

ALCOHOL POLICY IN TANZANIA

SUMMARY

Harmful alcohol use is associated with a number of HIV risk factors. A national alcohol policy – informed by public health evidence – will regulate alcohol availability and marketing in Tanzania. This in turn will reduce health and social harms, including HIV risk, especially among young people.

Research by STRIVE partners in Tanzania has informed efforts by the Tanzanian government to draft such a policy (under review). The Ministry of Health, Community Development, Gender, Elderly and Children (MoHCGEC) has drawn evidence and guidance from researchers at Tanzania's National Institute for Medical Research (NIMR) and its affiliate, the Mwanza Intervention Trials Unit (MITU).

WHAT IS THE ISSUE?

Harmful use of alcohol is an important cause of disease globally and contributes significantly to the HIV and AIDS epidemic¹. Research has demonstrated that alcohol use often heightens sexual risk through related behaviours: multiple sexual partners, inconsistent condom use and transactional sex². In addition, alcohol can accelerate the progression of HIV infection and impede adherence to treatment. Men who binge drink are more likely to have multiple partners and to be violent in their relationships – a clustering of behaviour that puts all involved at increased risk of HIV infection³.

Drinking patterns in Tanzania have been changing in ways that amplify these risks. For instance, greater numbers of young people start drinking at younger ages and drink increasingly heavily. In Tanzania, as worldwide, the alcohol industry targets young people as a potential new market, producing drinks that appeal to young people, that are flavoured (coffee or orange, for example) and that are packaged in affordable, easily concealed, one-shot 'sachets'⁴. Recent evidence from Europe confirms that alcohol advertising influences drinking among young people⁵, and this influence has particular ramifications in sub-Saharan Africa, the region most severely affected by the HIV epidemic.

International evidence has established the health harms and HIV risk is associated with alcohol consumption, but little data had been previously collected or analysed in Tanzania specifically.



The marketing of alcohol is a factor in increased drinking in general and early initiation in particular.

STRIVE research by NIMR-MITU has filled that gap and established certain key facts.

- **Drinking levels, especially among young people, present a growing problem** in Tanzania and raise critical questions about alcohol marketing strategies and availability. This underlines the need for Tanzania's national alcohol policy to be grounded in public health concerns, particularly given the alcohol industry's influence.
- **Tanzania has a range of laws in place to regulate alcohol production, marketing and consumption, but their implementation and enforcement have been limited** both at national and local levels. Responsibility for enforcing alcohol laws is spread across a number of government agencies and ministries with limited coordination.
- **The Tanzanian government had been developing an overarching national alcohol policy**, but the process had lacked evidence on the health and social repercussions of alcohol consumptions.

ADDRESSING THE ISSUE

In other contexts, structural interventions have been successful in lowering drinking levels and thereby reducing harmful health outcomes and alcohol-related costs (for example from traffic accidents, working days lost, domestic and other forms of personal violence, treatment of disease). Examples of effective structural measures include raising prices and/or taxes on alcohol, prohibiting or limiting alcohol advertising and setting limits on the proximity of alcohol outlets to schools⁶.

RESEARCH

STRIVE research (detailed on page 3) has resulted in the following outputs:

- a technical brief on how to measure alcohol-related HIV risk
- a systematic review and meta-analysis of the prevalence of alcohol use among young people in eastern Africa
- evidence and analysis of the epidemiology of alcohol use and related disorders among young people in northern Tanzania
- a validated tool to measure alcohol dependence in young people
- social science research into the production and targeted marketing of 'sachets' (small units of hard liquor) and their harmful impact on Tanzanian young people's drinking norms and health risks
- geographic mapping and participatory documentation of the density of alcohol venues close to schools and youth centres; the nature and intensity of alcohol marketing and pricing aimed at young people; and the impact on young people's families and lives

HOW HAS STRIVE EVIDENCE INFORMED POLICY?

As part of research uptake, NIMR-MITU mapped the context through a policy review and interviews with a wide range of government and NGO representatives involved in work on both alcohol and young people.

The resulting report⁷ provides a compendium of the country's regulations, policies, enforcement agencies, NGO activities and debates about alcohol. The mapping process raised the interest of numerous potential end-users, including some key decision-makers. As well as supporting renewed efforts to draft the national policy, the process created a network of relationships and a sense of ownership of the research.

