

alcohol

Global strategy to reduce the harmful use of alcohol

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FOREWORD

The harmful use of alcohol causes an estimated 2.5 million deaths every year, of which a significant proportion occur in the young. Alcohol use is the third leading risk factor for poor health globally. A wide variety of alcohol-related problems can have devastating impacts on individuals and their families and can seriously affect community life. The harmful use of alcohol is one of the four most common modifiable and preventable risk factors for major noncommunicable diseases (NCDs). There is also emerging evidence that the harmful use of alcohol contributes to the health burden caused by communicable diseases such as, for example, tuberculosis and HIV/AIDS.

Reducing the harmful use of alcohol by effective policy measures and by providing a relevant infrastructure to successfully implement those measures is much more than a public health issue. Indeed, it is a development issue, since the level of risk associated with the harmful use of alcohol in developing countries is much higher than that in high-income countries where people are increasingly protected by comprehensive laws and interventions – and by mechanisms to ensure that these are implemented.

The global strategy to reduce the harmful use of alcohol, endorsed by the Sixty-third World Health Assembly in May 2010, recognizes the close links between the harmful use of alcohol and socioeconomic development. It represents the commitment by the Member States of the World Health Organization to sustained action at all levels. It also builds on several WHO global and regional strategic initiatives, including the action plan for the global strategy for the prevention and control of noncommunicable diseases which was endorsed by the World Health Assembly in 2008.

Indeed, WHO is witnessing how public health policy-makers in developing countries and economies in transition are increasingly challenged to formulate effective strategies to address the public health problems caused by the harmful use of alcohol. Workable solutions exist and the global strategy provides a portfolio of policy options and interventions that should be considered for implementation in each country as integral parts of national policy, as well as within broader development frameworks. The global strategy also sets priority areas for global action that is intended to promote, support and complement relevant actions at local, national and regional levels. Honouring the spirit of the Paris Declaration on Aid Effectiveness, WHO calls on international development partners to respond favourably to requests from developing countries for technical support in implementing and adapting these policy options according to national priorities and contexts.

The consensus reached on the global strategy and its endorsement by the World Health Assembly is the outcome of close collaboration between WHO Member States and the WHO secretariat. The process that led to the development of the global strategy included consultations with other stakeholders, such as civil society groups and economic operators. Similarly, the implementation of the global strategy will require active collaboration with Member States, with appropriate engagement of international development partners, civil society, the private sector, as well as public health and research institutions. As we

move forward, WHO will continue to involve relevant stakeholders in efforts to achieve the strategy goals and objectives.

I am confident that by working together towards the objectives of the global strategy, we can reduce the negative health and social consequences of the harmful use of alcohol and make our communities healthier, safer and more pleasant places in which to live, work and spend our leisure time.

Dr Ala Alwan
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Noncommunicable Diseases and Mental Health
World Health Organization

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