# European Alcohol and Health Forum (EAHF) Fifth Monitoring Progress Report

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The views expressed herein are those of the consultants alone and do not necessarily represent the official views of the European Commission.

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# Introduction

For the fourth consecutive year, Milieu Ltd., as part of the COWI consortium, has been entrusted by DG SANCO with the task of assessing the quality of the monitoring activities undertaken by members of the European Alcohol and Health Forum (EAHF). The results of this assessment are presented in this report, which may be of interest to officials in the EU institutions who deal with alcohol and health policy; to Forum members; and to a wider audience of policy makers, researchers and stakeholders.

The EAHF was established in June 2007 following the adoption by the European Commission of the EU's strategy to reduce alcohol-related harm (October 2006). As defined in its Charter, the EAHF is a "platform for all interested stakeholders at EU level that pledge to step up actions relevant to reducing alcohol-related harm". The Forum currently consists of 70 members<sup>2</sup> with a variety of backgrounds including companies and associations in the fields of the sale and production of alcoholic beverages, media and advertising; NGOs aiming to minimise alcohol-related harm; research organisations, and other professional bodies. Membership in the Forum is voluntary.

The Forum is an innovative policy tool that endeavours to involve as many relevant actors as possible in a multi-stakeholder dialogue on a voluntary basis. It encourages participants to take action toward the reduction of alcohol-related harm according to their own capacity and focus. Members do so by means of one or several initiatives, which are referred to as commitments. These commitments relate to the seven priority areas identified in the Forum's Charter, which are discussed in greater detail in the following section.

Part of the agreement amongst the Forum members is that all members produce monitoring report(s) regarding the progress of their commitment(s). These reports are submitted to DG SANCO in a standardised form (see annex II). The quality assessment of the monitoring reports that is presented here does not concern substantive aspects of Members' commitments such as their formulation, effectiveness and potential contribution to reaching the goals of the EU Alcohol Strategy. It focuses solely on the quality of the information provided in the monitoring exercise as such, including a description of the commitment's objectives, allocated resources, generated outputs, outcomes and longer-term impacts, and dissemination and evaluation thereof.

Section one of this report briefly describes the policy context of the EAHF. Section two provides an overview of the 2013 quality evaluation process and describes the main relationships between member categories and monitored commitments. Section three discusses the methodology that was used to assess the monitoring reports by explaining both the overall approach to the monitoring reports and the different phases of the methodology. Section four presents the results and main findings of the monitoring quality assessment. It includes an overview of the main improvements and shortcomings as well as a discussion of specific issues pertaining to the different report sections. Section five concludes and puts forward a number of ideas for further action.

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<sup>&</sup>lt;sup>1</sup> Charter establishing the European Alcohol and Health Forum, p. 2.

<sup>&</sup>lt;sup>2</sup> As of 25 April 2013

# **Executive summary**

## The European Alcohol and Health Forum

The European Alcohol and Health Forum (EAHF) was established in June 2007 following the adoption by the European Commission of an EU strategy to support Member States in reducing alcohol-related harm (October 2006). As defined in the *Charter establishing the European Alcohol and Health Forum*, the Forum is a "platform for all interested stakeholders at EU level that pledge to step up actions relevant to reducing alcohol-related harm". The Forum is an innovative policy tool seeking to involve as many relevant actors as possible in a multi-stakeholder dialogue on a voluntary basis. It encourages participants, according to their own capacity and focus, to take action toward the reduction of alcohol-related harm.

The Forum presently encompasses 70 members with a variety of backgrounds. These include companies and associations in the fields of the sale and production of alcoholic beverages, media and advertising; NGOs aiming to minimise alcohol-related harm; research organisations, and other professional bodies. Members formally engage in contributing to reduce alcohol-related harm by means of one or several initiatives, which are referred to as 'commitments'. These commitments relate to the seven priority areas identified in the Charter of the EAHF.

# The Importance of Monitoring the Forum's initiatives

In its annex number two ("monitoring Commitment"), the EAHF Charter requires that Forum members monitor the implementation and performance of their commitments "in a transparent, participative and accountable way". As part of this process, all members submit a yearly monitoring report(s) to DG SANCO on the progress of their commitment(s), the overall purpose being to enhance trustworthiness and transparency as well as to develop good practice on monitoring. Systematic monitoring is crucial. It helps Forum members to assess the progress of on-going initiatives and to adapt them in a timely way in the face of unforeseen challenges or constraints.

This quality assessment report aims to ensure that the commitments, as presented in the monitoring reports, are clearly written and thus understandable to the general public. By giving concise, precise and clear information, the general reader should get a clear understanding of what the commitment is about and what the respective Forum member has done in the reported period to implement the commitment and with what result.

# **The Quality Assessment Process**

This report presents the results of the fifth annual quality assessment of the EAHF monitoring reports by an external contractor. As in previous years, this assessment does not concern substantive aspects of Forum members' commitments such as their formulation, effectiveness and potential contribution to reaching the goals of the EU Alcohol Strategy. It rather focuses on the information provided in the monitoring reports as such, including a description of the commitment's objectives, allocated resources, generated outputs and outcomes, and dissemination and evaluation thereof.

Members submit their monitoring reports in a standardised format comprising 12 sections that relate to the main requirements stated in annex two ("Monitoring Commitment") of the Forum's Charter. Where the implementation of a commitment has been completed, the annual report is also a final report: in this case, Forum members are in addition requested to present information regarding their evaluation and dissemination activities (sections that are not mandatory for intermediate monitoring reports).

Information provided in each section of the reports<sup>3</sup> is assessed on the basis of criteria of specificity, clarity, focus and measurement. Details of the assessment are further explained in the methodology section of this report.

Prior to the assessment of all commitment monitoring reports, the Milieu Ltd. team led a pilot assessment of a selection of monitoring reports submitted for this and last year, to ensure a shared and unambiguous approach. Upon completion of the pilot phase, the team assessed the remaining reports. Quality assurance of the scoring process was conducted independently by a separate team member, with prior experience of the assessment. As part of the quality assurance, the assessment forms were reviewed with a specific focus on both quality and consistency across reports. In general, it considered the consistency in the overall approach to scoring of the 12 sections and recommendation uptake; the consistency in language and terminology; and the quality of the monitoring.

# The Fifth Monitoring Progress Report: What's New?

Although quality assessment is dynamic and subject to constant discussion and improvement, consistency is the cornerstone of the process. Consistency is important for both the strategic approach and the methodology used for assessing quality. The methodology adopted in the Fifth Monitoring Progress Report uses four previous editions as building blocks and ensures consistency by maintaining the same structure and rationale as the fourth monitoring progress reports. A strong focus is maintained on the area of 'recommendation uptake' with the aim of providing additional feedback and guidance to the commitment holders on how to improve their monitoring efforts. The assessment of the 'recommendation uptake', which is conducted for each main section in the individual feedback forms, was possible for 31 out of the 58 monitoring reports assessed this year (compared to 24 reports last year) 4.

# Overview and Main Findings of the 2013 Assessment

This year 87 reports were expected from 42 Forum members. Instead, 58 monitoring reports from 29 Forum members were submitted. The number of monitoring reports received and assessed in the 2009-2013 period is summarised in Table 1 below.

Table 1: Overview of submitted and reviewed reports 2009-2013

Year	Reports	Reports	Intermediate	Final	No. of Forum
	submitted	assessed*	(assessed)	(assessed)	members
					submitting reports
2013	58	58	37	21	29
2012	53	44**	34	10	37
2011	66	65	39	26	44
2010	88	81	41	40	47
2009	91	91	59	32	43

<sup>\*</sup>The number of reports assessed can be lower than the number of reports submitted because reports that are identical (or nearly identical) to reports submitted for the previous period(s) are not assessed.

Of the 58 reports that were assessed in the course of the 2013 monitoring exercise, 37 have an intermediate status and 21 have a final status. The total number of reports and the number of final reports have both increased in 2013 compared to the previous period. Despite this increase, it must be noted that many members failed to report in 2013. For 18 new commitments (started in the second half of 2012), nine

<sup>\*\*</sup>This year, nine of the submitted reports were not assessed because 7 were identical to the corresponding reports submitted in 2011, and 2 were identical to the 2010 reports.

<sup>&</sup>lt;sup>3</sup> Section 10, "other comments" is not assessed. The rationale for this exception is provided in the methodological section of this

<sup>&</sup>lt;sup>4</sup> For four reports, the recommendation uptake score was based on the recommendations given for intermediate reports submitted for the 2011 monitoring exercise, as no reports had been submitted for the 2012 monitoring exercise.

commitments (ending in the second half of 2012 for which a final report was expected) and two commitments whose report was missing from the previous year, there was also no submission.

Compared to last year, when 9 of the 53 reports submitted were not assessed, being identical to previous years', there has been a substantial improvement in the 2013 exercise. None of the reports submitted were completely identical to previous years' reports. Even when some of the reports were found to be similar, these were assessed, as the information was updated showing progress between 2012 and 2013. Only a few sections of few reports presented identical information to the previous year's assessment. This tendency has been flagged in the main conclusions of the individual feedback form, on a case by case basis.

The outcome of this year's evaluation exercise shows a slight improvement in the quality of reporting efforts on behalf of the commitment holders that submitted their monitoring reports. The median score of the information provided by Forum members in their monitoring reports has in fact remained consistent for five out of the eight sections, with a very slight improvement registered in the average scores of some sections. For the remaining three sections, the median scored has decreased. The overall median score in 2013 returned to 4 as in 2011, compared to 4.5 reached in 2012. Particularly noticeable improvements have occurred in the average scores for the section giving information on commitments' outputs.

In 2013, the median score for the section regarding inputs (including man-hours and man-days for specific periods and financial resources) registered a decrease. This was highlighted by the fact that the majority of the Forum members did not follow the recommendation to include information on the financial allocation to the commitment.

Similarly, although overall the scores remained unchanged, many members still do not provide sufficient information regarding outcome and impact indicators and unable to judge the success and effectiveness of their commitment. This is partly due to the fact that many of these commitments are still on-going or started in early 2013 or in December 2012; commitment holders are nevertheless asked to attempt to anticipate the outcomes and impacts of their commitment to improve the overall quality of their reporting efforts.

A section where a remarkable drop has been registered is in the scoring of the 'evaluation details section'. For 2013, the median score in the 'evaluation details' section for final reports was only 2.5, as compared to 3 in 2012. In opposition to the other sections, where the number of middle-ranking and high scoring reports is observed, the figures for 2013 and 2012 show that the scores remain polarised for this section; there are still numerous reports that perform poorly in this section. If the same information for all reports, including intermediate reports, is looked at, a different result will be observed. The median score in the 'evaluation details' section for all reports was 3.5, a half point more than in 2012. This means that commitment holders that do voluntarily provide information for the 'evaluation details' section are more advanced- they took 'ownership' of the data and carried out better evaluation- compared to those members that had to do it as required for final reports. A recurrent problem continues to be that some monitoring reports provide very limited information in distinguishing between internal and external evaluation. Information is also scarce for evaluation details pertaining to different activities in cases where commitments entail multiple components.

Only a few Forum members have systematically followed the recommendations in the 2012 individual feedback forms. Examination of the 31 reports for which comparisons could be established in 2013 suggests a moderate uptake level. This year's median score shows a 10 percentage points drop from last year's uptake levels (from 50.0% in 2012 to 40.0% in 2013).

The decline in the recommendation uptake score does not contradict better performance overall. The failure to consider all recommendations in the 2013 reports does not necessarily mean that the reports as such will not be of good quality<sup>5</sup>. For example, if for a particular section a recommendation has been made to include

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<sup>&</sup>lt;sup>5</sup> For example, in one of the reports, the recommendation given in a certain section asked for additional quantitative data that would support the evidence. The commitment holder did not provide additional quantitative data and therefore received a 0 mark in the 'recommendation uptake' section. At the same time, however, the commitment holder still received a very high score of 4.5 in the section overall, because the more detailed quantitative data was the only criteria not fulfilled to the highest extent.

additional quantitative data and the commitment holder has not followed the recommendation, then the 'recommendation uptake' score for the section is 0; whereas the overall score for the section can be as high as 4.5 out of 5. If no recommendations have been taken into account, the overall scores can be expected to be at the level of the previous reporting period. If any of the recommendations are considered, the overall scores can be expected to increase. The overall scores of the scored sections have to be viewed separately from the scores for recommendation uptake.

The 'recommendation uptake' modest median and average scores for 2013 seem to reflect members' difficulties in following recommendations that ask for more quantitative data. This is especially true for the input sections, which registered a decrease in 2013 and could be probably argued as well for the outcome and impact indicators, the evaluation and the dissemination sections.

The overall steady performance in results should be considered, however, in light of a number of important statistical effects. First, there has been a considerable decrease since 2011 in the total number of reports submitted and in the number of final reports. Secondly, there has been a clear relative increase in the number of high and middle-ranking scoring reports. At the same time, there has been a relative decrease in reports receiving very low scores (0-2.5). In fact, except for the outcome and impact indicators section and the evaluation details section, improvements in median scores did not leave polarised results in all categories.

