



WHO's Regional Strategy for Africa: Reducing harmful use of alcohol

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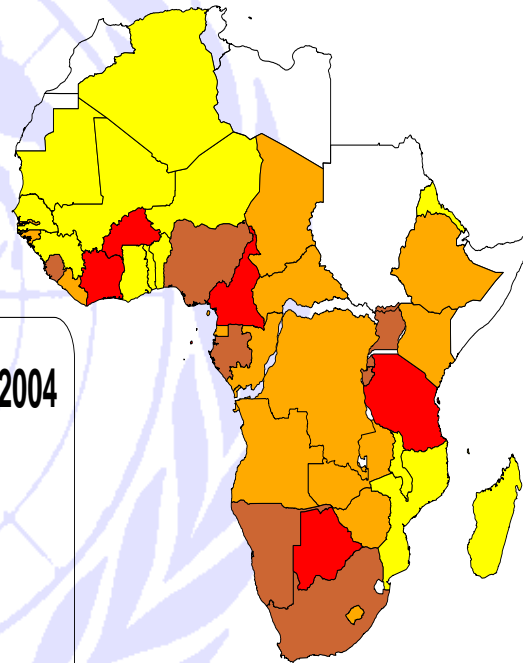
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Overview

- The overall adult per capita consumption in 2004 was estimated to be 6.2 litres of pure alcohol
 - 3.0 litres for women
 - 9.5 litres for men



