

Alcohol Policies for the 21st Century

A Best Practice Approach

**International Center for Alcohol Policies
February 2002**

Introduction

The goal of a comprehensive, effective and sustainable alcohol policy can only be achieved by ensuring the active and committed participation of all relevant stakeholders. This stakeholder involvement should be seen as an ongoing partnership that encompasses all aspects of the development, implementation and review process. Active commitment by partners is a critical component to achieving a successful outcome. Government, the beverage alcohol industry, scientists and health specialists all have a critical role to play in achieving the ultimate goal of alcohol policy in the public interest. This document describes a best practice approach to alcohol policy development that recognises the historical and evolving role of alcohol in the 21st Century.

The International Center for Alcohol Policies (ICAP) was established in 1995 with the goal of facilitating dialogue and cooperation between all parties with a role to play in the development of alcohol policies. Although ICAP is supported by leading drinks companies, it is not an advocacy body, nor does it represent the beverage alcohol industry or any other party involved in the process of policy formulation. ICAP serves as a conduit for identifying areas of common ground and for bringing together relevant and sometimes unlikely partners whose common goals are the reduction of alcohol abuse worldwide and the development of an understanding of the role of alcohol in society.

ICAP projects to date cover a wide and diverse spectrum of alcohol issues. They include reports, books and other publications, as well as conferences, consensus meetings and demonstration projects involving activities in or contributions from more than 30 countries. For a full review of ICAP's work, please refer to the web site www.icap.org which provides an overview of current and previous activities of the organization.

ICAP is in a position to assist local, national and international bodies in the development of a new generation of alcohol policies. These policies can address:

- a single issue of concern (such as drink-driving);
- a cluster of related issues (such as those involved in making recommendations for sensible drinking levels);
- the development of a comprehensive alcohol policy for a country or community.

ICAP is uniquely placed to bring together the expertise of scientists, scholars, government officials, public health specialists, and representatives of the beverage alcohol industry. We are prepared to advise on all stages of policy development from design through implementation to evaluation.

The new approach recommended here is based on our experience working with a wide range of partners in countries around the world. This document therefore includes direct quotes from a number of key ICAP texts, which have been developed in the course of this work.

What is the problem?

“The drinking of beverage alcohol is and has been a part of many cultures throughout the world; however, the ill effects of inappropriate alcohol consumption are widely recognized....All cultures and societies place restrictions on alcohol consumption, either by law or custom, varying from place to place.” (The Geneva Partnership on Alcohol: Towards a Global Charter)

All countries have alcohol policies that operate both at informal and formal levels. Even the formal policies may have quite different goals. The range of government departments with responsibilities relevant to alcohol policy is indicative of the many interests involved. Add to this the many informal controls that exist as a result of established tradition and custom, and it becomes clear that alcohol policy reflects a very wide range of societal values.

There is one main approach to alcohol policy which has tended to dominate debate on these issues over the past two or three decades. It is based on a paradigm which focuses mainly on reducing overall per-capita consumption of alcohol. The goal of the strategy is to reduce the numbers of individuals in a given society who are drinking at levels associated with harmful outcomes by influencing *all* drinkers to drink less, regardless of their current consumption level. Although some attention is paid to those at highest risk, the central tenet of this model is that “less is better”.

Policy measures stemming from this approach tend to focus on control of society’s mean consumption level by attempting to reduce *everyone’s* drinking. Strategies utilized include controls on: price; access and availability; legal purchase age; and advertising and promotion.

Such strategies have demonstrated varying degrees of success. Individually and collectively, however, they have failed to respond to the complexity of people’s drinking behavior and to distinguish adequately between those who always drink safely, those who generally do so but occasionally drink immoderately, and those who habitually drink to excess. As a result, this restrictive approach to alcohol policy is increasingly being recognised as insensitive to cultural differences and to the importance of individual choice.

Because the focus is on risk rather than responsibility, this paradigm inevitably emphasizes the problems associated with alcohol and has difficulty incorporating - or even acknowledging - any of the positive or pleasurable aspects of drinking. In this way too, the current paradigm is both limited and inflexible.

Of course, this approach has not been without its successes, but it has failed to deliver the sweeping improvements in public health that it had promised.

What is the solution?

ICAP believes that the time has come to move towards a comprehensive basis for alcohol policy development. There is now strong empirical evidence that it is more relevant to focus on drinking patterns than on level of per capita consumption. Such an approach is also more consistent with emerging evidence on the benefits of moderate consumption and is more in keeping with declining political support for rigid controls over the availability of alcohol in a world characterized by the disappearance of restrictive trade barriers.

