

# NGO CIVIL SOCIETY SUBMISSION TO WHO-SAFER MISSION on Alcohol in Uganda

*compiled by:*

**Uganda Alcohol Policy Alliance (UAPA)**

**and**

**Uganda Youth Development Link (UYDEL)**

**Kampala - Uganda.**

**24 November 2021**





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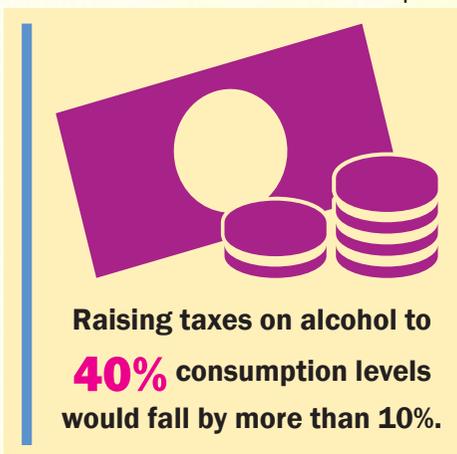


# 1.0 What are priority alcohol interventions for implementation within the next 24 months in Uganda?

## In the order of priority and why?

### 1) To urge government to increase alcohol excise taxation.

- ◆ The most effective ways to prevent second-hand effects and costs from alcohol are policies that reduce alcohol affordability and availability.
- ◆ Raising taxes on alcohol to 40% of the retail price could have [a big] impact. Estimates for 12 low-income countries show that [alcohol] consumption levels would fall by more than 10%, while tax revenues would more than triple to a level amounting to 38% of total health spending in those countries. Even if only a portion of the proceeds were allocated to health, access to services would be greatly enhanced.
- ◆ Develop an alcohol taxation earmark to establish a health promotion fund.
- ◆ A tax that increases alcohol prices by 20% over current levels could generate almost US\$9 trillion in additional; for a 50% increase, the gain could be almost US\$17 trillion in additional revenues.



## 1.2 Ban alcohol advertising, sponsorship and promotions

- ◆ Tendency to make alcohol normalized, hyped and misleading adverts. Messages need to be vetted and regulated by the UCC.
- ◆ Free distribution of alcohol promotions be banned and self-regulation has failed to work.

## 1.3 Improve alcohol availability limits and enforcement

- ◆ Reduce alcohol outlet density and better enforce licensing rules.
- ◆ Increase the age limit and better enforce the age limit.
- ◆ Government needs to:-
  - (i) set standards for the emerging informal alcohol production,
  - (ii) help to reduce informal alcohol production and
  - (iii) help informal alcohol producers to transition to healthier, and more sustainable means of sustenance.

## 1.4 Improve mechanisms to protect children against alcohol industry interference and to eliminate conflicts of interest. Also to keep the public health and sustainable development areas free from the alcohol industry

- ◆ Invest in Monitoring, documenting and exposing the unethical practices of the alcohol industry, revealing their hidden agenda and fundamental conflict of interest, plus the costs to society.

## **Other areas of interests that need action**

### **1.5 Strengthen primary care and early identification and brief intervention for people with alcohol use problems**

### **1.6 Invest in community mobilization for alcohol prevention, and treatment**

- a. Invest in evidence-based alcohol prevention at community and district levels
- b. Invest in country-wide alcohol awareness activities – including in local languages.
- c. Support championing of the modern and high-impact Alcohol Control Bill.
- d. Invest in alcohol literacy initiatives and support efforts to promote alcohol-free environments and lifestyles
- e. Conduct large scale community mobilization campaign for support of alcohol policy development and to raise awareness about alcohol harms, alcohol industry practices and alcohol policy solutions.

### **1.7 Improve alcohol policy infrastructure and coordination among stakeholders that are free from conflicts of interest**

- a. Annual inter-ministerial roundtable on alcohol policy development and implementation to Ensure accountability and commitment to full SAFER implementation.
- b. Annual sharing of experiences in a forum about progress and challenges.

- c. Regular consultation with civil society

## **1.8 Improve Driving under influence of Alcohol counter-measures**

- a. Reduce legal Blood Alcohol Content –(BAC) level.
- b. Improve road safety measures, such as random breath testing.

