



**THE 46TH GENERAL ASSEMBLY
OF ASEAN INTER-PARLIAMENTARY ASSEMBLY**
16-22 September 2025
Kuala Lumpur, Malaysia

*Parliament at the Forefront for Inclusive Growth and
Sustainable ASEAN*

(Res.46GA/2025/Soc/03)

**RESOLUTION ON
PROMOTING THE ROLES OF PARLIAMENTS IN ENFORCING THE
EXISTING LAWS AND REGULATIONS RELATED TO ALCOHOL
BEVERAGE CONTROL IN ASEAN**

Sponsored by Lao PDR

Co-sponsored by Cambodia and Malaysia

The Forty-sixth AIPA General Assembly:

Reaffirming the World Health Organization (WHO) [Global Alcohol Action Plan 2022–2030](#), endorsed by the 75th World Health Assembly in May 2022, which calls for accelerated implementation and monitoring of evidence-based strategies such as excise taxation, marketing restrictions, reduced availability, and drink-driving countermeasures and establishes a target of at least 20 percent relative reduction in total alcohol per capita consumption by 2030 compared with the 2010 baseline;

Recalling the [Bandar Seri Begawan Declaration on Noncommunicable Diseases](#) (NCDs) in ASEAN, adopted at the 23rd ASEAN Summit in October 2013, which underscored the need to intensify action on key NCDs risk factors, including harmful alcohol consumption, to achieve healthier ASEAN communities;

Further recalling the [ASEAN Framework for Action on Alcohol Control](#), as endorsed by the 13th ASEAN Health Ministers' Meeting in September 2017 in Bandar Seri Begawan, Brunei Darussalam, which provides priority measures taxation, availability restrictions, marketing bans, and drink-driving countermeasures to reduce harmful alcohol use in the region;

Further recalling the [ASEAN Post-2015 Health Development Agenda \(APHDA\) 2021–2025](#), endorsed by the 15th ASEAN Health Ministers' Meeting in May 2022, which under

its ASEAN Health Cluster 1 (“Promoting Healthy Lifestyle”) prioritises the reduction of the harmful use of alcohol through multisectoral, evidence-based interventions;

Recalling the AIPA Resolution No. [Res.35GA/2014/Soc/02](#) on Enhancing Legislative Co-operation among AIPA Member Parliaments on Prevention and Control of noncommunicable diseases (NCDs) that is essential to encourage governmental action plans and community health initiatives specifically addressing the harmful use of alcohol, which is an integral part of the WHO Global Action Plan for the Prevention and Control of NCDs 2013-2030;

Recognising that alcohol consumption remains a principal contributor to disease, injury, and premature mortality across the ASEAN Member States, disproportionately affecting young people, women, and vulnerable populations, and posing serious challenges to public health, road safety, social stability, economic growth, and sustainable development;

Noting with concern that alcohol remains widely available, aggressively marketed, and relatively affordable in many ASEAN Member States, reflecting critical policy gaps and enforcement weaknesses that drive consumption and related harms;

Acknowledging that among ASEAN Member States, inadequate enforcement efforts, weak compliance monitoring, under-resourced agencies, and industry interference undermine public health gains and slow progress toward Sustainable Development Goal 3.5 on the harmful use of alcohol; and

Recognising that AIPA Member Parliaments have a critical oversight role in translating laws into practice by allocating budget and resources, strengthening enforcement, imposing stiffer penalties, and demanding transparent reporting.