Adult per capita consumption of alcohol in WHO AFRICAN Region, 2004



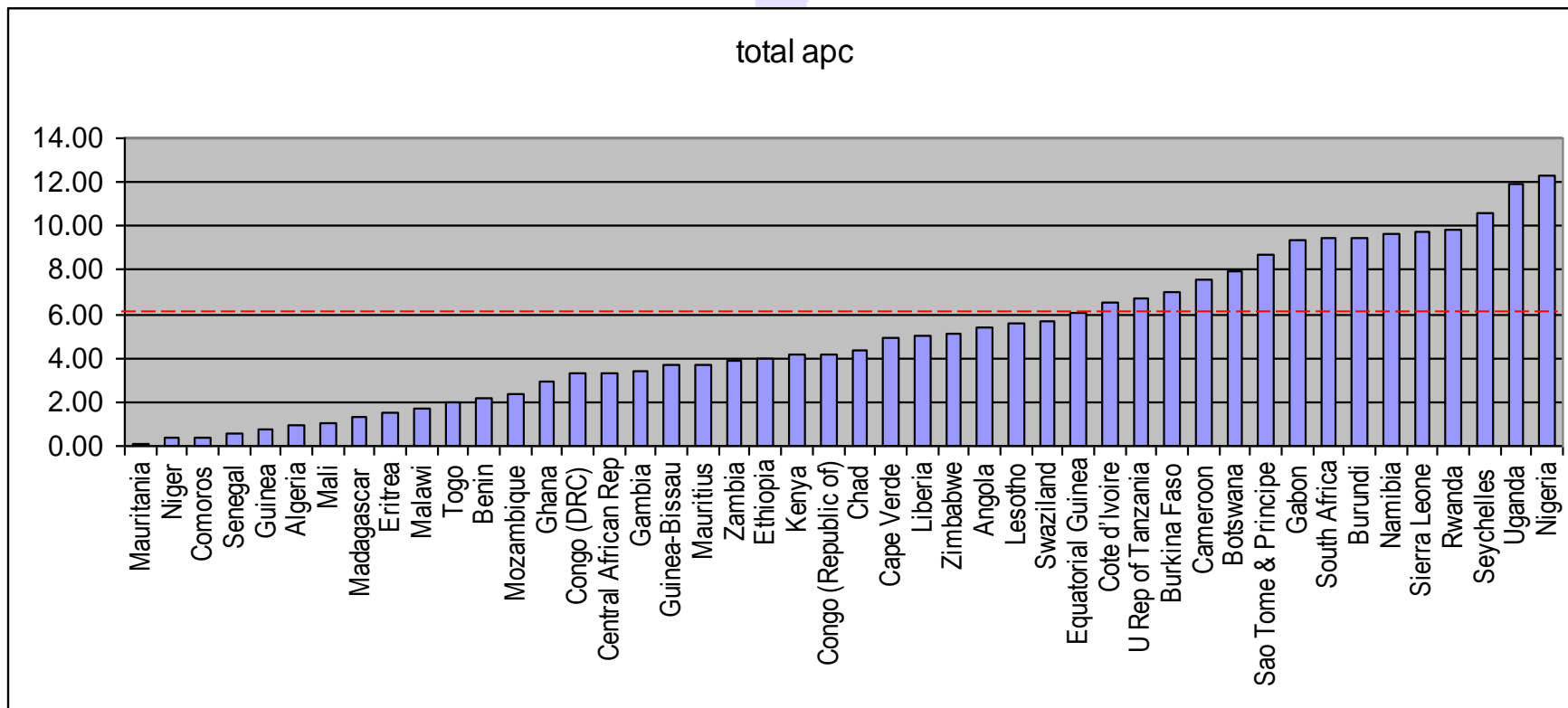
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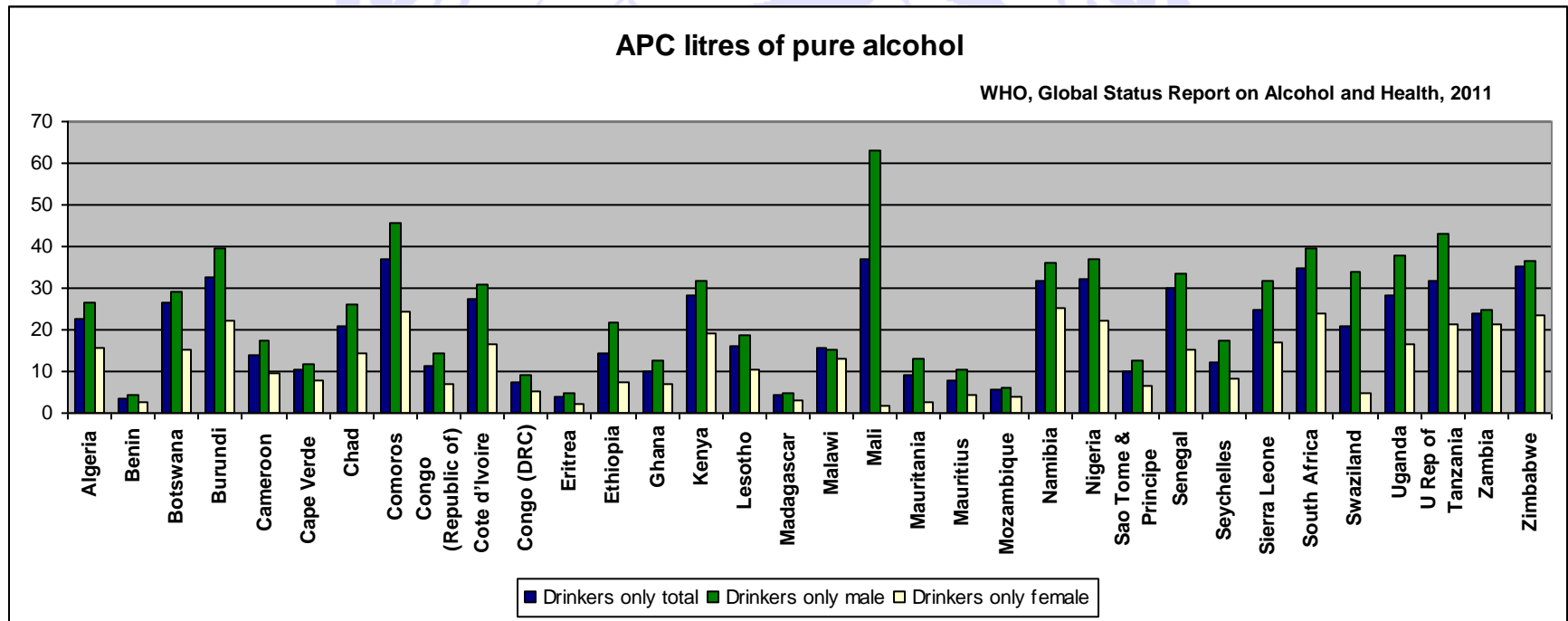
Overview





