



**Alcohol
Prevention
Day**

Istituto Superiore di Sanità

7 aprile 2011

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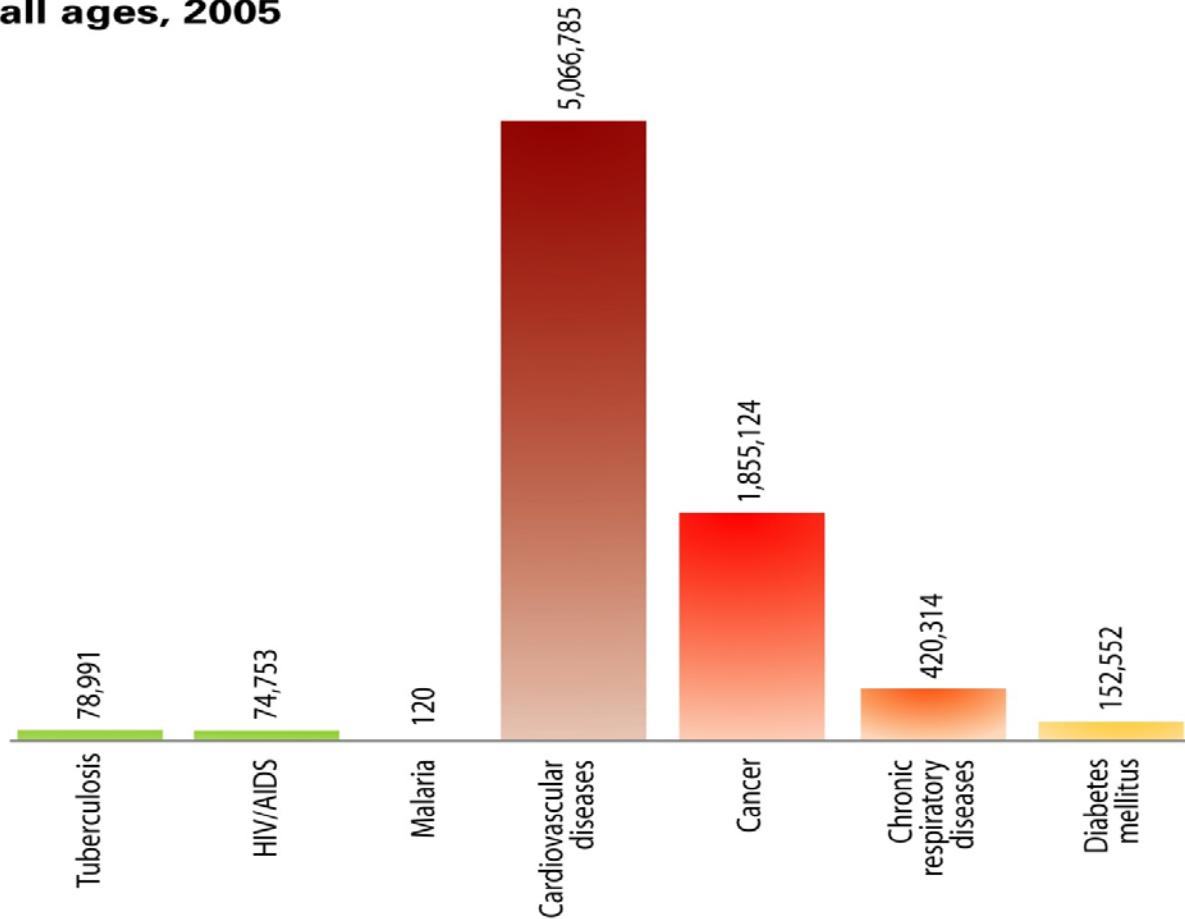
WHO Regional Office for Europe

Alcohol related harm

- Central nervous system affection and changed behaviour
 - Injuries
 - Violence, suicide, homicide, drink-driving fatalities, criminal behaviour
 - Risky sexual behaviour
 - STI's, HIV
- Terratogen
 - Low birth weight, cognitive deficiencies, foetal alcohol disorders
- Dependence-producing drug
- Immunosuppressant
 - Post operation infections, TB
- Carcinogen
 - Oral cavity and pharynx, oesophagus, stomach, colon, rectum, breast.
- Cardiovascular diseases
 - Bipolar relationship

Main killers in the WHO European Region

Projected deaths by cause in WHO European Region, all ages, 2005



Source: *Preventing chronic diseases. A vital investment*, WHO 2005

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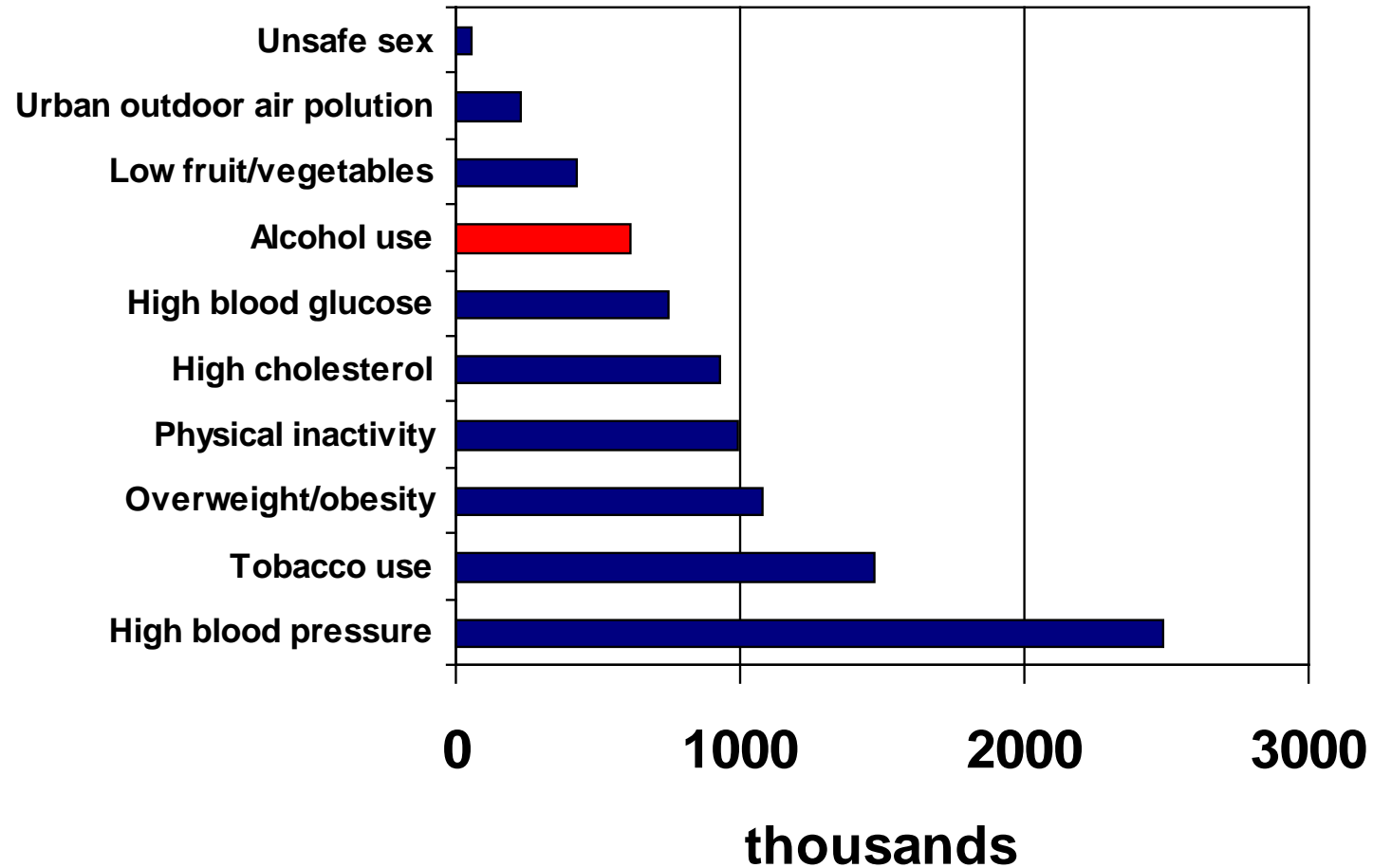
(http://www.who.int/chp/chronic_disease_report/en/).

