



JOINT ASSESSMENT MISSION

TO REVIEW ALCOHOL CONTROL POLICY AND STRATEGY IN THAILAND
20-24 January 2020

FINAL REPORT AND RECOMMENDATIONS



Acknowledgements

The Joint Assessment Mission to Review Alcohol Control Policy and Strategy Thailand, 2019 Project want to sincerely thank to Deputy Minister of Public Health, Deputy Permanent Secretary, Ministry of Public Health including the National Alcohol Policy Committee, the international and national experts and key participants for participating in this Joint Assessment Mission. This fruitful mission offered us the opportunity to learn and exchange the knowledge pertaining to alcohol control policy and strategy.

Above all, we would like to express our gratitude and appreciation for a set of recommendations designed to advance Thailand to the next level of response to the alcohol related problems. The recommendations which are an outcome document of the joint assessment mission were very beneficial for the development of our alcohol control policy and strategy. We greatly appreciate your continued efforts and support in this area.

Office of Alcohol Control Committee
Department of Disease Control
Ministry of Public Health



Opening address by Deputy Permanent Secretary, Ministry of Public Health (Mr. Supakit Sirilak) in the Joint Assessment Mission to Review Alcohol Control Policy and Strategy Thailand, 2019 with the international and national experts and key participants.



Briefing session of the Joint Assessment Mission to Review Alcohol Control Policy and Strategy in Thailand, Overall situation of alcohol consumption and related problems in Thailand and Alcohol policy and intervention in Thailand : a progress in implementation during 2008-2019.



Mr. Patchara Anuntasilpa, Director-General of the Excise Department, Ministry of Finance with the international and national experts and key participants on tax policy on alcoholic beverages, national policy and plan on alcoholic beverage control, and result and outcome session.



Mr. Komsan Suwan-ampha, Vice Governor of Chiang Mai with the international and national experts and key participants.



Mr. Paritat Silpakit, Deputy Director, Suan Prung Psychiatric Hospital with the international and national experts and key participants.



Mr. Narit Mongkolsri, Vice Governor of Songkhla with the international and national experts and key participants.



Visiting of experts together with Office of 12th Disease Prevention and Control, Songkhla and Songkhla Provincial Public Health Office to petrol station, food and beverages restaurant in petrol station and Hat Yai train station.



Dr. Supreda Adulyanon, Chief Executive Officer of Thai Health Promotion Foundation (ThaiHealth) with the international and national experts and key participants.



Pol.Gen. Aswin Kwanmuang, Governor of Bangkok with the international and national experts and key participants.



SWOT analyses and Consensus meeting on key findings and recommendations by Mission members and secretariat.



Dr. Satit Pitutecha, Deputy Minister of Public Health with the international and national experts and key participants. And Press conference by Prof. Sally Casswell, Head of International experts, Dr. Daniel KERTESZ, WHO Representative to Thailand and Dr.Satit Pitutecha, Deputy Minister of Public Health.

JOINT ASSESSMENT MISSION TO REVIEW ALCOHOL CONTROL POLICY AND STRATEGY IN THAILAND 20-24 January 2020

FINAL REPORT AND RECOMMENDATIONS

From January 20 to 24, 2020, an expert committee drawn from domestic and global health professionals with expertise in alcohol control came together at the request of the government of Thailand to accomplish the following objectives :

- (1) to assess progress in implementing of the Thailand National Alcohol Strategy 2011-2020, with a focus on WHO SAFER initiative;
- (2) to identify strengths, opportunities, limitations and threats (SWOTS) with the aim of strengthening the national alcohol control system and guiding the development of the new national alcohol control policy/strategy; and
- (3) to develop evidence-based recommendations to strengthen the national response to the alcohol burden with specific inputs for the new national alcohol control policy/strategy.

The committee has reviewed relevant documents and legislation, interviewed and received briefings from key stakeholders both within and outside of government, and examined alcohol control activities at both national and provincial levels. Based on these activities, the committee has drawn together the following report and recommendations.

PREAMBLE

The expert committee congratulates Thailand on the tremendous progress it has made in this century in establishing an alcohol control system that is based in evidence. Some of its policies have become global examples of good practice. Its taxation policies in the first decade of the 21st century were associated with keeping the rate of initiation of alcohol use low among 15-24 years-old Thai adolescents and young adults. After adjusting for potential confounders and age, a 10% increase in the inflation-adjusted tax rate of the total alcohol market was significantly associated with a 4.3% reduction in the prevalence of lifetime drinking in this group. Thailand was the first country to use taxation for preventing initiation of alcohol use. While other middle-income countries have seen alcohol consumption rise with incomes, Thailand's success in preventing underage initiation has been a major factor in avoiding this outcome: per capita alcohol consumption remaining stable despite increases in incomes across the nation.