Overview

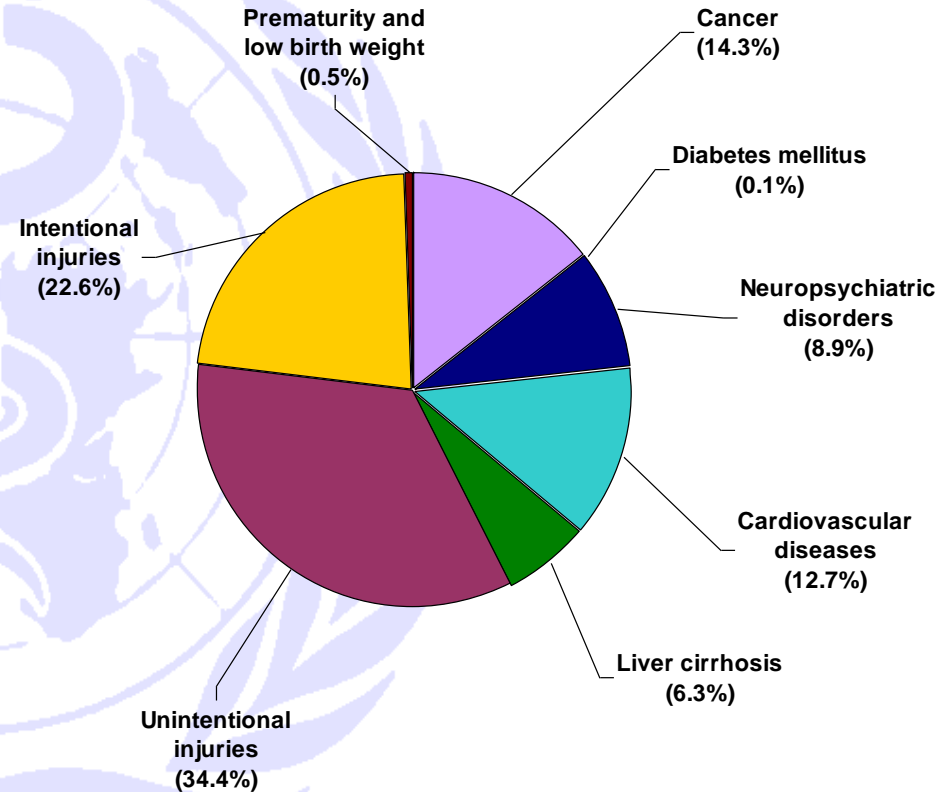
- 7 out of 10 adults in the region abstain from alcohol
- Drinkers drink at a markedly higher level → up to 37L pure alcohol → increased risk of harm and premature death





Overview

- 2.4% of all deaths in the region are attributable to alcohol → injuries, cancer, cardiovascular diseases and mental disorders;
- The Region has the highest prevalence of heavy episodic drinking → 25.1%



