World Health Organization

Addressing and managing conflicts of interest in alcohol control policies

Snapshot series on alcohol control policies and practice

Brief 3, 3 September 2021

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Brief at-a-glance

The problem

Overwhelming evidence indicates that companies producing and selling unhealthy commodities have defeated, delayed or weakened the design, implementation and evaluation of public policies worldwide. Strategies used include interference in policy development, litigation, coalition-building through front groups and misusing knowledge or propagating misinformation. The alcohol industry has also used these practices to legitimise its participation in the public health agenda strengthening the narrative that policies and regulations work only if economic operators sit at the table. Experiences of other unhealthy commodities showed that protecting policy development from conflicts of interest is essential to reduce the burden of disease.

The evidence

There are irreconcilable differences between the goals of governments, which include to protect and promote people's health and well-being and the goals of economic operators, which are to pursue private profit maximisation through increased alcohol consumption. Corporate social responsibility initiatives, narratives related to individual choices, *moderate* and *responsible* drinking and the co-option of public health researchers and universities to collaborate with alcohol industry-funded organizations may undermine the effectiveness of alcohol control policies. Evidence points to opportunities to reduce conflicts of interest including using evidence to inform the development of alcohol control policies, disclosure of research funding and implementing national and regional policies that capitalize on opportunities such as those presented through trade law and negotiations.

The know-how

Previous experience in managing conflicts of interest for tobacco and other unhealthy commodities can help to inform future approaches to apply to alcohol. Examples are provided on country and regional governance mechanisms that can be used to reduce the conflict of interest between industry and policy development. These examples include The Framework Convention on Tobacco Control, the use of trade agreements to maintain regulatory control, and the removal of industry as a partner in alcohol control policy development.

The next steps

Coalitions of partners can help in managing conflicts of interest across multiple levels of governance. Other steps include developing guidance for addressing conflicts of interest on trade and customs agreements; providing tools to support in-country efforts to reduce industry interference; documenting and exposing industry behaviour; supporting the development of contextualised strategies and conducting implementation-focused research to help determine what works and in what setting; promoting the improvement of the disclosure of conflicts of interest in peer-reviewed journals and of academics acting in expert advisory roles.
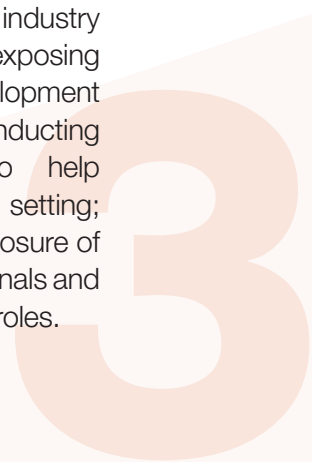
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Related resources

Webinar recording | Event description | Programme

About the series

This Snapshot is part of a series of briefs tackling critical issues related to the determinants driving the acceptability, availability and affordability of alcohol consumption and how it affects people and their communities. The series aims to facilitate evidence and experience-informed conversations on key topics relevant to achieving the Sustainable Development Goals and the noncommunicable diseases targets in the context of the WHO Global Strategy for reducing the harmful use of alcohol and its global action plan. Each brief is the result of a global, multistakeholder conversation convened by the Less Alcohol Unit, part of the WHO Department of Health Promotion. The topics of the series emerged in response to blind spots in the current policy conversations. The approach and length of the Snapshots do not fully describe the complexities of each topic nor do the illustrative country experiences. The series is a conversation-starter rather than normative guidance. Relevant WHO resources are provided to explore the subject in more depth.

The series is intended for a wide audience, including professionals working in public health and local and national alcohol policy focal points, policy-makers, government officials, researchers, civil society groups, consumer associations, the mass media and people new to alcohol research or practice.

What is a health promotion approach to reducing alcohol consumption?

Drinking has multidimensional connotations. Robust and growing evidence demonstrates that cultural, social and religious norms influence alcohol consumption – acceptability, ease of purchase (availability) and price (affordability). Addressing this multidimensional causality chain requires a portfolio of health promotion interventions to moderate the determinants driving alcohol consumption and, in turn, enable populations to increase control over and improve their health to realise their full potential.

