

Examining the power of the alcohol and tobacco industries in policymaking: Lessons and challenges for the Philippines and Singapore

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Abstract

Aims: Transnational alcohol and tobacco corporations are expanding operations in Southeast Asia. This study has two objectives: to examine the power of the tobacco and alcohol industries in shaping tobacco and alcohol policies in the Philippines and Singapore, and to identify key lessons and challenges for alcohol and tobacco control.

Methods: We developed a conceptual framework from the literature on power and political, commercial, and legal determinants of health. We conducted a literature review and content analysis of official government documents, corporate documents, and news articles on the tactics of the alcohol and tobacco industries. To triangulate findings, we also conducted a thematic analysis of 30 interviews that we conducted in the Philippines and Singapore.

Findings: Transnational and national alcohol and tobacco corporations used various tactics to influence the policy process for alcohol and tobacco control in the Philippines and Singapore. These industries utilised lobbying, litigation or threat of litigation, revolving doors, and marketing to exercise their instrumental power. They exercised their structural power by exploiting their market dominance and promoting public-private partnerships and alcohol marketing self-regulation. In the Philippines, the tobacco industry benefitted from regulatory capture. Both industries tapped framing tactics, corporate social responsibility, and public-private partnerships to exert their discursive power.

Conclusions: Our study detailed how the alcohol and tobacco industries have exercised their instrumental, structural, and discursive power to influence and interfere in alcohol and tobacco control policies in the Philippines and Singapore. Less regulated, the alcohol industry retains an advantage over the tobacco industry in both countries.

Introduction

Scholars have used power as an analytical concept that overlies the legal, political, and commercial determinants of health to generate various conceptual and methodological frameworks for public health research (Gómez, 2022; Wood et al., 2022). Recent discourse on the legal determinants of health (LdoH) has revolved around human rights and the right to health, and the power of the law, in the framework of the UN Sustainable Development Goals on health (Gostin et al., 2019; Montel et al., 2022; Zeegers Paget & Patterson, 2020; Zweig et al., 2021). The literature on the political determinants of health (PdoH) has examined power in health systems, health policy, transnational processes and

discussions of welfare states, political traditions, democracies, and globalisation (Barlow & Stuckler, 2021; Barnish et al., 2018, 2021; Gore & Parker, 2019). The discourse on the commercial determinants of health (CdoH) has focused mainly on the negative impact of corporate activities on global public health, and highlighted the need for more research from low- and middle-income economies in Asia Pacific, Latin America, and Africa (de Lacy-Vawdon & Livingstone, 2020; Gilmore et al., 2023; Maani et al., 2023; McCambridge et al., 2020; Room et al., 2022). In Southeast Asia, there is emerging research on the legal and political determinants of health and a growing literature on the commercial determinants of health, focusing mainly on the tobacco, alcohol, food, sugar-sweetened beverages, and formula milk industries (Amul et al., 2021; Amul &

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Pang, 2018b; Amul, 2022; Baker et al., 2021; Hoe et al., 2021; Huse et al., 2022; Jaichuen et al., 2018; Sohn, 2012). As transnational alcohol and tobacco industries continue to expand operations in Southeast Asia, the region offers an opportunity to examine their power in health policymaking (Amul, 2020; Amul & Pang, 2018b).