**WHO, Global Status Report on Alcohol and Health, 2011*



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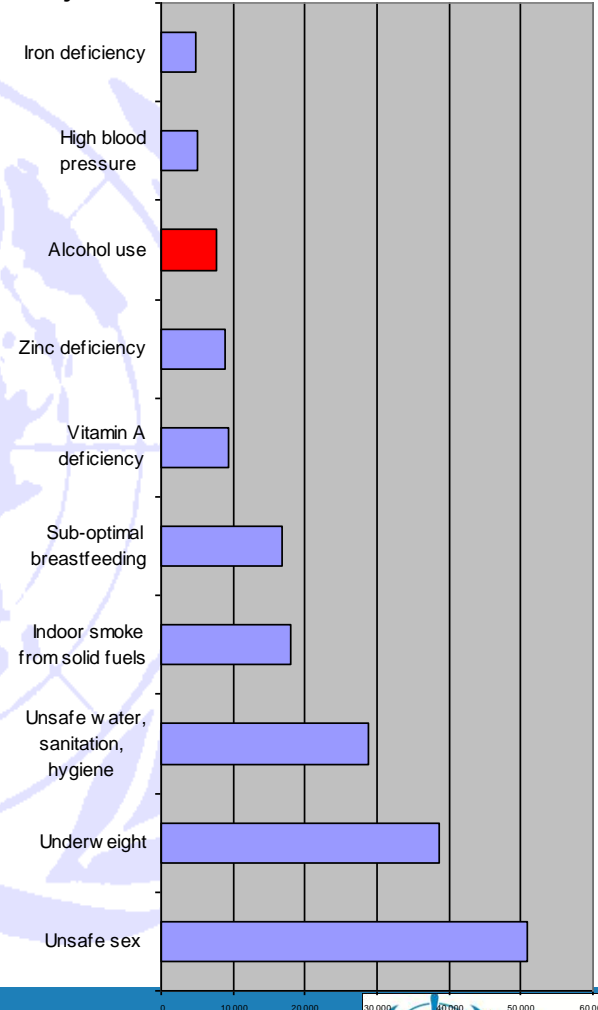
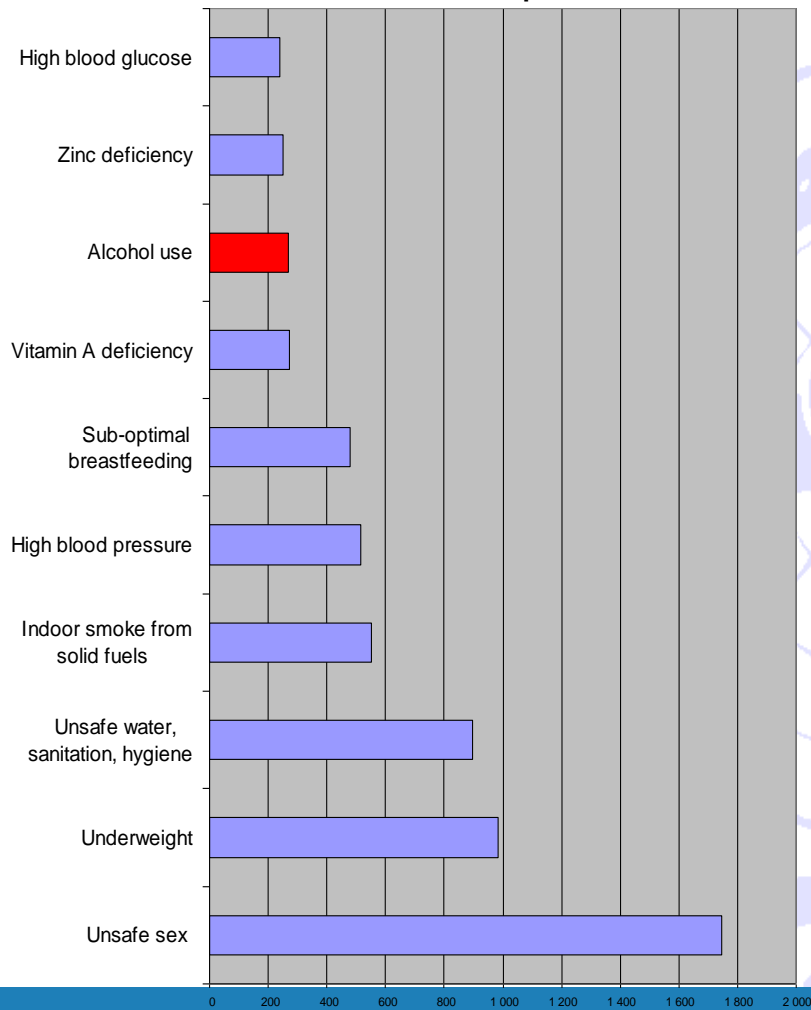


Overview

DEATHs (000)

DALYs (000)

Results from the Comparative Risk Assessment for the year 2004: major causes of Death & DALYs in Africa



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Overview

Source: WHO

Mortality in AFRO attributable to risk factors

	Risk factor	Attributable deaths
1	Unsafe sex	1,745,773
2	Underweight	982,163
3	Unsafe water, sanitation, hygiene	896,042
4	Indoor smoke from solid fuels	551,430
5	High blood pressure	515,499
6	Sub-optimal breastfeeding	478,625
7	Vitamin A deficiency	273,215
8	Alcohol use	268,846
9	Zinc deficiency	248,700
10	High blood glucose	240,906
11	Physical inactivity	202,277
12	Overweight and obesity	166,269

