
Alcohol Report 2021

Overview of the current alcohol situation in the Czech Republic

This Situation Overview summarises the [Czech Alcohol Report 2021](#), published in March 2022. The report is part of the information package of [annual reports](#) on the situation of addiction in the Czech Republic.

[The public health significance of alcohol use](#)

[Alcohol policy](#)

[Alcohol supply and market](#)

[Alcohol use among children and young people](#)

[Alcohol use in the adult population](#)

[Health consequences of alcohol use](#)

[Social consequences and context of alcohol use](#)

[Alcohol-related crime](#)

[Alcohol prevention programmes](#)

[Brief interventions and treatment for alcohol users](#)

[Harm reduction services for alcohol users](#)

[Impact of COVID-19 on alcohol](#)

The public health significance of alcohol use

- The impact of alcohol on the overall health burden is considerable - alcohol is one of the leading causes of morbidity and premature mortality in developed countries, including the Czech Republic.
- Alcohol contributes to more than 200 diseases. Cardiovascular diseases, neoplasms, gastrointestinal diseases (especially liver diseases) and external causes of morbidity and mortality such as accidents, injuries or poisoning account for the largest share of the health burden of alcohol. Alcohol is also a common cause of harm in the user's environment (fetal alcohol syndrome, violence, accidents, loss of productivity, etc.).
- There is a clear correlation between the amount of ethanol contained in the alcohol consumed and harmful health effects, and any amount of ethanol is harmful to health.

From a health perspective, it is the amount of ethanol consumed that is important, not the type of alcoholic beverage.

- Any amount of alcohol (e.g. even one drink a day) poses a risk of negative consequences and no amount of alcohol can be recommended as beneficial or considered safe.
- The average daily consumption of more than 20 g of ethanol for women and more than 40 g of ethanol for men is considered risky drinking. Harmful drinking (with a high risk of health consequences) is defined as an average daily consumption of more than 40 g of ethanol for women and more than 60 g of ethanol for men. Consumption of large quantities of ethanol on a single occasion (binge drinking) poses an additional risk.
- A standard dose of alcohol (a standard glass), i.e. 0.5 l of beer, 2 dl of wine or 5 cl of 40% spirit, contains 10-20 g of ethanol. Drinking on average more than 2-3 glasses per day for men and 1-2 glasses per day for women can therefore be considered risky (4 or more glasses for men and 2 or more glasses for women on average per day can then be considered harmful consumption). Binge drinking is defined as drinking 5 or more glasses on one occasion.
- The Czech Republic is one of the countries with the highest average alcohol consumption per capita. On average, the Czech Republic consumes 10 litres of ethanol per capita per year, which corresponds to approximately 22 g per capita per day, including children and the elderly. The incidence of binge drinking is also among the highest in the world.

[back to top](#)

Alcohol policy

- Alcohol policy in the Czech Republic is part of the addiction policy, which since 2014 integrates the topics of legal and illegal substances and non-substance addictions. Responsibility for its development and implementation lies with the government. The Government's coordinating and advisory body on addiction issues is the Government Council for Coordination of Drug Policy (GCCDP). The main strategic document determining the focus of the addiction policy is the *National Strategy for Prevention and Reduction of Harm Associated with Addictive Behaviour 2019-2027* and its Action Plan for 2019-2021, which also include targets and activities for alcohol.
- There is international expert consensus on 5 main recommendations for effective policies to reduce the negative impacts of alcohol consumption: (1) increasing the price of alcohol through excise taxes and pricing policies, (2) limiting the availability of alcohol, (3) banning or severely restricting alcohol advertising, (4) availability of screening, brief interventions and treatment, and (5) measures against drink driving. Some of these international recommendations are not consistently applied in the Czech Republic.
- Responsibility for different parts of alcohol policy falls under different departments (as per the 5 recommendations above): (1) the area of pricing and taxation under the Ministry of Finance (MoF), (2) the area of alcohol as a commodity under the Ministry of Agriculture (MoA), (3) the area of advertising under the Ministry of Culture (MoC) for audiovisual broadcasting and under the Ministry of Industry and Trade (MoIT) for other advertising, (4) the area of prevention and treatment under the Ministry of Health (MoH), (5) the area of alcohol in transport under the Ministry of Transport (MoT) and the police.