Conceptual Framework

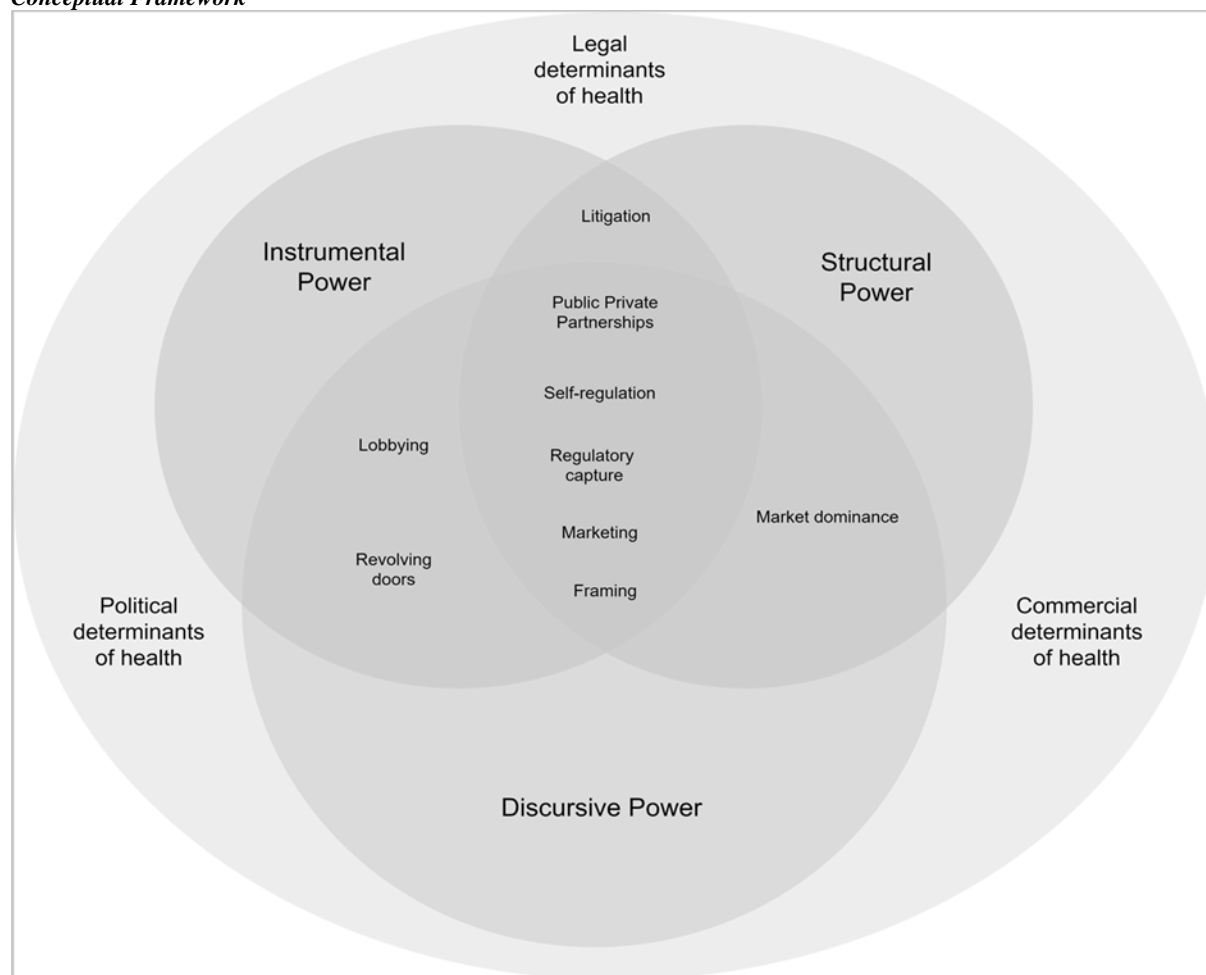
We developed a conceptual framework derived from the political science literature and the literature on the political, legal, and commercial determinants of health (Freudenberg,

2014; Fuchs, 2007; Hay, 2002; Lee & Hawkins, 2017; Lukes, 2005; Mikler, 2018; Wilks, 2013). We used Lukes' three-dimensional view of power: decision-making (instrumental power), agenda-setting (structural power), and preference shaping (discursive power; Fuchs, 2007; Lukes, 2005; Mikler, 2018).

This framework, shown in Figure 1, highlights the types of power that the alcohol and tobacco industries have utilised to influence the policy process and the various strategies and tactics they have employed in high- and low-and-middle-income countries. In this study, we adopted the definitions in Table 1.

Figure 1

Conceptual Framework



Considering all the above, this study aims to examine the power of the tobacco and alcohol industries in shaping tobacco and alcohol policies in two Southeast Asian countries, the Philippines and Singapore. We used case studies of the actors, institutions and legislative processes shaping these policies (Gilson, 2012). We selected Singapore and the Philippines because they have recently implemented alcohol and tobacco control legislation to provide an analysis of alcohol and tobacco control in these

two different countries in Southeast Asia, a high-income country and a lower middle-income country, with different histories, political and health care systems, and distinct levels of human and economic development (Amul & Etter, 2022; Koh, 2020; Severino & Salazar, 2007). Additionally, one of the authors (GGA) is a citizen of the Philippines, was a health policy researcher in Singapore, and had access to the tobacco and alcohol control community in these countries (See Reflexivity Statement in the Appendix).

Using policy cases in the Philippines and Singapore, we sought to answer two research questions. First, what kinds of power and tactics do corporate actors exercise in the policy process for alcohol and tobacco control in the Philippines and Singapore? Second, what are the key lessons

and challenges for alcohol and tobacco control in the Philippines and Singapore? These policy cases offer an in-depth examination of policymaking where the alcohol and tobacco industries exercise their influence as policy actors through various tactics in different policy environments.

Table 1

Conceptual Framework

Concept	Definition
Power	The ability of actors to successfully pursue a desired political objective
Instrumental power	Coercive power that corporate actors use to achieve trade and investment liberalisation and expand global markets through direct lobbying, public relations, and revolving doors (Fuchs, 2007; Mikler, 2018)
Structural power	Agenda-setting power used by corporate actors to maintain an underlying control of processes and resources through size and market dominance and domination of trade and investment relations (Fuchs, 2007; Mikler, 2018)
Discursive power	Co-opting or ‘hegemonic’ power in pursuit of legitimacy achieved through non-market strategies, including corporate social responsibility programmes and promotion of self-regulation that creates a system of values and norms (Eastmure et al., 2020; Fuchs, 2007; Mikler, 2018; Wilks, 2013)
Commercial determinants of health	“the social, political, and economic structures, norms, rules, and practices by which business activities designed to generate profits and increase market share influence patterns of health, disease, injury, disability, and death within and across populations” (Freudenberg et al., 2021). The World Health Organization defined CDoH as the “conditions, actions and omissions by corporate actors” that can have “beneficial or detrimental impacts on health” (World Health Organization, 2021).
Legal determinants of health	Legal instruments such as statutes, treaties, and regulations that express public policy, as well as the public institutions (e.g., courts, legislatures, and agencies) responsible for creating, implementing, and interpreting the law – the rules and frameworks that shape all the social determinants of health; refers to the power of law to address the underlying social and economic causes of injury and disease and how the law can substantially influence health and equity (Gostin et al., 2019)
Political determinants of health	The transnational norms, policies and practices arising from political interaction across all sectors affect health outcomes (Ottersen et al., 2014). It involves analysing different power constellations, institutions, processes, interests, and ideological positions that impact health across different political systems, cultures and levels of governance (Kickbusch, 2015).

