

alcohol

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ALERT

**Alcohol Harm
Reduction Strategy
For England**



**National Alcohol Strategy:
To reduce harm or increase sales?**

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The Alcohol Harm Reduction Strategy for England was finally published on 15th March 2004. Joy that the Strategy, eagerly awaited since 1998 was finally appearing soon gave way to dismay when it became obvious that the wait had not been worthwhile. As expected, the Strategy focuses strongly, - some argue disproportionately – on youthful ‘binge drinking’.

Launching the Strategy, Public health minister Melanie Johnson said:

“The measures in this strategy will help us tackle problems at source - for example, around 70 per cent of weekend accident and emergency admissions are alcohol-related. This document is an important contribution to the government’s wider debate on public health - Choosing Health? - that will lead to a white paper later this year. We will further develop the approach to alcohol treatment and support services as part of the consultation on this white paper.”

Hazel Blears, minister for crime reduction, policing and community safety said:

“We have consulted widely on this strategy and identified that a lot of good practice already exists. In many areas the police, local councils and the drinks industry are working together to combat underage drinking, antisocial behaviour and drink-fuelled violence. Our strategy will widen this approach so that people are more aware of the dangers of excessive drinking, that advertising doesn’t promote irresponsible drinking, and violent behaviour in our city centres is reduced.”

Predictably, immediate reactions to the Strategy were mixed but generally guarded.

The BMA’s Head of Science and Ethics, Dr Vivienne Nathanson said:

“It is very good news that the Government is taking the issue of alcohol abuse seriously. What we need now is concrete action to tackle the crisis. The

BMA would like to see clear warnings and labelling on alcohol products as well as a ban on alcohol advertising.

“It is a tragedy”, she continued, “that doctors are starting to see serious liver disease in young people because of alcohol. It is also very expensive for the NHS. Young people must be made aware that having fun does not have to mean getting drunk three or four times a week. Alcohol is a poison. Too much in one go can be lethal, too much week after week kills you more slowly.”

Professor Ian Gilmore of the Royal College of Physicians also gave a less than wholehearted response.

“I am pleased the strategy has been published,” Professor Gilmore said, “but there is some disappointment that it appears to be much stronger on issues of law and order than on health.”

Professor Gilmore also criticised the report’s emphasis on further research rather than action.

“The report talks about audits and pilots but we believe there is already more than enough evidence for action. It is stronger on cleaning up the streets than on preventing physical harm.”

Eric Appleby, chief executive of Alcohol Concern said that ministers deserved praise for tackling an issue that had proved too hot to handle for past governments, and he also welcomed the review of alcohol advertising and the promise of targeted campaigns.

“But”, he continued, “we must boost treatment and counselling services for people

strategy



experiencing drink problems now. The recent Commission on Alcohol Services said these services needed urgent help to cope. We also expect the drinks trade to live up to their obligations on drinks promotions.”

Lord Adebowale, chief executive of social care charity Turning Point:

“We welcome measures around education, preventative work and requirements on the drinks industry. But these are just part of the puzzle, and the biggest piece is missing; tackling the lack of treatment services for the 3.8 million people who are dependent drinkers. The document gives little hope of speedier, effective treatment for people with alcohol dependence, and

is small comfort for the families of the 13 people who will die today, as every day, as a direct result of alcohol misuse.”

Others were even less generous in their appraisal. Professor Christine Godfrey, one of the country’s leading health economists and who was an adviser to the Strategy Unit which prepared the analysis on which the Strategy is supposedly based, described it as a huge disappointment and little more than a sop to the alcohol industry.

It was hardly surprising therefore that industry bodies welcomed the Strategy rather more enthusiastically than did the

alcohol abuse agencies. Sources connected to the alcohol industry confirmed to Alert that the industry’s main reaction was one of relief that it had got away so lightly, particularly as it emerged that the Home Secretary had been pressing for far tougher measures than any to be found in the Strategy. However, the possibility that tougher measures will be introduced at some point in the future cannot be entirely discounted.

Speaking for public consumption, Rob Hayward, chief executive of the British Beer & Pub Association said:

“The government has laid down a challenge to the industry to promote responsible drinking. We are determined to build on good practice that exists. At the heart of this strategy is recognition that 90 per cent of the population enjoy alcohol as part of their social lives without harm, but we recognise the need for action to tackle a minority who misuse alcohol and cause anti-social behaviour. This strategy is a key cornerstone in that campaign.”

Jean Coussins, chief executive of the alcohol industry’s Portman Group said:

“There are serious and growing problems of alcohol misuse and the industry must continue to play its part in tackling these. I am pleased that the government has recognised that it can build on the good practice already in place amongst leading companies within the industry. The industry must do even more to deliver against the tough targets set out in the strategy, or face government action.”

The frequent references to a crackdown on binge drinking in the media at the time of the announcement of the Alcohol Harm Reduction Strategy was either the result of cynical spin or lazy journalism. The only real





crackdown was on the Home Secretary who wanted measures which other ministers had already ruled out during the passage through Parliament of the Licensing Act 2003 – a measure which many believe will in itself exacerbate the problems of binge drinking.

The day before the launch of the Strategy, the Sunday Times reported that in a private letter sent on February 6, Home Secretary David Blunkett warned the Prime Minister that the *“situation at night in our town and city centres raises serious concerns about the control of alcohol-related crime and disorder”*.

