

HALF THE WORLD'S POPULATION DO NOT DRINK ALCOHOL – WHAT SHOULD THE POLICY IMPLICATIONS BE?

Dag Endal, Project Coordinator, FORUT Norway, dag.endal@forut.no
Øystein Bakke, Senior Advisor, FORUT Norway, oystein.bakke@forut.no

Abstract

Non-drinkers make up nearly half the world's adult population. The figure rises to about 60% when people who have not consumed alcohol during the past twelve months are included [1].

The gender dimension is striking. Globally 35 per cent of men are non-drinkers while the rate for women is 55%. In some WHO regions 90% of women do not drink. The rates also vary with religion and culture. In Europe and the Americas around 20% of adults refrain from drinking alcohol. In South-East Asia more than 80% are non-drinkers and in the Middle East the rate is as high as close to 90%. There are variations within the regions. Studies of 20 African countries showed that non-drinking rates varied between 41 and 99 per cent [2,3].

The high rates of non-drinkers contribute significantly to a relatively low per capita consumption in many countries in Asia and Africa [1]. This, in turn, reduces the level of alcohol-related harm [4]. Based on development concerns as well as health, social and cultural considerations maintaining a high proportion of non-drinkers should be a strategic objective for national alcohol policies in the global South. The WHO global alcohol strategy has a guiding principle that “Children, teenagers and adults who choose not to drink alcohol beverages have the right to be supported in their non-drinking behaviour and protected from pressures to drink” [5]. However, the non-drinking segments of the population seem to be overlooked when national alcohol policies and strategies are designed, particularly where the alcohol industry is involved [6]. The large non-drinking populations in Africa and Asia are not ignored by the multinational alcohol corporations [7]. They see enormous potentials in young non-drinkers becoming new and brand-loyal drinkers [8].

This paper analyses how the issue of non-drinkers is handled in selected alcohol policy documents, nationally and internationally. It discusses how marketing by the drinks industry links alcohol use to modernity, femininity, masculinity, affluence, social success, sophistication, fun, sports and music. The paper suggests how developing countries can handle this challenge, through policies and social mobilization.

Introduction

It is often pointed out that alcohol has been in use in most societies throughout history. Different drinking patterns exist in different parts of the world. Likewise, the use of alcohol has also been regulated since time immemorial, by traditions, social norms, and natural limitations. The purpose has been to reduce harm and to protect individuals and the society from the consequences of intoxication.

Cultural norms would also decide who would drink alcohol and who would not. Factors that influence alcohol consumption include gender, religion and social settings (whether to drink

for festive occasions or during every day). In some cultures there is a minority who do not drink alcohol, in other settings it is the majority. In the West non-drinking has been and still is linked to a deliberate choice of many individuals, in which case he/she is considered an “Abstainer” and it is often termed “Temperance”. This concept is not the topic of this paper. It rather takes a political, strategic approach to non-drinking, starting with the bare fact that approximately half the world’s population do not drink alcohol, for most of them simply because it is not part of their culture to do so. This fact warrants some considerations of the policy implications from a public health point of view.

There is great interest in the world today to protect biodiversity, threatened by consequences of modern life: industrialization, pollution and climate change. Still the same aspects that drive depletion of biodiversity also impact on the cultural diversity of the world. The result is conformity, and a global mono-culture deprived of cultural diversity. The enthusiasm to protect the cultural diversity, which includes non-drinking cultures, is not the same as for the engagement to save the threatened species [9].

Methodology

This paper has an exploratory character and starts by describing how the habit of not drinking alcohol is distributed around the globe as represented in figures made available by WHO. This is followed by an analysis of a small collection of national and international alcohol policy documents to identify how non-drinking is mentioned. The next sections discuss the cultural idea of non-drinking. What is the background and how it is under pressure from a number of factors? Finally, based on the findings and the discussion we draw conclusions and make some policy recommendations.

A collection of 15 policy related documents have been selected for review based on their availability and relevance for this topic. They do not constitute a representative sample of a global universe of such documents. The documents are drawn from an international context (WHO and WHO regions) and national documents, both those that have strong influence from alcohol industry interests [6] and others where civil society has been involved in the development. With varying background the documents may exemplify some of the contextual elements of this study.

