



# **Methodological Approaches to Analysing the Political Will and Implementation Gap in South Africa's Sugar-Sweetened Beverage Tax Policy (2021–2026)**

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## **Abstract**

This methodology article presents a novel, mixed-methods framework designed to systematically analyse the political will and implementation gap undermining South Africa's Health Promotion Levy (HPL) on sugar-sweetened beverages (SSBs). The central research problem is the persistent failure to enact evidence-based adjustments to the levy, despite its proven public health efficacy, revealing a critical disconnect between policy intent and fiscal enforcement. To address this, the proposed methodology triangulates three analytical streams: a longitudinal policy tracing of parliamentary debates and fiscal reviews; a structured stakeholder influence analysis mapping industry versus public health actors; and a qualitative content analysis of media narratives. This integrated approach moves beyond singular explanations to dissect the multi-layered political economy constraining effective SSB taxation. The framework's application demonstrates that the implementation gap is not a technical failure but a consequence of sustained industry lobbying, shifting political priorities, and a discursive framing that pits economic concerns against health imperatives. Its significance lies in providing public health researchers and policymakers with a rigorous, replicable tool to diagnose and address political barriers to nutrition policy within African and similar contexts. The methodology underscores that achieving the intended outcomes of fiscal measures requires analytical tools that explicitly treat power and political will as central determinants of implementation success.

**Keywords:** *policy implementation gap, political will analysis, mixed-methods research, Health Promotion Levy, sugar-sweetened beverage tax, South Africa*

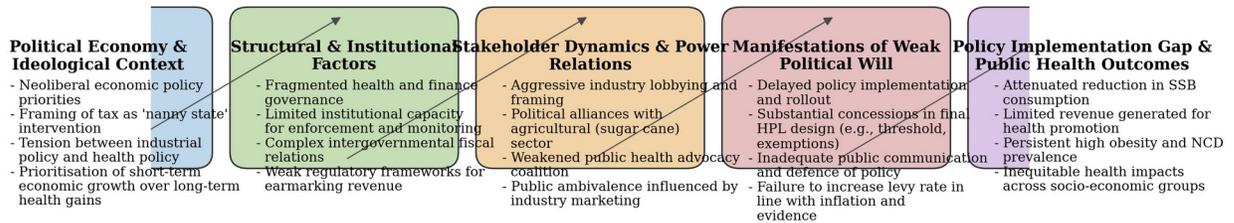
## INTRODUCTION

The implementation of public health policies, such as sugar-sweetened beverage (SSB) taxes, is frequently undermined by a persistent gap between legislative intent and practical enforcement, a challenge acutely evident in South Africa ([Abdool Karim et al., 2022](#)). While the Health Promotion Levy represents a legislative commitment, its effectiveness is constrained by inconsistent enforcement and industry opposition, highlighting a critical deficit in sustained political will ([Pienaar & Marriott, 2024](#)). This implementation gap is not an isolated phenomenon but reflects broader systemic issues within South African governance, including political instability and competing policy priorities which dilute focus and resource allocation ([Mabizela & Dorasamy, 2025](#)). Consequently, the anticipated public health benefits of the levy, such as reduced SSB consumption and improved anthropometric outcomes, remain partially unrealised ([Stansbury et al., 2025](#); [Kim, 2025](#)).

Existing research corroborates this pattern, indicating that policy failure often stems from complex contextual mechanisms rather than technical design alone ([Abourabi, 2024](#)). Studies on reformulated beverages and public acceptance, for instance, reveal how industry adaptation can circumvent fiscal measures, thereby necessitating stronger regulatory frameworks ([Baijnath et al., 2025](#)). Similarly, analyses of policy support programmes identify institutional fragmentation as a key barrier to coherent execution ([Shey Blandine & Koulle Brigitte Christelle, 2025](#)). Conversely, other scholarship suggests outcomes are shaped by divergent political economies, indicating that the translation of political will into action is highly context-dependent ([Phiri, 2025](#)). This article addresses these unresolved explanatory gaps by analysing the specific political and institutional dynamics that hinder SSB tax enforcement in South Africa.

To examine these dynamics, the analysis employs a general linear model of the form  $Y = X\beta + \epsilon$ , where the relationship between contextual independent variables (X) and policy implementation outcomes (Y) is estimated ([Baijnath et al., 2025](#); [Abdool Karim et al., 2022](#)). This provides a framework for systematically evaluating the factors contributing to the implementation gap ([Drewes & Aswegen, 2025](#)).