The newspaper reported that research commissioned by the Home Office had uncovered a sharp rise in violent assaults linked to drink and a significant

increase in people being attacked by drunken strangers. Moreover, a senior Home Office official was quoted as saying that it was now *“more or less impossible”* for the police to enforce the law in city centres. Leaked minutes of a meeting record Leigh Lewis, a permanent secretary at the Home Office, saying that alcohol-related violence was no longer confined to the larger city centres but was now evident in smaller towns. He also explained that it now started earlier in the week. The meeting was told the surge in violent crime followed the alcohol industry changing its approach to marketing with *“irresponsible sales promotions”*.

The consequences for the police were disclosed at a



meeting on February 9, chaired by Ellie Roy, director of crime reduction.

Roy warned: *“The high number of licensed premises in city centres makes it more or less impossible for the police to effectively enforce the licensing laws, especially given their other crime and terrorism priorities.”*

Those who followed the passage through Parliament of the new Licensing Act will recall that such arguments were put forward by various opposition spokesmen and were repeatedly dismissed by Government ministers, particularly the principal Government spokesman in the House of Lords, Baroness Blackstone. In one notable exchange with Lord Avebury who had asked her to comment on the statistics of violent crime in areas with a concentration of late night drinking establishments, Baroness Blackstone explained: *“All my training as a social scientist would lead me to be extremely cautious about making such a deduction. There are many causes of violent crime and you cannot necessarily assume that because there is a late night entertainment culture, and the drinking associated with it, that is the cause of violent crime.”*

Baroness Blackstone’s expertise as a social scientist was perhaps less evident in her reply to Lord Avebury than was her obligation to follow the official line, however implausible, of the Department of Culture, Media and Sport, a Department which appears to believe that its responsibilities to the public weal are best discharged by acting as the agent of the alcohol industry lobby which has been campaigning for de-regulation of the liquor licensing system.

The Sunday Times reported that Mr Blunkett wants to see:

- Powers to fix the prices of alcoholic drinks in city centres to help to curb excessive drinking.
- A compulsory annual levy on pubs and clubs of an average £10,000 a year each to pay for up to 30,000 extra police officers.
- Local councils to be

feature is that they are explicitly ruled out by the Department of Culture, Media and Sport's new Licensing Act.

It is understood that the Home Secretary fought to delay the introduction of the Licensing Act. However, a week after the Alcohol Strategy appeared, the Government published the guidance on the Act, completing the next major

premises licensed for late night drinking and the increasing problems of crime and disorder, said: *"While there is joy at any sinner who repenteth, I'm afraid it's too late. There is no possibility of another Licensing Act being introduced before the last one has even come into force ."*

24-hour drinking 'will fuel crime'

Allowing pubs and clubs to open all hours could lead to a rise in violent crime, disorder and nuisance, according to a report produced by the Metropolitan Police. The report, the Preliminary Assessment Of The Impact Of The Licensing Act 2003 On The Metropolitan Police Service, produced by the Clubs and Vice Operational Command Unit, flatly contradicts the claims made by the Department of Culture, Media and Sport for the new Licensing Act.

The Police report forecasts more drink-driving because of the lack of public transport late at night, a boom in illegal cabs and taxi touts, a growth in street vendors operating in the black economy and greater disturbance to residents.

Varied closing hours, it says, will encourage people to go out later and force the police to patrol trouble spots throughout the night.

However, while the Home Office is emphasising the need to contain excessive drinking, the Department for Culture, Media and Sport is pressing ahead with its plans for 24 hour licensing.

The Met's report is concerned with London, especially the West End, but police chiefs across the country are thought to share its



instructed to refuse all new licences to premises unless the applicants can prove that they will not increase antisocial behaviour.

The newspaper suggested that these measures were blocked by the Treasury, the Department for Culture, Media and Sport and the Prime Minister as being anti-business. However, their most significant

stage in bringing it into life. (see page 20)

Commenting to Alcohol Alert on the Sunday Times allegations, Lord Avebury, one of the main protagonists in the licensing bill debates, recalled the apparent impossibility of convincing Government Ministers that there was any connection at all between the growth in the number of



misgivings about the Licensing Act 2003.

The report says: *“The Government’s assertion that closing time and binge drinking are linked is valid, but closing time is not the only causal factor.”*

It predicts a rise in pub crawls through the night.

“A further complication will be that, with premises remaining open longer, transient drinking will take place. This will increase the numbers of persons on the street.

“Whilst it is accepted that staggered closing may induce a gradual drift away from premises, it is unlikely to reduce the numbers that use premises. The flashpoints that traditionally occur between 11pm and 5am may be reduced in intensity but occur with increased frequency.”

With more drunks on the streets for longer, the police fear a rise in fights, rape, robberies, domestic violence and assaults on officers.



The report cites the experience of several European cities, including Dublin where flexible hours were introduced four years ago.

It says: *“With the drinking culture that is firmly entrenched in the country, the relaxations in permitted hours will for the foreseeable future fuel this culture.”*

David Davis, the shadow

home secretary, said the Government should ensure that existing laws against under-age drinking are properly enforced before extending the opportunity for bingeing.

The Strategy

The Strategy, which appeared after its six years gestation to have co-operation with the alcohol industry at its heart, consists mainly of promises to encourage more use of existing controls combined with promises to keep the situation under review. There will, for example, be a review of the ‘sensible drinking’ message. There will be a review of the issue of alcohol advertising, and a review of treatment needs and services. The drink driving figures are also to be kept under review, but neither in relation to drink driving nor anything else is there a promise to introduce any of the measures that the large and growing international research evidence suggests can be expected to make a real difference.

