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# **ALCOHOL IN EUROPE**

## **A PUBLIC HEALTH PERSPECTIVE**

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A report for the European Commission

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**What do adolescents drink?**

As has been noted above, the division of all alcoholic drinks into the three categories of 'beer', 'wine' and 'spirits' represents a simplification of the spectrum of drinks available in Europe. This is particularly so for youth drinking, where a large amount of recent policy has been driven by concerns over a new, 'fourth' category of drinks that appealed to young people (see Mosher and Johnsson 2005 for a more detailed history). These sweetened, brightly-coloured drinks of around 5% alcohol concentration have been given several names – including 'wine coolers', 'Flavoured Alcoholic Beverages' (FABs) and 'Ready-To-Drink' beverages (RTDs) – but throughout this report are usually described as 'alcopops', following the European Working Group on Alcopops set up in the 1990s.

Despite these recent developments, beer and spirits are still the most popular drinks for young people overall, with beer accounting for over half of the total in 11 countries (5 in the non-EU study countries and 6 in the EU25) (see also Hupkens, Knibbe, and Drop 1993). Spirits are slightly more popular than beer in only three countries (Norway, Italy and Portugal), while alcopops are not the most popular drink in any country (Hemström, Leifman, and Ramstedt 2001).<sup>38</sup> Other drinks have a range of popularity in different parts of Europe – three times as many alcopops are drunk in the EU15 as in the EU10, but more wine is drunk by boys in the EU10 than in the EU15 (see Figure 4.13). Within the EU15, levels of spirits and wine consumption on the last occasion are similar, although beer and alcopops are over twice as popular in central compared to southern Europe.

When the amounts of each drink are added together, we find that the average amount of alcohol drunk on the last drinking occasion is 60g of alcohol. No EU15 country outside of southern Europe has an average level below 56g, while in the UK and Ireland the amount drunk on the last occasion even reaches over 80g of pure alcohol. Last occasion drinking levels are slightly lower in the EU10 (see Figure 4.13) and significantly lower in southern Europe, which averaged 38g of pure alcohol.

**Drinking frequency and total consumption**

On the other hand, a different picture emerges if amount drunk per occasion is combined with drinking frequency to produce an estimate of total annual consumption (bearing in mind that this assumes a consistent level of under-reporting). The frequency of 15-16 year old drinking is highest in central Europe (5-9 times per month) and lowest in northern Europe (around twice per month). The southern and eastern European countries are generally in-between at 3-5 times per month, although a particularly high value is found in Malta (7 times per month). As for other variables (see below), the frequency of drinking was generally higher for boys than for girls, with small gaps only found in the Nordic countries, Ireland and the UK.

For total consumption, this, therefore, means that boys from northern Europe appear to have the lowest levels of consumption (2-3 litres per year) with those in southern and eastern Europe generally drinking more (2-6 litres) and those in central Europe and Malta drinking much more (8-10 litres, and an exceptional 14 litres in the Netherlands – although the robustness of individual values is limited given the concerns in Box 4.1). For girls, those from central Europe and Malta also drink much more than those from anywhere else (4-7 litres compared to 3 litres in the Czech

<sup>38</sup> Wine is the most popular beverage in Slovenia, but given the marginal nature of the difference it may be more suitable to see Slovenia as equally split between beer, wine and spirits.

Although the EU itself cannot pass laws simply to protect human health (Member States have not conferred this power on the European institutions), some policies dealing with the internal market can incorporate substantial health concerns, such as the alcohol advertising clause within the **Television Without Frontiers Directive**. Otherwise, the EU's action on alcohol has come through 'soft law', in the form of non-binding resolutions and recommendations urging Member States to act in a certain way.

