

SU/DoH Consultation
Room 4.6
Admiralty Arch
The Mall
London
SW1A 2WH

Dear Sir/Madame re: Comments from the North Nottinghamshire Community Alcohol Team on the National Alcohol Harm Reduction Strategy.

Initially our service would like to state that we applaud the Governments decision to address the multiple issues associated with excessive alcohol consumption and undertake a harm minimization understanding.

The conceptual basis of our service is one of a functional interpretation, with a pragmatic approach which recognizes the reality that no singular model and or interpretation can possible meet the diverse individual characteristics of potential clients with a alcohol related difficulty, rather we accept that it is the interface between the client and individual therapist which provides the core and or key for effective intervention.

Please find below our service's comments

Foreword

This section clearly sets the scene, and highlights the agenda of the consultation process, however it is of concern that there appears to be no definitive date and or commitment for the launch of any strategy subsequently to the consultation period.

Introduction

It is of concern that while there is considerable emphasis upon partnership working arrangements, and the utilization of the existing expertise of all involved in the day to day intervention for alcohol related problems, there is no immediate clarification of the additional resources which will be need to develop services across the whole of society if any real change is to become a reality. The reality of every day practice is that alcohol services have been grossly under resourced and funded, and we look to the Government to identify real monies for this purpose.

The development of the strategy

There appears to be an element of confusion in that on page 3, the document makes reference to the process being completed by 2004, while on page 4 the document states

that this process will be completed by 2003. This ambiguity could be interpreted as a definite lack of commitment to fully complete this process.

The service welcomes the identification that we will be expected to work within best clinical practice, however we would state that our services experience, within Nottinghamshire is that, this is at the core of all our services.

What do we need to know?

- 1) This would have been more effective if it had identified the Cognitive and Behavioral issues, thereby acknowledging the reality that alcohol can negatively affect a person.
- 2) This should have included all agencies, as this would reflect the reality of the day to day situation.
- 3) Vulnerable groups would have been more effective to either reflect a range of specific groups or none. It is not currently possible to identify one specific vulnerable group.
- 4) Education and communication should have had a connecting statement linking the differing groups and types of education and communication within the communities.
- 5) While recognizing the fact that there are a limited number of alleged health gains from alcohol, our service questions that conceptual standpoint of economic gains, to any other than individuals working within the brewing industry.

The principles that should underpin the strategy

- The argument is the same as applied to smoking, illicit drug misuse and all other activities which society is involved with. The reality is that Alcohol is a toxic substance and is clearly identified as being harmful, even with limited quantities. Government has a responsibility to inform and protect within the widest context. However Government must accept the ambivalence of their own position in that while recognizing the negative effects, never the less the purchase of alcohol contributes to the national income.
- The Government has a responsibility to take the lead in giving alcohol misuse the credibility which it must have, and as a consequence will give permission to all agencies to identify alcohol related difficulties as needing major resources
- There is an expectation that the individual is responsible for their own thoughts, feelings and actions. However total freedom to express the individual will can have extremely destructive consequences on the individual and upon the rest of the community and or associated society. Therefore the Government must take a wider role in terms of developing an

safety net in which to protect the most vulnerable individuals within that society.

- In order to achieve a pragmatic balance between individual and collective rights must commence with a definitive statement which identifies societies expressed view of alcohol via the Government. Leading on from this must be a national imitative in terms of health and social welfare education across the whole of society, which is expressed within terms of the diverse cultural and ethnic requirements of our multicultural society.
- The core principle must be one of total honesty, in that a clear and none biased information should be made available. A recognition that it is not effective to attempt utilize fear as a mechanism of real and consistent change
- There should be a emphasis upon personal rights and wider responsibilities
- There should be a re statement of the need for multi agency co operation and effective partnership working
- There should be an external identification of the importance the Government views this, as reflected by significant increase in funding increases
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The cultural and behavioral issues around alcohol use and misuse