The policies rejected by the Government include those related to taxation and physical availability, both of which are shown by the body of research evidence to be the most effective. Of course, the Government’s own Licensing Act produces the contrary effect as far as availability is concerned. One of the absurdities of the whole process which Alert has repeatedly pointed out was the order of events: the Licensing Act preceding the Strategy and in so doing greatly limiting its options, given the presumed imperative of not making the Government look foolish. The table below, reproduced from the recently published *Alcohol: no ordinary commodity* (reviewed on page 22), the work of the leading international experts in the field, indicates the range of effectiveness of the various alcohol policies. It should be noted that another top scorer for effectiveness is the range of drink driving measures which the Government has signally failed to bring in, despite its promises in opposition. It is also striking that the very measures proposed most enthusiastically in the Strategy are shown to be of little or no effect.

The principal initiative contained in the Strategy is a three- part voluntary social responsibility scheme for alcohol retailers. This seems to consist mainly of agreements to behave as any reasonable person would expect them to be behaving anyway. The three parts are:

Promotion of good practices in product development, branding, advertising and packaging. This will cover aspects such as observing the existing advertising codes and not targeting under-age drinkers.

A donation to an independent fund

This is an innovation. A fund will be set up with contributions

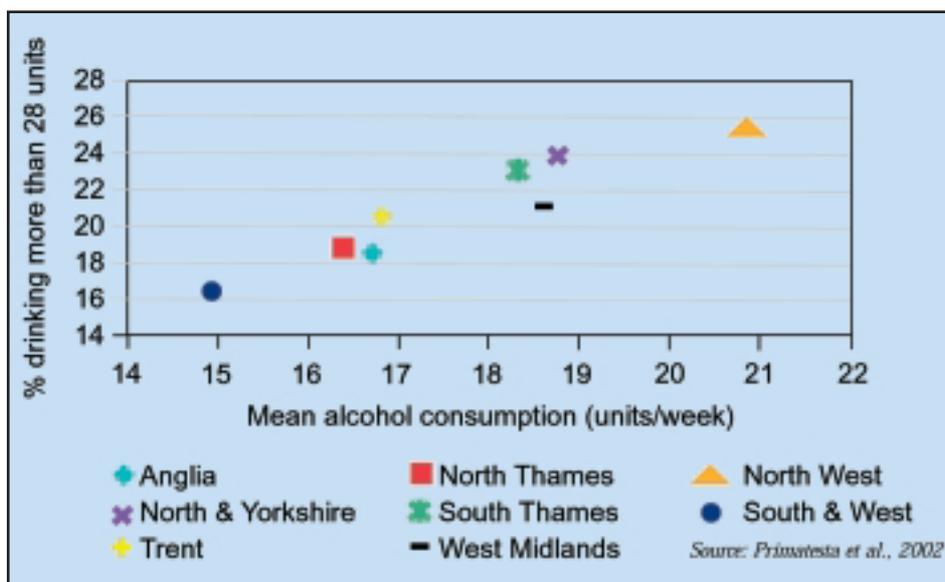
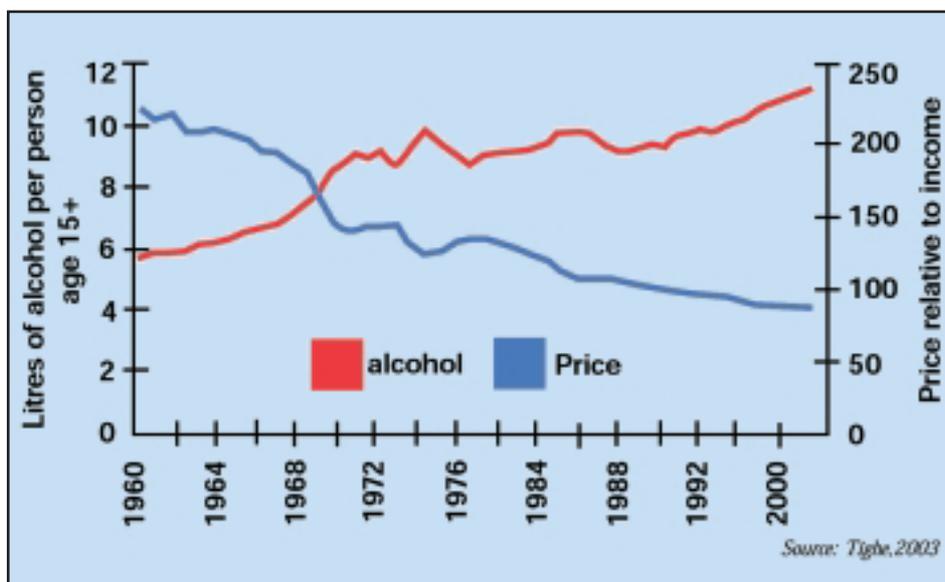
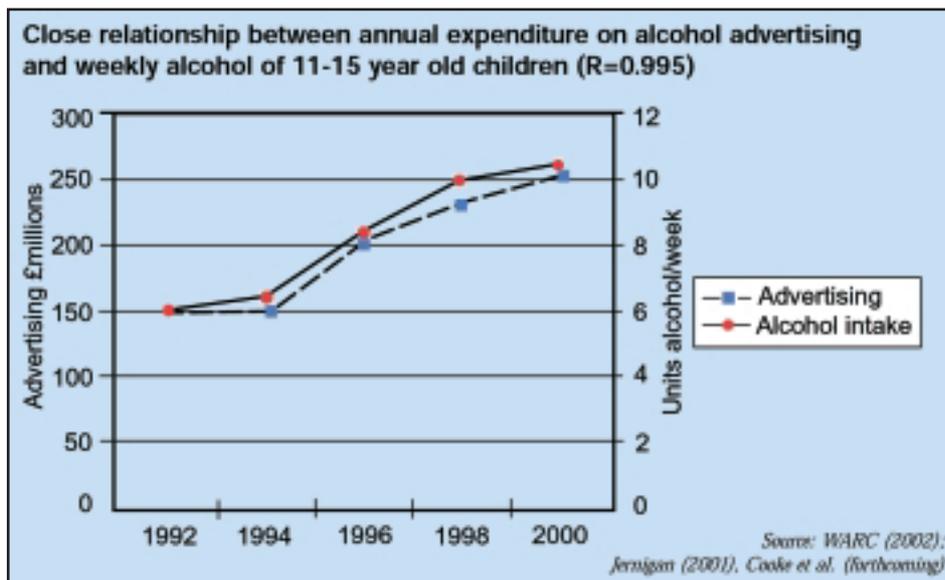
from the industry which will be used to fund local and national level projects designed to tackle alcohol-related harm.

