

Jillian van Turnhout, Vice President, European Economic and Social Committee
Building Capacity for Action Conference, Alcohol and Rights
Friday 4 April 2008

Introduction

Firstly I would like to briefly introduce myself. I am Vice President of the European Economic and Social Committee. The EESC is an advisory body to the European Union and it is composed of representatives of employer organisations, trade unions and a wide range of other civil society organisations. Members of the Committee are nominated by the member states to represent the views of civil society organisations. In a time when Europe has woken up to the need to listen to its citizens, I believe that the role of the EESC as the only non-party political based EU body is more important than ever. In order to be nominated to the EESC you have to have a 'background' organisation and my day job is as Chief Executive of the Children's Rights Alliance in Ireland. I have been invited to speak here in this conference in my role as Rapporteur for the EESC on 'An EU strategy to support Member States in reducing alcohol related harm'.

I have been asked to speak here this morning about 'Alcohol and Rights' and I would like to take this issue from a perspective that I feel was touched on yesterday but not explored – the perspective of children.

I will be using the UN Convention on the Rights of the Child and the EESC Opinion on the harmful effects of Alcohol, adopted in May 2007, as my basis for what I say today. So these are not personal opinions although I do fully endorse them!

UN Convention on the Rights of the Child

The Convention on the Rights of the Child is an international agreement on the rights of children that was adopted by the United Nations General Assembly in November 1989. It entered into force as international law in 1990. It has been ratified by all but two countries in the world (the U.S.A. and Somalia), this Convention is the most widely ratified human rights treaty in history. It is also the most complete statement of children's rights ever made and provides an internationally agreed framework of minimum standards necessary for the well-being of the child to which every child and young person under 18 is entitled.

When I examined the Convention in preparation for today I thought to myself that there are so many articles contained within it that apply to this issue but I decided to limit myself to just five articles:

- **Article 1 (Definition of the child):** The Convention defines a 'child' as a person below the age of 18.

- **Article 3 (Best interests of the child):** The best interests of children must be the primary consideration in all actions concerning children.
- **Article 4 (Protection of rights):** Governments have a responsibility to take all available measures to make sure children's rights are respected, protected and fulfilled.
- **Article 6 (Survival and development):** Children have the right to live. Governments should ensure that children survive and develop healthily.
- **Article 17 (Access to information; mass media):** Children have the right to get information that is important to their health and well-being. Governments should encourage mass media – radio, television, newspapers and Internet content sources – to provide information that children can understand and to not promote materials that could harm children.

As you will appreciate I believe the UN Convention on the Rights of the Child gives us clear guidance on how we should approach the issue of harmful effects of alcohol.

Children and Alcohol

The consumption of alcohol affects and directly impacts on the lives of children. While different cultural habits related to alcohol use across Europe continue to exist, there has been a convergence of drinking patterns among young adults and children. The EESC is concerned at the increase in harmful and hazardous drinking among young adults and children in many Member States over the last ten years, in particular episodic heavy drinking known as "binge drinking". Social acceptance of a lifestyle in which alcohol is constantly present encourages these harmful drinking patterns.

This year, the surgeon general of the United States highlighted the disturbing research which indicates that "the developing adolescent brain may be particularly susceptible to long term negative consequences from alcohol use". Alcohol can damage the developing brain that involves learning and memory as well as judgement, reason, problem-solving and impulse control. This damage can be irreversible.

As well as the harmful effects of their own consumption patterns, children are also affected by the widespread harmful use of alcohol by parents, other family members and other drinkers. Growing up in a household where alcohol plays a dominant feature has a negative impact on children.

There is general consensus about the key measures that need to be taken to address the harm caused to young people by alcohol. These include: reducing children's access to alcohol; restricting the promotion of alcohol; raising awareness of the potential harmful effects of alcohol; creating early intervention programmes; developing youth appropriate treatment services; providing alcohol-free social opportunities for young people; conducting research into the effects of alcohol on children's lives, and enabling children's voices to be heard in developing programmes and policies in this area.

However, I would like to emphasize that policies and programmes aimed specifically at young people must be accompanied by initiatives and campaigns designed to change the role of alcohol in society as a whole and to break the perceived connection between alcohol use and social success.

