

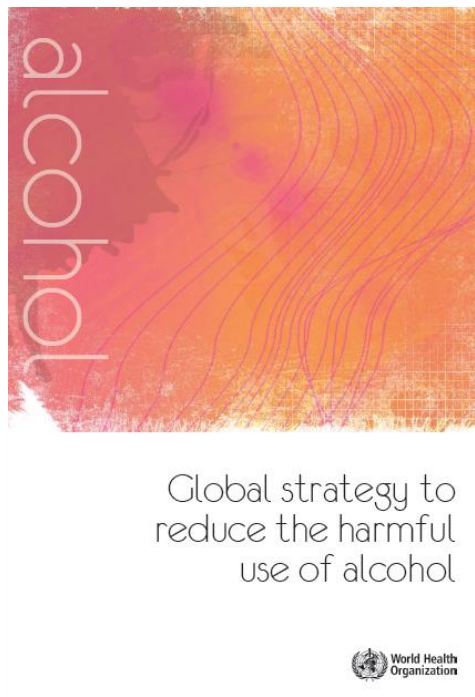
# Raising prices on alcohol through excise taxes & pricing policies

AND

# Earmarked tax for health & well-being

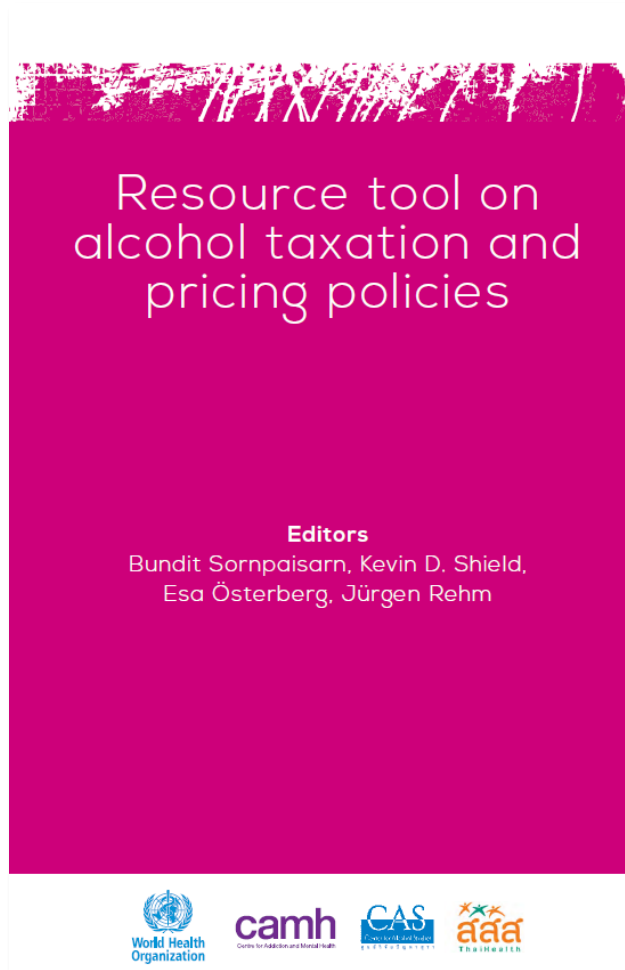
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WPRO Training for leadership and advocacy teams to reduce alcohol harm in young people  
18-20 June 2019, Phnom Penh



## Area 7 Pricing policies

- a) **establishing a system for specific domestic taxation** on alcohol accompanied by an effective enforcement system, which may take into account, as appropriate, the alcoholic content of the beverage;
- b) **regularly reviewing prices** in relation to level of inflation & income;
- c) **banning** or restricting the use of direct & indirect **price promotions**, discount sales, sales below cost & flat rates for unlimited drinking or other types of volume sales;
- d) **establishing minimum prices for alcohol** where applicable;
- e) providing price incentives for non-alcoholic beverages;
- f) reducing or stopping subsidies to economic operators in the area of alcohol.



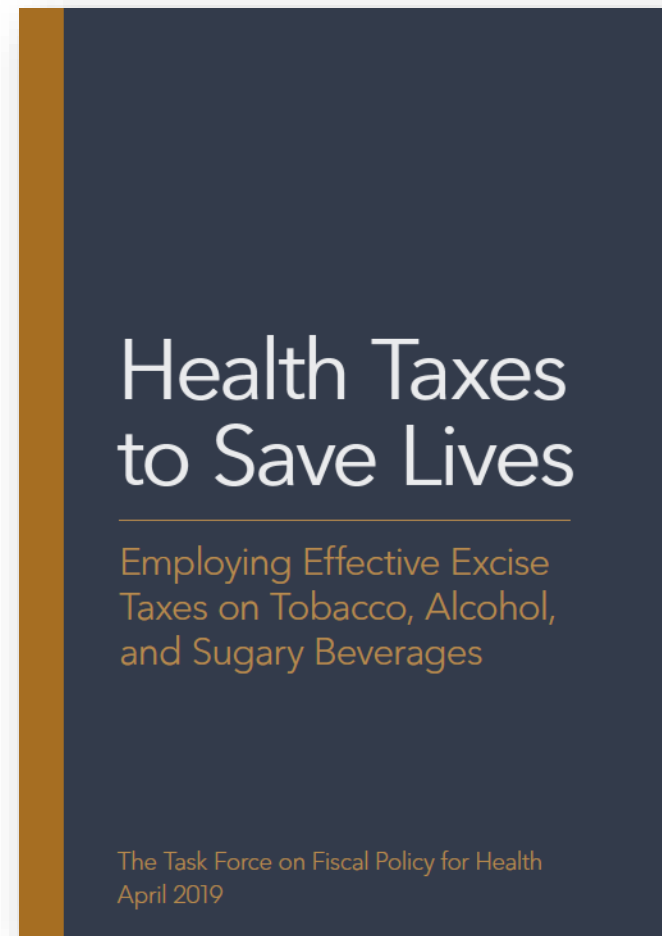
# Resource tool on alcohol taxation and pricing policies

