



Workshop on Joint Actions Luxembourg, 10-11 December 2012

*DG Health & Consumers
Health determinants*

Joint Action on alcohol in the Health Programme work plan 2013

Aim of Joint Action "to support Member States to take forward work on common priorities in line with the EU alcohol strategy"

EU alcohol strategy to support Member States in reducing alcohol related harm (COM(2006) 625 final)

Priority themes

- **relevant in all Member States**
- **action at EU level brings added value**

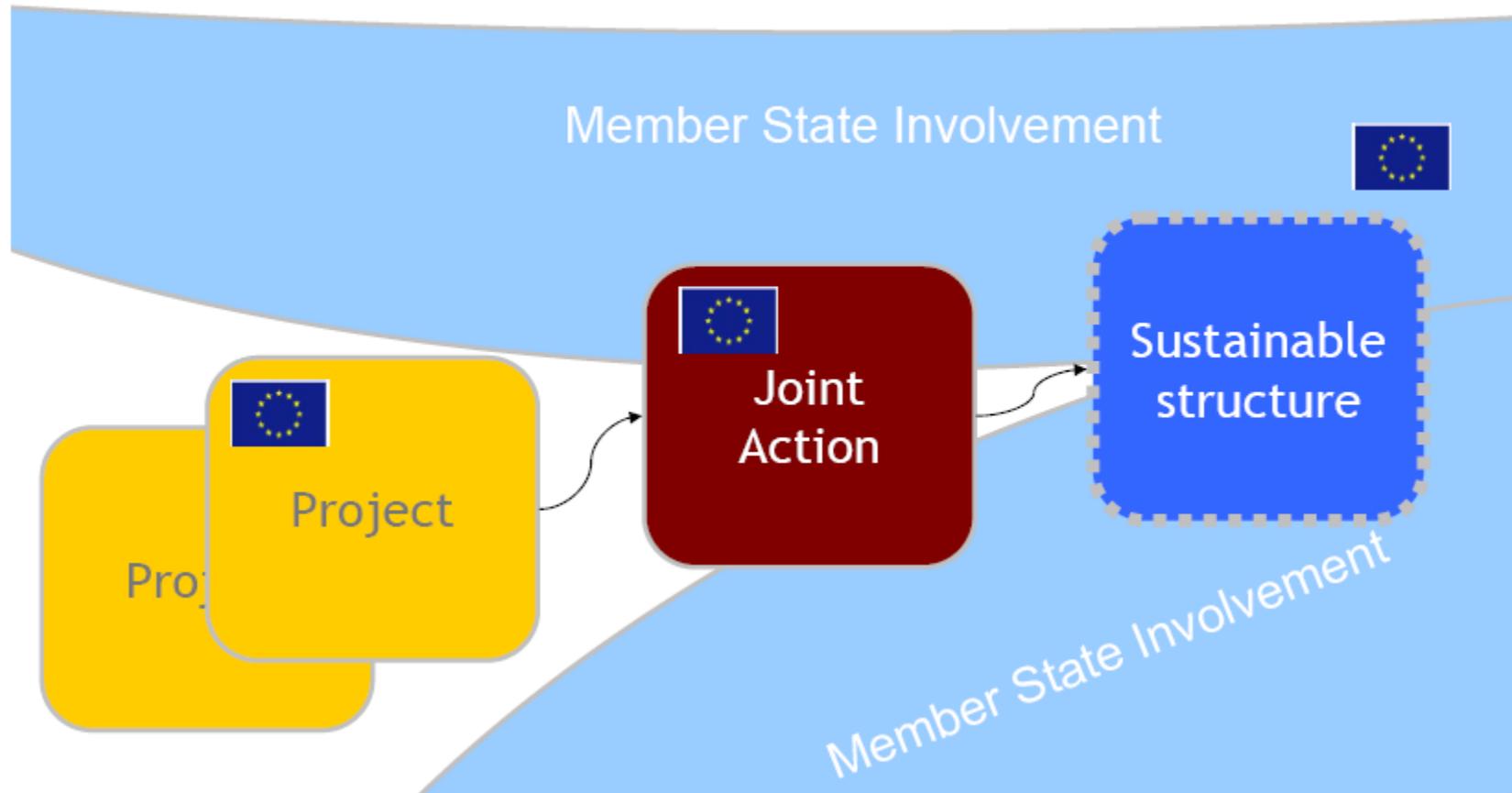
#5 Develop and maintain a common evidence base