Promotion of Good practice down the supply chain.

As far as implementation of the Strategy is concerned, there is to be no alcohol czar. For all the understandable mockery which greets the proliferation of czars, the failure to appoint one in this case sends out the strong message that the alcohol problem is nowhere near as important as that posed by illicit drugs. Instead of a czar, the two junior Ministers, one from the Home Office, the other from the Department of Health will assume joint responsibility for delivery of the Strategy in what looks to be a low key version of the short-lived Inter-departmental Committee on Alcohol Misuse set up by the Conservative government in 1988. There is also to be an external stakeholder group to bring an outside perspective and serve as a sounding board for initiatives. All the indications are that this too will be dominated by the alcohol industry.

The lack of significant content of the Strategy is hardly a surprise in view of the biased editing of the Interim Analysis produced by the Strategy Unit. As reported in Alert (Issue 3, 2003), research findings suggesting policy choices at variance with those favoured by the alcohol industry were removed from an earlier draft of the Analysis.

Prompted by these earlier goings on, the Academy of Medical Sciences convened its own group under Professor Sir Michael Marmot to 'put the alcohol back into alcohol policy' by examining the importance of



Effectiveness of Alcohol Policies

Alcohol policies can be evaluated on the basis of a number of different criteria, such as how expensive they are to implement and how much public support they attract. A main criterion is of course whether there is evidence to show that they are effective in reducing alcohol harm. In the table below,¹ the highest ranking for effectiveness is shown as + + +, the lowest, indicating not effective, as 0. A question mark indicates 'unknown'.

Strategy or Intervention	Effectiveness
Regulating physical availability	
Minimum legal purchase age	+ + +
Government monopoly of retail sales	+ + +
Hours and days of sale restrictions	+ +
Restrictions on density of outlets	+ +
Server legal liability	+ + +
Taxation and pricing	
Alcohol taxes	+ + +
Altering the drinking context	
Outlet policy to not serve intoxicated patrons	+ + +
Training bar staff and managers to better manage aggression	+
Voluntary codes of bar practice	0
Enforcement of on-premise regulations and legal requirements	+ +
Promoting alcohol-free activities and events	0
Education and persuasion	
Alcohol education in schools	0
College student education	0
Public service messages	0
Warning labels	0
Regulating alcohol promotion	
Advertising bans	+
Advertising content controls	?
Drink-driving countermeasures	
Random breath testing (RBT)	+ + +
Lowered BAC limits	+ + +
Administrative licence suspension	+ +
Low BAC for young drivers ('zero tolerance')	+ + +
Designated drivers and ride services	0
Treatment and early intervention	
Brief intervention with at-risk drinkers	+ +
Alcohol problems treatment	+
Mutual help/self-help attendance	+
Mandatory treatment of repeat drinking-drivers	+

the overall national consumption of alcohol. In a report published prior to the launch of the Government's Strategy, the Academy concluded that "The scientific evidence indicates that, for the health of the public, action is required to reduce the consumption of alcohol at a population level."

If the Academy entertained the hope that a careful examination and presentation of the relevant evidence would influence the Government it was mistaken. While the Strategy concedes that national consumption is rising and that if present trends continue, England will be one of heaviest drinking nations in Europe within the next ten years, it then proceeds to ignore completely the implications of that fact for the level of harm and what needs to be done to reduce it. Instead, beginning in the Prime Minister's foreword, the Strategy prefers to promote the myth of the two populations – the great majority of sensible drinkers who never have any problems, and the small minority of deviant drinkers who cause all of the problems. Predictably, the Strategy also emphasises how moderate drinking is good for health, and how very good indeed the alcohol industry is for the nation's economy.

This latter claim is of particular interest as it directly contradicts the Strategy Unit's analysis on which the Strategy is supposedly based..

An early paragraph of the Strategy reads:

"While it is outside the scope of this report to quantify the economic benefits in detail, alcohol plays a key role within the leisure and tourist

industry. It accounts for a substantial section of the UK economy: the value of the alcoholic drinks market is more than £30bn per annum and it is estimated that around one million jobs are linked to it.”

However, the Strategy Unit report ‘Alcohol Misuse: How much does it cost?’ devotes a section to explaining why the output, income and employment generated by the alcohol industry should not be represented as benefits the community receives from the production of alcohol. This is because the claim rests on the false assumptions that in the hypothetical absence of alcohol, the money spent on it by consumers would not be used in any form of expenditure on any other products or services and, likewise, that the resources used in producing alcohol products and services would have no alternative uses. The point made by the Strategy Unit was that neither of these assumptions is true, and the other uses to which the expenditure and the resources would in reality be put could provide similar benefits but without the burden of costs that the alcohol market inflicts on the wider society.

