

A large, solid green decorative shape is positioned in the upper half of the slide. It is a wide, curved band that starts as a thin line on the left and tapers to a point on the right, creating a sense of movement or a stylized arrow.

# Health harms from Alcohol

Crispin Acton

14<sup>th</sup> December 2010

## We still face major challenges in preventing illnesses which are rooted in people's lifestyle choices

- Lifestyle challenges such as alcohol misuse, smoking and obesity cost the NHS at least £9.4bn annually (of £100bn budget), society £37.3bn annually and cause 140,000 preventable deaths each year

Though rates are dropping, 8.5m (21%) of the general population still **smoke**; half of these are routine and manual workers

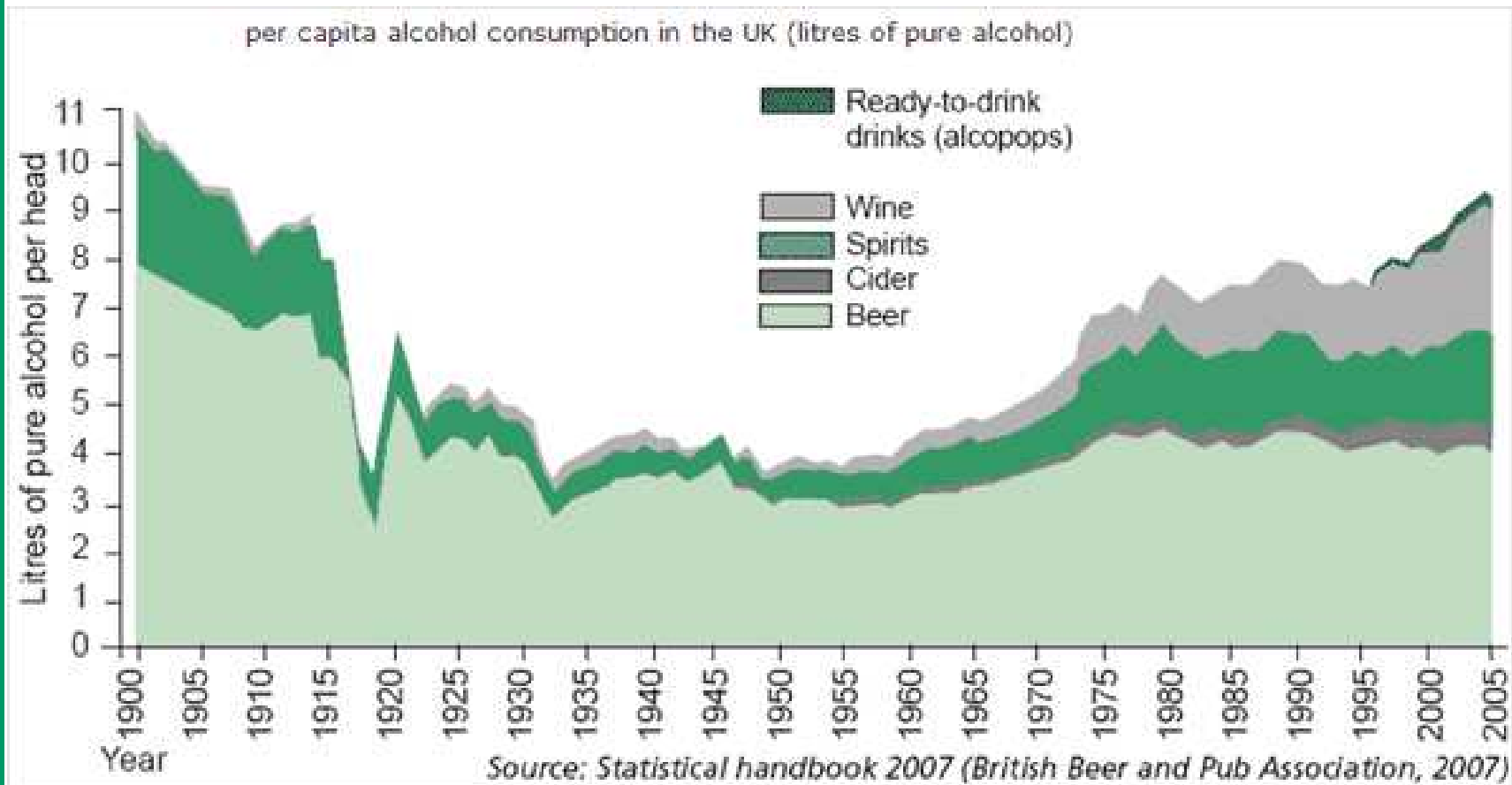
10m are **drinking alcohol** at increasing risk levels; 2.5m drinking at twice recommended levels; 1.6m clinically dependent on alcohol