Methods

To triangulate our findings, increase the validity of our results and reduce bias, we combined various qualitative data collection strategies that have been used to study corporations and health policy, including a literature review, document analysis, and in-depth interviews (Lee & Hawkins, 2017; Dalglish et al., 2021).

Literature Review, Document Collection, Data Extraction and Analysis

We searched Google Scholar and PubMed for review articles and recent systematic reviews (from 2017 to 2022) on power and the legal, political, and commercial determinants of health. We also downloaded relevant documents from government, corporate and media websites to analyse the roles of policy actors in tobacco and alcohol policies in the Philippines and Singapore (Lee & Hawkins, 2017). Table 2 shows the search terms used, the types of documents, the

types of extracted data, and the period the search covers. All documents collected were in English (an official language in both countries). For analysis, we used the READ approach for health policy research: (a) ready materials; (b) extract data; (c) analyse data; and (d) distil findings (Dalglish et al., 2021).

Qualitative In-depth Interviews and Thematic Analysis

To explore the kinds of power exercised by the alcohol and tobacco industries, GGA conducted qualitative in-depth interviews with 30 participants recruited through a purposive and snowball sample of policy actors working on alcohol and tobacco control in Singapore and the Philippines from October 2019 to August 2022 (Lee & Hawkins, 2017). See Table 3 and [Supplementary Material](#) for more details. We developed a study protocol, which included an interview guide and an informed consent form. The interview guide was broad, and the specific questions asked depended on the official role or affiliation of the interviewee. Points of

inquiry included but were not limited to (a) their perception of progress in alcohol or tobacco control policies in the country; (b) their insights on the role of the alcohol or the tobacco industry in the policy process; and (c) their

experience with the policy process for tobacco or alcohol control.

Table 2

Literature Search, Document Collection, Data Extraction and Search Terms used

Type of document	Data extracted	Search terms	Period covered
Research literature: Screening: included articles that mention political, legal, or commercial determinants of health in their main text; excluded articles that do not mention the tobacco industry or the alcohol industry, or the Philippines or Singapore	<ul style="list-style-type: none"> Type of power exercised by the tobacco and alcohol industry (if identified) Strategies and tactics of the tobacco and alcohol industry (including examples from the Philippines or Singapore) 	“power” AND “tobacco industry” OR “alcohol industry” AND “determinants of health” AND “Singapore” OR “Philippines”	2017 to 2022 To ensure that we did not exclude key research literature, we conducted a citation search to include systematic reviews cited in the articles. We also included CDoH literature published in 2023.
Corporate: Annual reports from tobacco and alcohol companies with at least a 5% market share based on Euromonitor data (Amul, 2020; Amul & Pang, 2018b).	<ul style="list-style-type: none"> Annual profits Mergers and acquisitions Marketing expenses Any reference to alcohol or tobacco policies Press releases about alcohol or tobacco policies 	<ul style="list-style-type: none"> Regulat* Sin tax Tobacco tax Alcohol tax Liquor tax E-cigarette tax Liquor control Plain packaging Standardised packaging 	2017 to 2021
Corporate: Corporate Social Responsibility or Sustainability reports	<ul style="list-style-type: none"> Types of corporate social responsibility activities Objectives of corporate social responsibility activities Target beneficiaries of corporate social responsibility activities 	<ul style="list-style-type: none"> SDG Health 	2017 to 2021
Government documents	<ul style="list-style-type: none"> Legislative proceedings <ul style="list-style-type: none"> Congressional Records and Senate Journals in the Philippines Official Reports from the Parliamentary Debates in Singapore Court decisions specific to tobacco litigation from the CTFK Tobacco Control Laws website for each country (Campaign for Tobacco-Free Kids, 2022) Speeches, government reports or webpages and press releases that refer to specific tobacco and alcohol policies included in each country case study 	<ul style="list-style-type: none"> Tobacco Cigarettes Alcohol Liquor Sin tax 	<ul style="list-style-type: none"> 22 July 2019 to 1 June 2022 (Philippines 18th Congress) 10 October 2011 to 25 August 2015 (Singapore 12th Parliament) 15 January 2016 to 23 June 2020 (Singapore 13th Parliament)
Media: News articles	<ul style="list-style-type: none"> Industry statements on policies Coverage of corporate social responsibility activities 	<ul style="list-style-type: none"> Sin tax Tobacco tax Alcohol tax Liquor tax Liquor control 	<ul style="list-style-type: none"> 2015 to 2022 (Singapore) 2019 to 2022 (Philippines)

GGA conducted 10 in-person interviews from October to December 2019 in Singapore, seven virtual (Zoom) interviews with respondents from Singapore, and 13 virtual interviews with respondents from the Philippines from January 2020 to August 2022. GGA transcribed and thematically coded all recorded interviews and interview memos using *Atlas.ti*. GGA anonymised all interview transcripts to only refer to interviewees by their general affiliations. GGA sent each interviewee a transcript for their

review and validation. See the [Supplementary Material](#) for details.