Thailand has also used taxation to create and support ThaiHealth, which is a global model of a national health promotion and research foundation. ThaiHealth has played a key catalytic role in amassing evidence, building support and understanding, and encouraging the kinds of broad collaborations that are essential to effective alcohol policy. Support for ThaiHealth should continue and be enhanced, and ThaiHealth's resources should focus on supporting its critical and unique role as a catalyst agency.

Thailand's progress occurs in the context of significant changes happening at the global level. Explicit inclusion of alcohol in the sustainable development goals provides overdue recognition of the important role alcohol and alcohol harms have played as barriers to progress. Increased globalization of the alcohol industry, and in particular the globalization of alcohol marketing through rapid uptake by the industry of digital and social media marketing channels, are making it difficult for any single nation to protect its population from commercially-driven pressures to drink. Thailand's landmark Alcohol Control Act of B.E. 2551 was a significant step forward at that time. However, changing circumstances require new legislation, incorporating and reflecting specific recommendations we make below, particularly regarding marketing and licensing. They also underscore the importance of Thailand's global role in working in collaboration with other countries toward a binding global instrument that can establish and protect effective alcohol control in this new and changing environment.

Our report follows the principles and structure of the World Health Organization's SAFER technical package for moving towards a world free from alcohol-related harms. The SAFER package begins with three strategies for making evidence-based recommendations a reality: implementation, monitoring, and protection of the integrity of the science-based SAFER package. The package itself focuses on five key areas for alcohol policy intervention that are based on the accumulated evidence of impact on population health and cost-effectiveness. These are: Strengthen restrictions on alcohol availability; Advance and enforce drink-driving countermeasures; Facilitate access to screening, brief interventions and treatment; Enforce bans or comprehensive restrictions on alcohol advertising, sponsorship and promotion; and Raise prices on alcohol through excise taxes and other pricing policies.

RECOMMENDATIONS

1. Implementation

Effective implementation of these recommendations will require broad intersectoral collaboration, both across government ministries, and between government and civil society. The existing national-level infrastructure, including cross-sector national committees, the Office of the Alcohol Control Committee, Thai Health, and civil society, provides an excellent basis for alcohol policy implementation. This basis will be strengthened to the degree that processes are transparent and inclusive.

Thailand has also used taxation to create and support ThaiHealth, which is a global model of a national health promotion and research foundation. ThaiHealth has played a key catalytic role in amassing evidence, building support and understanding, and encouraging the kinds of broad collaborations that are essential to effective alcohol policy. Support for ThaiHealth should continue and be enhanced, and ThaiHealth's resources should focus on supporting its critical and unique role as a catalyst agency.

These recommendations will require a broad societal commitment to addressing the harms from alcohol use. There is a need to organize and mobilize bases of support across all sectors, including among legislators and policy makers, communications media, the faith community, as well as throughout the medical and other health and welfare communities.

For example, networks of health professional organizations, medical associations, royal colleges of all medical disciplines, and all other councils and associations of health professionals should:

- raise awareness among their members of alcohol-related harms,
- encourage their members to provide screening and brief intervention for alcohol-related problems to their patients,
- be leaders in communicating knowledge on the prevention of alcohol-related harm to the general public.

Civil society organisations should be mobilized to support drink-driving countermeasures such as random breath testing, and to provide input into the alcohol outlet licensing process.

ThaiHealth is a significant asset to Thailand's efforts to accomplish effective alcohol control and has become a model for other countries. Given the significant and ongoing burden of alcohol-related harm on Thai society, the catalytic role of ThaiHealth should be maintained. ThaiHealth is uniquely positioned to promote health, mobilize and inform civil society, and ensure the development and evaluation of effective interventions. Its resources should support its unique roles, and should not be used to replace the regular budget of other ministries.

Community action is an essential part of the implementation of alcohol policy and the denormalization of alcohol use and the alcohol industry. Our recommendations encourage greater funding for dedicated community action in support of alcohol policy, to encourage abstinence, provide opportunities for alcohol-free lifestyles, and protect the whole population from alcohol-related harm.

2. Monitoring

Adult (age 15+) per capita consumption of alcohol is the critical national-level indicator, and should be monitored and reported in light of existing commitments to reduce this by 10% by 2025.

Province-level age-adjusted prevalence of abstention should be integrated into the national system of monitoring indicators. A national rate of alcohol-attributable mortality from traffic injuries and liver cirrhosis should be adopted as well as a composite indicator of levels of harm.