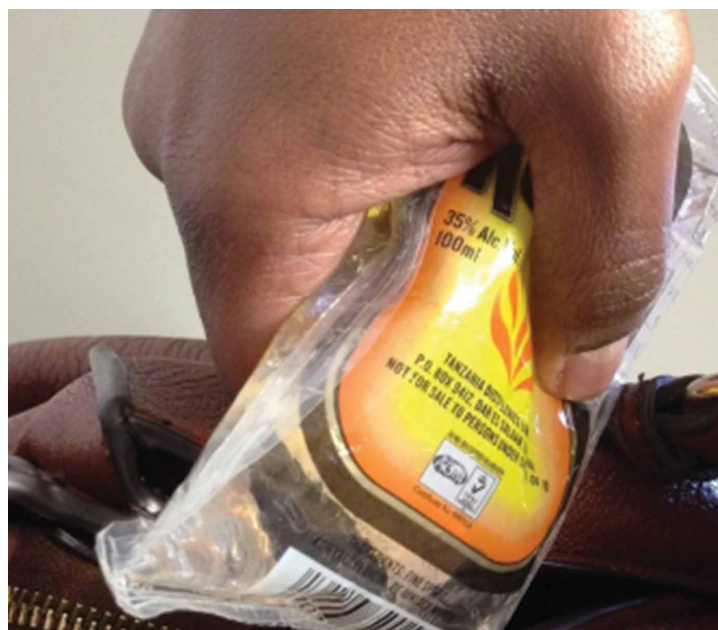
Links forged through the mapping exercise led government officials to invite NIMR-MITU to contribute to the formulation of the alcohol policy. STRIVE researchers have participated in a number of working meetings to draft and review the national alcohol policy, their contributions were acknowledged in a 2016 letter of appreciation from the MoHCGEC. MITU Scientific Director, Dr Saidi Kapiga, and NIMR Senior Scientist Dr Gerry Mshana, in particular, have been actively involved as invited technical advisors.

STRIVE convened a landmark event on the road to impact: a one-day meeting in Dar-es-Salaam on 25 March 2015 with key stakeholders in policy and practice related to alcohol and health: government representatives, the Tanzania Network against Alcohol Abuse and other NGOs, the STRIVE team and the media.

Presentations included an update on the policy development process as well as STRIVE research.

The meeting and the points raised there received considerable coverage in the national media, most of it in Kiswahili (the official national language). This increased public interest and advocacy in tandem with the Ministry's efforts.

Another study, employing GIS mapping and participatory photovoice by young people, yields not only qualitative findings and images but also a group of young people whose research and experiences – presented in person to policy-makers, media and the public – offer potential impact in the next stages of the process: the review and (it is hoped) a national alcohol policy that is evidence-informed and public health oriented.



Sachet of alcohol on sale in Tanzania.

2017 UPDATE: BAN ON ALCOHOL SACHETS

On 1 March 2017, the Tanzania government officially issued a ban on the import, manufacturing, sale and consumption of the alcohol sachets, known as *viroba*: small amounts (50ml or 100ml) of hard liquor packaged in plastic. The governments of Ivory Coast, Senegal, Malawi and Rwanda have also banned the sachets.

In defending the ban, the government cited environmental pollution and the need to protect youth from harmful alcohol use. Officials from the Ministry of Health's Mental Health and Substance Abuse Unit confirmed that NIMR findings on the harmful impact of sachets on young people contributed to this legislation.

