



EUROPEAN COMMISSION
HEALTH & CONSUMER PROTECTION DIRECTORATE-GENERAL
Directorate C - Public Health and Risk Assessment
C4 - Health determinants

**Draft Minutes of the Meeting of the
WORKING GROUP ON ALCOHOL AND HEALTH
9th and 10th June 2004, Luxembourg**

*Meeting with Representatives of
Member States, EEA Countries, Accession Countries*

Jean Monnet Building, Kirchberg

9th and 10th June 2004

1 Introduction

Welcome and introduction by Chairman, Matti Rajala (Head of Unit, DG-SANCO/C4). He thanked participants for attending, and apologized for the lack of interpreters, asking all participants to speak in English if possible. Mr Rajala welcomed national experts and other participants, including a representative from WHO, consultant Peter Anderson and representatives from Commissions services, to the meeting.

2 Adoption of the Agenda

Matti Rajala, Head of Unit C4 Health Determinants in DG Health and Consumer Protection (SANCO),

The agenda was adopted with some changes proposed by Commission.

3 Introduction by Commission Services

Matti Rajala opened the meeting by noting that interesting discussions lay ahead, not least because political developments now had put public health in general and alcohol policy in

particular high on the Community agenda. *Matti Rajala* paid tribute to Sweden and the Irish presidency for playing an important role in the process leading to the 2 June 2004 adoption of the new Council Conclusions on alcohol and young people.

Matti Rajala explained that the Working Group meetings constitute informal consultations with experts nominated by Member States/EEA countries.

It was explained that the Programme of Community action in the field of public health (1786/2002/EC) has its own management structure, and that experts with viewpoints as to that programme should contact their country's member of the Programme Committee. *Matti Rajala* informed that the next meeting of the Programme Committee will take place on 8 and 9 July 2004. Commission offered to provide updated information on the Programme at future meetings of the Working Group.

4 Information from Taxation and Custom Union DG

Matti Rajala extended his gratitude to Mr. Donato Raponi, Head of Unit in Taxation and Custom Union DG, for coming all the way from Brussels to participate in the meeting.

Donato Raponi provided the following information on Taxation and Custom Union DG's work concerning alcohol excise duties:

A report on the issue had now been adopted by Commission. The report contains no proposals as it had been impossible, just like two years ago, to reach agreement. Now that the report had been adopted, discussions on future action could start. Such discussions would include, among other things, meetings with the Dutch presidency, with the Economic and Social Committee and with stakeholders.

Depending on the result of the debate on the report, Commission will decide how to proceed. To increase the excise duties on beers and spirits only might be a possibility, but commissioner Bolkestein was not in favour of this kind of a solution as he wanted a possible increase to include all products, including wine. *Raponi* was not expecting any progress in this field, due to the fact that a unanimous decision needs to be achieved, something which, in *Raponi's* opinion, would be virtually impossible in the EU 25.

Experts noted that Article 152 of the Treaty obliges the Community to ensure a high level of health protection in its work to establish and ensure the functioning of the internal market. As alcohol is no ordinary commodity; meaning that it causes health, social and economic harm, a totally free internal market will not increase welfare. Experts said they were sad to see that the report on excise duties did not acknowledge alcohol as a no ordinary commodity.

Experts noted a need to talk about alcohol as a substance, rather than about the different kinds of beverages. Furthermore, there is a need to make all kinds of harms visible – not only alcoholism and alcohol abuse per se, but also the alcohol-related economic harms.

On the other hand, experts said that not only the total consumption, but also the drinking patterns, is the key to the level of harm in a country. Often, more harmful drinking patterns involve

alcopops. Therefore, although it was not suggested to leave wine out of the discussion, measures that only target spirits and beer should not be excluded from the discussion.

Experts furthermore noted that the political economic area was always first priority in the Community, and that the balance between this priority and social and health issues still is bad. There is a need to address this, experts said, and there is a need to look at some of the economic measures and to be more creative.

Raponi informed that the report has a chapter on categorisation. The development of alcopops, where products seemingly are the same although they have different bases (beer/spirits), has brought on the question of looking into the possibility of categorizing alcoholic beverages along other lines than production methods, for instance sugar content or acidity. Taxation and Custom Union DG will look closer into these kinds of possibilities.

5 Information from Education and Culture DG

Matti Rajala welcomed Mr. Emmanuel Joly from Education and Culture DG. *Joly* informed about the aims and contents of the existing Television without Frontiers Directive. *Joly* informed that a public consultation on the review of the Directive had taken place last year. Two series of public hearings were organised and interested parties were invited to submit their written contributions. The Commission received more than 150 submissions and 1350 pages.