Notwithstanding the steady results observed, some of the shortcomings identified in the 2012 quality evaluation have persisted in 2013. The most prominent among these aspects are:

- Outcomes and Impacts: The number of monitoring reports that provide little or no information regarding the commitment's outcome and impact remains relatively high compared to the quality of reporting in other sections. Although the provision of this information is beyond the Forum's minimum monitoring requirements (as laid down in the Charter of the Forum), it is critical for the effectiveness of commitments to be appropriately understood.
- <u>Linkages</u>: A significant proportion of reports lacked a description of how the objectives, outputs and outcomes of a commitment linked together. The majority of the reports received quite a high score in the objectives and outputs sections, but a low score for the outcomes and impacts section. Such inconsistency would be avoided if linkages were clearly identified.
- <u>Mandatory sections</u>: Some reports did not complete all mandatory sections for the intermediate and final reports. Where mandatory sections were not filled in, they were scored based on the information found in all other sections of the report.
- Wrong sections: In a high number of reports, information was presented under the incorrect report section. In addition, there is an overall tendency to provide excessive details in the section for implementation, while a lack of sufficient detail is observed in the sections for input, output and outcome indicators. Although the team in charge of the evaluation did not lower scores in such cases, it must be noted that this inaccuracy may prove misleading for the reader.
- Quantitative data: Many reports did not provide sufficient quantitative detail. As compared to the other three scoring criteria (specificity, clarity, and focus), scores were lowest in the measurement criterion. In this regards, commitment holders should at least try to provide the approximate estimation of the quantitative data required for the reporting exercise.

After a closer scrutiny of the 2013 monitoring reports, new areas for improvement have likewise been identified. These especially refer to the dissemination and evaluation details sections. Despite members showing improved efforts in completing these sections (i.e. a higher number of middle-ranking scores was observed), a misunderstanding in the interpretation of the information to be provided could be perceived. Some members in fact tended to repeat the information already submitted under other sections. This may be understandable for the evaluation section, as no guidance is provided in Annex two of the Forum Charter. Evaluation details are in fact open to a double interpretation, with possibility to refer to both the evaluation

of the effectiveness of the commitments and/or the activities implemented themselves. This especially occurred with reference to research activities that evaluated changes in behaviour and attitude for a specific target group.

While for the dissemination section no guidance is provided in Annex two of the Forum Charter, the commitment monitoring form clearly requires that the information provided answer the question "How were the results of the commitment disseminated?" For some reports, information on awareness raising and media activities was often repeated in the dissemination section without making reference to the dissemination results.

# Policy Context of the European Alcohol and Health Forum

#### 1.1 The European Alcohol and Health Forum

The European Alcohol and Health Forum (EAHF) is one of the structures for supporting the implementation of the European strategy to reduce alcohol-related harm. The overall objective of the strategy is to reduce the social and economic damage caused by alcohol consumption. In doing so, it targets the harmful and hazardous effects of alcohol consumption rather than the product itself.<sup>6</sup>

Forum members submit commitments with a view to reducing alcohol-related harm. In the Forum members can share their experience and accomplishments with potential partners and beneficiaries. It is worth noting that the Forum's membership is made up of different types of organisations that work in various alcoholrelated fields and various levels of alcohol action and policy. They join their efforts to minimise the harm caused by alcohol consumption. EAHF's commitments, which are based on its overall aims, are subject to a monitoring process that needs to be consistent to ensure transparency and trustworthiness within as well as beyond the context of the Forum. Monitoring reports are a crucial component of the Forum, as they communicate to the general public the member's efforts to reduce alcohol-related harm.

The EAHF is a "platform for all interested stakeholders at EU level that pledge to step up actions relevant to reducing alcohol-related harm". The Forum is an innovative policy tool that endeavours to involve relevant actors in a multi-stakeholder dialogue and to generate momentum by encouraging all participants to take action on tackling alcohol-related harm according to their own capacity and focus. The Forum operates in complete transparency, requiring all members to publicly commit to taking actions, to describe their activities and monitor and report on what they have done to implement their commitments. The transparency principle is applied to all Forum members, and the "name and praise" approach seeks to achieve collective positive action and commitment without legally binding enforcement.

Forum members, which join on a voluntary basis, include umbrella organisations at EU level, national and sub-national organisations and individual companies. As a condition for their participation, members each take actions to address at least one of the seven priority areas identified in the Charter establishing the European Alcohol and Health Forum. These priority areas are the following<sup>8</sup>:

- Better cooperation/ actions on responsible commercial communication and sales,
- Develop efficient common approaches to provide adequate consumer information,
- Develop information and education programmes on the effect of harmful drinking,
- Develop information and education programmes on responsible patterns of alcohol consumption,
- Enforce age limits for selling and serving of alcoholic beverages,
- Develop a strategy aimed at curbing under-age drinking,
- Promote effective behavioural change among children and adolescents.

<sup>&</sup>lt;sup>6</sup> See http://europa.eu/legislation\_summaries/public\_health/health\_determinants\_lifestyle/c11564b\_en.htm.

<sup>&</sup>lt;sup>7</sup>RAND divided the six priority areas as laid down in the Charter establishing the European Alcohol and Health Forum (p.2) into seven priority areas, see: RAND, First Monitoring Progress Report, Chapter 2, p. 9.

Charter establishing the European Forum-Alcohol and Health Section 2: Forum for Action http://ec.europa.eu/health/ph\_determinants/life\_style/alcohol/documents/Alcohol\_charter2007.pdf

# 1.2 The Monitoring Mechanism within EAHF

The Forum's Charter stresses the key role of monitoring members' commitments and deems it essential that "there is sufficient outside involvement in reviewing progress and outcomes to create trust in the process". Forum members are expected to monitor their individual commitments' performance in a "transparent, participative and accountable way" and to "report on the inputs, outputs and outcomes of the commitments" by presenting them on a website 1. Transparency is a way of building trust between Forum members and ensuring the credibility of the mechanism vis-à-vis external audiences including the European Parliament and the media. The monitoring mechanism also serves to develop and share good practice; as well as to enable timely adaptation of on-going initiatives in the face of unexpected challenges or constraints.

Self-monitoring takes place on an annual basis. Members use a standard template for their monitoring reports. This template was developed by the Commission in cooperation with Forum members (see annex II to this report). The external evaluation of the Forum members' monitoring reports represents a gauge for independent quality assessment, based on the criteria of objectivity and comparability. This instrument has thereby the capability to strengthen the trust-building process and to promote the objectives of the Forum.

The first evaluation of the monitoring reports' quality covered all reports submitted by Forum members as of March 2009; this was also the first year that the Forum members submitted monitoring reports on their commitments. This first evaluation was carried out by RAND Europe. Its results were summarised in the First Monitoring Progress Report and presented at the plenary meeting of the EAHF in November 2009. In addition, Forum members received individual feedback. The methodological approach, standards and lessons learned from this first round of external quality assessment (2009) were subsequently taken on board by Milieu Ltd. for the 2010 quality assessment exercise. A number of changes were introduced, however, to increase transparency with regard to the criteria used in the evaluation. These changes were suggested by the Commission in cooperation with Milieu Ltd.

This incremental process has been continued by Milieu Ltd. for the subsequent quality assessment cycles of EAHF monitoring activities. Through this iterative process, the monitoring mechanism has been further strengthened. This has however been done while bearing in mind that, although quality assessment is dynamic and subject to constant discussion and improvement, consistency and comparability are the process's cornerstones. In general terms, particular emphasis has been paid to ease dynamic assessment of the monitoring reports' quality, to enable meaningful comparisons, to provide thorough recommendations for improvement, and to keep high levels of transparency.

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<sup>&</sup>lt;sup>9</sup> Charter establishing the European Alcohol and Health Forum, p.3.

<sup>&</sup>lt;sup>10</sup> Ibid, website address: http://ec.europa.eu/eahf/

<sup>11</sup> Ibid.

# 2 Overview of the 2013 monitoring process

This section briefly presents the main features of the Forum's membership regarding the number of Forum members and a classification of Forum members by activity. It also contains information regarding the monitoring reports submitted for the 2013 evaluation exercise and briefly examines changes from previous editions.

## 2.1 The Forum Members

This section provides a short overview of the Forum's membership including total number of members and their respective sectors of activity. A full list of the Forum members that submitted a monitoring report in 2013 can be found in annex I to this report.

The European Alcohol and Health Forum encompassed 70 members as of 25 April 2013, two more than when the 2012 evaluation was carried out. A classification of Forum members was originally prepared by DG SANCO in a 2009 report on Forum commitments<sup>12</sup>. The following categories were identified:

- Alcohol-related NGOs
- Broader NGOs
- Health professionals
- Producers of alcoholic beverages
- Advertising, marketing and sponsorship
- Media
- Retailers, wholesalers and caterers
- Research institutes
- Others

Following consultations with DG SANCO, the First Monitoring Progress Report used a different classification with four categories on the basis of the nature of members' activities. To ensure comparability, Milieu Ltd. decided to keep this system in subsequent evaluations. The four categories are listed below:

- Non-governmental organisations and professional health organisations
- Advertising, marketing, media and sponsorship organisations
- Production and sales organisations
- Research institutes and others

The following table shows the total number of Forum members per category.

Table 2: Breakdown of Forum members by type, 2009-2013

Type of Forum member	No. of				
	Forum	Forum	Forum	Forum	Forum
	members	members	members	members	members
	(2009)	(2010)	(2011)	(2012)	(2013)
NGOs and professional health organisations	19	20	21	23	25
Advertising, marketing, media and sponsorship	7	7	7	7	7
organisations					
Production and sales organisations	27	27	27	28	28
Research institutes and others	7	10	10	10	10
Total	60	64	65	68	70

The table shows that, although NGOs and health professionals are well represented in the Forum (25 members), the largest share of Forum members falls under the category of production and sales organisations

<sup>&</sup>lt;sup>12</sup> Summary Report: http://ec.europa.eu/health/ph\_determinants/life\_style/alcohol/Forum/docs/report\_commitments\_en.pdf, p.7-8.

(28 members). The presence of the other two categories (research institutes and other organisations; and advertising, marketing, media and sponsorship organisations) is comparatively smaller (with 7 members for advertising organisations and 10 for research institutions and others).

In 2013, 29 Forum members submitted monitoring commitment reports (an additional six Forum members co-owned a commitment each) compared to 37 in 2012 and 44 in 2011. A breakdown for the period 2009-2013 is presented in table 3 below. It is noted that the number of members from the NGOs and professional health organisations that submitted a monitoring commitment report has decreased of more than a half from last year, while the number of other members has decreased of only one unit. This is due to the fact that the majority of the members that failed to report for the 2013 exercise are from the NGOs and professional health organisations.

Table 3: Breakdown of Forum member categories having submitted monitoring reports by type 2009-2013

	2009		2010	)	2011		2012		2013	3
Type of Forum member	No. of Forum members that submitted a report(s)	Shar e of total	No. of Forum members that submitted a report(s)	Share of total	No. of Forum members that submitted a report(s)	Share of total	No. of Forum members that submitted a report(s)	Share of total	No. of Forum members that submitted a report(s)	Share of total
NGOs and professional health organisations	13	30%	16	34%	16	36%	11	30%	5	17%
Advertising, marketing, media and sponsorship organisations	4	9%	5	11%	4	9%	2	5%	2	7%
Production and sales organisations	22	51%	22	47%	19	43%	19	51%	18	62%
Research institutes and others	4	9%	4	9%	5	11%	5	14%	4	14%
Total	43	100 %	47	100%	44	100%	37	100%	29	100%

# 2.2 The 2013 Monitoring Reports

This section briefly discusses the distribution of monitoring reports by priority area, as well as the relationships between the various member categories and the priority areas set out in the Forum Charter to which their commitments relate. It also focuses on the distribution of monitoring reports between intermediate and final status, and on the status of commitments (i.e. whether the commitment is still active or not).

This year 58 monitoring reports were submitted by 29 Forum Members; 87 reports should have been received from 42 members. The number of monitoring reports received in 2009, 2010, 2011 and 2012 were respectively 91, 88, 66 and 53.

Despite this increased, it must be noted that many members also failed to report in 2013. No report was in fact submitted for 18 new commitments that started in the second half of 2012; for nine commitments that ended in the second half of 2012 for which a final report was expected to be submitted; and for 2 commitments whose report was already missing last year.

In contrast to last year, when 9 of the 53 reports submitted were not assessed because they were identical to the corresponding reports submitted in either 2011 or 2010, there has been a substantial improvement in the 2013 exercise, as none of the reports submitted were completely identical to previous year's reports. Even when some of the reports were found to be similar, these were assessed as the information was updated

showing progress achieved between 2012 and 2013. Only a few sections of few reports presented identical information to the previous year's assessment. This tendency has been flagged in the main conclusions of the individual feedback form, on a case by case basis.

Of the 58 reports of the 2013 exercise, 37 have intermediate status<sup>13</sup> and 21 have final status, compared to 10 final reports in 2012, 17 in 2011, 41 in 2010 and 32 in 2009. Thus, contrary to 2012 and 2011, where the total number of reports and the number of final reports was lower than in 2011 and 2010, both have increased in 2013 compared to 2012. The increase in the number of intermediate reports can be explained by the high number of new commitments introduced in 2012 (27 new reports have been submitted). Some members have also reported on recent commitments, starting at the beginning of 2013 (two commitments) or in December 2012 (two commitments).

According to the information provided on DG SANCO's dedicated website, 48 commitments from 29 Forum members are still active at the time of writing of this report<sup>14</sup>. In 2012, 55 commitments from 32 members were still active at the time of the assessment.

In the 2013 exercise, three reports were submitted as intermediate reports, although the commitment had come to an end and the monitoring reports should have had a final status. This was indicated with a comment in the individual feedback forms, but did not affect the scores of the monitoring reports.

A breakdown of the monitoring reports submitted by type of Forum member for the 2009-2013 period is presented in table 4 below.