Determinants driving the consumption of alcohol

	Acceptability ▼ Protect consumers	Availability ▼ Promote healthier settings	Affordability ▼ Build resilient societies
Public health objectives	Protect consumers	Promote healthier settings	Build resilient societies
Health promotion interventions	Raising awareness, e.g. labelling	Mediating licensing, e.g. outlet density and location, online sales	Increasing prices, excise taxes and moderating other fiscal measures, reducing and ending financial incentives and subsidies
	Banning or comprehensively restricting alcohol marketing, advertising, sponsorships and promotion	Promoting healthy settings and pro-health environment, e.g. schools, stadiums	Tackling unrecorded alcohol
	Adressing commercial determinants and conflict of interests		

How are the briefs developed?

The briefs result from a quick scanning of the recent evidence on the topic, insights from leading experts, consultation with selected countries and discussions that took place during webinars convened to create a platform to match evidence, practice and policies. Each webinar, attended by more than 100 participants, took place over 1.5 hours in English, Russian and Spanish. Between 8 and 10 speakers were invited to participate in each webinar, engaging global experts, officials from governments, academia, civil society and other United Nations agencies. Participants also engaged in the webinar by posting questions, sharing experiences and resources. The snapshot has been reviewed by the respective speakers – the contributors to each brief – to confirm the completeness and accuracy of the synthesis prepared.

Interested in other topics?

Visit the *Less Alcohol webpage* for other briefs in this series and forthcoming webinars. During 2021, topics including alcohol consumption and socioeconomic inequalities, unrecorded alcohol, conflicts of interest, labelling, digital marketing and per capita alcohol consumption have been explored. If you have a suggestion for a topic that has yet to be explored, contact our team at *lessalcohol@who.int.*

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The problem

This section provides a brief overview of why this issue matters to the health of populations and why it is worth further examining within global alcohol policy

Overwhelming evidence indicates that companies producing and selling unhealthy commodities, such as alcohol have defeated, delayed or weakened the design, implementation and evaluation of public policies worldwide (1-3). Most of these strategies and tactics are well known. They include political interference, such as drafting national alcohol policies or delaying their adoption in countries of Africa; pressure to change Brazil's national law forbidding alcohol consumption in sports stadiums (4); litigation, such as the alcohol industry's use of legal action to oppose minimum alcohol pricing in Scotland (5); coalition-building through front groups, such as alliances formed with interest groups in Finland to influence the reform of the alcohol law, and the formation of front groups, such

as the International Alliance for Responsible Drinking (6, 7); misuse of knowledge, such as co-opting public health researchers and universities to collaborate with alcohol industry–funded organisations and moderate drinking research projects supported by the alcohol industry in cooperation with the United States National Institutes of Health (8-12).

In addition, the alcohol industry has used corporate social responsibility practices as a strategy to legitimise its participation in the public health agenda. During the COVID-19 pandemic, for example, it financed the International Federation of the Red Cross and donated hand sanitisers while running pandemic-tailored marketing campaigns to increase the sales of its products (13). Other examples of vested interests include the alcohol industry participating in developing the Brussels Declaration on the Ethics and Principles for Science and Society Policy-making (14); an important corporate partnership with the United Nations Institute for Training and Research to develop a global coalition regarding road safety (15); and the alcohol industry submissions to the consultation related to Australia's free-trade agreements (16).

The underpinning narrative consists of presenting the industry as a reliable and necessary public health actor, implying that the consumption of alcohol and its related

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harm result solely from an individual choice instead of the product of contextual conditions such as investment and marketing, as well. Consequently, the distinction of roles and responsibilities in the policy sphere has blurred, creating the belief that alcohol economic operators are legitimate stakeholders in public policy development. This narrative disguises the fundamental conflict of interest between economic actors seeking to increase profit and governments pursuing societal well-being and sustainable development. There are irreconcilable differences between public health and economic interests. Evidence from other unhealthy commodities shows that protecting policy development from conflicts of interest is essential to decrease the burden of disease *(5, 17)*.

What does this snapshot aim to achieve?

This snapshot aims to describe the conflicts of interest that exists between government and industry in developing public health policies, showcase examples of governance arrangements and tools for managing conflicts of interest that countries and sectors have used to protect the health and well-being goals from vested interests; and reflect on possible ways to strengthen global governance for alcohol control policies.

