

Implementing the European Action Plan on Alcohol

8 years after the adoption of the WHO European Action Plan on Alcohol (EAPA),^{1,2} the region has the highest prevalence of drinkers, heavy episodic drinking, alcohol consumption per capita, and the lowest proportion of abstainers, compared with other WHO region.¹ Most worryingly, one in every four deaths in young adults (aged 20–24 years) is caused by alcohol.³ Furthermore, alcohol is a substantial contributor to inequalities in health.⁴ According to WHO, the most cost-effective policy options for member states to reduce the harmful use of alcohol are the so-called best buys for the prevention and control of non-communicable diseases.⁵ However, member states' efforts to introduce these measures are often diluted by trade agreements, economic interests, or exposure to cross-border issues (eg, online advertising and sales).

In January 2019, the WHO Regional Office convened a consultation process to revisit the implementation of the policy areas for action defined in the EAPA. Policies with the lowest levels of implementation in the European region were examined for the 13 participating member states (appendix).

According to the policy index score for alcohol policies,⁶ achievements in ten key areas of the EAPA show wide differences between countries and room for improvement. Pricing policies were the worst performing. Reducing the availability of alcohol and regulating its marketing show a wide range of scores, with implementation rates considerably low in many countries.

Limiting alcohol availability, such as restricting hours or days of sale and raising minimum age limits, can contribute to the reduction of alcohol related issues. However, several countries evolved from having partly implemented regulations to having no or unknown levels of regulations.⁶

Regulation of alcohol marketing varies between countries. For example, Lithuania has recently implemented a close to total marketing ban, whereas other countries have voluntary industry self-regulation. A major challenge is the rapid evolution of digital communication, particularly the difficulty to discern commercial interests behind social media content. Finland is the only country that has implemented legislation that specifically targets social media and online marketing. Regulation of fast changing online landscapes is challenging and national legislations often lag behind. Many aspects of digital commercial communications are still unknown to policy-makers and researchers in public health.

Implementation of the best buys pricing policies are still low across Europe. Simple approaches, such as linking tax rates to inflation, have only been implemented by a few countries. Although there is huge variation in alcohol tax rates and systems across the continent, no country taxes all alcoholic products on the basis of their alcohol content; an approach that is likely to be more effective for both improving health and reducing health inequalities.² Fortunately, the picture is not universally bleak. Russia and Scotland, for example, have taken strong action on prices in recent years through the introduction of innovative policies (eg, minimum unit pricing).

The report on the European region consultation on the implementation and achievements of the EAPA 2012–2020 highlights the need for a new roadmap that will, first, aim to strengthen the implementation of the EAPA at the country level and, second, to support member states to achieve targets set in important public health commitments, such as those related to reducing non-communicable diseases and achieving the Sustainable Development Goals.

F G-d-S, D C-e-S, MR, and C F-B organised the consultation on behalf of WHO. ML, MH, CA, and TK participated in the consultation as external

experts. F G-d-S, D C-e-S, MR, and C F-B wrote the consultation report. C F-B is a staff member of WHO. F G-d-S and MR are WHO consultants. The authors alone are responsible for the views expressed in this publication and they do not necessarily represent the decisions or the stated policy of WHO.

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- 1 WHO. Global status report on alcohol and health 2018. Geneva: World Health Organisation, 2018.
- 2 WHO Regional office for Europe. European action plan to reduce the harmful use of alcohol 2012–2020. Copenhagen: World Health Organisation, Regional Office for Europe, 2012.
- 3 WHO Regional office for Europe. Copenhagen status report on alcohol consumption, harm and policy responses in 30 European countries. Copenhagen: World Health Organisation, Regional Office for Europe, 2019.
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- 5 WHO. Tackling NCDs: 'Best buys' and other recommended interventions for the prevention and control of noncommunicable diseases. Updated Appendix 3 of the WHO Global NCD Action Plan 2013–2020. Geneva: World Health Organisation, 2017.
- 6 WHO Regional office for Europe. Monitoring noncommunicable disease commitments in Europe. Theme in focus: progress monitor indicators. Copenhagen: World Health Organisation, Regional Office for Europe, 2017.



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See Online for appendix

For the **European Region consultation on the implementation and achievements of the European action plan to reduce the harmful use of alcohol 2012–2020** see <http://www.euro.who.int/en/health-topics/disease-prevention/alcohol-use/publications/2019/european-region-consultation-on-the-implementation-and-achievements-of-the-who-european-action-plan-to-reduce-the-harmful-use-of-alcohol-20122020>