GLOBAL HEALTH RISKS

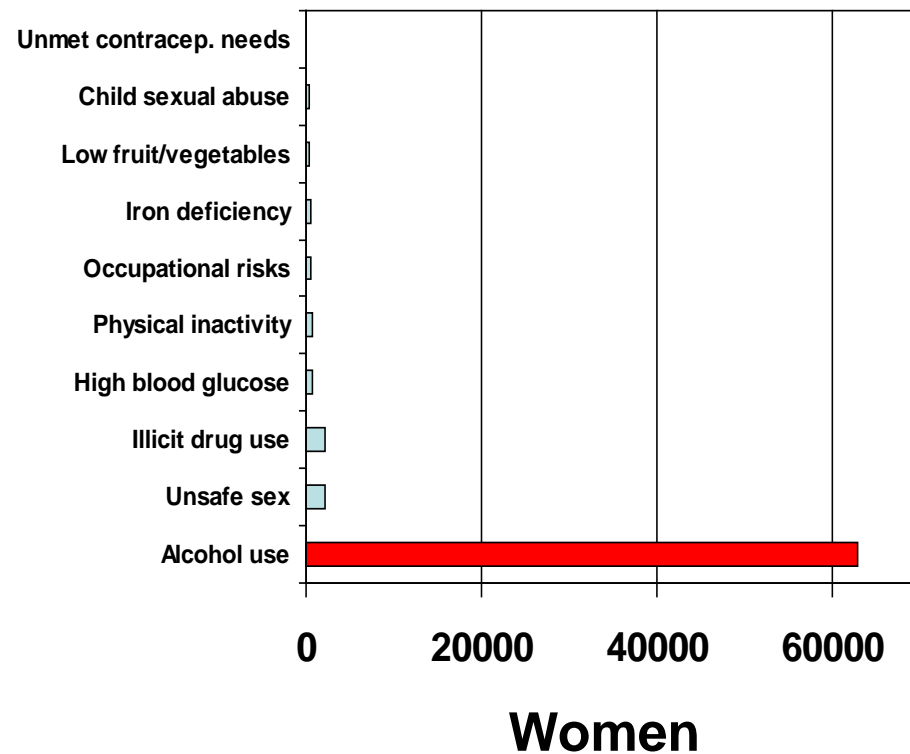
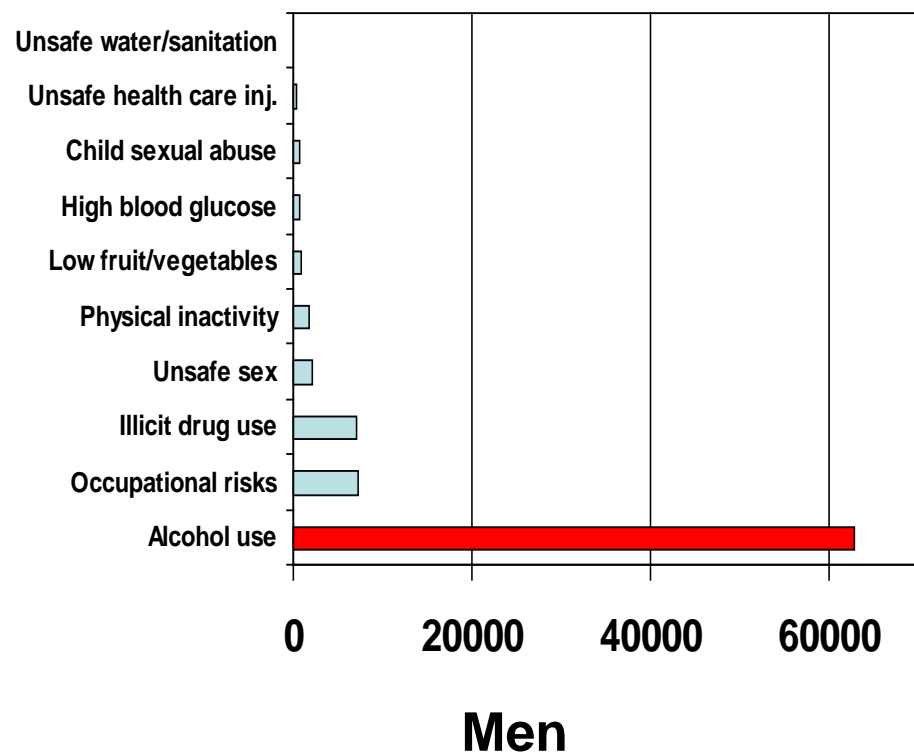
Mortality and burden of disease attributable to selected major risks



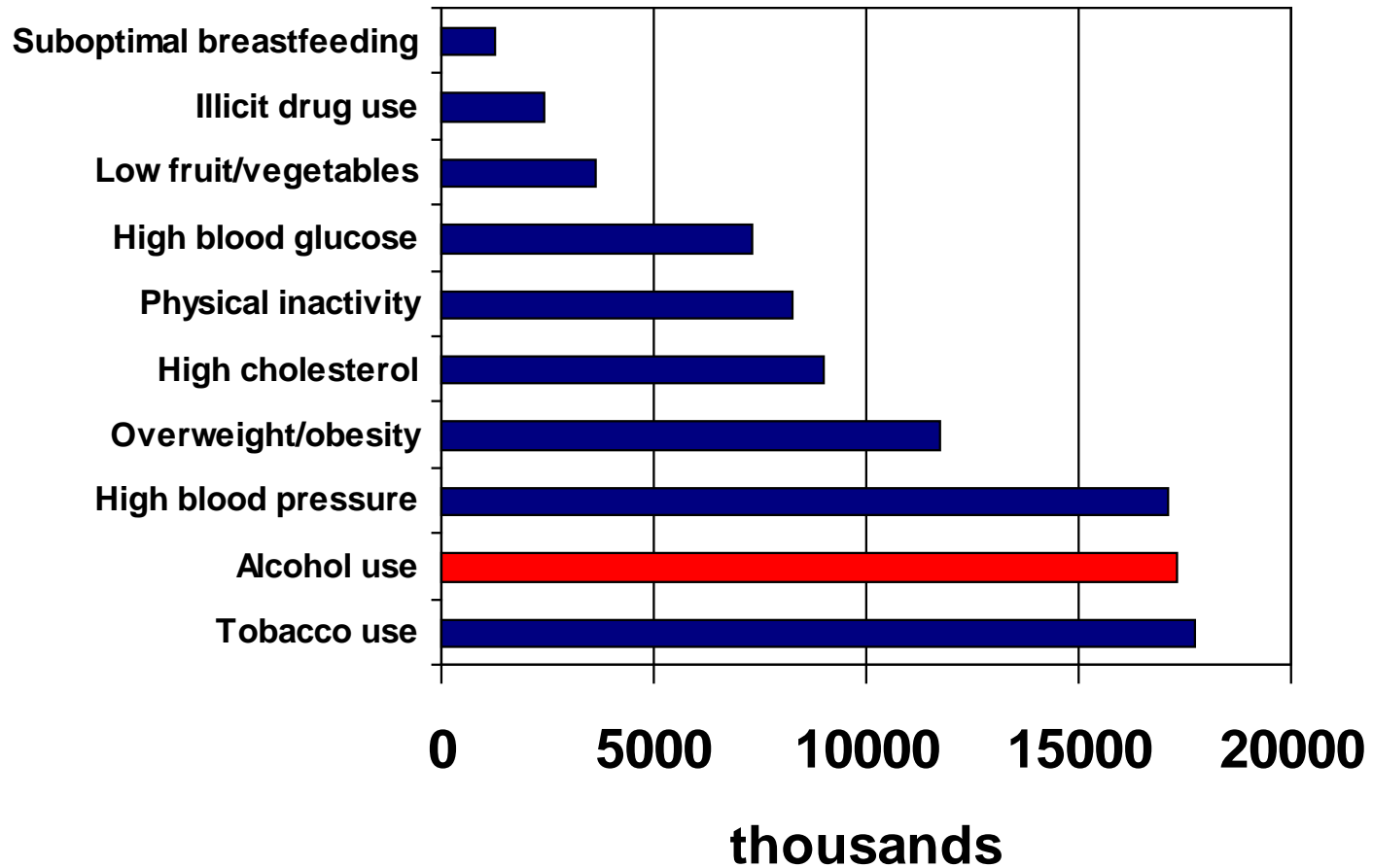
Deaths in EURO due to selected risk factors in 2004



