

Protecting road safety in the Philippines from alcohol industry interference¹

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Alcohol consumption is one of the major behavioral risk factors that affect public health and safety around the world. Global data shows that 1.35 million deaths resulted from road traffic crashes annually, with an estimated 5% to 35% of these deaths linked to driving under the influence of alcohol (or more commonly known as ‘drink-driving’).⁴ Philippine government sources, particularly from the Philippine Statistics Authority (PSA), have revealed a rapidly increasing number of deaths from road traffic crashes, from 8,406 deaths in 2010⁵ to 11,360 in 2017,⁶ nearly a 35 percent increase in a span of seven years.

The United Nations (UN) recognized the growing burden of road crashes globally; hence, the UN General Assembly proclaimed the Decade of Action for Road Safety 2011–2020 (or the Global Decade of Action) in 2010, which calls on countries to take multi-sectoral action to adopt comprehensive legislation to reduce deaths and injuries as a result of road crashes by the end of the decade in 2020. In 2015, the target “to halve the number of global deaths and injuries from road traffic accidents” by 2020 is reflected in the 2030 Agenda for Sustainable Development, which the UN adopted as Sustainable Development Goal (SDG) number 3.6. To achieve this, the World Health Organization (WHO) and

the UN Regional Commissions prepared a Global Plan for the Decade of Action for Road Safety (2011–2020), which identifies drink-driving measures among the road safety interventions that have been proven to be effective in reducing road traffic deaths and injuries.

Existing measures in curbing alcohol consumption for road safety

Measures to globally curb alcohol consumption are not new. In 2010, the WHO adopted the Global Strategy to Reduce the Harmful Use of Alcohol (or the Global Strategy). Its main premise is that the “policies and interventions to prevent and reduce alcohol-related harm should be guided and formulated by public health interests based on clear public health goals and the best available evidence and practice.”⁷ Drink-driving policies and countermeasures are among the main target areas set out in its policy recommendations. While the Global Strategy covers a wide range of policy options and interventions such as limiting the availability of alcohol, pricing policies, and marketing reforms, the public health objective is the same: the reduction of alcohol consumption in view of its negative health and social effects. By far, the only measure that the

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⁴ World Health Organization, *Global Status Report on Road Safety 2018* (Geneva: World Health Organization, 2018), 31.

⁵ Philippine Statistics Authority, *Vital Statistics Report 2006–2010* (Quezon City: Philippine Statistics Authority, 2011).

⁶ Philippine Statistics Authority, *Vital Statistics Report 2017* (Quezon City: Philippine Statistics Authority, 2019).

⁷ World Health Organization, *Global Strategy to Reduce the Harmful Use of Alcohol* (Geneva: World Health Organization, 2010), 14.

Philippines has taken in addressing drink-driving is the enactment of Republic Act No. 10586 or the Anti-Drunk and Drugged Driving Act of 2013.

This law aims to address drink-driving by mandating the government to “penalize the acts of driving under the influence of alcohol dangerous drugs, and other intoxicating substances...and to inculcate the standards of safe driving and the benefits that may be derived from it through institutional programs and appropriate public information strategies.”⁸ It also mandates the implementation of programs in curbing drink-driving, such as driver education; conduct of field sobriety, chemical, and confirmatory tests; mandatory alcohol and chemical testing of drivers involved in motor vehicular accidents; procurement of equipment for testing (e.g., breath analyzers); and the deputizing and training of law enforcers about the guidelines and standards of the said law.

