Background

The project "Analytic Study on Alcohol and Violence Against Women" which was undertaken by International Center for Research on Women (ICRW) is a part of the new strategy of Government of UK’s Department for International Development (DFID) under its Knowledge Partnership Programme (KPP). KPP is funded by DFID and managed by a Consortium led by IPE Global Limited under its Knowledge Initiative. The project explores the crucial yet unexplored link between alcohol consumption and women’s subjection to violence in the context of policies around the subject.

The findings of the study gain prominence in the context of the Draft Status of Women Report brought out by the High Level Committee on status of women in 2015. The discussion on ‘Alcohol Policy, Trade, Taxation and Regulation’ also feature in the report which recommends a ‘National Policy including a National Action Plan to End VAW’.

Research shows that drinking alcohol is an important factor linked to violence against women. However, so far the approaches to understanding and addressing alcohol and Violence Against Women (VAW) have been individual-oriented i.e. changing individual’s drinking behavior and treating alcoholism.

The present study explores and examines this link to understand how the association between the two is articulated, addressed in various policies and laws pertaining to alcohol regulation, and violence against women. The study also presents views of policy makers, stakeholders, practitioners that engage with the issue of alcohol and/or violence against women in examining this linkage.

This project contributes to deepening of the knowledge of structural issues around alcohol and violence against women. It explores a hitherto under research subject and will contribute to future policy direction on the subject.

Introduction

Drinking alcohol is an important factor linked to violence against women.

The role of alcohol policies in addressing VAW seems to be missing from the discussion. Such a discussion would entail looking beyond individual drinking patterns and address examining how alcohol policies of selling, taxation, regulation etc. buoy alcohol consumption are linked to VAW. There is a minimal inter-sectorial dialogue between stakeholders that are directly affected by these issues, viz: alcohol policy makers and stakeholders, programmers and policy makers who address VAW.

Several research studies have established the linkage between alcohol and violence against women. Alcohol though not a “causative” factor in perpetuating violence against women, is an important contributory factor in addressing violence against women.

Policies to regulate alcohol access and availability are predominantly governed by economic considerations. Despite the evidence showing linkages between alcohol and violence, scant attention is paid to prevent violence against women through regulatory alcohol policies and programs. On the other hand violence against women prevention programs have paid little systematic attention on how to incorporate alcohol in the prevention strategies. The lack of dialogue across sectors despite obvious linkages is evident at various levels – policy, research, activism and programs. This study aims to fill in an important gap in this dialogue at the policy level with the hope that this will trigger a discourse at various other levels.
Alcohol and Violence Against Women

Alcohol and VAW: What do we already know?

Desk review highlights several pathways between alcohol and violence against women. All alcohol consumption is not directly linked with violence against women.

Evidence shows that:

- High level of alcohol intake and greater frequency of drinking are more proximal drivers of Violence Against Women (VAW).
- Alcohol consumption is more directly associated with sexual violence against women.
- Socio-cultural factors like norms around masculinity and drinking are very important in addressing the role of alcohol in VAW.
- Other structural factors such as alcohol regulatory policies like alcohol outlet density, regulating hours of sale and increased taxation have an impact on regulating alcohol consumption, however its impact on reduction of VAW needs further research. Whereas factors such as education, employment of women, tend to mitigate the effects of alcohol-related VAW.

Few research studies on social costs of alcohol show that families that spend money on alcohol tend to be more indebted, pushed into impoverishment arising out of distress selling.

With economic resources being eaten up by buying of alcohol, lack of money exposes women to hardships and women are often forced to supplement family income and take on the additional burden of becoming the economic providers. A study comparing two groups of families within the same community in Delhi, India (one group of families with one adult consuming alcohol and vice versa), found that families with at least one person who used alcohol, on an average, spent almost 14 times more on alcohol per month compared with those who did not use alcohol. Moreover, families with alcohol users reported significantly more debt and were more likely to use health services, spend money on health. Thus implications of alcohol consumption on the family means that families’ resources that are used for alcohol, and related expenses, renders the family unit deprived of financial resources for food and education of children and fewer resources for purchasing daily living consumables. (WHO, 2004)

Interventions to address the linkage of alcohol and VAW have been few, with majority of programs falling into the category of de-addictions treatment that do address VAW as a familial issue.

Alcohol interventions generally fall into four categories:

1) Brief interventions involving screening in primary health care settings and using a brief verbal inquiry during history taking
2) Community-based interventions that aim at changing the drinking environment through social norms, campaigns, education in schools etc.
3) Venue-based alcohol reduction interventions
4) Structural interventions restricting access to alcohol by developing laws and policies to make alcohol more expensive and less available.

