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Alcohol prevention, research, and policy development in LMICs: New perspectives, insights and recommendations

Editorial

Alcohol consumption presents a significant public health challenge globally and the World Health Organization (WHO, 2024) prioritizes evidence-based strategies and high-impact policies to reduce alcohol harm. Yet, substantial expansions in alcohol research, capacity, and policy development are urgently needed in many regions of the world to continue to build the evidence base and make progress. This special issue includes eight articles addressing alcohol prevention research and recommendations for policy development specifically in low- and middle-income countries (LMICs).

To create a unique platform for showcasing and accelerating engagement and dissemination of innovative alcohol research and capacity building efforts for the prevention of alcohol-related harm, particularly in low-resource settings, we proposed this special issue in the International Journal of Alcohol and Drug Research (IJADR). We wanted to gather information that is seldom captured in the scientific literature and to also intentionally invite community perspectives and insights into strategies to mitigate alcohol-related harm and promote public health in settings and countries where they are most urgently needed (WHO, 2024).

To ensure our goal was met, we particularly encouraged submissions that address the unique challenges and opportunities facing low-resource settings, where limited infrastructure, funding, and political will may pose barriers to alcohol prevention efforts but where the burden of alcohol harm tends to be very high. We also welcomed a new type of manuscript to the journal, called "Notes from the Field", to share practical experiences and lessons learned to accelerate progress in low-resource settings. Below we present a few key takeaways from the intriguing papers in this issue, reflecting insightful perspectives and case studies from diverse countries.

In East Africa, a study by Raderalazasoa and colleagues (2024) on organizational structures and capacity for alcohol harm prevention across five different countries revealed a relatively weak and fragmented infrastructure. The authors found that many organizations rely on volunteer staff and face significant barriers to achieving their goals with their limited funding stemming primarily from foundations and private donations. These findings are important and need to be considered in efforts to enhance capacity in settings where much of the alcohol prevention and advocacy is

handled primarily outside of formal government structures. The authors urge decision makers, researchers and other key stakeholders to consider these findings and to strengthen capacity for programs to address alcohol-related harm in this region (Raderalazasoa et al., 2024).

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Meanwhile, a study in West Africa found that non-governmental organizations (NGOs)/community-based organizations (CBOs) primarily target community outreach and health promotion activities to address alcohol-related harm across nine countries (Jalloh et al., 2024). However, awareness of alcohol as a risk factor for key health conditions remains relatively low, highlighting the need for additional capacity-building efforts and raising awareness of alcohol-related harm across West Africa. The authors also state that it will be critically important to leverage the outreach and efforts by NGOs and CBOs for preventing and reducing alcohol-related harm in communities (Jalloh et al., 2024).

Similarly, Uganda faces high levels of alcohol consumption, yet limited research exists on alcohol marketing practices (Madden et al., 2024; Swahn et al., 2024). A study assessing the content of alcohol billboards in Kampala revealed widespread violations of agreed-upon industry advertising standards by alcohol companies (Swahn et al., 2024). This finding highlights the need for systematic monitoring of the marketing content of these billboards to ensure compliance. The authors also recommend that the alcohol marketing content for these billboards should be approved by a local governing body to ensure a higher level of compliance and to reduce exposure to marketing content that violates the industry codes in Uganda (Swahn et al., 2024). Additionally, through their work in Uganda, Madden and colleagues (2024) presented a new and low-cost approach for characterizing the alcohol environment in low-resource settings. Their strategy can be used to assess community level alcohol marketing at a specific time, or for continuous monitoring of marketing to inform and evaluate intervention strategies aimed at reducing alcohol advertisement exposure. The study assessed the type, placement and content of alcohol marketing in the urban slums of Kampala. Intriguingly, that study also found that most of the advertising that was assessed represented alcohol products owned by the largest alcohol companies in the world (i.e., Diageo and AB InBev) underscoring international influence

in marketing, even in low-resource communities (Madden et al., 2024).