Further, a comprehensive system of monitoring and evaluation of alcohol use, problems and policies should be developed, oriented towards quantitative measurement of progress and outcomes at the national and provincial levels. All indicators and policy successes should be monitored by socio-economic status to ensure equity of outcomes. Such monitoring should include hospital emergency rooms as well as the criminal justice system.

Law enforcement can make a significant contribution to monitoring alcohol-related harm and planning for interventions, with the simple step of routinely collecting data on alcohol involvement, including drinking by the perpetrator and/or the victim(s) and place of last drink, for all instances of motor vehicle crashes, crimes and other offenses likely to have alcohol involvement.

Thailand's alcohol tax system has been the linchpin of its success thus far in preventing higher levels of alcohol use and related harms. The impact of any changes in the alcohol taxation structure should be evaluated, particularly for their effects on initiation, prevalence and intensity of drinking among younger people

3. Protection

Evidence-based alcohol policies will attract opposition from commercial interests, and must be safeguarded from interference by these interests seeking to weaken or eliminate those policies, and to replace them with interventions that are speculative, unproven and distracting. Thailand should continue to exercise leadership in collaboration with other countries and sectors in promoting a global response, in the form of a legally-binding global instrument that will set clear standards for alcohol control, and that will protect national alcohol control policies, such as the recommendations contained in this report, from interference by commercial and other vested interests. In line with recommendations from the Joint Mission of the United Nations Interagency Task Force on the Prevention and Control of Noncommunicable Diseases (August 2018), and to facilitate the setting and implementation of alcohol control policies without interference from commercial and other vested interests, protocols need to be established and publicized at national level to ensure that the public interest remains above commercial interests. Corporate social responsibility activities can function as an entry point for vested interests' efforts to influence policy. The branding of alcohol industry corporate social responsibility activities should be banned as part of a comprehensive approach to the elimination of alcohol marketing (see Section 7). Similarly, alcohol industry engagement in alcohol education, event

sponsorships, and public-private partnerships should be seen as part of alcohol marketing, and be prohibited.

Finally, the Thai Ministry of Health should formally request support from the World Health Organization to build capacity to protect alcohol policy against impacts of trade treaties.

4. Strengthen restrictions on alcohol availability

Thailand's legal minimum purchase age and restrictions on times and days of sale are significant elements of its alcohol control system. Enforcement of these two policies should be hanced, using best practices from other countries for regularly assessing the level of compliance, publicizing the results, and utilizing them to inform license renewals.

In a global context, Thailand has an extraordinarily large number of alcohol licenses relative to the size of its population. In light of the robust scientific literature linking alcohol outlet density and alcohol harm, there should be a concerted national and local effort to reduce the number of establishments licensed to sell and serve alcohol. More stringent guidelines and procedures should be established to handle both license applications and renewals.

These national guidelines for local-level administration of licensing should require public notification and solicitation of public (including local community) input into license applications and renewals, which should be required annually. This public input should be supplemented by comment from relevant agencies, including police, health, excise (licensing inspectors), civil society organizations, and the general public.

Police, health and excise officials should collaborate in the process of all license applications and renewals, pooling data to identify and take appropriate action regarding problem or potential problem outlets.

Licensing fees should be established which are adequate to cover the costs of administration and monitoring of licensing, and should be used for that purpose.

Sufficient resources and expertise need to be available at the national level to entertain appeals from the public, civil society and relevant agencies, to ensure appropriate oversight from a health and safety perspective of provincial-, district- and subdistrict-level decisions regarding license applications or renewals.

Enforcement of the law banning sale of alcohol to intoxicated patrons should be enhanced, and there should be training in how to identify such patrons. Sellers and servers of alcohol should be held legally responsible for harms caused by persons to whom they serve or sell alcohol.

The purpose of a strong licensing system is to ensure the safety of sales and service of alcohol. On-line sales and home delivery of alcohol undermine these, and should be prohibited.

5. Advance and enforce drink-driving countermeasures

The legal blood alcohol concentration for all drivers should be reduced from 50 mg% to 20mg%. This is particularly urgent given the likelihood of synergistic effects and resulting increased risk should other drugs be involved as well.

Dedicated funding should be provided that is sufficient to build the capacity of police to implement random breath testing at adequate levels. Police need to be educated regarding the importance of random breath testing as a preventive and deterrent measure. Resources should be provided as well to ensure regular maintenance and calibration of blood alcohol testing equipment.

There should be mandatory minimum numbers of blood alcohol tests administered each year in each jurisdiction. Random breath testing campaigns should be supported by media campaigns and other publicity to increase the perceived certainty of apprehension among the general population.

When alcohol-impaired drivers are apprehended and there is no injury involved, sanctions should be applied administratively to ensure certain and speedy consequences, rather than going through the criminal justice system.

