

European status report on alcohol and health 2014

Reducing the negative consequences of drinking and
alcohol intoxication



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Background

The pattern of drinking is just as important for alcohol-related harm as the volume of alcohol consumed. Most alcohol is consumed in heavy drinking occasions, which is the most risky pattern of drinking and one that can cause harm not only to the drinkers themselves but also to others. Taking action in drinking environments is one important strategy for reducing the frequency and size of heavy drinking patterns.¹

Pubs, bars and nightclubs are key locations for the consumption of alcohol, particularly among young people. These drinking venues can be both a hub of social and recreational activity and a source of revenue for local economies. However, the congregation of large numbers of drinkers in drinking environments means they are often associated with high levels of intoxication and alcohol-related harm, including violence, road traffic crashes, public disorder and unintentional injury. Factors that have been associated with problematic venues include a permissive atmosphere, crowding, low levels of comfort, poorly trained staff and cheap drinks promotions.²

Interventions in drinking environments can reduce alcohol-related harm by targeting both the way in which alcohol is served and the conditions in which it is consumed, resulting in wide-ranging benefits that include averting problems that often harm people who are not drinking, notably the problems of drink-driving and violence.^{1,2} To be effective, action requires a coordinated response between government, health systems, the police, criminal justice systems, licensing authorities, retailers and alcohol outlets, local communities and other stakeholders.¹

Strategies

As outlined in the *European action plan to reduce the harmful use of alcohol 2012–2020*,¹ strategies to address the consequences of intoxication that result from drinking environments include:

- introducing a licensing system for the sale of alcohol and regulations for the issuance of licences, which can ensure that serving establishments meet certain standards;
- imposing sanctions for violations of established standards, including loss of licence;
- introducing server training programmes as a prerequisite for receiving and maintaining a licence;
- implementing active, continual enforcement of laws prohibiting the sale of alcohol to intoxicated customers;

¹ *European action plan to reduce the harmful use of alcohol 2012–2020*. Copenhagen, WHO Regional Office for Europe, 2012.

² *Alcohol in the European Union. Consumption, harm and policy approaches*. Copenhagen, WHO Regional Office for Europe, 2012.

- introducing health warning labels on all alcoholic beverage containers as part of broader communication and point-of-purchase health campaigns to reduce the harmful use of alcohol; and
- introducing product labelling similar to that used for foodstuffs, including the calorie content and ingredients relevant to health, in order to ensure that consumers have access to complete information on the content and composition of the product for the protection of their health and interests.

Methods

This chapter presents the results from the WHO survey on alcohol and health, carried out during the period February–December 2012. Unless otherwise noted, the responses reflect the policy situation in each country as at 31 December 2011. The survey was sent to the WHO national focal points for alcohol policy in each country, to be completed in consultation with various national experts. All 53 Member States of the WHO European Region participated in the survey.

Results

Approximately 36% of Member States reported that systematic alcohol server training courses are organized on a regular basis (Table 1). Server training is a form of occupational training provided to people serving alcohol, such as bar, restaurant or catering staff, which promotes safety through the prevention of intoxication and compliance with age limits in the service of alcoholic beverages to customers. Such server training can be mandated by state or local laws, for example as a prerequisite for obtaining a licence to sell or serve alcoholic beverages.¹ Server training can be organized by, for example, licensing bodies, trade schools as part of their curriculum or private bodies such as trade associations.

Table 1. Number of Member States with systematic alcohol server training

SYSTEMATIC ALCOHOL SERVER TRAINING	NO. OF MEMBER STATES (n=53)
Systematic alcohol server training courses (total)	19
Courses organized by:	
– the private sector	10
– other	9
– enforcement agencies	6

Eight Member States legally require the presence of safety messages or health warnings on bottles, cans or other packaging containing alcoholic beverages to inform or remind consumers of the risks associated with the use of the product.³ An additional 13 Member

³ Reflects 2013 changes in legislation in Turkey.

States⁴ are reported to use such messages on a voluntary basis. Thirty-eight Member States have no legal requirement to include a health or safety message in alcohol advertisements.³

Twenty-seven Member States⁵ reported that although a definition of a standard drink is used at the national level, there is wide variation in the definition, ranging from 8 g to 20 g of pure alcohol in a standard drink. Forty Member States (75%) reported that their governments use a standard legal definition of an alcoholic beverage. Nine Member States⁶ reported a national legal requirement to display consumer information about calories, additives and vitamins on the labels of alcohol containers.

Box 1 contains information on recent developments in Israel regarding licensing and warning labels.

Box 1. New legislation on licensing and warning labels in Israel

According to a recent amendment to the Business Licensing Law in Israel, only licensed establishments, such as restaurants and pubs, may sell alcoholic beverages for on-premise consumption between 23:00 and 06:00. A violation of this law can lead to closure of the premises. Any business selling alcoholic beverages must post warning notices noting health dangers; hours of sale; and the prohibition on selling, offering or serving alcoholic drinks to minors. The amendment was passed in 2010 as a temporary provision and was made permanent in 2013.

As part of the Advertising Restriction Law passed in 2012, warning labels stating "Warning – Excessive alcohol consumption endangers life and is harmful to your health" will be required on containers and advertisements for alcohol. Alcohol advertising will be limited to marketing information only. Advertisements may show the bottle/container and the place of manufacture; no other images will be permitted. The provisions regarding advertising are expected to go into effect in January 2014, the provisions regarding the labelling of liquor containers are expected to go into effect in January 2015, and the provisions regarding the labelling of wine bottles are expected to go into effect in January 2016.

A violation of the advertising laws is a criminal offence, punishable by a fine. Enforcement is carried out by the Israel National Police.

Source: Ms Iris Yogev, Director, Planning and Control, Israel Anti-Drug Authority.

Conclusion

The *European action plan to reduce the harmful use of alcohol 2012–2020*¹ proposes a portfolio of policy options and strategies to reduce alcohol-related harm in drinking environments. This action includes developing guidelines and standards for the design of serving premises, server training, and monitoring and enforcing licensing laws. As described in the action plan, these guidelines and standards could reflect a public health orientation and could be disseminated among licensing authorities and serving establishments. The action plan advises that existing licensing regulations should be reviewed and strengthened (where appropriate) to ensure that serving premises meet established standards, that server

⁴ Data missing from five Member States.

⁵ Data missing from two Member States.

⁶ Data missing from one Member State.

training is considered for licensing, that the regulations are regularly monitored and enforced at a local level, that there are sufficiently severe sanctions (including revocation of licences) for violations by servers or serving establishments, and that there are sufficiently severe sanctions for licensing bodies that fail to regulate drinking environments effectively.

The results from the most recent WHO survey on alcohol and health show that systematic alcohol server training courses are not regularly employed by most Member States. Approximately one third of Member States reported that such courses are organized on a regular basis, and 11% reported that the courses are organized by enforcement agencies.

Other options include the introduction of: (i) a series of warning or information labels on all alcoholic beverage containers and on all commercial communication materials for alcoholic beverages and (ii) product labelling similar to that used for foodstuffs (including alcohol and calorie content, additives and allergens).¹ At present, these strategies are not commonly used. Survey results show that 15% of Member States have a legal requirement for a safety message or health warning on packaging containing alcoholic beverages, 28% of Member States have a legal requirement to include a health or safety message in alcohol advertisements and 17% reported a national legal requirement to display consumer information about calories, additives and vitamins on the labels of alcohol containers.⁶