## Editors

Bundit Sornpaisarn, Kevin D. Shield,  
Esa Österberg, Jürgen Rehm



2017



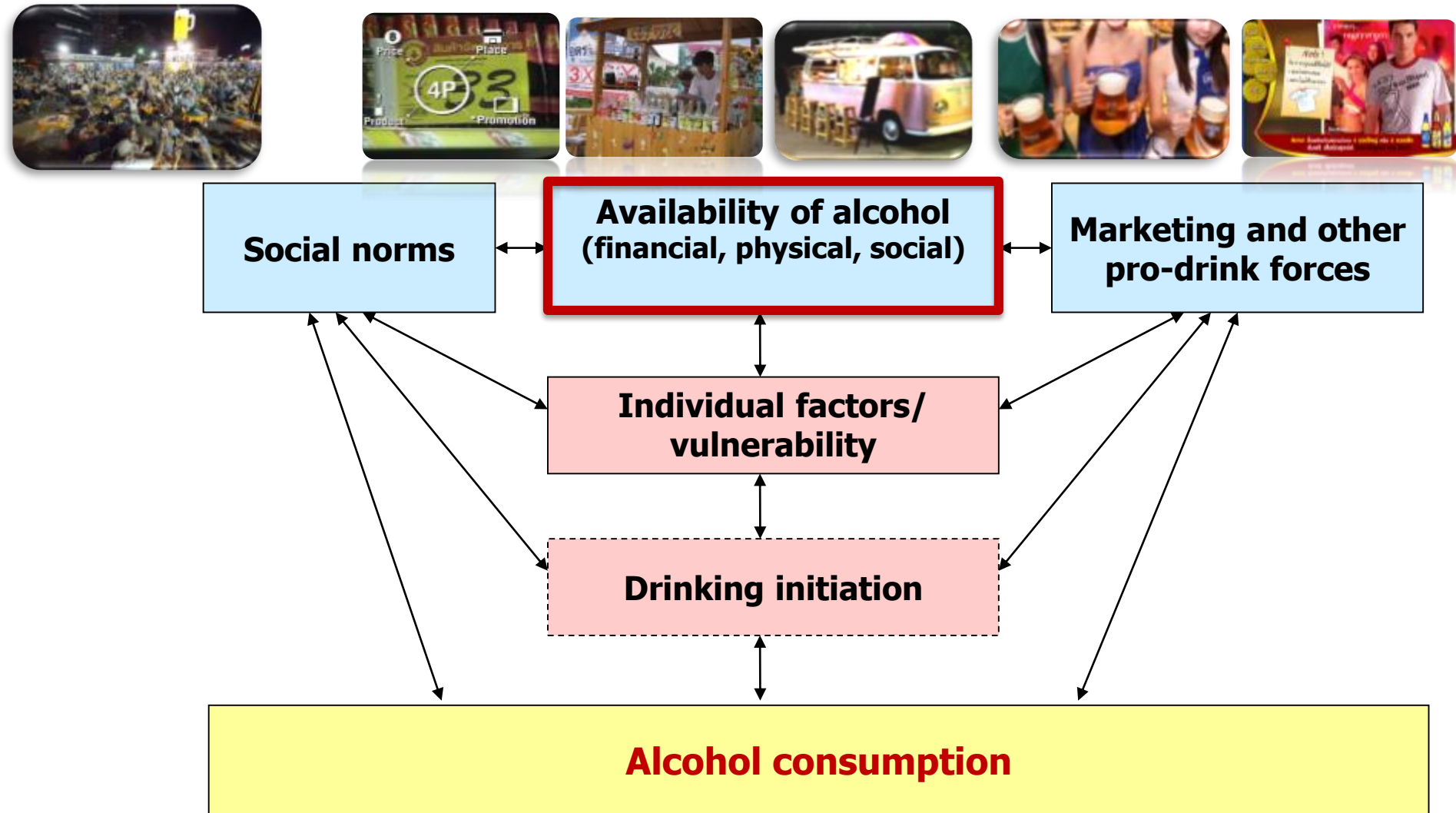
# Health Taxes to Save Lives

Employing Effective Excise Taxes on Tobacco, Alcohol, and Sugary Beverages

The Task Force on Fiscal Policy for Health  
April 2019

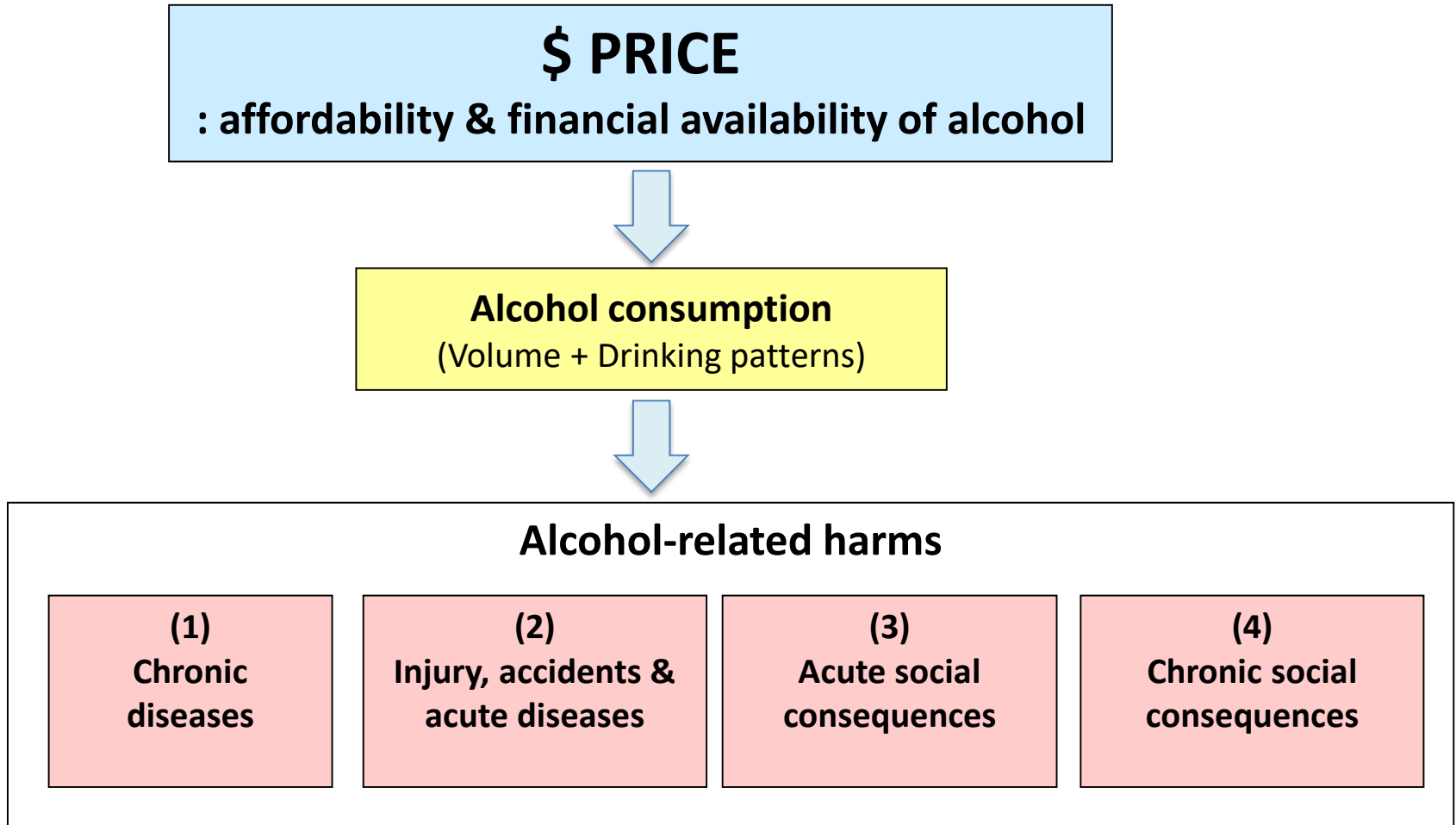
2019

# Why people drink: understand its determinants



Modified from Birckmayer et al, A general casual model to guide alcohol, tobacco and illicit drug prevention: assessing the research evidence (2004),