Findings

One of the most striking features in the Global Status Report material on drinking habits is the large proportion of non-drinkers globally [1]. 45 per cent of the world’s adult population consider themselves as life-time abstainers, while another 13 per cent did not drink last years. In total that means that 58 per cent of all adults, did not drink alcohol in the past 12 months according to the WHO surveys. These figures are best estimates for abstention rates based on surveys carried out within the time period 1993 – 2009.

The figures show interesting differences between various regions of the world (see table 1). WHO Eastern Mediterranean Regional (EMRO), consisting of the Muslim countries in the Middle East and North Africa, is by far the lowest alcohol consuming region in the world,

both in terms of total adult per capita consumption (APC) of 0.65 litres and prevalence of non-drinkers, i.e. 87.8% lifetime abstainers. The WHO South East Asia Region (SEARO) follows with the second lowest APC of 2.2 litres and 80.4% lifetime abstainers. The third region is the African region (AFRO) where the APC is at 6.15 and 57.2% of the population are lifetime abstainers.

The Western world is at the other end of the scale with an abstention rate of 31.2 per cent in Europe and 41.7 per cent in the Americas, a figure which covers both North America and Latin America [1]. Figure 1 illustrates regional differences in the prevalence of abstention from alcohol.

WHO region	Sex	Lifetime abstainers (%)	Former drinkers (%)	Past-year abstainers (%)	Former drinkers among past-year abstainers (%)
AFR	Women	65.2	12.9	78.1	16.5
	Men	49.1	14.1	63.1	22.3
	Total	57.3	13.5	70.8	19.1
AMR	Women	27.4	22.4	49.8	45.0
	Men	15.2	17.8	33.0	54.0
	Total	21.5	20.2	41.7	48.4
EMR	Women	93.4	4.8	98.2	4.9
	Men	82.4	12.3	94.7	13.0
	Total	87.8	8.7	96.5	9.0
EUR	Women	24.6	13.5	38.1	35.5
	Men	12.6	11.0	23.5	46.5
	Total	18.9	12.3	31.2	39.4
SEAR	Women	92.8	4.2	97.1	4.4
	Men	68.4	13.5	81.9	16.5
	Total	80.4	8.9	89.3	10.0
WPR	Women	44.5	15.1	59.5	25.3
	Men	14.3	13.9	28.2	49.2
	Total	29.2	14.5	43.7	33.1
World	Women	55.0	12.5	67.5	18.5
	Men	34.9	13.8	48.7	28.4
	Total	45.0	13.1	58.2	22.6

Table 1 Prevalence of alcohol abstention by sex, WHO region and the world (From WHO, 2011)

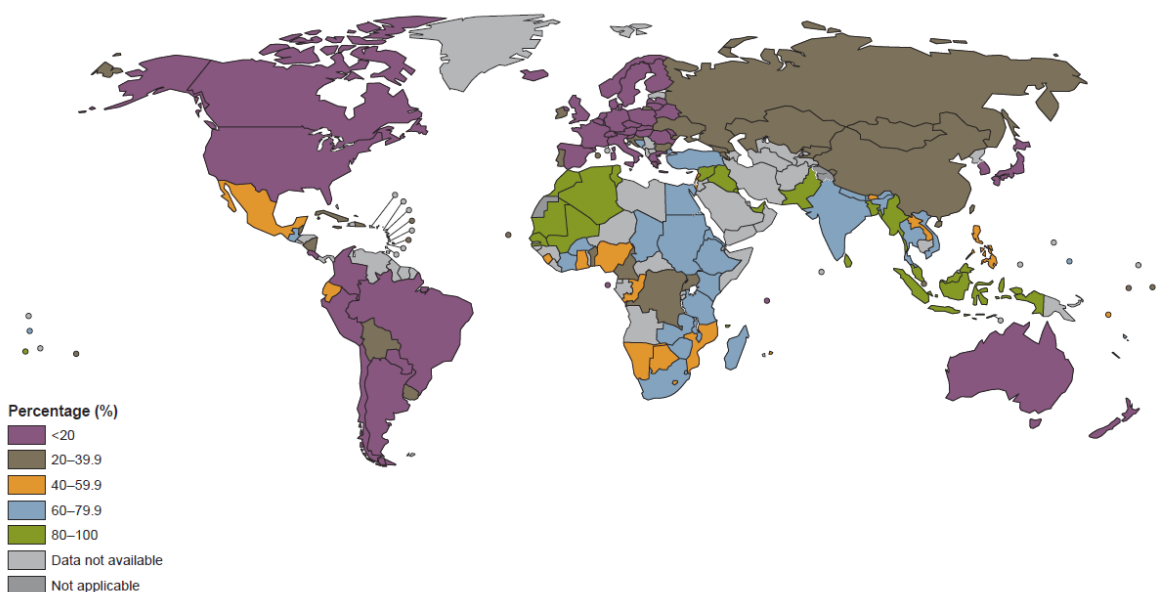


Figure 1 Lifetime prevalence of abstention (%), 2004 (From WHO, 2011)

