

CONTRIBUTION BY ALCOHOL AND DRUG INFORMATION CENTRE (ADIC) TO THE TRIS NOTIFICATION NUMBER: 2022/441/IRL OF DRAFT REGULATIONS UNDER SECTION 12 OF THE PUBLIC HEALTH ALCOHOL ACT 2018

Alcohol and Drug Information Centre (ADIC) welcomes the opportunity to share our views on the TRIS notification about alcohol warning labeling in Ireland.

In addition to our own contribution, we strongly support the contribution made by Movendi International.

This submission – content

We have structured our submission in seven concise chapters:

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The international context of Ireland's TRIS Notification concerning the 2018 Public Health (Alcohol) Act

We welcome and support the Irish government's commitment to protect people and communities from alcohol harm, including through introducing health warning labels on alcoholic products.

The Irish government has a Human Rights obligation to protect the Irish people from the harms caused by the alcohol industry. Article 38 of the Charter of Fundamental Rights of the European Union is one example of stipulations that require the Irish and all other government in the European Union to introduce warning labeling on alcohol products.

Alcohol is no ordinary commodity. The products and practices of the alcohol industry are causing severe harms to health, society, and the economy.

The proposed health warnings are an evidence-based solution to help increase public recognition of risks and harms linked to alcohol.

The proposal is further aligned with the values expressed by the European Commission in Europe's Beating Cancer Plan.

The Irish government has made international voluntary commitments to protect the Irish people from alcohol harm: the 2010 WHO Global Alcohol Strategy, the 2013 WHO Global NCDs Action Plan, the Agenda 2030 and SDGs that include target 3.5 on reducing per capita alcohol use, and the 2022 WHO Global Alcohol Action Plan, as well as the 2022 European Framework for Action on Alcohol.

Concrete examples:

#1 WHO Global Alcohol Strategy – unanimously adopted by the World Health Assembly in 2010

The World Health Organization's Global Alcohol Strategy stipulates labelling as policy option/ intervention in national leadership area 8 (f):

“providing consumer information about, and labelling alcoholic beverages to indicate, the harm related to alcohol.”

#2 WHO Global Action Plan – unanimously adopted by the World Health Assembly in 2022

The World Health Organization's Global Alcohol Action Plan stipulates under Action Area 2, Action 8 for Member States:

“Ensure appropriate consumer protection measures through the development and implementation of labelling requirements for alcoholic beverages that display essential information for health protection on alcohol content in a way that is understood by consumers and also provides information on other ingredients with potential impact on the health of consumers, caloric value and health warnings.”

#3 WHO Europe Framework for Action on Alcohol – unanimously adopted by the WHO Europe Regional Committee in 2022

The WHO European Framework for Action on Alcohol contains as one of six focus areas for priority action: “Health information, with a specific focus on alcohol labelling”. Stipulated priorities for action are:

b) “statutory labelling requirements informed by WHO guidance, with labels that include nutrition and ingredients as well as health warnings;” and

e) “consideration of the principle of a statutory ‘right to know’ for consumers in relation to the content of alcoholic beverages and related risks.”

#4 SDG 3.5 of the 2030 Agenda contains a concrete target for countries to reduce alcohol harm. It stipulates a reduction of population-level alcohol use, as per indicator 3.5.2:

“Alcohol per capita consumption (aged 15 years and older) within a calendar year in liters of pure alcohol”

All these decisions, strategies, action plans, frameworks, and agendas illustrate the importance of accelerating action on alcohol harm and the international consensus about which policy solutions

are most cost-effective, feasible, and cost-effective to improve health and development through alcohol policy. Health warning labeling is clearly one of those interventions.

Ireland's TRIS Notification concerning the 2018 Public Health (Alcohol) Act

These regulations establish the modalities of how the law will be applied on all alcohol products and how the information prescribed will be presented to the consumer in an On-Trade environment.

The principal points of information to be conveyed on-product are:

- A warning to inform people of the danger of alcohol consumption.
- A warning to inform people of the danger of alcohol consumption when pregnant.
- A warning to inform people of the direct link between alcohol and fatal cancers.
- The quantity of grams of alcohol contained in the product.
- The number of calories contained in the alcohol product.
- A link to a health service website which gives information on alcohol and related harms.