- This complicated division of responsibilities makes it difficult to implement effective alcohol policy and highlights the need for inter-ministerial coordination.

[back to top](#)

Alcohol supply and market

- The availability of alcoholic beverages is very high in the Czech Republic. Alcohol can be sold by law at any time of the day or night and in many places, in any grocery store, food stalls, public transport, petrol stations, etc. A licence is required for the production, sale and serving of spirits, which can be applied for by any entrepreneur over the age of 18 with a clean criminal record. The sale of other alcoholic beverages is a free trade.
- The domestic production of spirits is prohibited by law; beer or wine can be produced at home up to 2 000 litres per household. The Czech specifics are the so-called grower distilleries, where growers can have a limited amount of fruit spirit made from their own fruit.
- The availability of alcohol is restricted by law - there is a ban on the sale of alcohol to minors, a ban on the remote sale of alcohol if the purchaser's age of majority cannot be verified, a ban on the sale of toys imitating the shape and appearance of alcoholic beverage packaging, a ban on the sale or serving of alcohol in health care facilities, schools and educational establishments, social-legal protection facilities for children, and at events intended for persons under the age of 18. At the same time, the law regulates the occasional sale of alcohol and eases or removes restrictions for a number of public events.
- Municipalities may, by means of general binding ordinances (GBOs), prohibit the consumption of alcohol or restrict or prohibit the sale and serving of alcohol in public places or restrict the operation of hospitality establishments. In 2015-2020, 548 OZVs were issued, 86 of which regulated the operating hours of hospitality establishments, according to Mol records. Out of 27 statutory cities, 25 cities regulated the consumption, serving or sale of alcohol, with the exception of Teplice and Plzeň (7 statutory cities regulated the operating hours of hospitality establishments).
- All packages of alcoholic beverages shall indicate the ethanol content by volume. The indication of nutritional values is optional in the European Union and the Czech Republic. The indication of the composition of alcoholic beverages is generally optional in the EU, but some countries do indicate the composition on spirits. For products manufactured in the Czech Republic, the indication of the ingredients is mandatory. Warning of the risks and harm caused by alcohol on packaging is not mandatory.
- The availability of alcohol for minors is high in the Czech Republic. According to various studies and monitoring actions, alcohol is sold to minors in 50-90% of cases (e.g. 72% according to the CTIA), e.g. beer is easily or quite easily obtained by 80% of 16 year olds (ESPAD study). The proportion of adolescents who consume alcohol in restaurants has been decreasing over the long term, yet the proportion is still high (41%), and a similarly high percentage of children report buying alcohol in shops (ESPAD study).
- In the Czech Republic, 100-150 million litres of ethanol are consumed annually, which corresponds to 10-14.5 litres per capita, including children and the elderly. Approximately 49 % of the total amount of ethanol consumed is consumed in beer, 28 % in spirits and

23 % in wine. In recent years, 11-14% of the ethanol consumed in spirits has been produced in distilleries.

- The excise duty system for alcoholic beverages is set differently for spirits, beer and wine and intermediate products and does not correspond to the ethanol concentration in the beverage. For spirits the quantity of ethanol is decisive, for beer the quantity of malt (degree) and for wine and other beverages the quantity of the beverage. Reduced tax rates are applied to beer from microbreweries and fruit spirits from distilleries. Still wine has a zero rate of excise duty.
- For an alcoholic beverage containing 10 g of ethanol, the excise tax paid varies depending on the type of alcoholic beverage: for wine it is CZK 0, for beer about CZK 1, for spirits CZK 4 (for fruit distillates from a distillery CZK 2), for liqueur wines CZK 1.5, estimates for cider and hard seltzer are complicated due to the fact that the tax is calculated on the type of alcohol contained in these beverages, which varies according to the producer.
- In recent years, the state has collected about CZK 13 billion a year in excise duties on alcoholic beverages: around CZK 8 billion (61-62%) on spirits, CZK 4.5 billion (35-36%) on beer and CZK 0.4 billion (3%) on wine and intermediate products.
- The setting of excise taxes on alcoholic beverages has been criticised by experts in the field of economics and public health as unsystematic, as it does not correspond to the harmfulness of individual types of beverages, does not create sufficient incentives to reduce risky alcohol use and does not generate sufficient resources to address the negative impacts of alcohol use in the Czech Republic.
- Alcohol advertising in the Czech Republic is regulated by law with regard to its content and method, particularly with regard to the protection of minors and the prohibition of associating alcohol with increased performance, success or positive effects.
- Alcohol advertising is ubiquitous in the Czech Republic and is a common part of television broadcasting. Alcohol marketing and sponsorship is particularly associated with sport, entertainment and culture. In recent years, covert advertising and marketing on the Internet have become a problem, to which children can be exposed without restriction.