Institutions outside the government have taken interest in this law. In particular, the alcohol industry has capitalized on this law in order to generate recognition of its initiatives as a corporate social responsibility (CSR) strategy in road safety. In most countries where these initiatives are operationalized, the strategy comes in the form of “policy, programmes and partnerships” by “supporting high visibility enforcement through random breath tests...funding safe rides and free public transportation and supporting laws to establish maximum blood alcohol concentration levels in countries where none exist.”⁹

In the Philippines, one such partnership that the alcohol industry initiated was between the UN Institute for Training and Research (UNITAR) through the International Training Centre for Authorities and Leaders in the Philippines (CIFAL

Philippines) and the United Kingdom-based international alcohol and carbonated beverage conglomerate Diageo,¹⁰ which owns over 180 brands. Prior efforts have been made by Diageo in countries like Ghana, Mexico, and China,¹¹ while it continues to extend its efforts in India.¹² However, there is hardly any evidence that supports the positive impact of the industry’s support in road safety in these countries. Additionally, those who have partnered with this industry are tangled in conflicts of interest due to the incompatibility of the industry’s initiatives with the promotion of public health.

The policy addressing conflict of interest in the field of public health

The WHO has recently published its position rejecting any form of partnership with the alcohol industry, stating that it “will not engage with the alcohol industry when developing alcohol policy or implementing public health measures” and further warned its staff that “partnering, collaborating, taking funding, and even talking with the alcohol industry on some subjects is not acceptable.”¹³ The WHO further declares the caveats associated with alcohol industry partnership, declaring that they “may use these partnerships to primarily serve their interests with limited or no benefits for public health; and that these “could be conferred as an endorsement of the alcohol industry’s name, brand, product, views, or activity,” which could be considered as “a white-washing of the alcohol industry’s image.”¹⁴

In addition, the WHO has taken note of the need for governments to decide and enforce regulations on alcohol in the market, as governments must be protected from interference of the industry.¹⁵ This is because the “involvement of the alcohol industry in

⁸ Republic of the Philippines, Republic Act No. 10586 (“Anti-Drunk and Drugged Driving Act of 2013”), enacted May 27, 2013.

⁹ “Diageo and UNITAR collaborate to strengthen road safety in the Philippines,” Diageo, November 9, 2017, <https://www.diageo.com/en/news-and-media/press-releases/diageo-and-unitar-collaborate-to-strengthen-road-safety-in-the-philippines/>.

¹⁰ “CIFAL Philippines, UNITAR host road safety multi-stakeholder conference in Quezon City,” CIFAL Philippines, November 20, 2017, <https://cifal.up.edu.ph/cifal-philippines-unitar-host-road-safety-multi-stakeholder-conference-in-quezon-city/>.

¹¹ “Diageo and UNITAR collaborate to strengthen road safety in the Philippines,” Diageo, November 9, 2017.

¹² “Partnering for Road Safety - India,” Diageo, May 25, 2018, <https://www.diageo.com/en/in-society/case-studies/partnering-for-road-safety-india/>.

¹³ Ingrid Torjesen, “Exclusive: Partnering with Alcohol Industry on Public Health is Not Okay, WHO Says,” *British Medical Journal*, April 9, 2019, <https://www.bmj.com/content/365/bmj.l1666>.

¹⁴ Ibid.

¹⁵ World Health Organization, “Implementation of the WHO Global Strategy to Reduce the Harmful Use of Alcohol Since Its Endorsement, and the Way Forward” (Discussion paper, World Health Organization, Geneva, 2019), 12.

the formulation of public health-oriented policies to reduce the harmful use of alcohol has many potential risks that need to be minimized.”¹⁶ This is one of the few initiatives where a non-state actor has rejected industry partnerships, signaling an important shift in the approach to engagement with the alcohol industry.