6. Facilitate access to screening, brief interventions and treatment

Implementation of screening, brief intervention and referral to treatment should be strengthened across the country, through greater use of training and other incentives as appropriate. Further delivery of screening and brief intervention should also be explored throughout the health sector as well as in non-health sector settings, such as workplaces, educational institutions, and so on.

Specific funds should be designated to support screening and brief intervention. All health care systems should also fully support the costs of treatment of alcohol use disorders, including the costs of screening and brief intervention.

Treatment for alcohol use disorders is a basic human right and part of all comprehensive health coverage schemes, and should be fully reimbursable when using current evidence-based approaches, including reimbursement of use of effective medications.

Access to evidence-based medication-assisted approaches to treatment of alcohol use disorders should be enhanced, including taking government action to import effective medications to ensure their availability in Thailand.

7. Enforce bans or comprehensive restrictions on alcohol advertising, sponsorship and promotion

Marketing of a psychoactive and addictive substance is inappropriate. Given alcohol marketing's causal role in initiation into drinking, Thailand's priority on preventing youth initiation into drinking and encouraging abstinence among adults, and the rise of the dominance of social media as the primary mechanism for marketing, Thailand should move towards prohibiting all forms of alcohol marketing, including marketing in digital and social media.

To begin to accomplish this, Thailand should adopt for alcohol the same definition of marketing as is currently published in Thailand's Tobacco Products Control Act of 2017:

"Marketing communications" mean an act in various forms by advertising, publicizing, creating news, distributing news, conducting sale promotion, displaying at point of sale, conducting direct sale, selling or promoting sale by using specific person and cyber marketing, for the purpose of selling goods or services or creating image."

Subsequent sections of that Act relevant to the comprehensive prohibition of tobacco marketing should be used as models for a similar ban on alcohol marketing.

Local administrations should be permitted by the Ministry of Interior to use their local budgets to support traditional festivals, on condition that there be no sponsorship of those festivals from alcohol businesses, and no sale of alcohol permitted at those events.

8. Raise prices on alcohol through excise taxes and pricing policies

Given the critical importance of alcohol taxes in preventing alcohol harm and youth uptake of drinking, we recommend that the alcohol excise tax be increased as soon as possible, and that in the future this tax be increased regularly (e.g. every 6 to 12 months) to keep pace with inflation. Such increases should be routinized and mandated, and not subject to debate, with the objective of influencing the affordability of alcohol.

All tax rates should support current levels of abstention, and not be set at rates that encourage non-drinkers, particularly young people, to start drinking. Consumption and price of white spirits, both taxed and untaxed, should be closely monitored to ensure that the tax policy on white spirits is appropriate to the goal of reducing alcohol-related harm.

The importance of specific taxes for preventing initiation should be borne in mind, and specific taxes in particular on products used by new drinkers (especially females) need attention. For example, wine coolers and "RTD's" (ready-to-drink beverages) are an important beverage of initiation for females, and the combined end price for these after considering ad valorem and specific taxes should not in any way favor these beverages compared to others available in the marketplace.

As recommended in the 2018 Report of the Joint Mission of the United Nations Interagency Task Force on the Prevention and Control of Noncommunicable Diseases, Thailand should sustain its innovative funding mechanisms for tobacco, alcohol and sugar-sweetened beverages for NCD prevention and control, including the Thai Health Promotion Foundation, the health promotion fund of the National Health Security Office, and local government health budgets. Regarding local funding, alcohol taxes currently provide support for local government through a 10% earmark. We recommend that at least half of these funds be devoted to supporting community action on behalf of alcohol health promotion, building local community capacity to engage in alcohol licensing and other alcohol control activities, and other alcohol-related disease and problem prevention activities at the local level.

Annex 1

List of the International and National Experts

Professor Sally Casswell

Director, SHORE and Whariki Research Centre
University of New Zealand, New Zealand
s.casswell@massey.ac.nz

Professor David Jernigan

Director, Center on Alcohol Marketing and
Youth, Johns Hopkins Bloomberg School of
Public Health, USA
dhjern@bu.edu

Professor Dr. Jurgen Rehm

Epidemiology Division, Office of Global
Public Health Education & Training, Canada
jtrehm@gmail.com

Dr. Daniel KERTESZ

WHO Representative to Thailand
kerteszd@who.int

Ms. Deirdre BOYD

UN Resident Coordinator, Office of the UN
resident Coordinator in Thailand
deirdre.boyd@one.un.org

Mr. Kumnuan Ungchusak

Expert advisory committee, ThaiHealth
kum.ungchusak@gmail.com

Professor Paibul Suriyawongpaisal

Department of Community Medicine,
Faculty of Medicine Ramathibodi, Mahidol
University
paibulss@gmail.com