#4 Inform, educate and raise awareness on the impact of harmful and hazardous alcohol consumption, and on appropriate consumption patterns

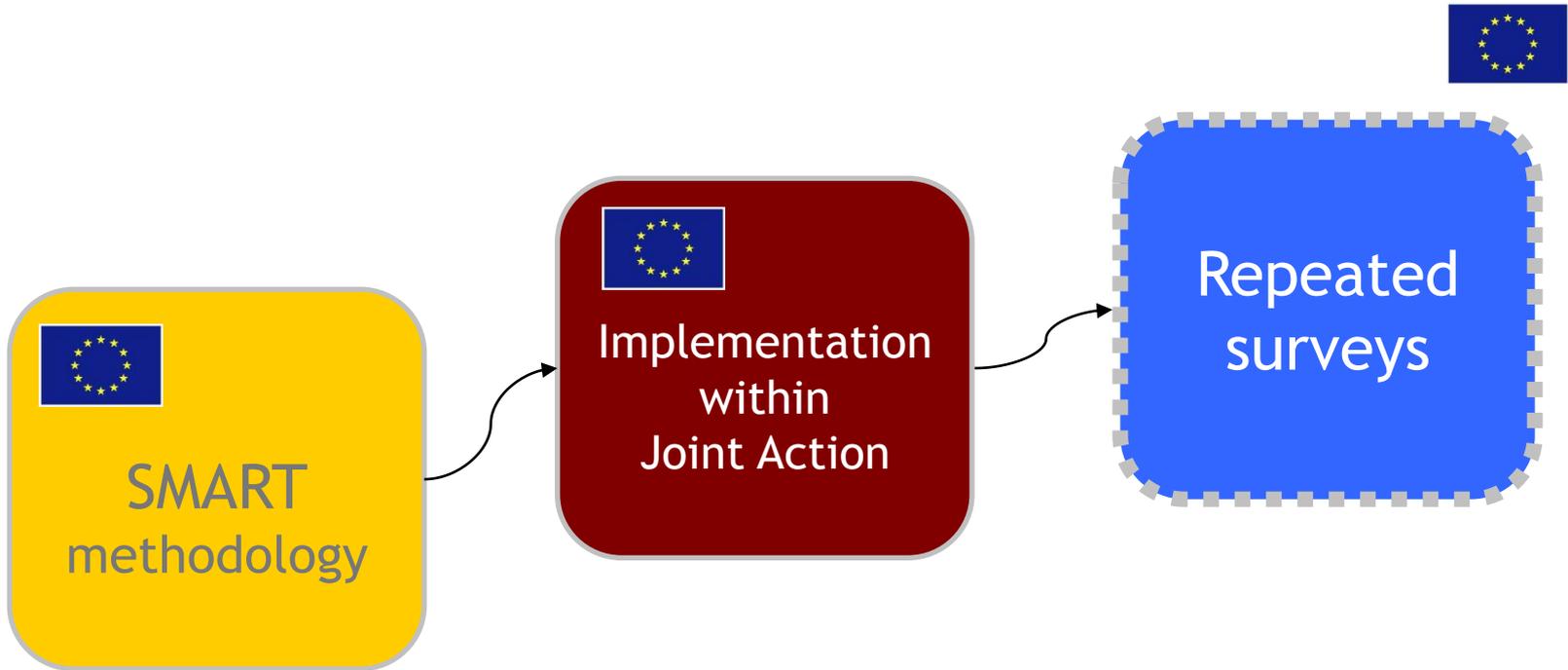
Objectives and deliverables

1. Improving the **monitoring of drinking** habits and alcohol related harm
Deliverable:
 - **Report** providing comparable data across EU MS
2. **Good practice information provision** to protect children and young people and prevent alcohol related harm among adults
Deliverables:
 - **Guidelines** for low-risk alcohol consumption
 - **Tool-kit** of good practice print and online instruments for information dissemination

