

Good practice principles for the use of low risk drinking guidelines as a public health tool

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Work Package "Guidelines"

- Co-led by the National Institute for Health and Welfare, Finland, and Istituto Superiore di Sanità, Italy
- Nearly 50 partners from 26 expert organizations based in 20 countries

Surveys to update state of play and background papers to summarize science underpinnings regarding

- low risk drinking guidelines
- brief intervention practices
- standard drink concept
- guidance for young people

Seeking broader views by means of

Delphi surveys with

- public health and addiction experts
- experts on young people

Online survey of consumer views

Expert meetings

- Rome & Brussels 2014
- Helsinki 2016
- CNAPA 2014-2016



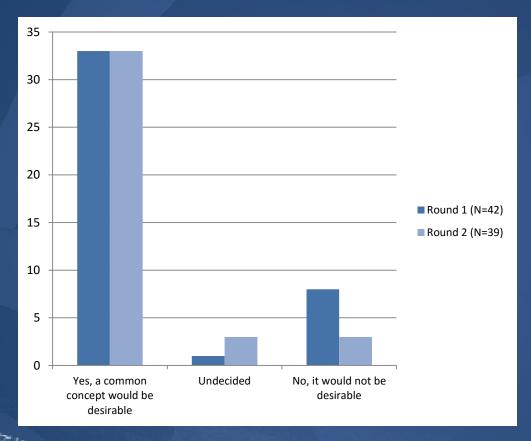
SHARING THE RESULTS

LOOKING HOW TO REDUCE ALCOHOL RELATED HARM



Experts would welcome a common concept of low risk drinking

Would you consider it desirable for European public health bodies to agree on a common concept of "low risk" drinking?



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Towards a common concept

- More authority and credibility, clearer and stronger.
- A co-ordinated effort by European countries to promote low risk guidelines using the same definition would have a better chance of being accepted by the population.

However,

- National drinking guidelines have been introduced without coordination or international guidance.
- The WHO does not set limits for alcohol consumption "the ideal for health is not to drink at all."
- Drinking guidelines in some countries have a long history.
- Public health bodies in some countries have chosen not to issue guidelines on low risk drinking.
- To effectively communicate low risk drinking guidelines to the population, pre-existing information needs and perceptions need to be taken into account.

Nevertheless, a move towards a more aligned approach is possible

- Adopting the <u>cumulative lifetime risk of death due to alcohol</u> as a common metric for assessing the risks from alcohol.
- Applying the good practice principles suggested by Joint Action RARHA.



Good practice principles for drinking guidelines

Principles

- Drinking guidelines are not normative but <u>informative</u>.
- The <u>core message is about risk</u>, not safety.
- evidence-based information on <u>risks at different levels of alcohol consumption</u>,

 <u>correct misconceptions</u> about the likelihood of positive or negative health effects of alcohol,
 and help alcohol consumers to <u>keep the risk of adverse outcomes low</u>.

Agreeing on a "European code on alcohol"

- Set of core messages applicable across diverse populations.
- To amplify the core message to alcohol consumers and the society at large.
- To provide a common reference and support for national action.





Good practice principles for drinking guidelines

Components

- <u>Daily drinking</u> and <u>occasional heavy drinking</u> should both be highlighted as potentially harmful drinking patterns.
 - Advice to limit average consumption over a longer period of time.
 - Advice to limit the amount drunk on any single occasion.
- Advising equally low consumption levels for <u>men and women</u>, while highlighting genderspecific factors in verbal communication, should be considered.
- Guidance for healthy adults should be accompanied by guidance for various <u>age groups</u>, in particular for older people.
- Advice should be provided concerning alcohol consumption in <u>high-risk situations</u> and <u>at-risk</u> groups.
- While the focus in drinking guidelines is on health risks, it should be communicated that limiting alcohol consumption and avoiding drunkenness also reduces the risk of <u>social harms to the drinker and to others</u>.





Good practice principles for drinking guidelines

Key messages

- Not drinking at all is the safest option
 - ✓ in pregnancy, childhood and adolescence
 - ✓ when driving, at work or engaged in tasks that require concentration.
- High-risk situations include
 - taking a medication that may interact with alcohol.
- At-risk groups include people with
 - other addictions, mental health problems or family history of alcohol dependence.
- Advice for older people should highlight risk of
 - ✓ adverse interactions with medications, co-morbidities and injuries.
- Specific harms to highlight include
 - ✓ increased risk of cancer, high blood pressure, addiction, depression, adverse effects on the brain, overweight and adverse effects on the family.
- As low risk drinking guidelines are based on averages across populations, any individual should also take into account their own characteristics and particular situation.





Support measures at European and national level



become pregnant, avoid alcohol to keep

risks to your baby to a minimum.

Legislating for health relevant information on alcoholic beverage labels.

- ✓ Ingredients and nutrition values
- The amount of calories in the bottle or can
- \checkmark The amount of pure alcohol in the bottle or can, in grams of ethanol
- Message/s on the health and safety risks related to alcohol consumption

Requiring information on health and safety risks on alcoholic beverage packages and alcohol advertisements.

- Alcohol consumption during pregnancy; Vulnerability of minors
- Drink driving; Mixing alcohol with medications
- Effects on the brain; Addictive nature of alcohol
- ✓ Loss of self-control; Violence; Decreased perception of risk

For effectiveness, health and safety messages should be:

- Rotating designed to fill in gaps in information
- Clear and powerful
- Highly visible, of sufficient size, placed on the front of containers

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Support measures at European and national level

- Applying and enforcing an age limit of minimum 18 years for the sale and serving of any alcoholic beverages.
 - Organized and regular enforcement
 - Training for servers and retailers
 - Efforts to enhance public awareness and support for compliance with age limits
 - ✓ Effective use of sanctions—suspension of alcohol license, closure order.
- For promoting awareness and enforcement, an integrated alcohol policy with a combination of structural and individual prevention measures is needed rather than isolated actions.
- Supporting in particular primary health services to identify at-risk drinkers and offer advice to reduce high-risk drinking.