Mr. Theera Watcharapraanee

Manager, Stop Drink Network
tom_teera@hotmail.com

Dr. Susumu Higuchi

Director, Kurihama Medical and Addiction
Center National Hospital Organization, Japan
h-susumu@db3.so-net.ne.jp

Dr. Sajeeva Ranaweera

Technical Consultant, National Authority on
Tobacco and Alcohol, Ministry of Health,
Sri Lanka
tharindu28@hotmail.co.uk

Dr. Dag Rekve

Senior Technical Officer (WHO HQ),
WHO Geneva
rekved@who.int

Dr. Renu Garg

Medical Officer, NCDs, WHO Thailand
gargr@who.int

Ms. Kirke Kyander

Gender Advisor, United Nations Development
Programme (UNDP)
kirke.kyander@undp.org

Professor Sawitri Assanangkornchai

Director, Center for Alcohol Studies (CAS)
sassanangkornchai@gmail.com

Mr. Nipon Chinanonwait

Director, Office of Alcohol Control
Committee, Department of Disease Control,
Ministry of Public Health
chinnipon2011@gmail.com

Assistant Professor Surasak Chaiyasong

Faculty of Pharmacy, Mahasarakham University
surasak.c@msu.ac.th

List of Technical co-ordination committee

Miss Orratai Waleewong

Researcher,
International Health Policy Program (IHPP)
orratai@ihpp.thaigov.net

Mr. Wit Wichaidit

The Epidemiology Unit, Faculty of Medicine,
Prince of Songkla University, Hat Yai Campus
Center for Alcohol Studies (CAS)
witwicha@buffalo.edu

Miss Roongnapa Khampang

Researcher,
Health Intervention and Technology
Assessment Program (HITAP)
roongnapa.k@hitap.net

List of Authors for Support Data to Experts

Assistant Professor Udomsak Saengow

Research Institute for Health Science,
Walailak University
udomsak.sa@wu.ac.th

Assistant Professor Surasak Chaiyasong

Faculty of Pharmacy, Mahasarakham
University
surasak.c@msu.ac.th

Miss Orratai Waleewong

Researcher,
International Health Policy Program (IHPP)
orratai@ihpp.thaigov.net

Assistant Professor Boonyou

Khorpornprasert
The Faculty of Communication Arts,
Krirk University
boonyou.khor@gmail.com

Assistant Professor Nitta Roonkasem

Faculty Of Management Science,
Phranakhon Rajabhat University
ladynitta@gmail.com

Mr Wisanu Srithawongse

Public Policy Manager, Stop Drink Network
tuildi@gmail.com

Mr.Thanapong Jinwong

Manager, Road Safety of Research Center
thanapong@roadsafetythai.org

Miss Roongnapa Khampang

Researcher, Health Intervention and
Technology Assessment Program (HITAP)
roongnapa.k@hitap.net

Miss Areeya Wetchakama

Academic, Law enforcement sub-program
Road Safety of Research Center
areeya@roadsafetythai.org

Associate Professor Teera Sindecharak

Faculty of Sociology and Anthropology,
Thammasat University
teera.sd@gmail.com

Mr. Theera Watcharapraee
Manager, Stop Drink Network
tom_teera@hotmail.com

Miss Jintana Jankhotkaew
Researcher,
International Health Policy Program (IHPP)
jintana@ihpp.thaigov.net

Miss Sopit Nasueb
Research Assistant,
International Health Policy Program (IHPP)
sopit@ihpp.thaigov.net

Mr. Kamolphat Markchang
Research Assistant,
International Health Policy Program (IHPP)
kamolphat@ihpp.thaigov.net

Miss Sirikul Vongsirisopak
Deputy Director, Office of Alcohol Control
Committee, Department of Disease Control,
Ministry of Public Health
vsirikul@gmail.com

Miss Amornrekh Tangjit
Public Health Technical Officer
(Professional Level), Office of Alcohol
Control Committee, Department of Disease
Control, Ministry of Public Health
poo_515@hotmail.com

Miss Kanockon Ngamnak
Public Health Technical Officer (Practitioner
Level), Office of Alcohol Control
Committee, Department of Disease Control,
Ministry of Public Health
kanockonjiew@gmail.com

Key Participants

Dr. Satit Pitutecha
Deputy Minister of Public Health

Mr. Supakit Sirilak
Deputy Permanent Secretary,
Ministry of Public Health

Mr. Kajohnsak Kaewjarus
Deputy Director-General of the Department
of Disease Control, Ministry of Public Health

Mr. Preecha Prempree,
Deputy Director-General of the Department
of Disease Control, Ministry of Public Health

