

The Health and Global Policy Institute (HGPI) Non-communicable Disease (NCD) Control Promotion Project
Urgent Recommendations for the Fourth UN High-Level Meeting on NCDs and Mental Health
Exercise political leadership to advance NCD control by regulating the availability of
alcoholic beverages as a commercial determinant of health

Health and Global Policy Institute (HGPI)

Issues related to alcohol as a health risk factor

Alcohol consumption is a major risk factor for non-communicable diseases (NCDs) and mental health and there is global recognition of alcohol consumption as a key issue in public health efforts in these areas. According to the “Global status report on alcohol and health and treatment of substance use disorders” presented by the World Health Organization (WHO) in June 2024, approx. 2.6 million global deaths were attributable to alcohol consumption, which represented 4.7% of all deaths.¹ In Japan, alcohol consumption leads to over 40,000 annual deaths, which is equivalent to approx. 3% of all domestic deaths.²

Current status and challenges for alcohol measures around the world

In light of the situation surrounding alcohol consumption around the world, the WHO adopted the “Global alcohol action plan 2022–2030” in 2022 and called on all Member States to cooperate in its implementation.³ The WHO also urged Member States to take action on NCDs by providing a list of “Best Buys,” which are the most cost-effective or impactful interventions for the prevention or control of NCDs. Its policy package includes measures for reducing the harmful use of alcohol centered on alcohol pricing measures (such as through alcohol taxation), restricting the physical availability of alcoholic beverages (such as through sales restrictions), and marketing restrictions (such as advertising restrictions), all of which are measures that have been shown to significantly improve health in countries where they have been implemented.

Despite the availability of these science-based policy options, many countries have yet to implement Best Buy policies, or are not implementing them effectively. This has been attributed to a combination of factors such as policy interventions from the alcohol industry or political and economic obstacles that contribute to consistently high levels of alcohol-related health problems. In recent years, activities from the alcohol industry and other actors in the private sector that impact health and equity have been defined as “Commercial Determinants of Health (CDoH),” which has come to be recognized by the international community as an important concept in public health, particularly in NCD control. Rather than focusing only on the harmful effects of private sector activities, this concept encompasses the broad range of health impacts from commerce and other business activities. Reducing the harmful effects of private sector activities as CDoH has become an urgent issue that requires active discussions in the international community.

Current status and challenges for domestic alcohol measures

As society developed a shared awareness of the gravity of alcohol-related health harm, Japan enacted the Basic Act on Measures Against Alcohol-related Health Harm (hereinafter, the “Basic Act”) in 2013. Given the impact of alcohol on NCDs, the Ministry of Health, Labour and Welfare (MHLW) has also taken action on this issue and presented the “Guidelines on Alcohol Consumption” in February 2024. Those Guidelines identify alcohol as the cause of various NCDs, including cancer and cardiovascular diseases (CVDs). Reduced alcohol consumption is also specifically mentioned as a method of preventing NCD onset in major laws and regulations related to NCD control such as the Fourth Basic Plan for the Promotion of Cancer Control and the Second Basic Plan to Promote Cardiovascular Disease Control Programs.

While Japan has established some legal and institutional frameworks for reducing the harmful use of alcohol, there are issues related to the effectiveness of these measures. In fact, the final evaluation of Health Japan 21 (Second Term) in 2022 found that Japan not only failed to achieve its goal of reducing the “percentage of individuals who consume alcohol over recommended limits,” but that the situation surrounding this level of consumption had worsened.⁴ Despite a downward trend in alcohol consumption overall, there is an upward trend in alcohol consumption among

¹ World Health Organization. Global status report on alcohol and health and treatment of substance use disorders. Geneva: WHO; 2024. Available from: <https://www.who.int/publications/i/item/9789240096745>

² Nomura S, Sakamoto H, Ghaznavi C, Inoue M. Toward a third term of Health Japan 21 – implications from the rise in non-communicable disease burden and highly preventable risk factors. Lancet Reg Health West Pac. 2022;21:100377. Published online 2022 Jan 23. <https://doi.org/10.1016/j.lanwpc.2021.100377>