The Strategy

Better education and communication

The strategy includes a series of measures aimed at achieving a long term change in attitudes to irresponsible drinking and behaviour, including:

- making the “sensible drinking” message easier to understand and apply;
- targeting messages at those most at risk, including binge- and chronic drinkers;
- providing better information for consumers, both on products and at the point of sale;
- providing alcohol education in schools that can change attitudes and behaviour;
- providing more support and advice for employers; and
- reviewing the code of practice for TV advertising to ensure that it does not target young drinkers or glamorise irresponsible behaviour.

Improving health and treatment services

The strategy proposes a number of measures to improve early identification and treatment of alcohol problems. These measures include:

- improved training of staff to increase awareness of likely signs of alcohol misuse;
- piloting schemes to find out whether earlier identification and treatment of those with alcohol problems can improve health and lead to longer-term savings;
- carrying out a national audit of the demand for and provision of alcohol treatment services, to identify any gaps between demand and provision; and
- better help for the most vulnerable – such as homeless people, drug addicts, the mentally ill, and young people. They often have multiple problems and need clear



pathways for treatment from a variety of sources.

Combating alcohol-related crime and disorder

The strategy proposes a series of measures to address the problems of those town and city centres that are blighted by alcohol misuse at weekends. These include:

- greater use of exclusion orders to ban those causing trouble from pubs and clubs or entire town centres;
- greater use of the new fixed-penalty fines for anti-social behaviour;
- working with licensees to ensure better enforcement of existing rules on under-age drinking and serving

people who are already drunk. We will also work in partnership with the industry to reduce anti-



social behaviours – issues to be addressed may include layout of pubs and availability of seating, managing crime and disorder in city centres and improved information on safe drinking in pubs; and

- in addition to local initiatives, the Security Industry Authority (SIA) will begin the licensing of door supervisors with effect from March 2004.

Working with the alcohol industry

The strategy will build on the good practice of some existing initiatives (such as the Manchester Citysafe Scheme) and involve the alcohol industry in new initiatives at both national level (drinks producers) and at local level (retailers, pubs and clubs).

- At national level, a social responsibility charter for drinks producers, will strongly encourage drinks companies to:
 - pledge not to manufacture products irresponsibly – for example, no products that appeal to under-age drinkers or that encourage people to drink well over recommended limits;
 - ensure that advertising does not promote or condone irresponsible or excessive drinking;
 - put the sensible drinking message clearly on bottles alongside information about unit content;
 - move to packaging products in safer

materials – for example, alternatives to glass bottles; and

- make a financial contribution to a fund that pays for new schemes to address alcohol misuse at national and local levels, such as providing information and alternative facilities for young people.
- At local level, there will be new “code of good conduct” schemes for retailers, pubs and clubs, run locally by a partnership of the industry, police, and licensing panels, and led by the local authority. These will ensure that industry works alongside local communities on issues which really matter such as under-age drinking and making town centres safer and more welcoming at night. Participation in these schemes will be voluntary. The success of the voluntary approach will be reviewed early in the next parliament. If industry actions are not beginning to make an impact in reducing harms, Government will assess the case for additional steps, including possibly legislation.

Making it all happen

Making it happen will be a shared responsibility across Government. Ministers at the Home Office and the Department of Health will take the lead. We will measure progress regularly against clearly defined indicators and will take stock in 2007. ■

Violence at work is a problem for one in two doctors

Half of all doctors in the United Kingdom say that violence is a problem in the workplace and that alcohol is one of the major causes.

Violence at work: the experience of UK doctors, a report published by the British Medical Association, is based on responses to a survey from a thousand doctors and, in addition to the 50 per cent who saw violence as a growing problem, it was also found that:

- a third of respondents had experienced some form of violence in the workplace last year – this was the case for both hospital doctors and general practitioners;
- amongst hospital doctors those working in Accident & Emergency and psychiatry were more likely to experience patient violence;
- amongst doctors who reported some experience of violence, almost all (95 per cent) had been the victim of verbal abuse in the past year;
- the main causes of violence were perceived to be alcohol and other drugs (15.4 per cent), health related/personal problems (27.1 per cent), dissatisfaction with service provided (25.5 per cent).

How far alcohol was involved in the incidents perceived as arising from the two other major categories was not recorded. It is, of course, already well recorded that alcohol related violence and

abuse is particularly experienced by NHS staff in Accident and Emergency departments.

In a separate survey carried out of all GPs in Northern Ireland, results were similar to those for the UK-wide survey of doctors in all specialties.

The BMA makes a number of recommendations to tackle the problem of violence towards doctors:

- Training should be in place for all healthcare staff to handle potentially violent situations – this could include methods of restraint, communication, managing aggression and personal safety;
- Doctors and other healthcare staff should be working in partnership with local police, the relevant agencies and the media to tackle violence;
- Patients must be made aware of their responsibilities and acceptable behaviour – they need to know that violence will not be tolerated;
- It should be compulsory for violent incidents to be recorded. De-briefing or counselling facilities should be offered.
- Substantial differences in the perception of workplace violence exist amongst hospital doctors according to specialty. For example, nine out of ten A&E doctors and seven out of ten doctors working in psychiatry reported violence as a problem in their workplace, which compares with only



around 20% of doctors working in geriatrics.

