

**IOGT International Contribution to  
Swedish Chamber of Commerce Consultation on  
EU-Thailand Free Trade Agreement Negotiations**

**15.03.2013**

IOGT International, the largest worldwide community of non-governmental organizations with the vision and mission to independently enlighten people around the world on a lifestyle free from alcohol and other drugs. Around the world we work on alcohol (and other drugs) policy issues by promoting scientific, evidence-based policies independent of commercial interests. Therefore IOGT International and our members are closely following the global political and research processes concerning free trade, free trade negotiations and the impact of trade in social justice, public health, economic prosperity, Human Rights – especially Child Rights and Indigenous Rights – and global development.

We are thankful for this opportunity – referring to the Swedish Chamber of Commerce consultation on the European Union and Royal Kingdom of Thailand Free Trade Agreement negotiations – to contribute to improving the EU's approach to these negotiations, especially in light of strong Thai worries and loud protests about the tactics of EU negotiators.

In our submission, IOGT International on behalf of our members, provides a detailed response, sheds light on the worrying role of the alcohol industry and highlights the concerns for social justice, public health, economic prosperity, Human Rights – especially Child Rights and Indigenous Rights – and global development.

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**Question:**

**Are there any areas where you consider that the EU should be careful in opening its market, for example by introducing longer periods of tariff liberalization instead of eliminating the tariff at the entry into force of the agreement?**

CN Codes: 2203, 2204, 2205, 2206, 2207, 2208, 2402, 2403, 2404

The Thai government put in place both alcohol and tobacco control regulations that are of role model character for other ASEAN countries and that are cost-effective, evidence-based and high-impact in reducing the use of alcohol and tobacco. The Thai government was due to act in 2008 because of the tremendous amount of harm caused by alcohol – to the economy, the social fabric, the health and well-being of the population and societal development. Alcohol is still today the biggest cause of ill-health and pre-mature death in Thailand, which means that the policies and regulations by the Thai government that clearly have had impact need to continue and be strengthened.

In 2010 the Thai government arranged a number of hearings all around the country to include civil society and the citizens at large into the FTA process with the European Union. It became evident then that the people wish alcohol and tobacco be excluded from any free trade agreement with the EU. The Thai people wish to maintain the regulations in place and to continue to make alcohol and tobacco control policies from a public health perspective. Even Thailand's Minister of Trade has supported this stance.

Also in 2012 and 2013 have we seen civil society rise against the inclusion of harmful products like alcohol and tobacco into the FTA negotiations. Alcohol is no ordinary commodity and the Thai people are aware of it and have repeatedly said no to EU pressure to include alcohol and tobacco in the FTA.

As recent as 28<sup>th</sup> February 2013 manifestations were conducted by the civil society, for example NGOs promoting health and the broad network FTA Watch. Together they send an Open Letter to their Prime Minister that clearly stated that "the international dispute settlement mechanisms must not prevent the government from issuing public interest policies, especially on public health; No to alcohol and tobacco negotiations".

The WHO Global Alcohol Strategy, adopted by the World Health Assembly in 2010, makes it unmistakably clear that measures of increasing the price of alcohol, for example through taxation, and decreasing the availability of alcohol, for example through age limits and the limitation of outlet density, and banning alcohol marketing are so called Best Buys to reduce the total consumption and in doing so reducing the harm caused by alcohol in a society.

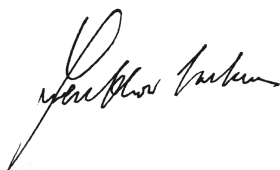
It is crucial that public health policies, like the above mentioned alcohol policy measures, must reach beyond the public health sector, must involve and include other sectors like transport, trade, agriculture, youth and culture, economics to unfold their full effect.

That is why the EU Treaty (Lisbon Treaty) also requires the Health in all Policies approach (HIAP).

It is evident that to include alcohol in the FTA negotiations and force the Thai market open for major European alcohol producers goes against the public health, economic development and societal development interests of the Thai people, as well as Swedish taxpayer resources supporting development work in Thailand today.

It is further evident that the inclusion of alcohol and tobacco products and the alcohol and tobacco industries in the FTA negotiations goes against the HIAP provision of the Lisbon Treaty. According to the WHO Global Burden of Disease Study 2012 more than 10% of global mortality is alcohol-related and more than 12% tobacco-related. Alcohol and tobacco are thus the third and second biggest risk factors globally.

And finally it is clear that evidence-based public health-oriented alcohol policy measures are negated by FTA negotiations that include alcohol.



Sven-Olov Carlsson,

International President,

IOGT International,

Stockholm, March 15, 2013