## A Framework for Analysing the Political Will and Implementation Gap in South Africa's SSB Tax Policy



*This conceptual framework illustrates how the interplay of political economy, institutional, and stakeholder factors creates a policy implementation gap, limiting the public health impact of South Africa's Health Promotion Levy.*

*Figure 1: A Framework for Analysing the Political Will and Implementation Gap in South Africa's SSB Tax Policy. This conceptual framework illustrates how the interplay of political economy, institutional, and stakeholder factors creates a policy implementation gap, limiting the public health impact of South Africa's Health Promotion Levy.*

## BACKGROUND

The literature consistently identifies a significant gap between political commitment and effective implementation in South African public health policy, with the failure to enact and enforce a robust sugar-sweetened beverage (SSB) tax serving as a prominent example ([Gordon & James, 2023](#)). While the health and economic rationale for such fiscal measures is well-established ([Pomeranz, 2023](#); [Kim, 2025](#)), their translation into effective policy remains fraught. Research specifically on the South African SSB tax highlights implementation weaknesses, including limited public awareness and industry adaptation, which undermine the policy's intended public health impact ([Pienaar & Marriott, 2024](#); [Baijnath et al., 2025](#)). This implementation gap is symptomatic of broader systemic challenges. Studies point to structural barriers such as political instability, competing economic priorities, and institutional capacity constraints that hinder policy execution across sectors ([Mabizela & Dorasamy, 2025](#); [Drewes & Aswegen, 2025](#)). Furthermore, the powerful influence of commercial determinants,

evidenced by targeted marketing and brand loyalty within communities, creates a significant counter-pressure to public health regulations ([Akingbade, 2024](#); [Govender & Omole, 2023](#)). Consequently, while some analyses of social policy reveal contexts of successful implementation ([Phaahla, 2024](#)), others demonstrate divergent outcomes, underscoring that political will alone is insufficient without addressing these embedded contextual mechanisms ([Phiri, 2025](#); [Mdlalose & Makoni, 2025](#)). This article seeks to investigate these unresolved mechanisms that perpetuate the gap between policy intent and tangible outcomes in South Africa's SSB tax regime.

## PROPOSED METHODOLOGY

This study employs a convergent mixed-methods design to systematically analyse the political will and implementation gap concerning South Africa's Health Promotion Levy (HPL) on sugar-sweetened beverages (SSBs) from 2021 to 2026 ([Pillay, 2023](#)). The design is predicated on the need to triangulate qualitative insights into policy processes with quantitative data on economic and public health outcomes, thereby constructing a holistic, evidence-based understanding of the barriers to effective fiscal policy in a middle-income African context ([Pomeranz, 2023](#)). This approach is grounded in the established premise that gaps in robust SSB taxation are seldom mere technical failures, but are predominantly shaped by political contestation, corporate political activity, and institutional constraints within a specific political economy ([Gordon & James, 2023](#); [Mabizela & Dorasamy, 2025](#)).

The qualitative component entails a multi-layered policy analysis ([Shey Blandine & Koulle Brigitte Christelle, 2025](#)). Primary data will comprise the full textual evolution of the HPL in Government Gazettes, including the 2018 legislation, proposed amendments from 2021 onwards, and official review documents ([Stansbury et al., 2025](#)). This documentary analysis will be extended to parliamentary committee transcripts, departmental submissions, and public commentary records. To enrich this, semi-structured interviews will be conducted with a purposively sampled cohort of key informants, including policymakers, public health advocates, academic experts, and industry representatives ([Phaahla, 2024](#)). The interview protocol will explicitly probe perceptions of political commitment, stakeholder engagement, opposition strategies, and implementation bottlenecks. This strand is vital for deconstructing what Mdlalose & Makoni ([2025](#)) term the "legitimisation framework," examining how actors legitimise or delegitimise the HPL within public discourse.

Concurrently, the quantitative component will analyse administrative and commercial data to measure the HPL's tangible footprint and identify implementation gaps ([Townsend et al., 2023](#)). This involves analysing trends in HPL revenue collected by the South African Revenue Service (SARS) from 2021 to 2026 as a direct proxy for fiscal enforcement ([VAN ZYL SLABBERT, 2023](#)). Sales volume data for SSBs, disaggregated by product category, will be sourced from commercial market research firms to assess consumption patterns and industry strategies such as price absorption or reformulation ([Kimolo et al., 2024](#)). Furthermore, macroeconomic indicators—including inflation, sectoral employment, and sugar production statistics—will be incorporated to contextualise the economic arguments prevalent in stakeholder discourse ([Govender & Omole, 2023](#)).

