

RESET Alcohol: A Global Alcohol Policy Initiative

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Abstract

The RESET Alcohol initiative supports national governments in low- and middle-income countries to implement three policy actions from the World Health Organization SAFER technical package: increasing taxation, regulating availability, and restricting marketing. RESET Alcohol is working in about 10 countries primarily in Latin America, Africa, and Asia and is led by Vital Strategies, a global public health organization, in partnership with the Johns Hopkins University Tobacconomics, Movendi International, Global Alcohol Policy Alliance, NCD Alliance and the World Health Organization. The initiative is funded by the grantmaking organization Open Philanthropy. This article provides an overview of the initiative and the countries' progress in its first year of implementation.

Notes from the Field

In November 2022, the [RESET Alcohol initiative](#) launched its work to support national governments in low- and middle-income countries to implement policies that address the mostly neglected – or perhaps ignored – public health issue of the harms caused by alcohol (Vital Strategies, 2022).

Countries receiving technical and financial assistance via RESET Alcohol share some combination of the following criteria: political willingness to tackle this complex problem; policy opportunities, such as wider tax reforms; a substantial burden of alcohol-related harms; and large populations. RESET is not a capacity-strengthening initiative; rather it aims to catalyze policy action in countries where governments are concerned about alcohol harms, committed to evidence-based policy solutions, and have strong local expertise and experience in research and advocacy.

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Brazil, Colombia, Kenya, Mexico, Sri Lanka, and the Philippines kicked off 2023 as the primary RESET Alcohol countries to receive support for advancing “best buy” policy actions from the World Health Organization’s technical package for alcohol policy, [SAFER](#) (WHO, 2018). The highest-impact policy action countries are pursuing is to increase alcohol excise taxes to levels that decrease affordability and, in turn, reduce alcohol harms. They are

also exploring policy priorities in the areas of availability regulation and marketing restriction by identifying proven interventions or “low-hanging fruit” that can be implemented in the short-term (WHO, 2018)

To broaden opportunities for alcohol policy and expand interest of more countries to ramp up their alcohol policy efforts, additional RESET support has been made available to research and advocacy organizations in South Africa, Montenegro, Cambodia, and Argentina, as well as to the advocacy communities working as part of the WHO SAFER alcohol policy initiative – Uganda, and Nepal (WHO Regional Office for Africa (2023); WHO (2022).

Stakeholder involvement in each of the six focus countries includes a range of key government decision makers in ministries such as finance, health, and tobacco and alcohol agencies, as well as nongovernmental economic research, epidemiology, advocacy, and communications organizations. Many of these actors have worked on other types of health taxes, making it a natural transition for them to identify evidence gaps, set research agendas, map the political and alcohol industry landscape, build advocacy and communications campaigns, and prepare for the inevitable industry efforts to influence alcohol policy as it is developed and implemented.

Local coalitions are forming or expanding to include people that are impacted by the large array of harms from alcohol. There are a variety of stakeholders that can be engaged when one considers that the range of harms consist of over 200 disease and injury conditions including for example, heart disease, high blood pressure, eight cancers, liver cirrhosis, alcohol poisoning, digestive issues, weakened immune

system, malnourishment, and injuries from vehicle crashes, falls, suicide, and violence and assaults (WHO, 2019a).

Economic research partners are creating simulation models to demonstrate both the revenue and public health gains that will benefit their countries through alcohol tax increases (RESET Alcohol Initiative, n.d.). Advocacy partners are leveraging the growing evidence to build communication and advocacy campaigns for policy makers and the public to impress on them the harms of alcohol and the positive change increasing alcohol taxation can have on the health of their population and economy. The global RESET Alcohol partners work together to provide peer support to these local governments, think tanks, and advocacy and communications organizations.

The growing attention of governments and civil society to this issue reflects the recognition of the harm that alcohol causes in their societies, although perhaps not yet the sheer scale of the problem. They also embrace solutions that lie in proven population level policies. Global momentum, driven by the WHO SAFER technical guidance (WHO, 2019b) and global action plan on alcohol (WHO, 2022), coupled with new philanthropic interest is contributing to highlighting alcohol policy as an important responsibility of governments and creating opportunities to prioritize this work.

Most stakeholders working on alcohol policy are realistic and recognize that there is a lot of work to be done to put checks and balances in place to tackle the alcohol industry's deep influence in policy making, and to curtail its relentless efforts, through marketing and availability of its products. But as with other public health efforts governments have been confronting, like tobacco control and food policy, they recognize that there are proven, workable policies, such as increased taxation, and marketing and availability restrictions, that should be put in place to protect the public health of their citizens (Babor et al., 2023). To conclude, RESET Alcohol uses public policy to “reset” the environment in which alcohol is sold and consumed to account for the harms it causes. RESET Alcohol is one of the first philanthropic investments that empowers governments and their civil society to quickly build the evidence and tools needed to address this urgent crisis head on.

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