30m (62%) of the adult population are **overweight or obese**; by 5, 22% of children are overweight or obese, rising to 33% by age 11

An estimated 330,000 **problem drug users**, 209,000 of which are in treatment

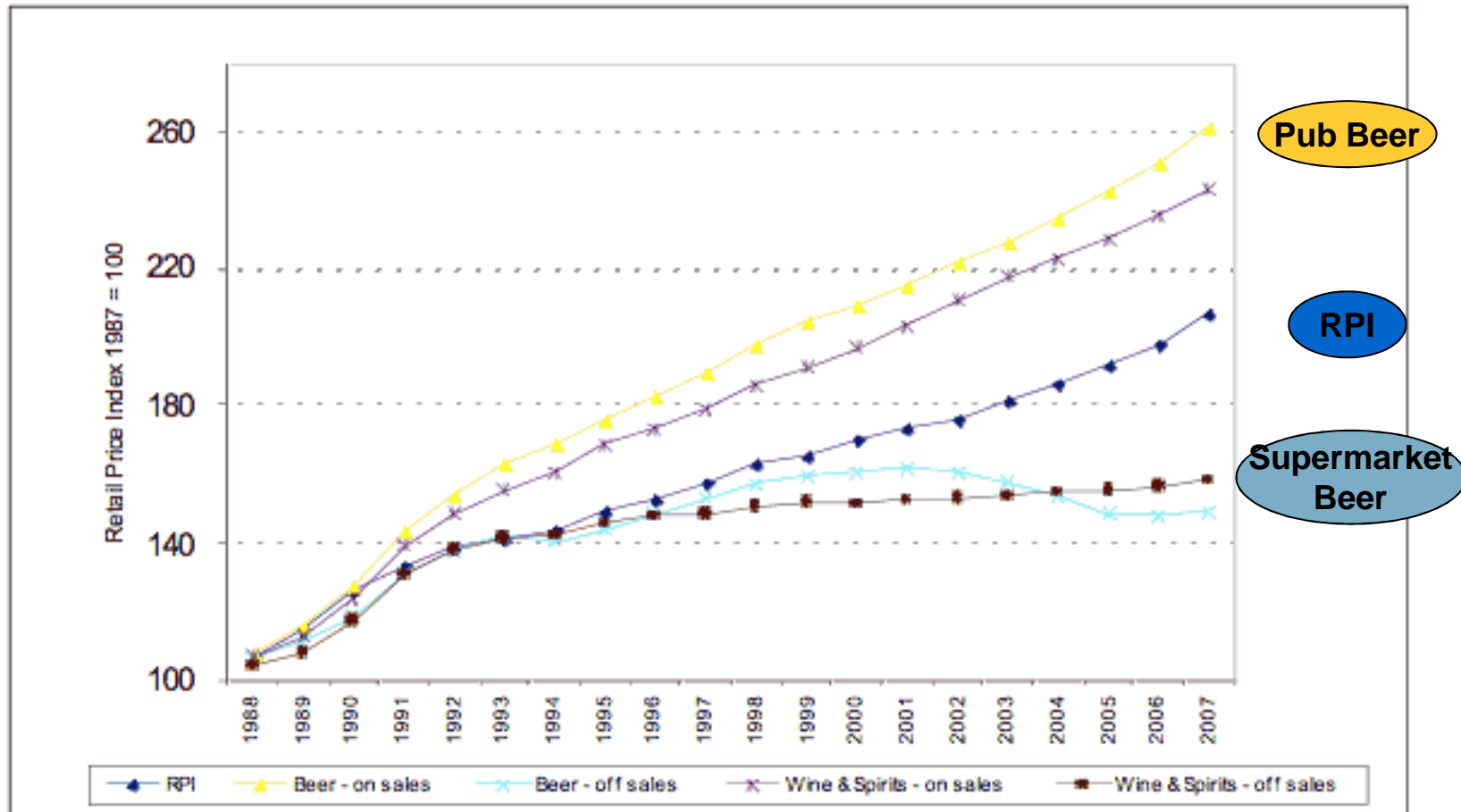
Only 40% of men and 28% of women achieve recommended weekly levels of **physical activity**;

# Alcohol consumption can change dramatically over time – and has risen sharply since the war



# Alcohol has become a lot more affordable (and available) – at least in the supermarket, if not in the pub...

Price of alcohol over time (indexed, 1988 = 100)



## Drinking above recommended levels increases the risk of heart disease, stroke, cancer and liver disease (amongst others...)