Consequently EMRO countries are also low on the statics of alcohol harm. While alcohol is risk factor no 1 or 2 for death and disability in regions like southern Sub-Saharan Africa, most of Latin-America and Eastern Europe, it is no. 18 in the Middle East and North Africa. In South Asia and in Central sub-Saharan Africa it is risk factor no. 10 [10].

The gender differences are another striking feature in the material on drinking patterns. Worldwide 48.7 per cent of men were past-year abstainers while 67.5 per cent of women did not drink last year. The differences between men and women are largest in the Western Pacific region and smallest in the Eastern Mediterranean region where there are practically no differences at all between the sexes.

Rather large differences are also found between individual countries within many of the regions. Studies of 20 African countries have shown that non-drinking rates varied between 41 and 89 per cent [2,3]. Data in the study by Clausen, T. et al stem from the WHO World Health Survey collected in 20 African countries between 2002 and 2004 (see Table 2). Close to nine out of ten adults in Tunisia and Swaziland are life-time abstainers, compared to 40 per cent in Mauritius and around 60 per cent in countries like Ethiopia, Ghana and Namibia.

Country	Life-time abstainers
Burkina Faso	66,0
Chad	76,4
Congo	54,5
Côte d'Ivoire	64,4
Ethiopia	62,0
Ghana	55,0
Kenya	74,9
Malawi	79,7
Mauritius	40,9
Namibia	63,2
South Africa	68,7
Swasiland	88,1
Tunisia	88,9
Zambia	72,9
Zimbabwe	78,7

Table 2 Life-time abstainers in selected African countries (From Clausen et al/WHO)

How do policies and strategies address non-drinking populations?

Policies are often geared towards change. If a problem has been experienced and defined, policies aim at producing some kind of change. What then if the situation is positive, like when more than half of the world's population do not drink at all and do, by that, not cause any alcohol-related harm? The authors have analysed a number of documents to see if and how the non-drinking populations are described and addressed.

The documents have been searched for certain clauses related to non-drinking. Search words were: **non-drinker, non-drinking, abstain, abstainer, do not drink, drink.**

15 documents were analysed: Three government policies with civil society contributions, four industry-sponsored policies, two government acts and six documents with international/WHO origin. Very few, if any, of these 15 alcohol policy documents have any meaningful strategies related to the fact that a large proportion of the world's population and the population of many countries do not drink alcohol. However, some of the documents do point to the need to protect those who choose this kind of lifestyle:

(g) Children, teenagers and adults who choose not to drink alcohol beverages have the right to be supported in their non-drinking behaviour and protected from pressures to drink.(para 12, Guiding principles) [11]

This concern is typically mentioned in sections of principles, guidelines or background and not when targets, strategies or interventions are described. The approach is often individualistic and rights-based: Some people have chosen not to drink alcohol, they have the right to do so and should be supported. Only one document, [12] takes an epidemiological and strategic approach:

2. The importance of public health objectives, page 6:

In some countries in which drinking is less prevalent, but in which the market is expanding, a goal of arresting the spread of drinking might be appropriate.

8. Regulating alcohol marketing, page 86:

The global alcohol producers have enormous resources to employ in marketing. This advantage makes the regulation of marketing a major challenge for governments concerned about the impact of marketing on the rate of uptake of drinking in traditionally low alcohol communities.

Many of the documents discuss the role of drinking patterns, but generally this is limited to those who drink (harmful drinking, risky drinking patterns, under-age drinking, binge drinking etc.).

The policy documents sponsored by the alcohol industry and their social aspect organisations will generally not cover the non-drinking population but focus on drinking patterns and drinking habits. They do this in the context of promoting “positive”, “healthy”, “desirable”, “responsible”, “safer”, “sensible”, “harm-free” drinking patterns or discourage “negative”,

“harmful” or “risky” drinking patterns and “underage drinking”. This is often the hallmark of industry involvement in policy formulation, to the extent that certain such clauses in a policy document may be an indication of industry involvement [6].

