A conversation with Øystein Bakke, March 21, 2019

Participants

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Note: These notes were compiled by GiveWell and give an overview of the major points made by Mr. Bakke.

Summary

GiveWell spoke with Mr. Bakke of FORUT and the Global Alcohol Policy Alliance (GAPA) as part of its investigation into opportunities to reduce the burden of disease attributable to alcohol. Conversation topics included the scope of alcohol issues, actors within alcohol control, and room for more funding.

Scope of alcohol issues

The Global Burden of Disease estimates that tobacco is responsible for a larger number of deaths than alcohol. However, the health consequences of alcohol generally occur earlier in life. Alcohol consumption may also have significant social consequences (e.g. family disruption, crime).

Control options

The UN's Sustainable Development Goals include a target for strengthening the prevention and treatment of substance abuse (including both drugs and alcohol). One of the indicators identified to measure progress on this target is per capita consumption of alcohol, signifying that a reduction in alcohol consumption would result in a harm reduction.

The World Health Organization (WHO) has identified best practices for alcohol regulation, which include:

- Restricting access to alcohol (e.g. age limits)
- Limiting availability of alcohol (e.g. stricter hours of sale)
- Regulating the marketing of alcohol

The alcohol industry has expressed strong opposition to all of the WHO's best practices, which Mr. Bakke believes is a good indication that they would reduce consumption. It would, however, be difficult to predict the magnitude of reduction in alcohol consumption that would result from stricter regulation. Researchers at the University of Stirling in Scotland have been attempting to model the impact of minimum unit pricing for alcohol in Scotland and may have broader insight on how taxation at various levels reduces alcohol consumption.

Actors within alcohol control

Intergovernmental organizations

WHO

Although harmful use of alcohol is responsible for a significant portion of the global burden of disease, WHO's work on alcohol control receives very little external funding and is financed largely through its regular budget. Two staff at WHO headquarters work on an alcohol control program, which consists of technical advice rather than advocacy. It can be challenging for WHO to set priorities because a significant portion of its funding is restricted by donors to specific programs. WHO together with partners have recently developed the SAFER package to support member states in developing best buys alcohol policies.

WHO's regional and national offices also work on alcohol control, although the work is limited in scope and is often combined with a variety of other programs (e.g. noncommunicable diseases, mental health).

National programs

Various countries operate programs that address domestic alcohol consumption. A prominent example is the Thai Health Promotion Foundation, which works on national health promotion activities, including campaigns against harmful use of alcohol. It is funded by a dedicated tax on tobacco and alcohol.

International aid agencies

The Norwegian Agency for Development Cooperation (NORAD) and the Swedish International Development Cooperation Agency both provide a small amount of funding for global alcohol control activities.

Non-governmental organizations and alliances

FORUT

FORUT is a small to medium-sized Norwegian development aid organization that works in six countries in Asia and Africa. Its three program areas are women and gender equality, children's rights, and alcohol as an obstacle to development. FORUT receives annual funding through a five-year grant from NORAD, part of which is allocated to the Alcohol, Drugs and Development (ADD) program. Funding allocated to the ADD program is utilized for:

- Supporting local partners in Sri Lanka, India, Nepal, Malawi, Zambia, and Sierra Leone with local or national prevention activities and policy development
- Regranting funding to regional alcohol policy alliances in Southern and Western Africa, which enables the employment of a part-time coordinator and advocate for alcohol policy development in their regions
- Paying the salaries and expenses of Mr. Bakke and a colleague, whose work is mostly focused on alcohol and includes supporting local partners in Asia and Africa as well as international advocacy work and lobbying

activities, mainly around global health questions at WHO headquarters in Geneva (e.g. discussions around WHO's global alcohol strategy, the noncommunicable diseases, WHO's framework of engagement with non-State actors, as it relates to the alcohol industry and health-related Sustainable Development Goals)

• A similar but smaller component around international questions related to narcotic drugs.

FORUT is also receiving NORAD support for information activities to raise awareness domestically about alcohol as a development issue.

The Global Alcohol Policy Alliance

The Global Alcohol Policy Alliance (GAPA) is an international network of researchers, individuals, and non-governmental organizations working to promote evidence-based alcohol polices in the international, regional, and national contexts. Mr. Bakke has been involved in alcohol policy for the past 20 years and has worked with GAPA for the past 15 years.

GAPA does not have a budget and is supported by in-kind contributions from members.

Vital Strategies

Although Vital Strategies is more strongly focused on non-communicable diseases (NCDs) and tobacco control, it has produced two reports on the alcohol industry and alcohol policy.

IOGT International

IOGT International is a social movement involved in alcohol and drug policy advocacy.

NCD Alliance

The NCD Alliance is a civil society network organization dedicated to improving NCD prevention and control worldwide. It addresses alcohol as a risk factor for NCDs.

Research institutions

Alcohol research is conducted in a number of universities and research institutions around the world, but there are only a few institutions exclusively specialized in research on alcohol and drug control. However, funding for research on these issues is limited, and funding for research more broadly is decreasing.

The Institute of Alcohol Studies

The Institute of Alcohol Studies is a largely research-oriented organization, although it also has significant experience and expertise in advocacy activities.

Philanthropy

Mr. Bakke is not aware of any philanthropist or philanthropic organization that has made alcohol control a priority. Bloomberg Philanthropies has prioritized tobacco control and urban health, and although alcohol consumption is partially addressed through the traffic component of its urban health program, it is not involved with alcohol control. A few organizations that work largely on tobacco control and NCDs with philanthropic funding are also somewhat involved with advocacy around alcohol control.

Room for more funding

Funding for work to restrict alcohol consumption is very limited. Mr. Bakke believes that the ratio of global funding spent on tobacco control to global funding spent on alcohol control is grossly disproportionate to the harm caused by both substances.

Mr. Bakke's approximation of funding for work on alcohol control does not include funding provided by the alcohol industry, as he believes industry-related activities are not helpful. For example, Anheuser-Busch InBev SA/NV (a multinational alcohol company) has committed to spending \$1 billion over the next 10 years on "Smart Drinking Goals," which will largely consist of advertising around responsible drinking. Research has demonstrated that promotion of responsible drinking is ineffective in reducing the burden of disease attributable to alcohol.

Use of additional funding

Organizations that could productively use additional funding for work on alcohol control include:

- **GAPA** Mr. Bakke believes that granting significant funding to GAPA would be a strong use of additional funding. GAPA is currently determining the logistics for receiving large amounts of funding, such as legal registration.
- WHO Providing funding to WHO to strengthen its alcohol control program would be beneficial if a significant amount of funding was being considered.
- Local organizations Advocacy-oriented organizations based in low and middle-income countries, interested in alcohol issues, and willing to work independently of industry could be an important target for additional funding. These organizations would be well-positioned to challenge the alcohol industry, which often promotes ineffective and potentially harmful policies (e.g. designated driving rather than stronger regulation of drivers' blood alcohol concentration). The alcohol industry is able to co-opt discussion around alcohol control by supporting local organizations and framing alcohol information activities as corporate social responsibility.
- International organizations If significant additional funding was available, international organizations such as NCD Alliance, Vital Strategies, IOGT International, and the World Medical Association would

likely be interested in commencing or strengthening work on alcohol control.

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