

## COMMENTARY

### ALCOHOL MARKETING IN AFRICA: NOT AN ORDINARY BUSINESS

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#### ABSTRACT

Alcohol was the cause of nearly five million deaths globally in 2010, an increase of over one million deaths recorded ten years earlier. It was the leading risk factor for disease in southern sub-Saharan Africa (SSA), fifth in the East and West, and sixth in the Central African region. Several factors account for the increasing harm associated with alcohol in Africa among which are the availability of a wide variety of alcoholic beverages, rising urban populations, more disposable income to purchase alcohol, and unrestrained marketing and promotion of alcohol. Using a variety of strategies, producers of alcohol target young people and women with aspirational messages and other exhortations in an unprecedented onslaught of marketing and promotion which is increasingly being recognized as detrimental to public health and social welfare. Missing in the discussion on alcohol in most African countries is a clear understanding that alcohol marketing is not an ordinary economic activity and that the business of alcohol (an addictive substance with high potential for harm) can subvert the rights of individuals and the principles of democracy which many African societies are struggling to enthrone. This paper discusses these issues with particular attention to the harms caused by alcohol (to drinkers and non-drinkers alike), the potential for far-reaching harms to individuals and the society at large if the present scenario continues, and how these harms can be averted or minimized with the implementation of evidence-based policies.

**Key words:** Alcohol marketing, alcohol promotion, Africa, alcohol advertising

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## INTRODUCTION

Alcohol has featured in both positive and negative lights in the social history of sub-Saharan Africa where different types of fermented beverages manufactured from fruits and grains have been consumed for millennia as part of normal cultural and social interactions. While problematic drinking has always featured in the drinking habits of people in the African continent (Adomakoh, 1976), widespread recognition of drunkenness as a social problem began with the arrival of distilled drinks beginning with pre-colonial contact with European traders and explorers. It is on record that gin, rum, whiskey and other beverages were used as items of exchange in commercial transactions during the colonial penetration of the continent (Pan, 1975). What might have been the first recorded evidence of serious concern about the negative role of alcohol in Africa was expressed in connection with rum-induced drunkenness. In 1844 a chief in what is today central Nigeria complained to the colonial administrators that "Rum has ruined my country; it has ruined my people. It has made them become mad" (Pan, 1975, p. 11). Thus through the exchange of "African raw materials and slaves with whiskey and gin in an infamous barter system the stage was set for the large scale commercialization of alcohol which is being witnessed today in the continent" (Obot, 1993, p. 75).

Western commercial beverages have not only penetrated every nook and cranny of sub-Saharan African societies, the region is experiencing an onslaught of alcohol marketing and promotion activities by industrial giants and less endowed local players. Africa is a sought-after market because there is a large room for growth

due to the existence of pools of abstainers and their increasing levels of disposable income (even as poverty remains a major affliction in the most countries). It is also a region with little or no restrictions on the behaviours of producers and marketers because alcohol control policies are lacking or not enforced where they exist. The result, as recent findings have shown, is that alcoholic beverages have become one of the most accessible and affordable commercial products in many countries of the region (de Brujin, 2011), and unfortunately also a product associated with a growing burden of health problems due mostly to unintentional injuries and chronic health conditions (Lim et al., 2012) often caused by road traffic accidents.

## DRINKING IN AFRICA

In every country in the African continent more people abstain from drinking than drink, with the proportion of abstainers as high as 90 percent in Muslim countries (WHO, 2011). Total adult per capita consumption (APC) is 6.15 litres of pure alcohol, which is about the global average of 6.13 litres and less than the consumption in Europe (12 litres) and the Americas (8.7 litres). However, the low overall per capita consumption in Africa hides a couple of ugly secrets. First is that while some of the lowest per capita consumption in the world can be found in Africa, two countries in the region – Nigeria and Uganda -- are consistently among those with the highest level of APC. Second is that when the amount consumed per drinker is considered, South Africa and Nigeria are in the top league of countries recording the highest levels of consumption (WHO, 2011). What this means is that the typical drinker

in these countries simply drinks too much at a sitting, a pattern of consumption described as heavy episodic or all-or-nothing drinking (Partanen, 1991).

What is being consumed? Up to 50% of alcohol consumed in Africa is not captured in official government records; this category of unrecorded alcohol is made up mostly of homemade fermented and distilled beverages. The consumption of these beverages today is generally out of necessity not choice because the most preferred beverage is western commercial beer (Obot, 2006); in other words differential cost is what limits the consumption of commercial beverages and somehow helps to sustain the market for home brews. However, this is a fast-changing situation because as national income increases, consumption of unrecorded alcohol will decrease while overall consumption will increase (WHO, 2011). Yet homemade drinks will remain an important aspect of the drinking habits of many African consumers, especially among the poor and people living in rural areas, even as increasing availability and affordability of western commercial drinks will likely diminish their acceptability.