A quarter of doctors who responded to the survey believed there had been an increase in workplace violence in the past year. This is particularly the case for general practitioners. ■

"Child protection cases have provoked verbal abuse when attempting to assess the child. Drunk parents can be hostile, obstructive and verbally abusive. I have also experienced suggestive remarks and inappropriate touching. One man pushed me against stair wall in our clinic."

"I've been on the receiving end of intimidating and abusive comments and behaviour especially relating to perceived poor practice (e.g. unable to cure cancer etc)."

"When people are frustrated after waiting for a service, or the service does not meet their expectation, it is only human nature to be angry. Add to this a few pints of intoxicating liquid and what else do you expect?"

"Two youths intoxicated with alcohol demanded "viagra", on refusal to prescribe they verbally abused me shouting racist, sexist remarks, which were intimidating and humiliating to me."

Alert opinion

In March it was business as usual. The government finally published an Alcohol Harm Reduction Strategy. The following week it published the Guidance to be given in regard to the operation of the new Licensing Act, the one that allows pubs to open 24 hours a day, 7 days a week. The Strategy, six years in the making, reads more like a Plan for Protecting Alcohol Sales. The Licensing Act is of course a plan for increasing them.

A draft interim version of the Strategy started out looking quite promising. However, it was just a bit too heavy on truth – such as the fact that price and availability are the prime levers that influence consumption, and that overall consumption has to be reduced if harm is to be reduced. The crucial evidence vanished from that first draft, and now the facts about alcohol are mixed in with so much spin that the liquor is hardly detectable – just like an alcopop.

So the message is – keep drinking! Booze sales must not drop because the Treasury needs the money and the influential alcohol industry must not be hindered. In any case, it's good for you. Tony Blair predictably gave us the Portman Group's line. This Group is the industry's public relations mouthpiece, and it has been doing an excellent job. Alcohol is quite safe – unless it is misused of course.

The government spouts convenient Portman Group propaganda while ignoring any

Sarah Webb

The UK is signed up to the WHO European Charter on Alcohol which states: "All people have the right to a family, community and working life protected from accidents, violence and other negative consequences of alcohol consumption." They omitted to say "so long as it doesn't interfere with business."



genuine evidence which might confirm the uncomfortable truth – that alcohol is a drug which needs careful control. A typical example of Portmanspeak was their assertion that lowering the drink-drive limit would lead to drinking drivers becoming more dangerous than they are already: *“I must be well over the limit so I might as well have another...”* George Orwell would have been proud.

The Portman Group is currently headed by Jean Cousins, an old chum of the Minister of Culture responsible for doubling drinking time from 12 to 24 hours a day. Tessa Jowell should stroll around towns like Bath at night (see Alert issue 2, 2002) to see what just three extra hours of alcohol availability can do.

Dealing with drunks or ‘binge drinkers’ is costly, messy,

occasionally dangerous, and takes up valuable police time. If it is possible to stop them getting drunk in the first place then prevention has to be the more cost-effective approach. A simple measure such as confiscation is useful on the streets and will be a step in the right direction. Another simple measure that has worked for a century is closing pubs at night. But while alcohol remains very cheap, very available, and very big business, there is little hope of a significant reduction in the late night disorder and noise that blights city life, especially if the drinking carries on even further into the night as recommended by Ms Jowell.

However, there are signs that at least some in the government are fearful of what is now going to happen, and at last the newspapers are

beginning to tell it how it is. The Daily Telegraph published details of a leaked report by the Metropolitan Police. The headline read; *24-hour drinking ‘will fuel crime’*. It is a damning indictment of the government’s ‘strong belief’ that extending drinking hours will reduce disorder.

The Met’s report also cites evidence from Dutch police who have problems with British tourists. Is it true that wherever there are Brits in bars there’s trouble brewing?

Talking of bars, when the Irish relaxed their licensing laws to allow drinking through the night, Temple Bar in Dublin became the ‘Mecca’ for UK stag-and-hen parties. Although they represented less than two per cent of the Dublin tourist market, their all-night drunken behaviour put off 13per cent of visitors – a net loss of £57 million per annum or around £285 million over a five year period. The Irish have tougher licensing laws now but it was a costly lesson. Now the stag-and-hen crowd have places like Bath in their sights.

The Home Office is right to be worried – but they should have listened before. Alcohol Concern, the Institute of Alcohol Studies, the Open All Hours? Campaign, and local authorities such as Westminster City and Camden Councils, have been among those warning the government from the beginning. Alas, the influential Association of Chief Police Officers dithered. Now the Police are blowing the whistle. But, sadly, it’s a bit too late. ■

Dr Sarah Webb is a Bath City Councillor



These footballers of British youth

Kevin Myers

Allegations about the Leicester City team going on the rampage in Spain oblige me to confess. I was raised in Leicester, whence the Myerses had emigrated from Dublin. I used to go to Filbert Street in that distant epoch when just about the whole team were called Len, with the exception of Albert Cheesewright. You wouldn't even be allowed to register as a professional footballer these days with such a name.

Most of the players were bald and had false teeth, which they left in the dressing room, and games consisted of 22 middle-aged, pot-bellied footballers, their faces wizened like elves', hoofing an ankle-breaking medicine ball around the place. Those few chaps with hair kept it in place with cement-mixer measures of Brylcreem.

Of course, they didn't go to La Manga on the Costa Calida

Foxes place alcohol ban on player's bar

for special training, but to Skegnessa, on the Costa Lincolnsha. They were paid

£17 basic a week, and they were as likely to run amok as they were to read Jane Austen or crossdress. When a player's bags were torn, which happened perplexingly often, both teams would surround him to protect his modesty while he changed into a fresh pair. Ladies, for whom "roasting" was confined to Sundays, would avert their eyes and gasp.