### Member State alcohol policy

Every country in the European Union (EU) has a number of laws and other policies that set alcohol apart from other goods traded in its territory, often for reasons of public health. Despite the ubiquity of alcohol policies, just under half the EU countries still do not have an **action plan or coordinating body for alcohol**. Even so, most countries have programmes for one aspect of alcohol policy, of which **school-based education** programmes are the most common throughout Europe. All countries also have some form of **drink-driving restrictions**, with everywhere except the UK, Ireland and Luxembourg having a maximum blood alcohol limit for drivers at the level recommended by the European Commission (0.5g/L). However, many European drivers believe that there is only a slim chance of being detected - a third overall believe they will never be breathalysed, although this is lower in countries with random breath testing.

**Sales of alcohol** are generally subject to restrictions in most EU countries, in a few cases through retail monopolies but more often through licences, while the places that alcohol can be sold are frequently restricted. Over one-third of countries (and some regions) also limit the **hours of sale**, while restrictions on the days of sale or the density of off-premise retailers exist in a small number of countries. All countries prohibit the **sale of alcohol to young people** beneath a certain age in bars and pubs, although four countries have no policy on the sale of alcohol to children in shops. The cut-off point for allowing sales to young people also varies across Europe, tending to be 18 years in northern Europe and 16 years in southern Europe.

**Alcohol marketing** is controlled to different degrees depending on the type of marketing activity. Television beer adverts are subject to legal restrictions (beyond content restrictions) in over half of Europe, including complete bans in five countries; this rises to 14 countries for bans on spirits adverts. Billboards and print media are subject to less regulation though, with one in three countries (mainly in the EU10) having no controls. **Sports sponsorship** is subject to the weakest restrictions, with only seven countries having any legal restrictions at all.

The **taxation** of alcoholic beverages is another consistent feature of European countries, although the rates themselves vary considerably between countries. This can be seen clearly for wine, where nearly half the countries have no tax at all, but one in five countries has a tax rate above €1,000, adjusted for purchasing power. In general, the average effective tax rate is highest in northern Europe, and weakest in southern and parts of central and eastern Europe. Four countries have also introduced a targeted **tax on alcopops** since 2004, which appears to have reduced alcopops consumption since.]



When the different policy areas are combined into a **single scale**, the overall strictness of alcohol policy ranges from 5.5 (Greece) to 17.7 (Norway) out of a possible maximum of 20, with an average of 10.8. The least strict policies are in

**1: Title: Germany: German Parliament approves law to increase price of alcopops (12 July 2004)**

Citation: Bloomberg.com, 9 July 2004

Germany's lower house has approved legislation to increase the premixed drinks containing alcohol and fruit juice. The taxation will change depending on the size of the bottle and the percentage of alcohol. Labelling on the front of the bottle will note that alcohol cannot be sold to those under 18. The additional tax money will be collected from 2 August. The tax money will provide funding for anti-drugs programmes from the Federal Agency for Health Information. (12 July 2004)

**2: Title: France: Government to broaden duties on RTDs (12 July 2004)**

Author: Todd S

Citation: just-drinks.com, 12 July 2004

France's Ministry of Health is expanding the range of pre-mixed drinks on which duty is levied, contributing to a campaign to reduce alcohol consumption among young people. The levy €5.55 euros per decilitre of pure alcohol will be charged on brands such as Smirnoff Ice, Eristoff Ice and Boomerang. The levy will also be charged on pre-mixed beers such as the tequila-flavoured Desperado and strong alcohol drinks sold in bottles of less than 60 centilitres. (12 July 2004)

## "Alcopops" price hike aims to protect teens

swissinfo June 19, 2003 11:11 AM



**The price of designer drinks is set to rise in Switzerland as part of efforts to prevent young people from becoming hooked on alcohol.**

On Thursday, the Senate agreed to a government proposal to quadruple the tax on so-called "alcopops". The issue still needs the approval of the House of Representatives.

The sweet designer drinks could soon become a luxury item in Switzerland (swissinfo)

Health officials argue that the beverages – a blend of spirits with soft drinks or fruit juice – are too appealing to young people, many of whom are drinking to excess.

Earlier this year the government said it wanted to raise the current tax of 45 centimes for a 275ml bottle of alcopops to SFr1.80, in a bid to curb drinking by youngsters.