### UK government advice from the Chief Medical officers is:

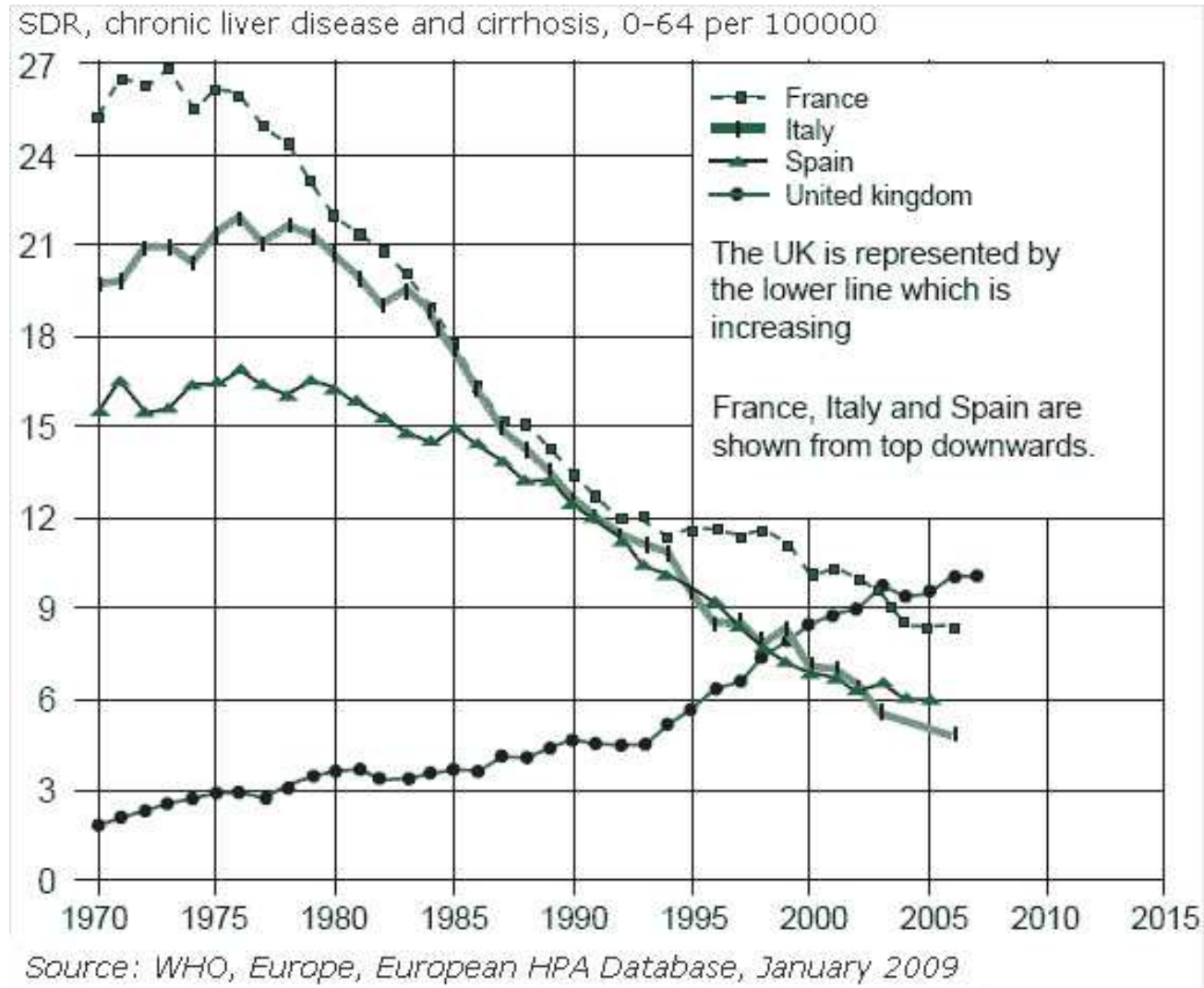
- Adults should not regularly drink more than:
  - 3-4 units a day if you're a man
  - 2-3 units a day if you're a woman