Most contributions submitted agree that the Directive has provided for a flexible and adequate framework for regulation by Member States and support the Commission's pragmatic approach. Overall, the Directive has contributed to enable the free movement of broadcasting services in the EU.

Following this consultation, the Commission adopted a Communication on the Future of European Regulatory Audiovisual Policy in December last year. In this document, the Commission draws the conclusions from the consultations and indicates that it will address the various issues involved in a two step procedure: As a first step, the Commission would deal immediately with the issues that are urgent and that can be solved within the existing legislative framework. As a second step a possible revision of the Directive could take place after having worked in depth on essential issues. Concerning the rules on advertising, a focus group composed of experts will meet in November this year in order to assist the Commission in its reflection. It will have to work especially on the question whether the level of details of the rules currently in force is appropriate. The Commission will also take account of the results of studies on the impact of regulation on advertising on the development of commercial practices as well as on co-regulation.

Joly said that most of the contributors were in favour of maintaining the present restrictions on advertising for certain products (alcohol, medical products). Some special interest groups asked that the provisions on alcohol advertising should be reinforced. However, only one Member State follows this view. All the other Member States consider the level of protection reached by the Directive to be appropriate.

A report on the publication of the Directive should be adopted at the beginning of next year.

Joly said that, as far as he knew, the Directive is fully transposed in all Member States. As far as the application of the rules goes, *Joly* said that last year there had only been two complaints – both regarding the same Member State.

Joly said that the Directive contains minimum rules and that Member States are free to adopt stricter rules if they wish to do so – as long as these stricter rules are in line with the Treaty (are proportionate etc). As to the question of proportionality, the outcome of the pending ECJ case concerning French legislation will be of interest. Experts noted that the country of origin/transmission rule makes it hard for Member State to apply effective stricter regulations.

Joly said that according to the Directive it must be possible to take cases on non-compliance of the Directive before court in Member States (not only before self regulation bodies), and that this option must be explained in Member States statutory law.

Experts noted that complaints concerning broadcasters that transmit from one country to another should be filed to the transmitting country's authorities, although it is not clear what country's cultural standards should apply for the assessment of the complaint. *Joly* said that in general the broadcaster should comply with the minimum rules in the directive and with the national rules in the country of origin.

Experts said they would like to see "sports" on the Directive's list of issues that should not be associated with alcohol in television advertising, as "physical performance" does not cover all important aspects of "sports" associations.

6 Information on the ongoing work on the report and analysis of Health, Social and Economic Impact of Alcohol

A general invitation to tender concerning reporting and analysis of Health, Social and Economic Impact of alcohol was sent out in 2003 and in March 2004 a bid was selected for the award of the contract. The call for tender is a follow up on the 5 June 2001 Council Recommendation on alcohol and young people. At the meeting, Dr. Peter Anderson gave a presentation of the ongoing work on the above-mentioned report.

Anderson said that the report should be finished in March 2005 and will be around 100 pages long. The report will be available in English and French. A 4 page summary will be translated to all EU languages. The geographical remit of the report will be the 25 EU, applicant countries, Iceland, Norway and Switzerland.

As for the contents *Anderson* outlined the following index for the report:

Summary

1. Introduction
2. Terms and definitions
3. The history, culture and social role of alcohol
4. The economic role of alcohol, including production, consumption and social costs

5. Consumption patterns and trends in European countries, including low risk drinking, hazardous and harmful alcohol use, intoxication and dependence on alcohol and as they apply to young people, with summary measures for Europe as a whole
 6. The harm done by alcohol, including health and social problems
 7. Patterns and trends of the harm done by alcohol in European countries and as they apply to young people, with summary measures for Europe as a whole
 8. The effectiveness of policies and programmes to reduce the harm done by alcohol in the following domains:
 - Pricing and taxation
 - Regulating the physical availability of alcohol
 - Modifying the drinking environment
 - Drinking and driving countermeasures
 - The regulation and self-regulation of alcohol promotion
 - Health promotion and education strategies
 - Actions in particular settings, including schools, the workplace, and the local community
 - Managing alcohol related harm: treatment and care
 9. The effectiveness of policies and programmes for particular target groups
 - Young people
 - Families
 - Pregnant and breastfeeding women
 - At risk groups
 - Socio-economic disadvantaged groups
 - Individuals dependent on alcohol
 10. Existing policies and programmes in European countries and at the European level, including the EU and the WHO
 11. The policy making process, and choosing effective policy and programme strategies
 12. Conclusions and recommendations
- Annex 1 Glossary of terms

In addition there will be the following outcome of the project: 1) A database of consumption patterns, the harm done by alcohol and existing policy and programme responses in each European country based on a profile and questionnaire, 2) a short report analyzing the views and opinions of the country and European stakeholders, and 3) a short administrative report, detailing the work steps taken during the contract period.

