



Briefing: Local implementation of whole population approaches

This briefing provides background for ADPs on 'whole population approaches' and gives suggestions for actions that ADPs can take at a local level to implement such whole population measures.

Alcohol harm in Scotland:

- 45% of men and 30% of women in Scotland regularly drink over the recommended limits.
- 1 in 2 people in Scotland report having been harmed by someone else's drinking.
- 300% increase in alcoholic liver disease mortality over the past 30 years in Scotland.
- 98 alcohol-related hospital admissions every day in Scotland.
- 21 deaths in Scotland every week where alcohol was the 'underlying cause.'
- 45% of prisoners in Scottish jails were drunk at the time of the offence.
- Alcohol cited as a contributory factor in 1 in 3 divorces.
- Up to 51,000 children in Scotland live with a potentially problematic drinker.

A whole population approach

Alcohol sold in Scotland today is more affordable, more available and more heavily marketed than at any time over the last 30 years. The result is that too many of us are drinking too much – not just the people who are dependant on alcohol. The more we drink, the more the health and social problems caused by alcohol increase. These don't just impact on the person who drinks – family, friends, colleagues and strangers can be harmed by someone else's alcohol use. Harmful drinking has become so normal and acceptable that the problems it causes to other people are often overlooked. That's why we need alcohol policies that focus on the whole population, not just problematic drinkers. If we all drink less, then harms will come down across the board. Drinking less is in all our interests.

Policy context

The specific outcome of the Scottish Government's alcohol strategy is to achieve a **reduction in overall alcohol consumption**. It has taken a number of steps to achieve this aim. Irresponsible promotions are now banned in on- and off-sales, and Challenge 25 has been introduced. The drink driving limit has been reduced from 80mg to 50mg in every 100ml of blood. The Scottish Government has also legislated to introduce a minimum unit price for alcohol, though this has not yet been introduced while it is being challenged in the courts by the alcohol industry. It is also bringing in new legislation to tighten up the Licensing (Scotland) Act 2005.

Effective alcohol policies

A World Health Organisation review of 32 alcohol strategies and interventions found that the **most effective alcohol policies** include:

- alcohol control measures (price and availability)
- drink-driving laws
- brief interventions for harmful and hazardous drinkers

The policies and approaches that were less likely to have direct positive effect on drinking patterns or problems include:

- education in schools
- public service announcements
- voluntary regulation by the alcohol industry

Alcohol and Drug Partnership action to support whole population approaches

'Upstream' work to reduce overall alcohol consumption in the population is the most effective way to begin to reduce current levels of health and social harm which require an unsustainable level of treatment and support services. While some whole population measures can only be addressed at national level, there are a variety of actions that ADPs can take at local level to support the implementation of evidence-based measures. Detailed below, under each of the core ADP outcomes, are examples of potential local outcomes, local indicators and activities that could be included within ADP delivery plans and associated strategy documents to ensure implementation and monitoring of whole population approaches at a local level:

Core ADP outcome: Local environment/Health

Possible local outcomes:

- Key stakeholders have increased capacity and ability to engage in the licensing policy and decision making process.
- Increased capacity within communities to address alcohol-related harm.
- Increased awareness and understanding amongst general public and key local stakeholders of the scale of alcohol harm and the need for evidence-based alcohol control policies.

Possible local indicators:

- Number of inputs provided to local licensing board and/or forum.
- Number of presentations/events for elected members and other local partners, such as Community Planning Partnership, on alcohol issues.
- Number of refusals of licensing applications based on submissions made.
- Number of ADP recommendations and guidance on local licensing policy enacted.
- Number of community groups/members engaged with and number of contacts.
- Change in capacity for off-sales/number of people that on-sales can serve.

Possible associated activity:

- Becoming active members of your local licensing forum/s.
- Collating and disseminating data on alcohol-related harm to local licensing forums, licensing boards, elected members and the community to assist in building a case for a reduction in the density of alcohol outlets.
- Using service user involvement data, opportunistic and commissioned research to supplement standard data with information on the impact of the environment on drinking patterns and behaviours.
- Inputting to the development of your local licensing board's licensing policy and overprovision statements (next statements due November 2016).
- Working with the community to identify/understand local alcohol issues and take effective action.

Core ADP outcome: Prevalence

Possible local outcomes:

- Increased capacity within communities to address alcohol-related harm.

Possible local indicators:

- Number of workplaces trained to develop and/or implement workplace alcohol policy.
- Number of ABIs delivered.

Possible associated activity:

- Continuing to deliver and evaluate alcohol brief interventions as outlined in NHS Board Local Delivery Plan Guidance.
- Providing support to employers to adopt workplace alcohol policies or to increase staff's knowledge and understanding of alcohol issues.

Core ADP outcome: Services/Recovery

Possible local outcomes:

- Policy and service development are better informed by evidence of alcohol's harm to others in Scotland.
- Treatment and recovery services are better informed by the impact of the local environment on alcohol recovery.

Possible local indicators:

- Number of practitioners accessing learning and development opportunities and resources.
- Number of screenings for harm to others (including families) carried out by alcohol treatment and recovery services.

Possible associated activity:

- Providing training for generic and specialist services including whole population approaches and alcohol's harm to others.

Core ADP outcome: Community safety

Possible local outcomes:

- Policy and service development are better informed by evidence of alcohol's harm to others.

Possible local indicators:

- Extent of availability of data on the range/magnitude of alcohol's harm to people other than the drinker.
- Number of alcohol-related noise complaints made to environmental health.
- Number of alcohol-related house fires.

Possible associated activity:

- Gathering data on alcohol's harm to people other than the drinker.

Core ADP outcome: Families

Possible associated local outcomes:

- Practitioners have increased knowledge, skills and confidence in techniques and practice to engage children and young people on alcohol issues.

Possible local indicators:

- Number of support services available and used by individuals and families affected by other people's drinking.
- Number of practitioners accessing learning and development opportunities.
- Number of nurseries and schools using Oh Lila and Rory resources.

Possible associated activity:

- Assessing and mapping the demand and availability of services to support those affected by another person's drinking.
- Taking a 'whole family' approach when planning alcohol treatment and recovery services.
- Promoting the availability of support services for people affected by problematic alcohol use including children affected by a family member's drinking.
- Supporting the training of practitioners and roll out of resources aimed at supporting children affected by parental alcohol misuse.

Contact us

If you would like any more information or advice on how to best to include whole population interventions and approaches in your delivery plans, please contact **Gemma Crompton** by emailing gemma.crompton@alcohol-focus-scotland.org.uk or telephoning 0141 572 6700.

For the latest alcohol information please visit our website: www.alcohol-focus-scotland.org.uk