750 €]

46 % of young people killed are <18-24>

40 % of young people killed are <25-44>

- **Testing :** 2002 : 8 millions of tests
By 2005 the probability for a driver to be controlled BAC should be once a year versus once a year every 15 years before.
- **Self controls :** Chemical/electronic testing
- **Insurances :** a driver controlled with a positive BAC level and who is responsible for accident will be indemnified neither for his injuries no for the damages of his car. His insurance premium can be heavily raised and in some cases its cancels contract.
- **Results :**
 - 2002 : 2700 people killed = 38 % (7200) / 24000 injuries
 - 2003 : 1050 people killed = 20 % (5730) / 9500 injuries
 - 45 % of the drivers did not drink and drive in 1999
 - 60 % of the drivers did not drink and drive in 2004
- **Explanation :** hardening of the punishments - commitment of authorities - automation of the control.
- **Observations :** behaviour change is linked to anticipation of the penalties - the target group is a group usually with a low Bac level - young people drive more and more without licence.

2004

The Bac level goes recently from 0.5 g/l to 0.2 g/l but only for professionals drivers of public transports. The government advanced the more important particular risks and the need for bus drivers to have a " better mental, physical and intellectual shape ".

Dramatic accident : a young driver without and drunk (bac over 1 g) lying under the steering-wheel whereas the passenger also drunk (bac over 2 g) holding the steering-wheel... Result : a policeman killed and heavy injuries for the three young people.

The alcohol remains with speed one of the first causes of accidents. It is estimated at 1 644 the number of life who would have been able to be saved if all the drivers had respected the legal rate.

ANPAA position: actions of prevention in road safety require to be registered in an overall policy of prevention of the alcohol risk.