Mr. Komsan Suwan-ampha
Vice Governor of Chiang Mai

Mr. Narit Mongkolsri
Vice Governor of Songkhla

Pol.Gen. Aswin Kwanmuang
Governor of Bangkok

Mr. Jatuchai Maneerat
Head of the Chiang Mai Provincial Public
Health Office

Police Colonel Thanadol Noisuwan
Superintendent (Investigations),
Chiang Mai Provincial Police Office

Mr. Natchudej Viriyadiloktham
Deputy Mayor, Chiang Mai City Municipality

Miss Chayaphat Moksiri
Area Excise Office Chiang Mai

Mr. Sumet Ongwandee
Director, Office of 1st Disease Prevention
and Control, Chiang Mai

Mr. Paritat Silpakit
Deputy Director, Suan Prung Psychiatric
Hospital

Mr. Patchara Anuntasilpa
Director-General of the Excise Department,
Ministry of Finance

Mr. Nutthakorn Utensute
Director of Tax Planning Bureau
The Excise Department, Ministry of Finance

Mrs. Duangporn Pinjeesekikul
Director, Office of Drug Abuse Prevention
and Treatment, Health Department,
Bangkok Metropolitan Administration

Mr. Ampol Angkapakornkul
Inspector, Ministry of Interior

Mr. Apichart Charusiri
Deputy Director – General of the
Department of Juvenile Observation and
Protection, Ministry of Justice

Police Colonel Sathit Polpinit
Deputy Commander,
Songkhla Provincial Police Office

Mr. Pasit Chantamunee
Deputy Mayor, Songkhla City Municipality

Mr. Sresthaporn Sritipun
Chief, Area Excise Office Songkhla

Mr. Chalernpol Osodpromma
Director, Office of 12th Disease Prevention
and Control, Songkhla

Miss Tirada Yoswattanakul
Coordinator, StopDrink Network of Lower
southern region

Mr. Rit Syamananda
Director of Tax Policy Bureau,
Fiscal Policy Office, Ministry of Finance

Mr. Songkun Chokkatiwat
Planning and International Affairs Bureau,
The Customs Department, Ministry of Finance

Mr. Narong Chueaboonthuay
Inspector, Office of the Prime Minister

Mr. Arrun Boonchai
Assistant Permanent Secretary,
Ministry of Tourism and Sports

Mr. Kornphattawee Muangnoi
Deputy Director – General of the
Department of Industrial Works,
Ministry of Industry

Mrs. Phimwarat Muangnil
Director, Bureau of Education Activity
Promotion, Ministry of Education

Miss Urai Leknoi
Director, Division of Strategy and Plan,
Ministry of Social Development and Human

Mr. Pirachtep Kongkhao
Culture Surveillance Bureau,
Ministry of Culture

Police Lieutenant General Sattawat Hiranburana
Royal Thai Police

List of Coordinators and Management

Office of Alcohol Control Committee, Department of Disease Control, Ministry of Public Health

- | | |
|----------------------------------|---|
| 1. Mr. Pongtorn Chartpitak | Medical Doctor, expert level/ Deputy Director |
| 2. Mrs. Suprapa Jaksudul | Public Health Technical Officer, professional level |
| 3. Mrs. Suthathip Srihiran | Public Health Technical Officer, professional level |
| 4. Mrs. Mattha Kampibul | Public Health Technical Officer, professional level |
| 5. Miss Amornrekh Tangjit | Public Health Technical Officer, professional level |
| 6. Miss Kanockon Ngamnak | Public Health Technical Officer, practitioner level |
| 7. Miss Rungthiwa Onsila | Public Health Technical Officer, practitioner level |
| 8. Miss Phenphisut Suwanruek | Public Health Technical Officer |
| 9. Miss Maneerat Yindee | Public Health Technical Officer |
| 10. Miss Natthida Sukyai | Public Health Technical Officer |
| 11. Mr. Apichat Chotchusee | Public Health Technical Officer |
| 12. Miss Saowaluck Nakamanurak | Plan and Policy Analyst, practitioner level |
| 13. Miss Phichaya Bunwit | Dissemination Technical Officer |
| 14. Miss Sangthai Supap | Finance and Accounting Analyst, practitioner level |
| 15. Miss Rungnadee Samneangsanoo | Finance and Accounting Analyst |
| 16. Mr. Wathana Sunthara | Project Technical Officer |
| 17. Miss Sirayagone Changkumpee | Project Technical Officer |
| 18. Mr. Naphat Chusrinual | Project Technical Officer |
| 19. Mr. Weerasak Wanpan | Car driver |
| 20. Mr. Kasana Janthachot | Car driver |