Whilst acknowledging the relevance of drinking levels, the central focus of alcohol policy should be on influencing drinking patterns. Measures which promote responsible drinking and reduce hazardous drinking are more likely to be successful than those which seek to force everybody to drink less, regardless of their current consumption levels.

There is now substantial international agreement about the importance of drinking patterns as a prime determinant of both positive and negative drinking outcomes. This is true for individuals and for communities and is relevant to both developing and industrialized countries.

In other words, instead of corresponding to an artificial mathematical formula which can only be demonstrated in a hypothetical population, alcohol policy can correspond to the way in which most people actually live their lives. Instead of attempting to restrict the consumption of all drinkers regardless of their current level of consumption, the new approach is based upon the triple goal of **promoting responsibility** at the same time as **reducing risk** and **reducing harm**. Key elements include strategies such as: alcohol education; responsible hospitality programs; encouraging quality control of alcohol beverages; measures to ameliorate adverse consequences of intoxication; early identification and simple interventions; and controlled drinking.

The new approach does not ignore lessons learned in the past. Reasonable restrictions over access and availability of alcohol do, of course, have their place, especially to help protect more vulnerable sections of the population, such as young people. The issue is one of emphasis.

“The focus is on those measures that decrease the risk and severity of adverse consequences arising from alcohol consumption without necessarily decreasing the level of consumption. It is essentially a practical rather than an idealized approach: the standard of success is not some ideal drinking level or situation, but whether or not the chances of adverse consequences have been reduced by the introduction of the prevention measures.” (Drinking Patterns and Their Consequences)

The work of ICAP since 1995 has focussed on providing a sound basis for creating a new generation of alcohol policies. This has been accomplished in two ways – first, through hands-on demonstration projects in countries; and second, through the development of key alcohol policy texts.

Country Projects

ICAP demonstration projects in countries include the following:

- Working through the Global Road Safety Partnership to develop drink/drive components for road safety programs in developing countries.
- Facilitating the establishment of social aspects organizations (SAOs) in Central and Eastern Europe aimed at preventing alcohol abuse.
- Promoting a framework for responsibility to monitor alcohol industry social responsibility programs in emerging markets.
- Identifying the health consequences of the consumption of non-commercial alcohol in Brazil, Zambia, Zimbabwe, Tanzania, Mexico, India and Russia.
- Working with the Australian government on developing a new National Alcohol Strategy.
- Assisting the Scottish Executive with the formulation of a comprehensive alcohol strategy based on the drinking patterns approach.
- Adapting the *Geneva Partnership on Alcohol* to the needs of a particular culture in Kenya.
- Assisting the government of Mexico in the revision of its national plan against alcohol abuse and alcoholism.
- Reviewing national alcohol legislation and its enforcement in India and Malaysia.
- Reviewing the use of terminology in the debate on alcohol in collaboration with the government of the United States of America.
- Designing and implementing a life skills education program for primary school children in South Africa and Botswana.
- Early identification of problem drinkers through local pharmacies in Chile.

Key Texts

ICAP's series of key texts – five books and two consensus statements – represent the essential elements of effective alcohol policy for the 21st century. In addition, ICAP has produced a series of regular reports on specific issues and a number of occasional papers.

The five books are published by Taylor & Francis (and its subsidiary Brunner/Mazel) in the ICAP Series on Alcohol and Society. All five have been peer-reviewed, both at the request of ICAP and independently by the publisher. All are available from the publisher or through reputable academic booksellers. More detailed executive summaries of the books are also available from ICAP. Additional titles in this series are envisaged.

The books are: *Drinking Patterns and Their Consequences* (Grant and Litvak, 1997); *Alcohol and Emerging Markets: Patterns, Problems and Responses* (Grant, 1998); *Alcohol and Pleasure: a Health Perspective* (Peele and Grant, 1999); *Drinking Occasions: Comparative Perspectives on Alcohol and Culture* (Heath, 2000); and *Learning About Drinking* (Houghton and Roche, 2001).

The two consensus statements represent the result of lengthy processes of consultation, involving governments and inter-governmental organizations, international and national non-governmental organizations, scientists and scholars from a wide range of disciplines, public health experts and advocates, medical and other health and social workers, and representatives of the alcohol production and hospitality industries. Both are available from ICAP, either by post or from the web-site.