Even in societies where alcohol is consumed by a majority of the population, most of the abstainers can be found among women and young people. In traditional African societies drinking by women was regulated and children and adolescents were largely expected not to drink on their own and sanctioned by parents if caught consuming alcohol (Obot, 1993). Again, this situation has changed in recent years as drinking among women seems to have increased (Ibanga et al., 2005; Tumwesigye et al., 2005; WHO, 2011), and as there is growing evidence that alcohol is associated with high incidence of death and disability among

young people (Roerecke, Rehm & Obot, 2006; Rehm et al., 2010). This emerging profile of increased consumption and problems among women and young adults is related to a number of economic and social factors one of which, as stated earlier, is that the large base of abstainers has become a prime target of advertisers.

### **AVAILABILITY OF ALCOHOL: NOT BUSINESS AS USUAL IN AFRICA**

The influence of economic operators on the availability of alcohol is well established and not surprising. Whether availability is viewed as making sure that alcoholic beverages can be bought at affordable prices, in terms of acceptability, or its accessibility as and when needed, the industry has interest and has been involved in many types of activities to achieve the overall goal of increased availability and consumption. This industry role in driving supply of and demand for a dangerous substance is not limited to alcohol but has been studied in the context of tobacco and other products (guns, cars, food) that are also associated with disability, disease and other negative outcomes (Jahiel, 2010). The concept of “corporation-induced diseases” as proposed by Jahiel (2008) refers to morbidity and mortality from diseases caused by the consumption of or exposure to industrial products. How this applies to alcohol has received some attention (Jahiel & Babor, 2007), and this attention is bound to increase with renewed focus on the contribution of alcohol to the global burden of disease, especially in low and middle income countries (Lim et al., 2012). In line with this conceptualization, this paper asserts that the alcohol industry is a vector for

health and social problems in Africa because it exists to propagate consumption of an addictive substance through unfair ways and means that subvert the rights of young people and vulnerable groups.

## MARKETING OF ALCOHOL

The African market has been described as a “jewel” and the alcohol industry spends large and increasing amounts of money to market and promote different types of beverage (Jernigan, 2012a, b). In some of the traditionally high consumption countries in the continent (Kenya, Nigeria, South Africa, Uganda) alcohol producers are among the top advertisers. Large producers like Heineken, Diageo and SABMiller are focused on expanding the market in these and other countries by investing heavily in new breweries and advertising their brands, and these activities seem to be producing the desired results. In Nigeria, a country long known for its love for Guinness stout (the first Guinness brewery outside Ireland and the UK was built in Lagos in 1962), net sales of Guinness products rose in the year ending in June 2012 and profits increased over the previous year even as sales declined a bit. Nigeria has indeed for many years been the second largest global market for Guinness extra stout and number one in Africa.

In a new strategy in Nigeria, alcohol is being promoted by the country’s movie industry and the hip-hop music industry seems to have played a major role in what is a growing interest in expensive liquor and wine. According to Euromonitor International Nigeria is one of the fastest-growing champagne markets, with sales of \$49 million in 2011, \$59 million in 2012 and estimated to reach \$105 million in

2017 (Smith, 2013). Across the continent beer remains the most preferred beverage but spirits are making a noticeable entry and wine consumption is not negligible. In particular Diageo has been marketing Johnnie Walker whiskey in Africa and in its 2012 annual report promises to grow the spirits business in the continent. Since it was launched in 2006 Smirnoff ice, a mixed drink, has remained very popular among young drinkers.

There seems to be no doubt that because of growing populations and increasing prosperity in some sections of fast developing countries, Africa will become a centre of high level marketing and promotion of alcohol in the coming years. This is not a surprising view, however what makes alcohol marketing and promotion in much of Africa different is the near-total lack of controls which allows the industry room to employ a wide variety of techniques and strategies to grow the market.

