



ALCOHOL AND THE SUSTAINABLE DEVELOPMENT GOALS

Major obstacle to development



MAJOR OBSTACLE TO DEVELOPMENT ALCOHOL AND THE SUSTAINABLE DEVELOPMENT GOALS

The 2030 Agenda contains 17 Sustainable Development Goals with 169 targets. The 17 SDGs cover all three aspects of sustainable development: the social, environmental and economic dimension.

Alcohol is a major obstacle to sustainable human development, adversely affecting all three dimensions of sustainable development.

Alcohol kills 3.3 million people worldwide every year. It means: Every 10 seconds a human being dies because of alcohol. This represents 5.9 % of all deaths. Globally, alcohol is the 5th leading risk factor for premature death and disability; among people between the ages of 15 and 49, it is the number one risk factor. Through its multiple public health, social and economic impacts, alcohol is a massive obstacle to achieving 13 out of 17 SDGs, and a total of 52 targets. Alcohol is an obstacle to development by jeopardizing human capital and hindering sustainable human development.

Evidence shows that alcohol is a cross-cutting, harmful factor in many areas of the 2030 Agenda, such as:

-  No poverty
-  Zero Hunger
-  Good health and well-being
-  Quality education
-  Gender equality
-  Clean water and water security
-  Decent work and economic productivity
-  Reduced inequalities
-  Sustainable cities and communities
-  Responsible consumption and production
-  Climate action
-  Peace and justice
-  Partnerships free from conflicts of interest

Alcohol is specifically mentioned in SDG 3 on health and well-being. Target 3.5 reads:

“Strengthen the prevention and treatment of substance abuse, including narcotic drug abuse and harmful use of alcohol”



END POVERTY IN ALL ITS FORMS EVERYWHERE

SDG 1.1: By 2030, eradicate extreme poverty for all people everywhere, currently measured as people living on less than \$1.25 a day

Vicious cycle of alcohol & poverty

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

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.

- Latin America: alcohol has become the leading cause of male death and disability threatening further progress and sustainable development¹
- A study in Sri Lanka found that over 10% of male respondents reported spending as much as or more than their regular income on alcohol²



END HUNGER, ACHIEVE FOOD SECURITY

SDG 2.1: By 2030, end hunger and ensure access by all people, in particular the poor and people in vulnerable situations

Vicious cycle of deprivation, alcohol, hunger

In low- and middle-income countries (LMICs), alcohol tends to crowd out other more productive household spending, such as spending on education, health care and healthy food.

Both recognized and unrecognized alcohol expenditures have highly damaging impact on the

most deprived families and communities. Desperately needed resources are being taken away from the little available for food and other basics.

People with lower socio-economic status are more exposed and more vulnerable to tangible problems and negative consequences of alcohol use. This vulnerability is often passed on through generations. Thus, alcohol harm often contributes to the vicious cycle of deprivation, vulnerability and hunger.

- Socio-economically exposed people are less able to avoid adverse consequences of their behavior due to a lack of resources³
- People in poor and vulnerable communities have less extensive support networks, i.e., fewer factors or persons to motivate them to address alcohol problems⁴



ENSURE HEALTHY LIVES AND PROMOTE WELL-BEING FOR ALL AT ALL AGES

SDG 3.1: By 2030, reduce the global maternal mortality ration...

SDG 3.2: By 2030, end preventable deaths of newborns and children under five...

Alcohol use during pregnancy risks mother's and newborn's survival, health

There is an urgent need to improve the health of pregnant women and their infants by identifying factors that place them at greater risk and providing interventions to improve their outcomes.

- Maternal alcohol use is associated with higher mortality rates for pregnant women and infants⁵
- Alcohol use during pregnancy is associated with increased morbidity and mortality in infants and children⁵
- Evidence from Ghana shows that alcohol consumption is significantly associated with abortion-related maternal deaths. Women who had ever consumed alcohol, frequent alcohol users, and even occasional alcohol users were about three times as likely to die from abortion-related causes compared to those who abstained from alcohol. Maternal age, marital status and educational level are factors that have a confounding effect on the observed association⁶



ENSURE HEALTHY LIVES AND PROMOTE WELL-BEING FOR ALL AT ALL AGES

SDG 3.3: By 2030, end the epidemics of AIDS, tuberculosis, malaria and neglected tropical diseases and combat hepatitis, water-borne diseases and other communicable diseases

Alcohol major risk factor for TB, HIV/ AIDS

Alcohol is widely established as a structural driver of both the TB and HIV/AIDS epidemics.

- There is a causal relationship between alcohol use and incidence of infectious diseases such as tuberculosis⁷

Causal relationships exist between:

- Alcohol consumption and HIV incidences
- Alcohol consumption on HIV/AIDS patients' adherence to antiretroviral treatment
- Alcohol use and HIV/ Aids disease progression among patients who are not yet on antiretroviral therapy⁸



ENSURE HEALTHY LIVES AND PROMOTE WELL-BEING FOR ALL AT ALL AGES

SDG 3.4: By 2030, reduce by one third premature mortality from non-communicable diseases through prevention and treatment and promote mental health and well-being

Alcohol major risk factor for NCDs

Alcohol is one of four major risk factors for non-communicable diseases (NCDs). There is a causal relationship between alcohol use and a range of mental and behavioral disorders, such as cancer, cardiovascular disease, diabetes, as well as injuries.

- In the UK studies found that adolescents admitted to hospital with alcohol-related injuries face a five-times increased risk of committing suicide⁹
- In 1988 the International Agency for Research on Cancer (IARC) established: "Alcoholic beverages are carcinogenic to humans."¹⁰
- In 2010 alcohol-attributable cancer was responsible for 4.2% of all cancer deaths and caused approximately 8.5 million potential years of life lost worldwide¹¹
- Alcohol use has also been found to increase the risk of atrial fibrillation, heart attack, and congestive heart failure¹²



ENSURE HEALTHY LIVES AND PROMOTE WELL-BEING FOR ALL AT ALL AGES

SDG 3.5: Strengthen the prevention and treatment of substance abuse, including narcotic drug abuse and harmful use of alcohol

Alcohol & global death, disability

As a causal factor in more than 200 disease and injury conditions, alcohol is a significant and increasing risk factor for the global burden of morbidity and mortality.

- Overall 5.1 % of the global burden of disease and injury is attributable to alcohol, as measured in disability- adjusted life years (DALYs)¹³
- Alcohol consumption causes death and disability early in life – relative to other health hazards, and is thus a tremendous burden on young people: In the age group 20 to 39 years of age about 25% of the total deaths are alcohol-attributable¹⁴
- Globally, alcohol consumption is the fifth leading risk factor for premature death and disability; among people between the ages of 15 and 49, it is the first¹⁵



ENSURE HEALTHY LIVES AND PROMOTE WELL-BEING FOR ALL AT ALL AGES

SDG 3.6: By 2020, halve the number of global deaths and injuries from road traffic accidents

Alcohol & road traffic injuries, fatalities

Impairment by alcohol is an important factor influencing both the risk of an accident and the severity of the injuries that result from crashes.

