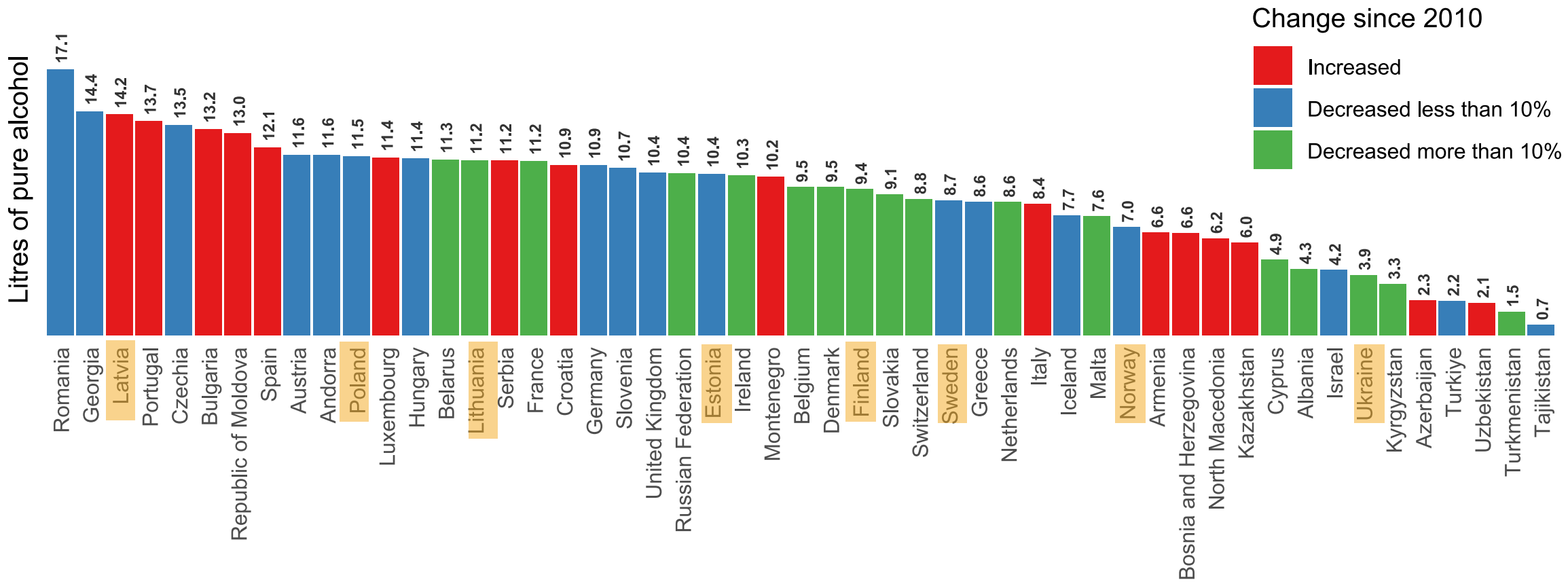
Updates from the Alcohol, Illicit Drugs and Prison Health team at WHO/Europe

