



# Informing public health policy: A historical review of alcohol in Zambia

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## ABSTRACT

The purpose of this review was to summarize the history of alcohol use prevalence, cultural beliefs and attitudes, and policies to inform current strategies for addressing alcohol use disorders in Zambia. This review contained peer-reviewed journal articles, unpublished grey literature, and historical documents. Results found differences between earlier decades and today such as new motivations for drinking including limited employment/work opportunities, boredom, lack of activities, hopelessness, coping with abuse, increased prevalence of women and youths consuming alcohol, increased alcohol industry marketing, increased school fees facilitating educational scarcities and alcohol use among youths, and the development of new laws including a national policy targeting alcohol. Similarities between earlier decades and today are also discussed. This historical review has revealed the need to learn lessons from the past and move toward environmental and economic policies to inform and support public health efforts that address alcohol use and alcohol use disorders in Zambia.

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## INTRODUCTION

Rates of substance use disorders are on the rise globally. The global burden of substance use disorders has increased 40% from 1990 to 2010 with alcohol use specifically being the 5<sup>th</sup> most pressing risk factor among all substance use disorders.<sup>1</sup> Furthermore, alcohol use is a major contributor to the burden of disease in the African continent.<sup>2</sup> Prevalence of alcohol use disorder and alcohol dependence among men and women ages 15+ in the World Health Organization (WHO) African Region is 3.7% and 1.3%, respectively (3). In Zambia the current prevalence of alcohol use disorders and alcohol dependence among men and women ages 15+ is 5.5% and 1.9%.<sup>3</sup>

While alcohol use is prevalent globally, multiple factors may create regional differences, such as religion, alcohol policies, and economic growth.<sup>4</sup> Hazardous alcohol consumption can also have many social determinants such as governance, gender inequalities, educational inopportunity,

stigmatization and gaps in healthcare service and delivery.<sup>5</sup> These determinants lead to disparities in the burden associated with alcohol use in lower-income countries. To properly address alcohol use disorders and alcohol dependence it is necessary to examine a country's unique and specific history of alcohol use prevalence, customs, beliefs, attitudes, problems, and policies. Therefore, the purpose of this review paper is to summarize the history of alcohol use and policy in Zambia. This paper aims to discuss past and present alcohol use prevalence, culture including beliefs and attitudes, and policies in order to inform current strategies for addressing alcohol use disorders in Zambia.

## METHODS AND MATERIALS

A literature search was conducted to ascertain peer-reviewed journal articles for review. Databases included PubMed, Scopus, MEDLINE, Academic Search Complete, Global Health, APAPsychInfo, and CINHALL with Full Text. Search terms utilized were alcohol, alcohol use, substance, substance use,

Zambia, and Republic of Zambia. However, peer-reviewed journal articles were mainly published after 2000. Due to the fact that peer-reviewed literature that detailed alcohol use prevalence, culture including beliefs and attitudes, and policies in earlier years was clearly lacking, grey literature sources were added to this review. Therefore, this review included peer-reviewed journal articles, historical reports, government documents, and media sources. Media sources, government documents, and international reports were acquired through the Google search engine also using the predetermined search terms. Additionally, unpublished grey literature and historical documents written between 1970 and 2010 were identified by searching the document archives located onsite at the University of Zambia's Institute of African Studies resulting in an additional 13 sources. Substance use researchers and policy-makers in Zambia were contacted to identify additional information, studies, or policy documents to assist in gathering historical and current documentation of alcohol use and policy in Zambia. In total, 29 literature sources were included in this review. Sources were categorized into two time periods, 1980-2000 and 2000-2020. These time periods were determined by the availability of sources clustered by date and common themes identified within each time period.