This recent development further strengthens the WHO’s policy on managing conflict of interest with non-state actors. Under Section 46 of the WHO Framework for Engagement of Non-State Actors (FENSA), it “will exercise particular caution, especially while conducting due diligence, risk assessment and risk management, when engaging with private sector entities and other non-state actors whose policies or activities are negatively affecting human health and are not in line with WHO’s policies, norms, and standards.”¹⁷

Evidence of the adverse effects of alcohol industry initiatives in road safety

Existing evidence on the impact of the industry’s initiatives against drink-driving reveal the adverse effects of its activities in road safety. Prior studies in public health suggest that “there is an inherent conflict of interest between the commercial goals of industry actors and the production and dissemination of public health research.”¹⁸ Industry initiatives have actually produced results contrary to the desired outputs and impact—that is, the increased promotion and consumption of alcoholic beverages, especially among the youth. As per documentation of public health professionals, there were mounting concerns against “the industry’s involvement in the development of interventions for reducing alcohol-related harms because of its tendency to promote strategies that lack evidence of effectiveness.”¹⁹ There is no proof that these initiatives support public health interventions in the field of road

safety, and in fact, “may compromise public health goals.”²⁰

In one study, a total of 266 industry-supported drink-driving actions from 1982 to 2015 including “designated driver programs, ride services, mass media campaigns, and sobriety checkpoints” were evaluated for their potentials as a source of harm, for marketing, and for influence in policy.²¹ Overall, the study revealed that 91.4 percent of these actions have “no potential to influence policy,” 87.6 percent have “potential for marketing,” and 66.9 percent are rated to be “possibly harmful or damaging from an evidence-based public health perspective”²² (See **TABLE 1** below).

Evidence shows that there are two sets of alternative possibilities: (1) that these initiatives have no direct impact on harmful drinking rates, or that

TABLE 1 Global alcohol industry drink-driving actions by selected indicators

Indicator	No. (%)
Potential source of harm	
None	80 (10.5%)
Possibly harmful or damaging from an evidence-based public health perspective	178 (66.9%)
High potential to be harmful	3 (1.1%)
Too vague to determine	5 (1.9%)
Potential for marketing	
None	28 (10.5%)
Possible	233 (87.6%)
Too vague to determine	5 (1.9%)
Potential to influence policy	
None	243 (91.4%)
Possible	14 (5.3%)
High	4 (1.5%)
Too vague to determine	5 (1.9%)

Source: International Alliance for Responsible Drinking Online Compendium (1982–May 2015), cited in Esser et al. 2016

¹⁶ World Health Organization, *The SAFER Technical Package: Five Areas of Intervention at National and Subnational Levels* (Geneva: World Health Organization, 2019), 5.

¹⁷ World Health Organization, *Framework for the Engagement of Non-State Actors* (Geneva: World Health Organization, 2018), 38.

¹⁸ Jim McCambridge and Melissa Mialon, “Alcohol Industry Involvement in Science: A Systematic Review of the Perspectives of the Alcohol Research Community,” *Drug and Alcohol Review* 37, no. 5 (2018): 568, <https://doi.org/10.1111/dar.12826>.

¹⁹ Marissa Esser et al., “Evaluation of the Evidence Base for the Alcohol Industry’s Actions to Reduce Drink Driving Globally,” *American Journal of Public Health* 106, no. 4 (April 2016), 709, <https://doi.org/10.2105/AJPH.2015.303026>.

²⁰ *Ibid.*, 711.

²¹ *Ibid.*, 709.

²² *Ibid.*, 710.

any impacts are adverse rather than beneficial; and (2) that these initiatives may be used to interfere with the framing of alcohol-related issues, and thus the development of evidence-informed public policies that can reduce harmful drinking.

Current alcohol industry partnerships in public health and road safety

During the years following the declaration of the Global Decade of Action, multiple partnerships among government stakeholders, civil society, and the private sector have been established for the development of public health and road safety policies. One prominent example in the context of public health is the 2018 partnership between the Global Fund to Fight AIDS, Tuberculosis, and Malaria (or simply the Global Fund) and the Dutch alcoholic beverage giant Heineken in “promoting good health practices and combating disease in low-income countries.”²³ However, this move was widely criticized and viewed as a means to “undermine and subvert” alcohol policy implementation in poverty-stricken Africa, which is believed to redirect “attention from the costs of harmful use of alcohol and positions Heineken to governments, the public and the global community as a legitimate partner in implementing sustainable development solutions.”²⁴ There is also mention of evidence that alcohol use increases the risk of both HIV and tuberculosis.²⁵