NDPHS Alcohol and Substance Use Expert Group meeting, 17th June 2026

World Health Organization
European Region

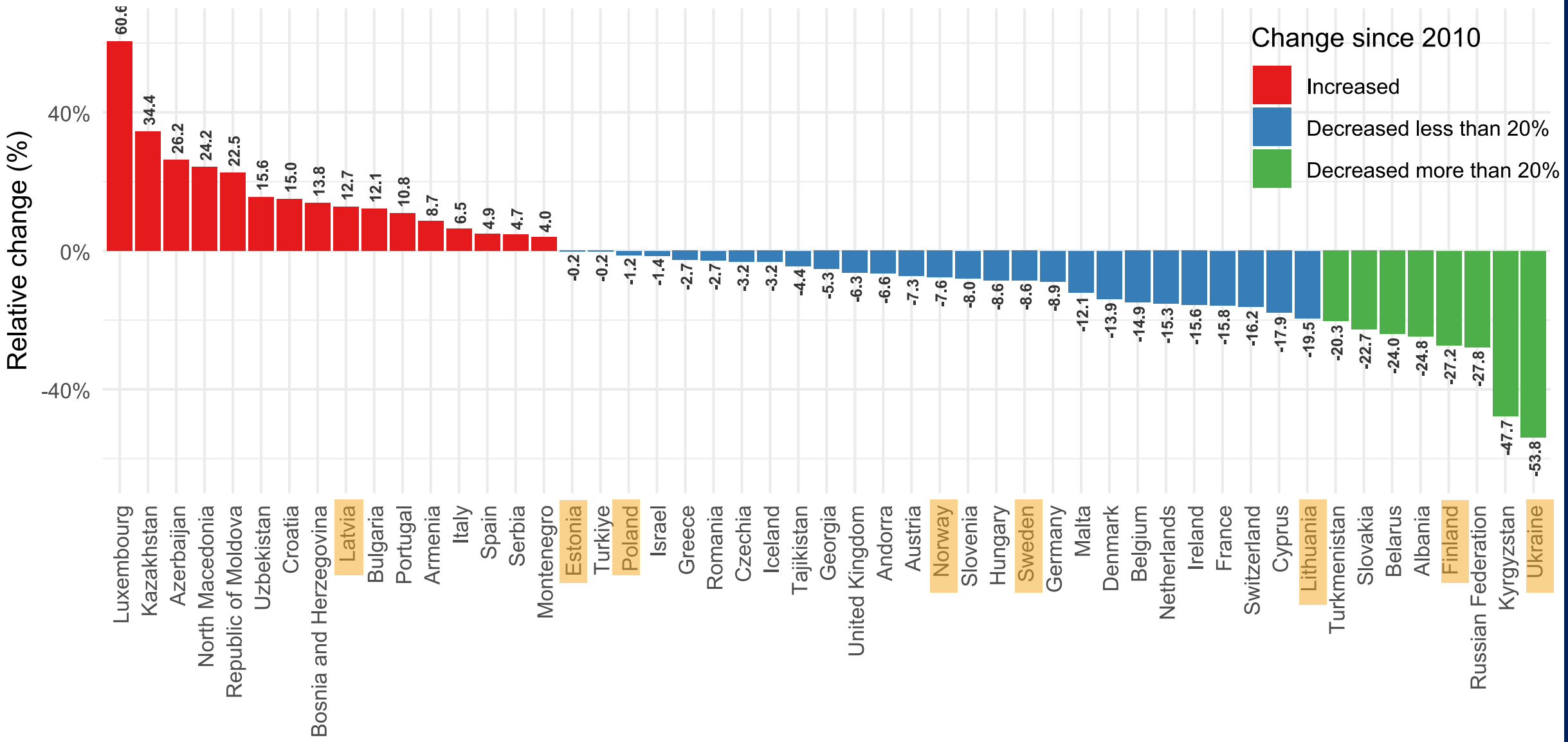
SDG Indicator 3.5.2 (WHO European Region, 2024)
Total alcohol per capita consumption in the adult population (15+), 3-year average estimates



World Health Organization
European Region

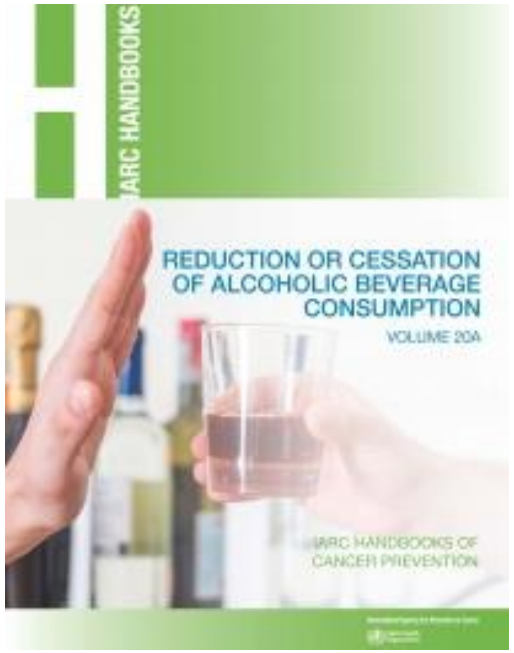
The new APC estimates up to 2024 are accessible on the UN SDG database:
https://unstats.un.org/sdgs/dataportal

SDG Indicator 3.5.2 (WHO European Region, 2024)
Total alcohol per capita consumption in the adult population (15+), 3-year average estimates



IARC Handbooks on alcohol and cancer

- The IARC Handbooks (Volumes 20A & 20B), developed as part of the EVID-ACTION project, provide the strongest global synthesis of what works.
- This work directly supports evidence-informed EU policymaking.



