

Youth, alcohol use and HIV in Tanzania

EVIDENCE BRIEF
>> MAY 2018

Authors: Haika Osaki and Gerry Mshana

What is the issue?

Alcohol is an important risk factor for HIV worldwide. In 2016, 73% of new HIV infections among adolescents occurred in Africa¹ – despite a decline in other populations – the prevalence among youth is increasing. Studies show that alcohol use influences behaviours such as multiple partnerships, unsafe sex and transactional sex that in turn increase the risk of contracting HIV. Efforts to address alcohol consumption in this region have mainly taken the form of interventions to reduce individual alcohol consumption, but these have not, in general, proved effective. The challenge is to reach a better understanding of alcohol as a structural driver of HIV risk among youth.

What have we learned?

Research conducted by STRIVE partners, the National Institute for Medical Research (NIMR) and the Mwanza Intervention Trials Unit (MITU), and drawing on a synthesis of existing research in the field, gives evidence on three main issues.

1. Alcohol use is a significant problem among young people, particularly young men, and increases HIV risk and other health harms.
2. Alcohol is widely available, affordable, aggressively promoted and conveniently packaged for purchase from formal and informal sellers in residential neighbourhoods.
3. Alcohol promotion, availability, packaging and promotion influence alcohol consumption among young people.

From this work, STRIVE recommends research efforts to:

- Continue building the evidence base on alcohol use and youth and alcohol initiation in East Africa.
- Continue building the evidence base on the availability, affordability and promotion of alcohol.
- Ensure that evidence on youth drinking and health harms reaches the general public, policy makers and other intermediary partners.
- Engage with government institutions responsible for alcohol legislation to contribute evidence to inform policymaking.



1 Alcohol use is a significant problem among young people, particularly among young males and increases HIV risk and other health harms.

Evidence from the field

Harmful alcohol use contributes to over 6% of deaths globally and over 200 diseases and injuries that affect young people disproportionately.² Studies exploring youth drinking in Tanzania show an increase in underage drinking among young people. Although the general prevalence of alcohol use in the country is unknown, a few studies have looked at alcohol use among groups such as students, bar workers and young people in general. A study conducted in Kilimanjaro region among students found a prevalence of alcohol use of 26.2% for young men and 15.5% for young women.³ Epidemiological studies show evidence of a link between alcohol use and increased risk of HIV among young people. Alcohol use influences sexual behaviours associated with HIV risk such as multiple partnerships, unprotected sex and transactional sex.^{4,5}

STRIVE findings

A study conducted by STRIVE in Kilimanjaro and Mwanza among young people reported a prevalence of 20–45% of current alcohol use among young men and 12–47% of current use among women.⁶ To better understand the prevalence of alcohol use among youth in Tanzania, STRIVE investigated how young people start drinking. This study found that, similar to other contexts, young people in Tanzania start consuming alcohol early and are influenced by their social environment, which includes parents, peers and intimate partners.⁷ Further, more young men reported being current drinkers, and men initiated drinking earlier than young women did. This study also found that one of the consequences of alcohol use among young people is engaging in risky sexual behaviour that leads to unplanned pregnancy.⁷

A 2015 STRIVE study showed that alcohol use is associated with a high number of sexual partners among young people, further highlighting increased HIV risk as a result of alcohol use.⁶

“

...you drink Viroba [because] they are the cheapest, the mini packet of alcohol is sold at three hundred and fifty shillings... it is different from the beers for instance Castle or Serengeti which cost 1,800 shillings. So then you get drunk... [you] get drunk by spending 40,000 and I can get drunk by spending 700 shillings only.”

Youth participant in the photovoice study



Now banned, alcohol 'sachets' (*viroba*) were cheap and easy to conceal. Photograph by a youth participant in the photovoice study.

2 Alcohol is widely available, affordable and aggressively promoted and conveniently packaged for purchase in communities.

Evidence from the field

Evidence from Ghana, Nigeria and the Gambia shows that youth are intensively targeted by aggressive alcohol marketing⁸ and in developing new markets, the alcohol industry can be seen to be targeting youth and specifically young women in advertising. Efforts to target young consumers of alcohol also include the packaging of alcohol in colourful bottles and adding fruity flavours such as pineapple and strawberry to alcoholic beverages.⁸ Additionally, efforts to target youth also include the rise in 'cheap alcohol' to appeal to lower income consumers, young people among them.⁹

STRIVE findings

NIMR and MITU research into alcohol use among youth in Tanzania revealed high prevalence of

alcohol use along with intensive exposure to alcohol advertising and the wide availability of alcohol in their communities.⁶ This study also found that cheap, hard liquor packaged in sachets (small plastic packets, known as *viroba*) is preferred among young people because it is affordable and convenient for consumption.¹⁰ STRIVE's participatory research and GIS mapping study, investigating in greater depth the availability, promotion, and affordability of alcohol for young people in Tanzania and its impact, found that:

- alcohol outlets and advertisements are densely clustered close to schools
- alcohol sales continued well beyond legislated hours
- messages in alcohol advertisements exert a strong appeal for young people

3 Alcohol promotion, availability and packaging influence alcohol consumption among young people.

Evidence from the field

Studies show that higher density of alcohol outlets influences higher consumption.¹¹ Evidence from developed countries demonstrates a link between alcohol advertising, marketing and consumption among young people.⁸ These and other similar studies indicate that interventions working at the individual level to reduce alcohol consumption among young people have limited effect – it is necessary to address the structural level at the same time. Evidence shows that structural interventions – regulating alcohol pricing, packaging, promotion and availability – can mitigate alcohol consumption and reduce alcohol-related harm among young people.¹²