GGA processed the interviews using a reflexive approach to thematic analysis: (a) data familiarisation; (b) systematic coding and re-coding; (c) generating initial themes; (d) developing and reviewing themes; (e) refining, defining, and naming themes; and (f) writing the analysis (Braun & Clarke, 2022). GGA coded the interviews using induction

(data-driven) and deduction (theory or framework-driven) at both semantic and latent levels (Braun & Clarke, 2022). GGA generated initial or candidate themes from the final set of codes and developed and reviewed themes using coded extracts from the interviews (Braun & Clarke, 2022). We integrated the thematic analysis into a narrative synthesis.

Ethics

The National University of Singapore Institutional Review Board (IRB) approved the study protocol on 27 September 2019 (IRB Reference Number S-19-279) for the interviews conducted in Singapore. The National Ethics Committee (NEC) in the Philippines approved the study protocol on 11 November 2019 (NEC Code 019-016-Amul-EXIIT) for the interviews conducted in the Philippines.

Results

Research Literature, Government and Corporate Documents

The literature search produced 14 review articles in PubMed and 27 review articles in Google Scholar. After screening their titles, reading their abstracts, and deleting irrelevant studies and duplicates, we reduced the list to 12 articles. The citation search enabled us to add nine review articles and two Lancet-commissioned articles. We also added one book on CDoH and a series of articles published in 2023 by the Lancet Commission on CDoH. We integrated the literature search results on the kinds of power, strategies and tactics

exercised by corporate actors into the narrative synthesis ([Supplementary Table 1](#)).

In addition, we downloaded a total of 249 documents: including 117 relevant documents from government websites in the Philippines and Singapore and 132 corporate documents ([Supplementary Table 3](#)). [Supplementary Table 3](#) also indicates the type of documents downloaded and the search terms used. For the initial stage of the thematic analysis, we adopted the list of themes from a previous analysis of public consultation submissions from corporate actors (Amul, 2022).

Interviews

GGA conducted 29 interviews with 30 people, 13 from the Philippines and 17 from Singapore. To ensure the confidentiality and privacy of the interviews, we anonymised all interview transcripts and memos. Table 3 provides the anonymised interviewee profiles. Figure 2 shows a theme map from the thematic analysis. Relevant extracts from the interviews are incorporated in [Supplementary Tables 4-6](#).

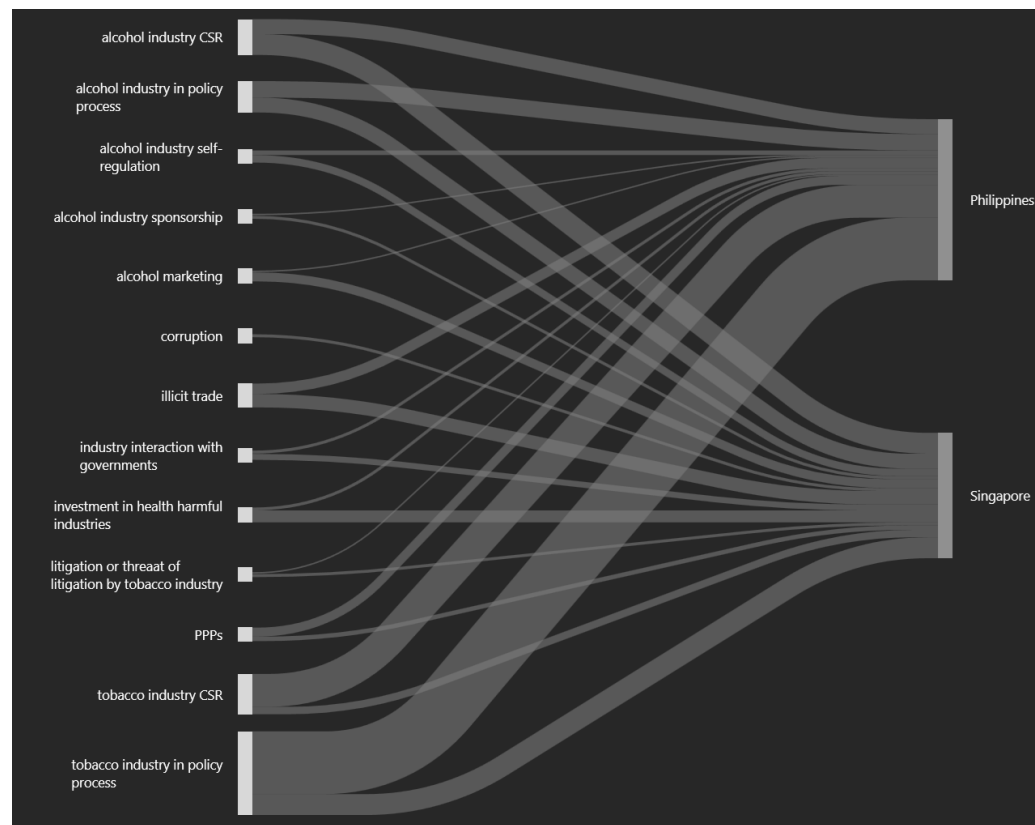
Kinds of Power, Strategies and Tactics

The following section offers a narrative synthesis of the types of power exercised by the alcohol and tobacco industries and the political activities that the alcohol and tobacco industries used to exercise power in the Philippines and Singapore, based on an analysis of the documents we collected and of the interviews we conducted.