"There is sufficient evidence that alcohol cessation reverses alcohol-related carcinogenic mechanisms"

IARC Handbook Volume 20A

[Launch of the IARC Handbook for Cancer Prevention (Volume 20B) and EVID-ACTION multistakeholder meeting]

evidaction

WHO/EU Evidence into Action Alcohol Project

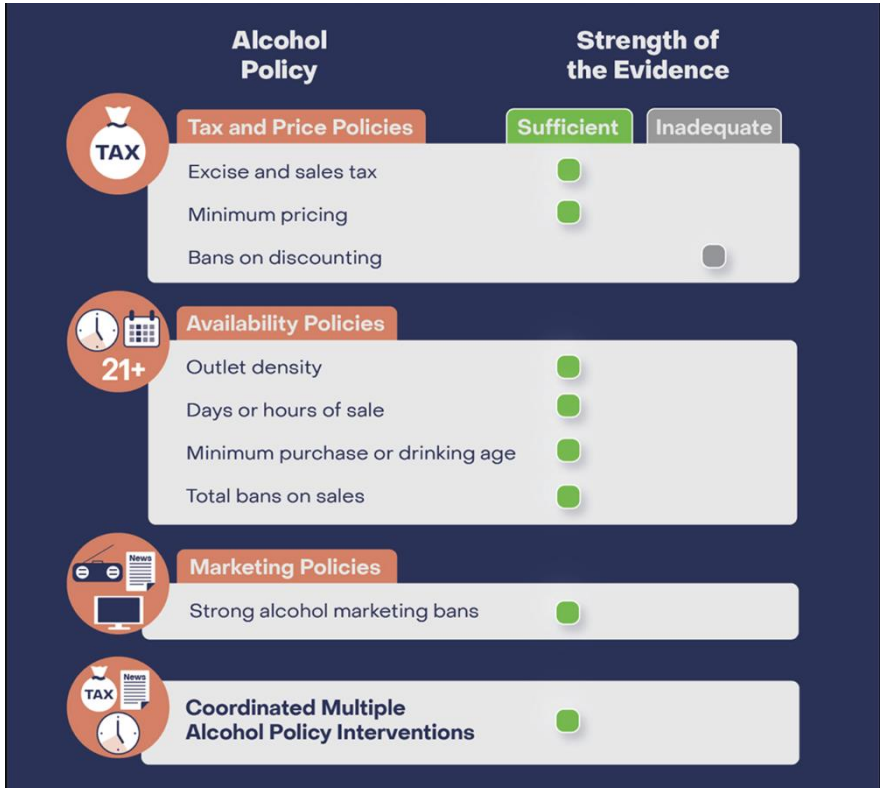
World Health Organization European Region

Co-funded by the European Union

IARC handbooks on alcohol and cancer – main findings

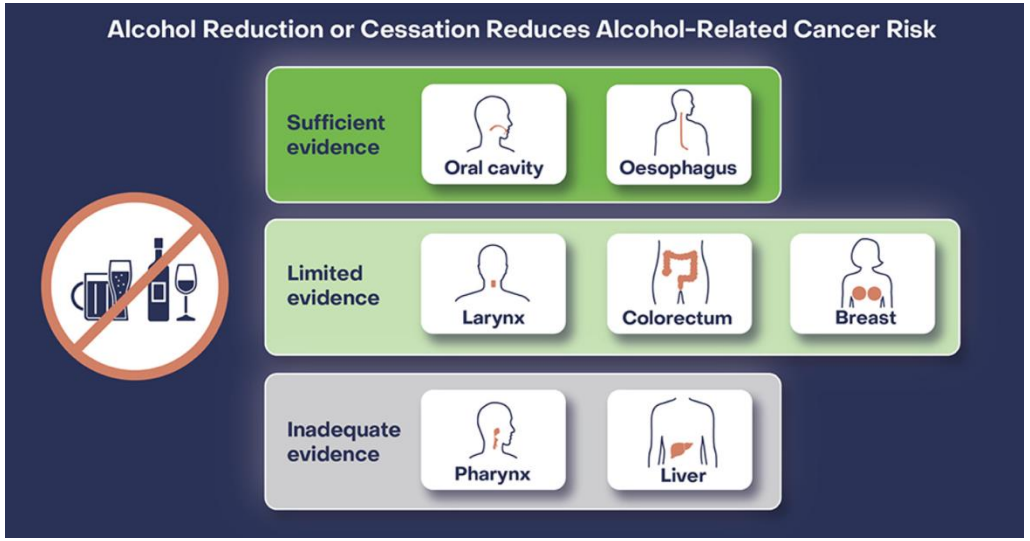
Volume 20B

Population-level alcohol policy interventions → Reduction of alcohol consumption



Volume 20A

Reduction or cessation of alcohol consumption → Cancer incidence



evidaction

WHO/EU Evidence into Action Alcohol Project

World Health Organization European Region

Co-funded by the European Union

Alcohol Labelling: the ongoing momentum in Europe

Dedicated WHO website on labelling:

[Raising awareness on alcohol harms through labelling]

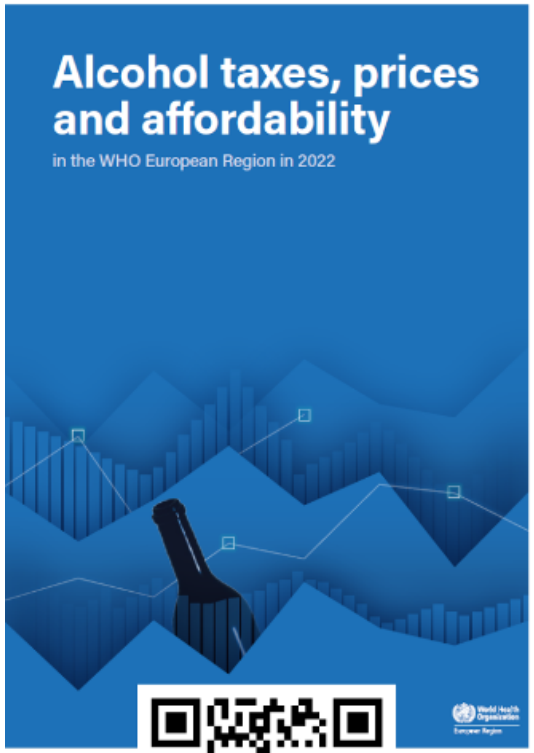
WHO/Europe alcohol labelling report:

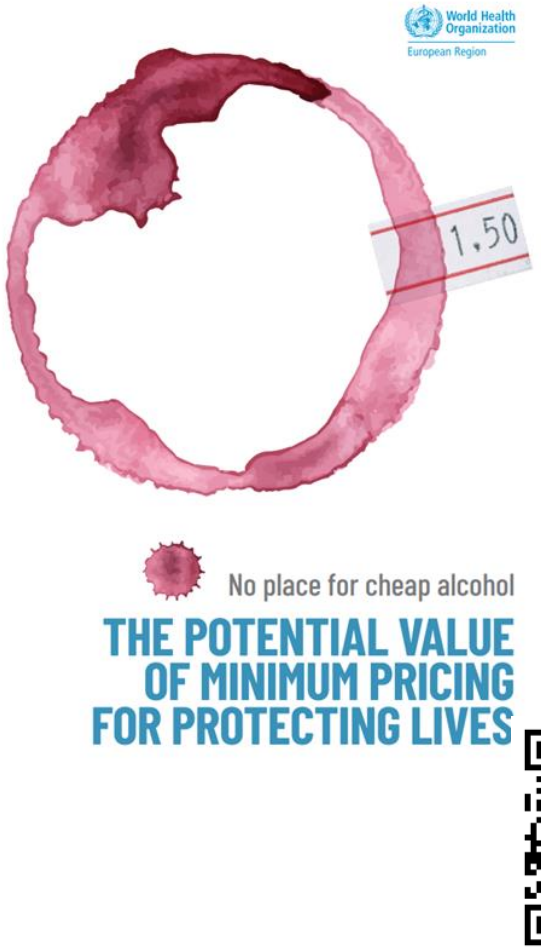
evidaction.
WHO/EU
Evidence into Action
Alcohol Project