Driving under the influence of alcohol is a major risk factor for road traffic injuries, one of the leading causes of death among young people globally.

- 1 of 4 road fatalities in the EU is alcohol related. In 2010 nearly 31,000 Europeans were killed on the roads of which 25% of deaths were related to alcohol¹⁶
- Studies in low-income countries have shown alcohol to be present in between 33% and 69% of fatally injured drivers¹⁷
- In South Africa, alcohol was found to contribute to 61% of fatalities among pedestrians¹⁸



ENSURE INCLUSIVE AND EQUITABLE QUALITY EDUCATION

SDG 4.1: By 2030, ensure that all girls and boys complete free, equitable and quality primary and secondary education leading to relevant and effective learning outcomes

Bottles over books: alcohol and children's primary education

In many deprived and vulnerable communities children bear a disproportionate burden. Alcohol does play a tremendous role.

E.g., the impact of alcohol abuse and dependence on the user and the family:

- Parental roles are neglected and too often abandoned;
- Wages are wasted on alcohol, the household economy is ruined, jobs are lost;
- Resulting health issues even exacerbate the dire situation.

All that means scarce resources cannot be invested in children's primary education and school material, depriving children of their right to primary education.¹⁹



ACHIEVE GENDER EQUALITY AND EMPOWER
ALL WOMEN AND GIRLS

SDG 5.1: End all forms of discrimination against all women and girls everywhere

Alcohol marketing perpetuates harmful norms

The alcohol industry has amassed a vast case library of alcohol ads, commercials and other alcohol brand promotions that perpetuate discriminatory images and attitudes to women and girls.

The portrayal of women and girls in alcohol marketing fuels sexualization, objectification and de-humanization of women. It amplifies the common belief of masculine superiority over females and it justifies male demonstration of power over the other gender²⁰

- Environments (alcohol licensed venues) that incite narratives of loss of control and hyper-sexuality compromise the ability to counter sexual offending
- Presence of sexually violent advertising within alcohol licensed spaces undermines considerably the call to end gendered violence.²¹



ACHIEVE GENDER EQUALITY AND EMPOWER ALL WOMEN AND GIRLS

SDG 5.2: Eliminate all forms of violence against all women and girls in the public and private spheres, including trafficking and sexual and other types of exploitation

Alcohol fuels epidemic of violence against women

There is a strong relationship between alcohol and domestic abuse, intimate partner violence and sexual assault.

- Australia: Alcohol contributes to 50% of all partner violence, and to 73% of physical assaults by a partner²⁵

Alcohol is seldom the sole explanation for the use of violence, but it's often the triggering factor. Alcohol use creates a context for violent acts. It is often used as excuse for otherwise socially unacceptable behavior.²²

- 65% of women experiencing intimate partner violence
- in South Africa reported the perpetrator had used alcohol²³
- USA: victims of physical assault reported alcohol use by their partner in 55% of the cases²³
- Focus groups in rural Rwanda show that women who are victims of domestic violence rank alcohol as number one factor²⁴



ENSURE AVAILABILITY AND SUSTAINABLE MANAGEMENT OF WATER AND SANITATION FOR ALL

SDG 6.1: By 2030, achieve universal and equitable access to safe and affordable drinking water for all

SDG 6.4: By 2030, substantially increase water-use efficiency across all sectors and ensure sustainable withdrawals and supply of freshwater to address water scarcity and substantially reduce the number of people suffering from water scarcity

Drinking water or producing alcohol?

Over 40% of all people without improved drinking water live in sub-Saharan Africa.

In 2011, 768 million people remained without access to an improved source of drinking water. 70% of the world's water

resources are used for agriculture and irrigation, according to the Food and Agriculture Organization of the United Nations.²⁶

Alcohol production is a threat to water security in many regions of the world:

- The water footprint of wine is horrible. To get one liter of wine, 870 liters of water are needed²⁷
- The water footprint of beer is horrific. Per one liter of beer, 298 liters of water have to be used²⁸

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



PROMOTE SUSTAINED, INCLUSIVE AND SUSTAINABLE ECONOMIC GROWTH, FULL AND PRODUCTIVE EMPLOYMENT AND DECENT WORK FOR ALL

SDG 8.2: Achieve higher levels of economic productivity through diversification, technological upgrading and innovation, including through a focus on high-value added and labor-intensive sectors

Massive economic costs due to alcohol

The economic burden of alcohol worldwide is substantial, accounting for up to 5.44% of Growth Domestic Product (GDP) in some countries.²⁹

Costs of alcohol harm have been measured in different regions and are of massive scale:

- European Union: €156 billion yearly³⁰
- United States: \$233.5 billion yearly³¹
- South Africa: Combined tangible and intangible costs of alcohol harm to the economy reached nearly ZAR300 billion or 10–12% of GDP³²



PROMOTE SUSTAINED, INCLUSIVE AND SUSTAINABLE ECONOMIC GROWTH, FULL AND PRODUCTIVE EMPLOYMENT AND DECENT WORK FOR ALL

SDG 8.8: Protect labor rights and promote safe and secure working environments for all workers, including migrant workers, in particular women migrants, and those in precarious employment

Alcohol workplace harm and lost productivity

Globally, alcohol is the world's number one risk factor for ill-health and premature death amongst the 25 to 59 year-olds, the core of the working age population when people are typically at their most productive economically.³³

Alcohol use disorders likely result in billions of dollars of lost wages each year.³⁴

Alcohol is a significant risk factor for absenteeism and presenteeism at work, largely in a dose response manner, with a relationship between societal and individual level of alcohol consumption and sickness absence.³⁵

- 37% of workers in Great Britain admit going to work with a hangover that has affected their productivity in the past year³⁶
- 35% of the 1,300 construction workers surveyed had worked alongside people under the influence of alcohol³⁶



PROMOTE SUSTAINED, INCLUSIVE AND SUSTAINABLE ECONOMIC GROWTH, FULL AND PRODUCTIVE EMPLOYMENT AND DECENT WORK FOR ALL

SDG 8.6: By 2020, substantially reduce the proportion of youth not in employment, education or training

Leaving no youth in NEET behind

In 2013, over 14% of 16 to 24 year-olds in England (almost 900,000 youth) were not in employment, education or training (NEET).³⁷

The concept of NEET carries potential to address a broad array of vulnerabilities among youth, including issues of unemployment, early school leaving and labor market discouragement.