Table 4: Total number of monitoring reports submitted, by type of Forum member, 2009-2012

	20	09	20	10	20	11	20	12	20	13
Type of Forum	No. of	Share								
member	reports	of								
		total								
NGOs and	17	19%	16	18%	18	27%	14	26%	7	12%
professional health										
organisations										
Advertising,	4	4%	5	6%	4	6%	2	4%	4	7%
marketing,										
sponsorship and										
media organisations										
Production and sales	63	69%	58	66%	39	59%	30	57%	42	72%
organisations										
Research institutes	7	8%	9	10%	5	8%	7	13%	5	9%
and others										
Total	91	100%	88	100%	66	100%	53	100%	58	100%

Production and sales organisations remain the member category with the largest amount of monitoring reports submitted with 72% of the total. Non-governmental organisations and professional health organisations, submitted fewer reports than in 2012 and represented a share of only 12% of the total, a substantial drop compared to 2012. The share of reports submitted by research institutes and others fell from 13% to 9% in 2013, which is comparable with 2009 and 2011.

As previously observed, after a continuous decline in the total number of reports submitted in the period 2010-2012, the number of reports submitted has slightly increased in 2013, though it remains under the 2011 figures. There are several factors contributing to this trend. For example, the production and sales organisations have submitted 42 reports compared to 30 in 2012. Similarly, the number of reports submitted by Advertising, marketing, sponsorship and media organisations, has slightly risen compared to 2012. On the

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<sup>&</sup>lt;sup>13</sup> One of the main differences between the intermediate and final reports is that in contrast to intermediate reports, for the final reports, filling out the sections on evaluation and dissemination activities are mandatory.

<sup>&</sup>lt;sup>14</sup> The term 'active commitment' refers to those commitments which are ongoing at the time of the reporting deadline of the respective year.

other side, the number of reports submitted by NGOs and professional health organisations has substantially decreased in 2013. This is due to a large extent to the number of members in this category that were considered as failed to report.

Forum members' commitments relate to at least one of the Forum's seven priority areas. To ensure consistency with the previous rounds of quality assessment, data presented in this report solely consider the first (or main) priority area listed in the European Alcohol and Health Forum's database. <sup>15</sup> Table 5 below shows the relationship between the commitments presented in members' monitoring reports and the Forum's priority areas for the period 2009-2013.

Table 5: Breakdown of monitoring reports by priority areas, 2009-2013

Table 5: Dreakdown of	20			10	20		20	12	20	13
Priority areas	No. of reports	Share of total								
Better cooperation/ actions on responsible commercial communication and sales	25	27%	24	27%	10	15 %	9	17%	14	24%
2. Develop efficient common approaches to provide adequate consumer information	8	9%	8	9%	4	6%	8	15%	3	5%
3. Develop information and education programmes on the effect of harmful drinking	20	22%	23	26%	27	41%	16	30%	18	31%
4. Develop information and education programmes on responsible patterns of alcohol consumption	20	22%	16	18%	10	15%	11	21%	16	28%
5. Enforce age limits for selling and serving of alcoholic beverages	7	8%	9	10%	6	9%	4	8%	4	7%
6. Develop a strategy aimed at curbing under- age drinking	8	9%	5	6%	5	8%	3	6%	2	3%
7. Promote effective behavioural change among children and adolescents	3	3%	3	3%	4	6%	2	4%	1	2%
Total	91	100%	88	100%	66	100%	53	100%	58	100%

The main changes appear to be driven by the increase in the number of reports submitted in 2013 by member categories 'production and sales organisations' and 'advertising, marketing, sponsorship and media organisations' 16. An increase is visible in the number of reports relating to priority area number one, 'Better cooperation/ actions on responsible commercial communication and sales', in which these types of members are typically more active. The number of reports here increased from 9 to 14 over last year. Conversely, it seems that these types of members have shifted away from priority area number two 'Develop efficient common approaches to provide adequate consumer information' to priority area number one. Compared to 2012, there has been a stark decrease in the number of reports relating to priority area number two, falling from 8 in 2012 to 3 this year. The share of commitments assigned to this priority decreased from 15% to 5%.

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<sup>&</sup>lt;sup>15</sup> European Health and Alcohol Forum database: <a href="http://ec.europa.eu/eahf">http://ec.europa.eu/eahf</a>.

<sup>&</sup>lt;sup>16</sup> See Summary report 2013, breakdown of priorities per category of members (figure 4).

The number of reports assigned to each of the remaining priorities has remained relatively stable, but their relative shares in the total number of submitted reports have changed due to statistical effects. For areas 6-7, the decrease in the number of reports appears large in relative terms (50%), but this effect should not be over-emphasised given the low numbers of reports in these priority areas overall (combined share of only 5% of the total).

Considering the whole reporting period of 2009-2013 it should be noted that any identification and description of trends has to be considered with caution given the decrease in the number of submitted reports over time. Overall, it can be observed that after a continuous decrease in the number of commitments submitted in priority area one 'better cooperation/actions on responsible commercial communication and sales', the number of reports in this priority area has increased significantly in 2013.

The share and number of commitments in area two 'develop efficient common approaches to provide adequate consumer information' has been relatively stable over time (considering statistical effects), with a dip in 2011and 2013. For priority area three, it is difficult to observe a definite trend, as the number and share of commitments has increased in the period 2009-2011, and then decreased from 2011 to 2013. For area number four, there has been a slight decrease in reports in the period 2009-2011, followed by a slight increase in 2011-2012. For the priority areas five, six and seven, there has been some fluctuation in the reports submitted (and in the respective shares) over time; these three areas have consistently received fewer commitments than the other areas. The three areas with the most commitments have been areas number one, three and four.

Tables 6a - 6d below show the breakdown of monitoring reports by type of Forum member and by primary priority area for the 2009-2013 period.

The largest share of commitments developed by member category 'NGOs and professional health organisations' relates to priority area number three 'develop information and education programmes on the effect of harmful drinking', which signals a continuation of the trend dating back to 2009.

For 'advertising, marketing, media and sponsorship organisations' commitments have concentrated in priority area one 'better cooperation/ actions on responsible commercial communication and sales' for the reporting periods 2013, 2012 and 2011; it has shifted away from priority area four 'develop information and education programmes on responsible patterns of alcohol consumption', prominent in 2010, and seven 'promote effective behavioural change among children and adolescents', prominent in 2009.

The members of category 'production and sales organisations' have shifted from priority area number three in 2011 to priority area number four in 2012 and 2013. It should be noted, however, that compared to 2012, the number of reports referring to priority three has more than doubled in 2013, making priority three the second priority selected by production and sales organisations. Conversely, for the first two years of the reporting period, the commitments of this member category were concentrated in priority area one.

The commitments of 'research institutes and others' have focused on priority area number three throughout 2010-2013, and also on priority area four in 2009 and 2010.

Tables 6a to 6e: Breakdown of monitoring reports by Forum member category, sorted by priority area, in 2009-2013 (the highest values for each category are shaded)

6a: Type of Forum member	Priority areas (2013)							
	1	2	3	4	5	6	7	
Non-governmental organisations and professional health organisations	1	-	5	-	-	-	1	
Advertising, marketing, media and sponsorship organisations	4	-	-	-		-	-	
Production and sales organisations	9	2	11	15	4	1	-	
Research institutes and others	-	1	2	1	-	1	-	
Total per priority area	14	3	18	16	4	2	1	

6b: Type of Forum member	Priority areas (2012)							
	1	2	3	4	5	6	7	
Non-governmental organisations and professional health organisations	2	2	7	1	-	3	2	
Advertising, marketing, media and sponsorship organisations	2	-	-	-	-	-	-	
Production and sales organisations	5	5	4	10	4	-	-	
Research institutes and others	-	1	5	1	-	-	-	
Total per priority area	9	8	16	11	4	3	2	

6c: Type of Forum member	Priority areas (2011)							
	1	2	3	4	5	6	7	
Non-governmental organisations and professional health organisations	2	2	8	1	1	1	3	
Advertising, marketing, media and sponsorship organisations	3	-	1	-	-	-	-	
Production and sales organisations	5	2	14	9	5	3	1	
Research institutes and others	-	-	4	-	-	1	-	
Total per priority area	10	4	27	10	6	5	4	

6d: Type of Forum member	Priority areas (2010)							
	1	2	3	4	5	6	7	
Non-governmental organisations and professional health organisations	2	1	10	-	-	2	1	
Advertising, marketing, media and sponsorship organisations	-	-	1	4	-	-	-	
Production and sales organisations	18	5	7	15	9	3	1	
Research institutes and others	-	2	3	3	-	-	-	
Total per priority area	20	8	21	22	9	5	3	

6e: Type of Forum member	Priority areas (2009)							
	1	2	3	4	5	6	7	
Non-governmental organisations and professional health organisations	1	1	10	1	1	3	1	
Advertising, marketing, media and sponsorship organisations	3	ı	1	ı	-	-	4	
Production and sales organisations	21	6	7	17	6	5	1	
Research institutes and others	-	1	2	3	-	-	1	
Total per priority area	25	8	20	20	7	8	3	

# 3 Methodology

This section sets forth the methodology used in the quality assessment of the monitoring reports submitted by EAHF members. The methodology adopted in this Fifth Monitoring Progress Report builds upon the four previous editions, and respects the consistency imperative. The Fifth Monitoring Progress Report builds on the 2009 exercise, and has the same structure and rationale as the 2010, 2011 and 2012 reports.

In line with the Fourth Monitoring Progress Report, it focuses on the area of 'recommendation uptake' with the aim of providing additional feedback and guidance to the commitment holders on how to improve their monitoring efforts.

The quality evaluation process is conceived dynamically and updated with each consecutive evaluation exercise, yet it must ensure comparability over time. The methodological approach adopted here seeks, therefore, to provide an objective and clear insight into the quality of Forum members' monitoring activities, both individually and at an aggregate level.

It must be borne in mind that, like in previous years, this assessment does not concern substantive issues of the commitments. It focuses solely on the information provided in the monitoring reports, including a description of the commitment's objectives, allocated resources, generated outputs and outcomes, and dissemination and evaluation thereof.

# 3.1 "SMART" Assessment

In line with the Forum's Charter17, the overall framework for evaluating the quality of members' monitoring reports is based on the use of "SMART" procedure (see box below).

## SMART procedure (Forum Charter)

- **Specific** (connected to the action(s)) clear about what, where, why and when the situation will be changed;
- <u>Measurable</u> able to quantify or qualify the achievements, changes or benefits;
- <u>Attainable/achievable</u> able to attain the objectives (knowing the resources and capacities at the disposal of all those concerned);
- **Realistic** able to obtain the level of change reflected in the objective;
- **Time bound** stating the time period in which the objectives will be accomplished.

The SMART procedure was initially adapted by RAND in the 2009 assessment to better suit the needs of quality assessment and particularly the fact that the assessment focuses on monitoring activities rather than the actual impacts of the commitments.18 In the 2010 evaluation, the COWI/Milieu consortium sought to further refine and clarify the assessment criteria by introducing more specific definitions. This refined version of the SMART procedure has been established as the basis for the assessment and was applied in 2011, 2012 as well as 2013 quality evaluation exercises.

The rationale underpinning the progressive adaptation of this procedure is summarised in table 7 below.

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<sup>&</sup>lt;sup>17</sup> Forum Charter, p. 9-10.

<sup>&</sup>lt;sup>18</sup> RAND, First Monitoring Progress Report, Chapter 3, p. 27.

Table 7: Assessment rationale for criteria of specificity, clarity, focus and measurement

Table 7. Assessmen	Table 7: Assessment rationale for criteria of specificity, clarity, focus and measurement								
Assessment	Interpretation 2009	Clarification 2010 (likewise applied in 2011,							
criteria	interpretation 2009	2012 and 2013)							
Specificity	Does the report state clearly what the commitment aims to do, for whom, how it will be done and by means of which actions it will be accomplished?	The evaluation will focus on whether the report provides all the relevant information (how/who) per report field. The scoring will only assess whether the relevant information is included (the manner in which it is described and the level of detail are scored by the other criteria).							
Clarity	Does the report allow the reader to understand the commitment fully? Does the report offer clear links between objectives, inputs, outputs and outcomes (if present)?	The evaluation will focus on whether the report provides, where relevant, links (between objectives, input, output, etc.) to ensure a better overall understanding. It will also assess whether the information is provided in a clear and understandable manner, and provides a good overview for the reader.							
Focus	Does the report include only relevant information and provide necessary contextual information for the reader to be able to judge the scale of commitment's impacts?	The evaluation will focus on whether the report includes sufficient (but not superfluous) detail and, where necessary, provides contextual information.							
Measurement	Does the report include quantitative data that have been measured accurately and at appropriate intervals, and that are framed in an understandable manner?	The evaluation will assess whether the report provides sufficient quantitative data wherever relevant.							

To ensure the continuous improvement and coherence in assessment across reports and across years, the evaluation team conducts the assessment according to internally agreed 'internal assessment guidelines'.

# 3.2 The Individual Feedback Forms

As stated in the introduction, all members that have submitted monitoring reports receive individual feedback forms. These forms are divided into sections corresponding to those in their monitoring reports. <sup>19</sup> Each section is made up of report fields that refer to the SMART assessment criteria discussed above. It must be noted that not all criteria are applicable in all sections (e.g. not all sections require quantitative data).

Each section receives a maximum score of five if all applicable criteria are fulfilled. The feedback forms used in the Second, Third, Fourth and Fifth Monitoring Progress Reports differ from those used in the First Monitoring Progress Report in that they provide scores per report field instead of only overall scores per section. The template used for individual feedback forms can be found in annex III to this report. Possible scores are presented in table 8 below, along with their respective meaning.

