

Sirs

I am the Chairman of 'Adult Children Of Alcoholics' which is a 12 Step programme of men and women who have been raised in alcoholic families. Our aim is to assist with recovery of the effects of being raised in such an environment. I have replied to your questions where they are relevant to what we do. I have also been brief but should you require further clarification on any of these points, please do not hesitate to contact me.

1. The Government should be involved in the culture of alcohol abuse because the trend is growing toward an ever increasing alcohol abuse problem and this needs to be addressed within a national strategy so the health workers are unified in their approach to identification treatment of this problem.
2. The Government has a responsibility to intervene because there are not enough resources for individuals to get treatment if they did want to take responsibility for their problem.
3. What must be realised is that individual's abuse of alcohol affects the whole community whether through child neglect, abuse of children in public, community exploitation, drain on local resources, public violence etc.
4. There is a place for all organizations that assist those with an alcohol addiction but there is much splintering and it is vital to put together a national policy to help people help themselves.
5. The principles should include:
  1. That alcoholism is unacceptable within the community because it can affect others in a damaging way
  2. Alcoholism can be treated successfully therefore resources must be put into assembling a network for action
  3. Education must be heightened in the effects of drinking
  4. Children must be more easily able to get help
6. Alcohol misuse can be defined as 'when it has more control over you than you have over it.
7. An alcohol harm reduction should seek to affect 'abuse' as outlined in 6. Such patterns are very hard to change and can only be changed if the drinker is ready to stop. Prevention should be targeted to children from age 12 and to parents of 12 plus year olds who misuse alcohol themselves.
8. For young adults the trend seems to be that alcohol is more readily available than ever coupled with it being cheaper than ever. With older adults it seems that workplace stress seems to have the greatest effect on additional drinking. More information seems to be necessary to all groups explaining the dangers of drinking. For instance, I know that one glass of wine can affect my driving yet I am legally allowed to drive. We need to be much clearer on drink and its outcome.
9. It would be easy to get into debate about certain groups suffice to say that we see drinking in all areas to be on the increase but particularly teenagers from an earlier age than ever before.
10. Socialising.
11. There is definitely a distinction in age groups as previously discussed.
12. Parental influence is the strongest which is why strategy must be directed at all groups with differing messages.
13. Greatly. Those who are greater risk takers are, generally, greater drinkers.
14. Harmful drinking is when alcohol has more control over you than you have over it. This is exposed when the drinkers daily function is impaired.
15. We have no research for the public domain.
16. Greater than we think. For example, people on sickness benefit who are not sick, just drinkers or people who have children in care because the alcohol renders them unable to cope. To round up a valid piece of research to back up our claims would require resources which we don't have.
17. Alcohol dependence is serious alcohol misuse. Training in understanding alcoholism as an addiction and not placing drinkers in mental institutions is vital. Drinkers are not necessarily mentally sick.
18. They might work better if a cohesive back up treatment programme is in place. One or two sessions with a nurse/doctor will have little effect in treating the alcoholic.
19. Current treatments such as the Minnesota Model is most effective treatment. This should be incorporated into our national health Service. It would be easiest for the individual if GP's were fully informed on this method of treatment.
20. –
21. Unless it's an emergency, don't treat abusive alcoholics and find another method of containing them until they are sober. The Government cannot prevent home/work related injuries.
22. The links are very strong. The services would be better coordinated if they were managed by people who had a better understanding of alcoholism and its wider effects.
23. - 35 NA
36. Every child/young person is vulnerable to the effects of alcohol misuse.

37. Every person who is lacking in self confidence is also vulnerable if they are not able to stand up for themselves.
38. The main key factor is the abuse they suffered as youngsters. If these issues were addressed more people would be able to help themselves.
39. The best way of services being joined up is by having a management unit which effectively identifies which services are appropriate to every group and then making all services more available to misusers or other vulnerable groups. Politics gets in the way of this and a dynamic Chairman needs to lead the unit to overcome the politics.
40. The needs of vulnerable groups cannot be met by existing services. Much more needs to be put into place and although this means more resources, it would bring down costs in the long term by dealing with the effects of alcoholism at an earlier stage.

41 - 61 NA

Sincerely, Alexandra Massey. Chairman Adult Children of Alcoholics.