Office of 1st Disease Prevention and Control, Chiang Mai

- 1. Mr. Montree Kasemsuk Public Health Technical Officer, professional level
- 2. Miss Siriporn Naratthakit Public Health Technical Officer, professional level

Chiang Mai Provincial Public Health Office

- 1. Acting Sub Lieutenant Taweesak Jinjiran Public Health Technical Officer, professional level

Office of 12th Disease Prevention and Control, Songkhla

- 1. Mrs. Patchima Buayom Deputy Director
- 2. Mr. Pongdanai Kaewnissai Public Health Technical Officer, practical level

Songkhla Provincial Public Health Office

- 1. Mr. Atthapong Petchsuwan Head, Non-Communicable diseases Group,
- 2. Mrs. Sirikul Tongsongsee Public Health Officer, experienced level

Global Health Division, Office of the Permanent Secretary, Ministry of Public Health

- 1. Mr. Ratchakorn Kaewpramusol Foreign Relations Officer, practitioner level

Office of International Cooperation, Department of Disease Control, Ministry of Public Health

- 1. Miss Pensom Jumriangrit Public Health Technical Officer, professional level
- 2. Mr. Wattana Masunglong Foreign Relations Officer, practitioner level
- 3. Miss Suparat Srisuk Foreign Relations Officer

Bureau of Mental Health Academy Affairs, Department of Mental Health

- 1. Mrs. Narakamon Thongplean Public Relations Officer, practitioner level

Thai Health Promotion Foundation

- 1. Miss Niyada Imphet Planning Specialist

Information Technology and Communication Center, Office of the Permanent Secretary, Ministry of Public Health

Bureau of Risk Communication and Health Behavior Development, Department of Disease Control, Ministry of Public Health

Excise Department, Ministry of Finance

Custom Department, Ministry of Finance

Fiscal Policy Office, Ministry of Finance

Health Department, Bangkok Metropolitan Administration

Annex 2

Joint Assessment Mission to Review Alcohol Control Policy and Strategy Thailand

20-24 January 2020, Amari Don Muang Airport Hotel, Bangkok
(including site visit in Chiang Mai and Song Khla)

Tentative programme for the mission

Monday, January 20, 2020 (At Kinnaree 1 Room, Amari Don Muang Airport Hotel)	
08:00 to 09:00	Registration at Amari Don Muang Airport Hotel (check-out and drop baggage at hotel)
09:00 to 11:45	Welcome Statement Introduction and objectives of mission by Dr. Preecha Prempree, Deputy Director-General of the Department of disease control, Ministry of Public Health Opening address by Dr. Supakit Sirilak, Deputy Permanent Secretary, Ministry of Public Health Introduction expert team, working group and partners Remarks from WHO Representative to Thailand by Dr. Daniel Kertesz Photo Section Briefing session of the Joint Assessment Mission to Review Alcohol Control Policy and Strategy in Thailand Presented by Dr. Kumnuan Ungchusak, Head of national experts Overall situation of alcohol consumption and related problems in Thailand Presented by Dr. Wit Wichaidit (CAS), the technical co-ordination committee Alcohol policy and intervention in Thailand: a progress in implementation during 2008-2019 Presented by Dr. Orratai Waleewong (IHPP), the technical co-ordination committee Discussion
11:45 to 13:30	Lunch and go to the Excise Department, Ministry of Finance
13.30 to 14.00	Registration

14:00 to 15:30	<p>Chair: Mr. Patchara Anuntasilpa, Director-General of the Excise Department, Ministry of Finance</p> <p>Tax policy on alcoholic Beverages, national policy and plan on alcoholic beverage control, and result and outcome</p> <p>Presented by Mr. Nutthakorn Utensute, Director of Tax Planning Bureau, Excise Department</p> <p>Mr. Rit Syamananda, Director of Tax Policy Bureau, Fiscal Policy Office and Customs Department</p> <p>Discussion</p>
15:30 to 17:00	<p>Go to Don Mueang International Airport, Check-in, and Dinner</p> <p>Two sub-teams of the Mission: (1) to Chiang Mai Province and (2) to Song khla Province</p>
18:30	<p>On flight to Chiang Mai Province (depart at 19.30 hrs) and Song khla Province (depart at 19.05 hrs)</p> <p>Arrive destination and go to hotel</p>

Tuesday, January 21, 2020 (At Chiang Mai Province or Song khla Province)