Deaths age 15-29 in EURO due to selected risk factors in 2004



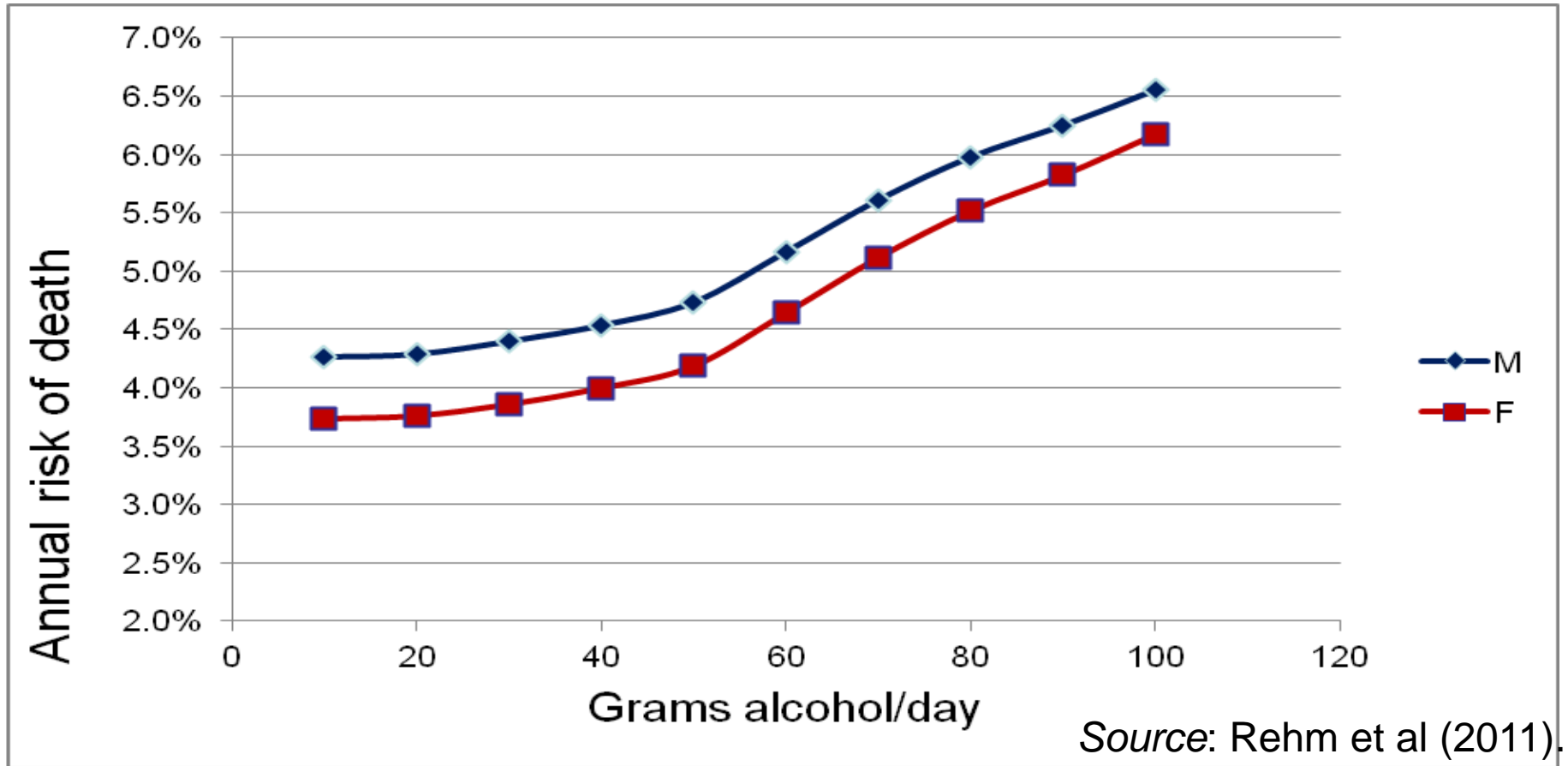
Disability adjusted life years lost due to risk factors in EURO in 2004 (total)



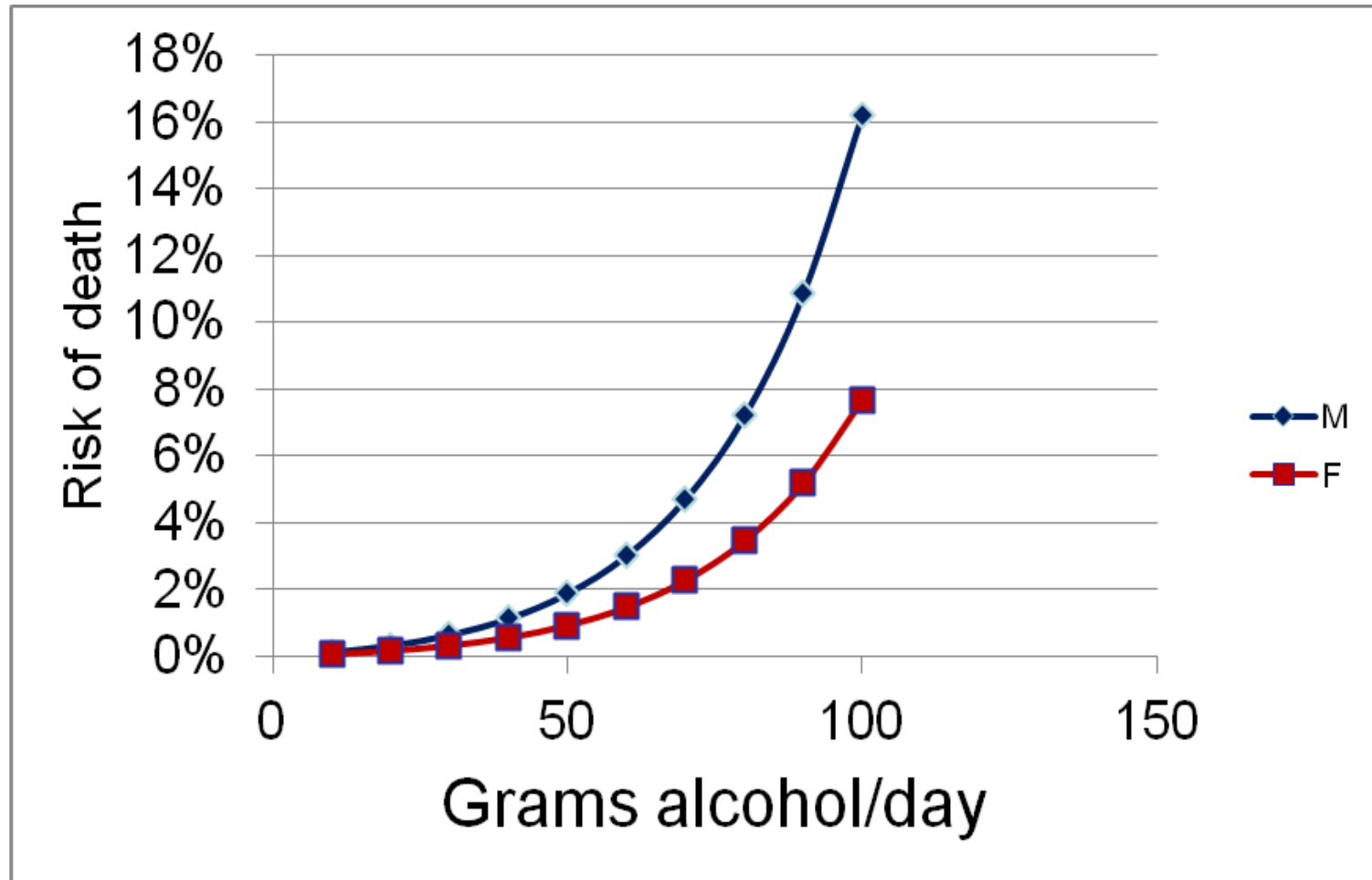
Alcohol consumption

- Two main dimensions affect health:
 - Average of volume
 - Patterns of drinking especially binge drinking
- Estimated 618.000 deaths attributable to alcohol a year in Europe (2004).
- Estimated 17 mio years lost due to disability and death (DALY) a year in Europe (2004).
- In Europe, 6.5% of deaths and 11.4% of DALY's were attributed to alcohol use.
- Globally 3.8% of deaths and 4.6% of DALY's were attributed to alcohol use.