Examples are taken from the industry sponsored alcohol policy draft for Malawi:

It is not realistic or desirable to advocate for total abstinence from drinking for the whole population. A more sensible and sustainable approach is to cultivate those drinking patterns that embrace a harm minimization approach. (page 16)

And:

This Policy will establish the basis for the place of alcohol in the lives of Malawians. It needs to move all Malawians to safer drinking patterns in shaping the future. (Page 35)

Discussion

Culture and religion

In the outset we pointed to tradition, norms and cultures when it comes to explaining non-drinking. Social norms are by definition shared norms within a social group, ethnic community, or national state. They are sustained by approval or disapproval and also by the emotions they trigger when they are violated: embarrassment, guilt and shame in the violator; anger and indignation in the observer. On the whole social norms are beneficial in upholding civilization [13]. Various cultural norms and traditions will influence drinking patterns, including who drinks and who doesn't, how much to drink and on what occasions. There are vast differences in alcohol culture across the globe. Scandinavian culture tends to condone the idea that binge drinking is part of adolescence while in some African Tribes alcohol drinking is limited to male elders.

Religion codifies social norms and may have strong influence on alcohol use. In Islam the ban on alcohol is very explicit. Other religions also proscribe alcohol. Buddhism and Hinduism are generally negative towards intoxicating substances. These religious norms interact with cultural values and may vary locally even within one religion. Thus even within Islam, there are great variations as to how the alcohol ban is interpreted and practiced, both by individuals and by local or national cultures. Sometimes alcohol becomes a religious, cultural or ethnic marker, which divides between us and them and this may contribute to strengthening the norms – for example between the non-drinking Muslims and the alcohol consuming Christians in Senegal.

In Nepal alcohol use is closely related with the caste system and the different ethnic communities. Some groups use alcohol traditionally for rituals and on religious occasions like birth and death while others prohibit alcohol use among the higher casts of Brahmin and Chetri. Traditionally the whole Nepalese society is segmented on the bases of alcohol use. *Matwali* are traditional alcohol users, and *Tagadharis* are traditional alcohol non-users [14].

In drawing on traditional culture as a resource for reducing alcohol related problem there is a balance to strike. If alcohol prevention allies itself with strict traditionalist or fundamentalist religious movements the efforts may be counterproductive.

Gender

Gender differences in drinking were described above. In a study of abstinence and drinking among African Women, Martinez and colleagues found that 81% of African women reported lifetime abstinence. Current use varied between 1 and 30 per cent. They conclude that a variety of drinking patterns are present among African women with lifetime abstention the most common. Countries with hazardous consumption patterns require serious attention to mitigate alcohol-related harm. Some similarities in factors related to alcohol use can be identified between different African countries, although these are limited and highlight the contextual diversity of female drinking in Africa. The combination of minimally regulated alcohol companies and increased commoditization of their products, along with higher levels of social tolerance towards female drinking predicates increases in the number of African women imbibing alcohol [3]. In building on the general high abstention rates among women for prevention one challenge is that gender rights should not be linked to taking up alcohol drinking.

Globalisation

Cultures and traditions are not set in stone and often these cultures will change over time. Our contemporary world is marked by rapid cultural change often broadly termed globalisation – indicating a series of developments where increasing parts of the world’s populations are encompassed and integrated in global communication and information. Globalisation influences our consumption patterns as well as economic, political and social development. Cultural and religious ideas are spreading and merging in a way which was not possible only a few years ago. The forces and processes that influence people’s lives are often of a global nature.

Global information flow and consumption patterns are an integral part of globalization. An increasing amount of the food we eat, the drinks we drink, the clothes we wear have international brands on them. Goods of local origin are not as common place anymore and those that are profitable have often been transferred to the ownership of global corporate companies [15]. The trend is strengthened by the reach of ever more sophisticated marketing methods to make people crave for the global brands. [16].

The reach of the global corporates is strongest in the western affluent societies which is the origin of many of the multinational companies. But as the western markets are more and more saturated with the various branded goods and services, the companies are looking for profits elsewhere.

Emerging markets in Low and Middle Income Countries in Africa, Asia and Latin America hold promise of increasing sales and profits. A new affluent middle class is coming up and products are being developed and branded to target this consumer group. Other products may

be designed, packed and marketed even to those with less purchasing power. The segment of the population living at \$2 per day may also be exploited [17]. The ensuing health problems of non-communicable diseases following in the foot path of unhealthy consumption patterns of tobacco, alcohol and unhealthy food is a major threat to public health in many low and middle income countries. There seems to be strong correlates between higher intake of unhealthy food with higher tobacco and alcohol sales, suggesting a set of common tactics by industries producing unhealthy commodities [18].