	Risk factor	Attributable deaths
13	Tobacco use	145,447
14	Low fruit and vegetable intake	88,832
15	Iron deficiency	87,463
16	High cholesterol	83,355
17	Occupational risks	77,466
18	Urban outdoor air pollution	61,338
19	Unmet contraceptive need	59,604
20	Global climate change	56,642
21	Unsafe health care injections	29,625
22	Lead exposure	9,418
23	Illicit drug use	8,789
24	Child sexual abuse	4,222



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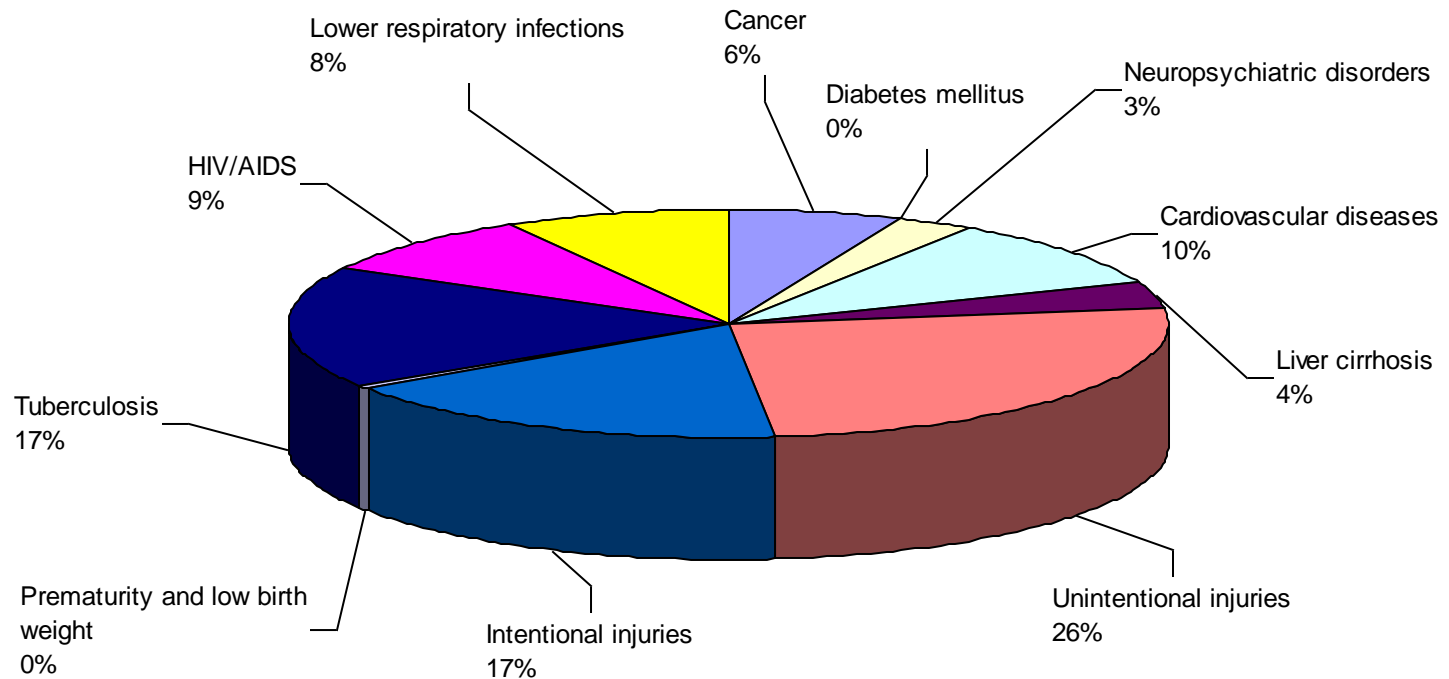
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Overview

Alcohol attributable deaths in African Region (HIV and TB)



alcohol attributable deaths in the Region to 3.3% (372,500)