07:45 to 08.30	Go to City Hall
08:30 to 11.30	<p><i>Chair: Provincial governor</i></p> <p>Provincial situation of alcohol consumption, alcohol-related problems, alcohol market and other risks</p> <p>Alcohol policy, mechanisms, implementation and lesson learns at provincial level</p> <p>Challenges and threats Presented by the Provincial Health Office</p> <p>Multisectoral co-operation Presented by the Provincial Health Office committee member</p> <p>Discussion</p>
14:00 to 15:00	Lunch and Field visit
15:00	<p>Go to airport and fly back to Bangkok</p> <p>(Depart from Chiang Mai at 16.55 hrs and Depart from Song khla at 17.50 hrs)</p>

Wednesday, January 22, 2020 (At Thai Health Promotion Foundation and Bangkok Metropolitan Administration)

07:30 to 09:00	Go to Thai Health Centre, Meeting Room 201
09:00 to 12:00	<p><i>Chair: Dr. Supreda, Adulyanon, CEO of Thai Health Promotion Foundation</i></p> <p>Role and Implementation of stakeholders</p> <p>Presented by Thai Health Promotion Foundation, Stop Drink Network, Center of Alcohol Studies, Office of Alcohol Control Committee, Royal Thai Police and Department of Provincial Administration</p> <p>Discussion</p>
12:00 to 13:00	Lunch and go to Bangkok Metropolitan Administration (BMA), Sao Chingcha
14:00 to 16:00	<p><i>Chair: Governor of Bangkok</i></p> <p>Provincial situation of alcohol consumption, alcohol-related problems, alcohol market and other risks</p> <p>Alcohol policy, mechanisms, implementation, lesson learns in Bangkok</p> <p>Challenges and threats</p> <p>Presented by BMA member</p> <p>Discussion</p>
17:00 to 20:00	<p>Working Dinner at Anodard Room, Amari Don Muang Airport Hotel</p> <p>(Discussion among the Mission on report drafting and work allocation)</p>

Thursday, January 23, 2020 (At Kinnaree 2 Room, Amari Don Muang Airport Hotel)

07:45 to 08.30	Go to City Hall
08:30 to 11.30	<p><i>Chair: Prof. Sally Casswell, Head of international experts</i></p> <p><i>Co-chair: Dr. Kumnuan Ungchusak, Head of national experts</i></p> <p>SWOT analyses</p> <p><i>by Mission members and secretariat</i></p>
12:00 to 13:00	Lunch

13:00 to 17:00	<p>Consensus meeting on key findings and recommendations by Mission members and secretariat</p> <p>Discussion & Conclusion</p>
17:00 to 18:00	Free time and prepare for Welcome dinner
18:00 to 20:00	<p>Welcome dinner hosted by Ministry of Public Health, Thailand</p> <p>Opening remarks by Dr. Nipon Chinanonwait</p>

Friday, January 24, 2020 (At Government House)

07:30 to 09:00	Go to Government House (Meeting room 301)
09:00 to 10:00	Registration and coffee break
10:00 to 11:00	<p>Debriefing seminar by Prof. Sally Casswell, Head of international expert</p> <p>Meeting with members of the National Alcohol Policy Committee: the high-level representation from Ministry of Health, Ministry of Finance, Ministry of Interior, Ministry of Commerce, Ministry of Education, Ministry of Tourism and Sports, Ministry of Social Development and Human Security, Royal Thai Police, ThaiHealth, WHO and UN agencies</p> <p>Interventions from UN Resident Coordinator by Ms. Deirdre Boyd</p> <p>Discussion</p> <p>Closing remarks <i>By Dr. Satit Pitutecha, Deputy Minister of Public Health</i></p> <p>Photo Section</p>
11:00 to 12:00	<p>Press conference and media interactions (at Nareesamosorn Building) by Prof. Sally Casswell, Head of international experts, <i>Dr. Daniel Kertesz, World Health Organization Representative to Thailand, and Dr. Satit Pitutecha, Deputy Minister of Public Health</i></p>
12:00 to 13:00	Lunch

Title

JOINT ASSESSMENT MISSION TO REVIEW ALCOHOL CONTROL
POLICY AND STRATEGY IN THAILAND 20 - 24 January 2020
FINAL REPORT AND RECOMMENDATIONS

Author

Expert Team of the Joint Assessment Mission to Review Alcohol Control
Policy and Strategy in Thailand

First Published

June 2020

Published by

Academic Development Group, Office of Alcohol Control Committee,
Department of Disease Control, Ministry of Public Health
88/21 Tiwanond Road, Nonthaburi, 11000, Thailand.

Tel.: (66 2) 590 3032

Fax : (66 2) 590 3032

Printed by First Offset (1993) Co.,Ltd.

ISBN : 978-616114287-2

The publication of this report is supported
by WHO CCS-NCD Program, Thailand



World Health
Organization



สสส.

สำนักงานหลักประกันสุขภาพแห่งชาติ

ISBN 978-616114287-2



9 786161 142872