Idea of a Joint Action



Monitoring drinking habits and alcohol related harm

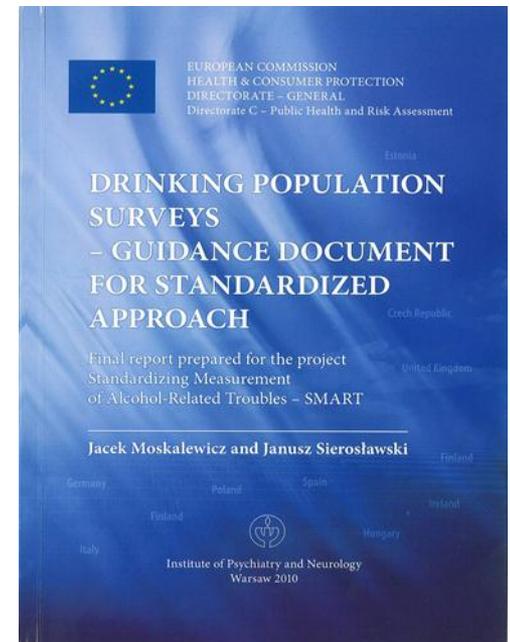


Project SMART 2008-2010

Standardizing Measurement of Alcohol Related Troubles

- Standardised methodology for survey of drinking habits and alcohol-related harm
- Tested in 10 EU countries, available in 11 languages
- **Core: Alcohol consumption (BSQF)**
- Optional components:
 - RSOD (6+/12+ drinks)
 - Context of drinking
 - Unrecorded alcohol supply
 - Screening for dependence/abuse
 - Harm from other people's drinking
 - Attitudes towards alcohol policy

<http://www.alcsmart.ipin.edu.pl/>



Anderson, P., Møller, L. and Galea, G. (eds) (2012) ***Alcohol in the European Union. Consumption, harm and policy approaches***. WHO Regional Office for Europe, Copenhagen.

- - - spending resources on hundreds of national alcohol surveys which offer limited scope for international comparisons, is neither cost-effective nor helpful for monitoring progress towards common aims - - -

A move towards the use of common instruments, such as the questionnaire developed in the SMART project - - - would, over time, reduce the costs of monitoring at both national and international level.

An EU-wide or European drinking survey to gather comparable baseline information would be a necessary first step to encourage Member States to adopt common methodology.

Challenges

Alcohol strategy evaluation survey:

Development of standardised definitions for data on alcohol use and alcohol-related harm has been helpful

- substantially **41%**
- moderately or to a limited degree **44%**
- little or not at all **15%**

Wider use hampered due to:

- Methodological capacity challenges (EU12)
- Established national alcohol surveys (EU15)
 - switching to new methodology entails loss of national time series
 - adding questions makes surveys expensive and cumbersome

Building on the SMART project

Joint Action is an opportunity to

- **test the SMART methodology with some financial support**
- **without having to give up existing surveys**
- **benefit from peer support**
- **obtain EU-comparable results**
 - **Deliverable: Report**
- **obtain material for additional scientific articles**

When considering a SMART survey

Questions to address

- **scope: national or regional**
- **stand alone or integrated into another survey**
- **only core questions / also additional components**
- **face to face interview or written survey**

Coordination with other national surveys: content, timing

- **EHIS to be carried out 2013-2015**
- **comparison of drinking habit questions SMART/EHIS**

Guidelines for lower-risk drinking

Great deal of variation across the EU regarding

- **upper limits of low-risk drinking**
- **definitions of standard drink**

Cause of confusion for consumers when alcoholic products and information on alcohol and health increasingly cross borders – on product labels, on the internet ...

Different definitions of standard drink may be a challenge in comparative drinking habits surveys – ESPAD, EHIS ...