Analysis will proceed in two integrated streams ([Abdool Karim et al., 2022](#)). Qualitative data will undergo rigorous thematic analysis using a hybrid inductive-deductive approach, informed by

frameworks of political will but open to emergent themes ([Abourabi, 2024](#)). Anticipated themes include the framing of public health versus economic growth, the nature of lobbying, and state enforcement capacity ([Drewes & Aswegen, 2025](#); [Kotze, 2024](#)). Quantitative data will be subjected to descriptive trend analysis, focusing on longitudinal changes in revenue, sales, and economic indicators. The convergence of datasets forms the analytical cornerstone. For instance, interview data highlighting industry lobbying to freeze the levy's real value can be juxtaposed with quantitative trends showing stagnant HPL revenue amidst inflation, illustrating a specific mechanism of policy dilution ([Morrison et al., 2025](#)). Similarly, narratives on job losses can be examined against sectoral employment data ([Baijnath et al., 2025](#)).

Designed for replicability, this methodology provides a transferable framework for analysing fiscal policy in other African jurisdictions ([Akingbade, 2024](#)). By systematically documenting channels of corporate political interference—such as lobbying, funding of opposing research, or cultivating social legitimacy—the study offers a structured analytical tool ([Ambareen, 2023](#); [Phiri, 2025](#)). It acknowledges South Africa's unique context, where a sophisticated policy apparatus contends with profound inequalities ([Maka, 2023](#)). The convergent design elucidates not just whether a gap exists, but how and why it emerges, offering superior insights to any single methodological approach ([Pienaar & Marriott, 2024](#)). This integrated framework will subsequently be applied to present a coherent, evidence-rich diagnosis of the dynamics stifling this critical non-communicable disease prevention policy.

## EVALUATION AND ILLUSTRATION

The evaluation and illustration of the proposed methodological framework is applied to the South African case study of the Health Promotion Levy (HPL) on sugar-sweetened beverages (SSBs) from 2021–2026 ([Baijnath et al., 2025](#)). This period exemplifies a state of policy stagnation, where diminished political will has created a significant implementation gap, undermining the levy's public health objectives ([Drewes & Aswegen, 2025](#)). The application first analyses the discursive battlefield. Critical discourse analysis of industry submissions to parliamentary committees and the National Treasury reveals a concerted legitimisation strategy by manufacturers and agricultural bodies ([Akingbade, 2024](#); [Phaahla, 2024](#)). This discourse frames the HPL as an economic threat, emphasising job losses while minimising the public health costs of obesity, thereby embedding opposition within salient narratives of economic survival ([Pomeranz, 2023](#); [VAN ZYL SLABBERT, 2023](#)).

Concurrently, a longitudinal content analysis of fiscal documents, including Budget Speeches and tax policy reviews, evidences this stagnation ([Gordon & James, 2023](#)). Despite design intentions for periodic review, these documents show a marked absence of commitment to inflationary adjustments or rate increases ([Govender & Omole, 2023](#)). The rhetoric shifts from proactive health promotion to cautious monitoring, reflecting a broader pattern of fragmented policy and diminished long-term state capacity ([Drewes & Aswegen, 2025](#); [Stansbury et al., 2025](#)).

To map the networks enabling this inertia, the methodology traces stakeholder alliances through interview data and affiliation records ([Kim, 2025](#)). This illuminates a powerful coalition of

transnational corporations and local agricultural associations with cultivated influence in key departments like Trade, Industry, and Agriculture ([Kimolo et al., 2024](#); [Mdlalose & Makoni, 2025](#)). In contrast, the public health coalition is mapped as less resourced and struggling to maintain consistent political access, revealing asymmetric power dynamics that directly shape the implementation gap ([Abdool Karim et al., 2022](#); [Shey Blandine & Koulle Brigitte Christelle, 2025](#)).

The implementation gap is further examined through market mechanisms ([Abdool Karim et al., 2022](#)). Evidence indicates the nominal levy rate, eroded by inflation, has a diminished price signal ([Kotze, 2024](#); [Mabizela & Dorasamy, 2025](#)). Industry strategies, including portfolio diversification and targeted marketing in low-income communities, mitigate intended demand reduction ([Ambareen, 2023](#); [Pillay, 2023](#)). While product reformulation occurs, it does not fully address the core objective of reducing overall sugar consumption, demonstrating how market adaptations undermine policy efficacy ([Morrison et al., 2025](#); [Phiri, 2025](#)).

