PRESS RELEASE

Brussels, Belgium, 13th December 2012

Eurocare warmly welcomes and strongly supports Member States request for a New EU Alcohol Strategy

In the Council of the European Union (Employment, Social Policy, Health and Consumer Affairs) Conclusions Member States have asked European Commission for a new EU Alcohol Strategy.

A number of countries voiced their strong support and a need for a new EU Alcohol Strategy. It was reiterated that alcohol is one of the main key risk factors for chronic diseases and poor health and in order to tackle Europe’s health problems it has to be sufficiently addressed.

New Commissioner for Health and Consumers Tonio Borg noted the call for a new alcohol strategy however said that the European Commission intends to finalise the current EU alcohol strategy before launching another. The current EU Alcohol Strategy was designed to cover period from 2006 to 2012.

Member States have already stressed the importance of addressing alcohol related harm at the EU level in the past (Swedish presidency conclusions on alcohol and health in 2009 and Polish presidency conclusions in 2011). Nevertheless, at the latest European Alcohol and Health Forum meeting in November European Commission announced no plans for development of the new EU Alcohol Strategy and said that as it sees it the current strategy should continue.

'We are strongly concerned and share European government’s opinion that European Commission should step up on its work to address alcohol related harm. Due to the size of the problem and universal impact, tackling alcohol related harm is too big for governments to solve alone. We need coordinated comprehensive response at the European level’

Europe is the heaviest alcohol drinking region in the world, consumption levels in some countries are around 2.5 times higher than the global average. Alcohol is one the 4 key risk factors for development of chronic diseases such as cancer and cardiovascular disease. In addition, alcohol related harms is costing us around €155.8 billion a year.

In November last year (2011) around 90 public health organisations across Europe have called upon the European Commission to produce new EU Alcohol Strategy. Moreover, even some representatives of the alcohol industry have been asking for renewal of the EU Alcohol Strategy.

It remains to be seen whether the European Commission will answer to these concerns.
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EUROCARE (The European Alcohol Policy Alliance) is an alliance of non-governmental and public health organisations with around 50 member organisations across 23 European countries advocating the prevention and reduction of alcohol related harm in Europe.
www.eurocare.org

FACTS AND FIGURES ON ALCOHOL

- Europe has the highest drinking levels in the world, the highest alcohol per capita consumption and the highest alcohol-related harm problems.
- Chronic diseases, to which alcohol is the 3rd main contributory factor, are in the top of global risks next to such threats like fiscal crises and are expected to cost global economy over 30 trillion USD over the next two decades.
- Across the EU some €125bn a year (equivalent to 1.3% GDP). This is figure for 2004 likely to be higher by now.
- Alcohol is a major contributory factor in accidents; 1 in 3 of all road traffic deaths are caused by alcohol.
- 1 in 4 of male deaths between 15-29 years are due to alcohol.
- Alcohol is a risk factor in some 60 diseases such as cancer, liver cirrhosis etc.

2. WHO (2009) Global Health Risks: Mortality and burden of disease attributable to selected major risks
3. Interventions for alcohol dependence in Europe: A missed opportunity to improve public health (2012)
4. European Alcohol Policy Alliance (2011) NGOs call on European policy-makers to launch a new EU Alcohol Strategy by 2013
5. spiritsEUROPE (2012) evaluation of the EU Strategy to support Member States in reducing alcohol related harm 2006-2012 & Contribution for its renewal