- Our service works towards an identified position, which states that it is imperative that the client is the individual who has the right to identify, that they have an alcohol related difficulty. Our role is to ensure that that client is in possession of all relevant facts and information about their situation, and then leading on from this to assist the client to make decisions which are relevant to them and not as an indication of our own conceptual biases. In essence we invite the client to appraise their lives within a 360 degree assessment, with the intention that all concerned are operating within enhanced awareness and respect.
- Harm reduction should be tailored to all section of society, within terms of a continuum of approaches which seek to address specific requirements of individuals whether they be commencing within their drinking career or are within the chronic stages. Any approach is only as affective as how useful it will be within the clinical setting.
- The research appears to suggest that the use of “brief interventions” for individuals who have limited concern over their consumption is as effective, if not more so than enhanced skill / cognitive behavioral approaches. However any intervention can only be as effective as the therapist concerned and the level of engagement created within the therapeutic relationship.
- The literature would appear to indicate that there has been little and or significant change within consumption levels within the last 20 years, and from a historical perspective society consumes significantly less that when viewed within context of the 17th and 18th centuries. This relative small change in overall consumption should be seen in context of the monumental changes within society within the same time frame.

- In addition we must recognize that while there has not been a significant statistical increase generally, there have been notable exceptions i.e. industrial restructuring, breakdown of the extended family, utilization of alcohol within suicidal behavior have indicated some escalation. The fact remains that the whole of society is at risk from alcohol consumption, and not all individuals who are involved in some form of trauma necessarily resort to using alcohol as a problem solving mechanism.
- While acknowledging the young as a major group, reference should also be made toward the elderly, especially within context of multiple uses of prescribed medication and alcohol as a sedative factor, socially deprived areas, individual ethnic groups, gay and lesbian groups, multiple substance misuse, individuals with a dual diagnosis. While recognizing the fact that we must address the needs of small sections of society this must not be at the expense of the rest of society, as they too require intervention.
- To a large extent it is a hypothetical situation that is not going to happen (the experiment in social engineering e.g. prohibition clearly indicates that) Alcohol is an integral facet of the majority of individuals within western culture, and as such is perceived as a natural right to be able to drink socially. Therefore the dynamic of how society socializes would change.
- It is arguable that English drinking cultural styles has been heavily linked to opening hours during the last 20 + years, this has led to the so called “last order” effect, where there is a sudden apparent need to purchase additional quantities of alcohol prior to the bell, whether or not this will change with flexible opening times, remains to be seen.
- Our service covers areas which are predominantly rural and mixed industrial / residential areas, and our experience is that cultural groups utilize differing types of alcohol
- In terms of age range usage, it is clear that usage commences within the 10 year age range, gradually escalating during adolescence and into young adulthood. It would appear that post 22 years there is further separation of drinking styles to either a plateau effect and or further escalation.
- The role and function of alcohol is perceived to change in terms of the individual drinker’s age range, from a mechanism of social support toward a problematic usage as primary problem solving mechanism
- The role of the media plays a significant impact on how society perceives alcohol usage; the PR men have clearly demonstrated their power by the sale of the so called alcopops, which have successfully introduced a whole new section of society into alcohol usage.
- Societies inter perception of alcohol and risk is dependant upon whether the individual is abstinent or under the influence of alcohol at the time. This has been proven in context of drink driving, in that the majority of individuals perceive drink driving to be wrong, yet the number who continues to do so, remain high.

Health: prevention, treatment and the impact on the NHS

- Definition of harmful drinking is said to be consumption above 60 units per week male and 30 units per week female.
- Physical , Psychological , social and environmental damage present identify problematic consumption
- The case for the cost benefit scenario has not been effective and or clear for agencies and or the general public, considerable more work need to be completed in order to get these messages across effectively
- The cost pressure from alcohol on the NHS, come from numerous factors, there is direct, as a result of direct consumption. There is secondary effect in terms of the overall effect on significant others of drinkers. There are factors related to drink driving, industrial accidents, general accidents, as a precursor to significant physical trauma.
- Statistical studies have indicated that increased cost would be a significant factor within alcohol consumption, indicating an increase of 50% + would have a real effect. There are a range of measures which include flexible opening times, reduced emphasis upon stronger alcohol content drinks, an attempt to break the stereotypes of masculinity and alcohol.
- There does not appear to be one specific measure, however the utilization of multi approaches could well facilitate results in reducing dependency levels.
- It is vital that all personnel receive a tired approach to training, ranging from basic awareness and escalating to specialist insight skill acquisition. The training should be run on multi profession levels to ensure a divers interpretation and understanding.
- Brief interventions are effective with specific clients, as identified above.
- To date no one method of intervention has been proved to be wholly effective, rather success is as a result of the cumulative effect of the therapeutic process.
- The effectiveness of drugs prevention and treatment has not necessarily been proved.
- There is no direct method of intervention as accidents occur as a result of the individual being intoxicated or as a result of someone else behaviors.
- With the publication of the Dual Diagnosis clinical guidelines, this makes it clear that there are considerable gaps in service delivery.