[back to top](#)

Alcohol use among children and young people

- Rates of both alcohol use and risky use among children and adolescents have been declining in recent years, but youth experiences with alcohol remain high, including rates of risky use.
- Overall, 17% of 11 year olds, 43% of 13 year olds and 76% of 15 year olds have experience of drinking alcohol, with around half reporting drinking alcohol in the last 30 days (HBSC 2018).
- Less than 1% of 11 year olds, 5% of 13 year olds and almost 24% of 15 year olds had repeated experience of drunkenness (i.e. having been drunk at least 2 times in their lives).

- Between 2010 and 2014, there was a significant decline in children's experience of alcohol consumption, which continued in the period 2014-2018. At the same time, there was also a decline in the prevalence of problem drinking, including the prevalence of repeated drunkenness, particularly among 15-year-olds (HBSC).
- 95.1% of 16-year-olds had ever drunk alcohol in their lives, and 62.7% had drunk alcohol in the last month. Drinking excessive amounts of alcohol on one occasion (i.e., 5 or more drinks) in the past 30 days was reported by 38.5% of students, and 11.7% of adolescents reported drinking excessive amounts of alcohol 3 or more times in the past 30 days (i.e., once a week or more) (ESPAD 2019).
- Between 2011 and 2015, there was a significant decline in alcohol consumption among 16-year-olds, both in experience of alcohol consumption and in risky forms of consumption. Between 2015 and 2019, there was a further decline in drinking rates among adolescents, but not as marked as in the previous period (ESPAD 2019).
- Boys showed a further decline in all indicators of alcohol consumption, including risky forms, while girls showed a slight increase in the prevalence of frequent heavy drinking (3 or more times) and repeated drunkenness between 2015 and 2019. There has been a long-term levelling out of the differences between boys and girls. However, differences between students by type of school attended also persist in the long term, with the highest values of the indicators among students in secondary schools without a high school diploma. By the age of 18, differences between school types are levelling out (ESPAD).
- Studies have long confirmed that the transition from primary to secondary school is a significant turning point in terms of exposure to addictive substances.
- Subjectively perceived availability of alcohol has been declining in recent years, but still remains at a relatively high level. A positive trend in recent years is the increasing perception of the riskiness of heavy alcohol consumption.
- There are subgroups of children and adolescents who have above-average experience with alcohol - for example, socioeconomically disadvantaged children (clients of low-threshold facilities for children and youth), children in the institutional care of the Department of Education (diagnostic and educational institutions), or children of Roma origin.

[back to top](#)

Alcohol use in the adult population

- The rate of alcohol use in the adult population of the Czech Republic is high. The results are consistent across studies. About 10% of adults drink alcohol daily. In recent years (since 2014), an increase in the prevalence of daily alcohol consumption can be observed, especially among men. The largest increase occurred in the 45-54 age group, but increases were observed in all age groups except the 15-24 age group.
- Frequent heavy drinking (5 or more drinks) on one occasion (at least once a week) is reported by 12-13% of adults.

