
Comments on the National Alcohol Harm Reduction Strategy (Consultation Document)

As a general point we welcome the development of the strategy but we are concerned that it is linked other strategies aimed at tackling addiction, particularly the National Drug Strategy. Specific concerns and recommendations include:

Principles (Q1-5)

Addiction undermines the principle of personal capability and therefore mandates a societal and governmental response.

Cultural and Behavioural Issues (Q6-13)

We would want to see a particular focus on the problem of binge drinking (especially among the young) and possible ways of dealing with this.

The influence of the alcohol industry in promoting drinking by the young is a major concern and should inform the strategy. We are particularly worried about the development and marketing of alcoholic drinks aimed at young people (Alco-pops etc) and we would expect the strategy to be informed by trends in drinking patterns which stem from such developments. It is also imperative that systems for monitoring trends in alcohol consumption should be strengthened.

Links should be made with knowledge about sexual health, teenage pregnancy and risk-taking, and the use of alcohol to 'legitimise' a desirable risk, rather than causing that risky behaviour in the first place.

Prevention Treatment and Impact (Q14-22)

The strategy should give a clear steer on the issue of whether and how to promote the positive effects of drinking (individual and societal benefits) without risking an increase in damaging effects.

We believe that services for the treatment of alcohol dependency have not kept pace with the growth in funding and services for drug misuse. The strategy should clarify the scale of the problem, map current treatment services, identify gaps and make clear recommendations on the linkage between services for alcohol misuse and other substance misuse. Our preference would be for an integrated approach to substance misuse rather than separate strategies.

Crime, Disorder and Anti-social Behaviour (Q23-35)

The role of alcohol as a factor in domestic violence, violence against women and child abuse should be prominently laid out.

Explicit links should be made with the Drug Action Teams, Local Strategic Partnerships, and Crime and Disorder Reduction Partnerships

Implications for Vulnerable Groups (Q36-40)

We would expect the strategy to be based on an analysis of the differential impact of alcohol on different social classes.

Transient workers (particularly those in the hotel trade) are a particular group identified in Morecambe Bay as having increased risk of harm from alcohol

We also need to do more to support the needs of vulnerable elderly drinkers

The strategy should look at experience with work-based initiatives aimed at reducing harm from alcohol (eg Partners in Health)

Education and Communication (Q41-50)

We would expect the strategy to link closely with the draft national guidelines on alcohol education for schools which have just been produced. The national PSHE Framework and the National Healthy Schools Initiative make it clear that alcohol is part of drugs education, which in turn is part of PSHCE which in turn should permeate the whole curriculum and be part of a whole school approach that incorporates parents, governors etc.

Shape of the Market (Q51-55)

We would like to see careful monitoring of the effects of liberalising licensing laws in England.

Trends in the alcohol content of popular drinks should be recorded and explained – there seems to have been a tendency for the alcohol content of wine to increase and premium strength beers/lagers are more common now than in the past.

Economic Costs and Benefits (Q56-61)

Trends in revenue to the Exchequer should be openly reported.

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