



**Alcohol Policy, what works?**  
AER Alcohol working group  
Pécs (Baranya, H), 28-29 March 2007

Preventive policy must take into account a number of issues:

- The target for action embraces a wide range of alcohol-related problems, far wider than the narrow medical concept of “alcoholism”.
- These problems are pervasive and distributed widely through the drinking population, rather than being concentrated only among heavy drinkers. Heavy drinkers and “alcohol abusers” do not live in their own separate world, but are in a very real sense products of their society. They are influenced by much the same factors that affect the generality of drinkers- the social acceptability of drinking and heavy drinking, the cost of alcohol and how easy it is for it to be obtained.
- Preventive measures which influence the generality of drinkers also affect heavy and problematic drinkers.
- The overall level of population’s drinking is significantly related to the level of alcohol-related problems in that population. Increases in per capita consumption of alcohol will normally be followed by an increase in drinking across the drinking population and an increase in the number of heavy drinkers. (Alcohol Policy and the Public good, Andersson mfl, 1995).
  - An effective policy should have measurable goals.
  - Should have a clear structure.
  - It should deal with both availability and demand.
  - It’s important that a policy job is seen as a long term work with a good political support.
  - A policy should be developed into an action plan with clear aims and targets.

(Andersson, 2006).

**Alcohol, what works - P Anderson, Helsinki 2006**

1. There is substantial evidence of significant effectiveness in reducing alcohol-related harm by implementing:

- ✓ limitations on availability of alcohol;
- ✓ high levels of taxation;
- ✓ restrictions on sales or use; and
- ✓ drink-driving countermeasures

2. There is some evidence of significant or moderate effectiveness in reducing alcohol-related harm by implementing:

- ✓ regulation on advertising and other promotion of alcohol;
- ✓ regulation of the drinking context;
- ✓ brief interventions in primary care settings; and
- ✓ community actions.

3. There is substantive evidence for a modest effectiveness in reducing alcohol-related harm by providing treatment for heavy drinkers.

4. There is substantive evidence for no effectiveness in reducing alcohol-related harm by implementing school education and information campaigns.

5. All the effective measures have been successfully implemented in low income as well as high-income societies.

6. It is likely that alcohol policy is most effective when it integrates a variety of complementary effective measures

### An intersectoral approach

<b>Sector</b>	<b>Alcohol policy's potential impact on the sector</b>	<b>The sector's potential impact on the harm done by alcohol</b>
<b>Fiscal policy</b>	Ready source of tax; reduces external costs	Taxes reduces the harm done by alcohol
<b>Social inclusion</b>	Improves inclusion and reduces inequalities	Inclusion reduces risks for harmful alcohol use
<b>Industry and private sector</b>	Can reduce private sector profits	Alcohol industry can impair effective alcohol policy making; can reduce the harm done by alcohol
<b>Employment</b>	Unlikely to have negative effects on employment	Improved employment can reduce risks for harmful alcohol use
<b>Workplace</b>	Improves productivity	Sound policies reduce risks for harmful alcohol use
<b>Rural</b>	Need to collect taxes on informal production	Need to ensure quality of alcohol products
<b>Agriculture</b>	May lead to shifts in agricultural products	Tends to impair effective alcohol policy, although mixed outcomes
<b>Environmental</b>	Reduce environmental impact of beverage alcohol production	No obvious consequences
<b>Transport</b>	Improves road safety	Safer roads reduce the harm from drink driving accidents

<b>Sector</b>	<b>Alcohol policy's potential impact on the sector</b>	<b>The sector's potential impact on the harm done by alcohol</b>
<b>Safety</b>	Improves safety	Safer environment reduces the harm done by alcohol
<b>Consumer affairs</b>	Enhances consumer protection and increases consumer knowledge	Increases consumer knowledge
<b>Criminal justice</b>	Reduces costs to criminal justice system	Less crime reduces risks for harmful alcohol use
<b>Social welfare</b>	Reduces social harm and improves social well-being	Less disadvantage reduces harmful alcohol use
<b>Healthy start in life</b>	Improves healthy start in life	Reduces risk factors for harmful alcohol use
<b>Youth sector</b>	Increases youth capital	Reduces risks factors for harmful alcohol use
<b>Education sector</b>	Increases educational achievement	Increases knowledge, but little impact on harm done by alcohol
<b>Family policies</b>	Strengthens families	Reduces risk factors for harmful alcohol use
<b>Health education</b>	No obvious consequences	Little impact on harm done by alcohol, but can increase support for alcohol policy
<b>Health sector</b>	Reduces burden of disease and health sector costs	Reduces harmful alcohol use
<b>Communities</b>	Improves social capital	Reduces risk factors for harmful alcohol use
<b>Urban</b>	Improves safety in the urban environment	Reduces risks factors for harmful alcohol use
<b>Licensing</b>	Could improve local decision-making	Reduces harmful alcohol use
<b>Marketing</b>	Likely to reduce alcohol-related revenue	Reduced volume of marketing would reduce harmful alcohol use
<b>Culture and arts</b>	May reduce alcohol-related revenue	Reduced portrayal of alcohol can reduce harmful alcohol use
<b>Sports</b>	Improves safety of spectators; may reduce alcohol-related revenue	Has not been studied; could reduce risks for harmful alcohol use

### **Alcohol action plan**

- a) Review the nature and extent of the problems caused by the harmful use of alcohol, the resources and infrastructures already available for reducing their incidence, prevalence and impact, and the possible constraints in establishing new policies and programmes;
- b) Formulate, develop and implement regional based action plans on alcohol with clear objectives, strategies and targets;
- c) Establish or reinforce adequately financed coordinating mechanisms and focal points for alcohol policy at all levels of action;
- d) Implement policies and programmes utilizing existing structures where feasible.
- e) Provide increased resources to undertake thorough assessments of the impact of policies and activities in different sectors on the harms and costs associated with alcohol.
- f) Establishing an information System on Alcohol to bring together and analyze alcohol surveillance programmes;
- g) Integrating laws and regulations and data on the effectiveness of policies and programmes into the information system to help identify best practices and support communities in shaping effective programmes;
- h) Create infrastructures to review and disseminate all major research outcomes in alcohol policy; the evidence base should be translated into easily understood policies and practices through practical toolkits and guidelines;
- i) Develop research capacity in alcohol policy through professional development programmes.

(Anderson, lecture in Helsinki, Bridging the gap Conference, 2006).

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