We strongly supports the Irish government's legislation on labelling of alcohol products, and the modalities of the Draft Regulations, with consumer and product information and health warnings both on-product and alcohol licensed premises.

The Department of Health (IRL) devised a simple, proportionate, and effective labelling regime. The proposed alcohol labelling regime is set to ensure balance between on-product marketing hyperbole and conspicuous health warnings and information.

Importantly, the labelling regime affords citizens the 'Right To Know' the inherent risk from alcohol use.

This presentation of health warnings is essential to improving health literacy of the inherent risk from alcohol use. Alcohol is no ordinary commodity, but public recognition of the scope and extent of alcohol harm remains low. The alcohol industry keeps people in the dark about the harms their products and practices are causing. That is why warning labeling on alcohol matters. In addition, it establishes a principal of the people's right to know.

The proposal is legitimate and proportionate according to current EU provisions

We emphasize that the proposed legislation is in line with the provisions of article 36 of the TFEU considering the overarching goal of the regulation is to strengthen citizens' health. Since the proposal encompasses all alcoholic beverages sold in Ireland it does not create any leeway for arbitrary discrimination.

The legislation should also be deemed proportionate as there are no other viable policy options with the same reach as on-label health warnings has that better could inform citizens about the health hazards of alcoholic products. Research studies, as well as a report by the European Commission, show that solutions, such as off-label information, are rarely read by consumers compared to on-label information. The warning labels ought therefore to be considered well within the current EU

legal framework of a proportionate health policy solution to tackle a societal issue that has detrimental effects on public health.

Why we support the Irish government's legislation on labelling of alcohol products, and the modalities of the Draft Regulations

1. People have a right to know that alcohol causes cancer and to be informed about the extent of risks due to alcohol.
2. Ireland has specific issues around patterns of alcohol use which give rise to high levels of alcohol harms. The Irish parliament, and its elected government, has democratically enacted legislation which provides an evidence-based, public health oriented response, to improve health outcomes and health literacy of the Irish public.
3. A recognition of a Member State's competency to adopt measures requiring mandatory particulars to on-product alcohol labelling on grounds of the protection of public health.
4. There are strong public health reasons to use alcohol warning labeling as part of a comprehensive approach to alcohol policy – see appendix.

The human rights context

The products and practices of the alcohol industry cause a high burden of disease and death worldwide and have severe social and economic consequences. Nevertheless, the alcohol industry remains largely unregulated globally.

Alcohol promotion, sale and use impact on the human rights to health and life, and other rights enshrined in human rights conventions.

States parties of human rights conventions have the obligation to respect, protect and fulfill human rights: They have the duty not to interfere with or violate human rights (respect), they are obligated to ensure third parties do not interfere with human rights (protect), and they must implement measures to ensure every person can enjoy their human rights (fulfill).

Regarding alcohol, these principles for example oblige states to protect children from alcohol industry marketing (protect); and place a duty on states to provide access to treatment of alcohol-related diseases (fulfill).

The widespread disease and death from alcohol use has been described as an industrial epidemic with alcohol corporations as the vectors of disease that employ harmful practices to undermine public health measures. States parties have a duty to regulate the alcohol industry to prevent disease, even if this limits economic rights.

An overview of alcohol harms in relation to human rights highlights impacts on (among several others) the rights to health and life and the right to information.

| Alcohol-related harms | Relevant human rights | Relevant Articles in human rights conventions or relevant general recommendations |
|---|---|--|
| (Premature) mortality | Right to life | Art. 6 of the ICCPR; Art. 6 of the CRC; Art. 10 of the CRPD |
| Alcohol-attributable health harms – (non-)communicable diseases, sexually transmitted diseases, mental health conditions, violence and road traffic related injuries, fetal alcohol spectrum disorder (FASD); lack of treatment of alcohol use disorder | Right to health and access to health care, children’s right to development, best interests of the child | Art. 12 of the ICESCR; Art. 25 of CRPD; Art. 3, 6(2) and 24 of the CRC; Art. 12 of the CEDAW |
| Adolescent alcohol use and related harms | Best interests of the child, children’s rights to health, survival, and development | Art. 3, 6, and 27 of the CRC |
| Lack of information and awareness-raising of alcohol-related harms | Right to information | Art. 17 of the CRC; Art. 10(h) of the CEDAW; Art. 21 of the CRPD |