# The price of alcohol is the main factor influencing alcohol consumption & its related harms.



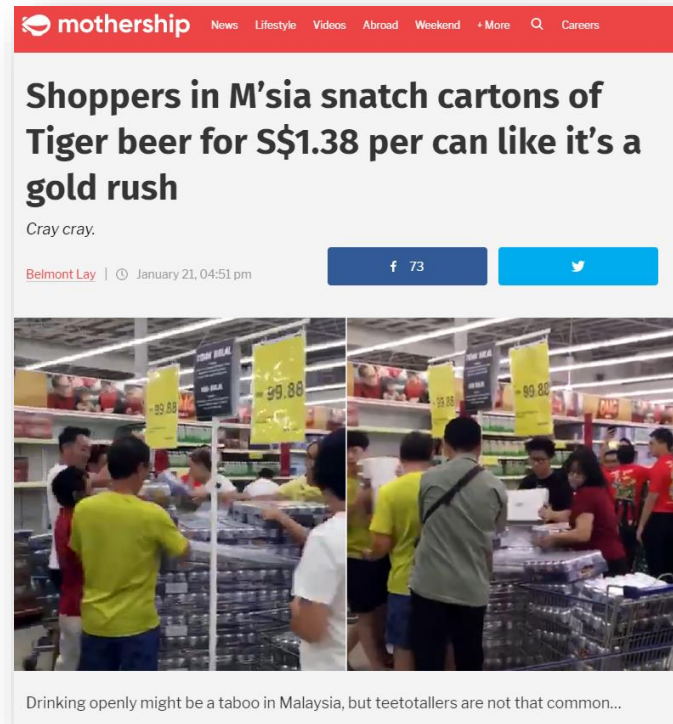
Modified from Birckmayer et al, A general casual model to guide alcohol, tobacco and illicit drug prevention: assessing the research evidence (2004),

# The price of alcohol matters. Lower prices >>> higher demands

The more affordable alcohol becomes, the more people drink, & the more harm to society.  
To control the price of alcohol in order to reduce consumption & harm.



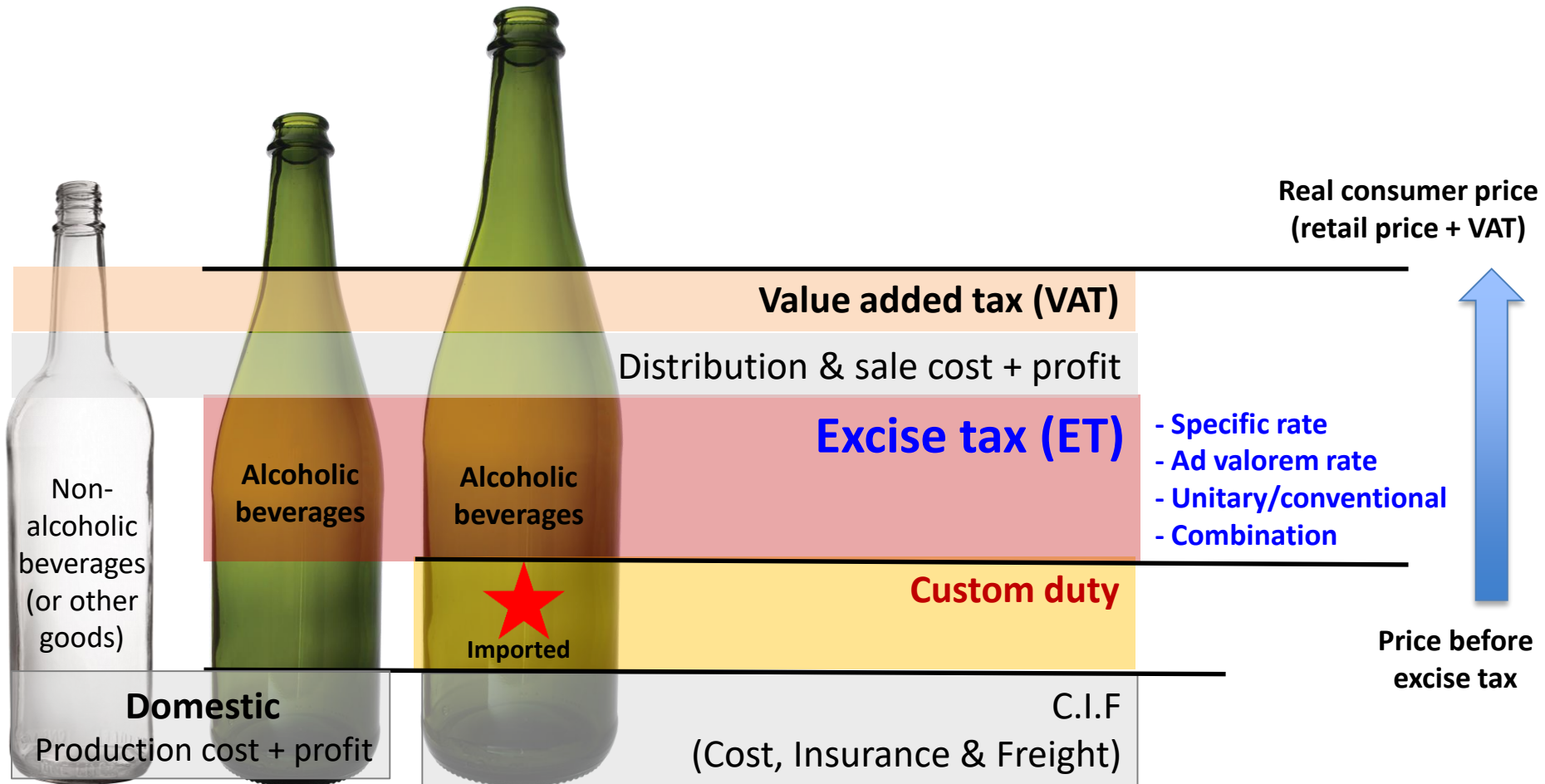
During pre-Chinese New Year, a carton of 24 cans of beer was retailing for RM99.88, or S\$33 as price promotion