Table 3

Profile of Anonymised Interviewees

Country	Anonymised profile ^a of interviewees ^b	Number of interviewees ^c
Philippines	Government officials	3
	Representative of a non-governmental organisation	4
	Representative of a patient advocacy organisation	1
	A leader of a community organisation	1
	Representative of an intergovernmental organisation	1
	Public health practitioner	1
	Health policy advocate	1
	Researcher	1
	Subtotal	13
Singapore	Government officials	3
	Tobacco control advocate	2
	Harm reduction advocate	1
	Mental healthcare professional	1
	Healthcare professional and tobacco-free generation advocate	1
	Local non-governmental organisation	1
	Representative of a business association	1
	Academic	6
	Public health researcher	1
	Subtotal	17
Total		30

Figure 2*Theme Map based on Thematic Analysis of Interviews***Instrumental Power**

In CDoh discourse, instrumental power refers to political mobilisation through corporate political activities such as lobbying, litigation, revolving doors, marketing, and participation in the legislative process (Fuchs, 2007; McCambridge et al., 2020; Mialon et al., 2020; Ulucanlar et al., 2016). See [Supplementary Table 4](#) for examples.

Lobbying. Lobbying has long been a critical tobacco industry tactic to block, delay or weaken tobacco control policies in the Philippines, particularly tobacco taxes and graphic health warnings on cigarette packs (Amul et al., 2021). While less documented in the research literature, the alcohol industry has also used lobbying to influence alcohol policy in the Philippines. See Supplementary Table 4 for tobacco and alcohol lobbying activities. Public hearings in the Philippine Congress and public consultations on proposed policies in Singapore have provided the tobacco and alcohol industries with lobbying opportunities to exercise their instrumental power, promote their interests and weaken, delay, or stop policies from being implemented. Lobbying by the tobacco industry and its allies was evident in the public consultation process for plain cigarette packaging in Singapore (Amul, 2022).

Litigation or threat of litigation. The Philippine Tobacco Institute (PTI) is the private entity representing the tobacco

industry in the Inter-Agency Committee – Tobacco (IACT). Since 2003, this Institute has had a history of litigation against government entities, particularly the Philippines' Department of Health, which is also a member of the IACT (Campaign for Tobacco-Free Kids, 2022). Supplementary Table 4 shows details of these legal challenges. In most cases, the local courts ruled in favour of the tobacco industry (Campaign for Tobacco-Free Kids, 2022). In the Philippines, the alcohol industry also has a history of using litigation to stop the implementation of higher alcohol taxes and to claim excise tax refunds on erroneous tax assessments (See Supplementary Table 4). In Singapore, the introduction of plain packaging in 2020 has not been met with litigation, even though the tobacco industry and its allies had threatened to do so during the public consultation process (Amul, 2022).

Revolving doors. The revolving door between governments and corporations is also an essential strategy for alcohol and tobacco companies to influence policy. The recruitment of former and, in some cases, current government officials on the boards of tobacco and alcohol companies and their corporate social responsibility (CSR) arms in the Philippines and Singapore ensures that their instrumental power can reach back into these officials' networks within the government. See [Supplementary Table 2](#).

Marketing. The lack of marketing regulations allows the alcohol industry in the Philippines and Singapore to invest heavily in aggressive marketing practices. Even during the COVID-19 pandemic lockdowns, the alcohol industry spent billions of pesos on alcohol advertising, promotion, and sponsorship in the Philippines. See [Supplementary Figure 1](#) for marketing expenses by alcohol companies in the Philippines. While Singapore has comprehensively banned tobacco advertising, promotion, and sponsorship (TAPS), the Philippines still allows point-of-sale marketing of tobacco products (Amul & Pang, 2018b). The tobacco industry in the Philippines has been documented to use policy loopholes to circumvent TAPS regulations (Amul et al., 2021).

Structural Power

Structural power manifests in these industries' ability to acquire private authority and private governance through market dominance, self-regulation, public-private partnerships (PPPs), and regulatory capture (Fuchs, 2007; Mikler, 2018). See [Supplementary Table 5](#) for examples.

Market dominance. The alcohol and tobacco industries' structural power is tied to their resources, particularly the economic power of the transnational tobacco and alcohol corporations that have expanded operations through joint ventures, mergers and acquisitions in the Philippines and Singapore (Amul, 2020). The alcohol and tobacco industries supported and benefitted from the Philippines' corporate income tax reforms that have reduced corporate income tax rates since 2021. See [Supplementary Table 5](#) for details. In Singapore, Heineken's Asia Pacific Breweries, the only large-scale brewery in the city-state, has used its market dominance with its outlet-exclusivity practices (Competition Commission of Singapore, 2015).