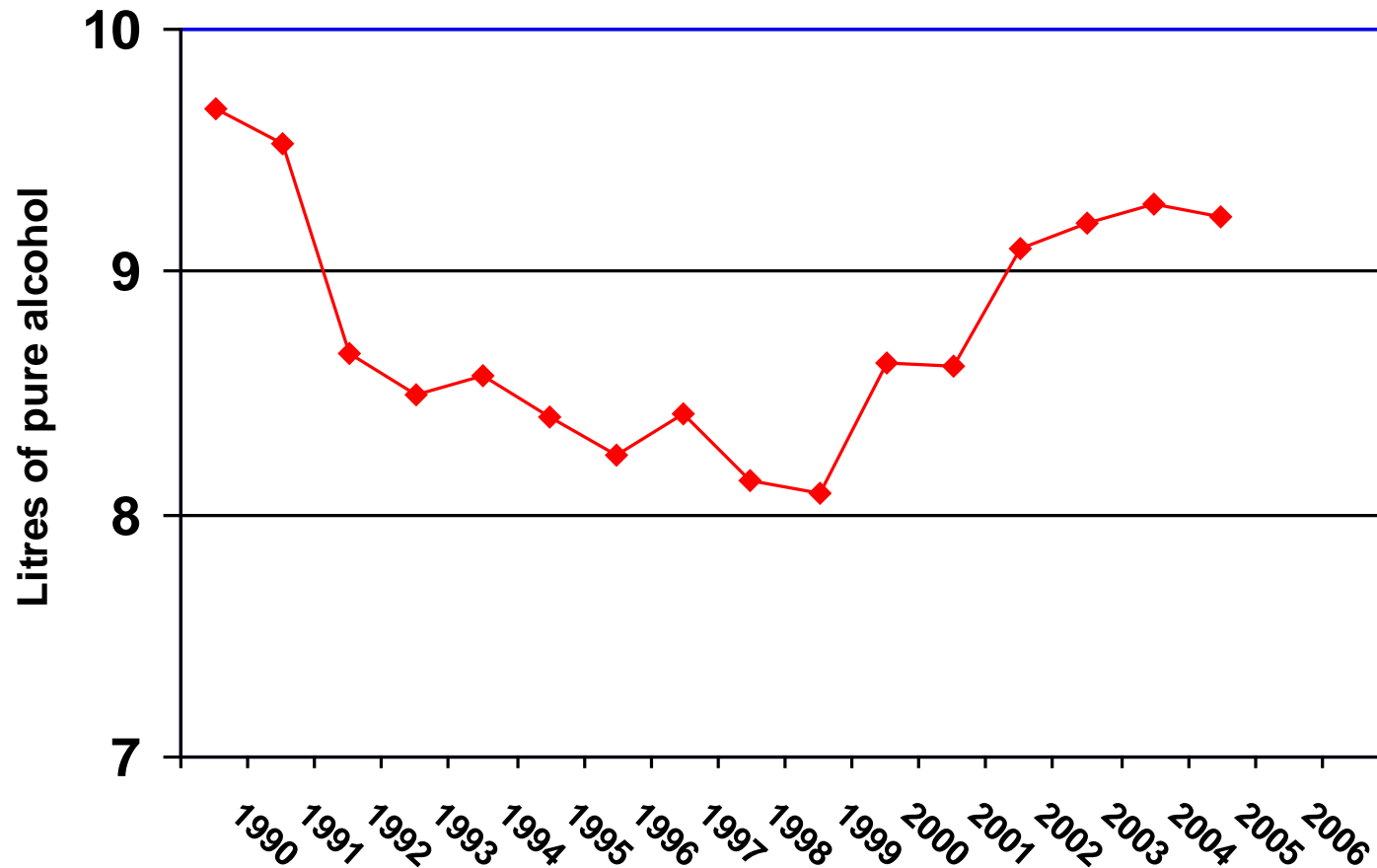
Absolute annual risk of death from alcohol-related diseases



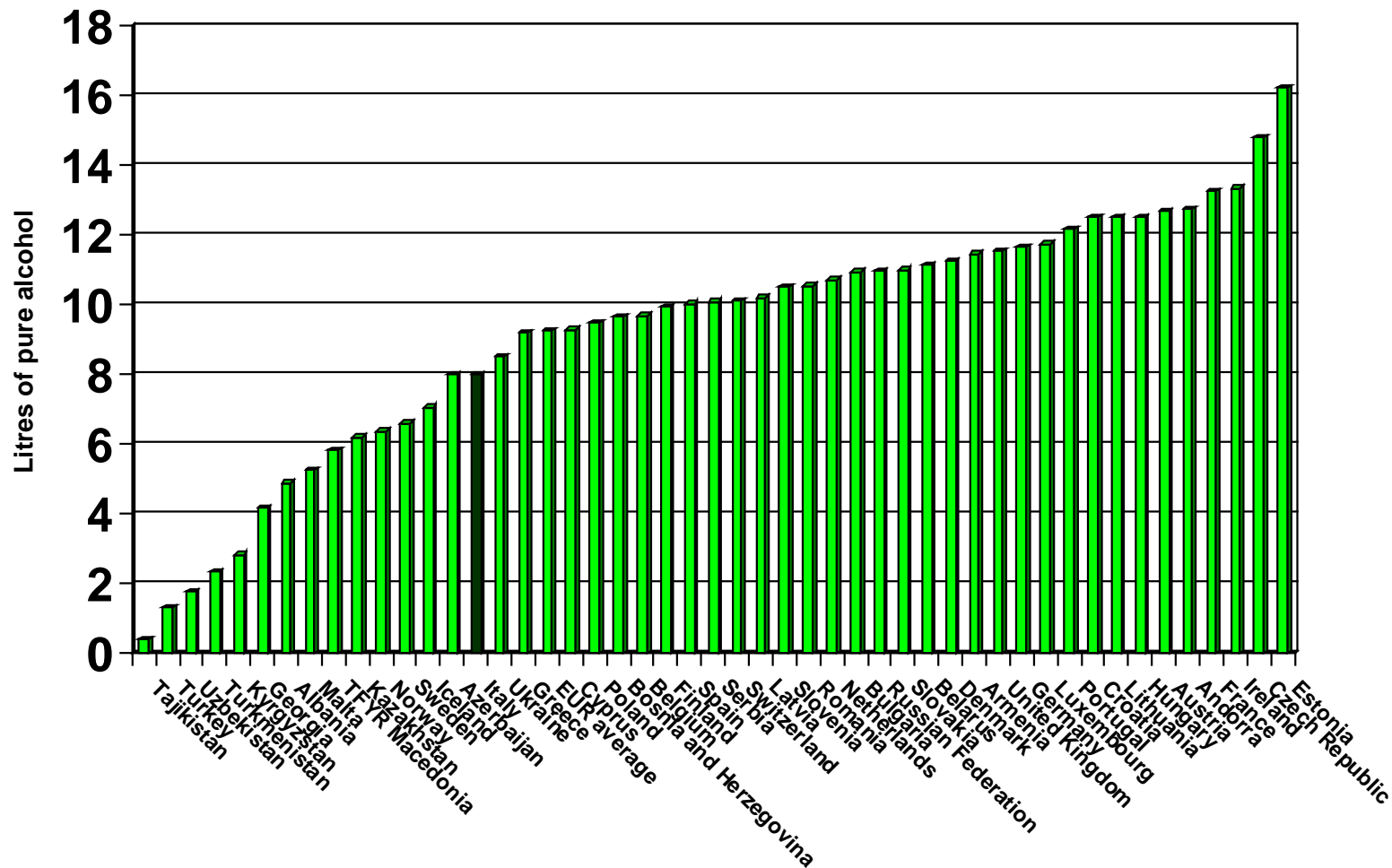
Life-time risk of death from alcohol-related injuries



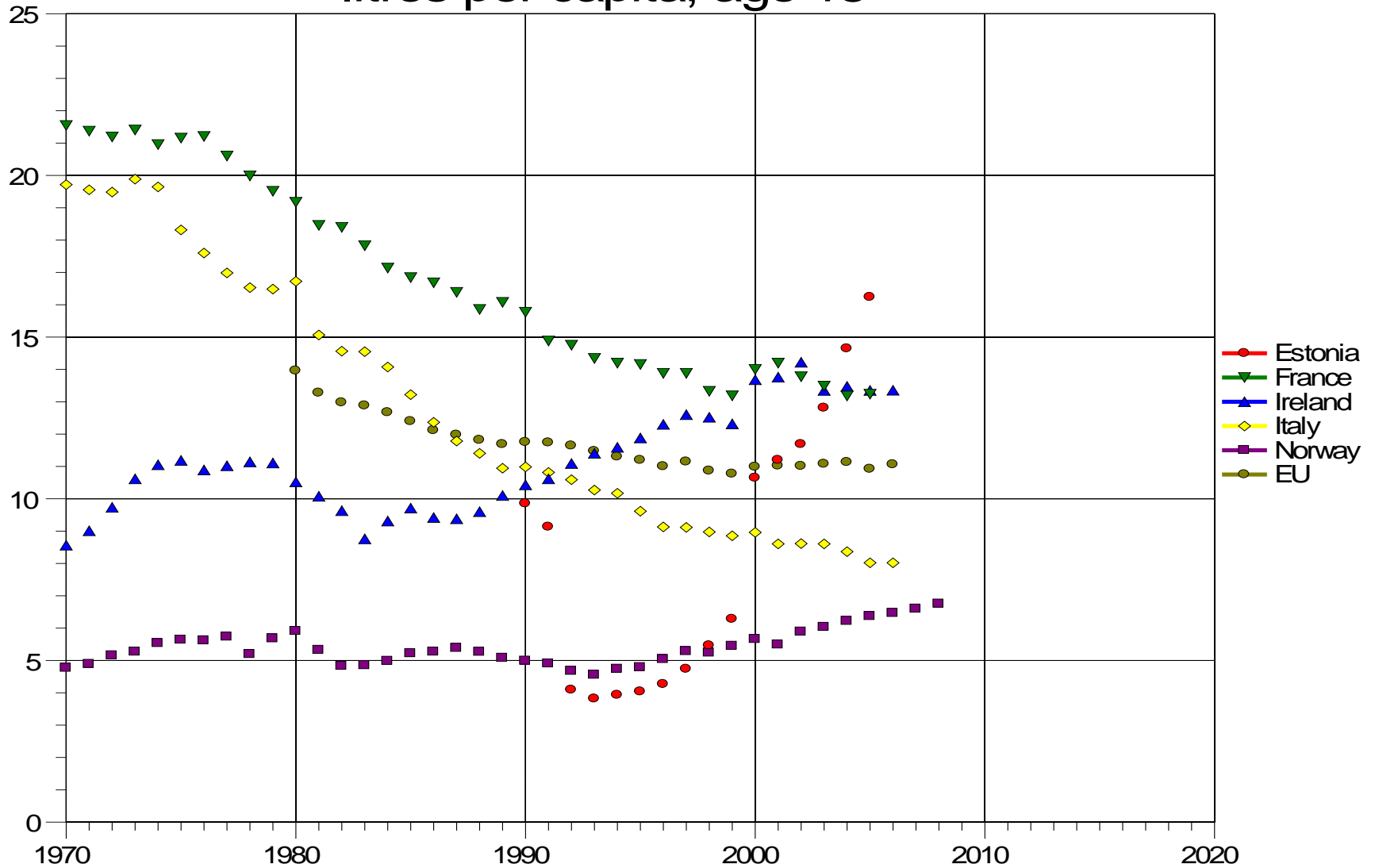
Average alcohol consumption in Europe - twice the world average