## RESULTS

### Culture

Current factors contributing to and deterring alcohol consumption have become more serious in nature compared those in the 1980s. In earlier decades, many consumed alcohol in order to simply celebrate and forget their daily problems, while today, alcohol consumption among adults can be caused by boredom, depression, hopelessness, and coping with physical, emotional, and/or sexual abuse.<sup>5,6</sup> Among youths, risk factors for alcohol consumption include social pressure, lack of self-esteem, lack of recreational activities, parents who drink, and lack of education.<sup>7-10</sup> From 1980-2000, a protective factor against hazardous alcohol consumption by the head of household was pressure to follow social and financial responsibilities. Today however, these social expectations have been weakened due to the

economic poverty and unemployment which contribute to alcohol's role in society and its consumption among all individuals.<sup>5,11</sup> In earlier decades, most did not consume alcohol out of fear that it would interfere with work, with one exception to this being copper miners who were sometimes found to consume while working.<sup>12</sup> This is a contrast to today where many consume regardless of the effect it may have on absenteeism and work-related performance or because employment is limited.<sup>6</sup> The perceived benefit to the individual has become more important than the actual loss to the community.

Women drinking alcohol has remained widely socially unacceptable throughout the decades; however, women still participated in alcohol consumption. In 1982, the Community Response to Alcohol Related Problems in Zambia (CRTARPZ) project found that one-third of women drank alcohol. The nature of women's alcohol consumption has become more serious in recent decades. For example, in 2017, 23% of women had a history of alcohol abuse and in 2019 it was found that 55.6% of female social drinkers in Lusaka and 9.4% of general population females (ages 20-39) binge drink.<sup>13,14</sup>

The acceptability of youths drinking has also changed over time. From 1980 to 2000, it was widely known that youths, male or female, were socially prohibited from drinking.<sup>6,15</sup> However, today there is a greater tolerance of youths consuming alcohol which reflect the increasing rates of consumption among youths.<sup>16</sup> In 1995 the Knowledge, Attitudes and Practice (KAP) Youth Study found that 8.8% of 10-15 year old's and 25.5% of 16-21 year old's used alcohol in the past 30 days, but in 2011 the Global School-Based Student Health Survey (GSHS) found that 42.6% of primarily 13-16 year old students used alcohol in the past 30 days and that 45.1% of students experienced drinking related problems.<sup>11,17</sup>

### Policy

From 1980 to 2000, there were no national policy attempts to address alcohol consumption or alcohol use disorders. The earliest attempt to explore alcohol use and related harms was Community Response to Alcohol-Related Problems in Zambia 1981 project.



While the Community Response to Alcohol-Related Problems in Zambia did not create any official policies, it did create multiple policy recommendations.<sup>6,18,19</sup>

The first attempts to address alcohol use was seen in the 2008 Ministry of Health study to explore non-communicable diseases (NCDs), which reported cross-sectional prevalence rates of men and women alcohol consumption and stated that alcohol consumption was a health issue facing Zambians.<sup>20</sup> In 2011, the Liquor Licensing Act was passed replacing the initial Liquor Licensing Act of 1959. The revised Act created regulations on the manufacturing, possession, supply, and sale of alcoholic beverages.<sup>21</sup> The act put in place restrictions on the hours in which alcohol can be sold and taxation of various beverages, but it did not serve as a national policy to regulate, control, or monitor alcohol use and related issues.<sup>21</sup> The 2013-2016 strategic plan for addressing NCDs again identified the prevalence of alcohol consumption and the health risk of alcohol on NCDs but failed to make any specific recommendations to target alcohol use.<sup>22</sup> The 2017 Ministry of Health STEPS for NCD Risk Factors placed a stronger emphasis on addressing alcohol consumption and its related harms, including recommendations to increase taxes on alcohol, implement restrictions on alcohol advertisements in public and private media, and implement restrictions on alcohol availability and access for youths.<sup>23</sup> In 2018, the Ministry of Health created the first National Alcohol Policy (NAP) along with a National Alcohol Policy Implementation Plan.<sup>24,25</sup> Furthermore, the WHO Zambia 2017-2021 Country Cooperation Strategy calls attention to the country's NAP and efforts to prevent alcohol related disorders and NCDs through expanding and strengthening systems and strategies for interventions and treatment.<sup>26</sup>

