

Alcohol policy and advocacy in low- and middle-income countries: Recommendations and lessons learned

Editorial

Alcohol policy development and capacity building have gained great momentum over the last couple of years with significant efforts, new tools, initiatives and resources to accelerate research and progress, particularly in low- and middle-income countries (LMICs; McCambridge, & Lesch, 2024; Parry & Fitzgerald, 2020; Swahn et al., 2022; Walls et al., 2020). In this first special issue of two, in the International Journal of Alcohol and Drug Research (IJADR), we include nine manuscripts specifically focusing on alcohol policy and advocacy in LMICs. Our goal of this special issue and related call for papers was to include a range of strategies and lessons learned to offer new insight and propel action.

This first special issue was intentionally designed to create a different platform for showcasing innovative ideas, initiatives, resources and lessons learned that may not typically be included in the scientific literature. As such, we invited diverse research and community perspectives on how to approach advocacy and policy development across several continents to invigorate new efforts across settings, focusing primarily on LMICs where such efforts are most urgently needed (Jernigan & Trangenstein, 2020). We were very excited about the response and interest in this special issue which indicates great momentum in the field. Because of the large number of papers submitted and accepted, we are disseminating the articles across two separate but related special issues. In this first issue, we grouped the papers focusing specifically on policy and advocacy issues. The range of countries examined, and themes presented exceeded our expectations, as this special Issue brings new insights into some less-researched countries in Africa (i.e., Sierra Leone and Burundi) and in Asia (i.e., Philippines and Singapore), global trends and policy developments and local government initiatives (i.e., Chile). We are delighted to have these nine papers focused on a diverse set of advocacy and policy topics across countries in Africa, Asia, and South America.

In this editorial, we highlight some of the key points and takeaways from this special issue to offer a comprehensive overview of alcohol policy development, implementation, and evaluation in LMICs. These accounts describe various strategies, challenges, and successes in addressing alcohol-related harm within different socio-political contexts and the multifaceted nature of alcohol policy work and its implications for public health. The articles are organized across loosely defined themes.

In the article by Drope (2024), the recently launched RESET Initiative is described. The goal of RESET is to support LMICs in implementing evidence-based alcohol policies, focusing specifically on the WHO SAFER technical package related to alcohol taxation, availability regulation, and marketing restrictions. The RESET initiative is a collaboration funded by Open Philanthropy and this article highlights the progress of the RESET Initiative in its first year of implementation (Drope), 2024.

Policy Initiatives and development is urgently needed to curb increasing alcohol consumption trends in LMICs. As discussed in the paper by Babor (this issue), per-capita alcohol consumption is rising in LMICs, particularly in emerging economies like Asia and Africa. This expansion has created a “perfect storm” driving increased alcohol consumption and harm. Along with the alcohol industry’s opposition to evidence-based policy, these trends signal the need for the kinds of policy solutions proposed in the book *Alcohol: No Ordinary Commodity* (Babor, 2023). This latest version of the book is available in an open-access format to facilitate access to all who are interested in alcohol research and policy development.

The article by Jalloh and colleagues (2024) presents findings related to the national policy development in Sierra Leone. In this article and case study, civil society plays a crucial role in advocating for evidence-based alcohol policies in Sierra Leone. The article outlines six factors that are critically important for collaboration and progress: (1) government’s commitment to non-communicable diseases (2) advocates demonstrating competence, (3) capacity building of stakeholders, (4) connecting national and global alcohol actions, (5) participatory processes, and (6) no industry interference (Jalloh et al., 2024).

The article by Talek and colleagues includes a case study and review of Thailand’s complex system as an upper-middle-income emerging economy in Southeast Asia (Talek et al., 2024). The article describes the development of alcohol policy as well as the current situation. Even in Thailand, despite existing laws and regulations, there are important gaps in alcohol policy implementation. The study demonstrates the need for incremental policy development and for enforcement issues to be addressed (Talek et al., 2024).

Another case study in Santiago, Chile, by Peña and colleagues (2024), demonstrates the potential of

intersectoral strategies led by local governments in reducing alcohol-related harm. They conclude that political determination, local data, alignment of objectives, and medium-term budget frameworks are crucial facilitators of comprehensive intersectoral alcohol interventions (Peña et al., 2024).

In a review and case study, Amul and Etter (2024) examine the power of the alcohol and tobacco industries in policy-making in the Philippines and Singapore. In their review, they find that transnational alcohol corporations exert instrumental, structural, and discursive power to influence alcohol policies in LMICs, like the tactics employed by the tobacco industry (Amul & Etter, 2024). Another case study by Fortein & Diedericks (2024) underscores that civil society advocacy, as seen in South Africa's opposition to alcohol sales in schools, is essential for countering industry influence and promoting evidence-based policies. They argue that the success of the Southern African Alcohol Policy Alliance (SAAPA) in South Africa in safeguarding South African schools from alcohol sales is a clear example of the pivotal role of civil society in shaping evidence-based policies for public health and child welfare (Fortein & Diedericks, 2024).

In another case study, Haragirimana and colleagues (2024) provide an evaluation of Burundi's alcohol policies and reveal gaps in addressing WHO 'best buy' interventions (WHO, 2017). Their evaluation highlights the need for legislative support, regulation of pricing and marketing, and addressing industry interference (Haragirimana et al., 2024).

It is also clear that advocacy skills are needed to be developed and supported to make progress in the field. In fact, public health advocacy is essential for promoting community health and well-being. It involves various stakeholders working together to influence public health policies and practices, ultimately improving health outcomes and fostering healthier environments. In the article by Kosir (2024), the context and recommendations for advocacy strategies are outlined including raising awareness, mobilizing communities, engaging policymakers, and utilizing media which all play a vital role, especially in strengthening efforts to prevent and control alcohol-related harm in LMICs. While public health advocacy has led to significant improvements in health outcomes, challenges persist, including a lack of advocacy knowledge and skills, resistance from powerful interest groups, and limited resources (Kosir, 2024). Therefore, it's important to focus on enhancing advocacy strategies to address these challenges and promote effective alcohol prevention efforts.

In summary, the narratives synthesized in this brief editorial underscore the complex interplay between alcohol consumption, policy development, implementation challenges, industry influence, and advocacy efforts in LMICs. Addressing these issues requires a multi-pronged approach involving collaboration between governments, civil society, academia, and international organizations to promote evidence-based alcohol policies and ultimately mitigate alcohol-related harm. We believe that these intriguing case studies, initiatives and recommendations, many of which are authored and described by practitioners and advocates themselves, will provide useful information

to those working in alcohol prevention advocacy and policy development.

Acknowledgment

We are incredibly grateful for the financial support of the special issue provided by FORUT and Movendi International. Also, we would like to thank Christine Buchanan for her significant contribution to the special issue through coordinating the submissions throughout the process and for her tireless attention to detail through the formatting and copyediting of all the manuscripts.

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