Roasting these days in soccer

parlance consists of two footballers (or

more) having simultaneous sex with a single woman, usually a stranger. The term comes from "spit-roast", with the volunteer host female being skewered through either end (at the very least). When it's over, the spits retire to the bar, and the joint returns to her friends, to regale them proudly with tales of who put what where. No, I

don't understand it either.

That the scandal of Premiership footballers' conduct should now engulf inexorably drab Leicester is like hearing that Beefeaters are soliciting for gay sex in the Mall and that the Law Lords are running a chain of betting shops. So, now almost no team in England is safe. But it's not just a matter of football. Soccer, with its combination of fame, money and libertinism, provides a congenial soup in which the common bacteria of English misbehaviour can prosper in almost perfect laboratory conditions. I say English, because the clubs are English, but actually, the disease belongs to these islands: for in this regard, we are truly a United Kingdom of Britain and Ireland (UKBI), a singular realm distinguished by violent drunkenness and boorish, witless promiscuity.

So it is far too easy to blame the Premiership, when the players are merely enacting in exaggerated form what can be seen in most UKBI cities any Friday or Saturday night. UKBI is now alcopopia, where a Bacardi Breezer is diluted with a double Bacardi, where nights end with people vomiting in the gutter, and where complete strangers have incoherent, instantly forgotten sex in shop doorways - chip and kebab



rs are models

Nine footballers held for hotel attack on women

Nine Leicester City footballers were held by police in Spain yesterday after allegations of rape and sexual assault by three women who claimed the players broke into their hotel room.

Eight of them appeared before a judge in Cartagena before being taken away in handcuffs for questioning.



Frank Sinclair is being questioned about alleged sexual aggression; Matt Elliott and Danny Coyne are accused of 'failing to help'

bring a grisly uniformity to Grimsby, Dublin, London, Swansea and Glasgow at 2 am, simply don't exist. So footballers in UKBI are not the exception to a society which is otherwise sober and celibate: rather, they are the exalted exemplars of a society which is the very opposite. Yet such conduct is unthinkable within an essentially foreign "British" club like

are within pelvic reach - these are clearly desirable objectives for many within our two islands.

So in both their celebrity and in their excess, footballers today simply embody the values of the society around them, but only more so. They are extravagant, hall-of-mirrors reflections of what large numbers of young people seek to be or already are. And denouncing them alone for such conduct is just another symptom of the UKBI illness. ■

Kevin Myers article first appeared in the Sunday Telegraph on 7th March, 2004 and we are grateful to the editor and the author for their kind permission to reproduce the article.

wrappings at their feet obligatory, condoms elsewhere optional.

Take it out of the doorway, put it in a nightclub, swap the Breezer cocktail for a horse-trough of vintage champagne at £200 a bottle, and you have the Premiership today. Young men of even average talent whose libidos have never known any restraint, and who earn in a week what would have been a world record transfer fee when I was a child in Leicester, will behave precisely as young men have always done when not socialised in discipline and continence.

On the Continent, these qualities are still prized, at all levels of society. There, the violent, drunken crowds that

Arsenal. One can't imagine the sophisticated aristos of Highbury breaking up a hotel room at 4 am, or lying in the gutter drunk, or giving a 10-second roasting to Charlene, who has been lying awake, fantasising about this moment ever since her best mate Kiely was roasted by the Accrington Stanley second team, plus a few of their wives.

Perhaps both islands are reverting to those bawdy ways which were the norm of merrie, bear-baiting Englande and chaotic, pre-Famine Ireland. But merely identifying the disease does not mean we are closer to a cure. For this is a disease of volition: getting drunk, smashing down doors and exchanging bodily fluids with whatever strangers' parts

Leicester City footballers admit to consensual sex with their German accusers but deny rape

The three Premiership footballers held in a Spanish jail accused of raping three young women have admitted to having sexual intercourse with them but claim that it was consensual, according to local newspaper reports.

Paul Dickov, Frank Sinclair and Keith Gillespie, all players with Leicester City, are said to have made the admission to detectives investigating the alleged attack at La Manga holiday resort in Murcia, south-east Spain.

The newspaper, La Verdad de Murcia, reported that the information had come from court papers seen by one of its journalists. The report was later repeated by El Mundo, a Spanish national newspaper. A



An unidentified Leicester player leaves Cartagena police station

Making a difference in the li

The NACOA Helpline

Hilary Henriques

The National Association for Children of Alcoholics was set up in 1990 to address the problems experienced by children growing up in families where one or both parents suffer from alcoholism, or a similar addictive problem.

Our current research indicates that there are 920,000 children and young people under the age of eighteen, living in the UK today with one, or perhaps both parents who have a problem with alcohol. Of these, 644,000 will try to hide the problem from the outside world.

It is clear from research studies that alcoholism as an outcome is but one risk factor for the offspring of an alcoholic. For children of alcoholics the home environment is very often characterised by inconsistent

parenting, with unpredictable rules and limited, chaotic or tense family environments; parental violence and spouse abuse; unpredictability; broken promises; loneliness and isolation as family members attempt to hide the family's problems. Research also shows that the degree to which children are able to shelter themselves from the negative impact of alcoholism plays an integral part in their growing up to be well adjusted adults.