In 2017, UNITAR launched a series of activities for its road safety campaign through funding from Diageo with the theme “Strengthening Road Safety for Sustainable Cities,” focusing primarily on “low-income countries, least developed countries and small island developing states with high road traffic

death rates.”²⁶ The series culminated in a conference organized through CIFAL Philippines entitled “Road Safety for Sustainable Cities: A Multi-Stakeholder Conference,” held in Quezon City on November 20, 2017, which aimed to “increase engagement among road safety stakeholders especially with innovative technological industries and research institutions.” This was followed by a workshop entitled “Improving Road Safety for Sustainable Cities: Best Practice Sharing Workshop” held from March 20 to 21, 2018 in Bangkok, Thailand, co-organized by the UNITAR, with funding support from Diageo.²⁷

Aside from this partnership, UNITAR entered into a partnership with the Belgium-based alcohol firm Anheuser-Busch InBev or “AB InBev” in 2018²⁸ to improve road safety and reduce traffic deaths by implementing “a global public awareness initiative” and build “capacity with local governments and partners” as well as “harnessing data and technology, promoting education and training, and implementing evidence-based road safety interventions in target countries worldwide.”²⁹

A joint statement from a coalition of non-government organizations from around the world released a statement criticizing this partnership,³⁰ “considering the track record of AB InBev as a company and the vast evidence-base on alcohol as a major risk factor in road traffic crashes.” Its actions to reduce drink-driving “lack evidence of effectiveness or haven’t been well-studied.”³¹ Because of this, UNITAR was urged to end this partnership since the industry “works to undermine independent, high-quality science... through suppressing results or attacking scientists,” and opposes and pre-empts effective drink-driving measures “through their corporate political activities and lobbying.”³²

²³ Kate Hodal, “Not Remotely Refreshing: Global Health Fund Criticised Over Heineken Alliance,” *The Guardian*, February 23, 2018, <https://www.theguardian.com/global-development/2018/feb/02/global-health-fund-rebuked-over-heineken-alliance-aids-tuberculosis-malaria>.

²⁴ Ibid.

²⁵ Ibid.

²⁶ “Conference: Road Safety for Sustainable Cities: A Multi-stakeholder Conference,” CIFAL Philippines, October 4, 2017, <https://cifal.up.edu.ph/conference-road-safety-for-sustainable-cities-a-multi-stakeholder-conference/>.

²⁷ “UNITAR and Diageo Collaborate to Strengthen Road Safety in Thailand,” UNITAR, March 20, 2018, <https://www.diageo.com/en/news-and-media/press-releases/unitar-and-diageo-collaborate-to-strengthen-road-safety-in-thailand/>.

²⁸ “Creating Safer Roads,” AB InBev, n.d., <https://www.ab-inbev.com/what-we-do/road-safety.html>.

²⁹ “UNITAR and Anheuser-Busch InBev Sign Partnership Agreement to Collaborate on Road Safety,” UNITAR, February 14, 2018, <https://www.unitar.org/about/news-stories/news/unitar-and-anheuser-busch-inbev-sign-partnership-agreement-collaborate-road-safety>.

³⁰ “Joint Open Letter: Concern About UNITAR Partnering With Alcohol Giant,” IOGT International, March 13, 2018, <http://iogt.org/open-letters/joint-open-letter-concern-unitar-partnering-alcohol-giant/>.

³¹ Ibid.

³² Ibid.