The consensus statements are: *The Dublin Principles of Cooperation Among the Beverage Alcohol Industry, Governments, Scientific researchers, and the Public health Community* (1997); and *The Geneva Partnership on Alcohol: Towards a Global Charter* (2000).

ICAP Reports are produced twice a year and address specific single issues relevant to alcohol policy.

In very brief summary form, the message of all these publications can be condensed as the following four **Ps**:

- that alcohol policies should be based upon a **patterns** approach;
- that they should acknowledge the **pleasure** that alcohol confers to the vast majority of drinkers;
- that they should be developed through **partnerships** involving a wide range of interested parties;
- and that these partnerships should be based on **principles** of transparency and mutual respect.

There follows a one-page description of the main messages of ICAP's publications and consensus statements, together with an annotated list of reports and some occasional papers.

Drinking Patterns and Their Consequences

For many years, alcohol policy in many countries has been dominated by the **control of consumption** theory, which assumes there is a direct and predictable relationship between average per capita consumption and the prevalence of alcohol problems.

According to this theory, the best way to prevent problems is to reduce the amount that **everybody** drinks, hence the adage “less is better”. This reduction in consumption is to be achieved through **restrictions**, mainly of price (by taxation), availability (by licensing and hours of sale), advertising and, ultimately, through prohibition.

In recent years, this theory has been challenged because of mounting **empirical evidence** both on the health benefits of moderate drinking and the ineffectiveness of restrictive controls.

A focus on **drinking patterns** provides a more effective predictor of both positive and negative drinking outcomes and is therefore a better basis for developing alcohol policies.

Expressed in **individual terms**, an otherwise healthy person who has two drinks a day is unlikely to experience harm and may well do him- or her-self some good, whereas somebody who saves all those drinks up and consumes them on one evening is running serious health risks. Both have the same level of consumption, but very different drinking patterns.

The **components of drinking patterns** include: personal characteristics of the drinker (age, sex, etc); number and nature of drinking occasions; times, places and drinking companions; and overall drinking culture.

The goal of an alcohol policy based on the drinking patterns approach is **to reduce harm** at both the individual and societal level, without unreasonably restricting opportunities for **individual choice**.

Specifically, alcohol policies based on this approach can **modify negative drinking patterns** by reducing heavy drinking occasions and reducing alcohol-related harm, and can **promote beneficial drinking patterns** by focusing on safer drinking guidelines and educating for responsible drinking.

This approach does not imply disapproval of drinking and allows policy to **maximize benefits**, both in health and social terms for the individual and fiscally for the government.

A drinking patterns approach allows targeted interventions. It is **more effective, more popular and more in keeping with principles of social equity**. It is increasingly the choice of forward-thinking countries and communities.

Bottom line: Drinking patterns are more important than level of alcohol consumption.

Publication details: Grant, M. and Litvak, J. (Eds.). *Drinking Patterns and Their Consequences*. Washington, D.C.: Taylor & Francis, 1998.
ISBN: 1-56032-718-9

Alcohol and Emerging Markets: Patterns, Problems and Responses

Three quarters of the world's population lives in countries where there is a lack of basic data, not just about alcohol consumption, but also in relation to demographics, mortality and many other forms of standard official information. There is an immediate and urgent need for **better methods of data collection**, supported by increased financial and technical resources.

Although the **scale and severity of alcohol problems** in these countries is not known precisely, they are sufficiently widespread to merit serious attention.

In general, many more **women** in developing countries are abstinent. A cause of great concern in many countries is rapidly increasing alcohol abuse by **young people**.

In many developing countries there are additional health risks from the consumption of **illicit or home-produced beverages**, which are not subject to quality control and can contain toxic ingredients.

Drinking patterns are undergoing significant transformation, with traditional and contemporary values sometimes coming into conflict. It is essential that alcohol policies should be **responsive to change**, rather than replicating mistakes of the past.

The development of **public/private partnerships** is especially relevant in developing countries, where government resources for health are likely to be very limited.

The beverage alcohol industry needs to demonstrate the same **high standards of corporate citizenship** in emerging as in mature markets. Effective self-regulation is essential, especially in relation to promotional and marketing practices.

The companies involved with ICAP have collectively agreed to a **Framework of Responsibility**, under which their activities in emerging markets will be open to international scrutiny.