³ World Health Organization. Global alcohol action plan 2022–2030 [Internet]. Geneva: WHO; 2022 [cited 2025 May 1]. Available from:

<https://www.who.int/teams/mental-health-and-substance-use/alcohol-drugs-and-addictive-behaviours/alcohol/our-activities/towards-and-action-plan-on-alcohol>

⁴ Ministry of Health, Labour and Welfare (MHLW). 2022. “Health Japan 21 (Second Term).” Final Evaluation Report, Overview.” Tokyo. Available from: <https://www.mhlw.go.jp/content/000999450.pdf>

May, 2025

women, who are more likely to experience health problems due to alcohol consumption than men.⁵ This finding suggests that there is a need to intensify current measures for alcohol-related health problems.

Alcohol consumption in Japan has not decreased for three structural reasons. The first is related to pricing policies for alcoholic beverages. Tax rates on alcoholic beverages are not only lower than those on tobacco products, which are another major NCD risk factor, they also vary by type of alcoholic beverages, with higher alcohol content products being taxed at lower rates—in fact, they are available in the same price range as soft drinks. The WHO recommends introducing or increasing taxes on alcohol, tobacco, and sugar sweetened beverages by 2030, but Japan's current pricing policies and tax rates lag behind global trends and fail to provide a price barrier that deters excessive drinking.

The second reason is physical availability. Alcoholic beverages continue to be readily available to anyone and can be purchased at 24-hour convenience stores, mass retailers, and online. While voluntary measures adopted by the alcoholic beverage industry in the year 2000 led to a decrease in the number of vending machines selling alcohol, there are no legal restrictions on vending sales, and many such vending machines remain in place. In recent years, there have also been efforts aiming to increase alcohol sales at self-checkout stores.⁶

The third reason is that marketing regulations have no legal binding and rely on the ability of industry associations made up of alcoholic beverage manufacturers to consult with related organizations to self-regulate. Furthermore, these self-regulation measures do not apply to companies that are not members of the aforementioned industry associations. There has also been growing diversity in advertising media in recent years, which now includes the internet, public transportation, and sporting events in addition to traditional media like TV commercials. These circumstances have given rise to challenges in ensuring marketing regulations are effective at protecting young people, women, and others who are at relatively greater risk of alcohol-related health harm.⁷

As these reasons demonstrate, there is a great need to address alcohol-related health harm in Japan and the impact of CDoH, and Japan's alcohol policy is now at a stage where it requires a foundational review. While reinforcing global collaboration and learning from best practices and challenges encountered overseas, we must consider what regulations on alcoholic beverage access will be best for Japan. Furthermore, there are also high expectations for commitment from Japan in building a global policy framework for reducing alcohol-related health harm.

Opportunities to advance NCD control in the international community

The Fourth High-level Meeting of the UN General Assembly on the prevention and control of NCDs and the promotion of mental health and well being (HLM4) will be held on September 25, 2025. At this extremely important event, UN Member States will spearhead discussions with heads of states and other leaders at the UN Headquarters in New York, USA. Taking into account progress achieved in initiatives undertaken under each Government's commitments from the 2018 High-Level Meeting at this fourth round of discussions on NCDs, plans are in place to adopt a new Political Declaration for the prevention and control of NCDs and the promotion of mental health and well being towards 2030 and beyond. In addition to being an important forum for setting a direction for future global initiatives and reinforcing engagement among Member States, HLM4 will provide a vital opportunity for Japan to contribute to and serve as a leader in addressing global health issues. The Political Declaration adopted at this meeting will also influence Japan's domestic policy.

One key item on the agenda at HLM4 will be addressing CDoH,⁸ so Japan should make the most of this opportunity to contribute to progress in policies for NCDs and mental health by advancing measures for alcohol control in Japan and overseas. As we approach the HLM4, we call on the Government of Japan to commit to regulating alcoholic beverage availability to counteract alcohol-related health harm as a measure against NCDs. To help achieve this, we offer the following recommendations, which are based on the voices of civil society and those most affected by alcohol-related health harm.