Public-private partnerships (PPPs). PPPs are "reputational management practices" by the tobacco and alcohol industries through initiatives that enhance their corporate image, legitimacy, and credibility (Gilmore et al., 2023). Although Article 5.3 of WHO's Framework Convention for Tobacco Control mandates that health policies should be protected from the tobacco industry's influence, the tobacco industry engages in PPPs in the Philippines and Singapore. For instance, the industry cooperates with public agencies to tackle the illicit tobacco trade. The industry also participates in joint monitoring programs with agencies under the Philippines' Department of Finance and reports illicit trade intelligence to Singapore Customs (Lucio Tan Group, 2020, 2021).

Regulatory capture. The Department of Health in the Philippines continuously grapples with the tobacco industry's structural power, particularly because this industry has representation in the Inter-Agency Committee on Tobacco (IACT). This committee is supposed to be a tobacco control body, but the participation of the industry undermines its actions (Lencucha et al., 2015). Regulatory capture with tobacco industry representation in a policymaking body has historically complicated the policy process for tobacco control in the Philippines (Lencucha et

al., 2015). The structural power of the tobacco industry, coupled with the complicated history of laws to regulate e-cigarettes and heated tobacco products in the Philippines, has resulted in the Department of Health and the Department of Trade and Industry competing over the regulation of these products, which caused delays in implementation (Solidum et al., 2022).

Self-regulation. The current absence of alcohol marketing regulations in Singapore and the Philippines, and the lack of civil society monitoring, also translates into a more powerful industry unimpeded by marketing regulations (Amul, 2020). Self-regulation of the alcohol industry's advertising in the Philippines and Singapore provides good cases of co-option, where the private sector, including the alcohol industry and advertising agencies, media associations, and recently e-commerce platforms, set the terms of their self-regulation. Alcohol companies promote voluntary codes of conduct for alcohol marketing in the Philippines and Singapore to avoid statutory regulation (Amul, 2020; [Supplementary Table 5](#)). In addition to voluntary codes of conduct, alcohol companies have also utilised voluntary pledges to prevent minors from accessing alcohol products online and to promote responsible drinking in virtual drinking sessions through a social media campaign to avoid regulation during COVID-19 lockdowns (Malasig, 2021). Promoting self-regulation has been a tactic of the alcohol industry to delay regulation (Yoon & Lam, 2013).

Discursive Power

The exercise of discursive power by the alcohol and tobacco industries in the Philippines and Singapore is evident in their policy substitution practices, public relations campaigns for their corporate social responsibility initiatives, and public-private partnerships (Amul et al., 2021). These industries exploit traditional and social media's reach to develop policies and promote societal norms and ideas that legitimise their role as political actors (Fuchs, 2007). See [Supplementary Table 6](#) for examples.

Framing. The tobacco and alcohol industries' corporate political activities (e.g., participation in public consultations and invitations to public hearings) have legitimised their role as political actors (Savell et al., 2016; Wilks, 2013). There was almost universal consensus among interviewees about the tobacco industry's political activities in the Philippines and Singapore. However, there was a divergence among academics and public health researchers about the alcohol industry's activities. Such discursive power enables the alcohol industry to be viewed positively compared to the tobacco industry. See details and excerpts from interviews in [Supplementary Table 6](#). It is a common strategy for the alcohol industry to collaborate and create interest groups to lobby for their interests locally, regionally, and globally. Through these interest groups (e.g., business associations and public relations organisations), the alcohol industry lobbies and promotes voluntary measures and the image of a "responsible" industry that does not require regulation (Amul, 2020; Savell et al., 2016).

Corporate social responsibility initiatives. The tobacco and alcohol industries also exercise discursive power by strategically marketing their corporate social responsibility (CSR) initiatives (Amul, 2020; Amul et al., 2021; Marten et al., 2020). These initiatives aimed to provide a framework for promoting the tobacco and alcohol industry's "good corporate citizenship" in the Philippines before and during the COVID-19 pandemic. Before COVID-19, tobacco and alcohol companies in the Philippines invoked the Sustainable Development Goals in their CSR initiatives through their corporate foundations. These CSR activities involved interactions with government agencies, government officials, civil society organisations, and the private sector. (See [Supplementary Table 2](#) for pre-COVID-19 CSR activities). The alcohol and tobacco industries' CSR activities during the pandemic allowed them to promote themselves as altruistic and socially responsible corporations in traditional mass media and social media (Bueno, 2021; Reyes, 2020).

Public-private partnerships. The discursive power of the alcohol industry is also evident in the public-private partnerships for "home-grown" branding in the Philippines for San Miguel Beer and Singapore for Tiger Beer in national and global marketing campaigns (CNN Philippines Life Staff, 2017; Heineken, 2023). These companies' histories and brands are deeply embedded in each country's colonial history, culture, and society (Amul, 2020).

Discussion

Lessons and Challenges for Alcohol and Tobacco Control in the Philippines and Singapore

We derived three lessons and challenges for alcohol and tobacco control in the Philippines and Singapore from the thematic analysis of the interviews and documents (See [Supplementary Table 7](#)). First, it is necessary to understand the political determinants of health in each context. These determinants include the political system, the political dynamics, the external and internal drivers for policy reform, the presence of policy champions, policy windows, and advocacy coalitions. Second, it is essential to harness the legal determinants of health by using global, regional, national, and intersectoral norms and laws for health governance. Third, it is necessary to tackle the commercial determinants of health through counter-marketing tactics and active monitoring of the political activities and tactics of the industry.