### Harms increase according to drinking levels\*

Area	Disease	Increasing risk		Higher risk	
		Men	Women	Men	Women
Heart	High blood pressure	1.8	1.3	4.1	2.0
	Irregular heartbeat			2.2	2.2
	Coronary heart disease			1.7	1.3
Stroke	Ischaemic	1.1	0.8	3.0	2.7
	Haemorrhagic	1.8	1.4	3.6	3.3
Cancer	Mouth	2.5	1.7	5.4	5.4
	Oesophagus	1.9	1.4	4.4	4.4
	Larynx	1.8	1.2	4.9	4.9
	Breast		1.2		1.6
Liver	Cirrhosis	2.0	1.7	13.0	13.0
	Cancer	1.3	1.2	3.6	3.6

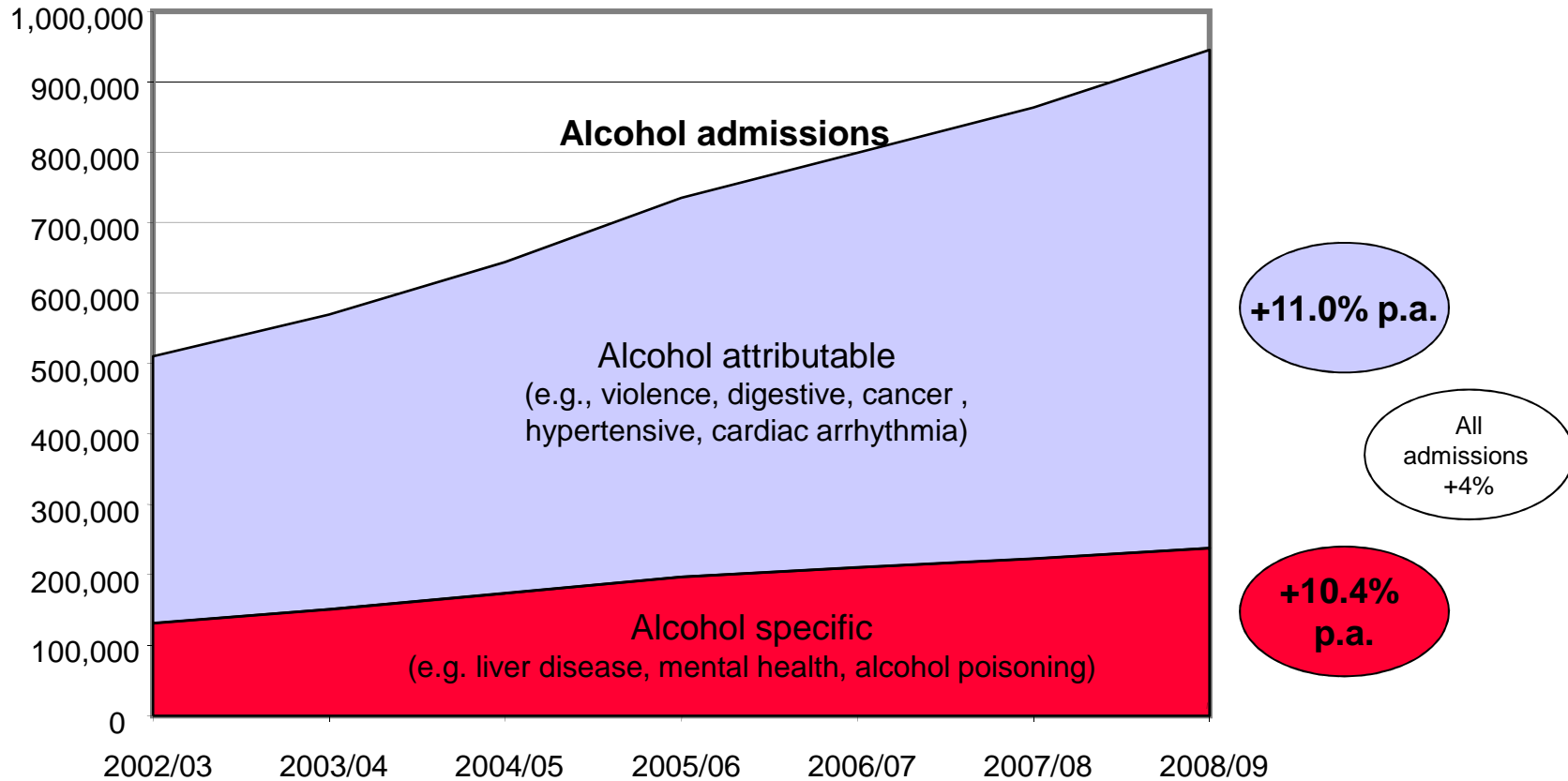
\* The table has numerous footnotes which there is not space to include