Crime, disorder and anti social behaviour : the effects on our surroundings and community

- There has been a wealth of research information which clearly links alcohol and criminality and anti social behavior, probation, health; social services have been providing this information for a prolonged period of time.
- There are clear links between habitual offenders and alcohol consumption this has been clearly evidenced within the Criminal Justice Liaison team.

- Alcohol is recognized as being the mechanism some individuals need in order to give themselves permission to carry out certain behaviors; however no community strategy is going to be effective without awareness of the community settings in which it is expected to operate within.
- To suggest that there are significant difference between urban and rural effects of alcohol is to miss the point, the effect of the alcohol can only be viewed within context of the individuals who are using that alcohol.
- The utilization of the “mainstreaming” concept has proved effective within North Notts and nationally, and system that requires multi agencies to effectively communicate has to be a step in the right direction.
- NO, any targeting approach must take notice of as many differing types within that community.
- The role of policing and reduction of alcohol related difficulties has been shown to be effective, however this will require significant increased resources if this is to be included in the action plan.
- An appreciation that the individual has rights not only to themselves, but to the wider community.
- That they need to be run 52 weeks a year, and not only at Christmas
- Zero tolerance, with all perpetrators being charged for assault.

The implications for vulnerable groups

- All children are at risk, as a direct result of parental drinking and or as a learned consequence for later life. The long term damage sustained is incalculable in terms of psychological damage.
- Individuals who are identified as being vulnerable eg elderly, physically damaged
- Service planning will only be effective when all key players within the field meet routinely to discuss priorities, and or then able to commit resources to those needs.
- Inter service rivalry and self protection, and a general lack of understanding of the cumulative role that each agency has in delivering the agenda for change
- No one service should hope and or expect to meet the overall needs of the client group, therefore it is appropriate that real service partnership agreements are developed in order to meet existing and potential need

Education and communication

- Any form of sustainable change can only commence from a position of awareness and insight into the complexities of a subject. From a position of

enhanced awareness it is then possible to move toward specific and or tailored information.

- The message is not really getting through to the target groups, other than an vague awareness of units, and there does not appear to be a interconnection within safer drinking levels.
- Training / awareness raising in respect of alcohol needs to start as early as possible within the format of life skills development
- Intense community education re alcohol
- It would be beneficial if all advertising for alcohol was stopped, as per the ban on advertising for cigarettes

The shape of the market and market based solutions

- The alcohol quantity should be clearly marked on glasses, and bottles with a strong message on the container re the potential effects of too much alcohol
- Coasters which can assist the individual to keep a record of their consumption during the episode of drinking.

Concluding Comments

There has been sufficient discussion over the if's and when's of any new strategy to address the issue of alcohol, it is now time that real and clear action was taken to move forward with a range of difficulties which far exceed issues pertaining to the usage of illegal drugs. Alcohol is a dangerous drug which can and does detrimentally affect all living organisms which it comes in contact with.

There is a vast body of knowledge and skill within alcohol agencies within England, they have delivered on commitment and motivation to our client group often in situations of real resource difficulties, it is now time to deliver in terms of resources which will enable the wider elements of our role to be addressed.

Our service would welcome an opportunity to discuss our comments with the department if such an opportunity where to arise. We would hope that our comments will assit you within your task

Yours truly,

K.J.Thorpe
Team Leader

The North Nottinghamshire Community Alcohol Team