**Marketing and promotion strategies:** Alcohol marketing and promotion activities are ubiquitous in most African countries and highly unregulated. These activities have been highlighted in various reviews and studies (Obot, 2002; Jernigan & Obot, 2006; de Brujin, 2011) and tend to include sponsorship of events and programmes. These events are the ones that attract young people, e.g., fashion shows, beauty contests, sports events, music segments on radio, performances by foreign musical stars, and end-of-year or seasonal carnivals where alcohol is the centre of attraction (Obot, 2002). In a systematic effort to study the marketing and promotional strategies used by alcohol producers in four African countries (Gambia, Ghana, Nigeria and Uganda) a massive amount of alcohol advertising was reported in these countries except The Gambia, a predomi-

nantly Muslim country (de Brujin, 2011). Most of the advertising was on radio but also in magazines targeting special groups like women and young people. Product placement was common in urban areas and indeed the main message coming out of this study is that a walk through urban and semi-urban areas of these countries is to experience an elaborate display of beer advertising on billboards, sides of buildings, moving vehicles and store fronts where the products are often exhibited and ready for consumption.

An analysis of the common themes in the advertisements confirm what has been the predominant messages for many years (Obot, 2002). Alcohol (beer and spirits) is presented as a cultural item and the act of drinking a particular beverage is encouraged as behaviour in keeping with the ways of life of a people. The theme of success (in business, sports and the professions) and participation in a western way of life is a direct call to non-drinkers not to miss out and drinkers to continue to imbibe. And, of course, the producers tout their contribution to society in terms of jobs created and tax paid to government coffers.

Other strategies include product design where, for example, spirits are sold in small packages or bottles rendering them affordable to young people. A recent development is the local sourcing of agricultural inputs (sorghum, maize, barley, cassava) as raw materials for the production of beer. New products from these have emerged in Uganda, Kenya and Mozambique with encouragement from governments in the form of tax waivers. Because the products of these "home grown" raw materials are cheaper and therefore more affordable beer consumption may increase as the economic constraint mentioned earlier is removed. Another advantage of these

products from the industry perspective is that they products make beer seem more like a local and natural beverage and allows the industry to easily penetrate sectors of the economy and governance structures with an appealing message hinged on contributions to the economy. It is an old strategy reminiscent of the tobacco industry which for many years held up its purported contributions to the development of the agricultural sector through its young farmers programme (Obot, 1993) and continue to defend their opposition to Nigeria's tobacco control bill because of what they see as a potential loss to the economy.

**Targeting women and young people:**

Guinness (a member of the Diageo family) is known for its innovative and thematic campaigns (Michael Power, *The Ticket*) which emphasize "action" or carry aspirational messages. In 2012 the company launched a special fruit-flavoured alcoholic drink for women called SNAPP across four venues in the country. According to an industry spokesperson:

SNAPP has been introduced into the ready to drink category in response to the increasing demand for an alcoholic drink that appeals to women who want to show their individuality and unique style when out socializing with friends. This is very much in line with Guinness Nigeria's vision of celebrating life, everyday, everywhere. SNAPP is a drink that is made with the choicest ingredients giving it a crispy and naturally refreshing taste. It is a first of its kind for women in the alcoholic Ready-To-Drink category and is the perfect choice for the modern, classy woman looking for a feminine and stylish alcoholic beverage" (Okorie, 2012).

We are also informed that SNAPP was created because "We know that women are rapidly gaining economic power and

becoming more independent. Women everywhere are increasingly celebrating their successes in their various fields of endeavor, be it family or at work” (Okorie, 2012).

In a similar vein a brand from the Heineken stable advertises its television reality show in which young people go on a search and “the last man standing” goes home with very attractive prizes. The *Gulder* Ultimate Search programme was created to “promote the brand’s values of confidence, discernment, focus, courage, determination and [not to be forgotten] success” (Oduote, 2010). In Africa targeting young people and women for the promotion of alcoholic beverages has become a bare-faced and growing phenomenon.

Table 1 shows examples of the messages the alcohol industry tries to convey to the public not only in advertisements but in other forms of communication. The second column of the table are refutations of the messages on the basis of available scientific evidence.

### **A PERNICIOUS ROLE IN THE POLICY PROCESS**

The alcohol industry exists for the purpose of making money for its investors. It is not a secret that in trying to maximize profit and make shareholders happy the products are presented in ways that make them appealing to potential consumers. This often involves use of unethical approaches to marketing and promotion of products which were highlighted earlier.

It has become clear in recent years that the alcohol industry goes beyond pushing their products to trying to exert control over the environment in which they operate. This pernicious type of control involves direct involvement in national

policy development with potential for long-lasting impact. As documented in an influential paper by Bakke and Endal (2006), the alcohol industry has sought to take over the role of government in the design of alcohol policies in several African countries. Employing the services of an industry-funded centre and international consultants, and with the collaboration of often unsuspecting local organizations, such efforts were in high gear at a time when the World Health Organization was developing its global alcohol strategy. What the industry wanted and continues to seek was to influence the policy process in these countries by foisting on them a one-size-fits-all policy which promotes strategies not supported by scientific evidence but which protects the interests of the industry. The policies proposed by the industry agents (like the focus on education and responsible drinking) ignore the public health impact of alcohol and the process of designing them is a subversion of the rights of countries to direct their affairs in ways that are not detrimental to the welfare of its citizens.

