



**EUROPEAN COMMISSION**  
HEALTH AND FOOD SAFETY DIRECTORATE-GENERAL

Public Health  
**Health determinants**

# **European Alcohol and Health Forum:**

## Mandate of the Working Group on Governance and Commitments

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**LUXEMBOURG**

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#### **1. Setting the scene**

The work of the European Alcohol and Health Forum finds its roots in the EU Strategy to support Member States in reducing alcohol related harm (2006), which identified 5 priority themes and good practises under each theme<sup>1</sup>, and is defined in its founding 2007 Charter establishing the European Alcohol and Health Forum. According to this Charter<sup>2</sup>, which highlighted 6 areas for action by Forum members, having both active commitments and proper monitoring are compulsory requirements for Forum membership; therefore all members have to comply with these obligations. In addition, the 2014 Action Plan on Youth Drinking and Heavy Episodic Drinking endorsed by Committee on National Alcohol Policy and Action (CNAPA) is also a useful source document when considering new Forum commitments for the two coming years (2015-2016). The Action Plan lists areas where CNAPA wishes to see industry<sup>3</sup> and other stakeholders<sup>4</sup> playing a helpful role in prevention of alcohol related harm and contributing to the Action Plan.

The Forum's work at large would gain from a renewed organisational approach. To this end, the Forum plenary meeting on 6 November 2014 decided to prolong the mandate of the Governance Working Group (GWG), based on the two GWG meeting conclusions document approved by Forum members in written procedure on 23 December 2014<sup>5</sup>.

#### **2. Objectives and main tasks**

The overarching goal of the WG – within the remit and in line with the Charter - is to improve the functioning of the Forum and thus ensure the Forum better complements the EU strategy to support Member States in reducing alcohol-related harm.

The objectives of the WG are therefore to provide support to the EAHF in the following manner:

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<sup>1</sup> [http://ec.europa.eu/health/ph\\_determinants/life\\_style/alcohol/documents/alcohol\\_com\\_625\\_en.pdf](http://ec.europa.eu/health/ph_determinants/life_style/alcohol/documents/alcohol_com_625_en.pdf)

<sup>2</sup> [http://ec.europa.eu/health/alcohol/docs/alcohol\\_charter\\_en.pdf](http://ec.europa.eu/health/alcohol/docs/alcohol_charter_en.pdf)

<sup>3</sup> CNAPA would wish to see industry (in particular from the European Alcohol and Health Forum) contributing to this Action Plan at EU level in areas including:

- the reduction of alcohol content (in accordance with specific EU or national legislation)
- supporting independent monitoring to strengthen the protection of young people from exposure to alcohol advertising, including from new media,
- providing consumer information, including voluntary labelling, at national and local level
- through initiatives on staff training to prevent serving to intoxicated drinkers and to people below the legal age of purchase
- through consumer information where information messages and campaigns are defined and supported by public authorities or independent bodies
- through supporting multi-stakeholders programmes to ensure better enforcement of age limits.

<sup>4</sup> Health, education or other relevant organisations, including NGOs, can introduce effective methods in their daily routines to help detect and address alcohol related problems, develop, implement and organise prevention and awareness raising campaigns, projects for increased and better treatment, research projects and regular events. They play an important role in dissemination of information and in advocacy for evidence based approaches. Their expertise and network can also help in monitoring and reporting back on national, regional and local developments and activities. (...) In addition, universities and research institutes could also make authoritative contributions to the Action Plan. Researchers specialised in fields related to alcohol consumption can help to identify topics of concern, undertake cutting edge research, and contribute to the scientific evaluation of policy and actions, and to the dissemination of data.

<sup>5</sup> [http://ec.europa.eu/health/alcohol/docs/2015\\_governance\\_wg\\_conclusions\\_en.pdf](http://ec.europa.eu/health/alcohol/docs/2015_governance_wg_conclusions_en.pdf)

- To contribute to the fine-tuning of actions (commitments) and to help improve the quality of the commitments.
- To find common issues between the Forum and Public Health Authorities to increase impact to prevent and reduce alcohol related harm
- To identify the Forum's research and science related needs.

The main tasks will be to:

- Find ways to improve discussions within Forum on commitments;
- Contribute to suggesting priority areas for Forum action including collective actions;
- Contribute to drafts of two-year Forum meeting work plans;
- Prepare recommendations to the Forum plenary for joint commitment proposals between different types of organisations within the Forum.
- Help foster closer links between new commitments and the objective of reducing alcohol related harm, discuss possibilities for improving the quality of commitment monitoring reports and- where relevant- discuss feedback from yearly monitoring exercises;
- Contribute to the EAHF plenary discussions on the Annual Monitoring conclusions, especially the ongoing challenges, and solutions for improvement on relevance of commitments;
- Examine how to have better exchanges between CNAPA and the Forum, in particular how to make the commitments relevant for the CNAPA work;
- Identify scientific questions relevant to the action scope of Forum;
- Discuss any other key issues identified by the EAHF.

The Working Group shall prepare conclusions and recommendations for the Forum plenary and regularly report back to it.

### **3. Working methods and organisational aspects**

The WG will be chaired by DG SANTE C4 Health Determinants Unit.

The working group meetings will be held in Brussels or in Luxembourg.

The frequency of meetings is envisaged to be once in every four months at a minimum of two months before the plenary meetings. Background papers for the meetings will be circulated two weeks' in advance.

### **5. Composition**

Membership is based on voluntary participation, with each member holding an active commitment. The list of Members as of 9 February 2015 is attached. Potential further requests for membership shall be submitted to the Secretariat.

Composition of the WG shall be kept balanced with an appropriate representation of all type of stakeholders:

- Consumers and health organisations
- Advertising, marketing, media and sponsorship organisations
- Production and sales organisations
- Research institutes and others.

External experts may also be invited to meetings for discussion on specific topics.  
For optimal conditions of work, the number of permanent members should not exceed 15 members.

*Luxembourg, May 2015*