EESC Opinion on Harmful effects of Alcohol

I would now like to turn specifically to the Opinion of the EESC and the areas where we believe action can be taken. In its Opinion adopted in May 2007 the EESC examined the situation for children and stated that Children are particularly vulnerable to harms caused by alcohol. It is estimated that 5 to 9 million children in families are adversely affected by alcohol and that alcohol is a causal factor in 16% of cases of child abuse and neglect, and that an estimated 60,000 underweight births each year are attributable to alcohol¹.

In European Commission Communication '*Towards an EU Strategy on the Rights of the Child*' the Commission already recognises the rights of the child and supports necessary action to address their basic needs. The Commission identifies children's rights as a priority and has indicated that children have a right to effective protection against economic exploitation and all forms of abuse².

The EESC has strongly supported children's rights and believes that children, due to their vulnerability and special needs, require special safeguards and care, including appropriate legal protection. The EESC has also acknowledged the important role of the family and the responsibility of Member States to assist parents in their childrearing responsibilities³.

The EESC recognises that exposure of children to harm from alcohol can have serious negative consequences for them, including neglect, poverty, social exclusion, abuse and violence, which can affect their health, education and well-being both now and in the future.

1 *Alcohol in Europe: A Public Health Perspective.*

2 Commission Communication - *Towards an EU Strategy on the Rights of the Child*, COM(2006) 367 final.

3 EESC Opinion of 13.12.2006 on *Towards an EU strategy on the Rights of the Child* (OJ n° C325 of 30.12.2006).
Rapporteur: Ms van Turnhout.

Therefore the Committee urges that the protection of children from alcohol related harm be included in the specific objectives of the proposed *EU Strategy on the Rights of the Child* in terms of setting priorities and in the consultation process.

The EESC recommends that the EU alcohol strategy adopts the definition of the child as any person below the age of eighteen years in line with the UN Convention on the Rights of the Child (UNCRC) and as acknowledged in the European Commission Communication *Towards an EU Strategy on the Rights of the Child*.

The EESC urges the Commission to encourage local community actions, given the positive research evidence-base supporting the role of such approaches in reducing underage drinking and alcohol related harm. Effective community actions combine shaping local policies and practices, supported by information and education, and involve all relevant stakeholders⁴.

The EESC urges the Commission to acknowledge the WHO European Charter on Alcohol⁵ adopted by all EU Member States in 1995 and in particular the ethical principle that *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*.

The EU Council recommendation urged Member States to establish effective mechanisms in the field of promotion, marketing and retailing and to ensure that alcohol products were not designed or promoted to appeal to children and adolescents.

The increasing trend of "binge drinking" and the early onset of alcohol use among children in many Member States would suggest that current policies are not having the desired effects. In its Communication, the Commission recognises a need to consider further actions to curb underage drinking and harmful drinking among youth.

The EESC urges that a reduction in the exposure of children to alcohol products, advertising and promotions be included as a specific objective to provide greater protection for children.

4 *Alcohol in Europe: A Public Health Perspective*.

5 World Health Organisation *European Charter on Alcohol*. Copenhagen: World Health Organisation, Regional Office for Europe, 1995.

The EESC welcomes the declaration in the Communication by the actors in the alcohol beverage chain of their willingness to become more proactive in enforcing regulatory and self-regulatory measures. The alcohol industry stakeholders have an important role to play to ensure that their products are produced, distributed and marketed in a responsible manner and by these actions contribute to reducing alcohol related harm.

There are significant differences in alcohol consumption and harm between countries both in quantitative terms, with regard to the form taken by the phenomenon, and also in terms of the level of health-related and social dangers. In the light of this the EESC believes that the "Community activities" to be carried out "while respecting Member States' competencies" should be understood as "common guidelines" inspired by mutually-accepted concepts concerning the aim of reducing alcohol related harm, in all its forms. In the context of these common guidelines, individual Member States should decide on the means, the techniques and the intensity of the work to be done.

I think that the EESC Opinion gives clear signposting and action points on how we can uphold the rights of children in relation to Alcohol. Now is the time for real action!

Find out more about the European Economic and Social Committee at:

www.eesc.europa.eu

Find out more about the Children's Rights Alliance at: www.childrensrights.ie