Case Study: Power of Women’s Movement Against Alcohol in AP

In 1990, the women of Dubagunta, a small village in the Nellore district of the south Indian state of Andhra Pradesh spontaneously began an anti-arrack agitation. They pressurized men to swear that they would stop drinking, physically restrained habitual drinkers, attacked liquor shops and go downs and fought with the police, liquor mafia and the drunks. The movement spread like wildfire to 800 villages throughout the state in a short period of time. Women in these 800 villages not only prevented the entry of liquor into their villages, but also prevented district collectors from holding arrack shop license auctions. The movement began as an outcome of women’s participation in the literacy classes that exposed and sensitized women to fight for their rights, women when came together realized that “alcohol” was the common problem shared by all. The women in the movement represented poor, Dalit women who were most affected by the Arrack consumption of men which was promoted by selling Arrack in “sachets” at their door steps, and Arrack sales helped improve revenue for the government. The women’s movement did not have any pre-mediated plan, but just a simple demand “no Arrack shops in our village”, when the alcohol sellers moved to the court to reopen the shops, the women even contributed Re 1 each in order to substitute the loss of income of the alcohol sellers. In a massive show of strength thousands of women stalled auctioning of liquor licenses and forced the Andhra Pradesh Government to impose a complete ban on Arrack in the state, this ban lasted for 4 years. Anecdotally, women reported a significant decrease in the violence especially domestic violence they faced in their lives, but this impact on violence has not been captured in any systematic research.

Case Study: Rajasthan shows the way

In Rajasthan, a committee was appointed by the government of Rajasthan to look into tackling the ill-effects of alcohol. Among several measures suggested by the committee to address the social ill-effects of alcohol, the committee has recommended that if a family member or wife of a state government employee reports harmful use of alcohol by the state government employee, half of his monthly salary will be deposited directly to his wife’s bank account. An order to this effect was passed in 2013 by the government.

October-15
Study Findings from the field

The salient findings of the qualitative data reflects the disconnect between the sectors of alcohol and violence against women:

- The interviews with the alcohol policy stakeholders, did not see VAW as an area for them to address and felt that it is an individual and family issue, they did not feel that alcohol policy changes can structurally affect VAW.
- The stakeholders who represented the women’s issues, on the other hand saw the issue of alcohol and VAW as a structural problem and felt that in order to deal with it, a structural approach is needed to affect a range of issues ranging from improved alcohol policy to addressing male drinking norms and masculinity that support VAW.

How does India compare with some Low income countries (LICs) on alcohol regulatory policies?

Despite its shortfalls, India has some of the most progressive alcohol regulatory policy provisions, when compared to some other LICs. While India suffers from a problem of inconsistent and inadequate policy implementation, many countries in the African region are just beginning to grapple with the issues of alcohol policies. Issues of alcohol packaging (selling in sachets and pouches) which most states in India have already done away with, still persist in countries of Africa like Ethiopia, Kenya and Rwanda.

Table: Alcohol regulatory policies on key policy indicators across select LICs

<table>
<thead>
<tr>
<th>Country</th>
<th>Written national policy/acton plan</th>
<th>Excise tax on Beer, Wine, Spirit</th>
<th>National Minimum drinking age</th>
<th>Restrictions for sales on:</th>
<th>Ban on advertisements of alcohol</th>
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<tbody>
<tr>
<td></td>
<td>Hour of sale</td>
<td>Density</td>
<td>Specific events</td>
<td>Intoxicated person</td>
<td></td>
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<tr>
<td>Ugan da</td>
<td>No</td>
<td>Y</td>
<td>18</td>
<td>Y N N N</td>
<td>No</td>
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<tr>
<td>Rwanda</td>
<td>No</td>
<td>Y</td>
<td>18</td>
<td>Y N Y N</td>
<td>No</td>
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<td>Ethio pia</td>
<td>No</td>
<td>Y</td>
<td>18</td>
<td>N Y Y N</td>
<td>No</td>
</tr>
<tr>
<td>India</td>
<td>Yes (draft policy)</td>
<td>Y</td>
<td>18-25</td>
<td>Y Y Y Y</td>
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</tbody>
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In India the State Legislature has exclusive powers to make laws and policies and levy taxes on the production, distribution, sale, taxation of alcohol. Alcohol is a state subject and different state ministries and departments regulate different aspects of alcohol. For example, the Ministry of Social Justice and Empowerment oversees alcohol use prevention programs, capacity building for alcohol prevention and treatment and in some states runs de-addiction centers. The Ministry of Health and family Welfare mostly is concerned with funding and running de-addiction, rehabilitation centers in individual states. Other aspects of alcoholic beverages like regulation, taxation, are in the ambit of the ministry of finance and the State Excise Departments. There is an apparent lack of systematic coordination between these various ministries and thus no comprehensive national data on the production, sale, consumption and other related health and social harm of alcohol-use in the country1.

Review of states Alcohol policies: Bihar, Odisha and Tamil Nadu

A quick review of excise policy in the three states reveals that all the three states have seen an increase in sales tax and state revenue from sales of alcohol.

