

Westminster Health Forum on Alcohol and Responsibility

On the 20th October, an interesting debate was hosted by the Westminster Health Forum on Alcohol and Responsibility. An array of speakers with differing viewpoints and backgrounds were given an opportunity to present for 10 minutes, before joining a panel on the topic they were contributing to:

Binge drinking, everyday drinking who is at risk and why?

A public health perspective was given by Professor Mark Bellis of the North West Public Health Observatory (NWPHO) and Professor Sir Charles George, Chair of the Board of Science at the British Medical Association (BMA).

The BMA has defined (in its report on alcohol), 'binge drinking' at six units (8g) or more for women and eight or more for men. Sir Charles cited UK confusion concerning units, a switch to more alcoholic drinks by consumers and called for targeted interventions to reduce alcohol related harm.

Professor Mark Bellis drew on the North West Public Health Observatory new calculations, of which he is lead author, for alcohol attributable fractions, which implicate alcohol in 44 diseases, to a greater or lesser degree and, questionably, lay a large burden of alcohol attributable fractions (including late onset diabetes, cardio vascular disease and stroke) to women consuming between 1-20g a day. The new figures estimate that there are 811,000 alcohol related hospital admissions and deaths a year and claim that the figure will increase by 80,000 a year.

Cathie Smith from the Qualifications Department of the British Institute of Innkeeping (BII) cited targeted approaches from the Institute that are attempting to reduce alcohol related harm. This includes the training of bar staff and member employees in server training and licence compliance for example. The BII have also developed an alcohol awareness qualification for 17 and 18 year olds as part of 'the schools project', which is informing pupils in participating schools about alcohol its effects, the law and potential consequences. This is estimated to have reached 12,000 pupils in a year, with 4000 achieving the alcohol awareness certificate.

Simon Clarke, founder of 'The Free society' cited the importance of personal decision making and

responsibility and defended the right of the individual to drink too much if they so wish, as long as their behaviour doesn't have a negative impact on others (violence and disorder). He questioned 'scare mongering' distorted statistics and the consequential reaction of imposing 'exaggerated responses to exaggerated problems' - such as the recent banning of alcohol on public transport in London, such 'gesture politics' and blanket measures do not address the targeted need for the vulnerable according to Mr Clarke.

The health consequences of alcohol and binge drinking

Surprisingly, Crispin Acton did not draw on the Department's success in that for most sectors of the population, across all age groups, alcohol consumption and more importantly, damaging patterns of drinking are falling. This is also reflected in the reduction in alcohol related crime figures. However, alcohol related hospital admissions and alcohol related mortality, are both increasing - This is partly due to alcohol consumption being better accounted for, the list of alcohol related causes being expanded in calculations, and for females, reflect the underlying increase in alcohol consumption over the last 20 years.

The Department of Health (DoH) is delivering a raft of measures including the Know your limits consumer campaign, patient interventions by GP's, local alcohol interventions for primary care and A&E. All the initiatives are too recent to be evaluated concerning their effect. Crispin Acton did state the protective effects of moderate drinking for those over 40. He also made a firm differential between the effects of long term heavy drinking versus occasional episodic drinking. The DoH estimates that 8% of men and 6% of women in the UK drink at higher risk levels - that is above 6 units a day for women and 8 units for men.

According to Crispin Acton, the second stage of price and promotion report will be released in November, which prompted an extensive discussion as to the need or otherwise for a minimum price for alcohol in UK that continued throughout the morning.

The social impact of alcohol related crime and disorder

Chief Inspector Shaun de Souda Brady highlighted the

effectiveness of partnership, targeting and research when seeking to reduce the alcohol related harm and disorder. Police assumptions that residents concerns in Muswell Hill concerned noise from high street night spots, found that, after holding public consultation that crime and disorder revolved around revellers in residential streets after leaving premises, defacing gardens and cars, noise and fighting. A targeted approach that involved better public transport and cab services, police presence and tackling gangs preying on customers on the streets and in buses, a voluntary minimum age of entry to the clubs of 21 and communal barring of antisocial customers combined to halve violent crime during the operation.

Alcohol and Young People

Tania Rawle, Senior Policy Advisor to The Department of Schools and Families on substance misuse reported on the progress of the Youth Alcohol Action plan and where they are in producing an integrated alcohol module for 11-15 year olds in schools. A social marketing campaign targeted at parents is planned for Spring 2009 after a 12 week period of consultation. Resistance is still a problem regarding including drug and alcohol education in the curriculum due to the amount of material teachers have to fit in already.