- An estimated 17-19% of the adult population (i.e. 1.5-1.7 million people) in the Czech Republic consume alcohol at risk, of which 9-10% of the adult population (800-900 thousand people) fall into the harmful consumption category.
- Also, approximately 11% of the population meet the diagnostic criteria for alcohol dependence disorder. The prevalence of harmful use of alcohol in the long term is 2-3 times higher in men than in women. Long-term trends show an increase in the prevalence of harmful alcohol use between 2012 and 2020.
- A survey of doctors suggests that the estimate of at-risk drinkers of alcohol that doctors are aware of as having a drinking problem is 150-170,000.
- Alcohol users entering alcohol treatment are 1/3 female and 2/3 male. The average age is around 45 (slightly increasing in recent years) for both genders, with the majority (78%) aged 30-59. The majority of alcohol dependent people consume different types of drinks, but spirits (44%) and beer (37%) are predominant among men, wine (47%) and spirits (32%) among women.
- As many as 60-70% of women in the Czech Republic consume alcohol during pregnancy (although alcohol consumption during pregnancy is very risky in terms of teratogenic effects on the fetus), and as many as 8-19% of pregnant women consume alcohol regularly or at risk.
- There are vulnerable or at-risk populations where the rate of alcohol use is higher than in the general population. These include, for example, Roma, people living in social exclusion, homeless people or people with experience of imprisonment. For these people, alcohol contributes to further exacerbating their socio-economic disadvantage.
- One of the reasons for the high level of alcohol consumption in the Czech Republic is the tolerant attitudes of Czech society towards alcohol, although there is a gradual decline in the acceptability of alcohol use. For example, 88% of people currently rate regular alcohol consumption as acceptable. Czechs are also relatively tolerant of alcohol advertising - only 24% would ban advertising for spirits, 12% for wine and 11% for beer.

[back to top](#)

Health consequences of alcohol use

- The overall health effects of alcohol use are not systematically monitored in the Czech Republic.
- The most recent estimate of total mortality attributable to alcohol in the Czech Republic was for 2010, when 6.5 thousand deaths were estimated, representing 6% of the total mortality in the Czech Republic (10% for men and 2% for women). The largest proportion of total alcohol deaths occurred in older age groups, with the highest relative alcohol burden in the 35-44 age group (26% of total mortality in men and 17% in women).
- Out of a total of 6-7 thousand. Alcohol-related deaths account for approximately one-third of the cases in which alcohol is the main or only cause of death. The mortality rate for alcohol-related causes and the proportion of alcohol-related causes of death in the total mortality rate in the Czech Republic have been increasing in recent years, mainly due to an increase in the number of cases of alcoholic liver disease. The number of alcohol-related accidents and suicides is also increasing.

- Spatial analysis of mortality from alcohol-related diseases showed that alcohol-related mortality is highest in the regions of Central Moravia and Silesia. While men in Prague have the lowest alcohol-related mortality rates compared to other regions, women in Prague have the highest.
- Alcohol addicts die an average of 24 years earlier than the general population, with nearly 83% of them being economically active by the age of 64. The most common cause of death is external causes (24%), mainly accidental injuries (13%) and suicide (6%), followed by liver disease (18%), circulatory diseases (15%) and malignant neoplasms (7%).
- As regards alcohol-related morbidity, 13-14 thousand hospital admissions for diseases entirely attributable to alcohol are reported annually in the Czech Republic, of which about 8 thousand cases are for alcohol dependence (about 60%), 4 thousand for alcoholic liver disease (30%) and 1 thousand for alcoholic pancreatitis (8%). The ratio of men to women is about 2:1.
- For other diseases and disorders for which alcohol is a cause, only some can be routinely monitored - for example, 11-16% of tuberculosis cases occur in alcohol-dependent people, and alcohol is the cause of 98% of substance-impaired injuries.

[back to top](#)

Social consequences and context of alcohol use

- The most recent economic estimate of the total social cost of alcohol consumption in the Czech Republic is for 2016. The total societal cost amounted to CZK 56.6 billion, of which the largest share (51.2%) was indirect costs due to lost productivity due to morbidity and premature mortality, as well as the cost of treating alcohol-related diseases (24.4%). In relative terms, the cost of alcohol consumption in the Czech Republic amounted to 1.2% of GDP.
- According to various sources, in recent years, alcohol expenditure has reached approximately 2-4% of total household consumption expenditure in the Czech Republic. This share is currently increasing.
- Alcohol is associated with domestic violence. It is estimated that it is associated with up to 2/3 of all cases of domestic violence in the Czech Republic. Women are particularly affected by alcohol-induced violence. Binge drinking increases the risk of aggressive behaviour. In addition to physical violence, alcohol increases the likelihood of sexual violence as well as intense psychological violence.
- Alcohol is involved in approximately 5% of road traffic accidents and approximately 10% of road traffic deaths are caused by alcohol. The likelihood of a traffic accident increases with blood alcohol level - in 79% of all accidents caused by alcohol, the culprit had a blood alcohol level above 1‰, i.e. it was a criminal offence.