Tiger beer, which originates from Singapore, is sold for about S\$2.70 per can here. Malaysia's pre-Chinese New Year prices are about half that of Singapore's regular price for Tiger beer.

Source: <https://mothership.sg/2019/01/tiger-beer-cheap-malaysia/>

# Price & tax systems for alcoholic beverages



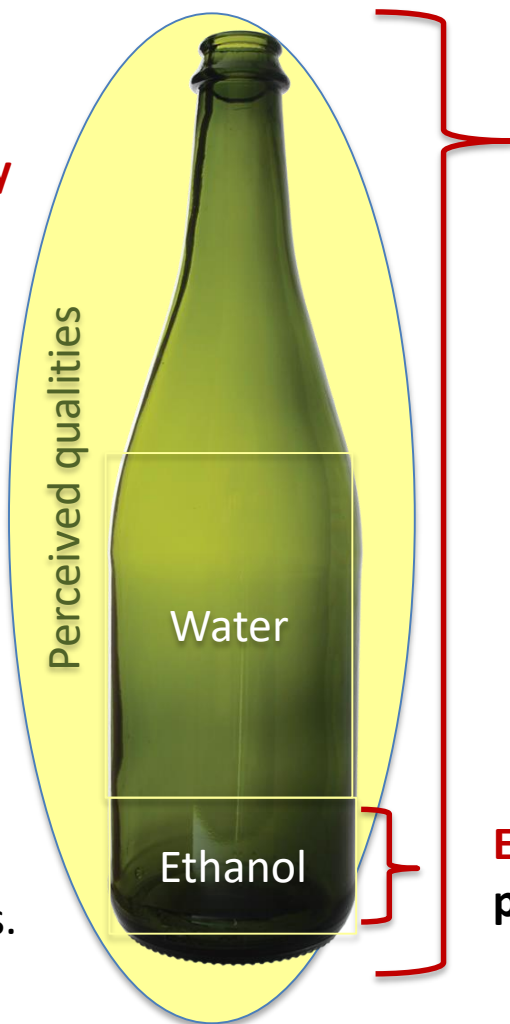
# A hypothetical structure of the price of an alcoholic beverage

## Perceived quality (value):

all other components & attributes, such as years of brewing, colour, taste, container, image

(**determined by advertising**),

and transportation & distribution costs.



**Beverage price** is the total price of an alcoholic beverage, which already includes the price of **all perceived qualities**.

**Beverage price per unit of ethanol** is defined as beverage price divided by the total amount of ethanol of the beverage (\$/ethanol).

**Ethanol price** is the price of one unit of pure alcohol (ethanol).



# Taxation has a **win-win-win** solution.

## A **WIN** for **public health**

- reduce volume of alcohol consumed among drinkers & heavy drinkers
- encourage drinkers to quit
- reduce harms from consumption
- prevent drinking initiation among young people (↓ underage drinking)

## A **WIN** for **domestic resources/revenue**

- reliable & predictable source for national development (i.e. for better health, education, sanitation, etc.)
- crucial in LMICs

## A **WIN** for **society**

- reduce social inequality & protect the poor
- reduce/pay for social costs of consumption

# Alcohol demand is inelastic.

Price elasticity <1: if price changes by 10%, demand falls by less than 10%.  
Beer is least elastic (0.4-0.5); wine & spirits have elasticity around 0.7-0.8.

In LMICs, an **increase of 10% in the alcohol price** is associated with a **6.4% reduction in its consumption** (5% for beer & 7.9% for wine and spirit)

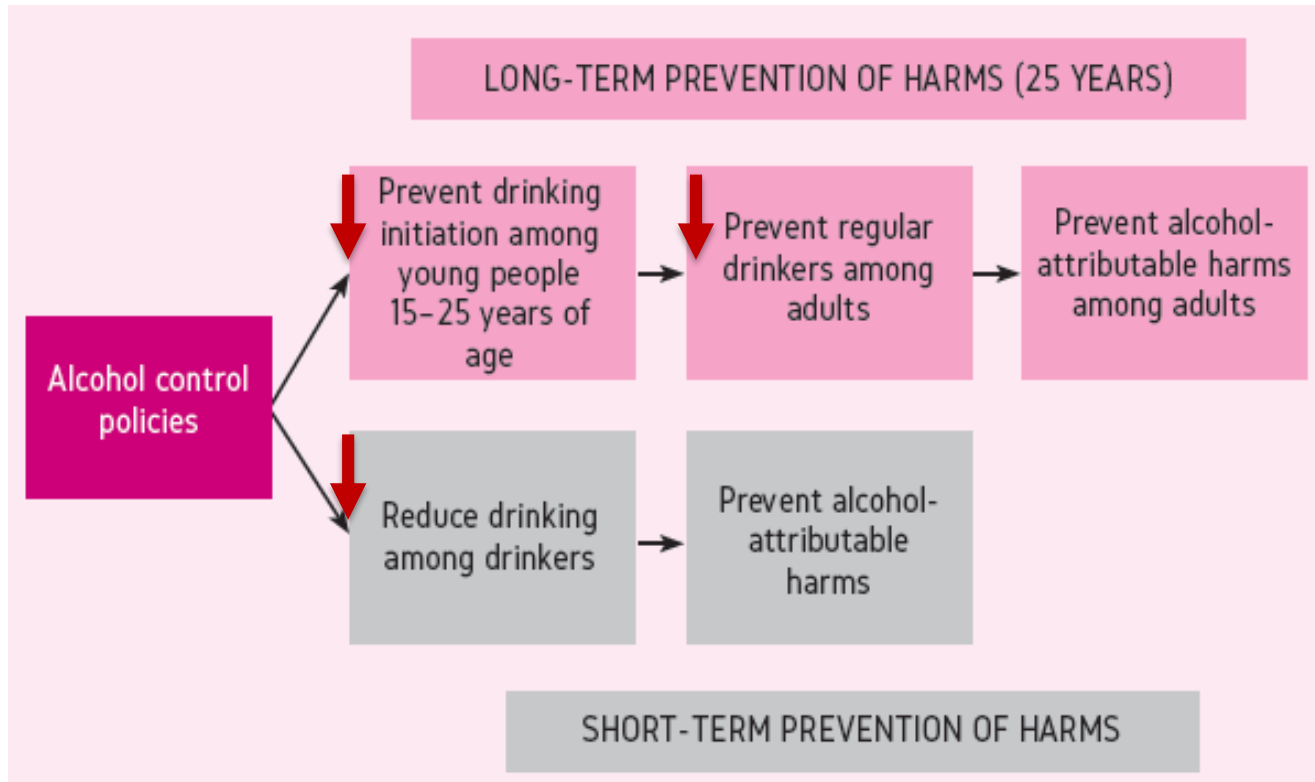
$$\text{Price elasticity of demand} = \frac{\text{X \% change in demand}}{\text{1 \% change in price}}$$