Total adult alcohol consumption in 48 WHO European Member States, 2005



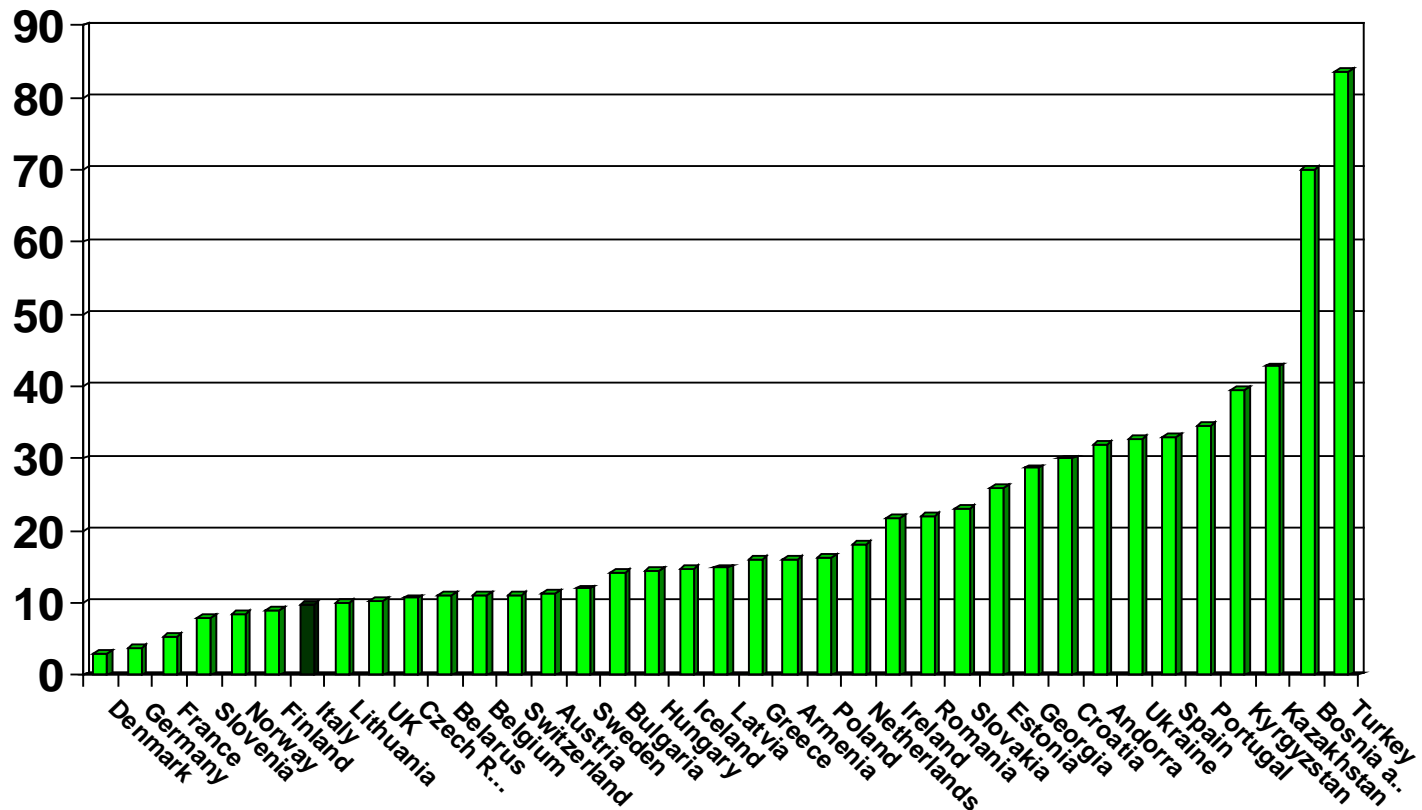
Pure alcohol consumption, litres per capita, age 15+



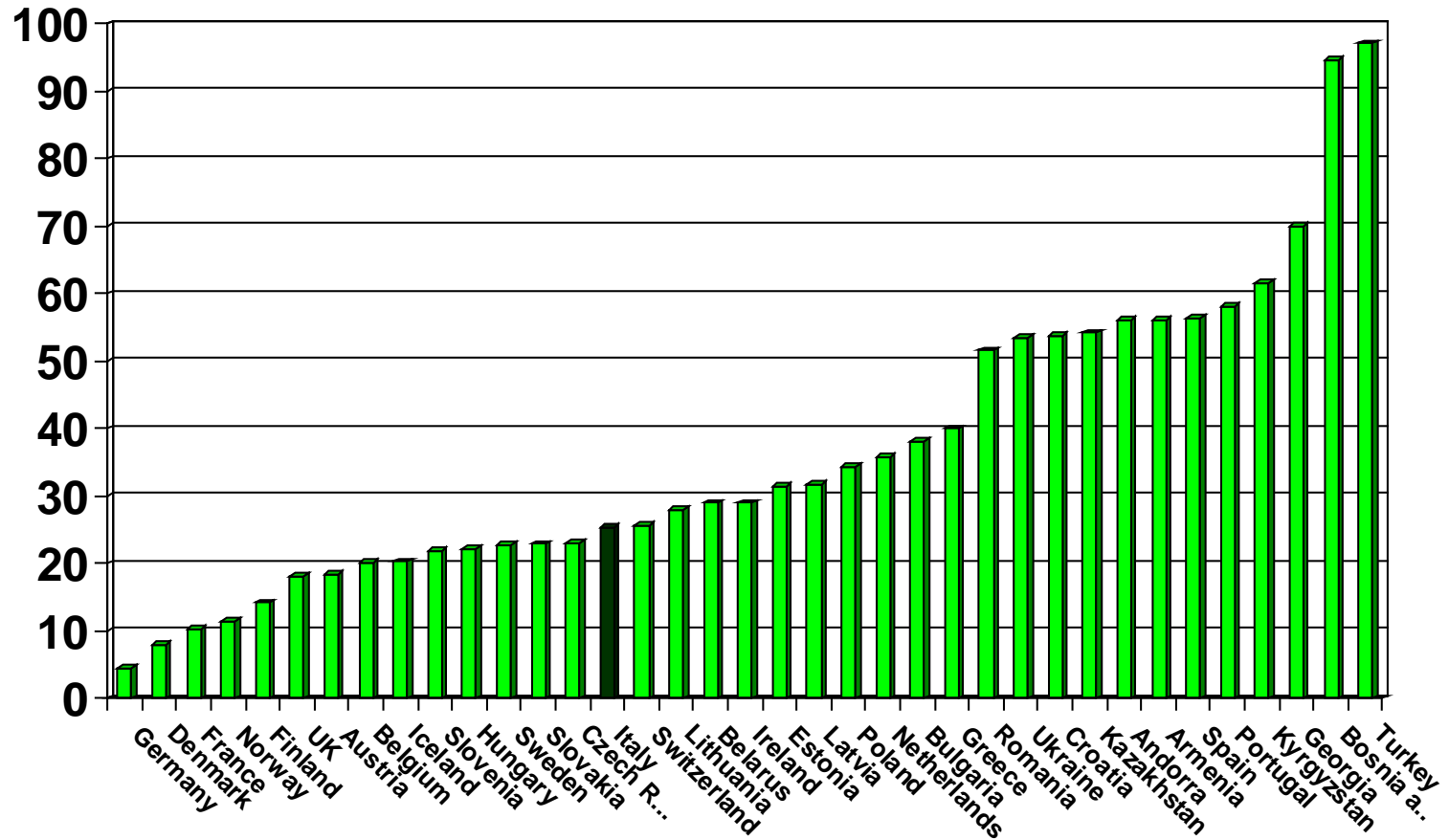
Prevalence of abstinence from drinking in the world 2004

- Globally 45% of the world population never used alcoholic beverages
 - 35% of men
 - 55% of women
- Estimates for past 12 month abstinence rates in WHO regions
 - AFRO – 70.8%
 - EMRO – 96.5%
 - EURO – 31.2%
 - Americas – 41.7%
 - South-East Asia – 89.3%
 - Western Pacific – 43.7%