[back to top](#)

Alcohol-related crime

- Criminal activity consisting in the violation of alcohol legislation, the so-called primary alcohol crime, includes the crime of giving alcohol to a child (Section 204 of Act No. 40/2009 Coll., the Criminal Code), the crime of endangering under the influence of an addictive substance (Section 274) and the crime of drunkenness (Section 360).
- In 2020, 178 offences were registered (197 in 2019), 99 offences of supplying alcohol to a minor were cleared and 76 people were convicted of this offence. There has been a noticeable increase in this crime over the long term.
- In 2020, there were 8,076 recorded offences of DWI and drunkenness, of which 5,466 were alcohol-related (68%). Offences committed while under the influence of alcohol accounted for 13% of total cleared crime. The number of drink-driving offences and their share in total crime has been declining over the long term.
- If the person committed the offence under the influence of alcohol or another addictive substance or in connection with the use of an addictive substance, the court may impose protective treatment. In 2020, protective treatment in connection with alcohol was imposed on 186 persons, most often those convicted of the crime of disorderly conduct. Compared to the previous year, there was a slight increase in the number of persons ordered to alcohol protective treatment by the court in 2020.
- The court may impose reasonable restrictions and obligations, such as substance abuse treatment, an obligation to abstain from the use of alcoholic beverages or other addictive substances, or to undergo an appropriate counselling or treatment programme, as part of the diversion process or in conjunction with an alternative sentence. In 2020, the Probation and Mediation Service registered 22 122 persons in various stages of criminal proceedings, of whom 394 were ordered to undergo substance abuse treatment and 1 799 clients were ordered to abstain from the use of alcoholic beverages or other addictive substances.
- Alcohol-related economically motivated crime is regularly surveyed in a questionnaire study of convicted prisoners. Theft or other illegal conduct with the motive of obtaining funds for alcohol was reported by 11% of inmates in the 2020 study.
- Alcohol-related offences in the context of public health protection are defined by Act No.65/2017 Coll., on the Protection of Health against the Harmful Effects of Addictive Substances. In 2020, 1 515 offences (1 744 in 2019) related to the use of alcohol were registered, most often involving the sale or administration of an alcoholic beverage to a person under the age of 18 (57%).
- In the context of road traffic, Act No.361/2000 Coll., on Road Traffic, defines offences related to addictive substances. In 2020, 24,501 offences related to alcohol (or other addictive substances) were registered (27,409 in 2019).

[back to top](#)

Alcohol prevention programmes

- The Czech Republic has a number of websites for the public dedicated to reducing consumption, the negative effects of alcohol use and providing information on how to get help: National alcohol reduction support sites alcohol-skodi.cz, alcoholpodkontrolou.cz, suchejunor.cz, anonymnialkoholici.cz. In 2020, the National Health Information Portal

nzip.cz was launched, which includes alcohol in the section *Addictions and addictive substances*.

- As of August 2019, the *National Quitline* 800 350 000 integrates the topic of alcohol, and there is a website chciodvykat.cz and an email counselling service poradte@chciodvykat.cz. The phone number of the line is owned by the Office of the Government of the Czech Republic, and the line has been operated since 2016 by the Czech Coalition against Tobacco from subsidies.
- In recent years, media campaigns dedicated to alcohol have been visible. The *Alcohol under Control* campaign of the Clinic of Addiction Medicine of the 1st Faculty of Medicine of the Charles University in Prague includes radio spots, posters in public and public transport, video spots on social networks and on public transport buses. In 2020, Charles University launched the *Stop Alcohol in Pregnancy* campaign in cooperation with other medical and health faculties. In July 2021, Alcoholics Anonymous launched a public transport campaign highlighting the risks of alcohol use and promoting the association's services.
- A significant campaign aimed at reducing (risky) alcohol consumption in the Czech Republic is *Dry February*. Apart from the event itself in February, it is dedicated to reducing alcohol consumption in the Czech Republic all year round and contributes to destigmatising the whole issue of alcohol, addiction and addiction treatment. *Dry February* mainly affects middle-aged and higher-educated men and has the greatest impact on occasional to frequent alcohol users (consuming alcohol 1-4 times a week), with the lowest impact among daily or near-daily alcohol users. It is estimated that the campaign in its current form has the potential to reduce overall alcohol consumption in the Czech Republic by an order of magnitude of one percent.
- There are also campaigns by alcohol producers and distributors in the Czech Republic. In general, however, the effectiveness and purpose of these campaigns are questionable according to the available evidence, as they are primarily part of marketing strategies and building the image of corporate social responsibility. What they have in common is that they emphasise 'responsible drinking', targeting primarily children and young people, pregnant women and drivers, i.e. population groups where there is a social consensus that they should not consume alcohol. Conversely, they avoid the most effective measures to reduce alcohol consumption, i.e. measures to restrict advertising or increase the price of alcoholic beverages.
- Very rarely are community programmes aimed at preventing underage drinking implemented in the Czech Republic.
- Activities in the area of alcohol prevention are also carried out by the State Institute of Health (SZÚ) and its deployed workplaces - most of them are focused on children and youth, but since 2018 the SZÚ has also been implementing a prevention project selectively aimed at residents of socially excluded localities, which also includes the topic of alcohol.
- Prevention of addiction targeting children and young people is part of the broader framework of prevention of risky behaviour coordinated by the Ministry of Education and Science. There are regional school prevention coordinators at the regional level, prevention methodologists anchored in the educational and psychological counselling system at the level of the former districts, and school prevention methodologists in schools. In 2020, prevention in the school environment was affected by measures related to the COVID-19 pandemic.