"Youngsters should not get used to drinking alcohol," said Eugen David of the Christian Democratic Party.

A survey conducted in February this year showed that the consumption of spirits among young people has risen significantly in Switzerland in the past two years.

### **Sharp increase**

The study also suggested that drinking patterns were influenced by the price of alcohol and that people were buying more spirits following the generous tax cuts on strong liquors two years ago.

The trendy sweet drinks containing spirits made their debut in Switzerland in 2000, when around two million bottles were sold.

The figure skyrocketed to 28 million in 2001 and last year about 40 million bottles of alcopops were sold in Switzerland.

However, critics say that a tax hike is not enough to cut the consumption of alcopops among youngsters and are calling on the government to do more to raise awareness.

### **Prevention campaign**

"A tax increase is not enough. The government needs to step up its campaign to raise awareness of the effects of alcohol," said Helen Leumann of the Radical Party.

The government recently launched a campaign aimed at cutting alcohol consumption among teenagers. It plans to show a series of advertisements in cinemas urging youngsters to resist peer pressure to get drunk.

Leumann also suggested stepping up controls on the sale of alcohol to underage drinkers.

Last year, the German-language "TagesAnzeiger" newspaper published a report that showed that current legislation had little impact.

In one test, 392 children were sent out to buy alcohol in and around Zurich and at least half of those aged 13 and 14 succeeded, while among the 15-year-olds almost two-thirds were sold alcohol.

swissinfo with agencies

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**URL of this story**

*<http://194.6.181.128/sen/swissinfo.html?siteSect=41&sid=3963230>*

**Related Sites**

Swiss Institute for Drug and Alcohol Prevention (German/French):

*<http://www.sfa-ispa.ch/bodyindex-d.htm>*

Swiss Federal Office for Public Health: *<http://www.bag.admin.ch/e/>*

Swiss Alcohol Board: *<http://www.eav.admin.ch/e/>*



## **EUROCARE press release: Landmark EU report shows the full burden of alcohol in Europe**

Each year alcohol kills 195,000 people in Europe and costs 125 billion euros to EU society. This is equivalent to 1.3% GDP.

Brussels, 1 June: A 400 page report analysing the health, social and economic impact of alcohol in Europe, has been released today by the by the European Commission, setting out the scientific evidence that will inform the Commission's first-ever strategy on alcohol due out later this year.

Derek Rutherford, Secretary of EUROCARE, said: "Alcohol abuse places a heavy burden of economic and social cost on Europe. If it were any substance other than alcohol there would certainly be parliamentary and ministerial demands for action."

The report points at Europe as the heaviest drinking region of the world and shows that the styles and levels of drinking throughout Europe are much more similar than commonly believed.

According to the report, alcohol is one of the major public health problems in Europe. Causing some 60 different types of diseases and conditions (including accidents and injuries, mental and behavioural problems, cancers, heart diseases and stroke), alcohol is responsible for 7.4% of all ill-health and early death in the EU.

The report also shows that alcohol is a key cause of harm to people other than the drinker including some 60,000 underweight births, up to 9 million children living in families adversely affected by alcohol, the 10,000 'innocent' deaths that occur to bystanders or passengers from drink-drivers, and the 2,000 murders that occur each year.

"It is the children who pay the price of the last round. Much is said about passive smoking, little recognition is given to third party victims of alcohol. Action needs political courage but we are dealing with not just an irresistible pleasure but with massive vested interest," says Mr Rutherford.

Alcohol costs Europe an estimated 125 billion euros (equivalent to €650 for each household) every year due to ill-health, accidents and injuries, crime and lost productivity.

Contrary to what some representatives of the alcohol industry have tried to make policy makers believe, the report shows that education and public awareness campaigns are simply not good enough on their own in reducing the harm done by alcohol. In contrast, the report shows that we need to be tough on drink driving, and make sure that alcohol is not too cheap or easily marketed, supported by widespread campaigns if we are going to make a difference in reducing alcohol's toll on Europe.