	The price elasticity of demand		
	HICs		LMICs
	Review of 112 studies (Wagenaar et al., 2009) <sup>a</sup>	Review of 72 studies (Elder et al., 2010)	Review of 10 studies (Sornpaisarn et al., 2013)
Beer	-0.46	-0.50	-0.50
Wine	-0.69	-0.64	-0.79
Spirits	-0.80	-0.79	
<b>Total</b>	<b>-0.51</b>	<b>-0.77</b>	<b>-0.64</b>

<sup>a</sup> Results are pooled estimates of both price and tax elasticity.

Source: Sornpaisarn B, Shield KD, Österberg E, Rehm J, editors. Resource tool on alcohol taxation and pricing policies. Geneva: WHO; 2017

# Alcohol taxation & pricing policies can prevent **the initiation of drinking**



a **10% increase in the inflation-adjusted tax rate** of the total alcohol market from 2001 to 2011 was associated with a **4.3% reduction in the prevalence of lifetime drinking** among Thai people aged 15-24 (as a surrogate of drinking initiation prevention).

Source: Sornpaisarn B et al (2015). Can pricing deter adolescents and young adults from starting to drink: an analysis of the effect of alcohol taxation on drinking initiation among Thai adolescents and young adults. *Journal of Epidemiology and Global Health*. 5(4 Suppl 1):S45-57

# Alcohol taxes protect the poor

- Alcohol taxes are particularly effective in preventing or reducing alcohol consumption **the poor**, who are more affected by price increases.
- Tax increases **help the poor to drink less or stop drinking**. This allows drinkers who quit to reallocate their money to essential goods, including food, shelter, education & health-care.
- Higher taxes also help poor families improve productivity and wage-earning capacity by decreasing alcohol-related illness & death.

One review of 50 studies that examined the impact of taxes & prices on various harms caused by alcohol:

**a 10% increase in alcohol taxes was associated with a 3.5% decline in all harms associated with alcohol-related disease & injuries**  
(Wagenaar et al. 2009).

Source:

- Wagenaar et al (2009) Effects of beverage alcohol price and tax levels on drinking: a meta-analysis of 1003 estimates from 112 studies. *Addiction*. 104:179–90.
- Elder RW et al. (2010) The effectiveness of tax policy interventions for reducing excessive alcohol consumption and related harms. *American Journal of Preventive Medicine*. 38:217–29.

**Higher alcohol prices & taxes**



**Alcohol consumption**



- ↓ **motor vehicle crashes & fatalities**
- ↓ **deaths from liver cirrhosis**
- ↓ **deaths from alcohol dependence**
- ↓ **sexually transmitted diseases**
- ↓ **suicide, violence & crime (rape, robbery, child abuse & spousal abuse)**
- ↓ **workplace accidents**

# Alcohol taxation & pricing policies

are the most cost-effective alcohol control measures.

Updated Appendix 3 of the WHO Global NCD Action Plan 2013-2020	Low & Lower-Middle ICs			Upper-Middle & High ICs		
WHO-CHOICE economic analyses for interventions for NCD prevention and control	Average cost-effectiveness ratio (I\$/DALY averted)	Health Impact/year (DALY averted/1M)	Economic Cost of implementation/year (I\$ per capita)	Average cost-effectiveness ratio (I\$/DALY averted)	Health Impact/year (DALY averted/1M)	Economic Cost of implementation/year (I\$ in millions/1M)
Increase in excise taxes on alcoholic beverages (current rate + 50%)	22 [<100]	568	0.01	41 [<100]	1,128	0.05

A 50% increase over current rates of excise taxes was characterized by **a low implementation cost** (<I\$0.10 per capita), **a moderate to high level of health impact** (>500 healthy life years gained per one million population), and **a highly favorable ratio of costs to effects** (<I\$100 per healthy life year gained in both lower and higher income settings).

Source: [https://www.who.int/ncds/governance/technical\\_annex.pdf](https://www.who.int/ncds/governance/technical_annex.pdf)

# Alcohol taxes can bring in the most additional revenue in large part

because alcohol taxes are currently low & consumption is widespread.

**Over 50 years, a tax that increases alcohol prices by 50% could generate almost US\$17 trillion in additional revenues**

*(about 3 times more than the BRICS country governments collected in revenues in 2017 (US\$5.4 trillion))*

Projected Health and Revenue Impact of Tax Increases on Alcohol over a 50- year period (2017-2067)

Price increase due to higher tax	Deaths averted (millions)	Years of life gained (millions)	Change in tax revenue (trillions, \$2016 discounted)
20%	9.4	238.7	8.9
30%	13.7	348.7	12.2
40%	17.9	455.0	14.8
50%	21.9	557.8	16.7

Source: Summan & Laxminarayan (2018) Estimating Global Effects of Tobacco, Alcohol, and Sugary Beverage Taxation." Background Paper for the Task Force on Fiscal Policy for Health. New York: Bloomberg Philanthropies.