Experts gave positive feedback on the plans for the outline of the report. Experts said that there is a need to ensure that the indicators used are adequate and to ensure that data collected from the countries involved are official and correct. The representative from the WHO, *Lars Moller*, said that he hoped the WHO indicators would be useful for the process of drafting the report. Experts also noted that the report is important as it will focus on making the economic argument concerning alcohol related harm, in addition to the health and social welfare arguments.

7 Information concerning the Follow-up Report of the Council Recommendation on the Drinking of Alcohol by Young People, especially Children and Adolescents

Renstrom informed that some of the information needed for this report, will be obtained by sending a questionnaire to all Member States. The questionnaire is currently being drafted, and will be sent to experts at a later stage.

8 Public Health Programme 2003 – 2008

Renstrom presented an overview on the focus of the Public Health Programme's Work Plans for 2003 and 2004. It was informed that the list of funded projects under the 2004 Work Plan is not yet ready. *Renstrom* asked for experts' opinions concerning ideas for what should be the prioritised issues concerning alcohol in the 2005 (and/or 2006) Work Plan, and took note of the opinions and ideas presented by various experts.

9 Draft Document on a Coordinated Community Approach to Alcohol – presentation of the background sections of the draft

Renstrom explained that the draft titled "A European Coordinated Approach to Tackle Alcohol-Related Harm" was to be considered work in progress. After this meeting the ongoing process in DG Health and Consumer Protection would continue. Also, there would be meetings with other stakeholders in July, before a shorter, redrafted paper would be presented at the end of July.

Renstrom informed about the legal background of the strategy and informed about the role of public health and alcohol policy in the current proposal for an EU Constitution. Furthermore, *Renstrom* presented the current draft's listing of main reasons why there is a need to reduce alcohol-related harm in the EU and why a coordinated EU coordinated approach is needed.

10 Draft Document on a Coordinated Community Approach to Alcohol – plenary discussion of the background sections of the draft

As to the *process* of the drafting, experts asked how other DGs were involved in the process and if a high level group had been considered. *Rajala* explained that it was still early in the process, and that ad hoc meetings on higher levels, inter-service groups, adding the issue to the high level group on health etc were all options to be considered in the further process. It was also explained that meetings with some other DGs had taken place, and that more would follow.

When discussing the *main reasons why there is a need to reduce alcohol-related harm in the EU* experts agreed that the strategy needed to show more clearly the facts concerning harm on third parties (both social and health), including children and other family members of persons with alcohol related problems. Experts said that there, for information and pedagogic reasons, was a need for a good phrase to explain what we mean by third party harm in the alcohol field – reference was made to the phrase "passive smoking".

Experts also noted that this section of the draft paper of course should be evidence-based. Evidence should be used to show 1) that alcohol is no ordinary commodity because it has a toxic effect etc, 2) that it creates external harm and 3) what are the effective measures to reduce the harms in question.

As for the social harms, some experts noted that the connection between alcohol and unemployment/poverty should be highlighted.

Experts also noted that there was a need to address the issues of positive health effects in a balanced way.

Concerning the *reasons for an EU approach* to this issue, experts said that there is a need to show the EU added value clearly. Among other things, there is a need to explain how the burden of disease/mortality has an impact on economy, experts said.

Some experts noted that internal market policies and ECJ court cases have created some new framework for alcohol policy both in the EU and in the Member States. This should be explained and brought forward as a reason for an EU approach.

Although difficulties of getting comparable data from all Member States were acknowledged, experts asked that the trend of convergence (in consumption patterns and national policies) should be presented in the paper to the extent data is available.

11 Draft Document on a Coordinated Community Approach to Alcohol – presentation of possible areas, aims and actions

As a basis for the discussion *Maria Renstrom* gave a presentation of the main areas, main aims and actions included in the draft paper on a coordinated community approach to alcohol. The main areas and aims that functioned as a basis for the discussion were the following:

7 main areas:

- Drink-driving
- Under-age drinking
- Commercial communication
- Consumer information
- Physical availability of alcohol
- Harmful consumption and dependence
- Exchange of information, data and research

7 long-term (before the end of 2010) key aims on EU level:

- Decrease the number of alcohol-related road accidents
- Postpone the age at which children and adolescents start to drink alcohol
- Improve enforcement of existing regulations on commercial communication
- Improve product information and common labelling
- Decrease over-all harm and smuggling and fraud
- Combat harmful drinking patterns
- Present comparable data on consumption, harm and policy

12 Draft Document on a Coordinated Community Approach to Alcohol – group discussions concerning possible areas, aims and actions

The experts were asked to work in three groups and were presented with questions concerning what should be the main *areas*, main *aims* and concrete *actions* contained in the document. The

groups were asked to prioritise if possible.