Table 8: Meaning of scores awarded

Score	Meaning
5	Excellent
4	Good
3	Adequate
2	Poor
1	Very poor
0	No (sufficient) response
N/A	Not applicable

As in the last three years assessments, individual feedback forms begin with a general introduction that informs the commitment holder of the individual score of the commitment (expressed in points and in

<sup>&</sup>lt;sup>19</sup> Please refer to annex II for more details on the monitoring reports' standardised template.

percentage of total), and the overall median scores of all commitments submitted for the respective period. The scores are broken down by sections that are scored<sup>20</sup> and by criteria<sup>21</sup>. This introduction also contains the main conclusions of the quality evaluation and information on the assessment process.

Scores are presented in both absolute value and as share of the maximum possible score for each commitment. This seeks to provide a clearer picture of actual performance and ease comparisons across members, given the fact that scoring ceilings vary depending on the reports status (intermediate or final) as well weather non-mandatory fields in intermediate reports have been completed.

Similarly as in 2011 and 2012, the section on 'additional information' was removed from the individual feedback forms. This section was already discounted in the 2010 evaluation process because few Forum members filled in the section. In cases where additional information was provided it was difficult to score and compare on the basis of the defined criteria.

A sample section of a feedback form template is presented in table XX below. For further details, please see annex III: 'Individual feedback form matrix'.

Table 11: Example of a section of the assessment matrix (report section 4 on objectives); maximum possible scores are indicated.

4. Objectives:	The objectives help to focus in more	detail on	what the c	ommitme	nt is aiming to achieve ar	nd connect to specific	
actions and to a specific timeframe and are concrete and precise. In some situations it may be beneficial to divide the objectives into short, medium or long term objectives. In other words, in what way and to which extent have the objectives set out in the							
original commitment form been achieved in the reporting period (max. 500 words)?							
Specificity	Does the report describe how and when the objectives have been or will be achieved?	1					
Clarity	Does the report offer clear links between objectives, inputs, outputs and outcomes?	1					
	Are the objectives set out in a manner that the reader can fully understand the commitment?	1					
Focus	Is only relevant information included in the description of objectives?	0,5			Comments		
	Is sufficient contextual information provided to make the objectives of the commitment understandable?	0,5					
Measurement	Are relevant quantitative data included on the implementation of the commitment?	1					
Total score:		5				Recommendation uptake score	

# 3.3 Recommendation Uptake

One of the main innovations built into the 2011 assessment process consisted of accounting for the extent to which recommendations issued to Forum members in the previous assessment exercise have been integrated into the new monitoring reports. For each section of the individual feedback forms that members filled out, a "recommendation uptake" score is provided, with a maximum score of 2 points for each session filled out. Table 9 lists the possible scores and their meaning for this criterion.

Table 9: Meaning of scores awarded for 'recommendation uptake'

Score	Meaning

<sup>&</sup>lt;sup>20</sup> Sections: implementation; objectives; relevance; input indicators; output indicators; outcome and impact details; evaluation details; dissemination (the latter two are not mandatory for intermediate reports);

<sup>&</sup>lt;sup>21</sup> Criteria: Specificity; clarity; focus; measurement.

2	Recommendation fully taken into account
1	Recommendation partly taken into account
0	Recommendation not taken into account
N/A	Not applicable

In line with the Third and the Fourth Monitoring Progress Report, the individual feedback form also includes the field 'recommendation uptake' (see table 9) aimed at assessing the extent to which Forum members have taken into account 2012 recommendations to improve the quality of the monitoring reports. This assessment, which is conducted for each main section in the individual feedback forms, was possible for 31 out of the 58 monitoring reports assessed this year (as compared to 23 reports last year).

The new 'recommendation uptake' was introduced to strengthen guidance in monitoring commitment holder's efforts. In addition to last year quality assessment, to bolster this approach tailored comments are provided for each section of the individual feedback forms for 2013; and they offer concrete examples of how each section could be improved for future assessment (e.g. indicating what missing information could be added, if the information provided in a specific section would be better suited elsewhere and why and suggestions on the structure of the report itself).

For four reports, the recommendation uptake score was based on the recommendations given for intermediate reports submitted for the 2011 monitoring exercise, as no reports had been submitted for the 2012 monitoring exercise. In 2011 (when the 'recommendation uptake' scoring was introduced) the recommendation score was only based on recommendations given for the intermediate report of the same commitment in the 2010 reporting period.

In section 4.3 of this report that discusses the findings on recommendation uptake, scores are presented as a share of the maximum possible score for each commitment. This seeks to ease comparisons across members, given the fact that scoring ceilings vary depending on the report status (intermediate or final) as well as on whether non-mandatory fields in intermediate reports had been completed in 2011<sup>22</sup>.

# 3.4 Methodological Approach

The methodological approach revolves around the notion of clarity. The overall objective of the monitoring mechanism as envisioned in the Charter of the Forum is that the commitments, as presented in the monitoring reports, are clearly understandable for the general public. The commitments reflect the different objectives of the Charter for which the monitoring reports are one of the main tools to communicate these to the public. It is crucial that the reader, when reading the reports, understands what the scope of the commitment is, what the commitment-related activities are, why the commitment is relevant and relates to the aims of the Forum, etc. It needs to be kept in mind that the purpose is that reader obtains sufficient information from the monitoring report.

To combine clarity with transparency and consistency, the team in charge of conducting the evaluation of the monitoring reports has developed and constantly improved the assessment protocol (also referred to as 'internal assessment guidelines'). The aim of this effort has been to ensure that potentially problematic or borderline cases are dealt with in a consistent manner, and that all monitoring reports are assessed fairly and impartially. A simplified version of this protocol, which for consistency purposes is based upon previous year's, is presented below.

- The overall purpose is trustworthiness and transparency in providing (monitoring) information
- Whenever information is provided that is not mandatory (sections 'evaluation details' and 'dissemination' for intermediate reports), it shall be assessed

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<sup>&</sup>lt;sup>22</sup> The possible maximum values of the 'recommendation uptake' sections were 12, 14 and 16

- Whenever information is not specified in a particular section but can be found elsewhere in the report, the report as a whole shall be taken into consideration (it should be highlighted in comments and points should be awarded if the information is found anywhere in the report)
- Scores are given whenever relevant information is provided. If some irrelevant information is also provided, points are not subtracted. The focus should thus be on "sufficient" relevant information
- The information subject to scoring is the information that is included in the monitoring report. Any additional information (such as references to websites, annexes etc.) will not be taken into account in the assessment process.

In addition, guidance for the evaluation process was agreed for specific criteria, report sections and definitions. Some examples of this guidance are listed in table 10 below.

**Table 10: Assessment Guidance** 

Topic	Guidelines				
Contextual information	Reference should be made to information (society/statistics etc.) that provide additional				
	insight to understanding the commitment.				
Quantitative data	Measurable and verifiable data; data should provide actual information rather than to				
	provide numbers without a meaning.				
Objectives (Clarity)	The objectives should be fully understandable to the reader. This means that there				
	should not be any contradictory or unambiguous information or any gaps.				
Relevance (Specificity)	The report should describe how the commitment is relevant - by reference to evidence				
	that provides a link between the aims of the Forum and the commitment-related actions.				
Clear link	The link needs to be established between the objective and output/outcome (for				
	example: training leads to increased awareness).				
Relevance (Forum aims)	In evaluating whether the commitment is linked to the aims of the Forum the				
	terminology of the aims should be compared with the terminology used in the Charter.				
	If similar wording is used, an implicit link could be established.				
Output indicators	Indicators that measure output of commitment (such as 200 training sessions per year;				
	1500 posters distributed during project period etc.). A critical view is important: the				
	indicators should be measurable and unambiguous. Moreover, the information included				
	under the heading 'output indicators' should provide insight to the reader to whether the				
	stakeholder has done what they said that they were going to do.				
Output versus outcome	Whereas output refers to indicators that measure output of commitment (quantitative)				
(impact)	the outcome is linked to its objective to evaluate what has been achieved (quantitative				
	and qualitative). The information included under the heading 'outcome' should provide				
	insight to whether the commitment is achieved and how successful it has been. This				
	also requires a link to the original objectives.				
Dissemination	How and where have the outputs of the commitment been made publicly available, and				
	what has been the scale of the dissemination activities.				

## 3.4.1 Stage 1: Pilot Assessment

Prior to the assessment of all commitment monitoring reports, the Milieu Ltd. team carried out a pilot assessment of a number of monitoring reports submitted for this and last year's assessment. This exercise was undertaken with the aim of ensuring a consistent and unambiguous approach.

This process was conducted by a core team of Milieu's researchers with the review of a team member with extensive prior experience in evaluation and alcohol policy. The pilot assessment was based on the methodology developed in the first four Monitoring Progress Reports.

The pilot phase consisted of the scoring of eight monitoring reports, which were simultaneously carried out by two researchers. The pilot batch included reports from both 2012 (i.e. covered in the Fourth Monitoring Progress Report) and 2013 to ensure full consistency between the different Monitoring Progress Reports and across individual feedback forms for 2013. In addition, the reports assessed in the pilot exercise have been selected with a view to maintaining a balance between monitoring reports prepared by members from

all four Forum membership categories discussed earlier in this report and intermediate and final reports. Reports where 'recommendation uptake' was assessed were also selected.

As in the previous three years assessments, once the two researchers had assessed all eight reports from the pilot batch, a discussion meeting was arranged with a senior expert. This enabled the evaluation team to assess and overcome differences in scoring approaches and determine whether the methodological approach required further harmonisation, particularly with regard to the following components:

- Assessment criteria
- Identification of gaps
- Level of detail in the comments
- Overall interpretation and judgement
- Recommendations
- Language/register.

# 3.4.2 Stage 2: Assessment of Reports

Upon satisfactory completion of the pilot assessment phase, the team moved on to assess the remaining reports. Despite significant harmonisation work carried out during the pilot phase, the researchers in charge of the evaluation interacted regularly to further discuss and clarify outstanding issues concerning the assessment process. Reports where assessors were in doubt of any of the scores were cross-checked by a team member and subsequently discussed. Informal meetings were arranged to cross-check each other's assessment of the different reports.

## 3.4.3 Stage 3: Quality Assurance

After the assessment process was completed, quality assurance of the scoring process was conducted independently by a separate team member with prior experience in the assessment. As part of the quality assurance, the evaluation forms were reviewed with a specific focus on both quality and consistency across reports, making sure that random checks were performed for monitoring reports submitted by all four types of Forum members. The quality assurance expert also reviewed statistical outliers. In general, the quality assurance process considered consistency in the overall assessment approach; consistency in language; and quality of the evaluation.

The following, more specific, items were also taken into account in the quality assurance phase:

- Consistency in assessing similar commitments
- Consistency in assessing of similar types of Forum members or same Forum member
- Consistency in assessing intermediate and final reports.

# 4 Results of the Quality Assessment of the 2013 Monitoring Reports

This section reviews how Forum members reported on the monitoring of their commitments. The overall results are presented in subsection 4.1, while section 4.2 presents and analyses the median scores<sup>23</sup> by report section in order to identify areas that remain problematic; and to identify areas where significant improvements have been achieved.

It has been observed that Forum members on average have slightly improved their monitoring information compared to previous years. However, results vary considerably from section to section. Moreover, data produced in the course of the 2013 evaluation should be considered with caution along with important statistical caveats. As previously discussed, although the total number of assessed reports has increased this year compared to 2012, it remains lower than the number assessed in 2011 and 2010. This means that the overall results of the evaluation are not fully comparable. It must also be noted that although the share of final reports in the total number of submitted reports has increased in 2013 (61.2%) compared to 2012 (22.7%), intermediate reports still account for the majority. Since sections nine ('evaluation details') and ten ('dissemination') are only mandatory in final reports, the evaluation results for these two sections should be considered with due caution.

# 4.1 Main Findings

Before analysing the results of the 2013 quality assessment, it is worth addressing the overall outcome of last year's evaluation exercise. A substantial improvement in all sections was observed in the quality of reporting from those who submitted monitoring reports in 2012. Although in some sections quality was a little lower than last year, the broad improvement in quality over time. Compared to 2012, in 2013 the median scores are in fact the same for five sections out of eight and decreased for three of them. The overall median score in 2013 was 4, compared to 4.5 in 2012, 4 in 2011, 3.5 in 2010, and 3 in 2009. Consistent positive results remained unchanged for the sections that improved last year, namely implementation, objectives, relevance, output and outcome and impact indicators.

In general, there has been a clear relative increase in the number of reports receiving middle-ranking scores. This is probably attributable to the increased number of assessed reports. At the same time, the number of high scoring reports remained the same and, conversely to last year, none of the sections shows polarised results. Only a very small number of reports have low results as compared to the median scores of the sample and the best performers.

In 2013, the section regarding inputs (including man-hours and man-days for specific periods and financial resources) was challenging for many the Forum members. The median score for this section has in fact decreased a half point.

Although a higher number of middle-ranking scores is observed and the overall median score remained unvaried, many members still do not provide any or adequate information for the section regarding 'outcome and impact indicators', and are not able to judge the success and effectiveness of their commitment.

The section of 'evaluation details' in the 2013 exercise showed an improvement from 3 to 3.5 points. This is different from last year results, when this section received the lowest median score as compared to the other sections. The assessment, however, showed a completely different result if only final reports are taken into consideration. In this case the score is below the threshold, only 2.5, half point lower than last year. A more detailed description for each section is presented in section 4.2 below.

