**Association of Providers of Addiction Services, z.s.** **(APAS) - feedback on the Notification of Draft Regulations Under Section 12 of the Public Health (Alcohol) Act 2018 in Ireland**

The Association is an umbrella organization bringing together 27 key organizations providing addictological services for persons at risk of addictive behaviour in Czech Republic. It is a non-governmental, non-profit, professional organization.

**With this submission, APAS would like to express its support for the Alcohol Warning Labels as proposed in the Notification of Draft Regulations Under Section 12 of the Public Health (Alcohol) Act 2018, TRIS NOTIFICATION 2022/441/IRL (Ireland). We believe it is crucial to pave the way for alcohol health warning regulations, and to advance health literacy on alcohol related effects.**

In relation to the proposed measure, APAS would like to provide the following information on the regulation of alcohol warning labels in the EU and the Czech Republic.

1. **Report on alcohol law in the Czech Republic,** [**Labelling of alcoholic beverages**](https://www.drogy-info.cz/data/obj_files/33590/1128/Zprava_o_alkoholu_v_CR_2021_fin.pdf) **(pages 19 and 38)**

The labelling of alcoholic products is regulated by Act No. 110/1997 Coll., on Foodstuffs and tobacco products and amending and supplementing certain related acts, in conjunction with Regulation (EU) No 1169/20115 of the European Parliament and of the Council. The labelling of specific alcoholic beverages is addressed by Decree 248/2018 on requirements for beverages, fermentation vinegar and yeast, Regulation (EU) No 2019/787 on the definition, description, presentation and labelling of spirit drinks, the use of names of spirit drinks in the presentation and labelling of other foodstuffs, the protection of geographical indications of spirit drinks, the use of alcohol and spirits of agricultural origin in the production of alcoholic beverages and the repeal of Regulation (EC) No 110/2008. The labelling of alcohol itself, which is intended to curb the illegal alcohol market, is regulated by Act No 307/2013 on compulsory labelling of alcohol.

The labelling of alcoholic beverages is governed by EU regulations for spirits, for wine and by Czech regulations, in particular Decree No 248/2018 Coll., on requirements for beverages, fermentation vinegar and yeast, and for wines made from vines by Act No 321/2004 Coll., on viticulture and winemaking. Only the name of the category (type), group or subgroup of the beverage defined by these regulations, such as draught beer, lager beer, quality wine, table fruit wine, rum, whisky, vodka, mead, must be used for the designation. For example, spirits must be labelled with the legal name of the categories of spirits defined in the Annexes to Regulation (EU) 2019/787. If a spirit drink does not meet the criteria of a given category, it must be labelled with the name "spirit drink". This is also the case for the so-called "domestic rum", which does not meet the criteria for the category "rum" according to the European Directive and therefore must be labelled as "spirit" and furthermore with the group name according to Decree No 248/2018 Coll. as "tuzemak" or "tuzemský".

All consumer packaging of alcoholic beverages must indicate the alcohol content. This shall be expressed as a number with a maximum of one decimal place. This shall be followed by the symbol '% vol.'. or "% vol." and may be preceded by the word "alcohol" or the abbreviation "alk." or "alc."

Health claims may not be made on alcoholic beverages with an ethanol content of more than 1,2 % vol. Only nutrition claims relating to low alcohol content or reduced alcohol content or energy value shall be permitted on beverages with an alcohol content of more than 1,2 %. The 'low-alcohol' label for beverages above 0,5 % vol. and below 1,2 % vol. is not addressed at European level and is not currently addressed in the Czech Republic.

According to Article 16(4) of Regulation (EU) No 1169/2011, the indication of a list of ingredients or mandatory nutrition information is not yet mandatory for alcoholic beverages above 1,2 % volume. Some Member States require a list of ingredients for all alcoholic beverages placed on the market, some do not. In the Czech Republic, alcoholic beverages produced in the Czech Republic are obliged to state the ingredients (Article 6(1)(b) of Act No 110/1997 Coll.), while imported alcoholic beverages are not. However, a number of foreign producers voluntarily state the composition and nutritional values.

For alcoholic beverages, nutrition labelling is currently on a voluntary basis, regardless of whether they are produced in the Czech Republic or in another EU Member State. If nutrition values are provided, they must be provided in accordance with Regulation (EU) No 1169/2011. According to Article

30(4) of that Regulation, it is sufficient to limit the indication of the nutrition declaration to the indication of the energy value.

Health warnings about the risks and harms of alcohol (similar to tobacco products) are not part of the labelling of alcoholic beverages under EU or national rules. Previous efforts to introduce health warnings on alcoholic beverage packaging at EU level have met with resistance, particularly from those Member States that are major producers of alcoholic beverages, including the Czech Republic.51 However, in February 2021, the European Commission presented a European Cancer Action Plan which includes the introduction of health warnings and consumer information on the composition of

and nutritional information

1. **Summary Report on addictions in the Czech Republic, 2021,** [**Health warnings about the risks of alcohol consumption interventions**](https://www.drogy-info.cz/data/obj_files/33592/1131/Souhrnna_zprava_o_zavislostech_2021_fin.pdf) **(page 56)**

Warnings about the risks and harms of alcohol on alcoholic beverage packaging are not mandatory in the Czech Republic. The ethanol content by volume must be indicated.

It is a legal obligation for all health professionals to carry out brief interventions. However, only half of physicians perform them for at-risk or heavy alcohol users. The situation has not improved in recent years.