Alcohol Policy & Advocacy: It’s Not Personal

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As required by the Alcohol Policy 18 Conference, I/we have signed a disclosure statement and note the following conflict(s) of interest:

None
Background

• Alcohol consumption is a behavior strongly influenced by the social context and profit-driven corporate strategy

• As such, public health policy response resembles that for tobacco, fast food, or sugary beverages:
  1. Price increases via taxation
  2. Marketing restrictions, especially to children
  3. Reasonable controls on availability
Key Issues

• In contrast to other drivers of NCDs, alcohol consumption is not framed as unhealthy behavior or socially undesirable in control efforts or policies

• Alcohol use is enjoyed, expected, and encouraged - its place in society may feel inescapable

• Personal habits, as well as societal and cultural norms about alcohol, get in the way of robust policy
Personal Habits & Preferences

• What we like
• How often
• When and where
Embedded in Language & Environment

• “Let’s grab a drink”
• Happy Hours – with friends, colleagues
• “Open bar” events
• Pre gaming /sporting events
• Boozy brunch
• Celebrate with champagne
Alcohol Policy

• Is not neo-prohibitionist though that is what industry and opponents may have people believe

• Can co-exist with acceptance/tolerance/support for alcohol consumption
Alcohol Policy: It’s Not Personal

Alcohol harm is a population-level problem that requires population-level messaging and policy solutions.

This... Not that
Moving From Personal to Public Health

- Focus on the facts
- Develop the discourse
- Engage advocates
- Promote evidence-based policy
Focus on the Facts

• Alcohol is a toxic, carcinogenic and addictive substance
• Alcohol is a leading cause of death and disability worldwide
• Alcohol is a major obstacle to sustainable social development, adversely affecting more than half the UN global goals

The death, disability, injury and burden caused by alcohol are entirely preventable
Develop the Discourse

• Adjust the language and message & identify the audience
• Alcohol control terminology - how do we talk about alcohol use?
• Industry terminology – how do they promote alcohol use?
  – Breast cancer research funding or pink washing?
  – ‘Drink responsibly’ or alcohol promotion?
  – CSR or marketing?
Develop the Discourse

• Public health focus on reducing “excessive drinking” and “harmful drinking” is NOT synonymous with industry framing about “responsible drinking” or “moderation”

• Industry uses individual-level framing about personal decision-making

• Public health model is about changing the social, legal, and physical context through public policy
Engage Advocates

- **Civil society**: International, national and local NGOs
- **Government and elected officials**
- **Health professionals**: Physicians, public and mental health practitioners, substance use counselors
- **Public safety**: Police, justice, road safety, fire officials and emergency responders
- **Educators**
- **Community partners**: Women’s, parent’s and religious groups
- **Economic Development**: Tax, trade and employment officials
Promote Policy

We know what works to tackle harmful use of alcohol:

1. Increase excise taxes on alcoholic beverages
2. Enact and enforce restrictions on the physical availability of retailed alcohol
3. Comprehensively restrict exposure to alcohol advertising
Summary

- Alcohol use and control are framed differently than other drivers of NCDs
- Aiming to impact public health and policy, not individual-level/personal decisions
- Need to promote population-level messaging and policy solutions
- Removing hypocrisy and personal decision-making frames from the alcohol control narrative is key to framing, designing, advocating, and implementing successful alcohol policy
Full report will be available in the coming months on VitalStrategies.org
Thank you.

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Questions?

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