## **1.9 Pave the way towards the adoption of a modern, evidence-based, public health oriented Alcohol Act.**

- a. Leadership and commitment from the President's office to support alcohol regulation.
- b. Translate the Alcohol Control policy into local languages and disseminate it to communities via local media houses etc.

## **1.10 Take a regional leadership role to champion SAFER in East Africa (address the cross-border alcohol issue) and in the WHO Africa region**

## **1.11 Generate data and information about alcohol issues and engage in continuous monitoring and evaluation**

## 2.0 What barriers might interfere with successful adoption, implementation, and/or enforcement of priority alcohol interventions?

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1. **Alcohol industry interference.**
2. **Lack of political commitment and long-term leadership**
3. **Lack of resources**
4. **Lack of accountability and implementation of agreed regulations and policies**

### **Note:**

The alcohol industry is and has been the single biggest obstacle to modern alcohol policy in Uganda. The alcohol industry deploys an array of strategies and tactics to undermine, derail, and delay alcohol policy development and implementation in Uganda.

### **Aggressive alcohol industry lobbying and public relations activity**

The Alcohol Industry is facilitating Covid-19 vaccination. Most recently, the alcohol industry facilitated Ministry of Health during Covid-19 vaccination, availing bars as immunisation facilities. Developed and signed MOU with Ministry of Agriculture claiming to invest in agriculture (cassava and Sorghum); all this increase visibility of their support, corporate social responsibility (CSR) in development and trade to cover up the harm their products and practices cause.

The alcohol industry is also **working aggressively to hook more Ugandans** on their products:-

- a) **Rising affordability:** the alcohol industry is pushing ultra-cheap alcohol into Ugandan communities; alcohol is cheaper than water. Increase in consumption especially among young people. This fuels the alcohol burden by driving alcohol use.
- b) **Increasing availability:** In the informal market the number of unregulated local brewers and other manufacturers is increasing with increasing alcohol poisoning products on the market. In the formal market, the alcohol industry is pushing alcohol into every social space, compelling alcohol retailers to sell alcohol to anyone at any time.
- c) **Accelerating alcohol marketing:** the alcohol industry is aggressively promoting their products; Hidden and uncontrolled massive advertisements on media and other campaigns such environment e.g 'Taasa obutonde', University "smart drinking" campaign where huge numbers of young people are getting recruited to alcohol consumption.
- d) **Lack of resources and capacity:** Inadequate training of actors, Civil society in brief interventions and case management and referrals.
- e) Inadequate enforcement of traffic laws against alcohol.
- f) General public ignorance about alcohol policy issues.

### **3.0 What resources and technical assistance are required to scale up implementation and enforcement of priority alcohol interventions?**

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- a) Integrating alcohol prevention in the school curriculum and in the work of the Ministry of Education.
- b) Capacity building for advocacy and public relations work for alcohol prevention and control, including

- capacity building of opinion leaders in the media.
- c) Funds.
- d) Capacity building in the primary healthcare system to deliver screening and brief interventions and development of quality standards for prevention and involving young people.
- e) Establish standards for emerging treatment facilities.
- f) Training in data collection, monitoring and evaluation.

## **4.0 What are the roles of stakeholders in alcohol control and how can stakeholders collaborate successfully?**

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### **Roles of stakeholders**

- a. Raise additional funds to support SAFER activities.
- b. Dissemination of the Alcohol control Policy and SAFER to the citizenry
- c. Hold individual and joint advocacy for SAFER activities and engage government.
- d. Monitoring, documenting and exposing the unethical practices of the alcohol industry, revealing their hidden agenda and fundamental conflict of interest, the costs to society they cause, and share with key stakeholders.
- e. Increase awareness about the Alcohol Policy solutions, such as raising alcohol taxes, reducing alcohol outlet density, and banning alcohol advertising.
- f. Ensure accountability and commitment to full SAFER implementation at Ministry of Trade, Finance and Parliament (for friendly taxation regime) and making the case for the return on investment in alcohol policy and their positive economic contributions (productivity, economic growth).

## Collaborate effectively

- g. Have a regular forum and periodic meetings for reviews and drawing action plans.
- h. Lobby for public health-oriented, evidence-based alcohol taxation regime, including earmarking for health promotion investments to prevent and reduce alcohol harm.
- i. Undertake joint activities (data collection, training, issues of documents and briefs)

## Alcohol taxation in Uganda

### Vicious cycle of alcohol and poverty

Alcohol has various adverse effects on societies' and people's economic status while economic status in turn affects alcohol use in many ways.