## Meaning the UK rates of liver disease are increasing – and are now worse than France...



# ...and the number of alcohol related hospital admission is rising faster than the average

Alcohol Related Hospital Admissions (ARHAs), by cause, 2002/3 – 2007/8



£2.7bn cost to NHS

# So what do we know about who drinks too much?

## Core

0.46% adults;  
0.69% chronic, 0.93% acute admissions



10 Older spirit drinkers

4.04% adults;  
6.41% chronic, 8.38% acute admissions



12 Unhealthy drinkers

2.5% adults;  
3.35% chronic, 5.49% acute admissions



13 Struggling drinkers

## Secondary

15.27% adults;  
18.51% chronic, 18.53% acute admissions



8  
Drinking man on the street

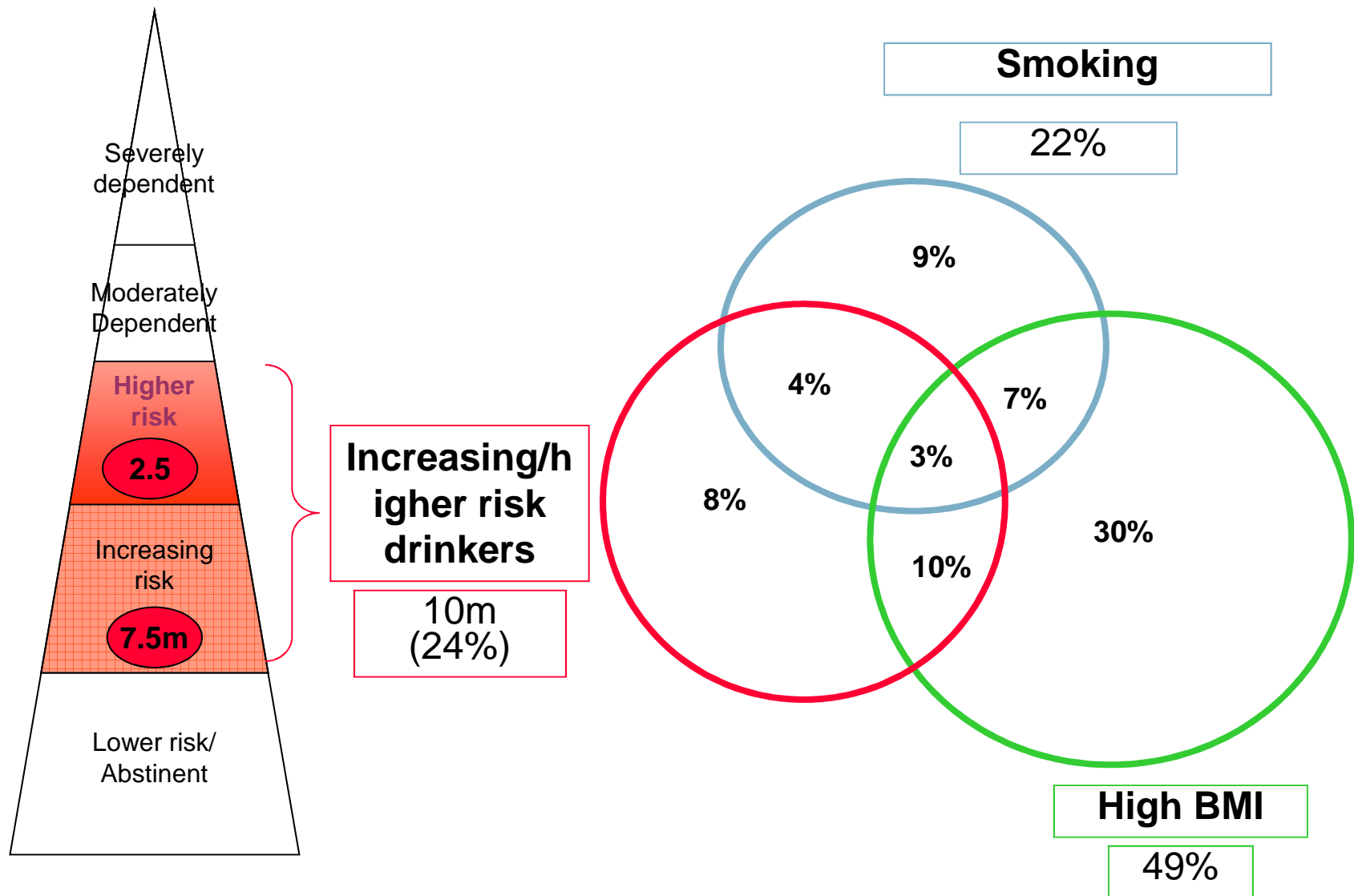
8.49% adults;  
9.18% chronic, 14.11% acute admissions