### Economy

While the commercialization of alcoholic beverages has occurred since the 1980s, there has been increasingly rapid development in the alcohol industry in many African countries in recent years, Zambia being one of those.<sup>27-29</sup> The African alcohol market is led by a few global alcohol companies

which use sophisticated marketing to increase alcohol consumption by targeting existing drinkers and reaching new potential customers, often women and youths.<sup>30</sup> Growth of the alcohol industry has increased the occurrence of alcohol marketing, advertising, promotion, sponsorship, and production in urban and rural areas.<sup>28,29,31</sup> The introduction of commercialized alcoholic beverages now coexists alongside the production of indigenous, and often unrecorded, alcoholic beverages even leading to an increase in production of traditional beverages due to the overall increased promotion and exposure to alcohol.<sup>30,31</sup> Alcohol marketing increases the onset of alcohol drinking and binge drinking through increased positive expectancies towards alcohol increasing demand for any alcohol types.<sup>30</sup> A study conducted by Swahn et al. found that direct marketing of alcohol products has led to an increase in alcohol use and related problems.<sup>28</sup> Results also showed that 33.4% of students have seen alcohol billboard ads in the past 30 days and that 30.0% of students have ever been offered a free drink by an alcohol company representative.<sup>28</sup>

The Zambian government plays a large role in the funding and support of the alcohol industry.<sup>31</sup> As early as 1982, the Zambian government received as much as 20% of their revenues from the alcohol industry in the form of advertising and sales.<sup>29</sup> Today the government still receives economic incentives from the alcohol industry.<sup>5</sup> This conflict between revenue and public health hinders implementation of policy recommendations.<sup>32</sup>

Poverty is also an indicator of increased risk of alcohol use.<sup>5</sup> Low socio-economic status may increase risk of drinking as a means of coping with stress associated with financial, marital, and medical problems.<sup>5</sup> Throughout the decades, urban migration leading to high levels of unemployment have increased the likelihood that youths and adults consumed alcohol.<sup>9,11,33</sup> Youths are especially vulnerable to alcohol consumption if they are unable to attend primary or secondary school. The problem of access to school, mainly primary and secondary, is common due to the high cost of private school fees and related resource costs.<sup>34</sup> Even public schools

require some fees in order to attend and successfully complete assignments. Increasing costs of school fees makes completing school difficult and contributes to educational scarcities. In the past, inability to complete school was offset by the opportunity to learn a trade passed down through the generations and contribute meaningfully to the local economy. Today, the inability to complete school

often leads to depression and anxiety mediating unemployment, increased competition for piece-work, and poverty among youths and young adults. Tables 1 and 2 summarize these cultural, policy and economic differences and similarities through the decades.

**Table 1 Differences in Alcohol Culture, Policy, and the Economy in Zambia between 1980 and 2020**

Differences	
Culture	1980-2000: <ul style="list-style-type: none"> <li>- Alcohol use motivated by local celebrations and to forget problems</li> <li>- Few women and youths consumed alcohol</li> </ul>
	2000-2020: <ul style="list-style-type: none"> <li>- Alcohol use motivated by hopelessness, boredom, depression, poverty, coping with emotional, physical, and/or sexual abuse</li> <li>- Alcohol use among youths also motivated by low self-esteem, social pressure, and lack of recreational activities</li> <li>- Alcohol use increasingly prevalent among women and youths</li> </ul>
Policy	1980-2000: No formal policy changes or amendments to the Liquor Licensing Act of 1959  2000-2020: <ul style="list-style-type: none"> <li>- Various policy attempts including WHO NCD STEPs Plans, Liquor Licensing Act of 2011, 2018 National Alcohol Policy and Implementation Plan, and 2019 Mental Health Act</li> </ul>
Economy	1980-2000: <ul style="list-style-type: none"> <li>- Limited alcohol marketing and advertising</li> <li>- Opportunities and expectations for work in the local economy</li> </ul> 2000-2020: <ul style="list-style-type: none"> <li>- Limited employment/work opportunities increasing risk of alcohol use disorders</li> <li>- Cost of secondary school fees increased causing educational scarcities</li> <li>- Increased direct marketing tactics and policy influence from the alcohol industry</li> </ul>