### **NOT AN ORDINARY BUSINESS**

The publication of the book *Alcohol: no ordinary commodity* (Babor et al., 2003) ten years ago served as a wake-up call to the public health community and policy makers to the role of alcohol in society. Alcohol is not a commodity like bread and vegetables; it is a toxic, intoxicating and dependence producing substance with well-established causal links to acute and chronic health and social problems. And unlike the consumption of ordinary products, drinking leads to more drinking and more drinking means more trouble espe-



**Table 1.** Alcohol industry views versus scientific evidence

Industry views	The scientific evidence
Drinking is a normal activity; everybody does it.	No, everybody does not do it. In fact most people do not drink (WHO, 2011) and there are good reasons for them not to drink. For example, adolescents, pregnant women, people engaged in some risky activities like operating machinery, and those with some medical conditions are advised not to drink. Moreover, in some religious traditions the consumption of alcohol is prohibited.
Drinking and success go together.	This is a powerful message especially among the young so it is not surprising that success has remained a common theme in advertisements. Of course, available evidence does not support the touted association. On the contrary, failure is more likely to follow heavy drinking than success. Alcohol is a risk factor for non-communicable diseases, HIV/AIDS and drinking is associated with problems that impede personal and socio-economic development (Room, Rehm & Parry, 2011).
Alcohol is part of your cultural heritage.	The beverages that are advertised as cultural items tend to be spirits – gin is a favorite. It is a drink often used in transactions between two parties, in libations to appease the gods, and favoured by elders and leaders of the clan. But as distilled spirits play quite a disruptive role in the African culture, a role that led a traditional ruler in colonial times to call for help because of the effects (Pan, 1975).
Alcohol is good for you.	There is evidence from some western countries that moderate drinking is associated with cardio-protective effects. However, because of the pattern of consumption that is characterized by heavy episodic drinking the net effect of alcohol consumption in Africa in terms of death and disability is negative (Lim et al., 2012).
Alcohol advertising is only for brand loyalty; it is not meant to encourage drinking initiation.	Alcohol advertising may be important in brand loyalty but it does much more than that. There is good evidence that exposure to advertising influences the initiation of drinking among young people (Anderson et al., 2009; Henrikson et al., 2008).
The alcohol industry is an important contributor to the economy.	Alcohol producers pay taxes to government but unlike other products alcohol is a major contributor to burden of disease across the world (Lim et al., 2012). Alcohol is associated with chronic diseases, accidents, health care costs, etc. In countries where the social and economic costs of alcohol have been conducted as in Canada, US, Australia, the costs to society outweigh whatever tax benefit there might be.
If only everyone drank responsibly there would not be any alcohol-related problem.	“Responsible drinking” is a deceptive term. The deception lies in the assumption that the problem with alcohol lies with people who habitually drink too much. In real life people who “drink responsibly” sometimes drink too much and there is evidence that occasional heavy drinking is associated with elevated mortality in males (Rehm et al., 2001).
The alcohol industry should be at the table as a partner in the policy development process.	We have seen what being at the table means in the actions of economic operators in several African countries (Bakke & Endal, 2006). It means behaviours which aim to protect the interests of investors and against the principles of public health. As the Director-General of the World Health Organization recently observed “The development of alcohol policy is the sole prerogative of national authorities. In the view of WHO, the alcohol industry has no role in the formulation of alcohol policy, which must be protected from distortion by commercial interests” (Chan, 2013).

cially in African societies where the pattern of drinking often involves heavy episodic consumption.

Just as alcohol is not an ordinary commodity, alcohol marketing is not an ordinary business. It is a business that carries with it a high potential for harm and this harm increases with use. For example, the high level of harm associated with alcohol in some parts of the African continent (Lim et al., 2012) seems to be mostly a direct result of increasing availability of alcoholic beverages in these countries (WHO, 2011). Alcohol marketing is not an ordinary business because advertising influences consumption. Products are advertised to increase their exposure to the public or some sections of it, make them appealing to potential buyers, and ultimately increase sales of the product. This business consideration is not any different when it is beer, wine and spirits that are advertised and it is doubtful that so much would have been invested in advertising them if there was no overall business benefit derived from it. Beer companies are among the largest advertisers in several African countries targeted by the industry and the evidence is there to show that indeed advertising influences the behaviour of young people in such a way that those exposed to advertising messages are more likely to initiate drinking and drink more than those not so exposed (Anderson, de Bruijn, Angus, Gordon, & Hastings, 2009; Henriksen, Feighery, Schleicher, & Fortmann, 2008).