The same coalition reiterated their concern over the alcohol industry's participation in the UN High-Level Meeting on Non-Communicable Diseases (NCDs) last September 27, 2018 in New York, also noting the harm of the industry's presence in policy discussions, particularly in how it "jeopardizes formulation and implementation of the alcohol policy best buys and effective prevention and health promotion interventions."³³ This is because these best buys "hold considerable and largely untapped potential to promote health and development and to protect especially vulnerable groups like children and youth, women and people in deprived and marginalized communities."³⁴

Ways forward: Lessons from tobacco control

Governments and road safety advocates can take lessons from tobacco control. The WHO Framework Convention for Tobacco Control (FCTC), the only public health treaty negotiated under the auspices of the WHO, entered into force in the Philippines in 2005 and is one of the most widely embraced treaties in the world. The WHO FCTC aims to protect the public from the devastating health, economic, and social harms of tobacco use and exposure to tobacco smoke through demand and supply reduction measures. A cornerstone of the WHO FCTC is Article 5.3, which provides that in setting and implementing public health policies with respect to tobacco control, parties shall act to protect these policies from commercial and other vested interests of the tobacco industry in accordance with national law.³⁵

As a measure to recognize the adverse effects of tobacco to public health, the FCTC was strongly lobbied by public health advocates around the

world, and was continually supported by a potent global health network of stakeholders from different sectors. Today, the tobacco industry has shied away from any engagement towards public health since "coalition-building played a crucial role in expanding the [global health] network and in acquiring policy expertise to engage in the broader [political] debates of the issue at domestic and international levels."³⁶

However, there is a different policy environment in the context of alcohol control since a "broader network bringing together all parties interested in reducing harm [except for the industry] remains to be established."³⁷ An "intersectoral approach"³⁸ borrowed from the tobacco control strategy is recommended. Additionally, a key recommendation coming from one public health research journal mentions the involvement of "multiple sectors in the development of multifaceted approaches" which can "enhance public awareness while guaranteeing more comprehensive strategies."³⁹ Likewise, "continuing to assess alcohol's role in road trauma will provide better tools for designing and enforcing effective policies in countries where legislative initiative has been slow, stagnant, or yet to take place."⁴⁰

Developing similar guidelines by the Philippine government in its policies and pending legislation, specifically for the next review of the Republic Act No. 10586, is also vital towards eliminating interference of the alcohol industry in the development and enforcement of road safety policies. While more research is needed to further measure the influence and efficacy of the alcohol industry initiatives for road safety, it is best to avoid reliance on the industry, in the absence of effective technological measures, data management, and funding strategies for road safety in the Philippines. ■

³³ Maik Dünnebier, "IOGT International Official Statement, Third High-Level Meeting on NCDs" (Official Statement, Third UN High-Level Meeting on NCDs, United Nations, New York, September 27, 2018), <https://www.who.int/ncds/governance/third-un-meeting/IOGT-International-1.pdf?ua=1>.

³⁴ Ibid.

³⁵ World Health Organization, *Framework Convention on Tobacco Control* (Geneva: World Health Organization, 2003), 7.

³⁶ Uwe Gneiting and Hans Peter Schmitz, "Comparing Global Alcohol and Tobacco Control Efforts: Network Formation and Evolution in International Health Governance," *Health Policy and Planning* 31 (2016): i102, <https://doi.org/10.1093/heapol/czv125>.

³⁷ Ibid.

³⁸ Esser et. al., 2016, 712.

³⁹ Lydia O'Connor and Roberto Andres Ruiz, "Alcohol and Hospitalized Road Traffic Injuries in the Philippines," *Yale Journal of Biology and Medicine* 87 (September 2014): 315.

⁴⁰ Ibid.

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The overall objective of the **Bloomberg Initiative for Global Road Safety (BIGRS)**, which is housed under the UP CIDS Program on Alternative Development (AltDev), is to contribute to the significant reduction of road traffic fatalities by the end of the United Nations Decade

of Action for Road Safety (2011–2020). One of its programmes is the **Legal Development Programme (LDP)**, which provides technical assistance to government and implementing agencies to improve and strengthen road safety policies through capacity-building measures for its fellows.

The UP CIDS Policy Brief Series is published quarterly by the **University of the Philippines Center for Integrative and Development Studies (UP CIDS)**.

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