"What really makes the need for action so urgent is that we know 'what works' in reducing this toll," says Dr Anderson, lead author of the report and international public health expert. "All we need now is the will to do something about it."

Mr Rutherford emphasized: "Whilst price is a major factor in controlling consumption a less contentious and a more politically amenable action would be to control the volume of advertising and ban sports sponsorship which is the most insidious marketing strategy of the alcohol industry."

EUROCARE and its members welcome the report and hope it will be a useful contribution to the process of preparing the EU's common alcohol strategy to be published later this year.

EUROCARE is an alliance of 45 voluntary and non-governmental organisations from all over Europe dedicated to promote the prevention and reduction of alcohol related harm in Europe.

#### Notes

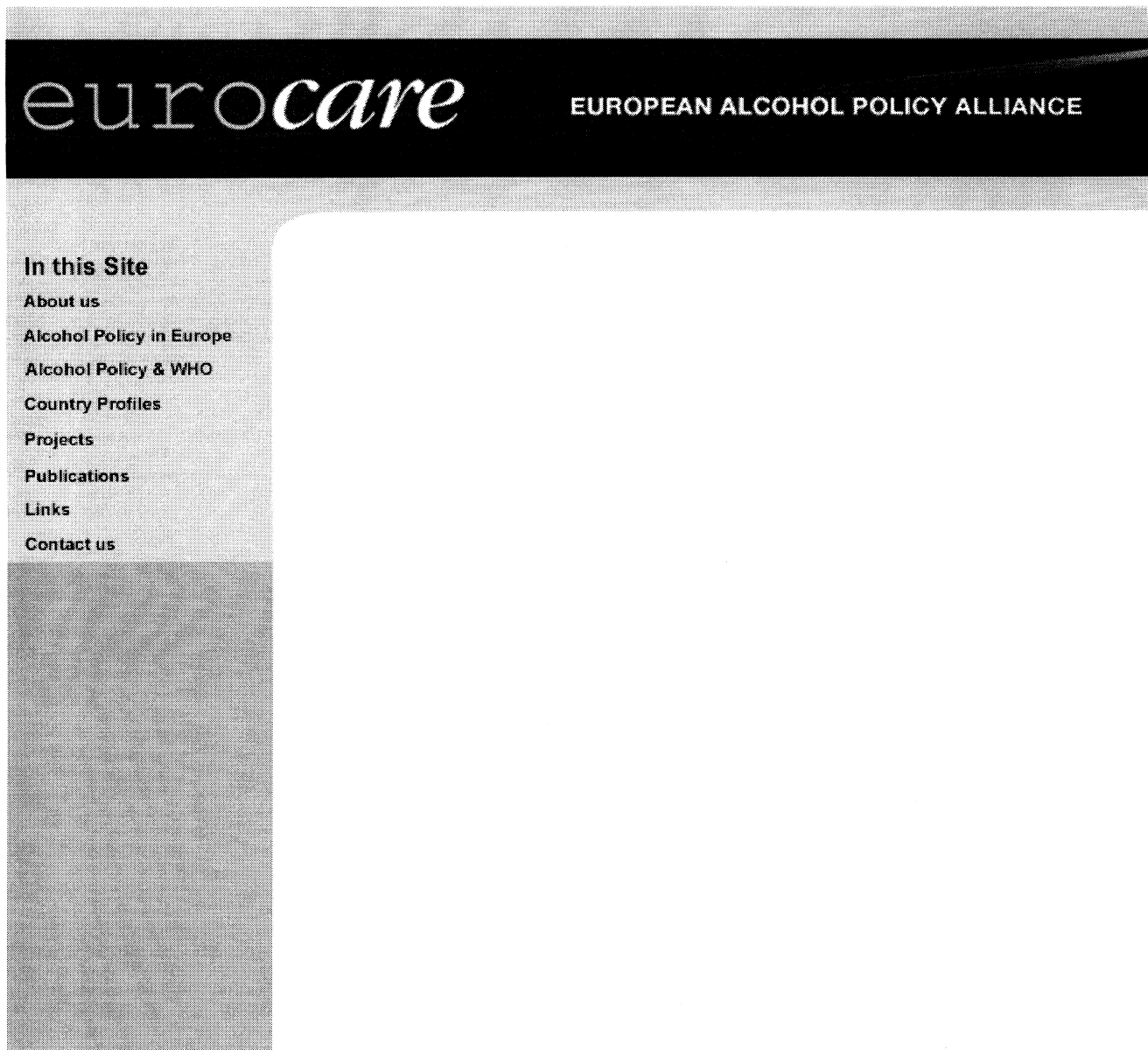
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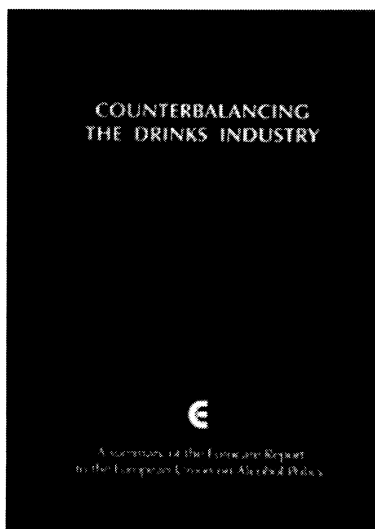
2. The report 'Alcohol in Europe: a public health perspective' was written by Dr Peter Anderson and Ben Baumberg for the Institute of Alcohol Studies ([www.ias.org.uk](http://www.ias.org.uk)), and funded by a grant from the European Commission. It represents the views of its authors and not that of the Commission itself.