## THE RESPONSE

In much of the western world the behaviour of the alcohol industry is increasingly being monitored by government and non-

governmental bodies but in Africa little of that is going on. Worse still, only a few countries have policies which seek to control the production, distribution and consumption of alcohol. For example, only a handful of countries have alcohol policy in the form a government document with debated and adopted principles and actions to attain the goal of reducing consumption and alcohol-related harm. In other words while it is clear from available data that alcohol is a growing menace in the African region the response by governments has been tepid at best and in some cases whatever response exists is influenced by the industry through their role in the development of the policy document. This case of asking the goat to watch over the yams has been documented by Bakke and Endal (2011) and serves as a warning to governments that the self interest of the alcohol industry is incompatible with public health which should serve as the bedrock of alcohol policy.

The influence of the alcohol industry is manifested not only in its meddlesomeness in the policy process but also in wanting to foist strategies that are not supported by evidence of effectiveness. There is consensus today that alcohol problems can be reduced with the application of evidence-based policies which include restrictions of availability and control of marketing and promotion (WHO, 2011; Babor et al., 2010). However, in what can only be regarded as attempts to mislead, the industry continues to push those policy options that are less likely to affect the bottom line. The focus on strategies that do not work to reduce consumption and problems is guided by economic considerations and not social welfare.

### **Vigorous national responses are needed**

In the face of industry onslaught on the rights of young and vulnerable people



through direct targeting, the response to alcohol problems in Africa and other parts of the world has benefitted from work carried out by the World Health Organization. A Global strategy to reduce harmful use of alcohol was adopted by the World Health Assembly in 2010 in recognition of the link between alcohol, health and development (WHO, 2010). The strategy document lists ten policy options and interventions and calls for global efforts to assist member states in implementing evidence-based measures to address consumption and related harm. Among the ten areas of work are: response from the health sector to minimize the effects of harmful use of alcohol, drink-driving countermeasures, pricing policies, availability of alcohol and marketing of alcoholic beverages. Following the lead of the global body, the African Office of the World Health Organization has also identified ten policy options or priority areas similar to the global policy options.

Since the developments of these guides to action a consensus has emerged among public health practitioners that that some actions are more important than others and that to achieve reductions in harmful consumption and problems three areas are particularly poignant. Sometimes known as the “three best-buys” these areas are reduced availability, pricing and taxation policies, and control of marketing and promotion. National alcohol control policies should be developed with a special attention to these three options based on extensive literature which support their association with use and harm. Unfortunately these are the policy options often ignored by the alcohol industry while they focus attention on policies that have limited effectiveness. Of course in Africa it is also necessary to address availability in the context of widespread consumption of

informal and illegal alcohol especially as this impinges on the successful implementation of effective policies.

## CONCLUSION

That alcohol is a major contributor to the burden of health and social problems in a growing number of African countries is hardly debatable. This burden has been highlighted recently for some countries in southern and East Africa. There is no reason to believe that many countries in West and Central Africa are not in the same boat and only lack of data prevent similar findings.

The good news about alcohol problems across the world is the availability of the technology to control alcohol problems via the implementation of tested policy options. Though the success of these strategies have been predominantly in western countries, there is some evidence that the three “best buys” combined with other measures mentioned above (including providing services in the health care sector) can offer the protection needed. As presented in the WHO strategy (WHO, 2010), an awareness of the danger caused by unrestricted marketing and its consequence is a first step in action against alcohol by nations across the world. More needs to be done by civil society and public health experts in African countries to advocate for effective alcohol policies while keeping at bay the meddlesomeness of economic operators whose interest is in selling more and more of their products but who masquerade as defenders of public health. Ultimately it is the responsibility of countries to protect the right to health of young people and all their citizens by reducing their exposure

to targeted marketing and promotion of what is essentially an addictive and dangerous psychoactive substance.

It is also important to keep in mind that the major alcohol producers in Africa (Heineken, Diageo, SABMiller) are large global organizations with heavy financial involvement of Western-based investors, and that the unethical behaviours of the industry in Africa are largely not tolerated in their home countries. The road to success, therefore, needs to include concerted global action to check the excesses of economic operators through monitoring and reporting of unethical activities of the industry by interest groups in their home turfs and in what the industry sees as the emerging alcohol markets of Africa.

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