Some Forum members have also followed the recommendations issued in the individual feedback forms. Examination of the 31 reports for which comparisons could be established in 2013 suggests however, only a moderate uptake level, as Forum members scored, on average, 44.0% of the total possible points in this area,

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<sup>&</sup>lt;sup>23</sup> Median values are preferred to mean values here in that they minimise the statistically distorting effects caused by outliers.

slightly down compared to last year. Details on the 'recommendation uptake' scores can also be found in the section 4.2.

Notwithstanding the steady results observed, many of the shortcomings identified in the previous quality assessments have persisted in 2013. New areas for improvement have likewise been identified in 2013. Both aspects are outlined below:

- <u>Outcomes and Impacts</u>: The number of monitoring reports that provide little or no information regarding the commitment's outcome and impact remains relatively high compared to the quality of reporting in other sections. Although the provision of this information is beyond the Forum's minimum monitoring requirements (as laid down in the Charter of the Forum), it is critical for the effectiveness of commitments to be appropriately understood.
- <u>Linkages</u>: There was a significant proportion of monitoring reports, where a description was lacking as to how the objectives, outputs and outcomes of a commitment link together. It is in fact observed that the majority of the reports received quite a high score in the objectives and outputs sections, while a low score was registered for the outcomes and impacts section. Such inconsistency would be avoided if linkages were clearly identified.
- <u>Mandatory sections</u>: Some reports did not complete all mandatory sections for the intermediate and final reports. Where mandatory sections were not filled in, they were scored based on the information found in all other sections of the report.
- Wrong sections: In a high number of reports, information was presented under the incorrect report section. In addition, there is an overall tendency to provide excessive details in the section for implementation, while a lack of sufficient detail is observed in the sections for input, output and outcome indicators. Although the team in charge of the evaluation did not lower scores in such cases, it must be noted that this inaccuracy may prove misleading for the reader.
- Quantitative data: Many reports did not provide sufficient quantitative detail. As compared to the other three scoring criteria (specificity, clarity, and focus), scores were lowest in the measurement criterion. In this regards, commitment holders should at least try to provide the approximate estimation of the quantitative data required for the reporting exercise.
- <u>Multi-part commitments</u>: Gaps were found in the presentation of the implementation steps that relate to different parts of the commitment. For example, certain subtasks or time periods were not covered in some reports; or whereas some components of the commitment were described very well, others were overlooked.
- External sources: Instead of including relevant information in the commitment monitoring reports, a number of commitment holders provided links to outside sources where information can be found. These commitment holders were reminded that the Forum members' monitoring efforts are assessed solely on the basis of the contents of the monitoring reports (although references and details on outside sources are also welcome).
- Status of reports: In four cases, members have reported on recent commitments that started at the beginning of 2013 (two commitments) or in December 2012 (two commitments). Such cases, despite being a good example of the willingness of members to participate to the monitoring exercise and therefore to the general process of improvement in the evaluation of effectiveness of commitment, eventually bring a distortion to the final median results. For three cases out of four, in fact, the lowest score was given for the outcome and impact section because the information was not provided.

After a closer scrutiny of the 2013 monitoring reports, new areas for improvement have likewise been identified. These especially refer to the dissemination and evaluation sections. Despite members having

shown improved efforts in completing these sections (i.e. a higher number of middle-ranking scores was observed), a misunderstanding could be perceived in the interpretation of the information to be provided. Some members tended to repeat the information already submitted under other sections. This could be understandable for the evaluation section as no guidance is provided in Annex two of the Forum Charter. Evaluation details are in fact open to a double interpretation, with the possibility to refer to both the evaluation of the effectiveness of the commitments and/or the activities implemented themselves. This especially occurred with reference to research activities that evaluated changes in the behaviour and attitude of a specific target group.

While for the dissemination section no guidance is provided in Annex two of the Forum Charter, the commitment monitoring form clearly required that the information provided answer the question "How were the results of the commitment disseminated?" For some reports, information on awareness raising and media activities was often repeated in the dissemination section without making reference to dissemination of results.

# 4.2 Results by Section

This section summarises the results of the 2013 quality evaluation of EAHF members' monitoring reports disaggregated by report sections. To the extent possible, comparisons are established with the four previous evaluations of 2009-2012. Table 12 below presents an overview of the median scores for each report section as structured in the assessment matrix discussed earlier in this report. The median is the value separating the higher half of scores from the lower half. For even numbers of scores, it is calculated as the mean of the two middle values. Median values are consistently used to reference scores throughout this report because they are less sensitive to statistical outliers (extreme values) and hence more robust. For indicative purposes, mean (or average) values are also presented.

Table 11: Median scores per section, 2009-2012

14010	11. Wedian scores per section, 2003-2012	Median scores					
Report Section		2009	2010	2011	2012	2013	
1.	Commitment summary	not	not	not	not	not	
	·	scored	scored	scored	scored	scored	
2.	Link to the websites relating to the	not	not	not	not	not	
	commitment		scored	scored	scored	scored	
3.	Description of the implementation of the	3	3.5	4	4.5	4.5	
	commitment						
4.	Objective of the commitment	3	3	3.5	4	4	
5.	5. Relevance to the aims of the Forum		3.5	4.5	5	5	
6.	6. Input indicators		3.5	4.5	4.5	4	
7.	7. Output indicators		3.5	4	4.5	4.5	
8.	Outcome and impact indicators	3	2.5	3	3.5	3.5	
9.	Evaluation details	3	2.5	2.5	3*	2.5*	
10.	Other comments related to monitoring the	4	not	removed	removed	removed	
	commitments		scored				
11.	Dissemination of commitment results <sup>24</sup>	3	3	3.5*	4*	3.5*	
12.	References to further information relating to	not	not	not	not	not	
	the monitoring of the commitment.	scored	scored	scored	scored	scored	

<sup>\*</sup>The score refers to the median score for final reports, where this section is mandatory. For all reports the median score is presented in sections 4.2.7 and 4.2.8.

As shown above, there has been a consistent performance in the quality of monitoring reports compared to 2012. Median scores remained unchanged for five of the eight sections of the reports that have been scored and decreased by half a point for the remaining sections.

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<sup>&</sup>lt;sup>24</sup> Following the removal of former section ten from the 2011 and 2012 feedback forms, sections 11 and 12 become, respectively, sections 10 and 11.

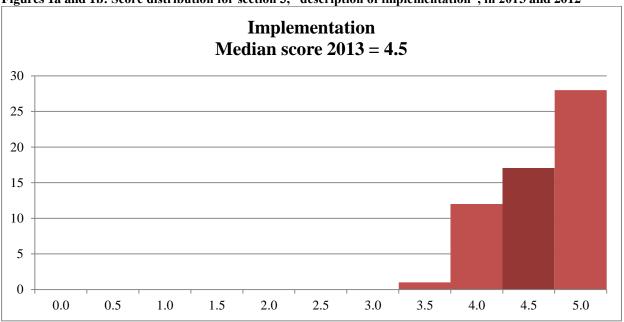
The following subsections review median scores by report section in greater detail. Each section compares scores in 2013 with those in 2012, consistent with the approach in the 2011 and 2010 exercise and offers some insight into the evolution of scores for the 2009-2013 period.

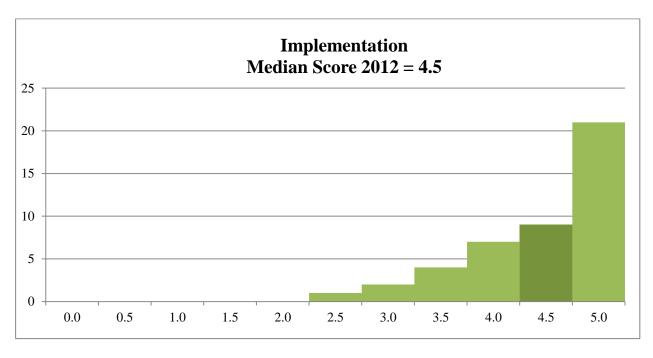
# 4.2.1 Implementation

When describing the implementation of their commitment(s), Forum members are requested to provide information including key dates of activities undertaken, details on these activities and the persons involved in their implementation. The information provided should be sufficiently clear and easily understandable for the reader.

Figures 1a and 1b below show the distribution of scores for the report's section on implementation for, respectively, 2013 and 2012. In this and the following figures, the median score has been highlighted.

Figures 1a and 1b: Score distribution for section 3, "description of implementation", in 2013 and 2012





The overall quality provided in this section of the members' 2013 monitoring reports increased compared to last year. While the median score remained the same as last year, 4.5, the average score attained has slightly increased (4.6) compared to 4.5 in 2012. Moreover, it is notable in this section that a high number of reports have obtained the maximum possible score; and none of the reports received a score lower than the threshold (3 = adequate). This indicates that many members have addressed the shortcomings identified in the Fourth Monitoring Progress Report.

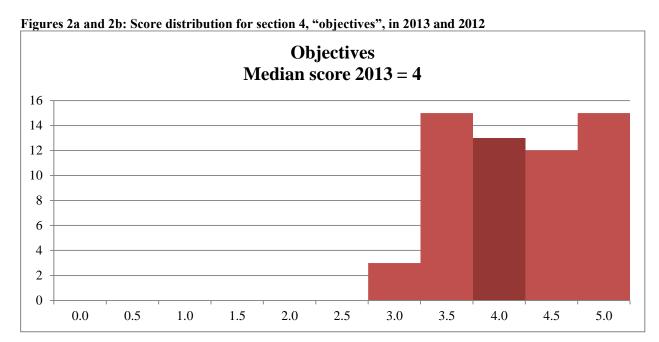
However, areas for improvement have been identified. This section would be further strengthened if a better description was provided related to the different steps and components of implementation (key dates and/or milestones). In addition, information was often put in the implementation section which would be more relevant in other section, such as 'outputs' (description of the activities implemented and products) or 'objectives.'

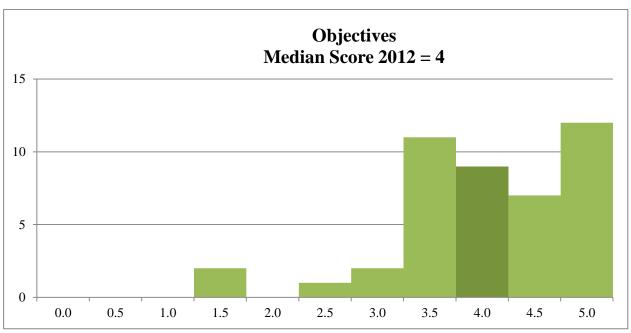
For the 2009-2013 period, median scores for the implementation section have continuously increased with year-on-year improvements of 0.5 points from 3 in 2009 to 4.5 in 2012 and remained stable in 2013. Over the period, there has been a tendency for a decrease in low-scoring reports and an increase in the reports that have received the maximum possible score of 5.

# 4.2.2 Objectives

For this section Forum members were expected to provide details on what they aim to achieve through their commitments while relating these objectives to the commitment-related activities. They are asked to present data on the extent to which these objectives are achieved in the reporting period.

Figures 2a and 2b on the next page show the distribution of scores for the report's section on objectives for, respectively, 2013 and 2012.





The median score for this section remained the same as last year: 4. The average score has slightly increased, from 4.1 to 4.2. The share of reports obtaining relatively higher scores (3.5 or more) remained unchanged as well compared to 2012 as can be seen in the figures above, while none of the reports received a score lower than the threshold (less than 3) as opposed to last year. This indicates that fewer reports showed the shortcomings identified last year, such as a lack of information as to when and how the objectives would be achieved.

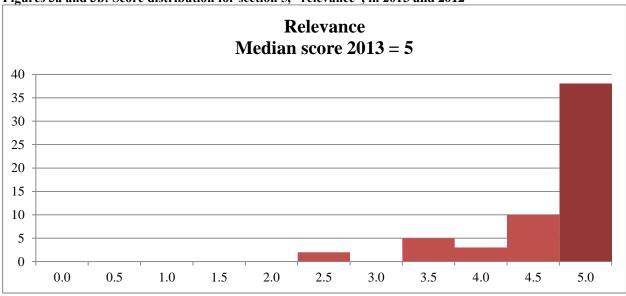
Over the 2009-2013 period, the median score for this section has increased from 3 in 2009 and 2010, to 3.5 in 2011, to 4 in 2012 and remained stable in 2013. There are few low-scoring reports in this section; similarl to 2012, there appears to be large number of both good reports (scores of 3.5 and 4) and very good reports (4.5 and 5) and no outliers with low scoring.

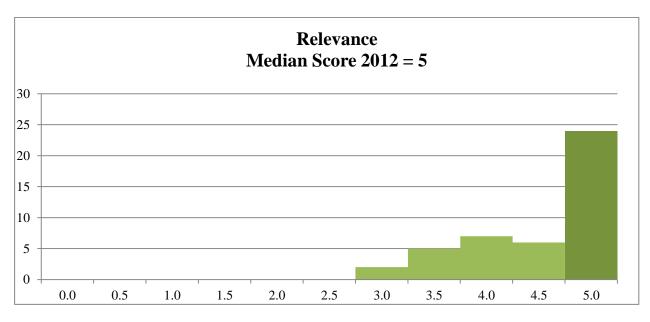
# 4.2.3 Relevance

For this section, commitment holders are requested to describe, in a clear and concise way, how the commitment is relevant to at least one of the Forum's general aims. Overall, the reports that explicitly referred to a specific aim of the Forum were awarded higher scores.

Figures 3a and 3b show the distribution of scores for the report's section on relevance for, respectively, 2013 and 2012.