3. The report can be downloaded from the European Commission's Health Portal, [http://ec.europa.eu/health-eu/news\\_alcoholineurope\\_en.htm](http://ec.europa.eu/health-eu/news_alcoholineurope_en.htm)





## Counterbalancing the Drinks Industry A Summary of the Eurocare Report on Alcohol Policy in the European Union (English Version)



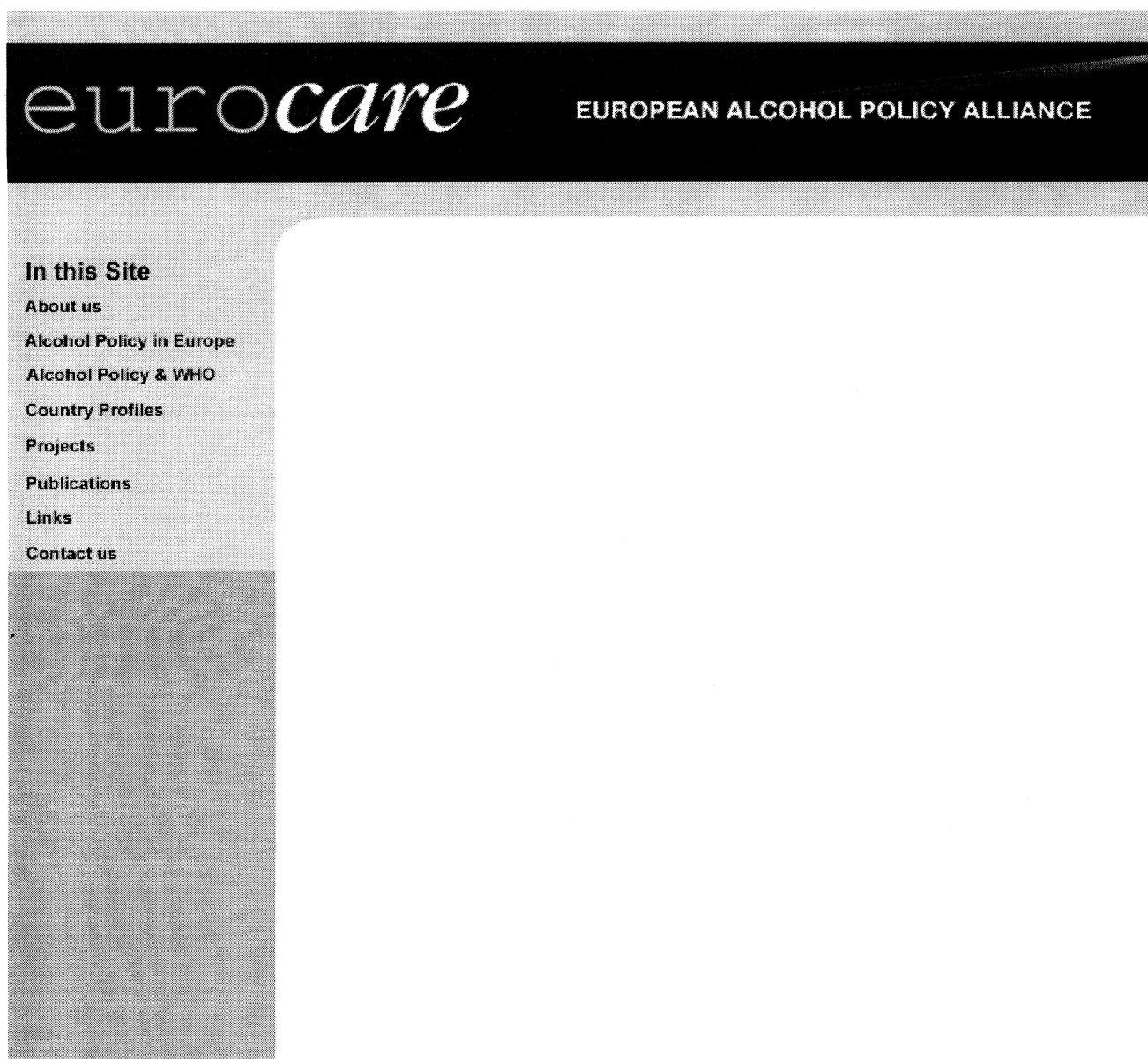
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## 2.0 World Health Organisation - European Alcohol Action Plan