Bottom line: Developing countries urgently require balanced alcohol policies based on partnerships between the public and private sectors.

Publication details: Grant, M. (Ed.). *Alcohol and Emerging Markets: Patterns, Problems and Responses*. Philadelphia, PA: Brunner/Mazel, 1998.
ISBN: 0-87630-978-3

Alcohol and Pleasure: a Health Perspective

Just as health is more than the absence of disease, so pleasure contributes to overall **quality of life** and enhances physical, psychological and emotional well-being.

Public health is increasingly focussed on questions of **lifestyle** because they have such an important impact upon health and longevity.

Responsible alcohol consumption has a legitimate place within a balanced lifestyle, although not everybody will choose to drink.

For those who do choose to drink, the vast majority will find that alcohol is a source of **personal satisfaction and pleasure**.

There is now an overwhelming body of scientific evidence on the **health benefits** of moderate alcohol consumption, particularly in relation to the prevention of coronary heart disease. There is emerging evidence on benefits to psychological health.

In the past, much alcohol policy has focussed on protecting populations from the **damage caused by alcohol abuse**, often by restricting the consumption of all drinkers, regardless of their consumption level.

Recognizing that, **for most people most of the time**, drinking is a non-problematic source of personal pleasure allows governments to consider a wider range of policy options.

The development of a **drinking culture** which is conducive to individual responsibility enables alcohol policy to promote moderation at the same time as condemning excess.

In this context, the **individual choice** whether or not to drink needs to be based on accurate and balanced information. Part of that information is that health, quality of life and responsible drinking can be inter-connected.

Re-introducing the concept of pleasure into alcohol policy development allows for the creation of a **new generation of alcohol policies**, which value education and information, which recognize the autonomy of individuals and communities, and which will make people's lives healthier and of higher quality.

Bottom line: For most people most of the time, alcohol confers considerable benefits and carries very few risks.

Publication details: Grant, M. and Peele, S. (Eds.). *Alcohol and Pleasure: A Health Perspective*. Philadelphia, PA: Brunner/Mazel, 1999.
ISBN: 1-58391-015-8

Drinking Occasions: Comparative Perspectives on Alcohol and Culture

The world is filled with a **rich variety of drinking behavior**, most of which can be characterized as beneficial drinking patterns.

In general, **normal drinking occasions** are well-integrated with other aspects of human life, regardless of the myriad different drinking styles which exist.

By contrast, the drinking occasions which are most likely to lead to problems are those which are **dislocated from other positive values** and in which drinking tends to become an end in itself.

Since many health and social risks are associated with the pace of drinking, it is important that terms such as **binge drinking** be used to describe inappropriately heavy drinking occasions, rather than imposing arbitrary limits on numbers of drinks, especially when these limits are frequently exceeded without consequent harm.

Where **drunkenness** is viewed as inappropriate, it tends to be avoided. Where it is deemed heroic, masculinist (“macho”) or desirable, it tends to be embraced.

Variation is essential to many aspects of human development, including drinking. Thus, alcohol policies need to be **sensitive to variation** and not seek to impose on everybody the rules that have been accepted by a few countries with similar practices.

Based on a broad view of alcohol and culture, it is possible to conclude that those who want nothing to do with alcohol should be free to leave it alone, **with no pressure to drink**.

But those who want to drink moderately should be confident that their behavior is consistent with much of human history and should not be **subject to unreasonable pressure or restrictions**. Most people expect drinking to be enjoyable, and usually they find it so. The task of alcohol policy is to reinforce that situation.

Bottom line: All around the world, most drinking occasions are simply normal parts of daily life and not associated with problems or excess.

Publication details: Heath, D. *Drinking Occasions: Comparative Perspectives on Alcohol and Culture*. Philadelphia, PA: Brunner/Mazel, 2000.

ISBN: 1-58391-047-6

Learning About Drinking

Like other social skills, drinking beverage alcohol is a relatively complex **learned behavior**, which takes different forms in different cultures.

The process of learning about drinking begins in **early childhood**, when even very young children are influenced by the attitudes and behavior of other family members, especially their parents.

As they grow through childhood into **adolescence**, young people are increasingly subject to the influence of their peers and other external models.

Most young people will **experiment** with drinking and an important task of education is to provide them with the skills to be able to make appropriate decisions, including whether and how to drink.

Regardless of the minimum legal age for buying or consuming alcohol, a significant proportion of young people in many countries will **begin drinking regularly** in their late teens.