# Alcohol in economy perspective

losses weigh heavier than gains

$73.4 - 150.07 = -77.3$  Billion Baht

- The price of alcohol should reflect its externalities.
- Tax rates should be considered to cover social costs of alcohol.

## Gains:

Employment,  
revenue from  
excise taxes,  
economy booster

**73.4 Billion Baht**

## Losses/externalities:

Social costs of alcohol use  
accounted for 1-6% of GDP.

1.92% of Thai GDP(2006)

**150.07 Billion Baht**



# 10 Positive Effects Of Alcohol Taxation

A win-win measure for fiscal space, health promotion and sustainable development



# Alcohol taxation and pricing policies in ASEAN countries & Mongolia

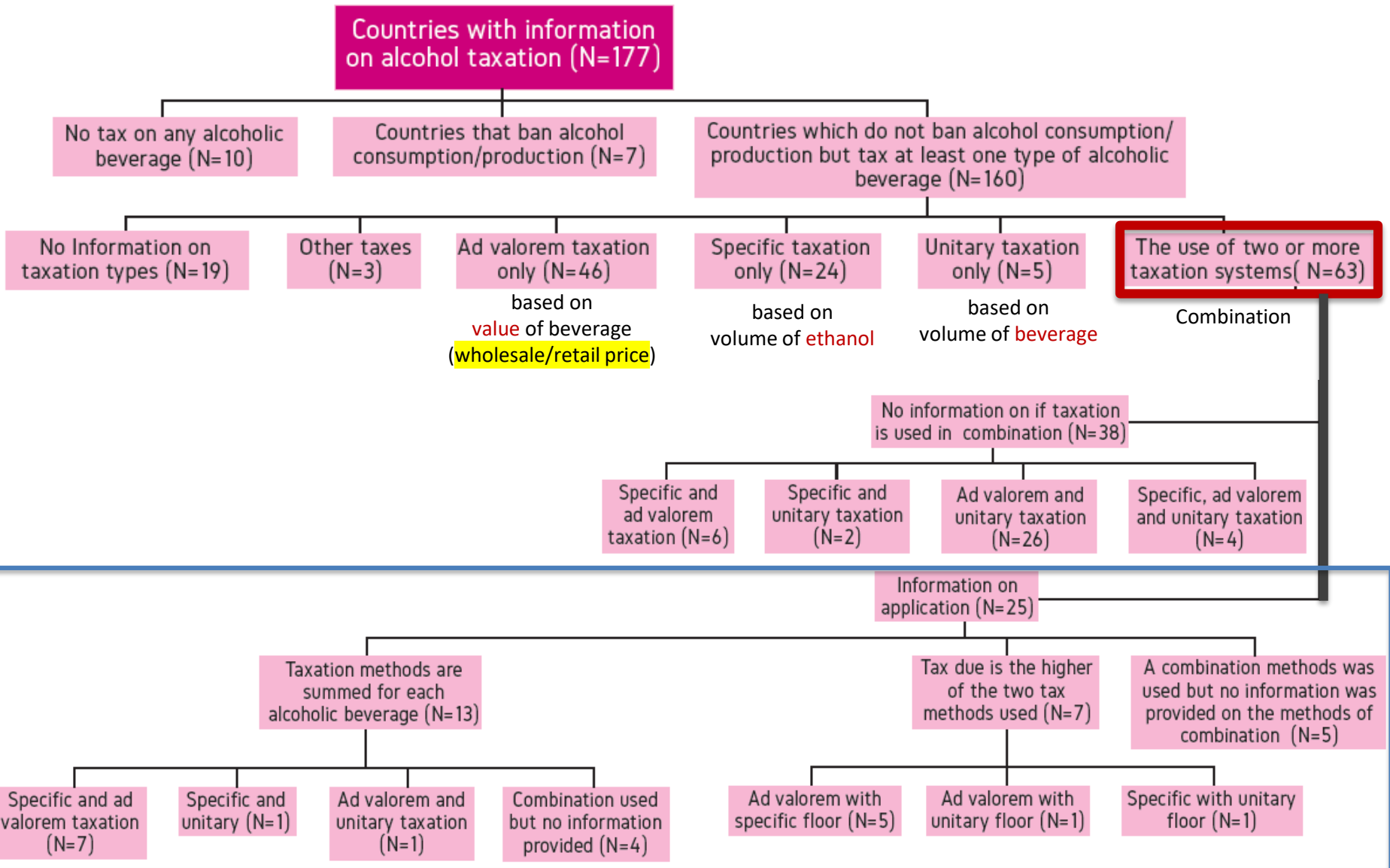
Alcohol taxation policies	Brunei	Cambodia	Indonesia	Lao PDR	Malaysia	Myanmar	Philippines	Singapore	Thailand	Vietnam	Mongolia
<b>Excise taxes</b>											
-Beer	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes
-Wine	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes
-Spirit	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes
<b>Taxation system</b>											
Combination					Yes				Yes		
-Ad valorem rate	n/a	Yes	Yes	Yes	Yes	Yes	n/a	n/a	Yes	Yes	n/a
-Specific rate	n/a	No	No	No	Yes	No	n/a	n/a	Yes	No	Yes
<b>Average prices of alcoholic beverages (US\$)</b>	?	?	?	?	?	?	?	?	?	?	?
*n/a No data											

Source: World Health Organization (2018) Global status report on alcohol and health 2018.