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Regional activities

2007

Situation analysis
AFR/RC57/14

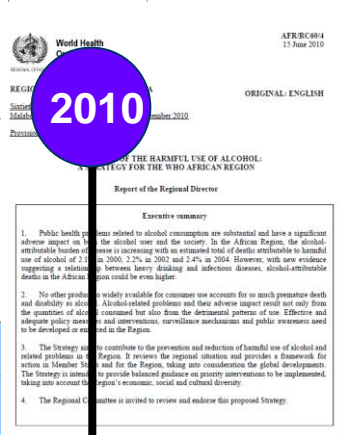
2008

AFR Regional consultation
Actions to reduce harmful use
AFR/RC58/3

2008-9

Regional Strategy to reduce harmful use of alcohol
MAMPA project (I)

2010



2011

Regional network WHO national counterparts
Regional Action Plan 2012-2020
Handbook for action, MAMPA project (II)
Alcohol, health and policy responses: status report

Global Survey on Alcohol and Health (AFRO 46 countries)

Monitoring Alcohol Marketing in Africa



FINDINGS OF MONITORING EXERCISES IN THE GAMBIA, GHANA, NIGERIA AND UGANDA



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Global and Regional Alignment

Global Strategy 2010	Regional Strategy 2010
Leadership, awareness and commitment	Leadership, coordination and partners' mobilization
Health services' response	Health sector response
Community action	Awareness and community action
Drink-driving policies and countermeasures	Drink-driving policies and countermeasures
Availability of alcohol Pricing policies	Accessibility, availability and affordability of alcohol
Marketing of alcoholic beverages	Regulating alcohol marketing
Harm reduction approaches	Information based public education
Reducing the public health impact of illegal or informal alcohol	Illegally and informally produced alcohol
Monitoring and surveillance	Strategic information, surveillance and research
	Resource mobilization, appropriate allocation and integrated approach



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Challenges for implementation

- ◆ Low priority
- ◆ Vertical programmes
- ◆ Competing interests & reduced funding opportunities
- ◆ Inadequate regulatory frameworks to tackle RFs and key determinants
- ◆ Weak national health systems 



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Challenges for implementation

- ◆ **Key components of health system**
 - ◆ **Leadership and governance:** absence of comprehensive policies with an integrated, multisectoral approach
 - ◆ **Service delivery:** routine screening, brief interventions and treatment are nonexistent or inappropriate ; weak case management
 - ◆ **Health workforce:** scarcity of human resources with inadequate training
 - ◆ **Information:** weak information systems
 - ◆ **Finance:** underfunded structures and care



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Evidence-base Policies

Regional Strategy 2010	Country activities
Leadership, coordination and partners' mobilization	<ol style="list-style-type: none">1. Development of alcohol policy and strategic plan<ol style="list-style-type: none">1. Structures: Coordinating body; intersectoral committee; unit and focal point at MOH2. Allocation funds (innovative funding mechanisms)3. Involvement of local authorities, NGO's & other relevant actors as appropriate
Health sector response	<ol style="list-style-type: none">1. Brief interventions at PHC/HIV clinics<ol style="list-style-type: none">1. WHO PEN (integrated approach NCDs and risk factors)2. ASSIST (Tobacco, alcohol & other drugs)2. Evidence-based treatment approaches3. Records keeping