In 2012, the median score increased by 0.5 to the maximum possible score of 5 and remained stable in 2013. The average score has also slightly increased, from 4.5 to 4.6. This is of particular significance as it corroborates the trend of a steady improvement since 2010, when the results were relatively low in this section (with a median score of 2 in 2009). It is worth noting that in 2013 there were only two low-scoring reports, with scores of 2.5; and only a few reports received a middle-ranking scoring, with the majority of the reports receiving the maximum scoring. For a few middle-ranking and low scoring reports, a problem stemmed from the fact that commitment holders seem to be confused between the seven general aims of the Forum, and the five priority areas of the *EU strategy to support Member States in reducing alcohol related harm* (that overlap to an extent).

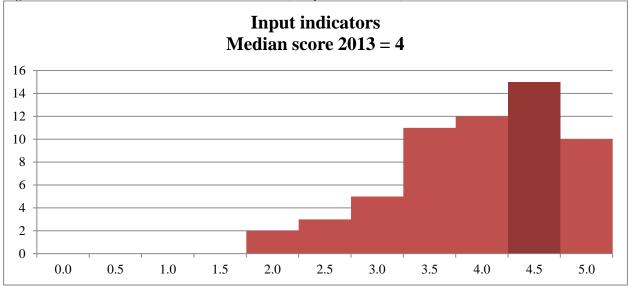
In comparison to other sections, the 'relevance' section has seen the sharpest improvement from a scoring of 2 in 2009, 3.5 in 2010<sup>25</sup> and 4.5 in 2011, to the maximum possible score of 5 in 2012 and 2013. The scores in this section in the 2009-2011 period have been characterised by a trend of polarisation between reports with very high scores and reports with very low scores, while the scores in the 2012-2013 have further increased the average thanks to a high number of maximum scoring reports.

# 4.2.4 Input Indicators

Under the section on input indicators, Forum members are expected to include details related to the resources allocated for each of their activities, including the financial and human resources allocated to the various steps and components of the commitment.

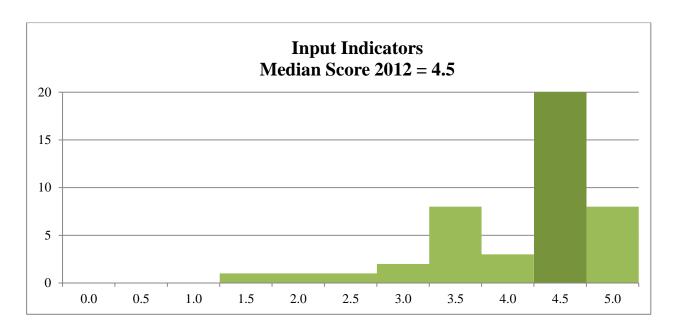
Figures 4a and 4b show the distribution of scores for the report's section on input indicators for, respectively, 2013 and 2012.





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<sup>&</sup>lt;sup>25</sup> The Second Monitoring Progress report ascribed this improvement in the overall median score to clear recommendations included in the First Monitoring Report. Second Monitoring Progress Report, p. 28



The section on input indicators is one of the sections where the median score has decreased from 4.5 in 2012 to 4 points in 2013. Such a drop is mainly due to the fact that the number of middle-ranking scores (3.5-4) has increased considerably compared to 2012, while the number of high scores (4.5) had decreased since 2012. At the same time, however, there are some improvements from 2012: there are no reports that have very low scores in the range of 0-1.5; and the average score has decreased only 0.1 points, from 4.1 to 4.

Some of the challenges remaining in 2013 for this section included a further breakdown of the financial resources allocated per commitment-related activity (e.g. man-hours, labour fees, facilities and material costs).

For the whole 2009-2013 period, median scores in this section have improved from 3 in 2009, to 3.5 in 2010, and to 4.5 in 2011 and 2012 and fallen down to 4 in 2013. The full point increase from 3.5 in 2010 to 4.5 in 2011 has been attributed to improvements in providing quantitative data in this section<sup>26</sup>.

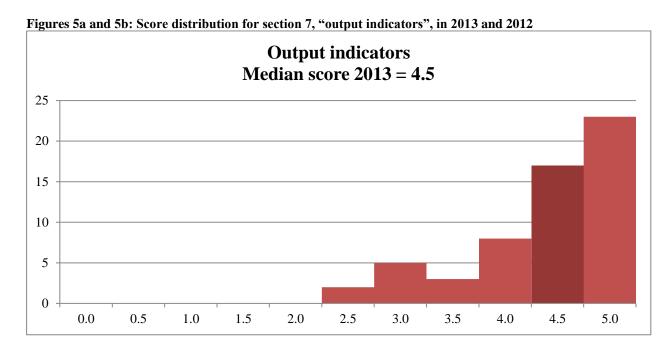
# 4.2.5 Output Indicators

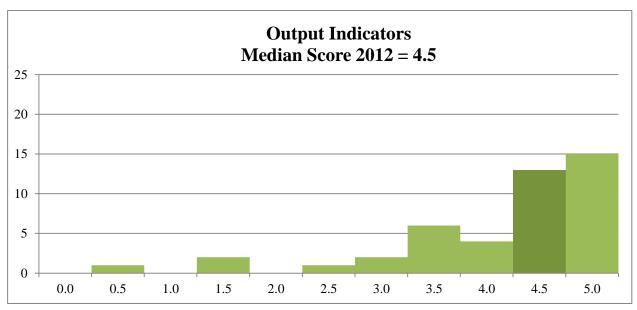
In the report section on output indicators, Forum members are expected to quantify the products (such as number of customers reached, sellers trained, events organised, and leaflets distributed) of the actions carried out in the context of the commitment. These should be presented in a way that makes clear the link with the original objectives of the commitment, the input indicators (resources used for achieving the objectives), and the outcome indicators.

Figures 5a and 5b below show the distribution of scores for the report's section on output indicators for 2013 and 2012.

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<sup>&</sup>lt;sup>26</sup> Third Progress Monitoring Report, p. 29





The quality of information provided in the report section on output indicators slightly increased in 2013. While the median score remained the same (4.5) as in 2012, the average score registered an increase of 0.3 points, from 4.1 to 4.4. It is worth noting that none of the reports received a low score (0-2) and the number of high scoring (4.5-5) rose considerably, as the figure shows.

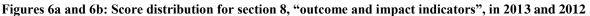
Despite this improvement, some of the shortcomings identified last year have persisted in 2013. Outstanding problems refer to the fact that description of outputs is limited to a simple list of products and/or services, without a description of significant details (e.g. content of a publication or structure of an organised workshop); information on the outputs is often presented under other sections, especially implementation and outcome and impact indicators section, where commitment holders confuse the short term outcomes with the outputs.

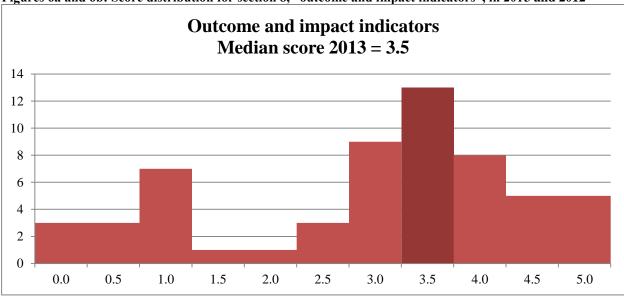
For the outputs section, median scores have improved continuously in annual increments of 0.5 from 3 in 2009 to 4.5 in 2012 and 2013. Scores for this section have tended to be polarized between very low and very high in the years 2009 and 2010. Recently there have been fewer low-scoring reports and there has been a tendency for scores to concentrate in the range of very high scores (4.5 and 5), as can be observed in Figures 5a and 5b above.

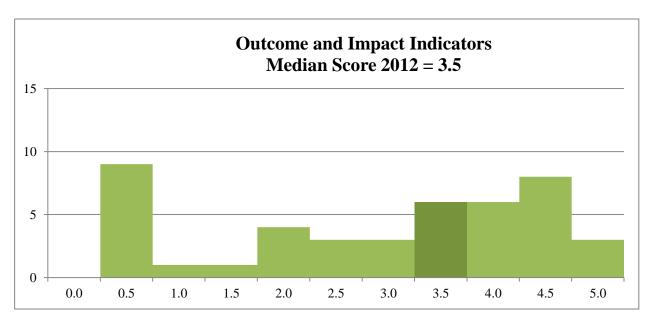
# 4.2.6 Outcome and impact indicators

Outcome and impact indicators are meant to indicate how successful a commitment has been in relation to the original objectives, in both qualitative and quantitative terms.

Figures 6a and 6b on the next page show the distribution of scores for the report's section on outcome and impact indicators for, respectively, 2013 and 2012.







The quality of information provided in the report section on output indicators remained stable in 2013. The median score is the same as last year (3.5), and the average score increased slightly, from 2.9 to 3. From the difference between the mean and median scores, and from the Figures 6a and b, it can be seen that the scores in this section are similarly polarised to 2012. However, unlike 2012, some reports received zero points. This is probably due to the fact that some commitments started early in 2013 or in December 2012, which means it was not possible for the commitment holder to assess outcomes and impacts in the short timeframe that separated the commission starting date to the report submission date.

According to Annex two to the Forum Charter (Monitoring Commitment), "Indicators related to outcome are not part of the minimum requirements and may be provided by those who are in a position to do so." The

Annex stresses, however, that this information is crucial to build up confidence and shed light upon the commitment's effectiveness. This is why, regardless of the status of the monitoring report, Forum members are encouraged to fill in this section, despite the fact that the section is not considered as mandatory according to the Charter of the Forum.<sup>27</sup>

Similar to the previous year, and conversely to the trend observed for the other sections so far, a share of reports still obtained low or very low scores for this section. This suggests that many Forum members did not follow the recommendations from last year assessment and still have an insufficient level of understanding of their commitments' impact or levels of success. Likewise, some commitment holders do not understand the difference between the outputs and outcomes of their commitments.

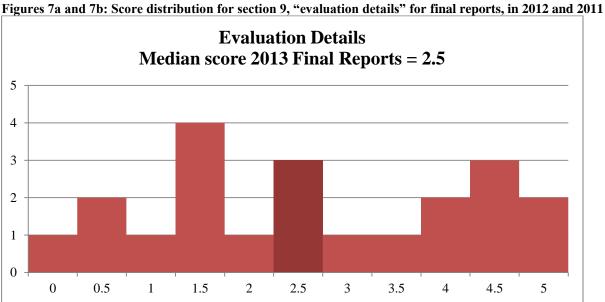
The tendency of polarization in scores for this section has been consistent throughout the 2009-2013 period. There has been overall only a modest increase in the median scores for this section from 3 in 2009 to 3.5 in 2012 (with a dip of 2.5 in 2010 and 3 in 2011).

#### 4.2.7 Evaluation Details

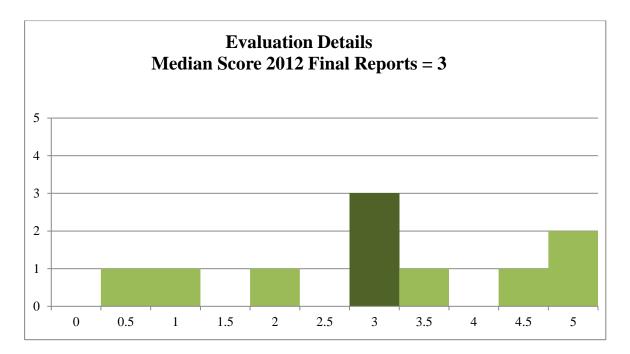
The section on 'evaluation details' requires that the commitment holder describes the tools and methods used in the evaluation of their commitment, including references to both internal and external evaluators.

The Second and Third Monitoring Progress reports did not examine in detail the statistical results pertaining to the sections on 'evaluation details' and 'dissemination'. In particular, these sections were not scored in 2010 for intermediate reports. This was done because, while some of the intermediate monitoring reports did present information on evaluation and/or dissemination, the lack of information in others might cause incongruities in a scoring system. This decision was maintained in the Third Monitoring Progress Report. The Fourth and the Fifth Monitoring Reports built on this logic, while still attempting to present the statistical data relevant to this section.

Drawing comparisons between the 2012 and 2013 are challenging and has to be considered with caution, for the sections for 'evaluation details' and 'dissemination' has increased from only 10 in 2012 to 21 in 2013. Figures 7a and 7b below present the distribution of scores in the section for final reports and for all reports in 2013 and 2012 respectively.



<sup>&</sup>lt;sup>27</sup> In case a commitment is at an early stage of implementation, Forum members should at least identify and indicate the expected outcome(s).



For 2013, the median score in the 'evaluation details' section for final reports was only 2.5, as compared to 3 in 2012. The average score has also decreased from 3 in 2012 to 2.6 in 2013. The figures for 2013 and 2012 show that the scores remain polarised for this section and that there are still numerous reports that perform poorly in this section. If the same information for all reports, including intermediate reports, is looked at, a different result will be observed. The median score in the 'evaluation details' section for all reports was 3.5, a half point more than in 2012. This means that the commitment holders that voluntarily provide information for the 'evaluation details' section are more advanced as they felt ownership of the data and carried out better evaluation compared to those members that have to do it because it is required for final reports.