Another study described in this issue (Shuter et al. 2024) examined tobacco and alcohol co-use in a cross-sectional structured interview of people living with HIV in Nairobi, Kenya. Shuter and colleagues (2024) found that tobacco and alcohol co-use is common. However, the authors also highlight that there is scarce literature on substance co-use management. As such, they recommend that this syndemic warrants culturally appropriate and tailored treatment strategies, particularly targeting younger individuals and those with concurrent mental health conditions, to enhance health outcomes. This is particularly relevant given that their study also found that most people living with HIV reported hazardous drinking, often accompanied by anxiety and depression. Again, this finding underscores the need for tailored treatment approaches that address these specific challenges (Shuter et al., 2024).

In South Africa, a content analysis of newspapers by Theron and colleagues (2024) covering alcohol sales bans during the COVID-19 pandemic revealed predominantly unfavorable views towards the bans. The analysis found that newspapers focused primarily on the negative economic impact of alcohol sales bans, favoring the alcohol industry's interests over public health concerns. According to the authors, this bias highlights the need to prioritize the health of South Africans above the industry's profits; an important role and responsibility for the government to prevent harmful alcohol use. These findings also emphasize the importance of balanced reporting by the media on health matters, and implementation of measures to prevent undue influence by large corporations, such as the alcohol industry (Theron et al., 2024).

Moreover, alcohol poses significant challenges to women's health in LMICs, as highlighted in an integrative review by Laslett and colleagues (2024). The key theme from their thoughtful and integrated review is that there is insufficient attention to the impact of alcohol on women's health, especially in LMICs. They highlight that there is a disproportionally high percentage of women in LMICs that suffer from alcohol-related health issues. But they also point out that there are gaps in our understanding of alcohol's impact on women. Additionally, they raise the issue of harms from others' drinking and that women are particularly vulnerable to severe harms from male partners' drinking. To address these gaps and concerns, the authors find it crucial to build research and policy-making capacity in LMICs, to decolonize alcohol research by including local researchers, and to implement evidence-based policies to limit alcohol production, sale, and consumption. Moreover, they state that reducing both women's and men's drinking is essential to decrease the health-related harms to women. Finally, their review calls for further research and policy initiatives tailored to addressing women's specific alcohol-related health issues, underscoring the need for distinct priorities in alcohol research, monitoring, policy, and evaluation in LMICs.

Finally, economic development influences alcohol consumption and its associated mortality rates (Rehm et al., 2024). Rehm and colleagues explain that wealthier countries tend to have higher alcohol consumption levels but lower allcause mortality rates due to improved living conditions. However, in some LMICs, increases in alcohol consumption may paradoxically coincide with decreases in alcoholattributable mortality rates, as the positive impact of economic development outweighs the negative effects of higher alcohol consumption. The authors further highlight that nevertheless, without proper alcohol control policies, increased consumption can diminish the benefits of economic development, leading to a rise in alcoholattributable mortality rates despite overall improvements in all-cause mortality. Case study examples are provided from Thailand and Vietnam to illustrate this phenomenon, emphasizing the importance of implementing effective alcohol control measures alongside economic development initiatives (Rehm et al., 2024).

In conclusion, addressing alcohol-related harm requires a comprehensive approach that encompasses community-based interventions, policy reforms, and global collaboration. By leveraging evidence-based strategies and engaging multiple stakeholders, countries can effectively mitigate the negative health and social consequences of alcohol consumption and promote public health and well-being. However, in many settings, and in many countries, there is an urgent need for much more data and research.

The overarching goal of this special issue was to advance knowledge and foster collaboration in the field of alcohol prevention research, policy development, and evaluation of alcohol control measures, particularly in LMICs. By bringing together scholars, practitioners, policymakers, and community stakeholders, we aim to stimulate dialogue, share insights, and catalyze action towards more effective and sustainable approaches to reducing alcohol-related harm.

By creating this dedicated space for rigorous inquiry and dialogue, this issue will hopefully generate actionable insights and evidence-based recommendations for advancing alcohol prevention efforts in low-resource settings. Through interdisciplinary collaboration and knowledge sharing, we can work towards a future where all individuals and communities have equitable access to resources and support for reducing alcohol-related harm.

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