2.1 A further development has been the endorsement of the WHO European Alcohol Action Plan by all Member States of the Union.<sup>4</sup>

2.2 The Action Plan is designed to achieve Target 17 of the WHO's 'Health for All'. This states:

- 'By the year 2000, the health-damaging consumption of dependence-producing substances such as alcohol, tobacco and psychoactive drugs should have been significantly reduced in all Member States.'
  - 'By the year 2000, the health-damaging consumption of dependence-producing substances such as alcohol, tobacco and psychoactive drugs should have been significantly reduced in all Member States.'
  - 'This target can be achieved if well balanced policies and programmes ... are implemented ... to reduce alcohol consumption by 25 per cent, with particular attention to reducing harmful use.'
- 5

2.3 This is the first time the WHO Regional Office for Europe has tackled the problems arising from the use of alcohol by formulating and implementing a strategic plan urging concerted action by Member States throughout Europe. It marks a major advance in European public health policy which it is hoped will be given further impetus by the European Ministerial Conference on 'Health, Society and Alcohol' to be held in Paris in December 1995.

2.4 Three key considerations lie behind the Action Plan:

- **Health and Social Problems**

- Six per cent of deaths among people aged under 75 and 20 per cent of all acute hospital admissions are alcohol-related.
- More than 1 in 5 road traffic deaths and accidents are alcohol-related and alcohol is an important factor in domestic, recreational and work-related accidents.
- Alcohol use is implicated in a considerable proportion of public order problems including violence and also in family disruption and child abuse, placing a heavy burden on the social welfare system.

- **Economic**

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- Europe is the continent with the highest consumption, production and export of alcohol.
- While such production is of importance in some regions, on average the value of alcohol production is probably less than 2 per cent of gross domestic product.
- The economic costs of alcohol problems are equivalent to 5 - 6 per cent of GNP.

- **Cultural**

- A wide range of social and cultural attitudes and meanings are attached to alcohol use throughout Europe. In some parts of Europe alcohol has little use; in others it is an integral part of daily life.
- Consequently, the challenge of the Action Plan is to take all these key components and find the right balance in order to reduce alcohol-related harm.

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