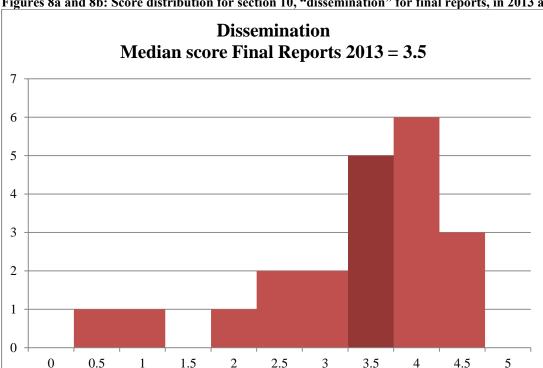
A recurrent problem continues to be that some monitoring reports provide very limited information in distinguishing between internal and external evaluation. Information is also scarce for evaluation details pertaining to different activities in cases where commitments entail multiple components.

#### 4.2.8 Dissemination

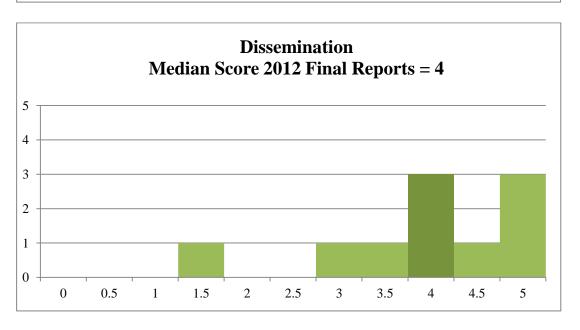
For the section on dissemination, Forum members are requested to indicate details on how the results of the commitment were disseminated, including quantitative estimates to enable the reader to gauge the scale of the dissemination. As for the 'Evaluation details' section, only final monitoring reports have to provide information on dissemination activities.

As discussed in the section above, the previous monitoring reports did not present the data regarding this section. This was done because the section is mandatory only for the final reports, while intermediate reports that have made the attempt to include information in this section are held to the same standard as final reports in the scoring process. Building upon this logic, in the Fourth and the Fifth Monitoring Progress report, Figures 8a and 8b present the data for final reports in 2013 and 2012 respectively. It has to be stressed again, however, that any comparisons between the 2012 and 2013 data are difficult. They have to be viewed with caution and are included here for illustrative purposes.

Figures 8a and 8b on the next page present the distribution of scores for the dissemination section for the final reports in 2013 and 2012 respectively.



Figures 8a and 8b: Score distribution for section 10, "dissemination" for final reports, in 2013 and 2012



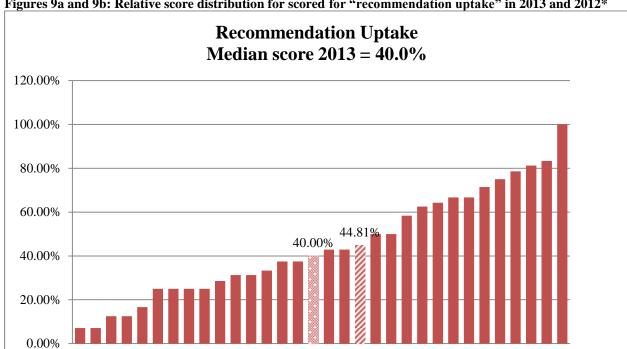
The median score for 'dissemination' for final reports decreased of half point from 4 in 2012 to 3.5 in 2013. The average score likewise decreased from 4 to 3.3. The figures for 2013 and 2012 show that the scores remain polarised for this section and that there are still numerous reports that perform poorly in this section. While the number of report that received a middle-ranking scoring (3.5-4) is increased, the observed median score drop is probably due to the fact there is a decrease in the reports that received the maximum score.

Some shortcomings remain in the 'dissemination' section; these relate to insufficient information regarding the scale and scope of the dissemination strategy for a given commitment. Some commitment holders also confuse the information to be provided on the dissemination of the results of the commitment with the activities of the commitment themselves, when they refer to awareness raising and media activities.

## 4.3 Uptake of recommendations

As discussed in the methodological section of this report, one of the main innovations built into the 2011 assessment process, and continued in the 2012 and 2013 assessment, is to examine to what extent recommendations to Forum members in the previous assessment exercise (in the individual feedback forms) have been taken into account in this year's monitoring reports. For each main section of the feedback forms that members receive, a "recommendation uptake" score is provided. The score per section ranges between zero and two, and the maximum possible overall score varies between 12 and 16, depending on whether the non-mandatory sections in intermediate reports have been completed. For example, if a recommendation was given for the first eight sections (mandatory for the intermediate and final report) then the maximum recommendation uptake score for the next period is 12; 14 if one of the additional sections was scored in the previous period; and 16 if all 10 sections were scored. In the three cases where the recommendation uptake was scored for reports that were final last year and intermediate this year, the maximum recommendation uptake score depended on how many sections were filled out in this year's report (with a minimum score of 12).

Figures 9a and 9b on the next page show the distribution of the relative scores for the "recommendation uptake" field. The recommendation uptake scores are expressed in a percentage form to mitigate the reporting challenges due to differences in the maximum possible uptake scores between the different reports.



Figures 9a and 9b: Relative score distribution for scored for "recommendation uptake" in 2013 and 2012\*

<sup>\*</sup>The colored bars denote the average (stripe pattern) and median (dot pattern) scores.



<sup>\*</sup>The colored bars denote the average (stripe pattern) and median (dot pattern) scores.

Some Forum members have certainly followed last year's recommendations. In 2012, examination of the 23 reports for which comparisons between 2011 and 2012 could be established suggests a moderate uptake level. The average score for the relative recommendation uptake was 45.7%, and the median score was 50.0%. In 2013, the 'recommendation uptake' was assessed for 31 reports. Overall, there was a substantial decrease in the recommendation uptake. The average score was 40.0% and the median score was 44.8%. The decline in the recommendation uptake score does not contradict the better performance indicators overall. In many cases the recommendations given in the 2012 assessment were not very detailed; the failure to consider all of them in the 2013 reports, however, does not necessarily mean that the reports as such will not be of good quality<sup>28</sup>. The overall scores of the scored sections have to be viewed separately from the scores for recommendation uptake.

The 'recommendation uptake' modest median and average scores for 2013, seems to reflect members' difficulties in following the recommendations that suggested providing more quantitative data. This is especially true for the input sections, that registered a decrease in 2013 as well as the outcome and impact indicators, the evaluation, and the dissemination sections.

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<sup>&</sup>lt;sup>28</sup> For example, in one of the reports, the recommendation given in a certain section asked for additional quantitative data that would support the evidence. The commitment holder did not provide additional quantitative data and therefore received a 0 mark in the 'recommendation uptake' section. At the same time, however, the commitment holder still received a very high score of 4.5 in the section overall, because the more detailed quantitative data was the only criteria not fulfilled to the highest extent.

### 5 Conclusions

The Fifth Monitoring Progress Report shows a steady improvement in the quality of information provided in the Forum members' annual monitoring reports. As highlighted already in the Second Monitoring Progress Report, the benefits of this improved performance in members' monitoring practices are twofold. First, the transparency and accountability of members' performance increase, which contributes to building trust amongst Forum members. Secondly, improvement of the monitoring reports, especially their clarity, is very valuable in communicating to the general public and in showcasing how the Forum is contributing to the general aim of reducing alcohol-related harm.

This year's evaluation results reveal that many members of the Forum have succeeded in providing clear and useful information with regard to their actions to reduce alcohol-related harm. On the other side, they also suggest that commitment holders struggle to taken into account some of the recommendations issued in previous editions of this report. The uptake levels have in fact considerably decreased as compared to 2012, and vary across Forum commitment holders. Given that the recommendation uptake has also slightly decreased in the 2012, additional ways to encourage members improving their monitoring exercises should be investigated.

These overall results must, however, be considered along with a number of statistical caveats: despite an increase between the 2012 and the 2013 exercise, the total number of assessed reports has dropped as compared to 2011 (a one-half drop compared to 2010); the lower share of final reports in the total number of submitted reports in 2013 (21) compared to 2010 (41) should also be taken into account, since sections nine ('evaluation details') and ten ('dissemination') are only mandatory in final reports and the evaluation results for these two sections may appear artificially high due to statistical effects.

Notwithstanding the steady performance observed in the 2013 evaluation, some of the challenges referred to in the previous Monitoring Progress Reports still remain. These include a lack of sufficient information in some sections, especially information on quantitative data (e.g. in the approximation of the financial resources used as inputs and quantitative outcome and impact indicators) and the timescale of implementation; to a confused distinction between outputs and outcomes (or impacts); and to unclear linkages between the different aspects of the commitment (objectives, inputs, outputs and outcomes).

Particularly noteworthy is the fact that the number of monitoring reports that provide little or no information concerning the commitment's outcome and impact and evaluation details remains significantly high. Although the provision of this information is beyond the Forum's minimum monitoring requirements, it is critical for the effectiveness of commitments to be appropriately understood by both fellow Forum members and the general public. Further reporting efforts are therefore required in this area.

# Annexes

## Annex I: List of 2013 monitoring reports

No.	Name of the organisation	Commitment
	evernmental organisations and professional h	
868	ANPAA	Enforcement of the LOI EVIN [Code of Public Health]
808	ANIAA	Alcohol and Youth: Engaging European young people in
		the debate! (the First European Alcohol Policy Youth
1454	Alcohol Policy Youth Network - APYN	Conference - EAPYC)
1434	Medial Folia Fount Network 711 111	Overviewing and promoting the research done by
		members to confirm the effectiveness of the mutual help
1042	E.M.N.A.	groups throughout Europe.
		Dissemination of information on European alcohol policy
1404	European Public Health Alliance	developments (continuous commitment)
	Standing Committee of European Doctors	<u> </u>
1438	(CPME)	Informing the Medical Profession
	Standing Committee of European Doctors	
1440	(CPME)	Raising Awareness
	Standing Committee of European Doctors	
1436	(CPME)	Mobilising the Medical Profession
Adverti	sing, marketing, media and sponsorship orga	
0.40		Advice and Recommendations to Rightsholders on their
948	The European Sponsorship Association	relationship with Alcohol Sponsors
		Responsible Marketing Pact: Common standards for
1550	We differ to see of Adment's continue (WEA)	alcohol beverage marketing communications on social
1550	World Federation of Advertisers (WFA)	media
		Responsible Marketing Pact: Driving the implementation
1514	World Federation of Advertisers (WFA)	of the 70/30 rule as a standard alcohol beverage industry advertising practice
1314	world redefation of Advertisers (WTA)	Responsible Marketing Pact: Reinforce standards ensuring
		that alcohol marketing communications are not designed to
		target or appeal primarily to those under legal purchase
1548	World Federation of Advertisers (WFA)	age
Product	tion and Sales Organisations	
	S	Being drinkaware.ie - further promotion of positive
1354	ABFI	drinking behaviours
		Promotion of alcohol abstinence among underage youth
1594	Absolut Company (aka V&S Group)	(3)
1510	Bacardi Martini	Bacardi Limited Champions Drink Responsibly
1184	British Beer & Pub Association	Alcohol Units: Customer Awareness Campaign
		Training in Responsible Use of Digital Marketing
1456	Brown-Forman	Communications
1 4 4 0	Comité Européen des Entreprises Vins	HXXI'a da Maland'a Add XI' H.D.
1448	(CEEV)	"Wine in Moderation - Art de Vivre" Program
1566	Diageo	Alkohol to Odpowiedzialnosc Pij Rozwaznie-Poland
1564	Diageo	Makro Smart Serve
1562 1546	Diageo	Conoscere L'alcol Divertiti Responsabilmente
1340	Diageo	*
1498	Diageo	"What do you tell a pregnant woman about alcohol programme"
1442	Diageo	"Smashed" Education Programme
1744	Diugoo	Raising retailers' awareness to carry out actions against
1040	EuroCommerce	abuse of alcohol
1010	2010 Commone	Partnerships to encourage responsible consumption and
1434	Heineken (International)	address alcohol related harm
1096	Heineken (International)	Manchester Resettlement Project
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No.	Name of the organisation	Commitment
140.	Name of the organisation	Raising awareness of National Associations / Call for
1584	HOTREC	actions
1560	Moët Hennessy	Moët Hennessy Training on Responsible Consumption
		"Responsible Party", implementation in Europe, 2nd
1600	Pernod-Ricard S.A.	Edition
1402	spiritsEUROPE	ROAD MAP 2015
	•	Market Responsibly: Training Road Shows across
1388	spiritsEUROPE	Europe
1378	Visita - Swedish Hospitality Industry	Actions for responsible service of alcohol - continuation
928	The Brewers of Europe	Austrian Brewers Association - Trockenfahrer.at
		"The Union of Polish Brewing Industry Employers in
		Poland – Polish Brewers" - "Own-initiative compliance
1416	The Brewers of Europe	monitoring"
1.7.10		Polish Brewers: Beer Industry Program against drink
1540	The Brewers of Europe	driving in social media
1526		Project "When I Drive I Drink NA Beer" - Czech Beer and
1536	The Brewers of Europe	Malt Association
1532	The Brewers of Europe	Self-regulating beer advertising across social media
1530	The Brewers of Europe	"Un dedo de espuma, dos dedos de frente"
		"UN EMBARAZO SIN" (A pregnancy without alcohol) and "UNA LACTANCIA SIN" (Breastfeeding without
1528	The Brewers of Europe	alcohol"
1526	The Brewers of Europe	La Carretera te pide SIN
1320	The Brewers of Europe	Brewers of Romania - Upgraded marketing selfregulatory
1576	The Brewers of Europe	system
1504	The Brewers of Europe	Self-regulating beer advertising across social media
		The Danish Brewers' Association - "Do you see the
1084	The Brewers of Europe	problem?"
	•	Enforce age limits for serving and selling alcoholic
1046	The Finnish Hospitality Association (MaRa)	beverages
		To share key learning points from delivery of a social
950	The Scotch Whisky Association	norms intervention in a community setting
		Communication platform about responsible alcohol
1418	SABMiller	consumption
1420	SABMiller	Program on responsible alcohol consumption
	a	Bartenders Training on Responsible Consumption
1422	SABMiller	Program
		The Establishment of Cooperation between the Company,
1424	CADM:11	the Government and an NGO to Prevent Together
1424	SABMiller	Drinking and Driving Csendkirály: Be the 'silent king' - responsible behaviour
1534	SABMiller (subsidiary: Dreher Breweries)	and respecting others
1582	SABMiller	Age verification in digital engagement
1362	D. DIVINIO	Responsible message on consumer communication
1578	SABMiller	materials in SABMiller's European operations
1580	SABMiller	Strengthening SABMiller's Advertising Practice
	ch institutes and others	
	International Center for Alcohol Policies	ICAP Blue Book: Practical Guides for Alcohol Policy and
1024	(ICAP)	Targeted Interventions
	International Center for Alcohol Policies	
1022	(ICAP)	ICAP Periodic Review on Drinking and Culture
		Fight against alcohol-related harm: the role of social
		insurers. An example : prevention regarding consumption
1054	European Social Insurance Platform (ESIP)	of alcohol by pregnant women
	D 10 11 07 11 07 -	Raising Awareness of the link between alcohol and cancer
1508	Royal College of Physicians (RPC)	(provisional title)
1150	STAP - Dutch Institute for Alcohol Policy (+	A1 1 1W 1 2 2 W 19 8
1172	Eurocare Italia + IOGT-NTO)	Alcohol Marketing in Health Perspective