Rising alcohol consumption in poorer societies or in lower-income segments of populations is an obstacle to achieving SDG 1. The resources spent on alcohol are diverted from more productive and sustainable uses and the harms from alcohol use often include impoverishment as well as ill-health [1].

Alcohol can push people into poverty and lock them, their families and entire communities there over generations. The direct costs of alcohol harm to the household are often considerable and frequently underestimated – and put a big burden on development.

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*"When the poor become a consumer market, purchasing commercial brands of alcohol takes a larger toll on personal and family income than it does in other social classes. The poor are also more vulnerable to the public disruption, violence and health-related harms that comes with increased alcohol consumption."*

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## South Africa

The health and social costs of alcohol are ca. US\$1.2 billion per year, which is double the amount the government receives in alcohol excise tax revenue

**In 2010, the World Health Report wrote:** The most effective ways to prevent second-hand effects and costs from alcohol are policies that reduce alcohol affordability and availability.

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“Raising taxes on alcohol to 40% of the retail price could have [a big] impact. Estimates for 12 low-income countries show that [alcohol] consumption levels would fall by more than 10%, while tax revenues would more than triple to a level amounting to 38% of total health spending in those countries. Even if only a portion of the proceeds were allocated to health, access to services would be greatly enhanced. ”

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## Alcohol taxation is a catalyst for equality

A disproportionate share of the health and economic costs of alcohol falls on poorer households. But they are more responsive to increased prices than the richer households. Therefore, alcohol taxes substantially benefit people with lower socioeconomic status through reducing alcohol use and related harm, such as having fewer sick days, living longer and more productive working lives, and spending less on health care.

Increased resources from alcohol taxes can be invested in programs that favour people with lower socioeconomic status, in this way further strengthening the benefits of alcohol taxation for equality.

- ◆ Increasing alcohol taxes will avert between 9 (20% increase) to 22 (50% increase) million premature deaths over a 50 year period, and
- ◆ Over 50 years, a tax that increases alcohol prices by 20%



over current levels could generate almost US\$9 trillion in additional; for a 50% increase, the gain could be almost US\$17 trillion in additional revenues.

## **Alcohol taxation is pro poor, pro social inclusion, pro equality**

### **Alcohol taxation is pro-poor because:-**

- ◆ low-income groups are more responsive to price change, and consumption falls proportionally more than in high-income groups,
- ◆ low-income groups actually pay less of the tax burden, and
- ◆ behaviour change resulting from alcohol tax helps avert healthcare expenditure which benefits low-income households more.

## **Alcohol taxation benefits for the most vulnerable, in different countries**

- ◆ In South Africa, total alcohol per capita consumption is rising to 12 liters of pure alcohol per capita in 2025. Without evidence-based action, alcohol harm will increase. Sociodemographic groups that have lower incomes and are more marginalized will be affected disproportionately. Alcohol taxation plays an important role in protecting overall society and vulnerable groups in particular.
- ◆ In 38 African countries, taxing harmful products, especially alcohol and tobacco, prevents pre-mature deaths and enhances population health both in the short- and long-term.

## **Alcohol harm and policy in Uganda – latest update**

Total alcohol per capita (15+) consumption, alcohol users only (in litres of pure alcohol), 2016

- ◆ Males: 32.7 litres
- ◆ Females: 12.5 litres
- ◆ Both sexes: 26.0 litres

### Alcohol per capita (15+) consumption (in litres of pure alcohol), as per WHO, 2016 data:

- ◆ 13.2 litres per capita in 2010
- ◆ 9.5 litres per capita in 2016

### Alcohol abstainers, 2016

- ◆ Lifetime abstainers (15+): 47.4%
- ◆ Former alcohol users: 16.3%
- ◆ Past-year, all abstainers, 2016: 63.7%

### Prevalence of alcohol use disorder

- ◆ 12.4% of males
- ◆ Country average, both sexes: 7.1%
- ◆ Regional average: 3.7%

### Deaths due to alcohol:

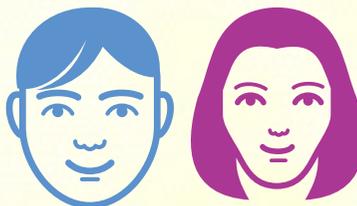
- ◆ 2,861 liver cirrhosis deaths caused by alcohol
- ◆ 3,900 road traffic deaths caused by alcohol
- ◆ 1,514 cancer deaths caused by alcohol



**32.7 litres**  
alcohol per capita.



**12.5 litres**  
alcohol per capita.



**26.0 litres** alcohol  
per capita.

### Uganda ranks among the top countries for years of life lost due to alcohol.

## SDG 5: Alcohol fuels gendered violence in public and private spheres

Alcohol fuels a significant proportion of cases of violence against intimate partners both in and outside the household.