Singapore is consistently ranked as the least corrupt country in the region, while the Philippines is one of the most corrupt countries worldwide (Transparency International, 2023). The Philippines and Singapore operate on different political systems and are at different stages of health system development (Amul & Etter, 2022). In terms of power asymmetry, however, the Philippines and Singapore show similarities regarding the government's prioritisation of economic goals over public health goals and the value of industries, including the tobacco and alcohol industries.

For a long time, strong presidents have dominated Philippine politics (Abinales & Amoroso, 2017; Thompson, 2014).

Patronage politics and an institutionally weak and corrupt state define government interactions with strategic interest groups. These groups heavily influence political dynamics among policy actors – and in this study, the private sector particularly, and the alcohol and tobacco industries specifically (Abinales & Amoroso, 2017; Thompson, 2014). The alcohol and tobacco industries continuously exercise their instrumental and structural power to define and set the political agenda. Various policy actors project their discursive power to advocate and develop policies that contribute to achieving public finance and health objectives. In the Philippines, multisectoral action by various policy actors was critical for the alcohol and tobacco tax reforms. First, the joint efforts of the Department of Health and the Department of Finance promoted universal healthcare coverage through earmarked alcohol and tobacco taxes. Second, the Sin Tax Coalition, an alliance of organisations and health advocates, campaigned and supported advocacy for health tax reforms (Philippine Health Insurance Corporation, 2019). Third, legislative champions for the health tax reforms in both houses of Congress were willing to oppose pro-industry legislators. The President's statement of urgency for the bill to be passed by Congress into law ultimately provided the policy window for the health tax reforms (National Economic and Development Authority, 2022; See [Supplementary Note](#) on the legislative process in the Philippines). Financing universal healthcare complements the Philippines' commitments to the Sustainable Development Goals – a common ambition supported by all policy actors. The reforms of the excise taxes on tobacco, alcohol and e-cigarettes led to the implementation of earmarked tax revenues for universal health care financing (Amul & Etter, 2022). Lobbying and bargaining dominated the policy process – a common strategy in Philippine politics to reach a policy consensus (Caoili, 2006).

In contrast, Singapore's distinct parliamentary system benefits from a high level of legitimacy, with a prime minister as head of government and an elected president as head of State, and with a dominant political party that has driven exceptional economic growth (Tan, 2018). Proposed tobacco and alcohol policies, while debated in the Singapore Parliament, are often unimpeded because of a depoliticised civil society (Tan, 2018; Woo, 2015). Tobacco control advocacy in Singapore rests mainly on the government, and no civil society organisation is active in alcohol control (Amul & Etter, 2022). Singapore's meritocratic system is part of the dominant party's ideology, shaped by its version of democratic politics and paternalistic authority (Woo, 2015). For example, compared with other democratic states, statutory (or regulatory) boards and government-linked companies (GLCs) in Singapore are more engaged in the policy process, from formulation to implementation (Woo, 2015). Singapore's varied but consistent approach to tobacco and alcohol control, and the framing by different policy actors, can influence the policy agenda and move it away from the public health agenda.

Alcohol and tobacco policy reviews in Singapore and the Philippines show how stringent or lax these countries can be regarding alcohol and tobacco control (Amul & Pang, 2018b; Amul, 2020). The legal environment in the

Philippines still allows the alcohol industry to exercise its instrumental, structural, and discursive power, which promotes regulatory or legislative capture (Brown, 2019; Liberman, 2014). For example, the Philippines and Singapore do not regulate alcohol advertising, promotion, and sponsorship through regulatory laws (i.e., laws passed by the executive or judiciary) nor through statutory law (i.e., laws passed by the legislature; Amul, 2020).

However, the legal environment is less enabling for the tobacco industry. Before introducing plain packaging for cigarettes, Singapore had already comprehensively banned tobacco advertising, promotion and sponsorship, and the display of tobacco products at point-of-sale (Amul & Pang, 2018a). An analysis of the process leading to the adoption of Singapore's plain packaging policy exemplifies the global city-state status of Singapore – with contributions from local, regional, and international actors highlighting how the perceived power of the Singapore model shapes the city-state's role in regional and global health governance (Amul, 2022). In the Philippines, the Tobacco Regulation Act, which established the IACT in 2003, was implemented before the Philippines ratified the WHO Framework Convention on Tobacco Control (FCTC) in 2005. This precedence complicated the political dynamics of FCTC implementation (Lencucha et al., 2015).

Governments incur legal costs when the industry legally challenges governmental agencies because of bureaucratic errors. In the Philippines, the alcohol industry's history of litigation on erroneous tax assessments highlights the bureaucratic inefficiencies of the tax increases. There is a risk that the alcohol industry will use such inefficiencies to oppose future tax reforms. The government similarly incurs costs when it takes legal action against the industry for violating its laws, even when it is a legal action to enforce compliance (Campaign for Tobacco-Free Kids, 2014).