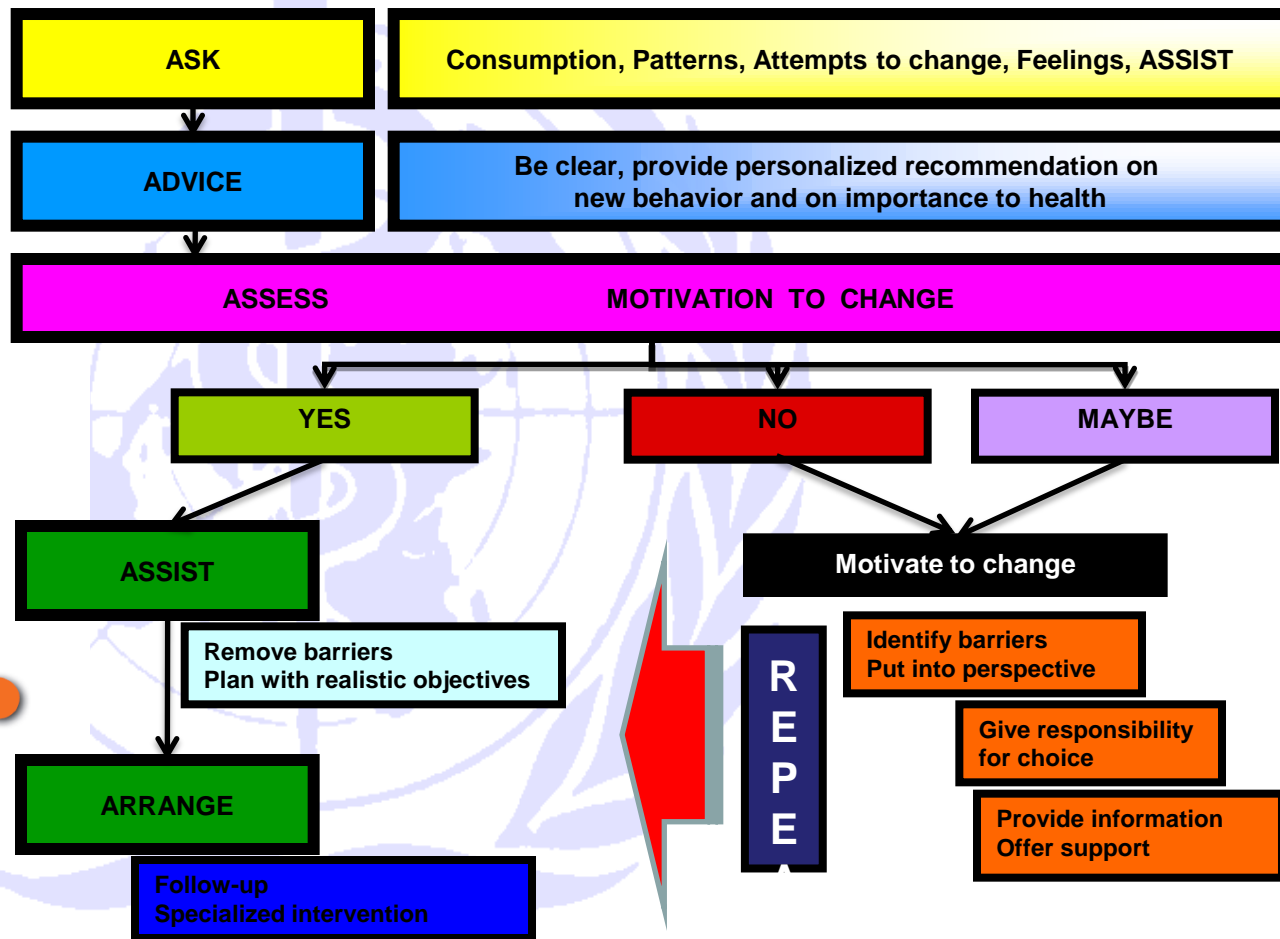


Health Sector response



ASSIST Intervention Algorithm

Package of **Essential Noncommunicable (PEN) Disease Interventions for Primary Health Care** in Low-Resource Settings





Evidence-base Policies

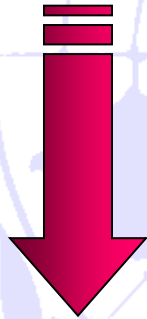
Regional Strategy 2010	Country activities
Strategic information, surveillance and research	<ol style="list-style-type: none">1. Identify core/strategic indicators (volume; pattern; related harm-consider sub-indicators disease and injury)2. Establish or integrate in existing information system/ national surveys3. Promote/explore partnerships for operational research (unrecorded consumption; impact alcohol marketing (MAMPA II); impact on CD (HIV/TB))
Resource mobilization, appropriate allocation and integrated approach	<ol style="list-style-type: none">1. Alcohol to be included in health and development country plans and poverty strategies to facilitate resource mobilization2. Develop integrated approach using existing initiatives (TB; HIV; NCD, etc)





Opportunities

- ◆ Global Strategy to reduce harmful use of alcohol
- ◆ Regional strategy
- ◆ UN Summit NCDs
- ◆ Regional Ministerial consultation
- ◆ Brazzaville declaration



The management of communicable diseases in many countries including Global health initiatives can provide ample opportunities to accelerate prevention and control of NCDs. Such opportunities should be identified and harnessed to address integrated care in the context of primary health care and health systems strengthening



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Thank you



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