Rights to health and life

The right to health obligates States parties to take every possible effort for the progressive realization of the highest attainable standard of health, as codified in the ICESCR, CRC, CEDAW, and CRPD. Additionally, according to the ICCPR, CRC and CRPD, everyone has an inherent right to life. Alcohol kills about three million people and results in about 132 million disability-adjusted life years (DALYs) annually. It is a major contributing factor to many communicable and noncommunicable diseases, such as liver cirrhosis, various cancer types, pancreatitis, tuberculosis, and HIV/AIDS. Additionally, a significant proportion of deaths by road accidents and interpersonal violence are attributed to alcohol.

Given the huge burden of disease and death caused by alcohol, it is impossible to achieve the human right to health without public health oriented alcohol policymaking. Therefore, even countries with few resources that have ratified human rights conventions including the right to health have to implement effective minimum measures recommended by authoritative bodies such as WHO to fulfil their human rights obligations.

Rights to information and protection from harmful marketing

The right to information is covered by CRC, CEDAW, and CRPD. The CRC additionally includes rights requiring the protection of children from harmful information and any form of exploitation. Given the extent of alcohol-related harms, population-level awareness-raising and targeted programs are important.

According to the 2018 WHO global alcohol status report, only 34% of countries require warning labels on alcohol advertisements or packaging, and just 23 countries require a certain size of these warnings. The lack of effective awareness-raising and other interventions such as warning labels recommended by the WHO Global Alcohol Strategy violates the right to information.

Meanwhile, the alcohol industry spends billions of dollars annually on promotion. In 2017, the world's biggest beer producer – Anheuser-Busch InBev – spent more than US\$6 billion on alcohol advertising, making it the ninth largest advertiser in the world.

No ordinary commodity: Why the scope and extent of alcohol matters

Alcohol remains one of the leading risk factors contributing to the global burden of disease. It is the eight leading preventable risk factor of disease. The contribution of alcohol to the global disease burden has been increasing from 2.6% of DALYs* in 1990 to 3.7% of DALYs in 2019.

In high income countries alcohol use is the second fastest growing risk factor and in LMICs it is the fourth fastest rising risk factor for the global disease burden.

Alcohol is the second largest risk factor for disease burden in the age group 10-24 years. Alcohol is the largest risk factor for disease burden in the group 25-49 years.

Combining the direct harm to alcohol users with the secondhand harm due to alcohol, the [total alcohol burden is nearly twice as big as the total burden of tobacco harm](#).

The products and practices of the alcohol industry drain precious resources from countries around the world. These heavy health, social, and economic costs are even more harmful now since governments need more resources to recover and build back better from the ongoing COVID-19 pandemic.

The products and practices of Big Alcohol cause multiple economic harms:

1. Alcohol harms human capital and drains societies' resources,
2. Alcohol impedes economic growth,
3. Alcohol leads to staggering costs due to lost productivity,
4. Alcohol harms economic activity,
5. Alcohol contributes to significant proportion of youth not being education, employment, or training (NEET),
6. Alcohol fuels workplace harm through absenteeism and presenteeism, and
7. Big Alcohol fuels harm through workers' rights abuses.

A recent worldwide overview showed: the economic costs of harm due to alcohol amount to 1306 Int\$ per adult, or 2.6% of the GDP. About one-third of costs (38.8%) were incurred through direct costs, while most costs were due to losses in productivity (61.2%).

The Organization for Economic Cooperation and Development (OECD) released a landmark report in 2021 detailing the economic harm caused by the alcohol industry. Alcohol-related diseases and injuries incur a high cost to society. Life expectancy is nearly one year lower than it would be, on average, if alcohol consumption in a population would be lower.