Implications

We compared how the alcohol and tobacco industries exercise their instrumental, structural, and discursive power to shape the alcohol and tobacco policies in the Philippines and Singapore. The study supports the validity and analytical utility of our theoretical framework based on power to study transnational alcohol and tobacco corporations and alcohol and tobacco policies in high-income and low-and middle-income countries (Butler et al., 2017; Elliot et al., 2022; Fuchs, 2007; Hawkins, 2017; Hird et al., 2022; Holden & Lee, 2009; Maani et al., 2023; Mikler, 2018; Wilks, 2013). Our findings are congruent with previous research on the tobacco industry's efforts to frame itself as a vital economic actor, reinforcing its market dominance and political power in the Philippines (Fitzpatrick et al., 2022).

The alcohol industry demonstrably impacted the alcohol control policy processes in both countries using its instrumental, structural, and discursive power. The industry exercised its power strategically through the various tactics documented in this study. Researchers have also observed over the past decade that these power dynamics have influenced how the Philippine government has addressed non-communicable diseases through fiscal reforms aimed at

“balancing” health and commercial interests (Kaiser et al., 2016; Lencucha et al., 2015; Chavez et al., 2014). Previous research has also shown that the pluralistic nature of politics in the Philippines influences the political dynamics of health tax reforms. In the case of the tobacco, alcohol and e-cigarette tax reforms, previous research showed how multisectoral collective action shaped policy development (Chavez et al., 2014; Elliot et al., 2022; Hoe et al., 2022a; Rasanathan et al., 2017).

Our results on the experiences of the Philippines and Singapore in formulating and implementing tobacco and alcohol control policies are consistent with previous research on CDoH in at least three ways. First, other researchers also found that the focus on health can be a unifying factor in the cases of earmarked taxes for universal health care in the Philippines and the plain packaging of tobacco products in Singapore (Elliott et al., 2020; Hoe et al., 2021; Kaiser et al., 2016). Second, the influence of global tobacco and alcohol governance laws and norms on national and local public health policy is well documented in the literature (Barlow & Stuckler, 2021; Gostin et al., 2019; Lee & Hawkins, 2017). Third, researchers have also documented how a political and economic agenda can strengthen or weaken the public health agenda, depending on the context (Chavez et al., 2014).

We found that while the Philippines have strong tobacco and alcohol industries, its level of industry interference differs from that of Singapore, with direct industry interference in the Philippines but a less implicit history of interference in tobacco and alcohol control in Singapore (Amul et al., 2021; van der Eijk & Tan, 2023). This finding is consistent with previous research on the alcohol industry's “privileged” participation in policymaking and implementation (Hoe et al., 2022b).

We identified two related policy challenges: the lack of regulation of alcohol marketing in traditional and social media, and the dearth of civil society organisations working on alcohol control in both countries, and this result is congruent with what other studies found (Amul, 2020; Amul & Etter, 2022). Our results show that self-regulation and public- and private-private partnerships are critical for the alcohol and tobacco industry. However, previous research found no evidence for the effectiveness or safety of industry self-regulation, public-private partnerships, or private-private partnerships (Moodie et al., 2013).

While other authors showed that there is a potential for intersectoral governance in tackling CDoH without treaties (Allen et al., 2021; McHardy, 2021), this study's insights from the Philippines demonstrate that international legal frameworks and legal support are indispensable for low- and middle-income countries. The WHO FCTC, for example, provides a guide for intersectoral governance and a policy window for national policymakers and advocacy coalitions. However, the Philippines has also been limited by pre-FCTC legislation, which enables the tobacco industry to be involved in a tobacco control policy body.

Finally, we found relatively few relevant published papers focusing on low-and middle-income countries in the Asia Pacific, and this is in line with recent calls from the global

policy and research community for increased funding for alcohol control and alcohol policy research in low- and middle-income countries (Griswold et al., 2018; McCambridge et al., 2020; Parry & Amul, 2022; Room et al., 2022; World Health Organization, 2022).

Strengths and Limitations

As of writing, this is the first study to systematically examine and compare the power of the alcohol and tobacco industries in two countries in Southeast Asia that can be useful not only for policymakers but also for civil society advocacy. Originality, timeliness, and usefulness are strengths of this study. However, caution must be taken in considering the generalisability of the findings of this qualitative study. The document analysis was limited to publicly available data. We tried to maximise the validity by triangulating publicly available data from official and corporate documents with insights from interviews with policy actors and results from previous research on the alcohol and tobacco industries. We conducted a limited number of interviews with officials outside the public health sector and representatives from the private sector in the Philippines. We tried to address this limitation by triangulating insights from interviews on corporate activities from other policy actors, news coverage and legislative proceedings.

Conclusion

Our study detailed how the alcohol and tobacco industries have exercised their instrumental, structural, and discursive power to influence and interfere in alcohol and tobacco control policies in the Philippines and Singapore. Less regulated, the alcohol industry retains an advantage over the tobacco industry in both countries. Despite political, economic and health system development differences, both countries share similar challenges in alcohol and tobacco control. To counter the industries' power over health policy, (1) researchers and civil society organisations should support the development of mechanisms that help policymakers to prioritize health over commercial interests and manage conflicts of interest that emanate from power asymmetries within countries and between governments and corporations; and (2) governments, intergovernmental organisations, and civil society organisations should collaborate to monitor the alcohol and tobacco industries' tactics and to raise public awareness about their political strategies.

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