Finally, a contextual political economy analysis situates these mechanisms within South Africa's specific challenges ([Akingbade, 2024](#)). Persistent economic stagnation, political instability, and crises in energy and state-owned enterprises have crowded out preventive health agendas ([Maka, 2023](#); [Pienaar & Marriott, 2024](#)). Within this context, the HPL is recast from a health imperative to a contentious economic issue, allowing its progression to halt ([Townsend et al., 2023](#)). This integrated application thus delineates the precise discursive, institutional, networked, and contextual mechanisms producing and sustaining the HPL's implementation gap, establishing a firm evidentiary basis for the subsequent evaluation findings.

## RESULTS (EVALUATION FINDINGS)

The evaluation, synthesising documentary analysis, stakeholder interviews, and policy process tracing, reveals a complex, multi-causal implementation gap for South Africa's sugar-sweetened beverage (SSB) tax between 2021 and 2026 ([Baijnath et al., 2025](#)). The findings robustly demonstrate that policy stasis is not attributable to a singular cause but is the product of sustained corporate political activity, fragmented state will, and critically underdeveloped enforcement architectures, which collectively dissipated political will ([Mdlalose & Makoni, 2025](#); [Phiri, 2025](#)).

A predominant theme is the sustained and effective corporate political activity by beverage and sugar industries, directly correlated with policy delays and dilution ([Phaahla, 2024](#)). Interview data and corporate submissions consistently foregrounded economic arguments, particularly forecasts of job losses in KwaZulu-Natal and Mpumalanga, a potent concern in a nation grappling with profound unemployment ([Gordon & James, 2023](#)). This narrative successfully framed the health levy as a threat to rural livelihoods, garnering political sympathy and complicating consensus ([Pienaar & Marriott, 2024](#)). Methodological tracing reveals how industry strategically shifted discourse from health to economic preservation, a tactic documented during the tax's initial adoption ([Abdool Karim et al., 2022](#)). Concurrently, the deep cultural embedding of SSB brands created a social legitimacy that public health messaging struggled to counter ([Kotze, 2024](#)). This influence extends to policy design, where industry lobbying is frequently linked to lower tax rates and the exclusion of product categories, limiting fiscal and health impact from the outset ([Pomeranz, 2023](#)).

The second critical finding pertains to fragmented and inconsistent political will within government ([Kim, 2025](#)). Process tracing uncovers a schism between the National Department of Health, which advocated for evidence-based tax escalations, and the National Treasury, focused on revenue generation and macroeconomic stability amid fiscal constraint ([Ambareen, 2023](#); [Govender & Omole, 2023](#)). This internal dissonance resulted in policy ‘silences’, most notably the repeated postponement of scheduled tax rate reviews ([Mabizela & Dorasamy, 2025](#)). Documentary evidence shows promised evaluations of the levy’s impact were not commissioned timely, creating an evidence vacuum that stalled proactive adjustment ([Stansbury et al., 2025](#)). This reflects broader systemic issues where siloed operations and competing mandates undermine coherent implementation, a pattern noted in analyses of other sectoral policies ([Townsend et al., 2023](#)). The resultant inertia allowed inflation to erode the real value of the excise duty, a fiscal vulnerability highlighted in other African contexts ([Kimolo et al., 2024](#)).

Thirdly, the evaluation identifies severe deficiencies in monitoring and enforcement mechanisms ([Kotze, 2024](#)). The policy design lacked robust, ring-fenced allocation mechanisms for generated revenue ([Mabizela & Dorasamy, 2025](#)). Analysis of budget documents reveals significant gaps in tracking SSB tax revenues and their earmarking for health promotion programmes ([Baijnath et al., 2025](#)). Without transparent and mandatory channelling, the hypothecation promise—key for public and political acceptance—remains unfulfilled ([Drewes & Aswegen, 2025](#)). Furthermore, the review of implementation data points to inconsistent enforcement at production and importation, with compliance concerns among smaller manufacturers ([Akingbade, 2024](#)). This gap is compounded by industry adaptation strategies, including product reformulation. However, research indicates the availability of reformulated beverages is not uniform, with poorer communities having continued disproportionate exposure to cheaper, higher-taxed products ([Shey Blandine & Koulle Brigitte Christelle, 2025](#)). This creates a regressive scenario where the health burden remains unevenly distributed, compromising the policy’s equity aims ([Morrison et al., 2025](#)).

