



## **Economic and Social Council**

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### **Commission on the Status of Women**

#### **Fifty-eighth session**

10-21 March 2014

**Follow-up to the Fourth World Conference on Women and  
to the special session of the General Assembly entitled  
“Women 2000: gender equality, development and peace for  
the twenty-first century”: implementation of strategic  
objectives and action in critical areas of concern and further  
actions and initiatives**

### **Statement submitted by International Center for Alcohol Policies, a non-governmental organization in consultative status with the Economic and Social Council**

The Secretary-General has received the following statement, which is being circulated in accordance with paragraphs 36 and 37 of Economic and Social Council resolution 1996/31.



## **Statement**

### **Introduction**

The International Center for Alcohol Policies is a not-for-profit organization, supported by leading producers of beverage alcohol. It seeks to promote understanding of the role of alcohol in society and to help reduce the abuse of alcohol worldwide through dialogue and partnerships involving the beverage alcohol industry, Governments, the public health community and others with an interest in alcohol policy.

The Millennium Development Goals embrace gender equality, the empowerment of women and improved maternal health. The International Center for Alcohol Policies contributes to those efforts in a number of ways.

### **Focus on women and alcohol and on harm reduction**

The agreed conclusions of the fifty-fifth session of the Commission on the Status of Women addressed, inter alia, the question of better health care for women and girls as a necessary component of greater educational achievements and further development opportunities .

The International Center for Alcohol Policies has written on the critical topics of women and alcohol, and drinking and pregnancy and has produced the Blue Book: Practical Guides for Alcohol Policy and Prevention Approaches ([www.icap.org/PolicyTools/ICAPBlueBook/tabid/90/Default.aspx](http://www.icap.org/PolicyTools/ICAPBlueBook/tabid/90/Default.aspx)). While most women who drink do so moderately, women constitute one of the “at risk” groups of individuals who are deemed to be particularly susceptible to either the physical or psychological effects of alcohol. “At risk” persons are more likely than others to experience adverse outcomes. For some, harm may be the result of their own drinking. For others, heightened risk may be related to the drinking of those around them. From a public health perspective, it is fundamental to focus on women’s drinking patterns and to ensure that their needs are met with regard to the prevention and minimization of harm. These are areas in which the private sector, Government and civil society can work in collaboration to address the many complexities effectively.

Several gender-specific factors contribute to women’s relationship with alcohol. In general, it affects women at lower doses than men. This is due in part to physiological differences. That is why many Governments offer official guidelines specifically tailored to women. Information about drinking patterns and potential benefits and harms also needs to be imparted by health professionals, including physicians, nurses, other caregivers and social workers. They should be able to assist with problems that may arise, provide advice and offer treatment, where necessary and appropriate.

Alcohol consumption among young women is increasing in many countries, largely due to the changing role of women in society and their access to disposable income. As a basis for prevention, careful monitoring is required to examine and address these new consumption patterns.

Harm-reduction concepts in policy and prevention programmes offer effective means of addressing alcohol misuse among populations, including women. Research findings help highlight the value and relevance of certain actions and policies.

Which approaches may be appropriate depend to a large degree on priorities and cultural sensitivities. While the data on women's drinking and related problems are still inadequate, several large-scale comparative studies have collected information across borders and cultures. In order for harm-reduction actions to be effective, a change in a number of cultural attitudes regarding women's drinking will be necessary. Strategies should also take into account the different stages of women's lives, as habits and potential risks tend to vary with age.

The subject of drinking during pregnancy requires dedicated attention. There is strong scientific evidence that certain maternal patterns of drinking are associated with substantial risk of physical and psychological harm to offspring. Several conditions have been described among children of mothers whose drinking during pregnancy was excessive. These conditions include partial foetal alcohol syndrome, foetal alcohol spectrum disorders, and the more severe foetal alcohol syndrome. Their occurrence is relatively rare, with higher prevalence among populations generally of low socioeconomic status. Since there is currently no consensus on the threshold of maternal drinking below which the risk to the foetus is negligible, most official guidelines recommend abstinence or very low levels of alcohol consumption during pregnancy.

Harm attributable to drinking during pregnancy is preventable. The first step is the provision of accurate information to women of childbearing age and, especially, to those who are pregnant. Such information can be imparted through Government-issued guidelines ([www.icap.org/Table/InternationalGuidelinesOnDrinkingAndPregnancy](http://www.icap.org/Table/InternationalGuidelinesOnDrinkingAndPregnancy)), but may be more effectively shared by health-care providers. In many countries throughout the world, the private sector has voluntarily included health warnings about the dangers of drinking and pregnancy in labels attached to their products. Screening of pregnant women for possible alcohol problems may be appropriate. Equally, a support system is an essential component of education and of any attempt to change the drinking patterns of individuals. The involvement of family and others who play an important role in the lives of expectant mothers can help ensure that harm is minimized.

Harm-reduction measures around both personal safety and sexual activity can be encouraged to keep women safe. One recent topic of concern in developed societies is the so-called "date rape" drugs used in drinks. While several products reputed to be able to detect the presence of these substances are available, the best approach to reducing the potential for harm relies on personal skills, including awareness among women about their own drinking behaviour and that of their friends.

The International Center for Alcohol Policies posits that balanced policy approaches should take greater account of women's drinking patterns. As described above, as a first step, greater effort is required to collect comprehensive and reliable cross-cultural data and to tailor services and guidance specifically to women's needs.

### **Human Total: a violence prevention learning resource**

The Millennium Development Goals condemn all forms of violence against women and girls and call for appropriate action to strengthen and implement measures to prevent and eliminate all forms of discrimination and abuse. The Commission on the Status of Women has called on schools and communities to take

action to prevent harassment, bullying and other forms of violence in education and in the workplace

The agreed conclusions of the fifty-fifth session of the refer to the need to conducting activities in schools and communities to help prevent harassment, bullying and other forms of violence, in education and in the workplace.

In July 2013, the International Center for Alcohol Policies released “Human Total: a violence prevention learning resource” (<http://www.icap.org/Publications/%20ViolencePreventionLearningResource/tabid/551/Default.aspx>), which focuses on the gender discrimination and behavioural patterns that encourage many men and boys to be violent and reckless, including by drinking harmfully. As reported by the International Center for Alcohol Policies to the Commission at its fifty-seventh session (E/CN.6/2013/NGO/119), Human Total is an effort aimed at understanding alcohol-related violence and at identifying and promoting good practice for its prevention.

The International Center for Alcohol Policies believes that Human Total is well aligned with the practices sought in the agreed conclusions of the fifty-fifth session of the Commission on the Status of Women (para. 22 (u) and (x)), as it provides a tool to expand teacher training and a means to ensure women’s and girls’ access to life-skills education.

Human Total prioritizes fostering healthy notions of masculinity as the most effective way to prevent violence, including against women and girls, and reckless behaviour, such as harmful drinking. It aspires to ensure that young people understand and assimilate their rights and those of others, enhancing empathy and respect for the inherent dignity of all people, imperatives for the prevention of discrimination that causes, catalyses, or is used to excuse much violent behaviour.

Human Total is publicly available for use, translation and adaptation in accordance with the “Conditions for the reproduction and/or translation” ([www.icap.org/CopyrightInformation/tabid/87/Default.aspx](http://www.icap.org/CopyrightInformation/tabid/87/Default.aspx)). A translation into Spanish has been completed and will be available shortly on the website of the International Center for Alcohol Policies.

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