STRIVE findings

Evidence from STRIVE partners, NIMR and MITU, shows that, cheap, hard alcohol packaged in sachets influences alcohol consumption among young people in Tanzania.¹⁰ STRIVE's study of youth and alcohol use, exploring the impact of alcohol availability, promotion, and affordability among young people found that:

- density of alcohol outlets in communities meant that alcohol is widely available and easy for young people to access
- youth pay attention to messaging on alcohol advertisements
- this messaging plays an important part in convincing youth to consume alcohol

“

“When they say in this advert ‘a champion beer for champion men’ it means that it is especially for men and young men, and it’s true that a lot of [men] use that beer. So, when a young or grown man passes and sees the advert it gives them the confidence that they should use this type of beer because maybe it will make them a champ, it will give them physical strength... so it persuades him to drink it.”

Youth participant in the photovoice study

Impact

Impact so far

- STRIVE partners from NIMR and MITU have been invited to ongoing meetings and discussions with the Ministry of Health, Community Development, Gender, Elderly and Children on the formulation of a national alcohol policy. In this effort, they have shared evidence on the exposure of youth to alcohol, to contribute to the government's process of developing a public-health oriented national alcohol policy that protects young people, as well as the general population, from alcohol-related harms.
- In a dissemination meeting in March 2015, STRIVE researchers from NIMR and MITU shared findings on the use of alcohol sachets among youth in Tanzania, the reasons that hard liquor in this form appeals to youth and the implications for health and the environment. Widespread reporting on the meeting in the Tanzanian media and blogosphere triggered public conversation about the harmful alcohol sachets. This contributed to the Ministry of Environment's subsequent banning of sachet production, distribution and sales in March 2016, citing environmental and health reasons.

Potential impact in future

- Evidence from NIMR and MITU on youth alcohol use in Tanzania has the potential to build and support evidence-based interventions targeting youth alcohol use in Tanzania.
- NIMR and MITU will, it is hoped, continue to provide technical support to non-governmental and community-based organisations (NGOs and CSOs) addressing youth alcohol consumption, as well as to government.

More information:

<http://strive.lshtm.ac.uk/themes/alcohol-and-hiv>

STRIVE research consortium

STRIVE is a Research Programme Consortium (RPC) led by the London School of Hygiene and Tropical Medicine, working with six key research partners in Tanzania, South Africa, India and the USA. STRIVE provides new insights and evidence into how different structural factors, including gender inequality and violence, poor livelihood options, stigma, and heavy alcohol use, work to influence HIV vulnerability and undermine the effectiveness of the HIV response.

STRIVE is supported by UKaid from the Department for International Development. However, the views expressed do not necessarily reflect the department's official policies.

References

1. UNICEF 2017 Statistical Tables
2. WHO. Global Status Report on Alcohol and Health. Geneva: World Health Organisation, 2014.
3. Mnyika KS MM, Klepp KI. Prevalence of and predictors of substance use among adolescents in rural villages of Moshi district, Tanzania. *East Africa Journal of Public health*. 2011;8(1):1-5.
4. Fisher JC, Bang H, Kapiga SH. The association between HIV infection and alcohol use: a systematic review and meta-analysis of African studies. *Sexually transmitted diseases*. 2007;34(11):856-63.
5. Chersich MF, Rees HV. Causal links between binge drinking patterns, unsafe sex and HIV in South Africa: its time to intervene. *International journal of STD & AIDS*. 2010;21(1):2-7.
6. Francis JM, Weiss HA, Mshana G, Baisley K, Grosskurth H, Kapiga SH. The Epidemiology of Alcohol Use and Alcohol Use Disorders among Young People in Northern Tanzania. *PloS one*. 2015;10(10):e0140041.
7. Osaki et al (submitted). Social space and alcohol initiation among youth in Northern Tanzania.
8. De Bruijn A. Alcohol marketing practices in Africa: findings from the Gambia, Ghana, Nigeria AND Uganda. Regional Office for Africa: World Health Organization., 2011.
9. Rabinovich L, Brutscher P-B, de Vries H, Tiessen J, Clift J, Reding A. The affordability of alcoholic beverages in the European Union.
10. Mshana et al (submitted). Micro packaging of liquor in sachets and the emergence of harmful drinking norms among young people in Northern Tanzania.
11. Popova S, Giesbrecht N, Bekmuradov D, Patra J. Hours and days of sale and density of alcohol outlets: impacts on alcohol consumption and damage: a systematic review. *Alcohol & Alcoholism*. 2009;44(5):500-16.
12. Anderson P, Chisholm D, Fuhr DC. Effectiveness and cost-effectiveness of policies and programmes to reduce the harm caused by alcohol. *The lancet*. 2009;373(9682):2234-46.

Acknowledgements

This analysis is the work of STRIVE colleagues, in particular Haika Osaki (National Institute for Medical Research, Mwanza Centre), Gerry Mshana (National Institute for Medical Research, Mwanza Centre) and Annie Holmes (London School of Hygiene and Tropical Medicine).

Suggested citation

Osaki, H. Mshana, G. STRIVE Evidence Brief: Youth, Alcohol Use and HIV Risk; National Institute of Medical Research, Mwanza, Tanzania; London School of Hygiene & Tropical Medicine, London, UK; 2018.

