

CHAPTER 1. INTRODUCTION

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The European Union (EU) is the region of the world where, by far, the most alcohol is produced and consumed. Data show that EU citizens aged 15 years or older drink around 12-13 litres of pure alcohol per year on average. This is an average daily consumption of 27-29 grams of pure alcohol, an amount that is around 3 standard drinks per day in most European countries. 'Alcohol is not only our favourite drug, but also our most dangerous drug' (the ALICE RAP project, 2012).

EU citizens drink double than the world's average, and this has an important negative impact on the health of citizens and on the European economy. It has been estimated that, in 2004, almost 110,000 men and 28,000 women (aged between 15 - 64 years) died prematurely of alcohol-attributable causes (it is estimated that, over the same time, 15,000 male and 3,000 female deaths were prevented due to alcohol's effect, when consumed in low doses, in reducing the risk of ischaemic events). The burden alcohol poses to European society in terms of mortality, morbidity and disability is enormous, as shown by the more than four million Disability Adjusted Life Years (DALYs) attributable to alcohol in 2004 (15% of all DALYs in men and 4% in women) (Rehm, 2013). On top of that, social costs attributable to alcohol are well underestimated, since they do not take fully into account the costs associated to people other than the drinker, such as children, partners and colleagues.

During the last decade there have been European initiatives on alcohol, including the European Commission 'EU strategy to support Member States in reducing alcohol-related harms' (European Commission, 2006) and the WHO European Alcohol Action Plan to reduce the harmful use of alcohol 2012-2020 (WHO Regional Office for Europe, 2011). These are supported at the global level with the WHO strategy to reduce the harmful use of alcohol (2010) and the WHO 2008-2013 Action Plan for the Global Strategy for the Prevention and Control of Non-communicable Diseases (WHO, 2008). At the same time, per capita alcohol consumption has been falling in the European Union as a whole, with the greatest reductions occurring in southern Europe and to a lesser extent in western Europe. Between 1990 and 2010, per capita consumption in the 27 EU countries as of 2007 declined by 12.4% (WHO, 2013).

It is in this context that the AMPHORA project was launched in 2008, with the aim to promote the creation of an Alcohol Public Health Research Alliance that could influence the debate on alcohol policy at a European level. The most relevant evidence (Anderson et al 2009; Babor et. al, 2010; Anderson et al. 2012) shows the importance to act on price and availability. Institutions like the World Economic Forum and the World Health Organization (2011) have stated clearly that increasing price, reducing availability and banning advertising are the best buys to decrease alcohol-related problems.

This ebook with the key findings of the AMPHORA project is timely, because a new EC strategy on alcohol is under discussion.

AMPHORA is the first research project on alcohol from a public health perspective that has ever been co-funded by the European Commission through the Seventh Framework Program of Research. With 33 partner institutions from 12 EU countries, counterparts and affiliated organisations from all 27 member states and a budget of €4 million, the AMPHORA project has

developed, during the past 4 years, intensive research to create scientific knowledge in areas where this knowledge can have an impact on alcohol policy. Drinking venues, alcohol marketing, treatment availability, surrogate alcohols, monitoring systems and policy infrastructures are some of the areas studied. AMPHORA has studied the wide majority of action areas identified in the WHO Europe Alcohol Action Plan, and this also means that most of the priority areas defined by the EC Strategy on Alcohol have also been studied.

In all cases, a real European approach has been taken, and the work carried out in all our studies has been developed in a variety of EU countries and by researchers from those countries. In fact, the following chapters will give the reader an overview of the differences and commonalities between EU countries in relation to alcohol. It is clear from our data that Europe is still far from homogenization concerning alcohol policies, and it is also clear that differences arise from cultural, social and economic differences between countries.

Nevertheless, it is also clear that those differences are narrowing and that through a project like AMPHORA we get to know them much better. Moreover, those differences offer a unique opportunity to learn from each other and choose the 'best buys' out of them.

AMPHORA has put together a relevant number of scientists, setting the basis for a Public Health Research Alliance. It is true that the core group of researchers had already been working together in previous studies, but AMPHORA offered the opportunity to enlarge this group to cover most of the EU countries, and has also provided excellent opportunities for networking and for the development of new and interesting projects, such as ODHIN (www.odhinproject.eu) and ALICE RAP (www.alicerap.eu).

But the aim of AMPHORA is not just to do research, but to have an impact on policy, and this is why the project has put an emphasis in the science-policy debate. Through the life of the project we have had joint yearly meetings with WHO national counterparts and relevant national policy makers in Madrid, Zurich and the final meeting in Stockholm, framed as the Fifth European Alcohol Policy Conference, and we think this formula has promoted a very much needed debate between science and policy makers that needs to continue far beyond the life of our project.

This ebook is a summary of our research, and it has been organized in a way that it can fit the needs for the science-policy debate. The reader can easily go through each chapter. They are organized in a simple way: introduction, what we did, what we found, what does it mean and take home messages. It intends to provide the busy reader with a quick and clear vision of each of the topics covered. A more in depth vision can be obtained through the references and at the project's website (www.amphoraproject.net).

This ebook presents a summary of a relevant amount of work conducted during the last four years by a real multidisciplinary and multinational team. Nevertheless, we must acknowledge there is still a lot to be done. In the context of the financial and economic crisis facing the European Union, it is even more important to reduce the burden that alcohol poses to society in order to keep people healthy, and thus the EU productive and competitive. Good alcohol policy improves the sustainability and efficiency of social and health care systems, so we need to identify more clearly which factors at an EU level are limiting the implementation of efficient and innovative alcohol policies.

Conflict of Interest Statement

Peter Anderson has no conflicts of interest to declare.

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