Hereby resolves to:

Strengthen national legal frameworks and harmonise laws, where gaps exist, by aligning with **WHO’s** “best-buy” alcohol control measures and law enforcement by enhancing penalties and sanctions to effectively deter non-compliance;

Recommend that AIPA Member Parliaments ensure dedicated budget lines for enforcement activities, such as compliance monitoring, undercover sales compliance checks, and random breath testing, are maintained or increased in annual appropriations;

Further recommend that AIPA Member Parliaments actively promote the involvement of civil society, and youth organisations in oversight of alcohol-control laws by establishing formal consultative bodies, inviting stakeholders at public hearings, and partnering on

community monitoring initiatives to harness grassroots expertise for reporting violations, enhancing transparency and accountability, and building broad public support for effective enforcement;

Urge AIPA Member Parliaments to consider rigorously oversee the implementation of existing alcohol control laws in their jurisdictions and to monitor policy, rules and regulations of ASEAN and its Member States during AIPA Caucus and/or AIPA related meetings;

Urge AIPA Member Parliaments to encourage relevant ministries and agencies to actively conduct and sustain public-awareness campaigns, that highlight the health, social, and economic harms of alcohol, while building public support for evidence-based control policies through widespread media outreach and community engagement;

Enhance cooperation among AIPA Member Parliaments and ASEAN Member States to enact and enforce robust conflict-of-interest provisions to safeguard alcohol control policy development and enforcement from industry interference;

Encourage AIPA Member Parliaments to collaborate regionally via the ASEAN Health Ministers Meeting and other mechanisms to share enforcement data, best practices, and adaptable legislative templates for more harmonised application of alcohol control laws; and

Recommend that AIPA Member Parliaments cooperate with international organisations, community networks, all forms of media platforms, and the citizenry in implementing and promoting the laws and regulations related to alcohol beverage control.

Adopted in Kuala Lumpur, Malaysia on the Twentieth Day of September, in the Year Two Thousand and Twenty-Five.



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EXPLANATORY NOTE

Original Version

Despite ASEAN's regional commitments the 2013 Bandar Seri Begawan Noncommunicable Diseases (NCDs) Declaration, the 2017 ASEAN Framework for Action on Alcohol Control and the 2021–2025 ASEAN Post-2015 Health Development Agenda (APHDA) alcohol use remains a leading driver of disease, injury and premature death across ASEAN Member States. This resolution calls upon AIPA Member Parliaments to translate those frameworks into action, closing both policy gaps and strengthen enforcement.

Alcohol is a widely consumed psychoactive drug that carries inherent health risks at any level of intake. According to the WHO Global Status Report on Alcohol and Health 2024, alcohol use contributed to 2.6 million deaths in 2019 (4.7 % of all deaths), including 1.6 million from non-communicable diseases and 700 000 from injuries and Alcohol use plays a causal role in over 200 health conditions.

Alcohol use is a significant and escalating public health and development concern across the ASEAN region, usually influenced by factors such as increased affordability due to economic growth, aggressive marketing practices, easy availability, cultural and social acceptance, and weak regulatory frameworks and enforcement.

According to the WHO Global Information System on Alcohol and Health (GISAH), per capita alcohol consumption in 2022 in half of the ASEAN countries exceeded the global average, heavy episodic drinking, particularly among young men and increasingly among women, is a growing concern. Despite growing recognition of the harm, policy responses remain fragmented and under-resourced. Key gaps include weak or unenforced restrictions on alcohol marketing, minimal taxation or pricing controls, limited regulation of outlet density and trading hours, and insufficient public awareness about the risks and harms of alcohol use.

Despite that all ASEAN Member States reported having a formal, written national alcohol control policy or strategy in place, they show wide variation in the scope and strength of those policies, particularly with respect to WHO “best-buy” measures like

excise taxation, marketing bans, and availability restrictions. Additionally, the existing policies, implementation and enforcement remain major challenges.

AIPA Member Parliaments are uniquely positioned to turn ASEAN-wide commitments (Bandar Seri Begawan 2013; ASEAN Framework 2017; APHDA 2021–2025) into effective national laws. Yet enforcement is often weak hindered by under-resourced agencies, inadequate compliance monitoring, and industry interference slowing progress toward SDG 3.5 on reducing harmful alcohol use.

By enacting and sharpening legislation, securing dedicated funding, demanding transparent public reporting and debate, and insulating policy processes from industry influence, AIPA Member Parliaments can lead multisectoral efforts to ensure evidence-based interventions are fully enforced and deliver real public-health gains.