Alcohol industry

The alcohol industry is no exception to the rule. Rather, in many markets alcohol, along with mobile telecommunication, is leading the way in “modernization” and marketing of new global life style and a sort of conspicuous consumption that indicates your belonging to the new era [19]. The high level of abstention from alcohol use only underpins the opportunities of these markets, as an increasing number of young people are coming to drinking age.

While mobile phones have tremendous potential in improving health in poor communities, the opposite could be said about alcohol. Alcohol is already the number one risk factor for early death and ill health in regions like Southern Sub-Saharan Africa and Andean Latin America [10].

The protective factor represented by the traditional negative attitudes to alcohol and the ensuing low prevalence rates of drinkers is quickly dwindling in the face of globalization. These changes are happening rapidly and may be expected to continue.

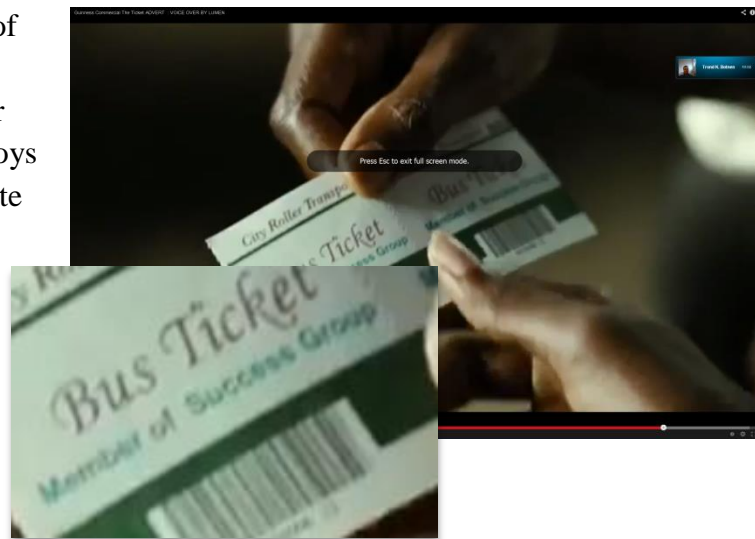
The characteristic of global alcohol brands is that they are marketing-driven. The product becomes a symbolic object to which the marketers attach a broad range of symbols. What is being marketed is not as much a product as a lifestyle—a brand with which the costumer may identify. Much of the lifestyle-oriented marketing is attuned to new user groups, particularly young people from the affluent middle class. This marketing connects the brand to a global youth culture. The paradox of the situation is that although the global producers in all their official communication emphasize that alcohol should be consumed responsibly and their various voluntary marketing codes typically feature clauses about not promoting excessive drinking, this marketing targets a rapidly spreading global youth culture of excessive drinking, fuelled by the very marketing of the alcohol producers.

Alcohol promotions tend to focus on the fun aspects of drinking and underline the strength or punch of the product (alcohol content). This probably reinforces the traditional drinking pattern of heavy drinking that exists in many countries in Asia, Africa, and Latin America and contributes to passing it on to a younger population [20]. Other common themes of alcohol advertising is portraying how drinking will make you socially successful, popular, and/or sexually attractive. Alcohol becomes the entry into manhood and the modern world.

A recent Guinness TV advert, *The Ticket* [21] is set in Nigeria, but could be many places in Africa. The older brother is coming home to the countryside from working in the city. Bringing gifts he has also brought a bottle of Guinness to his younger brother and offers it with the introduction: “You know, a boy dreams, what a man does”. He also offers the boy a bus ticket to the city: “Brother, are you ready to drink at the table of men?” The bus ticket has the print “Bus Ticket; Member of Success Group” (see illustration).



Sport sponsorship is another form of alcohol marketing which is wide spread and permeates into every far corner of the world where young boys and girls are watching their favourite football team on a TV-screen. Marketing is loaded with “cues” that will trigger drinking. BBC quotes Dr Sally Adams, a research psychologist specializing in alcohol studies, from the University of Bath: "Alcohol-related cues are often processed outside of an individual's awareness and can stimulate thoughts, memories and expectations of alcohol. In turn these thoughts can lead an individual to seeking out and consuming alcohol. In a nutshell, alcohol-related cues can bias our thoughts and behaviours to be targeted towards alcohol and drinking" [22].