9 Drinkers with children

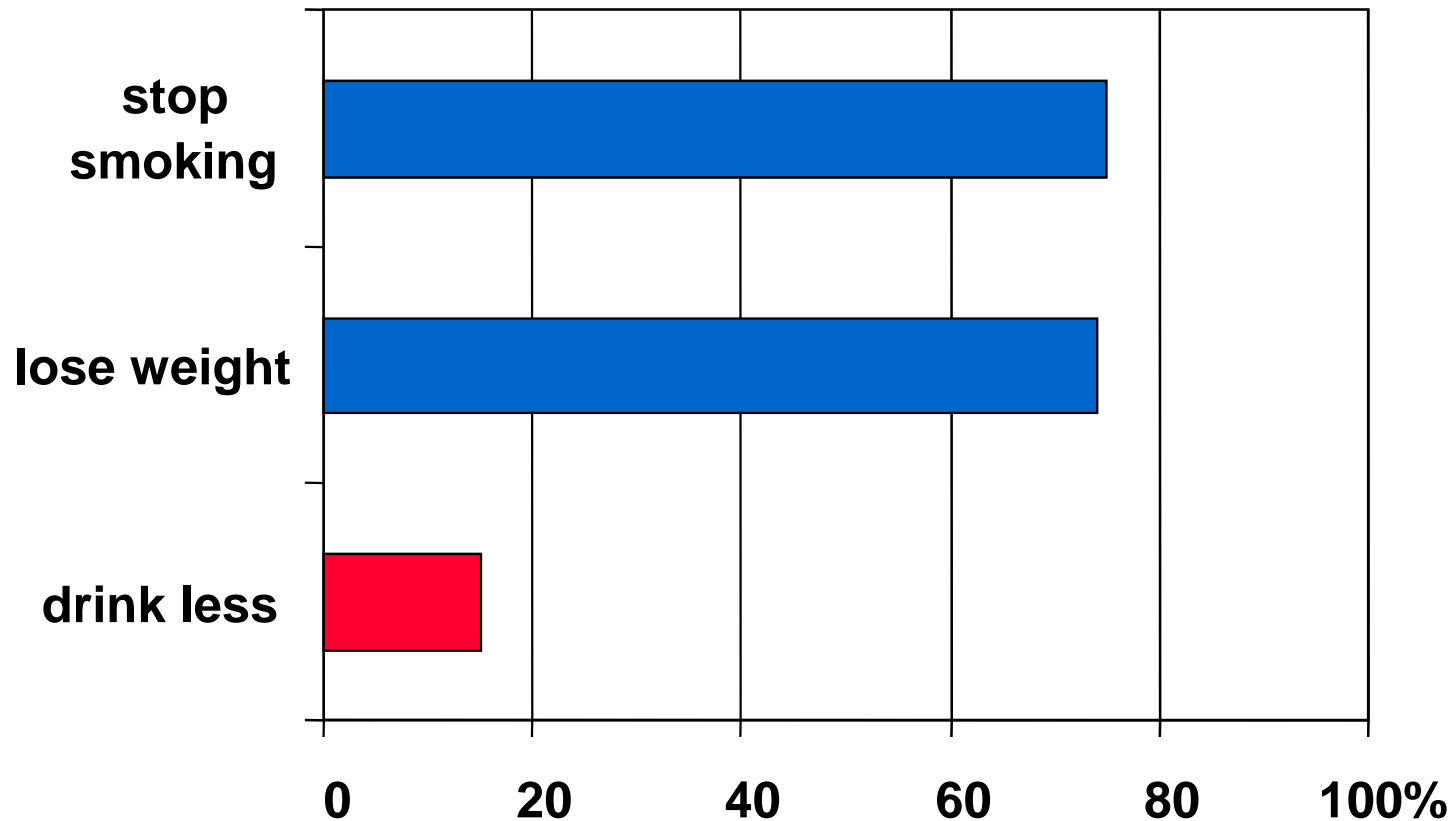


# We also know that alcohol is not many people only vice...



## But not always a popular subject with people!

*Proportion expressing preference to change behaviour*



## We know alcohol misuse is also costly to society

- Up to 35% of all A&E attendance and ambulance costs may be alcohol-related.
  - Up to 70% on Friday and Saturday nights
  
- Alcohol implicated in
  - 6,000 babies born p.a. with Foetal Alcohol Spectrum disorder
  - Over 7,000 women miscarrying
  - Up to 1.3m children affected at home
  - c. 25% of child protection cases
  - 39,000 reports of serious sexual assaults
  
- Alcohol responsible for 9-30,000 deaths a year
  
- Societal cost of alcohol £8-13bn
  - Mainly policing

## So what do we do about it?

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- Where do you think government should respond on the “policy ladder of intervention?”
- Who should we target?
- What policies might be effective?
- What **one** bit of advice would you give to **your** Minister?

# Policy intervention ladder - alcohol

Increasing intervention

Policy intervention	Example policy
• Do nothing/ monitor	• Collect surveys of drinking habits
• Enable choice	• Offer common sizes of drink measures in pubs
• Guide choices through incentives	• Subsidise sales of non-alcohol products
• Guide choices through changing defaults	• Make default serving in pubs a half-pint
• Guide choice through disincentives	• Charge for a license to serve alcohol
• Restrict choice	• Forbid purchase of alcohol after midnight
• Eliminate choice	• Make possession and/or distribution of alcohol illegal

Alcohol

## MINDSPACE

- Messenger:** we are heavily influenced by who communicates information
- Incentives:** our responses to incentives are shaped by predictable mental shortcuts, such as strongly avoiding losses
- Norms:** we are strongly influenced by what others do
- Defaults:** we 'go with the flow' of pre-set options
- Salience:** our attention is drawn to what is novel and seems relevant to us
- Priming:** our acts are often influenced by sub-conscious cues
- Affect:** our emotional associations can powerfully shape our actions
- Commitments:** we seek to be consistent with our public promises, and reciprocate acts
- Ego:** we act in ways that make us feel better about ourselves

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## On alcohol, *the Coalition: our programme for government* said:

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- We will ban the sale of alcohol below cost price.
- We will review alcohol taxation and pricing to ensure it tackles binge drinking without unfairly penalising responsible drinkers, pubs and important local industries.
- We will overhaul the Licensing Act to give local authorities and the police much stronger powers to remove licences from, or refuse to grant licences to, any premises that are causing problems.