Inexperienced drinkers are more likely to experience **accidents and injuries**, which are an important cause of morbidity and mortality in this age group. Special attention needs to be given to programs to **reduce irresponsible risk-taking**.

There are opportunities – in the home and in formal educational settings – to **teach appropriate drinking** behavior in ways which are legally and culturally acceptable.

Since the **media** and the **alcohol industry** both have the capacity to influence young people's decisions about drinking, they should be encouraged to become involved in programs of preventive education.

Bottom line: Since most young people are likely to experiment with alcohol, it is better that they should be taught about it safely than having to learn in riskier settings.

Publication details: Houghton, E. and Roche, A. (Eds.). *Learning about Drinking*. Philadelphia, PA: Brunner-Routledge, 2001.
ISBN: 1-58391-316-5

The Dublin Principles of Cooperation Among the Beverage Alcohol Industry, Governments, Scientific Researchers and the Public Health Community

The Dublin Principles were **adopted by consensus** on 28 May 1997 by a group of experts invited by ICAP and the National College of Ireland.

Alcohol policies should always be based upon the fullest possible understanding of **available scientific evidence**.

The academic and scientific communities should be **free to work together** with the beverage alcohol industry, governments and non-governmental organizations.

The industry, governments and non-governmental organizations should **support** independent scientific research.

All those concerned in a research undertaking, including funders, should avoid arrangements that might **compromise** intellectual integrity and freedom of enquiry.

Scientific researchers should **acknowledge** the source of funding of their research activities in any report of such research.

Researchers should be **free to disseminate** and publish the results of their work.

Bottom line: Relationships between researchers and their funders, including industry, should be characterized by openness and transparency.

The Geneva Partnership on Alcohol: Towards a Global Charter

Following four regional meetings held during 1999 in Chile, India, Zimbabwe and Italy, the text of this document was finalized at a **global meeting held in Geneva**, Switzerland on 10-12 May 2000.

The public health and scientific communities, the beverage alcohol industry, governments and the non-governmental sector all have **complementary interests** in alcohol policy.

Policies should be developed and implemented in **broad-based partnerships** among all relevant sectors.

Governments should **balance** the wish of consumers to purchase alcohol at reasonable cost with the need for tax revenue. Consumers should be able to obtain legally produced and marketed beverage alcohol.

Beverage alcohol industry members should promote only the **responsible consumption** of their products. The industry should adopt **self-regulatory standards**; when self-regulation is shown to be ineffective, governments should intervene.

All those who provide **information** on the characteristics and effects of alcohol should do so in a clear, accurate and balanced manner.

The health sector should provide **education** to the public about the harms associated with inappropriate alcohol consumption and should acknowledge the health benefits of moderate drinking patterns.

The document also contains recommendations regarding **responsible service, product quality and integrity and research**.

The document is intended to provide **an agenda for dialogue** among all those with interests in alcohol policy. It is a tool which can be used in the widest possible range of settings.

The work of the Partnership is intended to stimulate the development of a **Global Charter on Alcohol**, to which this document will be seen as an important contribution.

Bottom line: Alcohol policies are best developed and implemented through broad-based partnerships, involving all relevant sectors of society.

Examples of ICAP's International Partnerships

Global Compact

ICAP has accepted the invitation from the UN Secretary General to join a select group of civil society organizations to participate in the UN Global Compact. The Global Compact's nine principles are based on fundamental human, labor, and environmental rights, and are upheld and emphasized by corporate citizenship and social responsibility. Included among the Global Compact's principles are support and respect for the protection of international human rights within companies' spheres of influence; making sure that the corporations themselves are not complicit in human rights abuses; the freedom of association and the effective recognition of the right to collective bargaining; the elimination of all forms of forced and compulsory labour; the effective abolition of child labour; the elimination of discrimination in respect of employment and occupation; support for a precautionary approach to environmental challenges; the undertaking of initiatives to promote greater environmental responsibility; and the encouragement of the development and diffusion of environmentally friendly technologies. ICAP actively promotes several of these principles through its many worldwide activities.