World Health Organization
European Region

Co-funded by the European Union

Alcohol taxation and pricing





evidaction

WHO/EU Evidence into Action Alcohol Project

World Health Organization European Region

Co-funded by the European Union

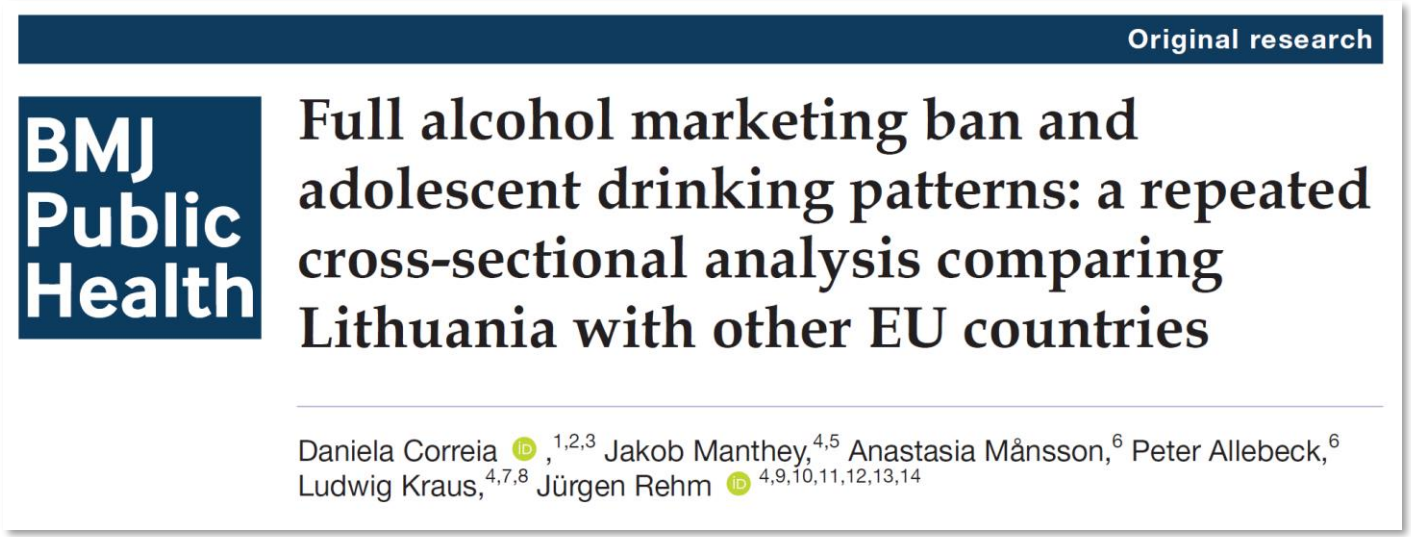
WHO resource platform for screening and brief interventions (in development)

Spotlight on alcohol marketing – from research to policy

World Health Organization

European Region

HOW WE STUDIED THE IMPACT



Evaluates trends in intoxication frequency among Lithuanian adolescents (aged 15–16) compared with peers in five EU countries without a comprehensive marketing ban

Why adolescents?

Evidence for marketing effects is strongest in this group; they are disproportionately exposed online; and early drinking patterns tend to persist into adulthood.