STRIVE RESEARCH ON ALCOHOL AND HIV IN TANZANIA



AUTHORS AND TITLE	PUBLISHED	OVERVIEW
Neke, N: HIV programming for young people in Tanzania: Existing structures and alcohol-related policies. A Situation Analysis Report	2012, available on line and circulated as reference within working groups of Ministry of Health and Social Welfare (MOSHW) and Tanzania Commission for AIDS (TACAIDS) working groups. http://strive.lshtm.ac.uk/landscape-analyses	As the foundation for research uptake, NIMR's then lead on KiA (Knowledge into Action), Dr Nyasule Neke, made a scoping study of policy and programming related to both alcohol and adolescents from a public health standpoint. The resulting document set the stage for NIMR-MITU's effective research uptake efforts. Adolescent health and programming are covered in this landscape analysis, as well as alcohol, and this important dual focus and intersection echoes through the research and the research uptake.
Fritz K, Kapiga S, Heise L, Francis J, for the STRIVE Working Group on Alcohol and HIV: Technical brief: Measuring alcohol-related HIV risk	STRIVE website 2013. http://strive.lshtm.ac.uk/resources/technical-brief-measuring-alcohol-related-hiv-risk	Researchers need comparable measurements and tools in order to clarify associations between alcohol and other factors, measure the magnitude of the problem and design interventions and argue for policies to address it. To meet this need for consistent measurement, the STRIVE Working Group on Alcohol and HIV – co-led by NIMR-MITU – produced and use this brief.
Francis JM, Grosskurth H, Changalucha J, Kapiga SH, Weiss HA: Systematic review and meta-analysis: prevalence of alcohol use among young people in eastern Africa	<i>Trop Med Int Health</i> . 2014 Apr;19(4):476-88. doi: 10.1111/tmi.12267. Epub 2014 Jan 31. http://strive.lshtm.ac.uk/resources/systematic-review-and-meta-analysis-prevalence-alcohol-use-among-young-people-eastern	To estimate the prevalence of alcohol use and determine the extent of use of standardised screening questionnaires in alcohol studies, the authors searched five databases: MEDLINE, EMBASE, Global Health, Africa-wide and PsycINFO. Their systematic review and meta-analysis found that reported alcohol use and problem drinking were common among diverse groups of young people aged 15–24 in eastern Africa.
Francis JM, Weiss HA, Mshana G, Baisley K, Grosskurth H, Kapiga S: The Epidemiology of Alcohol Use and Alcohol Use Disorders among Young People in Northern Tanzania	<i>PLOS ONE</i> October 7, 2015. http://dx.doi.org/10.1371/journal.pone.0140041 http://strive.lshtm.ac.uk/resources/epidemiology-alcohol-use-and-alcohol-use-disorders-among-young-people-northern-tanzania	A cross-sectional survey among four groups of young people aged 15–24 years old (secondary school students, college/university students, employees of local industries and casual labourers) in two regions (Kilimanjaro and Mwanza), this study provides information on demographics, alcohol use and behavioural factors. Using the Alcohol Use Disorder Identification Test (AUDIT) and estimating the quantity and frequency of alcohol consumption using the timeline-follow-back-calendar (TLFB) method, the researchers determined (fairly high) patterns of past-year use of alcohol by gender and group.
Francis JM, Helander A, Kapiga SH, Weiss HA, Grosskurth H: Validation of the MINI (DSM IV) Tool for the Assessment of Alcohol Dependence among Young People in Northern Tanzania Using the Alcohol Biomarker Phosphatidylethanol (PEth)	<i>Int. J. Environ. Res. Public Health</i> 2015, 12(11), 14021-14033; doi: http://dx.doi.org/10.3390/ijerph121114021 http://strive.lshtm.ac.uk/resources/validation-mini-dsm-iv-tool-assessment-alcohol-dependence-among-young-people-northern	A study to validate the MINI DSM (IV) tool to assess alcohol dependence among young people, this work provides insights for further research as well as confirming for regulatory authorities in Tanzania that these and future findings can be relied upon.
Mshana, G: Micro Packaging of Hard Liquor in Sachets and the Emergence of Harmful Drinking Norms among Young People in Northern Tanzania	STRIVE Learning Lab webinar, 2014 – Alcohol, Young People and HIV Risk in Tanzania http://strive.lshtm.ac.uk/resources/alcohol-youngpeople-and-hiv-risk-tanzania-gerry-mshana . Also presented within working groups of Ministry of Health and Social Welfare (MOSHW) and Tanzania Commission for AIDS (TACAIDS). Paper forthcoming.	Social science research into the production and targeted marketing of 'sachets' (small units of hard liquor) details the harmful impact on Tanzanian young people's drinking norms and health risks, as well as identifying innovative options for further research. Not yet published, this study has raised considerable interest in a variety of presentations, including at a STRIVE colloquium on alcohol and HIV (London, August 2013).
STRIVE: Youth and Alcohol: Understanding the role of alcohol availability, promotion and pricing on young people's sexual health and safety	Forthcoming	Mwanza is implementing the Tanzanian study in STRIVE's three-country comparative research (with India and South Africa) using GIS mapping and participatory photovoice among other methods to explore and document the proximity and density of alcohol venues to schools and youth centres; the nature and intensity of alcohol marketing and pricing aimed at young people; and the impact on young people's families and lives.