Source: World Health Organization. Global Information System on Alcohol and Health (GISAH). Alcohol Control Policies 2018 [cited 2019 Mar. 17]; Available from: <http://apps.who.int/gho/data/node.gisah.A1119?lang=en&showonly=GISAH>

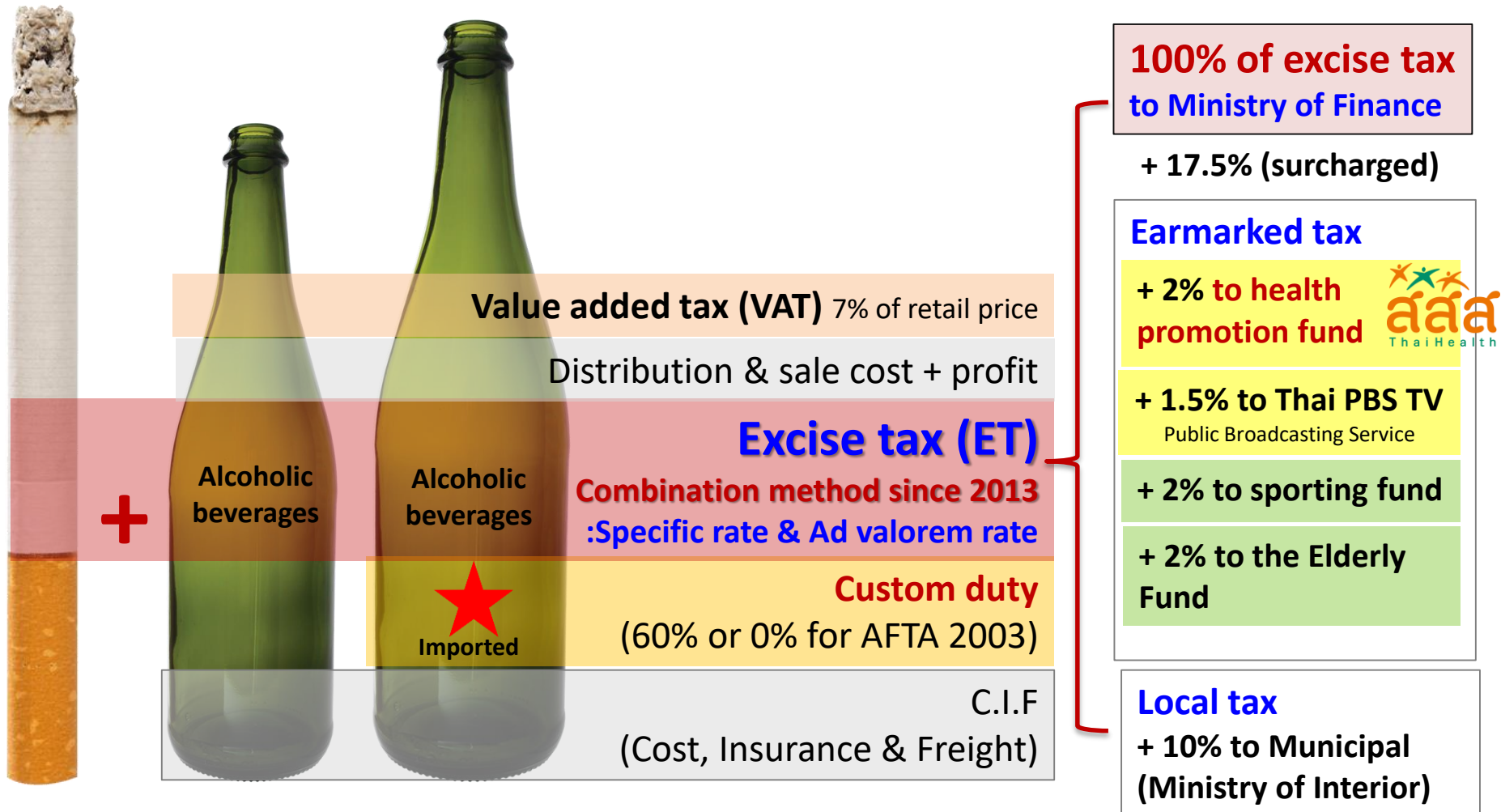
# Alcohol excise taxation methods

reported by the 2012 Global Survey on Alcohol and Health



# Alcohol tax structure in Thailand

(as of 2019)





**Thai Health Promotion Foundation (ThaiHealth)** is an autonomous government agency established by the **Health Promotion Foundation Act in 2001.**

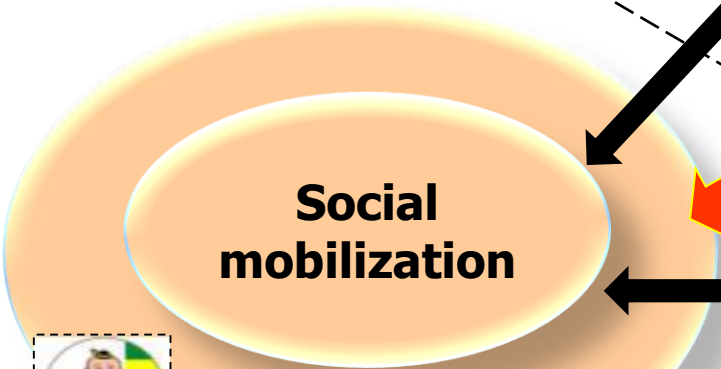
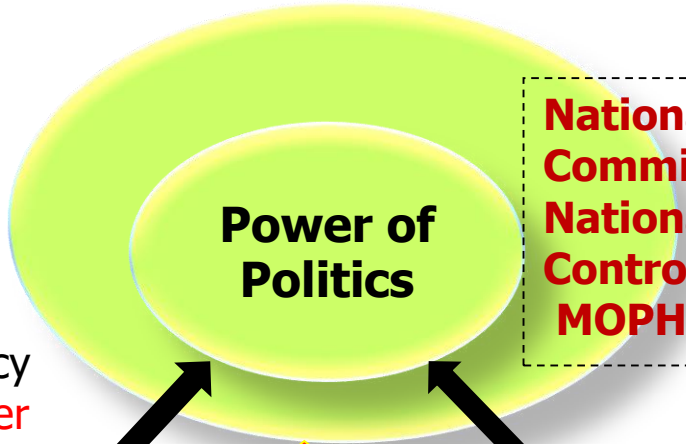
ThaiHealth's annual revenue of about 120 million USD is derived from surcharged 2% of the excise taxes on tobacco & alcohol collecting directly from tobacco & alcohol producers and importers.



# Tri-Power Model : The Triangle that Moves the Mountain Concept

supports: knowledge & experience sharing, policy review, alcohol call center

**National Alcohol Policy Committee (NAPC),  
National Alcohol Consumption Control Committee (NACCC),  
MOPH**



**STOPDRINK NETWORK**

- Over 400 member organizations (local & national)
- 4 approaches ;
- 1. Campaigning,
- 2. Policy process & industry watch
- 3. Denormalization: Alcohol free events
- 4. Community action



**CENTER FOR ALCOHOL STUDIES (CAS)  
, INTEGRATED MANAGEMENT FOR  
ALCOHOL INTERVENTION PROGRAM (I-MAP)**

1. Knowledge generation
2. Knowledge distribution
3. Technical capacity building

# How countries use earmarking for health

**At least 80** countries are using earmarking for health

Countries use income or payroll tax to fund health care for the population or formal-sector workers in a public scheme.

