



## YOUNG PEOPLE ALCOHOL AND

STOCKHOLM 19–21 FEBRUARY 2001

### **DECLARATION ON YOUNG PEOPLE AND ALCOHOL**

*(Adopted in Stockholm on 21 February 2001)*

*The European Charter on Alcohol, adopted by Member States in 1995, sets out the guiding principles and goals for promoting and protecting the health and wellbeing of all people in the Region. This Declaration aims to protect children and young people from the pressures to drink and reduce the harm done to them directly or indirectly by alcohol. The Declaration reaffirms the five principles of the European Charter on Alcohol.*

1. All people have the right to a family, community and working life protected from accidents, violence and other negative consequences of alcohol consumption.
2. All people have the right to valid impartial information and education, starting early in life, on the consequences of alcohol consumption on health, the family and society.
3. All children and adolescents have the right to grow up in an environment protected from the negative consequences of alcohol consumption and, to the extent possible, from the promotion of alcoholic beverages.
4. All people with hazardous or harmful alcohol consumption and members of their families have the right to accessible treatment and care.
5. All people who do not wish to consume alcohol, or who cannot do so for health or other reasons, have the right to be safeguarded from pressures to drink and be supported in their non-drinking behaviour.

#### **Rationale**

Health and wellbeing are a fundamental right of every human being. Protecting and promoting the health and wellbeing of children and young people are central to the United Nations Convention on the Rights of the Child and a vital part of WHO's HEALTH21 policy framework and of UNICEF's mission. In relation to young people and alcohol, WHO's European Alcohol Action Plan 2000–2005 identifies the need to

provide supportive environments in the home, educational institutions, the workplace and local community, to protect young people from the pressures to drink and to reduce the breadth and depth of alcohol-related harm. Further, a major opportunity for putting youth and alcohol issues on the policy agenda is approaching as governments worldwide prepare for the United Nations General Assembly Special Session on Children, to be held in September 2001, with UNICEF serving as secretariat.

### **Youth environments**

The globalization of media and markets is increasingly shaping young people's perceptions, choices and behaviours. Many young people today have greater opportunities and more disposable income but are more vulnerable to selling and marketing techniques that have become more aggressive for consumer products and potentially harmful substances such as alcohol. At the same time, the predominance of the free market has eroded existing public health safety nets in many countries and weakened social structures for young people. Rapid social and economic transition, civil conflict, poverty, homelessness and isolation have increased the likelihood of alcohol and drugs playing a major and destructive role in many young people's lives.

### **Drinking trends**

The main trends in the drinking patterns of young people are greater experimentation with alcohol among children and increases in high-risk drinking patterns such as "binge drinking" and drunkenness, especially among adolescents and young adults, and in the mixing of alcohol with other psychoactive substances (polydrug use). Among young people there are clear links between the use of alcohol, tobacco and illegal drugs.

### **The cost of youth drinking**

Young people are more vulnerable to suffering physical, emotional and social harm from their own or other peoples' drinking. There are strong links between high-risk drinking, violence, unsafe sexual behaviour, traffic and other accidents, permanent disabilities and death. The health, social and economic costs of alcohol-related problems among young people impose a substantial burden on society.

### **Public health**

The health and wellbeing of many young people today are being seriously threatened by the use of alcohol and other psychoactive substances. From a public health perspective, the message is clear: there is no scientific evidence for a safe limit of alcohol consumption, and particularly not for children and young adolescents, the most vulnerable groups. Many children are also victims of the consequences of drinking by others, especially family members, resulting in family breakdown, economic and emotional poverty, neglect, abuse, violence and lost opportunities. Public health policies concerning alcohol need to be formulated by public health interests, without interference from commercial interests. One source of major concern is the efforts made by the alcohol beverage industry and hospitality sector to commercialize sport and youth culture by extensive promotion and sponsorship.

## DECLARATION

By this Declaration, we, participants in the WHO European Ministerial Conference on Young People and Alcohol, call on all Member States, intergovernmental and nongovernmental organizations and other interested parties to advocate for and invest in the health and wellbeing of young people, in order to ensure that they enjoy a good quality of life and a vibrant future in terms of work, leisure, family and community life.