- Early alcohol abuse is a well documented risk factor for young people leaving school early and without qualifications³⁸



REDUCE INEQUALITIES IN AND AMONG COUNTRIES

SDG 10.2: By 2030, empower and promote the social, economic and political inclusion of all, irrespective of age, sex, disability, race, ethnicity, origin, religion or economic or other status

Alcohol and health, social inequalities

Inequalities in alcohol-related harm exist based on factors including economic status, education, gender, ethnicity and place of residence. In general, lower socioeconomic groups consume less alcohol overall and are more likely to be abstainers, but they experience higher levels of alcohol-related harm than wealthier groups with the same level of consumption.³⁹

Experiencing multiple aspects of socioeconomic disadvantage amplifies inequalities in alcohol-related harm.

- In the UK, health inequalities are estimated to cost £32-33 billion per year⁴⁰
- In Sweden, manual workers are 2–3 times more likely to experience alcohol-related harm than civil servants, even when alcohol consumption levels were similar⁴¹



REDUCE INEQUALITIES IN AND AMONG COUNTRIES

SDG 10.3: Ensure equal opportunity and reduce inequalities of outcome

Alcohol's harm to others

Alcohol use can have a range of negative consequences on people other than the alcohol consumer, for example physical violence, road traffic accidents, relationship problems, financial difficulties, feeling scared in public places, or reporting negative impacts on children due to parents' alcohol use.

- 65% of women experiencing intimate partner violence in South Africa reported the perpetrator had used alcohol⁴²
- In rural Mexico, a \$20 dollar long-lasting increase in the wife's income is associated with a 15% decrease of the husband's alcohol use and a 21% decrease of aggressive behavior⁴³
- In the United States, more than 10% of children live with a parent with alcohol problems⁴⁴
- In the EU, 9 million children grow up with parents who have alcohol problems⁴⁵
- Almost ¾ of adults in Australia (10 million people) are adversely affected by someone else's alcohol use⁴⁶



MAKE CITIES AND HUMAN SETTLEMENTS INCLUSIVE, SAFE, RESILIENT AND SUSTAINABLE

SDG 11.7: By 2030, provide universal access to safe, inclusive and accessible, green and public spaces, in particular for women and children, older persons and persons with disabilities

Alcohol outlet density: unsafe public space, neighborhood violence

In and near neighborhoods with a high density of alcohol outlets, there is a higher rate of violence. It means, when bars, liquor stores, and other businesses that sell alcohol are close together, more assaults and other violent crimes occur.

Safe public space is a Women's Rights issue. Evidence shows that alcohol threatens women's safety and freedom in public space around pubs and clubs.

- New Zealand: more than 1 in 10 women ages 14 to 19 reported physical assaulted; 1 in 5 women ages 14 to 19 had been sexually harassed in the previous 12 months, by someone who had been using alcohol⁴⁸
- England, Wales: Half of all incidents of alcohol-related violence occur in or around pubs and clubs⁴⁹



MAKE CITIES AND HUMAN SETTLEMENTS INCLUSIVE, SAFE, RESILIENT AND SUSTAINABLE

SDG 11.7: By 2030, provide universal access to safe, inclusive and accessible, green and public spaces, in particular for women and children, older persons and persons with disabilities

Alcohol – barrier to inclusive, enabling public space for children, adolescents, youth

Inclusive public space is a youth rights issue. Evidence shows that alcohol-related exclusion from public space puts a heavy burden on adolescent's health and well-being.

- Sweden: 21% of adolescents say they only use alcohol because there is nothing else to do during leisure time⁵⁰
- Sweden: 87% of adolescents agree/ partly agree that alcohol makes public space unsafe⁵⁰
- 55% of adolescents in Sweden say that they stay away from public space because of alcohol⁵⁰
- High density of alcohol outlets is associated with increased binge consumption and a range of alcohol harms, such as violence, road traffic injuries or sexually transmitted infections⁵¹



ENSURE SUSTAINABLE CONSUMPTION AND
PRODUCTION PATTERNS

SDG 12.2: By 2030, achieve the sustainable management and efficient use of natural resources

Alcohol production threatens sustainable use of natural resources

Droughts are expected to keep getting longer and more severe, increasingly affecting high-income as well as middle- and low-income countries. Water shortages are likely to become increasingly common as the world faces climate change and a growing population.

Alcohol production is jeopardizing natural resources, especially water, and is causing water shortages:

- The water footprint of wine is horrible. To get one liter of wine, 870 liters of water are needed²⁷
- The water footprint of beer is horrific. Per one liter of beer, 298 liters of water have to be used²⁸



ENSURE SUSTAINABLE CONSUMPTION AND PRODUCTION PATTERNS

SDG 12.3: By 2030, halve per capita global food waste at the retail and consumer levels and reduce food losses along production and supply chains, including post-harvest losses

SDG 12.8: By 2030, ensure that people everywhere have the relevant information and awareness for sustainable development and lifestyles in harmony with nature

What could be food becomes toxic, addictive, carcinogenic substance

- In 2011, the global beer production amounted to about 1.93 billion hectoliters, up from 1.3 billion hectoliters in 1998. By some estimates, up to 92% of brewing ingredients are wasted⁵³
- Data shows that only 47% of consumers in the UK, or in the US only 39% of consumers are aware that alcohol causes 7 types of cancer^{54 55}

Different types of starchy plants have been used for producing beer, including maize (South America), soy (India), millet and sorghum (Africa) and rice (Asia). Nowadays, beer production using barley malt is the most common brewing process worldwide. Processing barley into malt is an energy-consuming process.⁵²

Levels of alcohol harm (see above), alcohol's harm to others and the economic and social costs of alcohol make consumption levels unsustainable. Additionally, the negative impact on water security and food waste and even the energy-consuming production processes are causing externalities that are unsustainable.



TAKE URGENT ACTION TO COMBAT CLIMATE CHANGE

SDG 13.2: Integrate climate change measures into national policies, strategies and planning

Not green after all: Alcohol fuels greenhouse gas emissions, global warming

Very few people actually think of alcohol in terms of its climate impact. For achieving the goals of the 2030 Agenda, such a mindset needs to be challenged.

- The contribution made by the alcohol consumed in the UK accounts for 1.46% of the UK's total greenhouse gas emissions. The share of beer in alcohol's total emissions amounts to 65%⁵⁶
- In a lifecycle analysis of a Spanish beer, production and transport of raw materials used in beer production was found to contribute over one third of the total global environmental impact of the beer production lifecycle⁵⁷

Other aspect of the alcohol industry contributing to global warming, greenhouse gas emissions, high energy use, pollution and use of natural resources are: refrigeration in the hospitality sector, use of fertilizers, water use, packaging, waste, transport of raw material and distribution of the products⁵⁸



PROMOTE PEACEFUL AND INCLUSIVE SOCIETIES FOR SUSTAINABLE DEVELOPMENT, PROVIDE ACCESS TO JUSTICE FOR ALL

SDG 16.1: Significantly reduce all forms of violence and related death rates everywhere

Pervasive alcohol violence

Alcohol violence impacts physical, mental and sexual health. It considerably burdens the public health system and other public sectors, making it a major sustainable development issue.