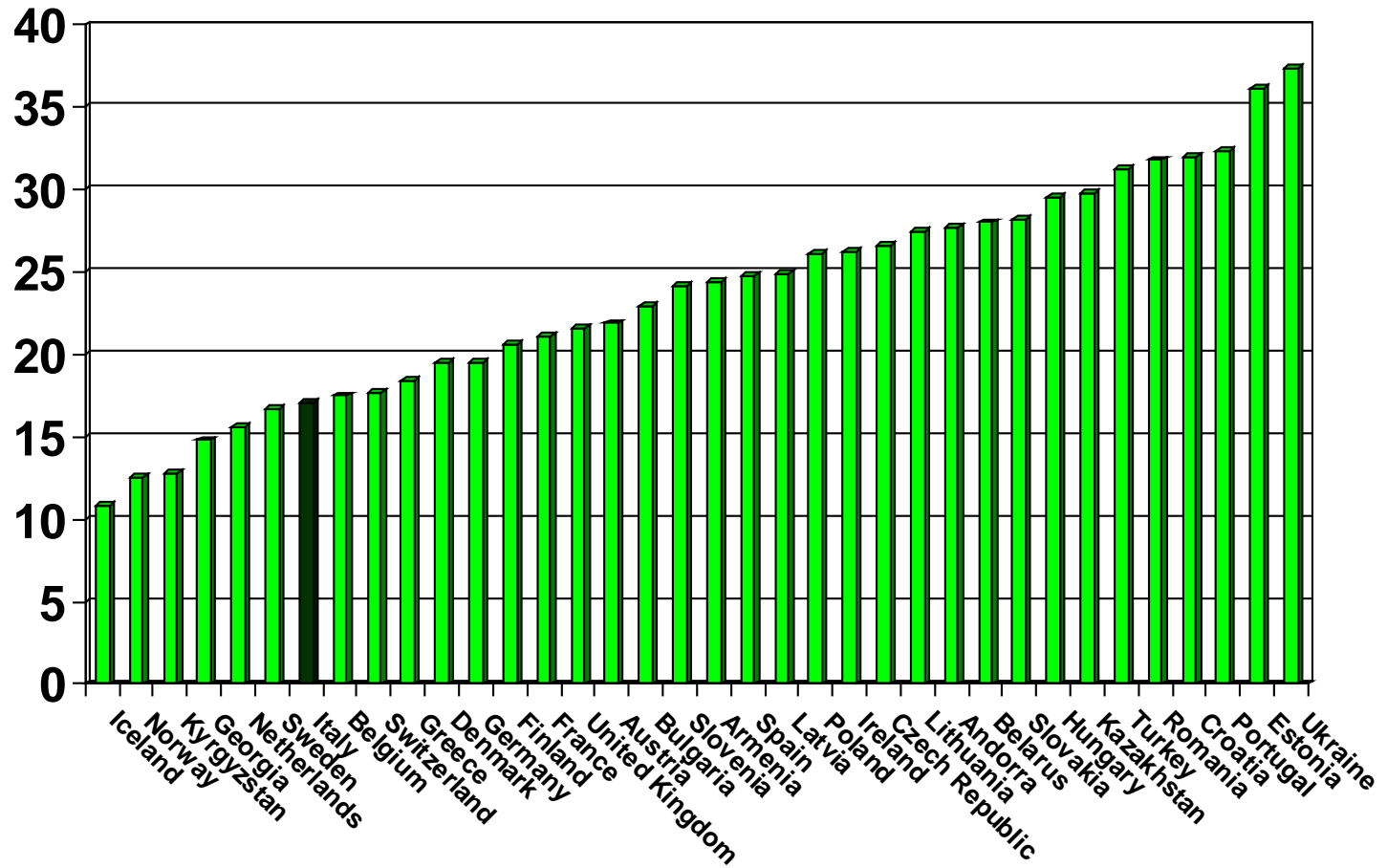
Abstainers (15+) during the last 12 months (2005 – men)



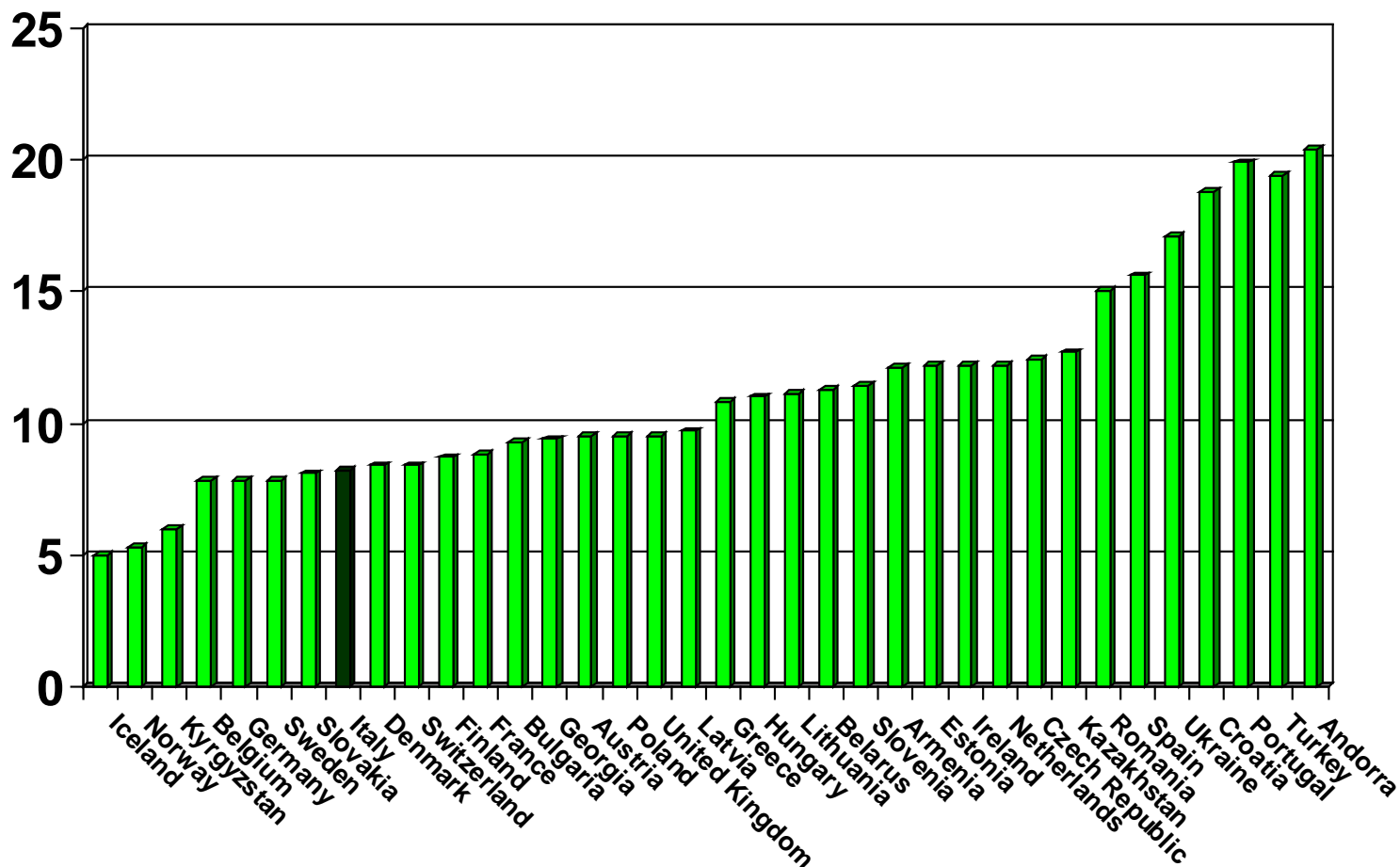
Abstainers (15+) during the last 12 months (2005 - women)



Alcohol consumption (recorded + unrecorded) (men 15+, average 2002-2005), drinkers only

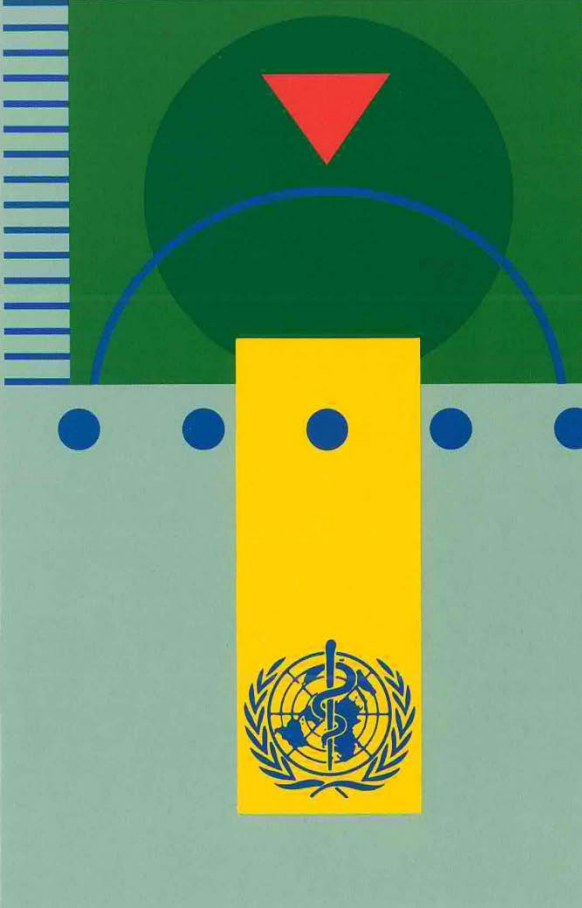


Alcohol consumption (recorded + unrecorded) (women 15+, average 2002-2005), drinkers only