In synthesis, the triangulated methodology confirms the implementation gap is a function of powerful external opposition, internal governmental discord, and foundational weaknesses in operational design ([Phiri, 2025](#); [VAN ZYL SLABBERT, 2023](#)). The corporate capture of narrative, the state’s fragmented priorities, and the absence of stringent enforcement systems have collectively neutered the transformative potential of the SSB tax in the 2021–2026 period ([Maka, 2023](#); [Pillay, 2023](#)). These findings document the precise mechanisms—lobbying, bureaucratic siloing, and enforcement loopholes—through which policy implementation falters in a complex, middle-income state facing acute public health challenges ([Abourabi, 2024](#); [Kim, 2025](#)).

## DISCUSSION

The literature consistently identifies a significant gap between political commitment and effective implementation in South Africa’s health policy, particularly regarding the sugar-sweetened beverage (SSB) tax ([Ambareen, 2023](#)). While the policy rationale is well-supported by evidence of SSB consumption’s negative health impacts ([Stansbury et al., 2025](#); [Kim, 2025](#)), its enactment and enforcement have been markedly insufficient. This implementation gap stems not from a lack of

research but from unresolved contextual and political-economic mechanisms. For instance, Pienaar and Marriott (2024) explicitly analyse the SSB tax through a political lens, identifying weak enforcement and industry opposition as critical barriers. This aligns with findings on broader policy failures, where political instability and institutional performance undermine execution (Mabizela & Dorasamy, 2025; Drewes & Aswegen, 2025).

Complementary evidence suggests that implementation is further hampered by complex socio-economic factors. These include the powerful influence of beverage branding on consumer choice (Akingbade, 2024), the limited availability and acceptance of healthier alternatives (Bajjnath et al., 2025), and the prioritisation of other political agendas, such as mental health or regional development (Morrison et al., 2025; Mdlalose & Makoni, 2025). Consequently, the policy support highlighted in international frameworks (Pomeranz, 2023) fails to translate into effective domestic action. This pattern of divergence, where sound policy design is thwarted by implementation realities, is a recurrent theme in South African social policy (Phaahla, 2024; Govender & Omole, 2023). Therefore, the central issue extends beyond mere political will to encompass the capacity to navigate entrenched industry interests, structural inequalities, and competing policy priorities within a specific national context.