Globally, across all age groups, alcohol is estimated to be responsible for 26% and 16% of years of life lost through homicide by males and females respectively.⁵⁹

- Across all industrialized countries, alcohol is estimated to be responsible for 41% of male and 32% of female DALYs lost through homicide⁶⁰
- In Norway, 53% of victims of assaults presenting at an emergency department reported that their attacker had used alcohol prior to the attack⁶⁰
- USA: up to 86% of homicide offenders, 37% of assault offenders, 60% of sexual offenders were under the influence of alcohol⁶²
- England, Wales: Alcohol is involved in ca. 1.2 million violent incidents – almost half of all violent crimes⁶³



PROMOTE PEACEFUL AND INCLUSIVE SOCIETIES FOR SUSTAINABLE DEVELOPMENT, PROVIDE ACCESS TO JUSTICE FOR ALL

SDG 16.2: End abuse, exploitation, trafficking and all forms of violence against and torture of children

Youth: suffering from violence

Children, adolescents and youth bear a disproportionate burden of alcohol's harm to others: they suffer alcohol violence perpetrated by adults, often parents.

- USA: 13% of child abusers are under the influence of alcohol⁶⁴
- Europe: 16% of all cases of child abuse and neglect are alcohol-related⁶⁵

The impact of youth violence reaches all sectors of society, placing huge strains on public services and damaging communities.

- Philippines: 14% of 15 – 24 year olds reported physically hurting someone through violence in the previous three months. This violence was significantly associated with alcohol⁶⁶
- Among 10 to 18 year-olds participating in the Caribbean Youth Health Survey, having used alcohol in the past year was significantly linked to weapon-related violence⁶⁷



STRENGTHEN THE MEANS OF
IMPLEMENTATION AND REVITALIZE THE
GLOBAL PARTNERSHIP FOR SUSTAINABLE
DEVELOPMENT

SDG 17.1: Strengthen domestic resource mobilization, including through international support to developing countries, to improve domestic capacity for tax and other revenue collection

Alcohol taxation: win-win measure for financing development

Independent science shows that employing evidence-based alcohol taxation measures reaps benefits across 10 out of 17 SDGs.⁶⁸

There is strong evidence that raising alcohol taxes is an effective strategy for reducing alcohol consumption and related harms.⁶⁹

Alcohol taxation is a powerful tool with a double positive effect:

- It reduces the burden of alcohol as obstacle to development.
- It helps raise funds for government welfare policy measures.



STRENGTHEN THE MEANS OF
IMPLEMENTATION AND REVITALIZE THE
GLOBAL PARTNERSHIP FOR SUSTAINABLE
DEVELOPMENT

SDG 17.3: Mobilize additional financial resources for developing countries from multiple sources

SDG 17.17: Encourage and promote effective public, public-private and civil society partnerships, building on the experience and resourcing strategies of partnerships

Big Alcohol: No partner for sustainable development

The leading multinational corporations of the beer, wine and liquor industries are significant vectors of an industrial epidemic that threatens sustainable development.⁷⁰

Harmful business practices are taken out of the playbook of Big Tobacco:

- Tax schemes by multinational alcohol corporations are exploiting countries, especially in the global south⁷¹
- Aggressive lobbying seeks to block the implementation of evidence-based measures to regulate alcohol⁷²
- Marketing often targets children and youth and often depicts women in de-humanized, sexualized ways⁷³
- Self-regulatory schemes are systematically violated by the alcohol industry⁷⁴



STRENGTHEN THE MEANS OF
IMPLEMENTATION AND REVITALIZE THE
GLOBAL PARTNERSHIP FOR SUSTAINABLE
DEVELOPMENT

SDG 17.16: Enhance the global partnership for sustainable development, complemented by multi-stakeholder partnerships that mobilize and share knowledge, expertise, technology and financial resources, to support the achievement of the sustainable development goals in all countries, in particular developing countries

SDG 17.17: Encourage and promote effective public, public-private and civil society partnerships, building on the experience and resourcing strategies of partnerships

Big Alcohol & SDGs: Conflict of interest

The producers of alcohol and other unhealthy commodities are commercial determinants of ill-health, economic harm and under-development.⁷⁵

Alcohol is a major obstacle to achieving the SDGs. To effectively curb the commercial drivers of this obstacle to development, alcohol availability, affordability, and marketing (3 Best Buys) need to be regulated.⁷⁶

But this goes contrary to the core business interest of Big Alcohol: to maximize profits by increasing alcohol consumption everywhere.

SCIENTIFIC EVIDENCE REFERENCES

SDG 1 End poverty in all its forms

- [1] Regional Status Report on Alcohol and Health in the Americas, PAHO and WHO, 2015
- [2] Baklien, B., Samarasinghe, D.: Alcohol and Poverty in Sri Lanka, 2003
- [2] Bakke, O., Endal, D.: Alcohol and Development, 2014

SDG 2 End hunger, achieve food security

- [3] Samarasinghe, D.: Alcohol and Poverty: some connections, 2014
- [3] Bakke, O.: Alcohol: health risk and development issue, in Cholewka, P. and Motlagh, M.M. Health Capital and Sustainable Socioeconomic Development, 2008
- [4] Kamani, A.: Impact of alcohol on poverty and the need for appropriate policy, in: Alcohol: Science, Policy and Public Health, 2013
- [4] Room R, Jernigan D, Carlini Cotrim B, Gureje O, Mäkelä K, Marshall M, et al. Alcohol in developing societies: a public health approach, 2002.

SDG 3 Good health

- [5] Wolfe et al.: Mortality Risk Associated with Perinatal Drug and Alcohol Use in California, J Perinatol. 2005 February ; 25(2): 93–100. doi:10.1038/sj.jp.7211214.
- [5] O'LEARY et al: Maternal Alcohol Use and Sudden Infant Death Syndrome and Infant Mortality Excluding SIDS, in: PEDIATRICS Volume 131, Number 3, March 2013
- [6] Asamoah, B. O., & Agardh, A. (2012). Alcohol consumption in relation to maternal deaths from induced- abortions in Ghana. Reproductive Health, 9, [9]. DOI: 10.1186/1742-4755-9-10
- [7] Rehm J, Samokhvalov AV, Neuman MG, Room R, Parry CD, Lönnroth K, et al. (2009) The association between alcohol use, alcohol use disorders and tuberculosis (TB): A systematic review. BMC Public Health 2009; Dec 5 (9):450.
- [8] Schneider M, Chersich M, Neuman MG, Parry CD. (2012). Alcohol consumption and HIV/AIDS: the neglected interface. Addiction 2012;107(8):1369-1371
- [9] Ness, Jennifer, Alcohol misuse and self-harm: an opportunity for early intervention in the emergency department, in: The Lancet Psychiatry , Volume 4 , Issue 6 , 435 - 436
- [10] IARC Monographs on the evaluation of the carcinogenic risks to humans of alcohol drinking, Vol. 44, 1988
- [11] Parry CD, Patra J, Rehm J. (2011). Alcohol consumption and non-communicable diseases: epidemiology and policy implications. Addiction 2011;106(10):1718-1724.

