

# EPHA Contribution to TRIS Notification 2024/0388/SE: Draft Act Amending the Alcohol Act

European Public Health Alliance (EPHA)

Brussels, 3rd October 2024

## The European Public Health Alliance (EPHA)

EPHA is a non-profit organisation that represents public health NGOs, patient groups, health professionals, and disease groups at the European level. EPHA advocates for better health for everyone in Europe by influencing policies and decision-making processes that impact health, particularly those that address health inequities and contribute to a healthier environment. EPHA works on a wide range of health issues including chronic diseases, access to medicines, and health system reforms, aiming to bring together different stakeholders to ensure that health remains a priority on the political agenda, fostering a comprehensive approach to public health and promoting the well-being of all in Europe.

In light of the recent proposals concerning the Swedish Alcohol Act, EPHA stands in solidarity with IOGT-NTO, a valued member of our alliance, in opposing these legislative changes that could undermine public health efforts not only in Sweden but throughout the European Union.

# I. Alignment with EU Treaties and Obligations

Sweden's current regulatory framework, which limits access to alcohol through a state monopoly, has effectively reduced such harms by controlling sales and ensuring responsible distribution. Altering this framework could lead to a resurgence in alcohol-related issues, including increased consumption among vulnerable populations, particularly youth. Moreover, the proposed amendments contradict the evidence-based direction of EU public health initiatives, particularly Europe's Beating Cancer Plan. By increasing the availability of alcohol, this legislation undermines the Plan's efforts to reduce both affordability and accessibility, potentially leading to higher consumption and associated health risks, including cancer.

The proposed legislation to permit farm gate sales of alcohol in Sweden raises significant concerns regarding public health and appears to contravene the spirit of the Treaty on European Union (TEU) and the Treaty on the Functioning of the European Union (TFEU).

- Article 3 of the TEU emphasises the Union's commitment to peace, its values, and the wellbeing of its peoples.
- Article 120 of the TFEU dictates that member states should conduct their economic policies to support the Union's objectives, including human health protection. The proposed legislative changes seem to diverge from these fundamental principles, particularly concerning the wellbeing and health of citizens.
- Article 168 of the TFEU stipulates that a high level of human health protection must be ensured
  in the definition and implementation of all EU policies and activities. The EU complements
  national health policies directed at improving public health, preventing physical and mental
  illnesses, and obviating sources of danger to human health.

## II. Evidence-Based Policy Recommendations

EPHA advocates for evidence-based policies that prioritise public health over economic interests. The current proposal, which aims to facilitate farm gate sales, lacks sufficient justification under EU law and



fails to demonstrate how such changes would align with public health objectives. The European Court of Justice has historically emphasised the need for any trade barriers to be justified on legitimate grounds, including public health considerations, as seen in the Deutsches Weintor case<sup>1</sup>, for example. However, allowing broader access to alcohol through farm gate sales contradicts the very principles aimed at protecting public health.

Moreover, the OECD modelling projects a starkly worrying scenario. It predicts a loss of 1.3 years in health-adjusted life expectancy (HALE) due to alcohol consumption in Sweden between 2020 and 2050<sup>2</sup>. Moreover, the modelling forecasts a substantial reduction in GDP, estimated at 2.3% annually, attributable to alcohol-related diseases. These figures starkly illustrate the potential negative impact of increased alcohol accessibility on the Swedish economy and public health.

#### III. Breach of WHO Commitments

In a letter to the Swedish government, the WHO Europe Regional Director warned of public health risks from deregulating alcohol sales, such as increased alcohol consumption and healthcare burdens. This aligns with the European Framework for Action on Alcohol 2022-2025, advocating for state-operated alcohol outlets to minimise alcohol-related harm. This framework, and insights from global research initiatives like the "Alcohol: No Ordinary Commodity" project, emphasise the effectiveness of state-operated alcohol outlets in mitigating alcohol-related health and social issues. The full letter is provided below for reference [Appendix 1]

#### **Call to Action**

In light of these concerns, EPHA calls upon the European Commission to:

- Reject the proposed amendments to the Swedish Alcohol Act that would permit farm gate sales.
- **Support measures** that reinforce existing public health frameworks aimed at reducing alcohol-related harm.
- **Encourage member states** to adhere to evidence-based practices that prioritise the health and safety of their populations.

By maintaining robust regulatory frameworks like Sweden's current alcohol policy, we can continue to protect public health while ensuring compliance with EU law. EPHA remains committed to advocating for policies that safeguard the well-being of all Europeans and urges all stakeholders to consider the broader implications of legislative changes on public health.

From a broader European perspective, increasing the availability of alcohol in Sweden through farm gate sales contradicts proven public health strategies that aim to limit access in order to reduce alcohol-related harm. Studies across Europe have consistently shown that stricter control over alcohol sales correlates with lower rates of alcohol-related injuries, diseases, and deaths.

Alessandro Gallina, PhD Senior Policy Manager

European Public Health Alliance (EPHA)

<sup>&</sup>lt;sup>1</sup> CURIA - Documents (europa.eu)

<sup>&</sup>lt;sup>2</sup> OECD Public Health Explorer





[Appendix 1]



ORGANISATION MONDIALE DE LA SANTÉ WELTGESLINDHEITSORGANISATION REGIONAL OFFICE FOR EUROPE BUREAU RÉGIONAL DE L'EUROPE REGIONALBÜRO FÜR EUROPA ЕВРОПЕЙСКОЕ РЕГИОНАЛЬНОЕ БЮРО

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Date: 18 July 2023

Mr Jakob Forssmed Ministry of Health and Social Affairs The Government Offices SE-103 33 Stockholm Sweden

### Dear Sir,

At the outset, let me congratulate Sweden on its actions in taking forward evidence-based alcohol policies, including population-level measures with a focus on limiting access to alcohol through the government-owned retail monopoly system Systembolaget. Alcohol consumption and its related burden of disease continue to be responsible for some of the greatest health and societal challenges faced by Member States in the WHO European Region, especially the Member States of the European Union (EU). It is clear that there is no room for complacency in holding firm on evidence-based alcohol policy measures.

With this in mind, I am concerned by reports of discussions that may prompt changes in the current alcohol retail monopoly model. I urge you to consider the public health risks that would be associated with the suggested deregulation through allowing farm sales of alcohol, and the weakening of the monopoly that they will bring. There is compelling evidence to suggest that weakening the government alcohol retail monopoly will result in increased alcohol consumption and harm, with serious public health consequences, leading, for example, to a substantial increase in healthcare costs and pressures on health systems.

The European Framework for Action on Alcohol 2022–2025, which was unanimously adopted by all 53 Member States in 2022, urges Member States to prioritize actions to regulate availability of alcohol, including considering the provision of state-operated alcohol outlets. As emphasized in international research and rating systems such as the global Alcohol: No Ordinary Commodity project, government retail monopoly stores are effective in reducing alcohol availability and health and social problems related to alcohol use.

The WHO Regional Office for Europe stands by you in this important and challenging period and is ready to provide support and advice to Sweden to ensure continued commitment to effective alcohol control policies.

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Yours very truly.

Dr Hans Henri P. Kluge Regional Director