Countries earmark a portion of their value-added tax (VAT).

Countries earmark general revenue for health causes.

Countries earmark a portion of transfers from the national level or earmark revenue generated at the subnational level for health spending.



Countries earmark all or a portion of revenues from tobacco taxes.

Countries earmark all or a portion of revenues from taxes on alcohol sales.

Countries earmark revenue from taxes on other goods that can negatively affect health (e.g., sugar-sweetened beverages).

Countries earmark all or a portion of revenue generated from lotteries.

Country introduced an earmarked levy on foreign personal money transfers and mobile phone company revenue.

**9 Countries:**  
Colombia, Guatemala, India, Jamaica, Mexico, New Zealand, **Philippines, Thailand, USA**

Source: [www.jointlearningnetwork.org/earmarking](http://www.jointlearningnetwork.org/earmarking)



Source: Sugar, Tobacco, and Alcohol Taxes (STAX) Group (2018) Sugar, tobacco, and alcohol taxes to achieve the SDGs. The Lancet.

“... as part of a broader public health approach to promote a life-course approach to prevention and to address commercial determinants of health, it is now time for governments to adopt **sugar, tobacco, and alcohol taxes (STAX)**...

... ‘that despite industry efforts, taxation is gaining more attention from policy makers as a **win-win-win policy** and a **cost-effective fiscal policy** to contribute to the **SDGs...**’



# 'SODA TAX' IN ASEAN



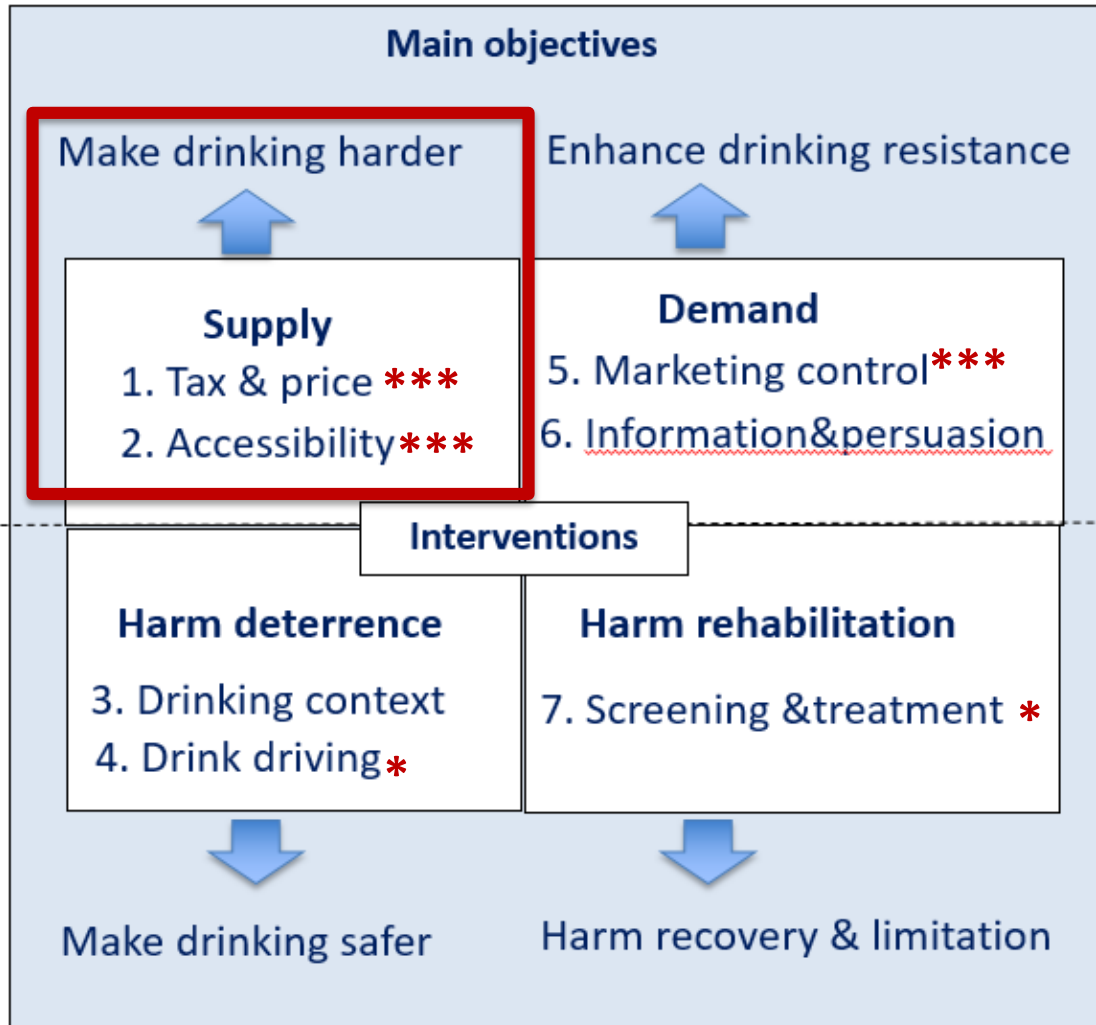
\*The soda tax is not always limited to only soft drinks, but can include other types of sweetened drinks.  
- Currency exchange rates as of August 22, 2018.

# Take home messages

- Alcohol taxes is **a win-win-win solution**.
- Every country can establish & design effective alcohol taxation systems for both **health & development goals**.
  - MOH and MOF can collaborate (i.e. data and policy).
  - Tax rates should affect the price of the ethanol (the causes of harm)
  - **Increase taxes regularly & adjust for inflation** by taking into account for **changes in income** (affordability, consumer purchasing power) & **the price of other goods & services**.
  - Design to **avoid product substitution**: control the cheapest alcohol
  - Linking tax increases to economic indices.
- **Prepare for industry opposition!**
- **International trade always aims to lower alcohol taxes!**
- **Earmarked tax is trendy!**

# Alcohol policy & intervention

\*\*\* Highly effective intervention  
\* effective intervention



## Consumption control

(Targets: general population, high risk groups, & drinkers including new drinkers)  
[ primary prevention]



## Harm deterrence & limitation

(Targets: Drinkers & problematic drinkers)  
[secondary & tertiary prevention]



# Thank you

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