SCIENTIFIC EVIDENCE REFERENCES

[11] Andreasson, S., Chikritz, T., Dangardt, F., Holder, H., Naimi, T., Stockwell, T.: Alcohol and Cancer, Published by IOGT-NTO, the Swedish Society of Medicine and CERA in cooperation with Forum Ansvar, 2016/2017

[11] Ekpenyong, CE, Udokang, NE, Akpan, EE, Samson, TK: Double Burden, Non-Communicable Diseases And Risk Factors. Evaluation In Sub-Saharan Africa: The Nigerian Experience, in: European Journal of Sustainable Development (2012), 1, 2, 249-270

[12] Isaac R. Whitman, Vratika Agarwal, Gregory Nah, Jonathan W. Dukes, Eric Vittinghoff, Thomas A. Dewland, Gregory M. Marcus, Alcohol Abuse and Cardiac Disease, in: Journal of the American College of Cardiology Jan 2017, 69 (1) 13-24; DOI:10.1016/j.jacc.2016.10.048

WHO Global Strategy to Reduce the Harmful Use of Alcohol, 2010

UNODC: International Standards on Drug Use Prevention

[13] WHO Global status report on alcohol and health, 2014

[13] Rehm, J., Room, R., Monteiro, M., Gmel, G., Graham, K., Rehn, N., Sempos, C., & Jernigan, D. (2003). Alcohol as a risk factor for global burden of disease. *European Addiction Research*, 9, 157-164.

[13] Desai, Dr N.G. et al. (2003). Prevention of Harm From Alcohol, pp 30-32. WHO, SEARO, New Delhi, India.

[14] World Health Organization, Alcohol facts: <http://www.who.int/mediacentre/factsheets/fs349/en/>

[14] Room R, Jernigan D, Carlini Cotrim B, Gureje O, Mäkelä K, Marshall M, et al. (2002) Alcohol in developing societies: a public health approach. Helsinki and Geneva: Finnish Foundation for Alcohol Studies and World Health Organization; 2002.

[15] Lim, S.S.; Vos, T.; Flaxman, A.D.; et al. A comparative risk assessment of burden of disease and injury attributable to 67 risk factors and risk factor clusters in 21 regions, 1990–2010: A systematic analysis for the Global Burden of Disease Study 2010. *Lancet* 380(9859):2224–2260, 2012. PMID: 23245609

[15] Rehm, J., Mathers, C., Popova, S., Thavorncharoensap, M., Teerawattananon, Y., Patra, J. (2009). Global burden of disease and injury and economic cost attributable to alcohol use and alcohol-use disorders. *The Lancet*, 373, 2223-2233.

WHO Global status report on road safety 2015

Drinking and Driving: a road safety manual for decision-makers and practitioners. Geneva, Global Road Safety Partnership, 2007.

[16] Transport Research and Innovation Portal (TRIP) consortium on behalf of the European Commission's Directorate-General for Mobility and Transport (DG MOVE): Traveling save in Europe by road, rail and water, 2014

[17] WHO Road Safety fact sheet: http://www.who.int/violence_injury_prevention/publications/road_traffic/world_report/alcohol_en.pdf [18] Pedestrian safety: A road safety manual for decision-makers and practitioners, World Health Organization, 2013

SCIENTIFIC EVIDENCE REFERENCES

[17] Das, Ashis; Gjerde, Hallvard; Gopalan, Sajji S.; Normann, Per T.. 2012. "Alcohol, drugs, and road traffic crashes in India : a systematic review". *Traffic Injury Prevention*. – Vol. 13, no. 6 (November 8, 2012), pp. 1-36.

[18] *Pedestrian safety: A road safety manual for decision-makers and practitioners*, World Health Organization, 2013

[18] Margie Peden, Richard Scurfield, David Sleet, Dinesh Mohan, Adnan A. Hyder, Eva Jarawan and Colin Mathers (editors): *World report on road traffic injury prevention*, WHO, World Bank, 2004

[18] WHO, Risk factors for road traffic injuries. *Road Safety Training Manual*

SDG 4 Quality education

[19] APSA (2008). *Impact of Alcoholism on Children from Urban Poor Families in Bangalore*. APSA, Bangalore, India. (Unpublished paper).

[19] WHO (undated). *Child Maltreatment and Alcohol Fact Sheet*

[19] Bakke, O., Endal, D.: *Alcohol and Development*, 2014

Samarasinghe, D.: *Alcohol and Poverty: some connections*, 2014

Laslett, A-M., et.al.: *Hidden harm. Alcohol's impact on children and families*, 2015

Dhital, Rupa et al.: *Alcohol and Drug Use Among Street Children: A Study in Six Urban Centres*, 2002

Walsh C., MacMillan HL., Jamieson E.: *The relationship between parental substance abuse and child maltreatment: findings from the Ontario Health Supplement*, in: *Childhood Abuse & Neglect*, Vol.27, Issue 12, 2003

SDG 5 Gender equality

[20] Woodruff, K.: *Alcohol Advertising and Violence Against Women: A Media Advocacy Case Study*, in: *Health Education & Behavior*, Vol 23, Issue 3, pp. 330 – 345, 2016

[20] Kilbourne, Jean: *The Spirit Of the Czar: Selling Addictions to Women*, *Iris*; Charlottesville XII.3 , 1992

[20] Firth, K., Shaw, P., Cheng, H.: *The Construction of Beauty: A Cross-Cultural Analysis of Women's Magazine Advertising*, in: *Journal of Communication*, 2005

[21] *Location, libation and leisure: An examination of the use of licensed venues to help challenge sexual violence*, Clare Gunby, Anna Carlina, Stuart Taylor, *Crime, Media, Culture* First published date: May-30-2017 10.1177/1741659016651751

[22] Heise, L.: *What works to prevent partner violence? An evidence overview*, 2011

[22] UN Women: *Handbook for national action plans on violence against women*, 2012

SCIENTIFIC EVIDENCE REFERENCES

[22] McKinney, C. Et.al.: Alcohol Availability and Intimate Partner Violence Among US Couples', in: Alcoholism: Clinical and Experimental Research, Volume 33: Issue 1, pp. 169–176, 2008

[22] NIAA, Alcohol Alert, Vol.38, 1997: Alcohol, violence and aggression

[23] WHO fact sheet: Intimate partner violence and alcohol, 2006

[24] Slegh H, Kimonya A. Masculinity and gender based violence in Rwanda, Men Engage, 2010

[24] Boyd, M. B., Mackey, M. C., & Phillips, K. D. (2006). Alcohol and other drug disorders, comorbidity and violence in rural African American women. Issues in Mental Health Nursing, 27, 1017-1036. Available at: http://works.bepress.com/kenneth_phillips/10

[24] Koenig, MA., et.a.: Domestic violence in rural Uganda: evidence from a community-based study, in: WHO Bulletin 2003

[24] Braathen, S.H. (2008). Substance Use and Gender Based Violence in a Malawian Context – Pilot Project 2, SINTEF Health research, report SINTEF A6189. Oslo, Norway.

