Alcohol and sport

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Alcohol and sport are inextricably coupled. Alcohol sponsorship is essential to fund sporting events, so the story goes. Without advertising revenues, sport as we know it would not survive. It’s the same scaremongering storyline that is peddled for medical education and the drug industry—and one that I hope the medical profession will put to the test before too long. As for alcohol and sport, France has tested the story and shown it to be bunkum. Advertising and sponsorship of sport by drinks companies have been banned in France since 1991 with the passing of the “Loi Évin,” named after the then minister for health, Claude Évin. And, quelle surprise, far from collapsing, French sport has flourished. When France hosted the football World Cup in 1998 the event was free of alcohol sponsorship, and, to push the point home, France beat Brazil 3-0 in the final.

No other country has yet followed France’s lead, and most are heading in the opposite direction. As Jonathan Gornall explains (doi:10.1136/bmj.g3772), this year’s World Cup is a sad showcase of politicians of all stripes scurrying to make concessions to the alcohol industry. To win the right to host the World Cup, Brazil has done what others before have done: agreed to the condition imposed by Fifa (the International Federation of Association Football) that sponsors such as Budweiser will pay no tax on sales of their products. And Fifa has gone one step further this time, says Gornall, by bullying the Brazilian government into abandoning its longstanding ban on alcohol in sports stadiums. Public health experts in Brazil fear a return of the dark days of often fatal alcohol fuelled violence at matches. Quoted by Gornall, a professor of psychiatry in Brazil is shocked that Fifa “can come to a country and make it change its laws.” Despite efforts of critics to embarrass the government, he says, “the alcohol industry has won.”

The UK government didn’t get to host this year’s World Cup or the event in 2018, despite showing willing to bow to Fifa’s alcohol friendly demands, as Gornall points out. But it has made substantial concessions in response to pressure from the alcohol industry, relaxing licensing laws for England games in a U turn similar to its change of heart over a minimum price on a unit of alcohol. The result, says Clifford Mann, president of the College of Emergency Medicine, will be substantial sums spent on repairing bodies and property (doi:10.1136/bmj.g3805). In the longer term, as a result of already lax licensing laws, he highlights “the costs of lost opportunities, shattered relationships, violence, and abusive behaviour.” There is an irony here. The UK relaxed its licensing laws in 2004 in the hope of generating a “cafe society.” If this was an attempt to ape the French, we went about it the wrong way.

But how good are we at capturing the damage inflicted by alcohol? Where is the medical and public health voice in this debate? Where is the public and patient voice calling for better use of overstretched health resources? Where are the politicians willing to put public health before trade (doi:10.1136/bmj.g3648). Where, when you need him or her, is the next Claude Évin?

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