Member States experts did, in broad terms, agree with the content of the draft working paper on alcohol. The groups had the following concrete ideas for changes:

- One group felt that “harmful consumption...” should be excluded as an area, as the term more refers to the overall problem.
- One group would like to add “protection of families and persons, especially children, in families with alcohol related problems” to the list of prioritised areas. The aims linked to this area could be the following:
 - Reduce violence in families with alcohol related problems
 - Decrease risk of health and behaviour problems of children in families with alcohol related problems

The actions linked to this area and these aims could be:

- Ensure that MS at national level include measures to protect family members in families with alcohol related problems
 - Exchange examples of best practise and data
 - Propose EU legislation to protect children from child abuse in relation to alcohol
 - One group had “drink driving” as the top priority topic.
 - Concerning the “commercial communication” area, one group had the following suggestions for relevant aims:
 - Reduce exposure of commercial communications to young people, and reduce the pressure to drink
 - Restrict alcohol promotion that encourages excessive drinking
 - Concerning “commercial communication”, another group said that the wording of actions linked to the improvement of enforcement of existing legislation, should not exclude the possibility of improved legislation.
 - Concerning the “consumer information” area, one group had the following suggestions for relevant aims:
 - Improve consumer awareness on the risks connected with consuming alcoholic beverages
 - Increase public awareness on effective alcohol policy measures
 - Concerning the “availability of alcohol” area, which should be called “availability of alcohol” and not the narrower “physical availability of alcohol”, one group had the following suggestions for relevant aims:
 - Prohibit the availability of alcoholic beverages to those under-age
 - Limit availability by price and physical availability measures
- The connected actions in this area could be:
- Evaluate the effect of EU excise duty legislation on alcohol related harm
 - Set EU minimum purchase age
 - As alcohol is no ordinary commodity, alcohol products should be excluded from the internal market rules, thereby allowing excise duties and travelling allowances to be used as effective measures
- Concerning the “exchange of information, data and research” area, one group suggested that exchange of information, data and research in the treatment field should also be included.
 - One group was of the opinion that “best practice as to the quality of health care” should be added as a topic.
 - One group had focused more on the structure of the areas and aims, than on concrete actions. They presented their suggestions for a structure. In addition to the elements from the draft

document, this structure contained “coordination” as a type of measures. By including this, the group wanted to highlight the need for EU coordination between the public health sector and other sectors. Commission representatives took note of the suggestions for further assessment.

- One group expressed disappointment as to the strong position of the industry in the draft document. The group said it wished that the document would be clearer as to the role of industry concerning the different levels (policy making and policy implementation).
- One group said that in the drafting of the document, it was important to have in mind not only the “dos”, but also the “don’ts”, considering that the EU has the power to take away MS possibilities of implementing effective measures (excise duties, availability measures, advertising).
- One group highlighted that the document needed to be clear as to the following questions: What can the Community do in this field? What is the added value?
- All groups said the current structure of the draft was somewhat confusing as it mixed measures and problems.

A large majority of experts reported that they thought it would be beneficial to continue using interactive work forms (group discussions or similar) also in the future. A majority of experts also reported the need to set aside more time for such work.

13 Draft Document on a Coordinated Community Approach to Alcohol –plenary session/discussion on possible areas, aims and actions

After the group presentations *Renstrom* summed up by saying that there seemed to be an agreement on the need for a clearer structure, clearer definition on roles for different actors and the need for action in at least the areas of drink driving, young people and families.

Experts pointed out that the document should show how the EU can help use effective (evidence-based) measures and also how the EU can help develop other measures where effect is not yet clear.

Matti Rajala said that the document needs to say what the EU will do in this field (what issues, by what instruments, at what time). For the purpose of the discussions on what to include in the document he presented the following list of instruments available to the EU:

- legislation/regulation within EU competence
- recommendations (soft legislation)
- guidelines on best practise etc
- the support and managing of networks
- produce reports
- support projects

14 Draft Document on a Coordinated Community Approach to Alcohol –summing up and further process

Matti Rajala informed that the finalisation of a SANCO version of the document could be expected after the new Commission is in place in November. The following step would be an inter-service consultation. Experts were asked to send written contributions as soon as possible (before 25 June 2004).

15 Next Meeting

Commission informed that the next meeting of the group would most likely take place in late November or early December 2004. The Commission should inform of the dates as soon as possible. The Commission should also make sure that the list of national experts be updated.

16 AOB

No issues were raised under this point. *Matti Rajala* thanked all experts and participants for their time and contributions, and closed the meeting.