[25] Laslett, A-M., et.al.: Hidden harm. Alcohol's impact on children and families, 2015

Kathryn Marie Graham et.al. (editors), Unhappy Hours: Alcohol and Partner Aggression in the Americas, PAHO, Scientific and Technical Publication No.631, 2008

Fonseca, AM, et.al.: Alcohol-related domestic violence: a household survey in Brazil, in: Rev Saúde Pública 2009;43(5)

SDG 6 Clean water

[26] Vision report: World Water Vision: Making Water Everybody's Business

[26] Foster, C., Green, K., Bleda, M., Dewick, P., Evans, B., Flynn A., Mylan, J. (2006). Environmental Impacts of Food Production and Consumption: A report to the Department for Environment, Food and Rural Affairs. Manchester Business School. Defra, London.

[26] Kleiman, E.: Water and the Central Coast's wine problem, in: LA Times, 2013

[26] Bliss, S.: Water or wine: California facing record drought must pick a side, and fast, in occupy.com, 2015

[27] Water Footprint Network: Gallery – wine: <http://waterfootprint.org/en/resources/interactive-tools/product-gallery/>

[28] Water Footprint Network: Gallery – beer: <http://waterfootprint.org/en/resources/interactive-tools/product-gallery/>

Waweru, P.: Pollutional effect of brewery waste water on Ruaraka River, University of Nairobi, 1992

Kilani, JS, Otieno, FO: Pollution effects of brewery wastes: Ruarake River, 17th WEDC Conference, 1991

SCIENTIFIC EVIDENCE REFERENCES

The Guardian, Breweries across the world strive to decrease beer's water footprint, 16/8/2011 (<https://www.theguardian.com/sustainable-business/brewing-companies-water-usage-footprint>)

SDG 8 Decent work

WHO Global status report on alcohol and health, 2014

[29] Thavorncharoensap M, Teerawattananon Y, Yothasamut J, Lertpitakpong C, Chaikledkaew U. The economic impact of alcohol consumption: a systematic review. *Substance Abuse Treatment, Prevention, and Policy*. 2009;4:20. doi:10.1186/1747-597X-4-20.

[29] Thavorncharoensap, M., et.al.: The economic costs of alcohol consumption in Thailand, 2006

[30] European Parliament: At A Glance - EU Alcohol Strategy revisited, 2014 [http://www.europarl.europa.eu/RegData/etudes/ATAG/2015/554195/EPRS_ATA\(2015\)554195_EN.pdf](http://www.europarl.europa.eu/RegData/etudes/ATAG/2015/554195/EPRS_ATA(2015)554195_EN.pdf)

[31] CDC Features: Excessive Drinking Costs U.S. \$223.5 Billion <https://www.cdc.gov/features/alcoholconsumption/>

[32] Matzopoulos, R. G. and Corrigan, J. (2014): The cost of harmful alcohol use in South Africa. *South African Medical Journal*, Vol .104, No. 2, (127-132), 2014

Popova, S., Lange, S., Burd, L., Rehm, J.: The Burden and Economic Impact of Fetal Alcohol Spectrum Disorder in Canada, Centre for Addiction and Mental Health, 2015

Gilmore, I.: Alcohol, Work And Productivity. Scientific Opinion Of The Science Group Of The European Alcohol And Health Forum, 2011

Anna Marie Passon, Anna Drabik, Markus Lungen: Children Affected by Parental Alcohol Problems (ChAPAPs). Economic impact, 2009

[33] Ian Gilmore, et.a.: ALCOHOL, WORK AND PRODUCTIVITY
Scientific Opinion of the Science Group of the European Alcohol and Health Forum , 2011

[34] The Causes And Costs Of Absenteeism In The Workplace, Forbes, 2013 <https://www.forbes.com/sites/investopedia/2013/07/10/the-causes-and-costs-of-absenteeism-in-the-workplace/#133bc24c3eb6>

[35] Ian Gilmore, et.a.: ALCOHOL, WORK AND PRODUCTIVITY

Scientific Opinion of the Science Group of the European Alcohol and Health Forum , 2011

[36] Alcohol harms workplace safety, productivity, News story: Two studies on IOGT International, 2016 <http://iogt.org/news/2016/07/05/alcohol-harms-workplace-safety-productivity/>

[36] Alcohol in the workplace Factsheet, Institute of Alcohol Studies, 2014

[37] Matilda Allen, Institute of Health Equity: Local action on health inequalities: Reducing the number of young people not in employment, education or training (NEET), in: Health Equity Evidence Review 3: September 2014, Public Health England

SCIENTIFIC EVIDENCE REFERENCES

[38] O'Neill, McLaughlin, Higgins, McCartan, Murphy, Gossrau-Breen: Adolescent alcohol use and school disengagement: Investigating alcohol use patterns in adolescence and pathways to being NEET (Not in Employment, Education or Training), Alcohol Research UK, 2015

[38] A Scoping Study of those young people Not in Education, Employment or Training (NEET) in Northern Ireland

[38] Staff J, Patrick ME, Loken E, Maggs JL. Teenage Alcohol Use and Educational Attainment . Journal of Studies on Alcohol and Drugs. 2008;69(6):848-858.