Global Road Safety Partnership

The Global Road Safety Partnership (GRSP) was formed by The World Bank and the International Federation of Red Cross and Red Crescent Societies in order to bring together the private sector, non-governmental organizations, and governments, and identify ways in which they can work together to improve road safety globally. Participating companies and agencies include Daimler Chrysler, Volvo, Ford Motor Company, 3M, Shell Oil, Department for International Development (UK), Asian Development Bank, Alliance Commission, Danish Government, Swedish Government, National Highway Traffic Safety Administration (USA), International Association of Traffic and Safety Sciences (Japan), UN Economic Commission for Africa, UN Economic Commission for Europe, and World Health Organization. GRSP's focus is on reducing road traffic accidents and related fatalities in selected developing and transition countries. ICAP is represented on the Executive and Steering Committees of GRSP. Through ICAP membership, drinks industry participation is promoted in country-level activities.

Violence

The relationship between alcohol and violence is complex. ICAP is working with a variety of partners, including UNDP/UNIFEM, to better understand this relationship and to find preventive strategies to reduce the occurrence of violence, especially where alcohol is present. ICAP has produced a brief review of the literature. With this review is a Statement on Violence by ICAP sponsoring companies accompanied by examples of their partnerships on this issue. ICAP has also responded to a call for input by the UN Special Rapporteur on Violence against Women on cultural practices that result in violence against women in the family. This letter and the other documents described can be found on ICAP's website.

ICAP Reports and Occasional Papers

ICAP Reports 1

Safe Alcohol Consumption: A Comparison of Nutrition and Your Health: Dietary Guidelines for Americans and Sensible Drinking (May 1996)

Highlights and discusses differences in the advice given by the governments of the United States and United Kingdom regarding alcohol consumption through official guidelines published in 1996. This report was supplemented in 1998 with an international survey of guidelines.

ICAP Reports 2

The Limits of Binge Drinking (April 1997)

Discusses the use of the term “binge,” as well as the behavior to which that term has been applied, among various population groups in cultures worldwide.

ICAP Reports 3

Health Warning Labels (September 1997)

Examines which countries mandate the application of warning labels to containers of beverage alcohol, what the labels must say, the reason for their application, and the literature regarding their efficacy.

ICAP Reports 4

Drinking Age Limits (March 1998)

A survey of the minimum legal purchase and consumption ages in more than 50 countries worldwide, this report also provides a selection of case studies examining more closely the approaches of certain governments to the issue.

ICAP Reports 5

What is a “Standard Drink”? (September 1998)

Describes the usage and usefulness of the concept of a “standard drink” for commercial sales, government advice, scientific research, and individual drinking patterns.

ICAP Reports 6

Government Policies on Alcohol and Pregnancy (January 1999)

Examines the official governmental policies of more than a dozen countries regarding alcohol consumption by pregnant women, focusing on three areas: Occasional Drinking Policies, Abstinence Policies, and No Official Policies.

ICAP Reports 7

Estimating Costs Associated With Alcohol Abuse: Towards A Patterns Approach (August 1999)

Reviews currently used methods for calculating the cost to society of alcohol abuse and notes policy implications for the use of various methods.

ICAP Reports 8

Who are the Abstainers? (June 2000)

Explores the concept and definition of abstinence, including the parameters by which it is measured, the reasons for choosing to abstain, and a sampling of abstinence rates in selected countries.

ICAP Reports 9

Self-Regulation of Beverage Alcohol Advertising (January 2001)

Surveys the systems of advertising regulation in countries worldwide, with a focus on the workings of self-regulatory mechanisms where these are employed. Includes case studies of several countries.

ICAP Reports 10

Alcohol and “Special Populations”: Biological Vulnerability (November 2001)

Describes the biological factors underlying the vulnerability of certain populations to alcohol. Included are genetic predisposition, certain illnesses, gender and age, as well as a section outlining policy considerations based on these groups.

A New Force for Health (February 2000)

In its first 5 years, ICAP undertook two dozen projects, each involving scientists, government officials, public health experts, and representatives of the beverage alcohol industry from more than 50 countries. This document describes the outcomes of ICAP’s work up to that point, and offers propositions around which it will shape future activities.

ICAP/CSAP Working Papers and Appendix (May 1998)

A major obstacle to dialogue in alcohol policy is the use of emotionally charged and polarized language. In an effort to bridge this gap, the Center for Substance Abuse Prevention (CSAP) and ICAP brought together a joint working group to review terminology currently in use and to attempt to bring about greater consensus. The Working Papers and Appendix are the result of a process of consensus building in which all parties participated as equals.

What can ICAP do to help?

ICAP has a small, full-time professional staff, under the leadership of Marcus Grant, who was for ten years responsible for WHO's global activities on the prevention of substance abuse. In addition, ICAP has an extensive network of consultants with wide experience in alcohol policy issues in all regions of the world.