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The evidence

This section provides a summary of what is known about the issue, implementation considerations for different settings and gaps in the existing knowledge base

There is no robust evidence that corporate social responsibility reduces alcohol consumption
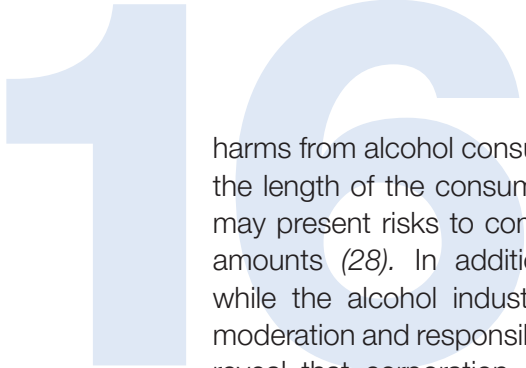
Most large companies in the alcohol industry, like many corporations in other fields, engage in corporate social responsibility initiatives. Corporate social responsibility initiatives can include a range of programmes and activities devoted to meeting a particular aim related to social responsibility (18), often lacking scientific support to control alcohol use and its related harms (19). For example, activities aiming to mitigate the harm caused by alcohol consumption, providing alcohol information and education related to messages about moderation, harms of under-age drinking and personal responsibility; interventions focused on reducing drink driving such as through mass media campaigns; development and funding of social organizations (20). However, there is strong evidence that these initiatives are done largely to serve broader public relations and marketing goals (19, 21-25). Further, findings indicate that the use of these initiatives in obtaining access to the policy-making process creates the potential for an increase in indirect harm through the framing of alcohol-related issues and the promotion of responsible levels of alcohol consumption (20).

Alcohol consumption presents risks to consumers even in small amounts

Another approach used by the alcohol industry is to perpetuate narratives that *responsible* drinking or drinking in moderation is harmless and that alcohol consumption results solely from an individual choice. The *responsible* or *moderate* drinking narratives shifts the blame from the economic operators to individuals (26, 27). However, it is well documented that
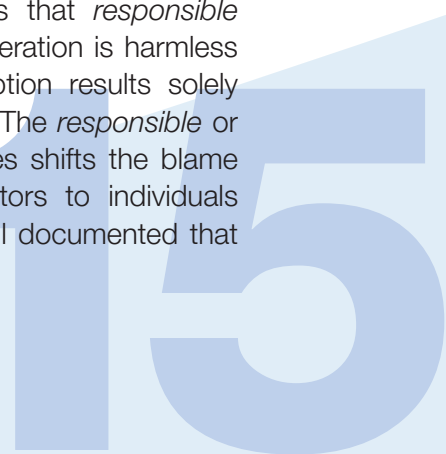
harms from alcohol consumption exist all along the length of the consumption continuum and may present risks to consumers even in small amounts *(28).* In addition, it is known that while the alcohol industry claims to support moderation and responsibility, market practices reveal that corporation are highly dependent on heavy-episodic users and target them in advertising *(29, 30)*. For example, one case study on Famous Grouse Whiskey included a quotation from industry representatives stating, "Whiskey brands are very reliant on a small number of heavy and increasingly ageing consumers to provide the majority of the volume, so our advertising task was to protect and build this core drinking base by convincing existing drinkers of competitive brands to choose Famous Grouse more often *(31)*".

Current research practices to disclose conflicts of interest are insufficient to ensure transparency in science

A tactic used to profile the alcohol industry as a credible partner is the funding and commissioning of research projects in efforts to produce, publish and disseminate information that benefits their cause *(32)*. It is done in different ways. The first is framing the question for study, which enables the purposeful selection of questions to be researched in ways that benefits the industry *(12)*. The second is by controlling the funding directly, by funding

select research projects and indirectly, by influencing the priorities of other funders. The third is by choosing research methods that predetermine the findings of a study. The lack of transparency about the allocation of funds for research is paired with inconsistent disclosure practices. In some cases, researchers have failed to clearly disclose links to the industry and alcohol industry funding when publishing in peer-reviewed journals or when speaking or acting in an expert advisory role. Finally, the dissemination of these findings is often amplified by the alcohol industry in efforts to reinforce the messages emerging from the studies.