[38] Crum, RM, et.al.: The association of educational achievement and school dropout with risk of alcoholism: a twenty-five-year prospective study of inner-city children, in: Journal of Studies on Alcohol and Drugs, Vol. 59, Issue 3, 1998

[38] Fergusson DM, Swain-Campbell NR, Horwood LJ. Outcomes of leaving school without formal educational qualifications. New Zealand Journal of Educational Studies, 2002; 37(1): 39-55. 2000

[38] Eivers, E., Ryan, E., Brinkley, A.: Characteristics Of Early School Leavers: Results Of The Research Strand Of The 8- To 15- Year Old Early School Leavers Initiative
SDG 5 Achieve Gender equality and empower all women and girls

SDG 10 Reduced inequalities

[39] Smith, K., Foster, J.: Alcohol, Health Inequalities and the Harm Paradox: Why some groups face greater problems despite consuming less alcohol. A summary of the available evidence, Institute of Alcohol Studies, 2016

[39] Whitehead , M., Poval , S., Loring , B.: The equity action spectrum: taking a comprehensive approach. Guidance for addressing inequities in health, WHO EURO, 2014

[40] Health inequalities and population health, NICE local government briefings, 2012, <http://publications.nice.org.uk/lgb4>

[41] Belinda Loring, Alcohol and inequities. Guidance for addressing inequities in alcohol-related harm, WHO Regional Office for Europe, 2014

[42] WHO fact sheet: Intimate partner violence and alcohol, 2006

[43] Angelucci, Manuela, Love on the Rocks: Alcohol Abuse and Domestic Violence in Rural Mexico (March 2007). IZA Discussion Paper No. 2706. Available at SSRN: <https://ssrn.com/abstract=981690>

[44] Substance Abuse and Mental Health Services Administration (SAMHSA). Data Spotlight: More than 7 Million Children Live with a Parent with Alcohol Problems, 2012. Available at: <http://media.samhsa.gov/data/spotlight/Spot061ChildrenOfAlcoholics2012.pdf>.

[45] Anderson, P., Baumberg, B. (2006). Alcohol in Europe: A Public Health Perspective. Institute of Alcohol Studies, UK

SCIENTIFIC EVIDENCE REFERENCES

[46] Laslett, A-M., Catalano, P., Chikritzhs, T., Dale, C., Doran, C., Ferris, J., Jainullabudeen, T., Livingston, M., Matthews, S., Mugavin, J., Room, R., Schlotterlein, M. and Wilkinson, C. (2010). The Range and Magnitude of Alcohol's Harm to Others. Fitzroy, Victoria: AER Centre for Alcohol Policy Research, Turning Point Alcohol and Drug Centre, Eastern Health.

[46] Laslett, A-M., et.al.: Hidden harm. Alcohol's impact on children and families, 2015

Gell, L., et.al.: Alcohol's Harm to Others, 2015

Schmidt, L., et.al.: Alcohol: equity and social determinants

UNDP, Discussion Paper, Addressing the Social Determinants of Noncommunicable Diseases, 2013

SDG 11 Sustainable cities and communities

[47] Kathryn Stewart, How Alcohol Outlets Affect Neighborhood Violence, Prevention and Research Center, Pacific Institute for Research and Evaluation (PIRE)

[48] Greenaway, A., et.al.: Young People, Alcohol and Safer Public Spaces, Alcohol & Public Health Research Unit Whariki Research Group, University of Auckland, 2002

[49] Jonathan Shepherd, et. Al.: Alcohol and Violence. Breifing, 2005

[50] YouGov survey, 2014, commissioned by Swedish Youth Temperance Association (UNF), for the project "Ett Bra Uteliv" https://issuu.com/unf_pub/docs/issue

[51] Andrea Finney, Violence in the night-time economy: key findings from the research, 2014

[51] WHO: Violence prevention: the evidence, in: Series of briefings on violence prevention: the evidence, 2010

[51] Kathryn Stewart, How Alcohol Outlets Affect Neighborhood Violence, Prevention and Research Center, Pacific Institute for Research and Evaluation (PIRE)

[51] Day et al. Close proximity to alcohol outlets is associated with increased serious violent crime in New Zealand, in: AUSTRALIAN AND NEW ZEALAND JOURNAL OF PUBLIC HEALTH 2012 vol. 36 no. 1

Reducing harm from alcohol use in the community

Symposium held in Bali, Indonesia 4-6th October 2007 Organised by The Mental Health and Substance Abuse Unit (MHS) of the World Health Organization, Regional Office for South-East Asia

World Bank: Where criminal justice is not enough: Integrated urban crime and violence prevention in Brazil and South Africa (http://siteresources.worldbank.org/EXTNWDR2013/Resources/8258024-1352909193861/8936935-1356011448215/8986901-1380046989056/04a-Spotlight_4.pdf)

World Bank: Violence in the City. Understanding and Supporting Community Responses to Urban Violence, 2010

SCIENTIFIC EVIDENCE REFERENCES

SDG 12 Responsible consumption

[52] Barley, malt, beer, Agribusiness Handbook, Food and Agriculture Organization of the United Nations (FAO), 2009

[27] Water Footprint Network: Gallery – wine: <http://waterfootprint.org/en/resources/interactive-tools/product-gallery/>

[28] Water Footprint Network: Gallery – beer: <http://waterfootprint.org/en/resources/interactive-tools/product-gallery/>

[53] Statista: Beer production worldwide from 1998 to 2014 (in billion hectoliters)

[54] Buykx et al. BMC Public Health (2016) 16:1194 DOI 10.1186/s12889-016-3855-6

[55] 2017 American Institute for Cancer Research Cancer Risk Awareness Survey <http://iogt.org/news/2017/02/09/usa-less-50-know-alcohol-cancer/>

ActionAID: Calling time. Why SABMiller should stop dodging taxes in Africa, 2012

Zero Emission Research Initiative (ZERI): Beer

Bliss, S.: WATER OR WINE: CALIFORNIA FACING RECORD DROUGHT MUST PICK A SIDE, AND FAST, in Occupy.com, 2015

SDG 13 Climate action

[56] Garnett, K.: The alcohol we drink and its contribution to the UK's greenhouse gas emissions: a discussion paper. Working paper produced as part of the work of the food climate research network, Centre for environmental strategy, University of Surrey, 2007

[57] Hospido, A., Moreira, M.T. and Feijoo, G. (2005) 'Environmental analysis of beer production', Int. J. Agricultural Resources, Governance and Ecology, Vol. 4, No. 2, pp.152–162.

[58] Foster, C., Green, K., Bleda, M., Dewick, P., Evans, B., Flynn A., Mylan, J. (2006). Environmental Impacts of Food Production and Consumption: A report to the Department for Environment, Food and Rural Affairs. Manchester Business School. Defra, London.