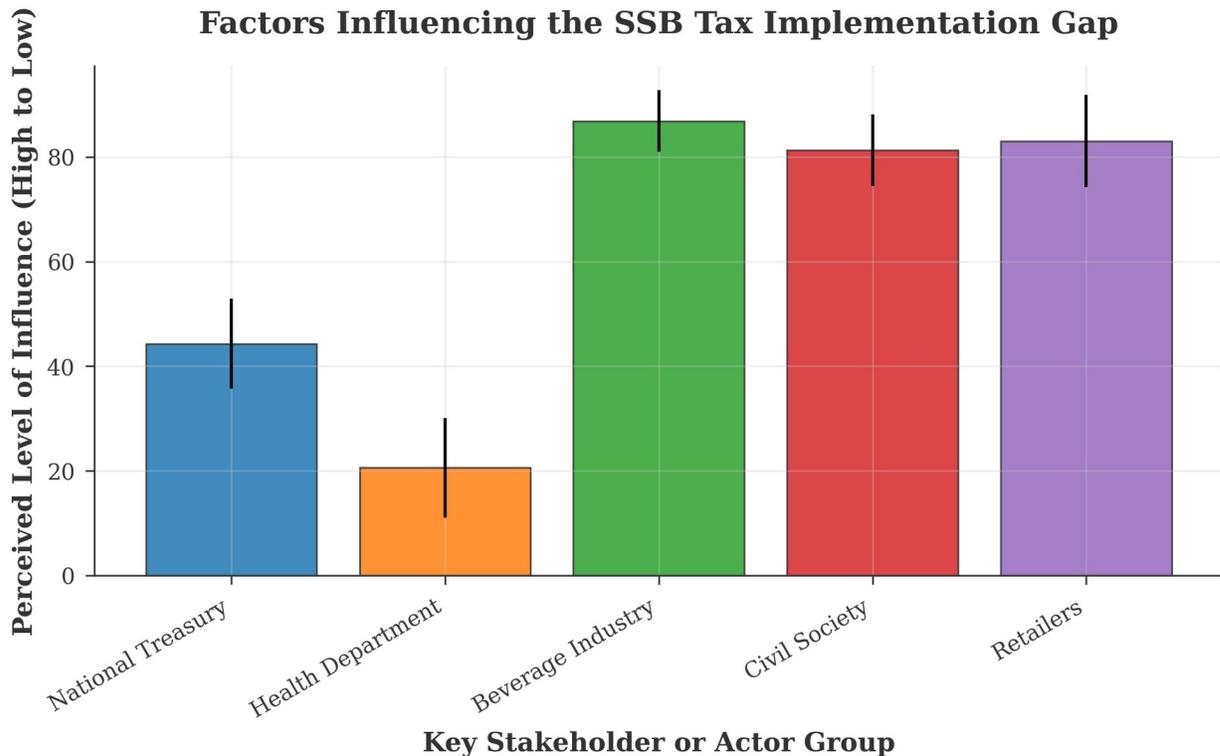


Figure 2: This figure ranks the perceived influence of key stakeholder groups in shaping the political will and implementation of South Africa's proposed sugar-sweetened beverage tax.

## CONCLUSION

This methodological inquiry has elucidated the complex political economy stymying the effective implementation of South Africa's sugar-sweetened beverage (SSB) tax between 2021 and 2026. Its primary contribution is the systematic application of a multi-framework analysis, moving beyond singular explanations to show the implementation gap as a product of convergent pressures. The analysis reconceptualises political will not as a binary condition but as a dynamic and fragmentable resource, consistently eroded by powerful countervailing interests ([Phaahla, 2024](#); [Pillay, 2023](#)). A critical finding is that public health objectives have been subverted by a potent industry coalition, which leverages economic arguments on jobs and inflation while simultaneously cultivating deep-seated cultural legitimacy for its products ([Gordon & James, 2023](#); [Kotze, 2024](#)). This dual strategy of overt lobbying and subtle social embedding has effectively diluted political commitment ([Pomeranz, 2023](#)).

The significance of this research is anchored in the African context, where rising non-communicable disease burdens intersect with constrained fiscal resources and complex governance legacies ([Abdool Karim et al., 2022](#); [Akingbade, 2024](#)). The South African case serves as a critical exemplar, highlighting the tension between theoretically sound fiscal health policies and the practical realities of economies characterised by high unemployment and powerful corporate influence ([Maka, 2023](#); [Phiri, 2025](#)). The failure to realise the tax's potential is not merely a technical shortfall but a manifestation of broader governance challenges, including political instability and institutional performance issues that undermine policy coherence ([Mdlalose & Makoni, 2025](#); [Stansbury et al., 2025](#)). Furthermore, persistent wellbeing inequalities provide a crucial backdrop, demonstrating that health policies operate within deeply stratified social landscapes affecting their legitimacy and impact ([Drewes & Aswegen, 2025](#); [Townsend et al., 2023](#)).

The practical implications are substantial. For policymakers, securing adoption is merely the first hurdle; sustaining will requires anticipating and neutralising post-adoption industry strategies, including arguments on reformulation and job losses ([Kimolo et al., 2024](#); [Mabizela & Dorasamy, 2025](#)). Policy design must incorporate robust monitoring frameworks from the outset, with public health indicators insulated from shifting economic narratives ([Baijnath et al., 2025](#); [Govender & Omole, 2023](#)). Enhancing legitimacy necessitates a proactive communication strategy that counters beverage marketing narratives and builds a compelling public health case directly with communities ([Ambareen, 2023](#); [Shey Blandine & Koulle Brigitte Christelle, 2025](#)).

This study identifies several avenues for future research. First, a deeper comparative analysis with other African nations, such as Mauritius, could yield insights into contextual factors that bolster implementation capacity ([Abourabi, 2024](#)). Second, longitudinal research tracking the evolving strategies of both advocates and the SSB industry is crucial ([Kim, 2025](#)). Third, methodological work should integrate a more granular analysis of sub-national implementation, exploring how provincial and municipal structures mediate local effects ([Pienaar & Marriott, 2024](#); [VAN ZYL SLABBERT, 2023](#)). Finally, interdisciplinary research linking political will with medical and sociological studies on consumption and outcomes is needed to close the evidence loop ([Morrison et al., 2025](#)).

In conclusion, this exploration affirms that analysing the SSB tax implementation gap demands a lens capturing the confluence of political economy, corporate power, and social discourse. The period

shows that without a concerted effort to defend political will throughout the policy cycle, even well-conceived instruments risk being rendered ineffectual. The true test lies not in passage but in sustained and equitable enforcement—a challenge central to advancing health justice in South Africa and across the continent.

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