**Table 2 Similarities in Alcohol Culture, Policy, and the Economy in Zambia between 1980 and 2020**

Similarities	
Culture	<ul style="list-style-type: none"> <li>- Drinking among women and girls remains socially unacceptable despite increased prevalence</li> <li>- Drinking is socially acceptable and expected among men</li> <li>- Drinking is most prevalent among men</li> <li>- Drinking is segregated by sex</li> <li>- Majority of society disapproves of drinking among youths</li> <li>- Alcohol (i.e. traditional beer) may not be viewed as a drug but viewed as having nutritional value</li> </ul>
Policy	<ul style="list-style-type: none"> <li>- No policy changes took place between 1980 and 2000</li> </ul>
Economy	<ul style="list-style-type: none"> <li>- Government reliance on the expanding alcohol industry for revenue</li> </ul>

- Commercialization of alcohol is widespread
- No regulations in the alcohol industry exist

## DISCUSSION

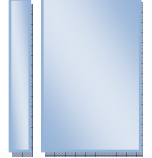
This review of the history of alcohol use prevalence, culture, and policies has revealed the need for environmental and policy-related strategies to support public health efforts that address alcohol use disorders in Zambia. There exists a major need for policy to intervene and shape the impact that alcohol has on citizens of Zambia and the country's overall development. While the Ministry of Health produced the National Alcohol Policy (NAP) in 2018, barriers likely exist in implementing the recommendations and coordinating the various stakeholders in shaping the environment surrounding alcohol in Zambia.

The current status of the economy should be considered when aiming to reduce alcohol use and alcohol use disorders. Increasing employment opportunities may promote healthier alcohol consumption, however, the NAP does not contain measures to target the role that unemployment and poverty play in consumption.<sup>10,35,36</sup> Additionally, the increasing costs of secondary school fees for students is an economic issue which should be addressed to reduce alcohol consumption among youths. While the NAP contains measures to increase alcohol education among students, these educational efforts will be of no use to students whose families are unable to afford school fees. Given this, any alcohol policy needs to be supported by strong education reform and incentives to strengthen small businesses in Zambia.

Enforcement of existing laws is necessary to shape the current environment which facilitates alcohol consumption. Components of the 2011 Liquor Licensing Act often fail to be implemented and fully enforced.<sup>9,11,36,37</sup> Enforcing liquor laws which regulate illegal drinking locations such as shebeens, sale hours, production volume, and minimum selling age is essential to reducing hazardous drinking among adults and youths to create an environment that promotes healthier alcohol consumption behaviors. There have been efforts to address the current environment, for example, in 2018 the Road

Transport and Safety Agency (RTSA) and the Zambia Police Service held an operation in Lusaka to enforce road regulations.<sup>38</sup> The agency, which aimed to reduce road accidents by 50% by 2020, partnered with Zambian Breweries to increase enforcement of regulations to create safer roads.<sup>38</sup> While the current fine for drinking while intoxicated is K2,500, it seems to offer little incentive for curbing the behavior.<sup>38</sup> To assist the Zambian Police Service and RTSA in these efforts, Zambian Breweries donated six breathalyzers and K100,000 to RTSA to use in routine operations against intoxicated drivers.<sup>38</sup> These efforts are steps in the right direction and should be bolstered in order to strengthen enforcement in Lusaka and in the entire country. Furthermore, to address enforcement of laws, the NAP briefly mentions sensitizing the public and enforcement agencies on the current alcohol laws, increasing the amount of law enforcement, improving training of local law enforcement and road traffic officers, and strengthening the local government authorities in prevention efforts.<sup>24</sup> Such efforts will require all involved parties to participate and agree to the importance of following the proposed NAP guidelines.