World Health Organization
European Region

MAIN FINDING

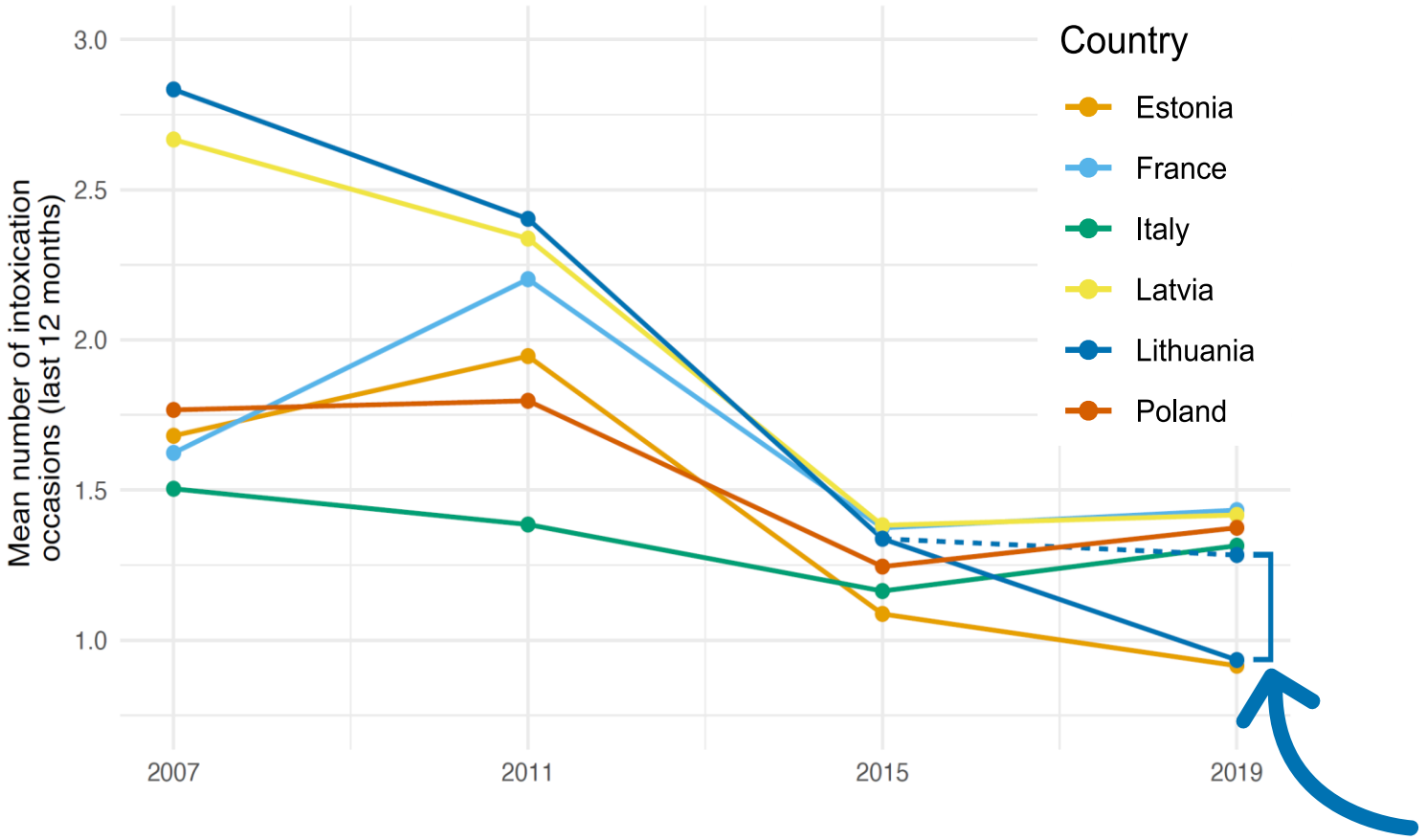


Figure 2. Estimated impact of Lithuania's 2018 alcohol marketing ban on mean frequency of adolescent intoxication, based on European School Survey Project on Alcohol and Other Drugs (ESPAD) data (n=84 189).

-35% frequency of intoxication

(IRR = 0.65, 95% CI: 0.56–0.77)

after accounting for secular trends, individual characteristics, alcohol availability, and other control policies

Also associated with **decrease in general binge drinking** (-18%) **and alcohol use in general** (-12%)

Had the ban not been implemented, intoxication rates in 2019 in Lithuania would have been much higher!

- The ban's **impact was immediate** — visible within just over a year of implementation — and may strengthen over time as future cohorts grow up with little or no exposure to alcohol marketing.

- Significant effects were observed across all drinking outcomes (intoxication frequency and prevalence, alcohol use, binge drinking), suggesting the **ban shifted adolescents' overall drinking patterns**, not just one behaviour.

- The **effect was the highest in reducing the likelihood of drinking to intoxication**, rather than lowering overall drinking prevalence — consistent with how algorithmic digital marketing reinforces heavy drinking patterns specifically

- When modelled as a binary variable (full ban vs. any lesser restriction), the estimated reduction in adolescent intoxication rose to 44% — compared with 35% in the continuous model — consistent with **most of the effect being driven by the step from partial to full restrictions.**

- **Partial restrictions may create adaptive environments**: industry shifts marketing to unregulated channels, platforms, or time slots, potentially leaving net exposure unchanged or increased

  → Evidence supports this: when the Netherlands restricted alcohol advertising to late-night hours, exposure among high-risk adolescents increased, despite reductions in younger children

Belgium's Royal Decree concerning advertising for alcoholic beverages

- At the moment this draft Decree is notified through the TRIS procedure (end of standstill 01/07/2026 (extended to 01/10/2026))

- Decree aims at:
  - banning the **advertising of alcoholic beverages** in media that **primarily target minors**;
  - introducing a **ban on offering alcoholic beverages free of charge**, except when purchasing an alcoholic beverage and during tastings;
  - imposing an obligation to include a **health warning in all advertising for alcoholic beverages** (with a few exceptions). The health warning will be: "**Alcohol is harmful for health**".
  - enshrining **the investigation, detection, sanctioning and prosecution of infringements** of the current draft decree.

Opposition from other Member States (Romania, Slovakia providing detailed opinions), and the alcohol/advertising industry (https://technical-regulation-information-system.ec.europa.eu/en/notification/27792)

World Health Organization
European Region

Questions?

kokoled@who.int

World Health Organization

European Region