



Dr Tedros Adhanom Ghebreyesus,
Director-General,
World Health Organization
20 Avenue Appia
1211 Geneva
Switzerland

Auckland, 5 April 2023

**Concerns regarding WHO interaction with the alcohol industry
From the Global Alcohol Policy Alliance and Regional Alliances**

Dear Dr Tedros,

The recent meeting held by WHO with the alcohol industry leads us to again raise our concerns on this topic. We have also read with great interest your comment, "Achieving health for all requires action on the economic and commercial determinants of health", in the Lancet series on Commercial Determinants of Health. We welcome that you expressed concern over the activities of the alcohol industry, among others, aiming to prevent the uptake of effective policies. As part of civil society, we have been aware of and monitoring the alcohol industry's tactics.

As you will know, this industry sector is expanding in Low- and Middle-Income Countries through heavy marketing and policy interference. Their expansion is now well-documented in peer-reviewed research. To take just one example, the policy process in Vietnam, a country which experienced a 90% increase in per capita alcohol consumption between 2010 and 2017, was deeply penetrated by global alcohol producers and other vested organisations and the legislation proposed by the health sector was considerably weakened (https://www.ijhpm.com/article_4276.html).

Given the industry's reliance on heavier drinking occasions for sales of alcohol products (around 70% of sales in LMICs, <https://onlinelibrary.wiley.com/doi/full/10.1111/dar.12460>), it is to be expected that the alcohol industry will work to undermine effective alcohol policy. This is the same imperative as the tobacco industry meaning a similar policy of non-engagement with the alcohol industry should be in place. We believe that a failure to deal with alcohol industry interference will contribute to continuing inequity as LMICs and more disadvantaged people experience more harm from alcohol products. Such inequities will prevent achievement of your vision of a world in which everyone can live healthy, productive lives, regardless of who they are or where they live.

We observe that many Member States have raised concern over many years about the alcohol industry interference in policy development. For example, recently during the WHA debate about the Action Plan, several Member States requested WHO support for Member States to manage interference in policymaking by the alcohol industry and to protect the Best Buy alcohol policies and the WHO SAFER measures. In their interventions, the EU, the Republic of North Macedonia, Montenegro, Ukraine, the Republic of Moldova and Georgia, the Philippines, Belgium, Estonia and Ecuador requested WHO to develop stand-alone guidance for member states on how to handle the conflict of interest of the alcohol industry in policy making.



GAPA will continue to advocate with Member States to rescind the recommendation in the Global alcohol action plan to have a dialogue with the alcohol industry. In the meantime we request the WHO Secretariat to limit its interaction with the alcohol industry to every two years (at the maximum) as mandated in the Action Plan. Furthermore, we request the WHO Secretariat to increase the transparency on these interactions. Increasing transparency should include (but not be limited to):

- Publishing information in due time about planned meetings
- Inviting Member States and Civil Society observers to the meetings
- Publishing the agenda of the meeting
- Publishing the list of attendees at the meetings
- Publishing a summary of the deliberation of the meetings

We send this letter on behalf of the Global Alcohol Policy Alliance (GAPA), a network of non-governmental organisations and people in public health agencies who advocate evidence-based alcohol policies free from commercial interests. We have an active network of regional and national alliances, advocates and academics affiliated with GAPA operating in Southern, East and West Africa, the European Union, the USA, South America, the Caribbean, and the South-East Asian and Western Pacific regions.

GAPA has been actively engaged in the alcohol policy space with WHO since 2005, when the World Health Assembly passed the first alcohol resolution (WHA58.26) after an absence from the agenda of the WHO governing bodies for more than 20 years. Since then, we have engaged in the development of the WHO Global strategy to reduce the harmful use of alcohol (2010) and the ensuing Global Alcohol Action Plan (2022), as well as related issues such as the NCD agenda, the Framework for Engagement with Non-State Actors (FENSA), the General Program of Work (GPW), commercial determinants of health and many others. GAPA is a civil society partner in the SAFER alcohol policy initiative.

During the consultations and development of the Framework for Engagement with Non-State Actors (FENSA), some Member States wanted to exclude alcohol and other health-harming industries in addition to the tobacco and arms industry. This call did not draw sufficient support. However, the resulting paragraph 45 of FENSA (WHA69.10, 2016) stipulates that:

45. WHO will exercise particular caution, especially while conducting due diligence, risk assessment and risk management, when engaging with private sector entities and other non-State actors whose policies or activities are negatively affecting human health and are not in line with WHO's policies, norms and standards, in particular those related to non-communicable diseases and their determinants.

We believe the documented activities of the alcohol industry are clearly 'negatively affecting human health and are not in line with WHO's policies, norms and standards, in particular those related to non-communicable diseases and their determinants'.

When the WHO initiated the process to develop the Global Alcohol Action Plan in 2019, the Member States, in another agenda item, reduced the number of consultations with the alcohol industry from the proposed "every six months" (EB144/20) to one consultation a year (A72/19). Many Member



States and civil society were concerned by the proposed increase in the frequency of alcohol industry meetings and intervened to reduce the number.

On the basis of the level of industry interference and concern from many Member States and throughout Civil Society we will continue to work towards the rescinding of the regular dialogue meetings which form part of the Global Alcohol Action Plan.

We hope for your reply to this letter and will be happy to elaborate on our position and further explore how GAPA can work with WHO in addressing the harmful use of alcohol. We would appreciate the opportunity to meet with you to discuss civil society's concerns further.

Yours sincerely,

A handwritten signature in black ink, consisting of a large, stylized initial 'S' followed by a series of loops and a final dot.

Sally Casswell,
GAPA Chair
on behalf of GAPA and our affiliated Regional Alcohol Policy Alliances,

Southern African Alcohol Policy Alliance
West African Alcohol Policy Alliance
East Africa Alcohol Policy Alliance
U.S. Alcohol Policy Alliance
Coalition for Latin America's Health (CLAS) – Regional Alliance for Latin America
Asia Pacific Alcohol Policy Alliance
European Alcohol Policy Alliance (Eurocare)
Healthy Caribbean Coalition