# Policy intervention ladder - Alcohol

Increasing intervention

	Product/ packaging	Pricing/ promotion	Licensing/ Availability	Advertising/ Marketing
<ul style="list-style-type: none"> <li>• Do nothing/ monitor</li> <li>• Enable choice</li> </ul>	<ul style="list-style-type: none"> <li>• [do nothing]</li> <li>• <b>Clear labels with alcohol content and guidelines</b></li> <li>• Calorie content displayed</li> <li>• <b>Permit alcohol reduction technologies</b></li> <li>• <b>Offer lower ABV products</b></li> </ul>	<ul style="list-style-type: none"> <li>• No restrictions</li> <li>• <b>Tax purely as revenue raising</b></li> </ul>	<ul style="list-style-type: none"> <li>• [do nothing]</li> <li>• <b>Water and soft drinks available as alternatives</b></li> <li>• <b>Standard sizes and measures</b></li> </ul>	<ul style="list-style-type: none"> <li>• [no restrictions]</li> <li>• <b>No misleading adverts</b></li> <li>• <b>No targeting young people</b></li> <li>• Freedom to market on low strength</li> </ul>
<ul style="list-style-type: none"> <li>• Guide choices through changing defaults</li> <li>• Guide choices through incentives</li> </ul>	<ul style="list-style-type: none"> <li>• <b>Encourage lower risk consumption</b></li> <li>• Encourage eating with drinking</li> <li>• Promote role models/ parental responsibility</li> <li>• <b>Promote local partnerships to tackle alcohol problems</b></li> </ul>	<ul style="list-style-type: none"> <li>• Lower tax on lower strength, higher on high strength, rising scale on wine</li> <li>• Healthy drink discounts</li> <li>• <b>Promote lower alcohol alternatives</b></li> </ul>	<ul style="list-style-type: none"> <li>• <b>Small sizes as standard</b></li> <li>• Cheaper soft drinks always available</li> <li>• <b>Soft drinks “happy hours”</b></li> <li>• Licensing regime for responsible retailers (e.g. training)</li> <li>• Supermarket separate aisles/counters</li> <li>• <b>Address alcohol in the workplace</b></li> </ul>	<ul style="list-style-type: none"> <li>• <b>Encourage promotion of low-alcohol alternatives</b></li> <li>• <b>Use of social norms</b></li> <li>• <b>Unit awareness in on- and off-trade</b></li> <li>• <b>“Responsible” pricing promotions with prominent extra consumer info</b></li> <li>• Ban sponsorship of sports where attracts young people</li> <li>• Ban cinema advertising for U18</li> </ul>
<ul style="list-style-type: none"> <li>• Guide choice through disincentives</li> <li>• Restrict choice</li> </ul>	<ul style="list-style-type: none"> <li>• Labels includes “alcohol causes cancer” style messaging</li> <li>• Ban beers/ wine above certain strength/size</li> </ul>	<ul style="list-style-type: none"> <li>• Tax eliminates externalities</li> <li>• Ban bulk discounts</li> <li>• <b>Impose floor price (e.g. ban below costs sales)</b></li> <li>• <b>Tax as means of health harm reduction</b></li> <li>• People charged for NHS costs</li> </ul>	<ul style="list-style-type: none"> <li>• <b>Harsher licensing conditions, including opening hours</b></li> <li>• Operate govt retail monopoly</li> <li>• Civil liability for drink driving, or personal damage where customers were served while drunk</li> </ul>	<ul style="list-style-type: none"> <li>• Restrict advertising of products [c.f. France]</li> </ul>
<ul style="list-style-type: none"> <li>• Eliminate choice</li> </ul>	<ul style="list-style-type: none"> <li>• Ban sales of alcohol or related products</li> </ul>		<ul style="list-style-type: none"> <li>• Restrict sales to U18s</li> </ul>	

Key: *Can do already* *Policy for new government*

# A “Responsibility Deal” with industry

## What is it?

- Voluntary deal for all partners covering food, alcohol & exercise

## What might it cover?

- Working together to tackle alcohol misuse
  - Local partnership models, Best Bar None, Purple flag, CAPs, etc
- Education and Information for the consumer
  - Units awareness in the on-trade
  - Units and guidelines awareness in the off-trade
- Alcohol labelling and packaging
  - Units, drinking in pregnancy warning, guideline drinking levels
- Reformulation and repositioning of alcohol drinks products
  - Lower strength
  - Smaller sizes
- Alcohol in the workplace
- Responsible retailing
  - Off-trade code?
- Advertising and marketing
  - Close gaps in self-regulatory system

# The new approach to public health in England

**Identify, advise and treat rapidly and effectively those at risk**

- Identification and Brief advice (a short conversation to reducing drinking – 1 in 8 effective)
- Providing incentives for GPs and other staff to deliver this advice
- Improving specialist treatment services
- National and regional support
- Alcohol learning centre

**Ensure proper prioritisation and alignment of government to tackle harm**

- Local budgets for alcohol to Directors of Public Health in local government
- Closer alignment with drug treatment to drive synergies
- Outcomes framework indicator for the Public Health Service on alcohol related hospital admissions
- Aligning commissioning rewards with outcomes (Health premium)
- Introduction of payment by results