WHAT DID WE LEARN ABOUT RESEARCH UPTAKE?

- The research uptake strategy built on previous work, networks and institutional positioning. For example, as the Tanzanian government's medical research body, NIMR has entrée into government ministries. To undertake the initial landscape analysis, Dr Neke enlisted the support of senior Ministry of Health officials in setting up a series of appointments.
- The first round of engagement was based on asking questions rather than giving answers or presenting findings. As well as providing the information that NIMR-MITU was seeking, this approach established a process of exchange and interaction between researchers and end-users.
- Engagement consisted of both creating some opportunities and responding to others. STRIVE invited potential end-users to a number of engagement events – notably, a meeting in Dar-es-Salaam in March 2015 – but also participated in structures and processes created by others (particularly TACAIDS and the Ministry of Health).
- Research uptake required time commitment from the team. The leadership and participation of respected senior researchers has had particular impact.
- Researchers from NIMR and MITU preserve their clearly defined role as scientists, at the same time as ensuring that findings are available to those who are positioned to use evidence in advocacy and action.
- The initial designers of the STRIVE consortium anticipated some resistance from researchers to shifting from 'dissemination' to 'research uptake'. STRIVE therefore allocated specific resources and staffing to guide and support uptake.

Acknowledgements

This case study was prepared by Daniel Nyato, Dr Gerry Mshana and Annie Holmes, with input from Dr Katherine Fritz and other members of the STRIVE Working Group on Alcohol and HIV.



Dr Saidi Kapiga, MITU Scientific Director and Professor of Epidemiology and International Health at London School of Hygiene & Tropical Medicine, interviewed by the media at the close of the March 2015 engagement meeting.

References

1. 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. Epub 2007/12/01. doi: 10.1097/OLQ.0b013e318067b4fd. PubMed PMID: 18049422.
2. Weiser SD, Leiter K, Heisler M, McFarland W, Korte FP-d, DeMonner SM, et al. A Population-Based Study on Alcohol and High-Risk Sexual Behaviors in Botswana. *PLoS Med*. 2006;3(10):e392. doi: 10.1371/journal.pmed.0030392.
3. Chersich MF, Rees HV. Causal links between binge drinking patterns, unsafe sex and HIV in South Africa: it's time to intervene. *International journal of STD & AIDS*. 2010;21(1):2-7. Epub 2009/12/24. doi: 10.1258/ijsa.2000.009432. PubMed PMID: 20029060.
4. Singer M. Toward a political-economy of alcoholism: the missing link in the anthropology of drinking. *Soc Sci Med*. 1986;23(2):113-30. Epub 1986/01/01. PubMed PMID: 3529426.
5. de Bruijn A, Tanghe J, de Leeuw R, Engels R, Anderson P, Beccaria F, et al. European longitudinal study on the relationship between adolescents' alcohol marketing exposure and alcohol use. *Addiction (Abingdon, England)*. 2016;111(10):1774-83. Epub 2016/08/04. doi: 10.1111/add.13455. PubMed PMID: 27486952.
6. South African National Liquor Policy (2016), 1.6.8, page 11. http://www.gov.za/sites/www.gov.za/files/40321_gon1208.pdf
7. Neke, N: HIV programming for young people in Tanzania: Existing structures and alcohol-related policies. A Situation Analysis Report. Unpublished, 2012; available on line and circulated as a reference within working groups of Ministry of Health and Social Welfare (MOSHW) and Tanzania Commission for AIDS (TACAIDS) working groups. <http://strive.ishtm.ac.uk/landscape-analyses>

Suggested citation

Nyato, D., Mshana, G., Holmes, A., Fritz, K., STRIVE Impact Case Study: Alcohol Policy in Tanzania; National Institute of Medical Research, Mwanza, Tanzania; International Center for Research on Women, Washington D.C., USA; London School of Hygiene and Tropical Medicine, London, UK; 2017.

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