Flavouring and sweetening alcohol products is typical of efforts to extend marketing and alcohol use into young and female populations, as has been shown by the global efforts to promote “alcopops” [23, 16].

One recent development in moving alcohol in towards new customers is the initiative by the UB Group/Diageo to sell branded liquor in Tetra Pak in India. According to Times of India smaller distillers joined in as tippers in semi-urban and rural markets favoured tetra paks over glass bottles which made cheap liquor more acceptable socially. The absence of glass tingle sounds, and to that extent less embarrassment, also makes it friendly, said GK Karanth, Professor of Sociology, Institute of Social and Economic Change [24].

And the alcohol producers do expect growth in Africa, Asia and other emerging markets. Two out of many industry executive statements illustrate this. Said Mark Bowman, MD for SABMiller Africa, in August this year: “Building a second brewery in Uganda is part of our strategy to invest in new capacity across Africa so that we are in a strong position to capitalise on the continent’s long-term beer market growth over the coming decades” [25]. And a Heineken spokesperson told Just-Drinks in 2011: "Heineken is bullish about Africa and the possibilities for ongoing growth in the region". [26]

Conclusions

From a prevention point of view it makes sense to protect non-drinking behaviour. No drinking – no alcohol related harm. On a population level the focus will be on per capita alcohol consumption. With a smaller portion of the population drinking, per capita consumption will be less. The theory of the collectivity of drinking patterns predicts that an increase in per capita consumption will lead to an increase in the number of heavy drinkers and an increase in the harm from alcohol use. While the observations have been made in a western setting the same seems to apply in other cultures as well, including in Africa [4]. Part of the explanation for this mechanism is the social component of drinking. A person’s drinking is influenced by the drinking of people around her/him. Thus, consumers at all levels of consumption tend to move in concert up and down the consumption scale [4].

From this logic it would make sense to prevent alcohol related harm through reducing the aggregate per capita consumption. This is also the logic behind population based alcohol policy measures [27]. An extension of this thinking would be to limit the increase in numbers in the drinking population, i.e. to protect non-drinking behaviour. This goes along with the so called preventive paradox, the essence of which is that most alcohol-related damage occurs among moderate drinkers, although their individual risk is much lower, due to their much larger numbers [28]

This is not a logic prescribed to by the alcohol industry. Rather, in their submission to the public hearing about Health in the post 2015 Development Agenda, International Centre on Alcohol Policy (ICAP), the industry mouth piece, tried to use the WHO Global strategy to reduce the harmful use of alcohol for their logic:

It is important to clarify, however, as does the WHO Global Strategy to Reduce the Harmful use of Alcohol, for example, that there is a distinction between patterns of drinking that pose an increased risk for harm, including NCDs, and those that do not.

This distinction poses a paradox: the risks associated with much of the drinking that goes on in the world are negligible, whilst the risk associated with harmful patterns of drinking are very serious, indeed. [29]

Prevention of alcohol related harm has traditionally been done through addressing both availability and demand. While availability refers to what we traditionally see as alcohol control policies, influencing demand has traditionally been limited to education programmes and information campaigns, both of which has been deemed ineffective as stand-alone

measures [27]. Leave alone availability aspects of prevention for now, the demand aspects are important in that the drinking traditions and cultural heritage and social norms as a stabilising factor would be listed under this heading. Advertising and marketing are the major agents for changing this.

One element in this seems to be an increasing “alcoholisation” of many social events and activities. The degree to which alcohol is made an integral and necessary part of different social activities influence the amount consumed. As the range of events that include alcohol increases, so does consumption [30].

Restrictions are more effective if they are combined with other types of interventions and when these interventions interact and support each other. FORUT has used “The Prevention Triangle” to symbolize this approach. In this model control policies, education and social mobilization, respectively, are the three corners of the triangle. The non-drinking population is of great interest both for education and mobilizations programmes.

Modern marketing strategies have to a large extent moved away from the blunt messages from the past; drink this or drink that. More subtle methods are being used, like association techniques. Advertisements aim at making consumers associate a product with good feelings and attractive situations. If this is done successfully, people do not drink because a billboard or a TV ad has told them so, but because of a feeling coming from inside. This marketing strategy is being applied for many types of consumer products, and not the least for beer and spirits.