In making itself available to assist in implementing a new approach to alcohol policy at local and country level, ICAP will draw upon the resources of both its professional staff and its roster of consultants. The choice of consultant for a particular setting will be agreed in advance with competent authorities before any program of action is initiated.

ICAP will also make available technical resources to assist in all phases of work, including, but not limited to, the books and consensus documents referred to above.

Contact with ICAP can be made by governments, non-governmental organizations, public health advocates, professional associations, health or education bodies, universities, consumer groups, beverage alcohol or other industry groups, or interested individuals. The decision whether or not to pursue collaboration will rest with ICAP and will relate, at least in part, to the probability of being able to establish a working public/private partnership which could ultimately be responsible for ensuring the continuity of a balanced approach to alcohol policy.

ICAP remains committed to providing a wide range of technical advice, from simple requests for comments on existing proposals through to the provision of full consultant teams for extended periods. Between these two extremes, there are many different levels of technical assistance, which can be tailored to the particular needs of those requesting assistance.

ICAP has established a reputation for objectivity and transparency. At whatever level technical assistance is being provided, ICAP will expect to maintain those high standards and to abide by the relevant provisions of the Dublin Principles and the Geneva Partnership on Alcohol. ICAP will also expect its local or national counterparts to do the same.

In parallel with the current document, ICAP has produced a set of systematic guidelines on *how to* initiate, develop and evaluate more effective policies on alcohol issues. Entitled *A Building Blocks Action Checklist*, these guidelines emphasize the importance of: Partnerships; Mediation and Negotiation; and a Logical Sequence of Steps. Each of these is discussed briefly below.

Partnerships

A fundamental principle underlying any effective and sustainable policy is partnership involving all relevant sectors of society, including governments, non-governmental organizations, the scientific and public health communities and the beverage alcohol industry.

The Secretary-General of the United Nations has called for stronger dialogue and collaboration between the business sector and the Agencies of the UN System. His vision is of partnership as a relationship built on mutuality of effort and shared contributions, in cash and in kind. It presupposes that those involved in the partnership have the right to be fully engaged in all aspects of the design, implementation and evaluation of an activity. The key principles which should underlie partnership agreements, whether formal or informal, at local and national level, are: transparency; mutual trust and respect; clarity in definition of responsibilities; and shared accountability.

Facilitation and Negotiation

The first stage in developing effective partnerships is making the connections between all those who should be sitting together at the table. ICAP now has considerable experience in initiating projects at country level which bring together partners with no previous experience of working together. ICAP is therefore in a position to begin discussions separately with all relevant bodies, seeking to elucidate their particular concerns and to identify the particular expertise which they will be able to bring to the process of policy development.

“Many people have an interest in seeing alcohol policies that actually work: politicians and civil servants in the health, social affairs, trade, agriculture and finance sectors; medical and other health practitioners and social workers; public health officials and advocates; scientists and scholars from a wide range of disciplines; those working in the production and distribution of beverage alcohol; those in the hospitality industry; and concerned individuals around the world who devote their time and energies to promoting responsible use of alcohol, fighting alcohol misuse, and seeking to improve the quality of life for all.” (Drinking Patterns and Their Consequences).

“Experience shows that with good will and effort, it is possible for key stakeholders to work together to prevent and reduce alcohol-related harm, while achieving individual objectives.” (The Geneva Partnership on Alcohol: Towards a Global Charter)

The next stage generally requires a series of negotiations in which the different partners learn to understand and respect each other’s points of view. ICAP can assist through its wealth of experience of the operation of many different partnership models in other settings. The process of reaching consensus requires all parties to be willing to relinquish some part of their particular perspective in order to achieve a greater goal. With the best will in the world, that is not always a straightforward process and the availability of an impartial agent is the best guarantee that the results of the discussion will reflect all points of view. A negotiated solution is better than one imposed by the loudest talker.

International Center for Alcohol Policies - Best Practice Approach to Alcohol Policies

Contact Details

If you are interested in exploring whether ICAP can assist in alcohol policy development in your community or country, you can make contact by letter, phone, fax or e-mail. All inquiries will be treated in confidence and all will receive priority attention.

International Center for Alcohol Policies
1519 New Hampshire Avenue, NW
Washington, DC 22036
Tel: +1 202 986 1159
Fax: +1 202 986 2080
<http://www.icap.org>