Alcohol policies directed at young people should be part of a broader societal response, since drinking among young people to a large extent reflects the attitudes and practices of the wider adult society. Young people are a resource and can contribute positively to resolving alcohol-related problems.

To complement the broader societal response, as outlined in the European Alcohol Action Plan 2000–2005, it is now necessary to develop specific targets, policy measures and support activities for young people. Member States will, as appropriate in their differing cultures and social, legal and economic environments:

- 1. Set the following targets** that should be achieved by the year 2006:
  - (a) reduce substantially the number of young people who start consuming alcohol;
  - (b) delay the age of onset of drinking by young people;
  - (c) reduce substantially the occurrence and frequency of high-risk drinking among young people, especially adolescents and young adults;
  - (d) provide and/or expand meaningful alternatives to alcohol and drug use and increase education and training for those who work with young people;
  - (e) increase young people's involvement in youth health-related policies, especially alcohol-related issues;
  - (f) increase education for young people on alcohol;
  - (g) minimize the pressures on young people to drink, especially in relation to alcohol promotions, free distributions, advertising, sponsorship and availability, with particular emphasis on special events;
  - (h) support actions against the illegal sale of alcohol;
  - (i) ensure and/or increase access to health and counselling services, especially for young people with alcohol problems and/or alcohol-dependent parents or family members;
  - (j) reduce substantially alcohol-related harm, especially accidents, assaults and violence, and particularly as experienced by young people.

**2. Promote a mix of effective alcohol policy measures** in four broad areas:

- **Provide protection:** Strengthen measures to protect children and adolescents from exposure to alcohol promotion and sponsorship. Ensure that manufacturers do not target alcohol products at children and adolescents. Control alcohol availability by addressing access, minimum age and economic measures, including pricing, which influence under-age drinking. Provide protection and support for children and adolescents whose parents and family members are alcohol-dependent or who have alcohol-related problems.
- **Promote education:** Raise awareness of the effects of alcohol, in particular among young people. Develop health promotion programmes that include alcohol issues in settings such as educational institutions, workplaces, youth organizations and local communities. These programmes should enable parents, teachers, peers and youth leaders to help young people learn and practise life skills and address the issues of social pressure and risk management. Furthermore, young people should be empowered to take responsibilities as important members of society.
- **Support environments:** Create opportunities where alternatives to the drink culture are encouraged and favoured. Develop and encourage the role of the family in promoting the health and wellbeing of young people. Ensure that schools and, where possible, other educational institutions are alcohol-free environments.
- **Reduce harm:** Promote a greater understanding of the negative consequences of drinking for the individual, the family and society. Within the drinking environment, ensure training for those responsible for the serving of alcohol and enact/enforce regulations to prohibit the sale of alcohol to minors and intoxicated persons. Enforce drink-driving regulations and penalties. Provide appropriate health and social services for young people who experience problems as a result of other people's or their own drinking.

**3. Establish a broad process to implement the strategies and achieve the targets:**

- **Build political** commitment by developing comprehensive countrywide plans and strategies with young people, with targets to reduce drinking and related harm, particularly in the different segments of the youth population, and evaluate (with young people) progress towards them.
- **Develop partnerships with young people especially**, through appropriate local networks. Look to young people as a resource and promote opportunities for young people to participate in shaping the decisions that affect their lives. Special emphasis should be placed on reducing inequalities, particularly in health.
- **Develop a comprehensive approach** to addressing the social and health problems experienced by young people in connection with alcohol, tobacco, drugs and other related issues. Promote an intersectoral approach at national and local level, to ensure a sustainable and more effective policy. When promoting the

health and wellbeing of young people, take into consideration their varying social and cultural backgrounds, and particularly those of groups with special needs.

- **Strengthen international cooperation** among Member States. Many of the policy measures need to be reinforced at the international level, if they are to be fully effective. WHO will provide leadership by establishing appropriate partnerships and utilizing its collaborative networks across the European Region. In this regard, cooperation with the European Commission is of particular relevance.

The WHO Regional Office, through its European Alcohol Information System, will monitor, evaluate (with the involvement of young people) and report on progress in the European Region towards meeting the commitments made in this Declaration.