- In the 2019/2020 school year, a total of 65,739 incidents of risky behaviour in schools were reported, of which 3,576 (5.4%) involved alcohol use. Alcohol use was significantly more prevalent in secondary schools and the corresponding grades of multi-year colleges. Alcohol use cases were most frequently dealt with in the 4th year of secondary school (721 cases).
- In the 2019/2020 school year, the most common prevention programmes in schools focused on the prevention of bullying and aggression (16.6% of programmes), the prevention of criminal behaviour (10.4%) and the prevention of cyberbullying (10.3%). 7.2% of programmes focused on the prevention of alcohol abuse.
- The largest number of hours in the school curriculum is devoted to the prevention of bullying and aggression, with an average of 45.5 hours in the 2019/2020 school year across all grades of primary and secondary schools (cumulatively across all grades). An average of 21.3 hours was spent on the prevention of alcohol use by primary and secondary school students as part of the school curriculum, with the most time devoted to this topic in Year 1 of secondary school (2.4 hours).

[back to top](#)

Brief interventions and treatment for alcohol users

- In practice, brief interventions are carried out to a relatively low degree and in an unsystematic way, despite the fact that their implementation is a legal obligation of all health professionals in justified cases. Brief interventions for at-risk or heavy alcohol users are carried out by approximately half of all doctors. It is estimated that only half of people are asked about their alcohol consumption when they visit a doctor and less than one tenth are advised to stop or cut down. The trend in recent years shows that the situation is not improving.
- Treatment of addiction in the Czech Republic is basically abstinence-oriented, both outpatient and residential. The typical model of treatment is the so-called Skál model, i.e. residential treatment with a structured programme containing various therapeutic activities with strong elements of psychotherapy and physical activities, with possible pharmacological support, taking place in several follow-up phases. A detoxification phase is typically included at the beginning of treatment.
- Alcohol dependence treatment and other interventions targeting alcohol users are provided in addiction programmes that provide services to users and persons addicted to substances, gambling and other non-substance addictions. Alcohol users are their clients to varying degrees.
- Currently, there are nearly 300 addiction programmes of various types in the Czech Republic, of which 30-40 are residential programmes and 40 are aftercare programmes. Approximately 30 thousand alcohol users are in contact with addiction programmes annually, the largest part of them (about 27 thousand persons) is in contact with psychiatric institutions (20-23 thousand in outpatient care, about 6 thousand in inpatient care).
- Addiction services are also available to alcohol users in prisons. Alcohol users make up 10-30% of the clientele of prison addiction programmes. An estimated ten alcohol users are treated in prison each year.

- There are 19 therapeutic communities (TCs) for addiction treatment in the Czech Republic with an estimated capacity of about 320 places. Approximately 100 alcohol users are treated there annually.
- There are several self-help associations in the Czech Republic providing assistance to alcohol users. Alcoholics Anonymous (AA) is active in 45 cities, and there are currently 67 AA groups in the Czech Republic. Apart from AA, there are few other self-help projects in the Czech Republic in Brno and České Budějovice.
- In September 2021, there were 34 registered aftercare providers, 25 of which offered sheltered housing with a capacity of 310 beds. Alcohol users make up approximately 60% of their clients.