## **Annex II: Monitoring Report Template**

## (fields marked with an asterisk (\*)are mandatory)

Acces	s code:*
Commitment #:	
Title of the commitment:*	
Name of the Forum member organisation owning the commitment:*	
Is this a report for an ongoing commitment or a final report?:*	
What is the time period covered by this report (in the case of a final report, the reporting period is the life span of the commitment)?*	
Point of contact for the commitment (organisation owning the commitment about the commitment):*	the person authorised by the who can be contacted for information
Commitment summary (based on sum form):*	nmary given in original commitment
Link to websites relating to the comm	itment:
1	

Description of the implementation of the commitment (max. 500 words):\*

Objectives (cf. sections 4–5 of the Monitoring Commitment in Annex II of the Forum Charter): in which way and to which extent have the objectives set out in the original commitment form been achieved in the reporting period? (max. 500 words):\*

Relevance (i.e. how did the commitment during the reporting period contribute to achieving the overall aims of the Forum – cf. section 3 of the Monitoring Commitment in Annex II of the Forum Charter) (max. 250 words):\*

<u>Input indicators (resources allocated to the commitment ('What was done to put the objectives into practice?') – cf. section 5a of the Monitoring</u>

Commitment in Annex II of the Forum Charter) (max. 250 words):\*

Output indicators (measure from a quantitative point of view the results created through the use of inputs ('What was achieved with the resources allocated to the commitment') – cf. section 5b of the Monitoring Commitment in Annex II of the Forum Charter) (max. 250 words):\*

Outcome and impact indicators (How successful has the commitment been during the reporting period in relation to the original objectives – cf. section 6 of the Monitoring Commitment in Annex II of the Forum Charter. These indications go beyond the minimum agreed requirements to monitor a commitment, and it is expected that this type of evaluation will not be carried out for all commitments.) (max. 250 words)\*:

Short term:

Medium term:
Long term:
Other:
Evaluation details (tools and methods used, internal or external evaluators)(max. 250 words) (*mandatory for final report only):*
Other comments related to monitoring the commitment (This section is to be used to add any other information which can be useful in terms of understanding issues relating to the monitoring of your commitment, such as any major obstacles that have been encountered, sources of data used, etc. If the basic details of the commitment have been changed, this field is to be used to explain why and how they were changed.) (max. 300 words):
<u>Dissemination (How were the results of the commitment disseminated?)</u> (max. 250 words) (*mandatory for final report only):*
References to further information relating to the monitoring of the commitment:

## Annex III: Individual Feedback Form Matrix

### INDIVIDUAL FEEDBACK FORM

Owner of

report:

Title:

Status of

report:
Monitoring

report

number:

Time period

covered by

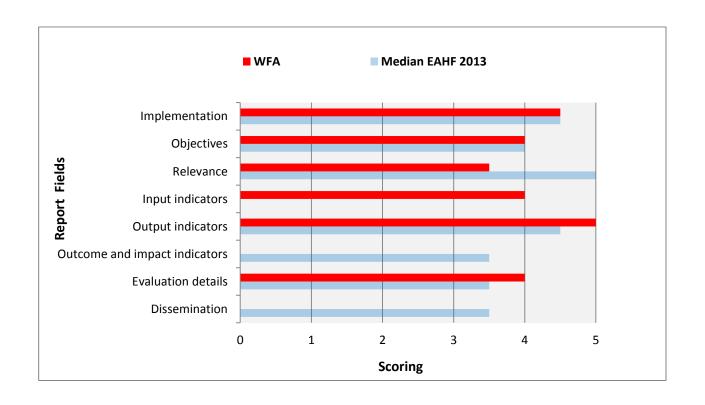
report:

This document provides feedback on your 2013 monitoring report for the abovementioned commitment in the framework of the European Alcohol and Health Forum.

### Individual and median scores for the various sections of the monitoring report template

The chart and the table below present the scores awarded for the various sections (report fields) of the monitoring report template that you completed (in red). Immediately below (in blue) the median score of all the 2013 monitoring reports is presented. This enables you to see how your individual scores fit in the overall picture.

Section	WFA	Median EAHF 2013
Implementation	4,5	4,5
Objectives	4	4
Relevance	3,5	5
Input indicators	4	4
Output indicators	5	4,5
Outcome and impact indicators	0	3,5
Evaluation details	4	3,5
Dissemination	0	3,5



## Total score of the 2013 monitoring report

Below you find a table that presents the total score per criteria of your organisation for the 2012 monitoring report.

Total per scoring criteria	Maximum score	Achieved score	Score as % of max.
Specificity	10,5	0	0%
Clarity	14	0	0%
Focus	9,5	0	0%
Measurement	6	0	0%
Total	40	0	0%

#### **Main Conclusions**

#### TBC

### Information on the scoring process

For <u>intermediate reports</u>, sections 9 (evaluation) and 10 (dissemination) are optional. If no information is provided in these sections, the maximum score for the monitoring report is 30. If information is provided in both sections, the maximum score is 40. If information is present in only one of the two sections, the maximum score is 35. In conclusion, the maximum score for an intermediate report is 30, 35 or 40, depending on the range of information provided.

For final reports the maximum score is 40 as replies to sections 9 and 10 are mandatory at the final stage of a commitment.

One of the innovations built into the 2011 assessment process consisted of accounting for the extent to which recommendations issued to Forum members in the previous assessment exercise had been integrated into the new monitoring reports. This is also done in the 2013 assessment. For each main section of the reports, a "recommendation uptake" score is provided. This will be either 0 (recommendations have been poorly taken into account, if at all), 1 (progress has been made in taking recommendations on board), or 2 (most recommendations have been successfully implemented). The "recommendation uptake" field is marked "N/A" in those reports for which no comparison can be established. The maximum score (2) is awarded in those sections for which no recommendations for improvement were deemed necessary in the previous assessment exercise.

	uptake
1.Commitment	
summary	
(based on	
summary given in Not scored	
given in original	
commitment	
form)	
2. Link to	
website	
relating to the Not scored	
commitment	
3. Description of the implementation of the commitment (max. 500 words)	
Are key dates and/or	
milestones in the	
implementation of the	
Specificity commitment set out clearly?	
Are details given on who is	
involved and/or responsible 1 Comments	
for the implementation of	
the commitment?	
Is the implementation of the commitment set out in a	
Clarity communent set out in a manner that the reader can 1	
fully understand the	

1		commitment?	1			1	
		Is the information included in the description relevant and to the point?	1				
	Focus	Is sufficient contextual information included to make the implementation of the commitment understandable?	1		0		
	Measurement	N/A			0		
Total score:			5	0	0		Recommendation Uptake
and are concrete	and precise. In so	ome situations it may be benefic	ial to divide the	e objectives in	nto short,	we and connect to specific actions and to a medium or long term objectives. In other eporting period (max. 500 words)?	
	Specificity	Does the report describe how and when the objectives have been or will be achieved?	1		0		
	Clarita	Does the report offer clear links between objectives, inputs, outputs and outcomes?	1		0		
	Clarity	Are the objectives set out in a manner that the reader can fully understand the commitment?	1		V	The five objectives of the commitment are clearly stated in this section. The information has been supported with contextual information. The addition	
		Is only relevant information included in the description of objectives?	0,5			of quantitative data, such as the number of people in each of the target groups, could improve this section.	
	Focus	Is sufficient contextual information provided to make the objectives of the commitment understandable?	0,5		0	Broades, source improve and section.	
	Measurement	Are relevant quantitative data included on the implementation of the commitment?	1		0		
Total score:			5	0	0		N/A

						or pertinent, connected, or applicable) to tribute to achieving the overall aims of the	
	Specificity	Does the report describe how the commitment is relevant (by reference to evidence that supports relevance)?	1		0		
		Does this section specify which aim(s) of the Forum the commitment relate to?	1			The relevancy of the commitment is	
	Clarity	Is it clear how commitment holders believe that their commitment is linked to the aims of the Forum?	1		0	described in an appropriate manner, explicitly addressing the relationship between the commitment and the aims of the Forum.	
		Is only relevant information included in the description?	1				
	Focus	Is sufficient contextual information included to make to explain how/why the commitment is relevant?	1		0		
	Measurement	N/A					
Total score:			5	0	0		N/A
training etc) use	ed for each activity ractice? The more	y. Input indicators measure the	resources allo	cated to each	action/ac	objective of the commitment (funding, ctivity, essentially what did the Forum m the commitment (What was done to put	ember do to put the
1	~ p ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~	input indicators that have	1		0		
	Бреспен	input indicators that have been used?	1		0		
		input indicators that have been used?  Does the report offer clear links between objectives, inputs and outputs?	1		0	This section contains a detailed breakdown of the commitment-related	
	Clarity	input indicators that have been used?  Does the report offer clear links between objectives,			0		

		Is sufficient contextual information included to explain which resources are used for the commitment?	0,5				
	Measurement	Are relevant quantitative data provided for the input indicators?	1		0		
Total score:			5	0	0		N/A
of view the resu	ilts created throug	th the use of inputs (sellers & se	ervers trained,	audience targ	eted, eve	a product of the process. It measures from ints organised etc). Output indicators mea id with the resources allocated to the comm	sure the products or
	Specificity	what the output indicators are?	1		0		
	Clarity	Does the report clearly link the output indicators to original objectives and resources that were put in the commitment?	1		0	The different activities are listed, and	
		Are the output indicators set out in an understandable manner for a reader?	1			some dates are provided. This section could be improved if the activities in the 10 countries were identified, and if	
		Is only relevant information included?	0,5			the number of people reached by the commitment activities were estimated.	
	Focus	Is sufficient contextual information included to make understandable what the results of this commitment are?	0,5		0		
	Measurement	Are relevant quantitative data provided for the indicators?	1		0		
Total score:			5	0	0		N/A
		ns in the commitment how succe				ommitment. They measure the quality and to the original objectives? (max. 250 wor	
	Specificity	Does the report describe the outcomes?	0,5		0	This section specifies outcomes for short-, medium- and long-term. The	
	Clarity	Does the report link the outcomes to original	2		0	information included informs the reader about the effectiveness of the	

	Focus  Measurement	objectives?  Are the outcome and impact indicators set out in an understandable manner for a reader?  Is sufficient contextual information provided to understand the outcomes of the commitments?  Are relevant quantitative data provided for the indicators?	0,5		0	different activities used in the commitment in the short-term. However, an quantitative estimation of how alcohol harm was reduced could be beneficial.	
Total score:	otoila toola l	mothodo yood intornal consut-	5	(may 250 y	0	ndatom: for final remort only)	N/A
9. Evaluation de	etalls – tools and	methods used, internal or extern  Are the evaluation details	al evaluators	. (max. 250 w	oras; ma	ndatory for final report only)	
	Specificity	provided specifically linked to the commitment / different parts of the commitment?	2		0	This section reports when the	
	Clarity	Are the evaluation details set out in an understandable manner for a reader?	1		0	evaluation meeting will occur. Readability could be improved if more extensive information about the	
		Is only relevant information included?	0,5			methods which will be used in this evaluation were included. It is noted	
	Focus	Is sufficient contextual information provided to understandable the method of evaluation?	0,5		0	that some of this information is found in section 10.	
	Measurement	Are relevant quantitative data provided?	1		0		
Total score:			5	0	0		N/A
10. Dissemination	on ('How were th	e results of the commitment disc	seminated?') (r	nax. 250 word	ds; manda	atory only for final report):	
	Specificity	Is it specified in the form to whom dissemination is aimed at?	1	0	0		
	- F	How and/or when has/will dissemination of the results occur?	1		, and the second		
	Clarity	Is enough contextual information included to	1		0		

	Focus	enable the reader of the commitment to judge/gauge the scale of dissemination?  Is it clear by the form whether dissemination is appropriate for the type of commitment according to	1		0
		the objectives laid down in the commitment?			
	Measurement	Are relevant quantitative data provided (e.g. resources used, how many people/organisations it is expected to reach/has it reached, etc)?	1		0
Total score			5	0	0
GRAND TOTAL				0	0