The European Alcohol Action plan 1992 - 1999

EUROPEAN ALCOHOL ACTION PLAN



*Alcohol – less
is better*



 EUROPE WHO Regional Publications, European Series, No.70

European Charter on Alcohol
ADOPTED AT THE
 EUROPEAN CONFERENCE ON HEALTH, SOCIETY AND ALCOHOL
 PARIS, 12-14 DECEMBER 1995

Charte européenne sur la consommation d'alcool
ADOPTÉE LORS DE LA
 CONFÉRENCE EUROPÉENNE « SANTÉ, SOCIÉTÉ ET ALCOOL »
 PARIS, 12-14 DÉCEMBRE 1995

Europäische Charta Alkohol
VERABSCHIEDET VON DER
 EUROPÄISCHEN KONFERENZ GESUNDHEIT, GESELLSCHAFT UND ALKOHOL
 PARIS, 12.-14. DEZEMBER 1995

Европейская Хартия по алкоголю
принятая на
 Европейской конференции "Здоровье, общество и алкоголь"
 Париж, 12-14 декабря 1995 г.

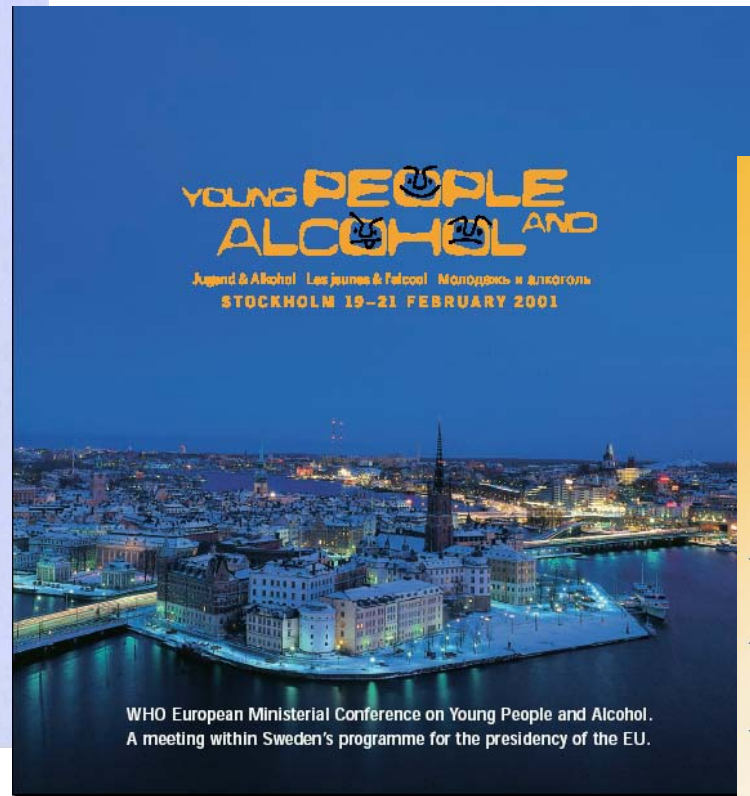

 EUROPE

The European Alcohol Action plan 2000 - 2005



EUROPEAN
ALCOHOL
ACTION
PLAN

2000 - 2005



YOUNG PEOPLE AND ALCOHOL
Jugend & Alcohol Les jeunes & l'alcool Молодежь и алкоголь
STOCKHOLM 19-21 FEBRUARY 2001

WHO European Ministerial Conference on Young People and Alcohol.
A meeting within Sweden's programme for the presidency of the EU.



Declaration THE WHO EUROPEAN MINISTERIAL CONFERENCE ON
STOCKHOLM 19 - 21 FEBRUARY 2001 YOUNG PEOPLE AND ALCOHOL

Déclaration LA CONFÉRENCE MINISTÉRIELLE EUROPÉENNE DE L'OMS SUR
STOCKHOLM 19 - 21 FÉVRIER 2001 LES JEUNES L'ALCOOL

Erklärung DIE EUROPÄISCHE MINISTERIELLE KONFERENZ DER WHO ÜBER
STOCKHOLM, 19. - 21. FEBRUAR 2001 JUGEND UND ALKOHOL

Декларация КОНФЕРЕНЦИЯ ВОЗ НА УРОВНЕ МИНИСТРОВ
СТОКГОЛЬМ, 19 - 21 ФЕВРАЛЯ 2001 г. МОЛОДЕЖЬ И АЛКОГОЛЬ И

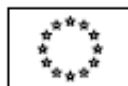


Framework
for alcohol policy
in the WHO
European Region



Основы политики в
отношении алкоголя
в Европейском
регионе ВОЗ





COMMISSION OF THE EUROPEAN COMMUNITIES

Brussels, 24.10.2006
COM(2006) 625 final

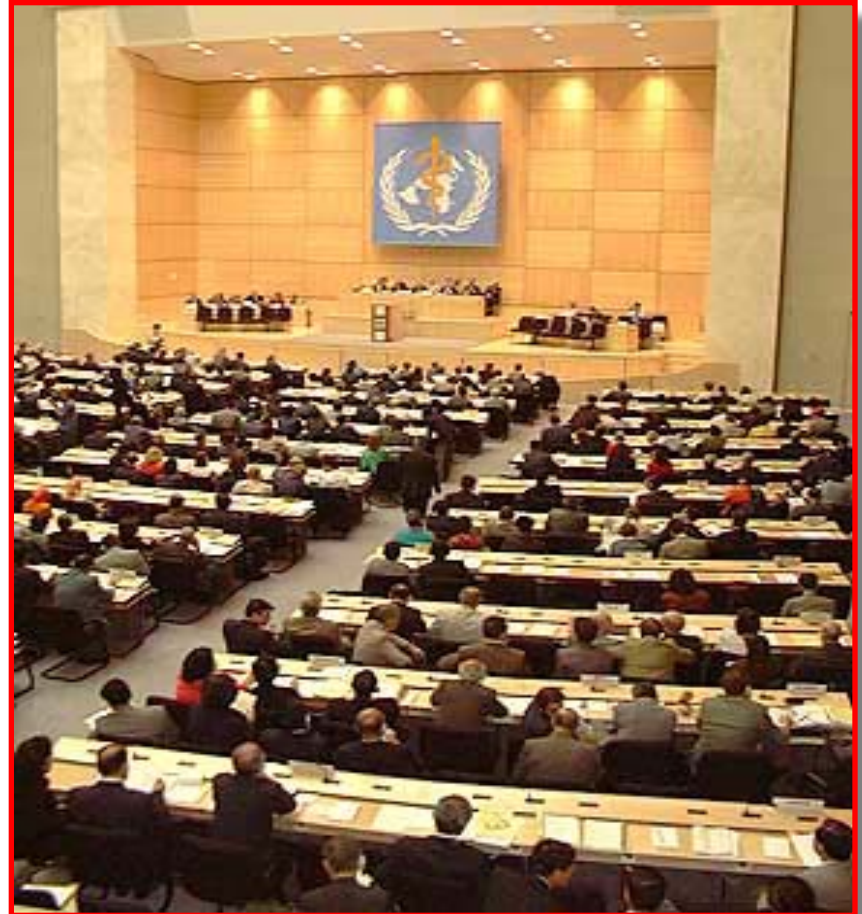
**COMMUNICATION FROM THE COMMISSION TO THE COUNCIL, THE
EUROPEAN PARLIAMENT, THE EUROPEAN ECONOMIC AND SOCIAL
COMMITTEE AND THE COMMITTEE OF THE REGIONS**

