



# **Addressing alcohol consumption and socioeconomic inequalities: how a health promotion approach can help**

**Snapshot series on alcohol control policies and practice**

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# Brief at- a-glance

## The problem

Evidence consistently finds that people with lower socioeconomic status are disproportionately or disparately affected by alcohol-related harms. Alcohol consumption – especially heavy episodic drinking – explains 27% of the socioeconomic inequalities in mortality. As countries progress in their development, alcohol consumption may exacerbate disparities in the burden of disease attributable to alcohol.

## The evidence

Alcohol consumption accounts for about 5% of the global burden of disease but is unequally distributed across socioeconomic groups. Socioeconomic status has repeatedly been shown to be associated with an elevated risk of mortality. For alcohol consumption, the inequalities in morbidity and mortality are especially stark. The availability of alcohol in communities with fewer resources reinforces and exacerbates these differences. Places that have higher alcohol outlet density tend to have more road crashes, hospital admissions, suicide, alcohol use disorders, child abuse and neglect, violence, underage drinking and

sexually transmitted infections. Nevertheless, substantial evidence indicates that alcohol control policies can play an important role in reducing socioeconomic inequalities.

## The know-how

Experiences describing how alcohol drives inequalities can inform future policy decisions. Four experiences with these inequalities and the steps taken to reduce gaps in health are described. These experiences describe efforts to reduce the acceptability, availability and affordability of alcohol across different settings.

## The next steps

Policy-makers could pursue evidence-informed alcohol control policies working in collaboration with other countries to develop multinational responses. Civil society, community-based organizations, researchers and research institutions could continue to document the experiences of countries implementing policies to reduce alcohol consumption and develop innovative research methods that can be applied in low- and middle-income countries to fill the existing gaps in the knowledge base



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## **Related resources**

[Webinar recording](#) | [Event description](#) | [Programme](#)

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# 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 realize their full potential.

## Determinants driving the consumption of alcohol



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## 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

## 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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