For alcohol the technique is to link drinking with attractive images in the minds of the consumers; modernity, success, femininity, masculinity, strength, attractiveness, football, music, dance, fun, party etc. In developing countries this shall serve to give the new middle class a feeling of belonging to the young, aspiring, ambitious, modern people of the global village. By pushing this message hard through advertising and social marketing, it is implicitly indicated that those who do not drink, are traditional, unfashionable, not up-to-date,

Thus, restriction on advertising might stand out as the single most important policy measure in terms of protecting non-drinking groups whether they are women, young people or traditional non-drinking cultures.

Policy recommendations

- Having a large segment of non-drinkers in a population is a valuable contribution to a reduced consumption level and also to reduced alcohol-related harm. Maintaining such a segment of non-drinkers should therefore be made one of the overarching goals of national alcohol policies.
- Systems should be put in place, eg. national surveys, to monitor changes in consumption patterns and levels in the population, including the proportion of non-drinkers.
- The non-drinking population should be subject to more systematic scientific studies in order to understand better the mechanisms behind their choice and why changes occur among non-drinkers, if any changes are observed.

- The general policy interventions to regulate the sale of alcohol also contribute towards protecting the non-drinking population. Such interventions should therefore be introduced or maintained, in spite of the global trend towards economic liberalization and lifting of market regulations.
- The most important intervention in this regard is a ban on alcohol marketing and promotion.
- In many cultures in the global South many celebrations and festivals traditionally have been alcohol-free. This has been rapidly changing in a number of countries where the “alcoholisation” of social events has been one of the strategies from the alcohol industry. To protect and even introduce new “white zones” in the local culture is recommended as part of national alcohol policies. White zones are situations and places where it is considered culturally inappropriate to drink alcohol.
- It is recommended that national alcohol policies include measures to support organizations and government agencies that a) can mobilize also the non-drinkers in support of control policies and b) communicate with non-drinking groups and support their behaviour.
- Give financial support to projects which aim at developing a new wrapping for traditional habits of non-drinking, where traditional cultural and religious values are combined with modernity, like creating a modern concept of femininity where alcohol drinking is not an integral part.

References:

1. WHO. (2011). Global status report on alcohol and health. WHO, Geneva
2. Clausen, T. et. al. (2009). Diverse alcohol drinking patterns in 20 African countries. *Addiction*, 104, 1147–1154 doi:10.1111/j.1360-0443.2009.02559.x
3. Martinez et al. (2011). Alcohol abstinence and drinking among African women: data from the World Health Surveys *BMC Public Health* 2011, 11:160 doi:10.1186/1471-2458-11-160
4. Rossow, I and Clausen, T. (2013). The collectivity of drinking cultures: is the theory applicable to African settings?, *Addiction*, doi:10.1111/add.12220
5. WHO. (2010). Global strategy to reduce the harmful use of alcohol, WM274. WHO. Geneva
6. Bakke, Ø and Endal, D. (2010). Vested Interests in Addiction Research and Policy; Alcohol policies out of context: drinks industry supplanting government role in alcohol policies in sub-Saharan Africa. *Addiction*, 105, 22–28 doi:10.1111/j.1360-0443.2009.02695.x
7. de Bruijn, A. (2011). Alcohol Marketing Practices in Africa; Findings from The Gambia, Ghana, Nigeria And Uganda; Monitoring Alcohol Marketing In Africa, The MAMPA-project. WM 274. WHO Regional Office for Africa,
8. Jernigan, D. (2013). Why South Africa’s proposed advertising ban matters. *Addiction*, doi:10.1111/add.12155
9. Eriksen, T.H. (2013). Et kinderegg av problemer, *Dagbladet*, 31 August 2013
10. Lim, S.S. (2012). A comparative risk assessment of burden of disease and injury attributable to 67 risk factors and risk factor clusters in 21 regions, 1990–2010: a