International organisations are critical to advance alcohol control policies worldwide

In an increasingly global economy, alcohol control policies are an international issue. The proliferation of online and cross-border shopping is conditioning the effectiveness of national control measures. Further, the resources available to industry to push back on the implementation of alcohol control policies far outweigh those available to some countries. It is known from experience that relying on evidence-informed policies to prevail over economic interests is insufficient to overcome this fundamental conflict of interest given that capacity and resources are not always available to back these policies up. Given the

relationships between governments and the alcohol industry, political will is an essential requirement for this succeed. However, some governments or government officials may be part owners or shareholders of alcohol-industries creating challenges to properly manage the conflicts of interest. Therefore, global and regional agreements can go a long way towards advancing the effectiveness of these approaches. Alcohol industry uses new arenas to prevent the implementation of alcohol controls measures. These primarily include avenues such as trade law and trade disputes, at the regional and global levels. For example, excluding alcohol from trade agreements, upholding advertising restrictions, promoting country exemptions. As a result, international bodies such as the World Trade Organization have become central to shape the norms and standards *(33).*

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The know-how

This section provides examples of country experiences that can be used as evidence and inspiration as to what policy approaches may be possible in different settings

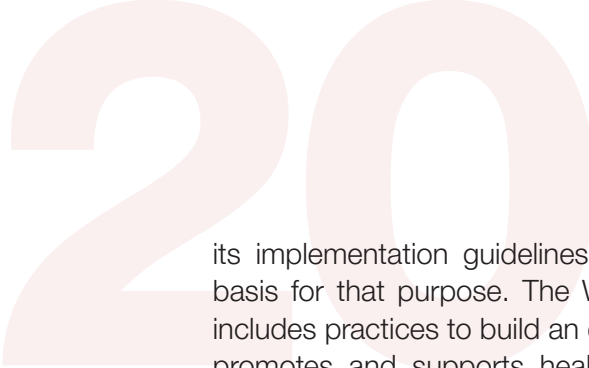## Learning from the experience of the WHO Framework Convention on Tobacco Control

The development of tobacco control policies has a long history of deception and misinformation. By the end of the 1990's, the industry funded and prepared numerous reports to guide their decisions on how to best advance their own goals in this process and avoid the eventuality of a convention on tobacco control. By 2001, a World Health Assembly resolution requested member states to be alert to any efforts by the tobacco industry to continue its subversive practice and to assure the integrity of health policy development in any WHO meeting and in national governments *(34)*.

Initially, the industry had a strong history of winning legal battles. However, when the relationship between addiction and tobacco was made clear, their legal challenges against country legislation and public policies began to fail. Between 1997 and 2003, the industry lost most legal challenges brought against smoke-free laws. This took place at a time when the tobacco industry was also going through numerous court cases in the United States of America that represented some of their first major losses.

As countries began to grow more and more concerned about the global nature of the tobacco epidemic, another fact was recognised: voluntary agreements by the tobacco industry never worked *(35, 36)*.

Those concepts where in the basis of the development of the WHO Framework Convention on Tobacco Control (WHO FCTC), an evidence-based, legally binding multilateral treaty. The WHO FCTC is a critical normative instrument and among other measures provides key mandates to prevent the interference of the tobacco industry in public health policy development. Article 5.3 and

its implementation guidelines provide a solid basis for that purpose. The WHO FCTC also includes practices to build an environment that promotes and supports healthier behaviours such as through smoke-free environments, health warnings on packages and ban on advertisement, promotion and sponsorship.

In addition, the FCTC provides legal arguments when a country is implementing tobacco control measures meant to protect public health. This was demonstrated in the arbitration of Philip Morris International vs Uruguay, where the implementation of graphic health warnings was successfully defended as an internationally accepted principle because it was included in the WHO Framework Convention article 13 and its guidelines.

