

# Alcohol: policies to reduce alcohol-related harm in England

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### Introduction

Nurses are faced with the consequences of alcohol misuse every day - from dealing with violent and aggressive patients in A&E to caring for people suffering from long term poor health as a result of sustained alcohol abuse. All nurses also have a role in health promotion to support the population to make healthier choices.

## **RCN Policy Position**

RCN's prevention work is underpinned by the principle that we should empower individuals with the information they need to understand the impact of alcohol misuse and make healthier lifestyle choices.

However, we also believe that more can be done to change the wider environment so that the healthy choice is the easy choice. Sometimes this requires regulation from the government. We believe the government must:

- Reduce the availability of cheap alcohol with a meaningful minimum per unit price
- Legislate to prevent the alcohol industry from undertaking promotional activities which encourage excessive consumption or target children
- Legislate for the mandatory labelling of all alcoholic drinks with unit and health information in a consistent format
- Ensure public information and education about alcohol is based on independent scientific recommendations and provided by bodies wholly independent of the alcohol industry
- Introduce a reduced drink drive limit of 50mg per 100 millilitres of blood alcohol content

### Alcohol consumption and its impact

Excessive alcohol consumption is a major source of morbidity and premature death in the UK. Examples illustrating the scale of alcohol-related harm in the UK include:

- The number of alcohol-related hospital admissions topped one million in 2009-10, a 12% increase from the previous year<sup>i</sup>
- The annual cost to the NHS is estimated at £2.7 billion<sup>ii</sup>
- With the additional costs of crime and disorder, and loss of work and productivity, alcohol misuse is estimated to cost £25.1billion a year<sup>iii</sup>.

### **Recent government policy**

The previous government attempted to minimise harms caused by poor practice in 'on trade' premises such as bars and nightclubs. A mandatory code of practice for alcohol retailers came into force in 2010<sup>iv</sup>, banning irresponsible alcohol promotions and competitions, obliging retailers to provide free drinking water, compelling retailers to offer smaller measures and requiring them to have proof of age policies.

The coalition government in Westminster has sought to frame much of the debate about alcohol harm in the context of law and order and anti-social behaviour. For example the Police Reform and Social Responsibility Act 2011 was recently passed to enable local authorities to take a tougher stance on premises which break licensing rules.



The coalition government has also placed strong emphasis on the Public Health Responsibility Deal<sup>vi</sup> as a vehicle for the alcohol industry to sign up to a number of pledges to reduce alcohol-related harm. This process has been contentious, with many of the public health interest groups refusing to sign up. It was claimed the pledges were not evidence based, that it was not clear how they would be evaluated and consideration of critical levers such as the price of alcohol were excluded<sup>vii</sup>.

In June 2010 Sir Peter North published the final report of his review into potential changes to the legislative regime for drink and drug driving, making the case for a reduction in the alcohol driving limit to 50mg per 100mililitres of blood. However, the Department for Transport did not adopt this recommendation viii.

### Background: RCN's position on alcohol

In 2009 RCN conducted a joint survey of public sector workers with Alcohol Concern, the Royal College of Physicians and the Faculty of Public Health<sup>ix</sup>. Results included:

- 88% said that funding of staff and services had not kept up with demand
- 81% believed that if alcohol was more expensive there would be a decrease in consumption
- 90% believed that all alcohol products should be labelled with unit information and sensible drinking advice

RCN supported the introduction of the alcohol mandatory code which came into force in 2010, but argued that it did not go far enough – for example in tackling the proliferation of very cheap alcohol available from the 'off trade' (supermarkets and off licenses). Researchers at Sheffield University carried out a review of the evidence linking price and promotion of alcohol to patterns of consumption<sup>x</sup> and produced a model to demonstrate the impact of potential policy changes. They found strong evidence to suggest that price increases have a significant effect in reducing demand for alcohol; and that young drinkers, binge drinkers and harmful drinkers tend to choose cheaper drinks. A minimum unit price would therefore offer a proportionate response to reduce alcohol health harms. It is estimated that a minimum price of 50p would save over 3,000 lives a year, whilst a 40p minimum price would save 1,100 a year.

The RCN has also called on the government to make the appropriate investment in the nursing workforce. We have demonstrated that alcohol specialist nurses (or alcohol liaison nurses) can deliver cost effective interventions to reduce the impact of alcohol misuse<sup>xi</sup>. We have also shown the role the nursing workforce has in preventing alcohol misuse, and called for investment in the public health workforce such as school nurses and occupational health nurses to work with the adult population.

### Recent RCN policy work: further reading

**Licensing law**: Royal College of Nursing response to Rebalancing the Licensing Act – a consultation on empowering individuals, families and local communities to shape and determine local licensing

http://www.rcn.org.uk/ data/assets/pdf\_file/0006/339270/RCN\_response\_to\_Rebala\_ncing\_the\_licensing\_Act\_Sept2010.pdf



**Unit and health labelling**: Royal College of Nursing response to the joint consultation on options for improving information on the labels of alcoholic drinks to support consumers to make healthier choices <a href="http://goo.gl/q4nOE">http://goo.gl/q4nOE</a>

**Alcohol promotions**: Consultation on product placement on television: Royal College of Nursing submission <a href="http://goo.gl/qZeVU">http://goo.gl/qZeVU</a>

### References

http://www.ic.nhs.uk/pubs/alcohol11

http://www.rcn.org.uk/newsevents/news/article/uk/government action needed to reduce harmful drinking say public sector professionals

Department of Health (2008), The Cost of Alcohol Harm to the NHS in England

Revised from 2003 estimates by the Cabinet Office Strategy Unit in *Alcohol Misuse: how much does it cost.* See <a href="http://www.nao.org.uk/publications/0708/reducing\_alcohol\_harm.aspx">http://www.nao.org.uk/publications/0708/reducing\_alcohol\_harm.aspx</a>

http://www.parliament.uk/business/news/2010/01/statement-new-code-of-practice-for-alcohol-retailers/

http://services.parliament.uk/bills/2010-11/policereformandsocialresponsibility.html

http://www.dh.gov.uk/en/Publichealth/Publichealthresponsibilitydeal/index.htm

vii http://www.rcplondon.ac.uk/policy/responding-nhs-reform/public-health-responsibility-deal

viii http://www.dft.gov.uk/news/press-releases/dft-press-20110321

x http://www.shef.ac.uk/scharr/sections/ph/research/alpol/research/sapm

<sup>&</sup>lt;sup>xi</sup>Mason C (2009) *Improving services for people with alcohol-related problems*, Nursing Standard May 27 – June 2: 23(38) 35-40