Standard Drinks

October 2012

**Definitions in
grams pure alcohol**

Used in:

- brief advice/interventions
- public info campaigns
- on product labels

Not used: BE, CY, LT

Based on:

- EC/WHO questionnaire 2012
- ICAP, PHEPA, Wikipedia

BG	10 g	
CZ		16 g
DK		12 g
DE	10 g	
EE	10 g	
EL		10 – 16 g
ES	10 g	
FR	10 g	
IE	10 g	
IT		12 g
LV		12 g
LU		12,8 g
MT	8 -10 g	
HU	10 g	
NL	10 g	
AT		20 g
PL	10 g	
PT	10 – 12 g	
RO		13 g
SI	10 g	
SK	10 g	
FI		12 g
SE		12 g
UK		8 g (“unit”)

EC/WHO survey 2012

N=23

MS Issued by	Latest revision	Men Week g	Women Week g	Men Day g	Women Day g	Men single occasion g	Women single occasion g
BG				20	10	100	50
DE DHS	2010	120	60	24	12	50	50
EE NIH	2009	160	80	40	20		
ES	2012	280	170	40	20-25	60	40
IE DoH		168 *	112 *				
IT NIFN	2011			24-36	12-24		
MT sedqa	1995	189	126			36	36
NL NHC	2006	140	70	20	10	20	10
AT MoH	2009	160	120	24	16		
PL PARPA	2009	280	140	40	20	60	40
PT NAP	2010			24	16	60	48
RO RFRD	n/a	195	130	39	26		
SI FoM	2006	140	70	20	10	50	30
FI NAP	2003	280	190			84	60
SE NBoH	2011	168	108			60	48
UK CMO	1995	168	112	24-32	16-24		

Complexities

- **Maximum no. drinks/grams / range of drinks/grams**
- **Daily / weekly**
- **Risk of chronic conditions / risks from intoxication**
- **Men / women**
- **Young people**
- **Older people**
- **Specific situations - pregnancy**
- **Different purposes / contexts**
 - academic research

screening and brief advice
provision of consumer information

low risk drinking
cancer prevention
balanced nutrition

...



Know your limits



**1.7
UK
Units**

**UK Chief Medical Officers
recommend**

**Adults do not regularly
exceed:**

Men	3-4 units daily
Women	2-3 units daily

**Avoid alcohol if pregnant or
trying to conceive**

www.drinkaware.co.uk

Opportunities to explore

- **SMART survey provides an opportunity to test in practice a common SD definition**
- **Some MS are exploring whether new evidence warrants revisions in guidelines – cf Canada, Australia.**
- **Although formulating recommendations is seen as a task for national health authorities, in some contexts possibility to refer to European guidelines could be helpful.**
 - ⇒ **Identifying common ground**
 - ⇒ **Clarifying points of divergence**
 - ⇒ **Pointing out directions for further research**
- **Possible deliverables**
 - synthesis report**
 - recommendations**
 - key messages**

Gathering good practice: print and online instruments for information dissemination

Public health bodies' tested and proven approaches
to convey information on alcohol and health to

- the general population
- specific subgroups
- professional intermediaries
eg brief advice/intervention support materials
- standard drink info and guidelines for low risk drinking
- other information to help prevent/reduce harm

"Tool Kit"

- **Structured format for describing the approach**
- **Common method for identifying success factors to help further use and adaptation**

- **Possible deliverables**

report

publication

policy brief

key messages

conference

poster show

...

Putting it all together

Coordinator country/organisation

- puts together the master plan
- submits the proposal
- signs the master contract on behalf of the consortium
- **WP1 Coordination**

Leader for each Work Package

- planning, management, reporting
- **WP2 SMART survey**
- **WP3 Guidelines**
- **WP4 Tool Kit**
- **WP5 dissemination of the Joint Action outputs**
- **WP6 evaluation of the Joint Action process**

For each Work Package

Work plan & budget

- **Objectives, deliverables**
- **Activities needed to achieve objectives**
- **Milestones, timing**
- **Which countries / organisations participate**
 - **how do they participate, what do they contribute**
 - **manpower required**
 - **other costs involved**