Using trade agreements to protect tobacco regulations in Australia

The Trans-Pacific Partnership Agreement was a major regional trade agreement negotiated between 2008 and 2015. Australia joined negotiations in 2009 and signed the agreement in 2015. The topics included in the negotiation spanned across many areas, including liberalising the trade of unhealthy and harmful products. While the agreement was negotiated behind closed doors, public health experts expressed concerns over what they thought were probable negotiating issues. These experts identified access to medicines and further liberalisation of unhealthy and harmful products including alcohol, tobacco, and select foods as being part of Australia's negotiations. Based on these concerns and with the help of a leaked draft agreement, a group of academics and public health associations in Australia released a health impact assessment that laid out the consequences of the proposed trade agreement and its effect on tobacco, alcohol control and food and nutrition policies. Once released public health concerns garnered significant public attention and the government reviewed the provisions included in the agreement that related to tobacco. In particular, where the draft agreement was going to further open the market for tobacco products within Australia, the final agreement included provisions that would protect the government's regulatory space for tobacco control.
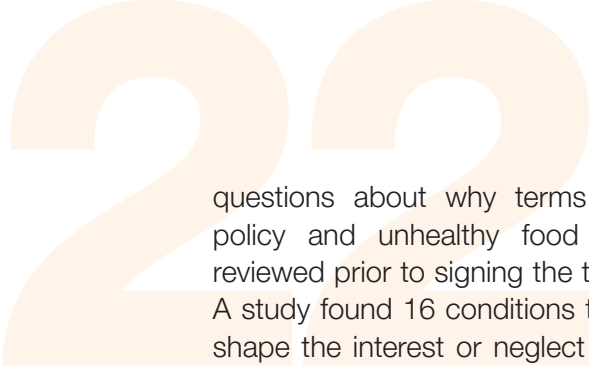
The success of the framing around tobacco at garnering government attention led to

"The rule making process needs to be built incrementally on increasing amounts of evidence. […] The WHO FCTC did not begin with a clear and unambiguous commitment to a framework convention but rather a tentative decision to look into developing an international instrument."

Jeff Collin, Global Health Policy Unit, University of Edinburgh at the webinar Addressing and managing conflicts of interest in alcohol control policies

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questions about why terms related alcohol policy and unhealthy food were not also reviewed prior to signing the trade agreement. A study found 16 conditions that appeared to shape the interest or neglect of health issues during the negotiations (37). These include, among others, the use of strategic framing and counter-framing of industry narratives, using active health advocacy networks, finding unusual fellows among other non-health actors that had the same aims and the presence of existing domestic legislation and international treaties such as the WHO FCTC, which set a normative base for trade negotiations. These lessons can be used to set a strong base for future trade agreements that relate to alcohol.

Tackling industry participation in passing alcohol control policies in Ireland

Ireland recently passed the Public Health Alcohol Act in 2018, which sought for the first time to introduce control policies, including minimum unit pricing, health information labelling on alcohol products, prohibition on advertising in certain places and events, statutory restrictions on the content of advertisements and separation of alcohol products in mixed retail shops.

Efforts to address Ireland's problems around alcohol consumption had been in train for two decades. However, in each previous attempt, the alcohol industry was included as a partner in developing legislation and undermined the legislative attempts. In 2012, with both the European Union and WHO turning their focus to alcohol, a steering group was set up in Ireland that produced the National Substance Misuse Strategy. This strategy garnered attention for the issue and united public health advocates as the Alcohol Health Alliance in 2015. These two developments were key to starting change towards eventually passing legislation in 2018.

Critical aspects of ultimately getting the legislation passed included strong leadership, partnership of public health advocates which supported a pooling of resources and political interest stemming from concerns over cost in the healthcare system from the recent recession. In addition, framing the issue of alcohol consumption in public health terms and maintaining attention on the health harm of alcohol consumption, rather than on the specific policies, were both beneficial.

The legislation was one of the most contested in Ireland's history, with almost

> "There was a massive level of lobbying from the industry during this time. Almost a hundred representations were made to government over the course of a single year. In fact, this particular piece of legislation has been described as the most contested in the history of the state"

Sheila Gilheany, Alcohol Action Ireland at the webinar Addressing and managing conflicts of interest in alcohol control policies

100 representations made to government by industry over a single year. Crucial parts of the legislation, including labelling, content of advertisement and a broadcast threshold for alcohol advertisements remain to be implemented.