An average of 2.4% of health spending in OECD countries goes to dealing with the harm caused by alcohol consumption – and the figure is much higher in some countries. In addition, poor health due to alcohol consumption has detrimental consequences on labor participation and productivity.

Combined with the impact on labor force productivity, it is estimated that GDP will be 1.6% lower on average in OECD countries annually over the next 30 years due to alcohol harm, varying from 0.2% in Turkey to 3.8% in Lithuania.

Reduced productivity of employees amounts to US\$ 595 billion (adjusted for purchasing power), according to the report.

In 2019, alcohol was the second leading risk factor at the most detailed level globally for risk of cancer deaths and DALYs after smoking. The study published in The Lancet using data from the Global Burden of Diseases Study 2019 found that smoking, alcohol use, and high BMI, and other risk factors were responsible for almost half of the global cancer deaths.

The evidence is growing stronger and stronger, showing that any amount of alcohol use is bad for cardiovascular health. Even low dose alcohol increases health risks such as for the heart, compared to not having alcohol at all.

In their latest policy brief, the World Heart Federation (WHF) establishes the evidence base that no amount of alcohol is good for the heart.

The need for increased public awareness on the health risks of alcohol consumption

Alcohol's cancer risk is well known and documented in scientific studies across the world. Nevertheless, the general public still remains largely in the dark about alcohol's cancer risk. Evidence shows that the alcohol industry is doing everything they can, from muddying the science to propagating myths, to keep people in the dark.

A series of journal articles published in the Journal of Studies on Alcohol and Drugs (Volume 81, Issue 2) in March 2020 supports that when alcohol bottles come with conspicuous labels providing information on the risks of alcohol consumption or alcohol use guidelines, people are better informed about alcohol's harms and may cut down their alcohol use.

As pointed out in the contribution submitted by Alcohol Action Ireland, both in Ireland, as well as in the rest of Europe, many people are still unaware of the health risks, and especially cancer risks, associated with alcohol consumption. An opinion poll in Sweden showed that 86 % of citizen did not know that there is no safe level of alcohol consumption when it comes to cancer.

The introduction of alcohol labelling is also strongly supported by the public opinion in Ireland, as shown both by opinion polls that have been conducted, as well as the fact that the proposal about Alcohol labelling has been adopted by the Irish parliament. As also mentioned by Alcohol Action Ireland, a large majority of people in Ireland agree that alcohol-related harm is a paramount challenge and therefore support measures such like introducing health warnings to reduce alcohol-related harm.

Alcohol industry conflict of interest

Increased alcohol consumption leads to increased negative health and development impacts, but also to increased sales for the alcohol industry, placing public health and development interests in an inherent and direct conflict with corporate interests.

Movendi International is curating a weekly updated database with key examples from around the world illustrating the fundamental conflict of interest that the alcohol industry has.

The alcohol industry relies on under-age and heavy alcohol use for major parts of their profits.

The alcohol industry lobbies to block, derail, undermine, or destroy public health focused alcohol policy solutions.

There has been significant opposition by the global alcohol industry to Ireland's progressive public health initiative to protect Irish people and communities from alcohol harm. What is good for the people is bad for the alcohol industry's profits.

This is true in Ireland as it is true in many other countries:

1. The alcohol industry has attempted to derail the pregnancy warning labeling in Australia and New Zealand;
2. The alcohol industry has interfered against and halted a scientific study about the effectiveness of cancer warning labels in Yukon, Canada;
3. The alcohol industry has blocked and is undermining alcohol pregnancy warning labels in France; and
4. The alcohol industry misleads the public about the fact that alcohol causes cancer.
5. The alcohol industry deploys sophisticated strategies to downplay the cancer risk of their own products.
6. Alcohol industry messaging fuels doubt about the risks and harms linked to alcohol.
7. The alcohol industry uses products labels to confuse people about the real effects and harm of alcohol.

We are concerned about the lobbying of the alcohol industry against this proposal.

The alcohol industry is interfering in the policy process and undermining public health policy development of a sovereign member state.

Public health policy, such as the current health warnings proposal, should be protected against interference from alcohol companies and their front groups. They are first and foremost protecting their private profit interests rather than the public interest in health promotion.