Recommendation 1: Provide global leadership in regulating the availability of alcoholic beverages.

Addressing alcohol-related health harm as part of NCD control is a shared challenge for the international community. The adverse health impacts of the alcohol industry are enormous, particularly in low- and middle-income countries, so

⁵ Health Service Division, Health Service Bureau, MHLW. 2024 "Expert Committee on the Promotion of Health Japan 21 (Third Term), third meeting. Reference materials for the area of alcohol consumption 2." Expert Committee on the Promotion of Health Japan 21 (Third Term), third meeting. [Online]. Available from: <https://www.mhlw.go.jp/content/10904750/001313353.pdf>. Last retrieved on May 1, 2025.

⁶ Japan Franchise Association. "'Guidelines on Using Digital Technology for Age Verification for Alcoholic Beverages and Tobacco' have been established." Press Release [Online]. Available from: <https://www.jfa-fc.or.jp/particle/4061.html>. Last retrieved on May 1, 2025.

⁷ Muto S, Takahashi Y, Yamamoto I, Fukunaga T. Patterns of alcohol and alcohol-flavoured non-alcoholic beverage advertisements over Japanese free-to-air television networks. BMC Public Health. 2022;22(1):1857. doi:10.1186/s12889-022-14276-5

⁸ World Health Organization. On the road to 2025. 2025. Available from: <https://www.who.int/teams/noncommunicable-diseases/on-the-road-to-2025>

May, 2025

efforts to collaborate and cooperate among countries must be reinforced and a global framework for developing drastic solutions must be built.

At HLM4, expectations are high for Japan to serve as a global leader in calling on governments to strengthen commitment to and accountability in regulating alcoholic beverages as a key preventive measure for NCD control and mental health. In its capacity as a country with one of the most well-developed healthcare systems and public health infrastructures in the Asia-Pacific region, Japan has already been fulfilling a prominent role in the region and around the world by advocating the importance of primary healthcare based on strengthening healthcare systems and UHC. Therefore, we hope that Japan will continue contributing to the promotion of global health at the upcoming HLM4, and that the adopted Political Declaration will function as a foundation for Japan to strengthen domestic policy as a Member State while encouraging Japan to implement policies starting with the establishment of domestic systems for global health.

Recommendation 2: Advance policies that are centered on people living with health concerns caused by alcohol and the people close to them.

A participatory process that involves affected parties in decision-making has been emphasized as a key element during the implementation of WHO Best Buy policies to enhance their social acceptability and sustainability.⁹ A group called the “Network to establish and promote the Basic Act on Measures against Alcohol-related Health Harm” (AL-HOU-NET) that mainly involved patient advocacy groups, civil society groups, and related academic societies was formed during the process of enacting the Basic Act. AL-HOU-NET worked together with the Parliamentary Association for Alcohol-Related Health Harm to see that law passed.¹⁰

Since then, multi-stakeholder discussions have been held at the Council on Alcohol-Related Health Harm Prevention in accordance with the Basic Act. However, reinforcing past initiatives in this area and advancing NCD control will require further efforts. These efforts should include building systems that fully reflect the voices of patients and affected parties in the policy-making process while holding discussions that, even in the presence of diverse interests, are based on the shared goal of better health for patients, affected parties, and citizens.

Recommendation 3: Strengthen restrictions on the availability of alcoholic beverages and advance NCD control through measures that cut across ministries and sectors.

Japan’s existing regulations on the availability of alcoholic beverages are insufficient due to a number of factors including the influence of the alcohol industry, liquor tax revenue, and the presence of advertising, retail, and other private sector interests. There is also the fact that alcoholic beverages are a part of food culture that is deeply rooted in local traditions. Another factor for these circumstances is that measures to address alcohol-related health harm are not always advanced with integrated efforts due to different positions and objectives among the various ministries and agencies.

