

Although alcohol is a legal drug, the general impact on individuals and wider society is as great as, if not greater than, many currently illegal ones. Thus the arguments for government involvement are broadly similar to those given in respect of the drug's agenda. Funding level should also be as great as those dedicated to tackling illegal drugs.

Government has a responsibility to provide the public with information about alcohol use/misuse, in order to educate and subsequently reduce health issues & community disruption.

Current government regulation of alcohol sale and consumption does not appear to be having the desired impact on managing the excesses of individuals which can lead to major problems including violent behaviour and health-related problems. Thus increased government regulation is required where individuals are unwilling to self-regulate.

Commercial interests need to recognise that the profit motive is not the only issue here. Business needs to put communities' welfare before profit at any cost.

## **Education**

The main principles might be safety and a responsible community for young people experimenting with alcohol and prevention work. Treatment for all adults developing or having already developed an alcohol misuse problem. A whole-system approach with many agencies involved in addressing alcohol from a number of different viewpoints, i.e. family support, youth work etc.

Aims should include the education of young people, including the whole community, in supporting the programme.

Whilst there are trends currently with young people issues, women issues and black minority ethnic groups, the lack of support for adult services, i.e. 18-55 years, means considerable investment in this core target group. In addition, a further emphasis on the 55+ groups is essential.

Peer pressure and not just in adolescents, plays a significant role in drinking and drinking patterns.

Earlier specialist intervention is necessary. Increase specialist prevention to work with other professionals as needed.

Specialist brief interventions work well, little evidence of generic interventions being of use e.g. GP's. Evidence would suggest that early identification by primary care specialists is dependent on the skill of the primary care worker involved in the screening.

There is minimal screening in place for identifying the risk of alcohol misuse and it should be an integral part of nurse training so that when nurses look at the brain/heart/bloods, they relate it to drug & alcohol use too.

Numerous studies show the links between alcohol and crime. Locally, youth offending services have focused heavily on drugs work and yet identified alcohol as a major issue. This is one area needing more work.

Re-offending because of alcohol abuse is less of a problem than with drug dependency but there is evidence of alcoholics persistently stealing from shops in order to acquire or fund the purchase of alcohol.

37% of all Arrest Referral clients report using alcohol.

It is right that anti-crime and anti-social behaviour initiatives need to be targeted on young people in the first instance but it is essential that we consider beyond this e.g. domestic violence issues. We should also consider that initiatives should be crime-prevention focused and initiatives to target older people to change behaviour now.

Domestic violence is one of the target areas to the Probation Service to work on. The link with alcohol abuse is clear.

The following groups can be considered highly vulnerable to the effects of alcohol misuse:

1. Children who live in situations where alcohol misuse by parents is present.
2. Young people who are susceptible to the negative influence of their peers.
3. Those vulnerable as a consequence of their own alcohol misuse
4. Children and young people who have come to the notice of the authorities in other capacities
5. School excludees and truants.
6. Young people drinking in unsafe environments due to current legislation.
7. Circumstances of neglect, physical abuse or domestic violence.

Those identified as most vulnerable would be perhaps those children and young people in families where alcohol misuse is already present. Those excluded from school, those currently playing truant from school, those children and young people without a clear adult role model, those young people out of education and unemployed or with mental health issues or who have faced domestic violence or family breakdown.

The enduring focus on illicit drug use often leaves the primary alcohol misuse problem ignored. The desire for joined up thinking and joined up working is often prevalent.

What gets in the way of joining-up services?

- We do - our pride, lethargy, lack of drive and commitment
- The structures and weight of bureaucracies, vested interests etc.
- Time and energy

Alcohol is perceived as relatively harmless in comparison to illegal drugs. Most people do not understand the 'unit' system and are unaware of their intake of alcohol. Alcohol education - minimal focus on alcohol. As always, when drugs and alcohol are combined, alcohol slips down the agenda as it is not as glamorous as Drugs!

We need to ensure that the message is not one of prohibition but is one of facilitating young people to make informed choices and to minimise harm because experimental drinking is likely to continue and adults involved should recognise that.

Some evidence suggests the parental role is influential however peer influence is stronger; parent's involvement should perhaps be through schools, community setting as well as individual involvement.