- systematic analysis for the Global Burden of Disease Study 2010. *Lancet* 2012; 380: 2224–60, rev April 12 2013
11. WHO. (2010). Global strategy to reduce the harmful use of alcohol
 12. WHO WPRO. (2011). Addressing the harmful use of alcohol – A guide to develop effective alcohol legislation
 13. Elster, J. (1989). *Nuts and Bolts for the Social Sciences*. Cambridge University Press. Cambridge
 14. Dithal, R. et. al. (2001). *Alcohol and drug use in Nepal; With reference to children*, CWIN, Kathmandu
 15. Jernigan D.H. 1997. *Thirsting for Markets; the global impact of corporate alcohol*. The Marine Institute. San Rafael. CA. USA
 16. Hastings, G. (2013). *The Marketing Matrix; How the corporation gets its power – and how we can reclaim it*. Routledge. London and New York
 17. Costa, MaryLou (2011). The \$2-a-day consumer. *Marketing week*, 2 June 2011, Available at <http://www.marketingweek.co.uk/the-2-a-day-consumer/3026951.article>
 18. Stuckler, D. et al. (2012). Manufacturing Epidemics: The role of Global Producers in Increased Consumption of Unhealthy Commodities Including Processed Foods, Alcohol, and Tobacco. *PLoS Med* 9(6): e1001235. doi:10.1371/journal.pmed.1001235
 19. Baklien, B. and Samarasinghe, D. (2003). *Alcohol and Poverty in Sri Lanka*, FORUT/NIBR, Colombo
 20. Bakke, Ø. (2008). Alcohol: health risk and development issue, in Cholewka, Patricia, and Mitra M. Motlagh: *Health Capital and Sustainable Socioeconomic Development*, CRC Press, New York
 21. Guinness. TV advert, The Ticket available at <http://youtu.be/CwOu7EnVNaA>
 22. Gage, S. (2013) Alcohol brands 'pervade' football broadcasts, BBC, 11 September 2013. Available at <http://www.bbc.co.uk/news/science-environment-24051749>
 23. Mosher, J.F. and Johnsson, D. (2005). Flavored alcoholic beverages: An international marketing campaign that targets youth, *Journal of Public Health Policy*, Vol. 26, 326–342.
 24. Times of India. (2013) Alcohol in tetra paks 44% of sales in Karnataka. Jul 18, 2013. Available at <http://timesofindia.indiatimes.com/business/india-business/Alcohol-in-tetra-paks-44-of-sales-in-Karnataka/articleshow/21134789.cms>
 25. Morton, A. (2013). UGANDA: SABMiller completes second brewery. Just-Drinks. Available at http://www.just-drinks.com/news/sabmiller-completes-second-brewery_id111285.aspx
 26. Mercer, C. (2011). Heineken extends Africa growth plan to DR Congo. Just-Drinks. Available at http://www.just-drinks.com/news/heineken-extends-africa-growth-plan-to-dr-congo_id104936.aspx
 27. Babor, T.F. et. al. (2010). *Alcohol: No Ordinary Commodity – Research and Public Policy*, Second Edition, Oxford University Press, Oxford and London, 2010
 28. Aasland, O. G. (1989). Prevention of alcohol-related damage through restrictions on availability: The Nordic experience. *Addictive behaviors: Prevention and early intervention*. T. Løberg, W. R. Miller, P. E. Nathan and G. A. Marlatt. Lisse Netherlands, Swets & Zeitlinger Publishers: 139-153
 29. Grant. M. and Martinic, M. (2012). *Harmful alcohol consumption, NCDs and post-2015 MDGs*, ICAP, Washington, available online at <http://www.worldwewant2015.org/node/296111>
 30. Samarsinghe, D. (2005). *Strategies to Address Alcohol Problems*, FORUT, Dehiwala, Sri Lanka

Documents analysed:

1. WHO Global Strategy to Reduce the Harmful Use of Alcohol (2010)
2. Reduction of The Harmful Use of Alcohol: A Strategy for The Who African Region (2010)
3. WPRO Regional Strategy to Reduce Alcohol-related Harm (
4. An EU strategy to support Member States in reducing alcohol related harm (2006)
5. WPRO Addressing the harmful use of alcohol – A guide to develop effective alcohol legislation (2011)
6. Framework for alcohol policy in the WHO European Region (2006)
7. Zambia National Alcohol Policy, Draft 5 (2012)
8. Malawi National Alcohol Policy, Final Draft (March 2013)
9. Malawi Implementation, Monitoring and Evaluation Strategy for Malawi National Alcohol Policy (2013)
10. Sri Lanka National Authority on Tobacco and Alcohol Act (NATA), No. 27 of 2006
11. Thailand Alcohol Control Act B.E. 2551 (2008)
12. Lesotho, National Alcohol Policy, Final draft, industry-sponsored (2007)
13. Botswana; National Alcohol Policy, Draft (August 2008)
14. Uganda; national Alcohol Policy, Draft (2006)
15. Malawi; National Alcohol Policy, First Draft (2007)