There is also concern that the alcohol industry's influence in other areas will have knock-on effects for public health policies. For example, a recent sustainable food production strategy was released in Ireland *(38)*. The alcohol industry representatives participated in the development of the strategy, which affected its direction. Concerns have been raised about possible dilution of elements in the Public Health Alcohol Act, including labelling of alcohol products.

There is a need for strong leadership at government level to ensure that public health concerns remain the focus of any alcohol policy. One proposal to achieve that is the suggestion of a dedicated Alcohol Office to lead on alcohol policy and provide insight across government departments on the impact of alcohol in areas ranging from the night-time economy to agriculture.

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Next steps

This section should be considered as directions to explore to ensure the conversation continues beyond this brief

Tackling the challenges laid out in this brief undoubtedly requires a multi-stakeholder approach with each partner playing to their comparative advantage. Some examples of this are provided below for each researchers and research-organizations and for government policy- and decision-makers. However, those best suited to move forward these next steps will be specific to each setting and may differ by country.

Global governance

International frameworks and coalitions help in managing conflicts of interest. Strengthening global governance would consider the following actions:

- developing a framework for managing conflicts of interest that builds on the work in nutrition and tobacco;
- providing guidance for addressing conflicts of interest on trade and customs agreements;
- producing technical guidance that defines conflicts of interest and provides tools to support in-country efforts to reduce industry interference;
- supporting countries in strengthening internal capacity for designing and monitoring evidence-informed policies;
- supporting governments in exploring ways to divest from the alcohol industry;
- positioning the management of conflicts of interest as a global movement;

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- enabling the development of regional conflict of interest strategies; and
- developing shared narratives about the health, social and economic harm produced by alcohol consumption including terms, concepts, language and policy options conducive to improving public health.

Policy- and decision-makers

Conflicts of interest must be managed across multiple levels of governance. Policy- and decision-makers next steps include to explore:

- adopting internal procedures for the development of public health policies to identify and limit interactions with the alcohol industry and ensure transparency when those interactions occur;
- examining the possibility to regulate alcohol industry's corporate social responsibilities activities as forms of marketing;
- examining regional mechanisms to fund alcohol harm prevention and reduction, similar to what the Global Fund to Fight AIDS, Tuberculosis and Malaria has done for HIV; and
- institutionalising the assessment of conflicts of interest across sectors, such as health, agriculture, economy and trade.

Civil society, community-based organisations, researchers and research institutions

Given the importance of documenting conflicts of interest and developing evidence-informed models of governance, civil society and community-based organisations, as well as researchers and research institutions have a critical role to play to move the discussion forward, including:

- documenting and exposing industry behaviour by continuing to write-up case studies;
- supporting the development of contextualised strategies and conducting implementation-focused research to help determine what works and in what setting;
- promoting the improvement of the disclosure of conflicts of interest in peer-reviewed journals and of academics acting in expert advisory roles;
- discussing about the ethics of taking funding for research from the alcohol industry and its potential contribution to biases; and
- engaging with civil society to improve the recognition and anticipate the industry practices.

Takeaway messages

1 There are irreconcilable differences between public health and economic interests.

2 Industries producing and selling unhealthy commodities have defeated, delayed or weakened the design, implementation and evaluation of public policies worldwide.

3 Evidence shows that protecting policy development from conflicts of interest is essential to decrease the burden of disease.

4 There is no robust evidence that corporate social responsibility reduces alcohol consumption.

5 International frameworks and coalitions help in managing conflicts of interest and advance alcohol control policies.

6 The current research practices to disclose conflicts of interest are insufficient to ensure transparency and unbiased science.

7 Adopting procedures to identify and limit interactions with the alcohol industry prevents interferences and ensure transparency during the development of public health policies.

8 Civil society can improve the recognition of and anticipate the industry practices.

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World Health Organization

Related WHO resources

WHO alcohol fact sheet

Global Information System on Alcohol and Health

Global alcohol action plan 2022–2030 to strengthen implementation of the Global Strategy to Reduce the Harmful Use of Alcohol

Global developments in alcohol policies: progress in implementation of the WHO strategy to reduce the harmful use of alcohol since 2010.

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Less alcohol

Best buys

- More taxes
- Less availability
- No advertising