

STRENGTHENING CAPACITY FOR ALCOHOL POLICY ADVOCACY IN AFRICA: MAPPING GAPS IN BLUE CROSS ORGANIZATIONS

**EDIOMO-UBONG NELSON, TAO GONBOA, ANNE BABB,
FLAVIA GANARIN, SIBYLLE DIRREN
INTERNATIONAL BLUE CROSS, BERN, SWITZERLAND**

- Alcohol consumption is a leading cause of death, diseases and injury globally.
- Africa is faced with a growing burden of alcohol consumption and negative effects.
- In Africa, there is a ‘perfect storm’ of alcohol availability, consumption and lack of effective control policies (Caetano & Laranjeira, 2006).

- Civil society organizations (CSOs) play major roles in alcohol control in Africa (Aneja et al., 2023).
- Less is known about the challenges facing these organizations (Obot, 2004), particularly the areas of capacity development needs.
- This study assesses gaps in the capacity to advocate for alcohol control policies among Blue Cross Organizations (BCOs) in Africa.

- The assessment was undertaken to inform the development of a training curricula on alcohol policy advocacy for BCOs in Africa.
- BCOs are grassroots organizations implementing alcohol prevention, treatment and advocacy in local communities in partnership with the International Blue Cross (IBC).
- IBC aims to prevent and reduce the use, misuse and dependence on alcohol and other drugs and related harms, especially among the most vulnerable people.

- Design: A descriptive/qualitative design was adopted to assess the capacity development needs in Blue Cross organizations in Africa.
- Sample: Program staff from Blue Cross organizations in 15 African countries were purposively selected (n=23).
- Interviews: A semi-structured interview guide was used to generate information on the capacity development needs of program staff.
- Data analysis: Transcripts were analysed thematically based on the core areas of capacity development outlined in the interview guide.

- Interviewees identified 5 core areas of capacity development needs:
- **Research and documentation:** Interviewees outlined gaps in capacity to generate reliable data through original research (e.g., surveys, focus group discussions) for use in advocacy, limited knowledge of relevant sources of secondary data on alcohol use and harms, and how to handle data on sensitive topics (e.g., drinking, health issues, domestic violence) in ethically responsible ways.

- **Evidence-based alcohol policy measures:** Interviewees identified a need for a better understanding of the SAFER package of interventions and how they are applied to reduce harmful alcohol use in specific contexts. Specifically, they identified limited knowledge of the core logic and scientific evidence supporting these policy measures. They also highlighted differences in implementation contexts, and a need for evaluation research to understand the effectiveness of these measures in African countries.

- **Effective public health advocacy:** Interviewees expressed a need for improved capacity to conduct advocacy with policy makers, including local community leaders. They also identified a gap in the capacity to communicate scientific findings and the SAFER interventions clearly and understandably to policy makers, communicating effectively with agencies of government responsible for alcohol prevention and treatment (e.g., ministries of health), and how to counter industry interference in domestic alcohol policy processes.

- **Monitoring alcohol policy implementation:** Gaps were identified in the capacity to monitor alcohol policy implementation. This includes identifying indicators and sources of data for verification.
- **Networking in alcohol policy advocacy:** Gaps existed in knowledge of other organizations and network of organizations involved in alcohol policy advocacy in country and region of operation, how to navigate participation in existing networks, and how to build networks and partnerships across relevant sectors (e.g., NCDs, HIV, gender-based violence).

- Findings show gaps in capacity development across important areas of alcohol policy advocacy.
- Capacity development needs centered around technical knowledge/skills (e.g., research, policy approaches), and inter-organization partnerships.
- Developing capacity in these areas (through training and practice) is essential for strengthening CSOs roles in alcohol policy advocacy.

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THANK YOU!