The alcohol industry, despite its contributions to the economy and the government through employment opportunities and retail and tax revenue, facilitates alcohol consumption. Due to the influence of the alcohol industry on increasing consumption, policies which regulate alcohol marketing, promotion, advertising, and production are necessary to protect consumers.<sup>23,28</sup> While government investment in the alcohol industry may have significant short-term economic benefits by increasing revenue and employment, continuous investments in the industry may also contribute to gradual long-term health and social problems leading to greater costs in other areas.<sup>31</sup> The NAP places an emphasis on creating private and public partnerships and multisectoral approaches to addressing alcohol including government sectors, the brewing industry, the



greater society and communities.<sup>24</sup> However, the extent to which these partnerships are engaged, and the NAP is implemented will be determined by the government's level of involvement which may be contrary to the economic benefits they receive from investing in the industry.

Since the 1980s, multiple policy recommendations have been made to address alcohol consumption in Zambia. General policy recommendations from the Community Response to Alcohol Related Problems in Zambia (CRTARPZ) addressed enhancing law enforcement efforts to control alcohol related problems, tailoring policies to rural and urban environments, addressing illicit alcohol production and sales, educating the public on excessive alcohol related issues, strengthening medical services, creating more recreational activities, maintaining public records of alcohol related issues, conducting research, and forming partnerships.<sup>6,19,29,39</sup> Many of the policy recommendations from the CRTARPZ mirror objectives of the current NAP, however, the NAP now provides an official national framework for addressing alcohol at various levels, which can create lasting social and health improvements for the country's citizens. While the NAP serves as Zambia's overarching guide to addressing alcohol related harms and benefiting the country, this policy is currently not enacted by parliament as a law.<sup>35</sup> Responsibility of implementing and following the proposed goals, objectives and measures fall on various government and non-governmental entities. Without the NAP becoming an official law, entities are not legally bound by sanctions to the recommendations and proposed activities of the NAP Implementation Plan.<sup>35</sup> Ensuring implementation of the NAP is essential to creating lasting improvement in the prevalence of alcohol use disorders.

### LIMITATIONS

The main limitation of this review is the heavily reliance on grey literature. The lack of relevant and available peer-reviewed literature on the topic of alcohol in Zambia prior to 2000 limited the results of this review. Literature on alcohol in Zambia prior to 2000 was limited compared to literature in more recent decades, making a historical review from

1980s to today difficult. However, identifying and obtaining archived copies of historical documents regarding alcohol use in Zambia is also a strength of this paper. The multiple types of sources used allowed for a comprehensive review of alcohol use over the past 40 years in order to learn from Zambia's history to better understand the current situation and develop appropriate prevention efforts.

### CONCLUSION

This paper discusses past and present alcohol use prevalence, culture including beliefs and attitudes, and policies in order to inform current strategies for addressing alcohol use disorders in Zambia. There exists multiple similarities and differences in the literature compared to earlier decades, 1980-2000, and more recent decades, 2000-2020. Notable similarities include social unacceptability for women and youths to consume alcohol, drinking segregated by sex, government investments in the alcohol industry, and lack of regulation of the alcohol industry. Notable differences include new motivations for drinking such as limited employment/work opportunities, boredom, lack of activities, hopelessness, and coping with abuse, increased prevalence of women and youths consuming alcohol, increased marketing from the alcohol industry, increasing school fees facilitating educational scarcities and alcohol use among youths, and the development of new laws and a national policy targeting alcohol. This historical review of alcohol in Zambia revealed the need to intervene through policy enforcement and stakeholder collaborations to guide, inform, and support public health strategies that address alcohol use disorders in Zambia.

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