However, considering the scale of health harm caused by alcohol, we have now reached a point where we must consider what regulations on access to alcoholic beverages will be best for Japan. This issue should be examined from multiple perspectives and angles and in a manner that cuts across ministries and agencies as well as sectors, and that is centered on the voices of people living with NCDs and those close to them. As a policy issue, alcohol-related health harm is not only relevant to the MHLW, which has jurisdiction over policies related to health; it also holds significance for the Cabinet Office; the Ministry of Justice (MOJ); the National Police Agency (NPA); the Ministry of Land, Infrastructure, Transport and Tourism (MLIT); the Children and Families Agency (CFA); the Ministry of Finance (MOF); the Ministry of Economy, Trade and Industry (METI); the Ministry of Education, Culture, Sports, Science and Technology (MEXT); and the Consumer Affairs Agency (CAA). Given its broad relevance, it will be necessary to advance with a firm basis in discussions that cut across ministries and agencies and that span multiple areas when taking the necessary steps to strengthen regulations on the availability of alcoholic beverages for NCD control.

⁹ World Health Organization. Save Lives, Spend Less: A Strategic Response to Noncommunicable Diseases [Internet]. Geneva: World Health Organization; 2018. Report No.: WHO-NMH-NVI-17.9-eng. Available from: <https://apps.who.int/iris/bitstream/handle/10665/259232/WHO-NMH-NVI-17.9-eng.pdf>

¹⁰ National Center for Addiction Services Administration. “Introducing the Basic Act on Alcohol-Related Health Harm.” Available from: <https://www.ncasa-japan.jp/policy/low>. Last retrieved on May 1, 2025.

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As an independent, non-profit, non-partisan private think tank, HGPI complies with the following guidelines relating to the receipt of grants and contributions.

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While these recommendations are based on expert interviews, they were compiled by HGPI in its capacity as an independent health policy think-tank. They do not in any degree represent the opinions or endorsement of the organizations to which related parties are affiliated. These recommendations are endorsed by the civil society groups listed below.

Organizations that endorse these recommendations (alphabetical order)

Aichi Study Group on Cooperative Healthcare for Alcohol

AL-HOU-NET (the Network to establish and promote the Basic Act on Measures against Alcohol-related Health Harm)

Approved Specified Nonprofit Corporation to Prevent Alcohol and Other Addiction Related Problems (ASK)

Association of Consumer Organizations (SHUFUREN)

About Health and Global Policy Institute

Health and Global Policy Institute (HGPI) is a non-profit, independent, non-partisan health policy think tank established in 2004. In its capacity as a neutral think-tank, HGPI involves stakeholders from wide-ranging fields of expertise to provide policy options to the public to successfully create citizen-focused healthcare policies. Looking to the future, HGPI produces novel ideas and values from a standpoint that offers a wide perspective. It aims to realize a healthy and fair society while holding fast to its independence to avoid being bound to the specific interests of political parties and other organizations. HGPI intends for its policy options to be effective not only in Japan, but also in the wider world, and in this vein the institute will continue to be very active in creating policies for resolving global health challenges. HGPI's activities have received global recognition. It was ranked second in the "Domestic Health Policy Think Tanks" category and third in the "Global Health Policy Think Tanks" category in the Global Go To Think Tank Index Report presented by the University of Pennsylvania (as of January 2021, the most recent report).

About NCD Alliance Japan

NCD Alliance Japan is a collaborative platform for civil society organizations in the NCD community, steered by the Health and Global Policy Institute, aiming to further promote comprehensive, cross-cutting NCD policies.

NCD Alliance Japan has served since 2013 as Japan's point-of-contact for the NCD Alliance, a collaborative platform bringing together over 2000 civil society organizations/academic institutions in more than 170 countries and we have been officially recognized as a full member of the NCD Alliance since January 17, 2019

By bringing together multi-stakeholders from both inside and outside Japan, including leaders of lived experience, members of industry, government officials, academia, and civil society, NCD Alliance Japan is working to support the development of lived experience leadership as well as policy-making which reflects and elevates its voice. NCD Alliance Japan also aims to contribute to problem-solving in the NCD space by monitoring trends both at home and abroad and actively sharing Japan's insights with the world.

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