[back to top](#)

Harm reduction services for alcohol users

- Alcohol users are also clients of low-threshold harm reduction programmes primarily designed for people using illicit drugs. In 2020, 38.8 thousand substance users were in contact with low-threshold programmes, of which 3.3 thousand were alcohol users (8.5%).
- Harm reduction interventions aimed at reducing or controlling alcohol consumption are not widespread in the Czech Republic to address problem alcohol use or dependence. Since 2013, Selincro (nalmefene) has been available in the Czech Republic to reduce alcohol consumption in people with problem drinking or alcohol dependence. However, its use in the Czech Republic is minimal, and the disadvantage of its wider use is its high price.
- An innovative harm reduction approach is represented by managed alcohol programmes, i.e. the administration of alcohol to alcohol-dependent people under controlled conditions. This is a method used especially for severe addicts with other health and social problems (homelessness, problems with the law, etc.). Since 2020, 2 day centres, the so-called wet centres, have been operating in Brno on this principle, while the third one has been in operation only temporarily. In addition, elements of managed alcohol programmes can be found in some homes with special regime for people with or at risk of addiction in the Czech Republic.
- The harm reduction function in the field of alcohol is also fulfilled by the detention centres: they provide medical supervision and care to intoxicated persons, prevent health damage in the state of intoxication and the threat to other persons, public order and property caused by the behaviour of intoxicated persons. In 2020, there were a total of 18 detention centres in the Czech Republic, providing services to 17,800 persons.
- There are about 15 programmes in the Czech Republic providing counselling and information interventions, harm reduction material or breath tests for alcohol in the entertainment environment. In 2020, they contacted about 6.5 thousand people, of which 2.3 thousand were alcohol users.
- In 2019-2020, Prague had a so-called night mayor appointed by the municipality to deal with problems related to nightlife, including problems related to alcohol use. In April 2020, the position of night mayor was abolished.

[back to top](#)

Impact of COVID-19 on alcohol

- Information on the impact of the COVID-19 epidemic on patterns and rates of alcohol use is incomplete and ambiguous. However, it appears that there may have been a worsening of the situation, particularly for heavy alcohol users who may have increased both the frequency of use and the doses consumed during the emergency. Although the negative impact of the epidemic in the mental health field is clear, a clear association of COVID-19-induced anxiety with alcohol use has not been demonstrated.
- It is those at risk of addiction or addicted that may have exacerbated their addictive disorder and increased their need to seek help.
- Addiction services have reported increased demand for services from users following the relaxation of anti-epidemic measures, although this increase is not evident from health statistics data. The reason for this appears to be under-reporting in health registers and information systems due to the difficulty in operating facilities during and after the emergency. Data for 2020 should therefore be treated with caution.
- The COVID-19 epidemic and related counter-epidemic measures have made it more difficult for clients with alcohol dependence problems to contact services and access services. On the other hand, the provision of online counselling and treatment services has developed. Some organizations have taken advantage of the emergency related to COVID-19 to conduct prevention campaigns aimed at preventing risky alcohol consumption.
- The increased difficulty in accessing health and social services and the deterioration of the social situation of clients during the epidemic have contributed to the development of new harm reduction services for alcohol users.
- The COVID-19 epidemic has also affected the alcohol market and people's consumption behaviour. Alcohol consumption shifted from public places to private areas during the emergency. It is questionable to what extent the shift of consumers from public catering outlets to the retail network will be reflected in the next period.
- The market in the Czech Republic was also affected by a drop in tourists and a reduction in cross-border purchases. Sales of alcoholic beverages in the Czech Republic declined in 2020 due to these factors. Excise duty collections on alcoholic beverages fell by CZK 0.6 billion (4.5%) year-on-year, despite an increase in the tax rate on spirits from the beginning of 2020. Excise duty collections fell for both spirits (most significantly) and beer.
- The COVID-19 epidemic has also had a major impact on reducing the black market in alcohol. As a result of the closure of public catering outlets, the possibility of claiming untaxed and illegal alcohol was reduced.