An EU strategy to support Member States in reducing alcohol related harm

{SEC(2006) 1358}
{SEC(2006) 1360}
{SEC(2006) 1411}

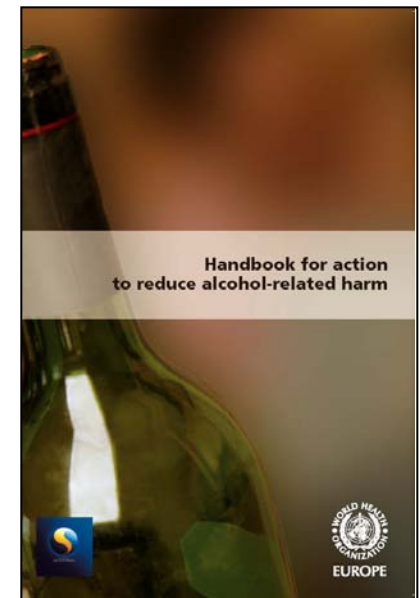
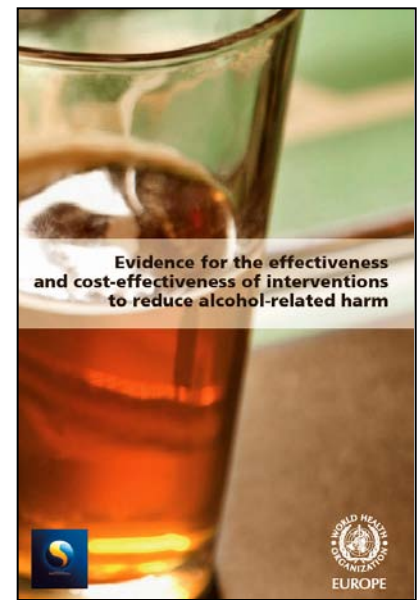
63rd World Health Assembly (17-21 May, 2010)

Endorsed the Global strategy to reduce the harmful use of alcohol in the WHA resolution 63.13



Alcohol new WHO publications

- Review of evidence for alcohol policies - 2009
- Practical handbook for action to reduce alcohol-related harm -2009
- Summary of best-practices for estimating attributable and avoidable costs of alcohol and recommendations for future practice – June 2010
- Comparison of the European Commission's communication on alcohol, and the WHO Framework for Alcohol Policy – June 2010-.





EUROPE

European Status Report on Alcohol and Health 2010



Alcohol policy – what works?

Degree of evidence	Evidence of action that reduces alcohol-related harm	Evidence of action that does not reduce alcohol-related harm
Convincing	<ul style="list-style-type: none"> •Alcohol taxes •Government monopolies for retail sale •Restrictions on outlet density •Restrictions on days and hours of sale •Minimum purchase age •Lower legal BAC levels for driving •Random breath-testing •Brief advice programmes •Treatment for alcohol use disorders 	
Probable	<ul style="list-style-type: none"> •A minimum price per gram of alcohol •Restrictions on the volume of commercial communications •Enforcement of restrictions of sales to intoxicated and under-age people 	<ul style="list-style-type: none"> •Lower taxes to manage cross-border trade •Training of alcohol servers •Designated driver campaigns •Consumer labelling and warning messages •Public education campaigns
Limited-suggestive	<ul style="list-style-type: none"> •Suspension of driving licences •Alcohol locks •Workplace programmes •Community-based programmes 	<ul style="list-style-type: none"> •Campaigns funded by the alcohol industry

Alcohol policy

- WHO promotes policies/actions on:
 - Price
 - Place of sale (availability)
 - Promotions.
- The industry promotes policies/actions on
 - Education
 - Information
 - Deregulation.

Making progress on the policy front

- 60% of European MS have a written national alcohol policy
 - 6.7% do not have a national policy but have a subnational policy
 - 28.9% have neither a written national nor subnational policy
 - 4.4% have an alcohol policy in draft form
- 27 countries with national alcohol policies:
 - two-thirds have revised their policies since 2005
 - 90% of these were specified as being multisectoral
 - 81% of these policies were coordinated by the health sector.

The way forward...

- The WHO Regional Director has planned that Alcohol Policy will be on the agenda for the Regional Committee 2011.
- New European Alcohol Action Plan 2012 - 2020.

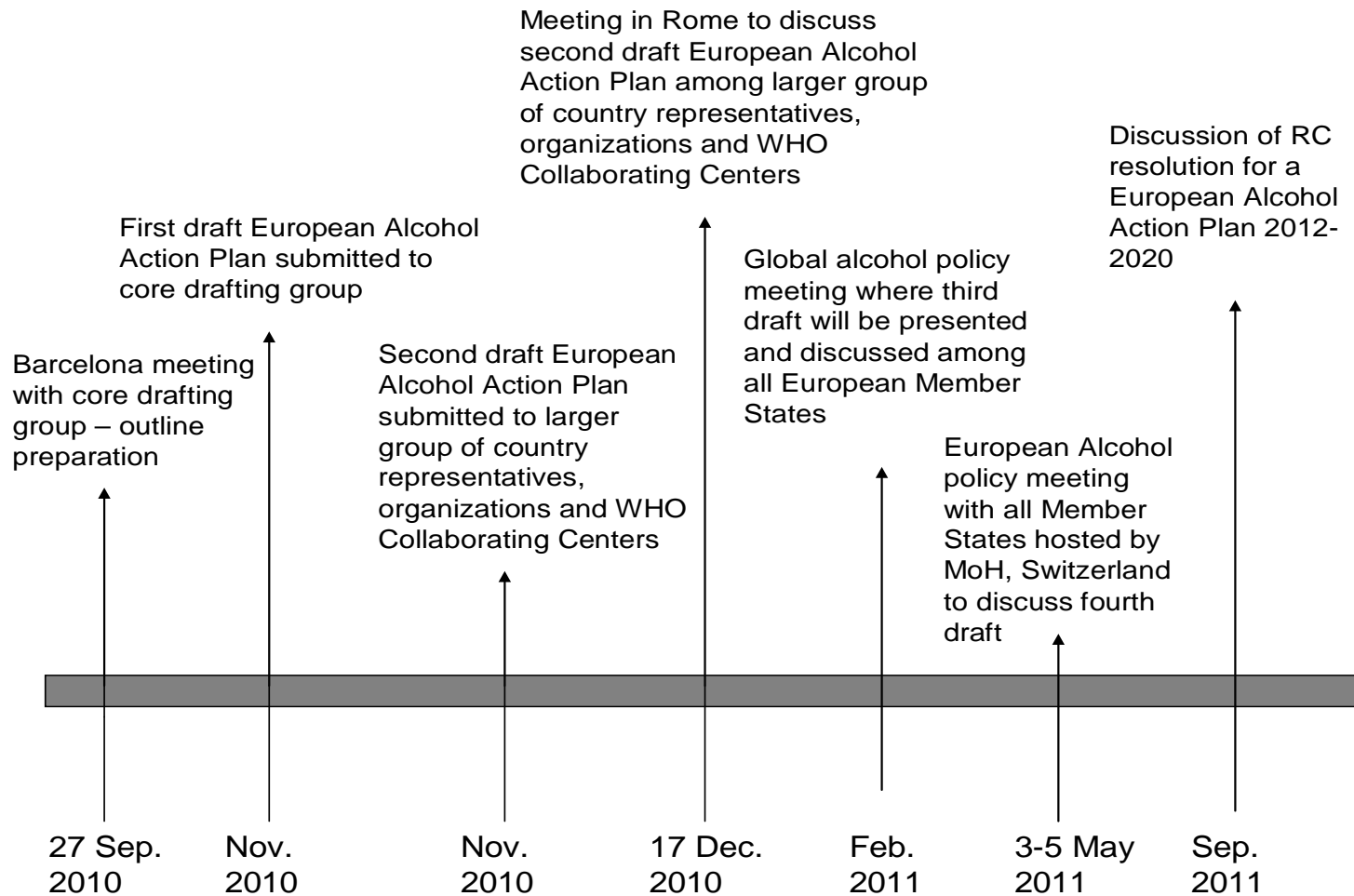
EAAP 2012-2020 – 10 action areas

- **Leadership, awareness and commitment** as sustainable action requires strong leadership and a solid base of awareness and political will through intersectoral actions.
- **Health services' response** as health services are central to tackling harm at the individual level among those with alcohol-use disorders and other health conditions caused by harmful use of alcohol.
- **Community action** as communities can be supported and empowered by governments and other stakeholders to use their local knowledge and expertise in adopting effective approaches to prevent and reduce the harmful use of alcohol.
- **Drink-driving policies and countermeasures** as alcohol impaired driving is extremely dangerous to the driver as well as to passengers and to innocent people in the traffic.
- **Availability of alcohol** as public health policies that seek to regulate the commercial or public availability of alcohol are proven to be very effective in reducing the general level of harmful use and drinking among minors.

EAAP 2012-2020

- **Marketing of alcoholic beverages** in order to protect children, young people and others for advanced advertising and promotion techniques.
- **Pricing policies** as most consumers, heavy drinkers and young people are sensitive to changes in the price of alcohol products.
- **Reducing the negative consequences of drinking and alcohol intoxication** and by that to minimize violence, intoxication and harm to intoxicated people.
- **Reducing the public health impact of illicit alcohol and informally produced alcohol as consumption of illicitly or informally produced alcohol** could have additional negative health consequences due to a higher ethanol content and potential contamination with toxic substances.
- **Monitoring and surveillance** as relevant data create the basis for the success and appropriate delivery alcohol responses.

Timeline



Thank you

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WWW.EURO.WHO.INT/ALCOHOL