A report on progress and possible mechanisms for progress was released on the 24th October. The Youth Alcohol Action Plan has clearly highlighted the 'window' when children need to be reached - with a tipping point of age 13 when trying alcohol moves from the home on special occasions to more regular consumption in different environments by age 15. The strategy recognises that alcohol consumption is part of 15 year olds' society and the education is being tailored accordingly with coping mechanisms, how to resist peer pressure and equipping parents for example. Consumption among under eighteens is reducing significantly, although the marginalised 15% of youth are drinking more units than 10 years ago (11 units a week). This 15% are often 'poly users' of various drugs, tobacco and alcohol and suffer high rates of truancy and social exclusion, making them a difficult sector to reach conventionally.

What more needs to be done to reduce alcohol related harm in the UK?

Mike Benner spoke on behalf of the consumer group CAMRA, emphasizing the importance of the community

pub as a safe, social and regulated environment where people can enjoy a drink. His association also asks for targeted measures rather than blanket policies which punish all drinkers - such as higher taxes, he is, however happy for a minimum price for alcohol in the retail sector as the disparity in price between the off trade and on trade has diverged significantly

Peter McKenna from London Ambulance service confirmed that alcohol related ambulance call outs were increasing (04/05 - 07/08). When questioned as to whether this was due to more effective recording and attribution of call outs to alcohol during the period, he didn't believe this was the case. The service is employing imaginative programmes to reduce alcohol related admissions to A&E by the commissioning of a 'booze bus' at weekends in Camden and Waterloo and a similar 'safe space' at Liverpool street station, where drunk people or those with minor injuries can be treated and left to sober up without taking up valuable beds and time at A&E.

Avis Johns, Director of External Affairs at The Drink AWARE Trust, presented the Trust's new campaign, targeting middle age drinkers by questioning 'what's in your recycling?', the campaign has been launched as a pilot in London and two major cities initially. John's wants Drink Aware to be seen as the consumer's friend and a hub of good information.

Kate Blakeley, Head of Social Responsibility at Diageo called for co-regulation between authorities and the industry to move the social responsibility standards and the Portman Group code forward effectively without making more laws, extending it to the retail sector. Penalties would be applied through existing powers held by local authorities if premises flout regulations. Blakeley called for any policy to be evidence based, joined up and targeted, rather than piecemeal. Finally she called for a social marketing partnership between all those aiming to reduce alcohol related harm through consumer outreaches - to include government and Drink AWARE.

Deirdre Boyd, Editor of Addiction today, focused on the importance of family values and parental example. Boyd also highlighted the danger of teaching use through education if not very carefully handled - i.e. this is how you do it, rather than effective strategies of avoiding peer pressure and difficult situations. Boyd

dismissed health warnings as ineffective, unless very large with alternating messages and called for better training on alcohol in medical schools.

Guy Mason, Public Affairs Director at ASDA, employing 170,000 staff in 347 stores, defended retailers stance on selling alcohol cheaply. The group has responded by suspending the sale of alcohol in town centre stores between midnight and 6am and rigorously training staff in refusing under age sales and removing irresponsible products such as shots and super strength lager and cider. ASDA's social marketing is to include tips on responsible drinking on it's milk in the run up to Christmas (as this way the message will therefore reach almost every household in Britain and provoke conversations).

Finally, Nick Sheron Head of Clinical Hepatology at The University of Southampton spoke of his front line experience as a hepatologist dealing with the effects of excessive alcohol consumption. He illustrated the downward curve of alcoholic liver disease in traditionally high alcohol consuming countries such as France and Spain, and the UK's increase over the same time period. What is unclear in data collection in the UK, at present, is to what degree alcohol is responsible for this increase, in comparison with the contribution from liver disease from the increase in obesity, sedentary lifestyles and poor diet in the UK over the same time period. Don Shenker of Alcohol Concern and Nick Sheron admitted this is not possible to separate out and that the contribution of obesity over the next decade to liver disease will increase significantly.

To conclude, the conference provoked some interesting debate on already well aired opinions, policy options and ways forward, voluntary and statutory.

For more information email info@westminsterforumprojects.co.uk.