- ◆ 65% of women experiencing intimate partner violence in India, Vietnam, Uganda, Zimbabwe, South Africa reported the perpetrator had used alcohol
- ◆ Focus groups in rural Rwanda show that women who are victims of domestic violence rank alcohol as number one factor, also in Uganda and Malawi did alcohol use by the perpetrator play a pivotal role in gendered domestic violence



## SDG 6: Alcohol production fuels water insecurity

When a territory withdraws 25% or more of its renewable freshwater resources it is said to be 'water-stressed'. Five out of 11 regions have water stress values above 25%, including two regions with high water stress and one with extreme water stress. [4] A third of the world's biggest groundwater systems are already in distress [13].

The effects of on poor communities are most severe. Scarce resources are drained for the production of alcohol instead of sustaining community life and development.



**Five out of 11** regions have water stress values above **25%**.



For instance, the alcohol industry is causing serious emissions of chemicals into waterways in its production, around the world and is fueling water insecurity through its water intense production.

- ◆ In Uganda, gin distilleries contaminate the Kiiha River, which provided many villages with drinking water, until it was discovered that the water was no longer drinkable, due to discharges from the 600 distilleries located along the river [14]

### Latest news from Uganda

- ◆ <https://movendi.ngo/news/2021/10/26/uganda-and-covid-19-beer-giant-defies-closure-of-bars/>
- ◆ <https://movendi.ngo/news/2021/10/26/uganda-and-covid-19-beer-giant-defies-closure-of-bars/>
- ◆ <https://movendi.ngo/science-digest/alcohol-use-gender-based-violence-and-hiv-among-disadvantaged-youth-in-kampala-uganda/>
- ◆ <https://movendi.ngo/news/2021/05/06/uganda-and-covid-19-parliament-calls-on-government-to-halt-beer-production-to-contain-coronavirus/>
- ◆ <https://movendi.ngo/news/2021/02/18/uganda-alcohol-policy-champion-is-planning-another-legislative-attempt-during-new-parliamentary-mandate/>
- ◆ <https://movendi.ngo/science-digest/child-maltreatment-alcohol-use-and-suicidal-ideation-among-youth-living-in-the-slums-of-kampala-uganda/>
- ◆ <https://movendi.ngo/news/2020/07/12/uganda-diageo-subsiary-fined-for-tax-scheme/>
- ◆ <https://movendi.ngo/science-digest/social-acceptance-of-alcohol-use-in-uganda/>
- ◆ <https://movendi.ngo/news/2019/09/21/uganda-61-started-alcohol-use-before-age-18/>

- ◆ <https://movendi.ngo/news/2019/05/14/uganda-11-companies-not-complying-with-sachet-alcohol-ban/>

### **Endorsed by:-**

1. Uganda Youth Development Link (UYDEL)
2. Uganda National Association of Community and Occupational Health-UNACOH
3. Uganda Mental Health Fellowship-Atanekontola
4. Uganda Health Communication Alliance
5. Uganda Girl Guide Association-UGGA
6. The Nissi Project Uganda
7. The Bahai Faith
8. Somero Uganda
9. Saf-Teso
10. Ring of Hope
11. Recovery Solutions
12. Recovery Ministries International
13. PACTA-GULU
14. Nnina Olugero Foundation
15. Kawempe Youth Development Association.
16. Kanyanya Pioneer HIV/AIDS and Drug Abuse Prev. Centre
17. International Aid Services-IAS
18. Hope and Beyond
19. Focus on Recovery-FORE
20. Fight Drug Abuse
21. East Africa Centre for Addiction Services
22. Eagles Youth Development initiatives-EYDI
23. Drugs Hapana
24. Children and Youth Empowerment Link
25. Blue Cross Uganda.



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