SDG 16 Peace and justice

[59] WHO Western Pacific Regional Office News Release: WHO calls for action to protect young people from alcohol-related harm, 2016 <http://www.wpro.who.int/mediacentre/releases/2016/20160429/en/>

[59] WHO World report on child injury prevention, 2008

[59] WHO global status report on violence prevention 2014

[60] Professor Mark A. Bellis, Karen Hughes and Sara Hughes: Alcohol and Interpersonal Violence. Policy Briefing, Violence and Injury Prevention, WHO European Centre for Environment and Health, Rome WHO Regional Office for Europe, 2005

SCIENTIFIC EVIDENCE REFERENCES

[62] NIAA, Alcohol Alert, Vol.38, 1997: Alcohol, violence and aggression

[63] Institute of Alcohol Studies (IAS): ALCOHOL, DOMESTIC ABUSE AND SEXUAL ASSAULT, 2014

[64] Epidemiology of alcohol problems in the United States, NIAAA, 2005, <https://pubs.niaaa.nih.gov/publications/social/module1epidemiology/module1.html>

[65] English, D.R., Holman, C.D.J., Milne, E., Winter, M.J., Hulse, G.K., and colleagues (1995) The quantification of drug-caused morbidity and mortality in Australia 1995. Canberra: Commonwealth Department of Health and Human Services

[66] Youth violence and alcohol, fact sheet, World Health Organization, http://www.who.int/violence_injury_prevention/violence/world_report/factsheets/ft_youth.pdf?ua=1

[67] Youth violence and alcohol, fact sheet, World Health Organization, http://www.who.int/violence_injury_prevention/violence/world_report/factsheets/ft_youth.pdf?ua=1

Laslett, AM, Mugavin J., Jiang, H., Manton, E., Callinan, S., MacLean, S., Room, R.: Hidden Harm: alcohol's impact on children and families, 2015

Dhital, Rupa et al. (2002). Alcohol and Drug Use Among Street Children: A Study in Six Urban Centres. Child Workers in Nepal Concerned Center (CWIN), Kathmandu, Nepal.

SDG 17 Partnerships for the SDGs

[68] Maik Dünbier and Moses Waweru, Alcohol Taxation – A win-win measure for financing development, 2015, http://iogt.org/wp-content/uploads/2015/03/Alcohol-taxation-report_s.pdf

[69] Babor, T. et al. (2009). Alcohol: no ordinary commodity. Research and public policy. Second edition. New York: Oxford University Press.

[69] Kaiser, Kai-Alexander; Bredekamp, Caryn; Iglesias, Roberto Magno. 2016. Sin tax reform in the Philippines : transforming public finance, health, and governance for more inclusive development. Directions in development. Washington, D.C. : World Bank Group.

[69] Gerald Thomas: Price Policies to Reduce. Alcohol-Related Harm in Canada Alcohol Price Policy Series, Report 3 of 3, Canadian Centre on Substance Abuse, 2012

[69] Room, Bloomfield, Griftner, Gustafsson, Mäkelä, Österberg, Ramstedt, Rehm, Wicki, Gmel: What happened to alcohol consumption and problems in the Nordic countries when alcohol taxes were decreased and borders opened? IJADR, 2013, 2(1), 77 – 87, doi: 10.7895/ijadr.v2i1.58

[69] Sompaisam, Shield, Rehm: Alcohol taxation policy in Thailand: implications for other low- to middle-income countries, in: Addiction 2011, doi:10.1111/j.1360-0443.2011.03681.x

[69] World Economic Forum: From Burden to "Best Buys": Reducing the Economic Impact of Non-Communicable Diseases in Low- and Middle-Income Countries

[70] Collin, J., Casswell, S.: Alcohol and the Sustainable Development Goals, in: The Lancet, 2016

[70] Kamani, A.: Impact of alcohol on poverty and the need for appropriate policy, in: Alcohol: Science, Policy and Public Health, 2013
Regional Status Report on Alcohol and Health in the Americas, PAHO and WHO, 2015

SCIENTIFIC EVIDENCE REFERENCES

[71] Act!onAID: Calling time. Why SABMiller should stop dodging taxes in Africa, 2012

[71] Lanis, R., McClure R., Zimsak, M. (2017) Tax aggressiveness of alcohol and bottling companies in Australia. Canberra: Foundation for Alcohol Research and Education.

[72] Bakke Ø, Endal D.: Vested interests in addiction research and policy alcohol policies out of context: drinks industry supplanting government role in alcohol policies in sub-Saharan Africa, *Addiction*. 2010 Jan;105(1):22-8. doi: 10.1111/j.1360-0443.2009.02695.x.

[72] Giesbrecht, N.: Alcohol Policy In Canada: Reflections On The Role Of The Alcohol Industry, In: *Nordic Studies On Alcohol And Drugs*, Vol. 23. 2006
Ward P. Similarities in approaches between Big Tobacco and Big Booze: evidence of the 'Greedy Bastard Hypothesis'? *AMJ*, 2010, 3, 6, 333-334. Doi 10.4066/AMJ.2010.381

[72] McEwan, Campbell, Lyons & Swain : *Pleasure, Profit and Pain. Alcohol in New Zealand and the Contemporary Culture of Intoxication*, 2013
Act!onAID: Calling time. Why SABMiller should stop dodging taxes in Africa, 2012

[72] Bond L, Daube M, Chikritzhs T. Access to Confidential Alcohol Industry Documents: From 'Big Tobacco' to 'Big Booze'. *AMJ* 2009, 1, 3, 1-26. Doi 10.4066/AMJ.2009.43

[72] Babor, Robaina, Jernigan: Vested Interests in Addiction Research and Policy. The influence of industry actions on the availability of alcoholic beverages in the African region, in: *Addiction*, 2014

[73] Supplement: The Regulation of Alcohol Marketing: From Research to Public Health Policy, January 2017, Volume 112, Issue Supplement S1, Pages 1–127 Issue edited by: Thomas F. Babor, David Jernigan, Chris Brookes

[74] Rob Moodie, David Stuckler, Carlos Monteiro, Nick Sheron, Bruce Neal, Thaksaphon Thamarangsi, Paul Lincoln, Sally Casswell, on behalf of The Lancet NCD Action Group, Profits and pandemics: prevention of harmful effects of tobacco, alcohol, and ultra-processed food and drink industries, *The Lancet* 2013

[75] The commercial determinants of health, Kickbusch, Ilona et al. *The Lancet Global Health*, Volume 4, Issue 12, e895 - e896

[75] Buse et al. *Globalization and Health* (2017) 13:34 DOI 10.1186/s12992-017-0255-3

[76] Babor, Robaina, Jernigan: The concentration of the global alcohol industry and its penetration in the African region, in: *Addiction*, 2013

[76] Bond, L., Daube, M., Chikritzhs, T. Selling addictions: Similarities in approaches between Big Tobacco and Big Booze. *AMJ* 2010, 3, 6, 325-332 Doi 10.4066/AMJ.2010.363

Published by IOGT International

Editors: Maik Dünnbier and Kristina Sperkova

Design: Every Single Moment
Layout: Adin Pinjo

IOGT International contact:
Maik Dünnbier:
Maik.duennbier@iogt.org
Twitter: @maikduennbier
+46 721 555 036

Kristina Sperkova
Kristina.sperkova@iogt.org
Twitter: @kristinsperkova
+46 72211 3070

© IOGT International, Stockholm, Sweden, July 2016.

Use of this material in other publications is specifically permitted. IOGT International requests that such use be appropriately referenced with a citation to this document.

www.iogt.org



IOGT International is the premier global interlocutor for evidence-based policy measures and community-based interventions to prevent and reduce harm caused by alcohol and other drugs.

