



**COUNCIL OF
THE EUROPEAN UNION**

Brussels, 30 May 2008

9806/08

SAN 100

NOTE

from: Presidency
to: Council

Subject: EMPLOYMENT, SOCIAL POLICY, HEALTH AND CONSUMER AFFAIRS
COUNCIL MEETING ON 9 AND 10 JUNE 2008

EU Strategy to support Member States in reducing alcohol related harm
- Information from the Presidency
(Other business item)

With a view to the Council meeting (Employment, Social Policy, Health and Consumer affairs) on 9 and 10 June 2008, Delegations will find in the annex a note from the Presidency on the above-mentioned subject.

REPORT

Third European Alcohol Policy Conference "Building Capacity for Action"

The Catalonian regional government hosted the Third European Alcohol Policy Conference, under the aegis of the Ministry of Health of the Republic of Slovenia and the Ministry of Health and Consumerism of the Kingdom of Spain, from 3 to 5 April 2008 in Barcelona (Spain). The conference was part of the activities of the "Building Capacity" European project, conducted by the Institute of Public Health of the Republic of Slovenia. The conference is also part of Slovenia's broader activities during its Presidency of the Council of the EU.

Alcohol is the sixth major cause of early mortality and morbidity in the world, the third in Europe, and even the first among youth. As much as 4% of the global burden of disease may be contributed to alcohol, and in Europe even 8%, which amounts to approximately 125 billion Euro or 1.3% of gross national product of Europe. Alcohol has a central role in many things in Europe. Europe is the first in the world with regard to consumption of pure alcohol per adult, which is as much as 11 litres. Europe also produces a quarter of the world production of all alcohol drinks; most trade (import-export) is among the European countries, while its inhabitants still consume more than 2,5 times more alcohol than the world average.

In October 2006, the European Commission passed a Communication to the Council of the EU, the European Parliament, the Economic and Social Committee and the Committee of the Regions, entitled "EU Strategy to support Member States in reducing alcohol-related harm", in which it defined the priority areas linked to prevention of harmful alcohol use that are important for the Member States. The participants at the Barcelona conference dedicated special attention to implementation of the mentioned strategy in practice, and in the conclusions suggested numerous additional measures and improvements.

The Slovenian Delegation organised a special workshop at the conference on the topic of implementation of the EU strategy in practice in Slovenia. The purpose of the workshop was also to identify strengths and weaknesses, and opportunities and threats of the alcohol policy in Slovenia. At the workshop, the participants discussed topics such as preventing hazardous and harmful alcohol use among children and youth, reducing injuries and deaths due to driving under the influence of alcohol, preventing hazardous and harmful alcohol use among adults, with a special emphasis on work place prevention. They also touched on information, education and awareness raising, as well as development and maintenance of a database of various research projects. Representatives of governments professional institutions, civil society and non-governmental organisations' and researchers participated in the workshop.

Among participants at the conference, which was attended by 352 participants from 36 countries, were the Ministers for Health from Slovenia, Spain and Estonia, and other high representatives of the EU Member States, the European Commission and the World Health Organisation (WHO). Special emphasis, among other important conference conclusions, should be put on the fact that hazardous and harmful alcohol use is still highly underestimated, and that more attention should be dedicated to informing citizens about harmful consequences of drinking. Youth and pregnant women are especially exposed to that, and they need protection, especially from the negative effects of advertising alcohol drinks, driving under the influence of alcohol and violence linked to alcohol consumption. But also other target groups need attention, such as for example adults who already have alcohol-related difficulties (especially with early detection and counselling measures in primary health care).
