

30 May 2003

SU/DOH Consultation
Room 4-6
Admiralty Arch
The Mall
London SW1A 2WH

The Retreat is an independent not-for-profit psychiatric hospital. We provide a range of specialist mental health services including drug and alcohol services.

We welcome the opportunity to participate in the consultation process and fully support the implementation of a National Alcohol Harm Reduction Strategy. In compiling our comments/areas of concern we have consulted internally with both medical and nursing staff.

COMMENTS

- We believe that the three key factors which affect alcohol consumption are legislation, availability and price. Countries in which alcohol is very expensive have significantly lower problems both with alcohol misuse and associated health and social problems.
- Economically it is easy to identify the tax revenue which is raised by the government by alcohol, however, the cost to the country in other terms is much harder to identify eg health problems which may result some years later as a result of alcohol misuse. There are a significant number of incidents which may never be associated with alcohol eg falls, violence.
- The last few years has seen increasingly mixed messages through the media regarding the health benefits/risks of alcohol consumption. This leads to confusion and often important relevant messages are diluted or lost. Clear messages need to be given to enable people to make an informed choice.
- Media campaigns are increasingly targeted at younger people. We feel strongly that the implementation of legislation to end marketing to young people be considered.
- Current legislation and campaigns re drink driving have been effective but more needs to be done to reinforce NO drink when driving. Due to current limits people believe that after 1/3 drinks they are still able to drive.

- Consideration needs to be given to patterns of drinking in specific areas and potential associated health risks eg geographical areas usually where heavy manual work is involved, binge drinking on a weekend, areas where office workers are dominant more steady drinking patterns early evenings after work.

There have been suggestions of a high incidence of brain damage in people who binge drink.

- Significant north/south divide in types of drink, patterns of drink and response to marketing activity. Although there are said to be greater problems with alcohol misuse in the north there are very few facilities for detox.
- Brief interventions we find to be extremely effective, especially when used by staff in specific positions eg A & E nurses liaising with patients, staff in other units eg mental health units screening for alcohol problems on admission.
- Arrest referral schemes for drug users have proved to be effective. We suggest similar schemes for those who misuse alcohol and are involved in violence.
- People want evidence to back up government messages on sensible drinking eg why only 14 units for women, 21 for men? Why two alcohol free days as a minimum per week?
- Educational and preventative messages need to be targeted at children at an early stage.

If you would like further clarification on any of the above comments please do not hesitate to contact me:

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