The excise polices of all the three states do not mention the social harms of alcohol and do not take any cognizance of these. All the state excise policies are geared towards curtailing sale of illicit and spurious liquor and this has been projected as the excise department’s rationale for imposing control and any mention of social harm, social evils, attributed to alcohol use are attributed to illicit alcohol.

While some of the gaps in alcohol policies have been mentioned earlier like lack of consistent enforcement of minimum legal age, alcohol policies are largely revenue oriented and therefore are not cognizant of harms of alcohol to the society. The wide variation in taxation regimes in states show that the pricing of alcohol is solely driven by profit motive. The fact that none of the excise policies reviewed even mention the words “violence, “women”, health” is illustrative of a total apathy toward public health. Structurally since alcohol is a state subject and a subject that is spread across departments, the departments concerned with public health related aspects of alcohol like the Ministry of Social Justice and Empowerment’s (MoSJE) roles are limited in their scope due to a lack of dialogue and even a conflict of interest between these ministries.
Major conclusions

Heavy drinking and binge drinking of alcohol are related to VAW; however treatment programs only treat “habitual heavy alcohol use”, binge drinkers fall out of cracks of alcohol treatment.

Not all types of alcohol consumption is linked to violence. However interactions with stakeholder and review of programs revealed that treatment programs exist only for “habitual alcohol users” not for “binge drinkers”. It is an important gap to address since literature also reveals that treatment for alcohol addictions has favorable outcomes for female partners.

Structural interventions on Alcohol policy are effective

The review shows that structural interventions like increased taxation, decreasing availability, decreased access to alcohol are perhaps the most effective and have far reaching consequences on multiple outcomes of alcohol including decreasing violence against women.

Changes in alcohol policies in India are not evaluated to assess their impact on decreasing VAW

For example Bihar of late has banned selling of alcohol in sachets, whether this policy change will result in regulating access to alcohol is however unknown.

Disconnect within the policy making bodies on alcohol with respect to addressing VAW

The reviewed policies and interviews with stakeholders reveal that the portfolio of alcohol, which is divided amongst multiple ministries and departments do not interact with each other on several issues, but most importantly on issues of alcohol and VAW. In fact there seem to be potential competing agendas in the way alcohol policies and programs are implemented by the various alcohol policy-related ministries and departments.

The present study showed interesting layers in the way women’s group articulate the issues of alcohol and VAW.

Women’s groups have perhaps fought the hardest to keep the focus on “patriarchy, masculinity” as being at the roots of VAW. However during the course of the study interactions with women’s groups revealed that women’s groups at grassroots levels think of the need to tackle “alcohol” as an issue. At the grassroots level, women tackle alcohol shops, excise department, whereas at a macro level advocacy is carried out to sensitize the government on issues of patriarchy.

Way Forward: Study Recommendations

Major recommendations at the program level

- Creating linkages between alcohol treatment centers and women’s crises intervention centers

  Women’s crises intervention centers and de-addiction centers are the two service delivery points where potentially the intersection between alcohol and intimate partner violence can be addressed. However in the course of this study, barring one example no coordination was found between these two service delivery points.

- Need to critically think about alcohol prevention awareness programs

  - create materials that question norms around drinking and masculinity and its manifestations
  - provide adequate information about the ill-effects of alcohol to a person’s health
  - create role models, like recovering addicts as resources people in awareness generation activities
  - provide complete information including contact details of de-addiction units where people can seek help.

Major recommendations for policy level:

- Strengthening the data and information base

  It is extremely important to collect data on all aspects of alcohol policies and programs. For example, the current study was not able to conduct an analysis of cost-benefit analyses of various alcohol policy reforms on state revenue and concomitant gain in terms of reduced violence against women due to paucity of adequate secondary data sources.

- Optimize existing policy measures and programs on alcohol to address VAW

  Of many countries in South Asia, India has some of the best practices in terms of policies on alcohol regulation. The reviewed literature shows that these policies when implemented consistently influence multiple negative outcomes associated with alcohol including VAW. However in order to effectively implement these policies and programs, policy makers even with the alcohol sector need to work together, garner political will and fight alcohol ‘mafia’.

- Need to have a national alcohol policy/regulatory guidelines

  Alcohol policies in India vary by state as it is a not a federal subject, but a state subject. Consequently, systematically loopholes exist that impede implementation of alcohol policies. For example: in Maharashtra the minimum age of drinking is 25 years; whereas in the neighboring state of Goa it is 18 years, thus still keeping alcohol accessible. Uniform alcohol policy could help overcome these loopholes.

- Identifying innovations, evaluating these to integrate in policies and programs pertaining to alcohol to reduce alcohol-related VAW

  In order to demonstrate that alcohol policies can be responsive to safeguard women’s rights, innovative practices such as those outlined in the study (case studies) need to be documented and evaluated for their effectiveness.