Although some alcohol services offer family based therapies for families, there are few services, which offer help for the vastly greater number of children who suffer from the problematic drinking of parents who neither acknowledge nor seek help for their problems. These children find themselves with no one obvious they can turn to for help. NACOA addresses this need by providing information, advice and support through our free telephone helpline, website www.nacoa.org.uk and supporting services.

Loneliness, fear and confusion are the three problems reported most often by children of alcoholics calling

the NACOA helpline. Fourteen year old Tim, told one of NACOA's volunteer counsellors:

'Sometimes I don't think anyone sees me. I feel so alone and so different from the other kids in my class. I used to try to talk to my Mum but that would upset her. I was frightened when I saw my Dad lying passed out on the floor but Mum said 'it's all right'. So we ignored him and pretended that nothing's wrong, although we know there is. We walk around him, we have tea in the kitchen and we can't watch television because we mustn't wake him up. We all pretend its normal but I know its not.

We are all happier when he is sleeping because things are calm for a while, although we are dreading him waking up. What will he be like when he wakes up? Will he be angry or happy? Will he go to the pub or to the shed to start drinking again leaving us to worry until he passes out again? We replay the same game over and over in our heads. What will he be like when he wakes up, dad or some raging drunk who hates us, who blames me for his problems – if only I could do better at school, then maybe he would not have to drink.'

Tim is one of 7,284 callers to the helpline in 2002-2003. Tim's family life is torn apart by violence, by failing relationships, by constant arguments, by financial hardship and by constant neglect of the little things that are so crucial.

The NACOA helpline

NACOA welcomes calls from children of alcoholics of all ages and anyone concerned for their wellbeing.

For further information please contact:

Helpline

0800 358 3456 Mon to Fri 10.00 am to 7.00 pm
helpline@nacoa.org.uk

Website

www.nacoa.org.uk

Admin

011-924 8005 Mon to Fri 10.00 am to 4.00 pm
Admin@nacoa.org.uk

For information about the NACOA training programme for helpline volunteers, or other volunteering opportunities please call Anna Saunders on 01176-924 87005 or email volunteering@nacoa.org.uk.

ives of children of alcoholics



provides the anonymity and safety needed by children who may be afraid to ask for help, feel they are betraying their parents or think they will not be believed. There are no magical solutions but every caller is counselled as an individual with individual problems and needs; not simply an extension of a parent's drinking problem. We use a five-step approach, researching services and

resources from our library and databases of information, collated over the past fourteen year.

For Tim

- we listened and helped him to explore the problems he faces and his feelings in a non-judgemental way
- we provided information on alcoholism, stressing he was not to blame, that he could

not stop his father drinking but he could do something for himself

- we helped him to work out what he could and could not do, both for his father and himself. We helped him to find new ways of coping and ways to have a life for himself irrespective of whether his father continued to drink, or not
- we helped him to work out who he could talk to – people he could trust with his private thoughts and feelings, and also who he could not trust
- we referred Tim to a local drop in centre for young people in his area and introduced him to youth groups and other activities so he could start to enjoy himself outside the family home

Tim's father still drinks but Tim knows now that he is not alone. He is still frightened by his father's drunken rages but he knows that he can go to his friend's house, without having to explain anything and go home when he feels safe. Tim is still confused by his Mum who continues to try to ignore his Dad's drinking but he now trusts his own feelings and feels happier that the problem is not his fault or in his imagination. Tim continues to call the helpline when he wants or needs to – he knows we will be here for him and will help him to face problems. He is not alone. ■

**Hilary Henriques is
Chief Executive of NACOA**

Alcohol and re- Who cares?

Thousands of prisoners with severe alcohol problems will be released from jail this year without having been treated to prevent them returning to heavy drinking and crime according to a new report published by the Prison Reform Trust.

The report, Alcohol and re-offending – who cares? reveals that the Prison Service does not have an alcohol harm reduction strategy to address the behaviour of prisoners who have severe alcohol dependency problems despite the government’s concerns about alcohol-related violence and public disorder. Nearly two-thirds of sentenced male prisoners (63 per cent) and four-fifths of female sentenced prisoners (39 per cent) admit to hazardous drinking which carries the risk of physical or mental harm. Of these, about half, amounting to 20,000 people, have a severe alcohol dependency.

The annual estimated cost of alcohol-related crime and disorder, which will have affected many communities over Christmas and New Year, is around £7.3 billion.

Overall two-thirds of the 74,000 prisoners in England and Wales are hazardous drinkers but the report says that a recent Prison Service survey found that only one jail had policies dedicated to dealing with prisoners who have been hazardous drinkers.

The report highlights the fact that in some prisons half of all



inmates have serious alcohol problems which are related to their offending. It says there are very few programmes available that will actually make a difference and change their drinking habits. In addition, there are limited opportunities

for aftercare on release from prison due to a chronic shortage of community based alcohol services. Such as exist are starved of resources, largely as a result of the government’s failure to set priorities for alcohol problems in a yet-to-appear national strategy.

offending –



The Chief Inspector of Prisons, Anne Owers, recently told the Home Affairs Select Committee that she was concerned about the shortage of provision for prisoners with alcohol problems. She said:

“At the moment all that is available is tied into programmes designed for other kinds of substance abuse, for drug programmes, there is nothing specific and nothing specifically ring-fenced and I definitely think there should be.”

Six out of ten prisoners are reconvicted within two years of release from jail and three-quarters of young offenders return to crime. The report notes that recent research has found that programmes for offenders with drinking problems can reduce the likelihood of re-offending. It concludes that there is an urgent need to put in place a well-resourced alcohol harm reduction strategy. It proposes:

The Prison Service, supported by the NHS, should draw up an alcohol harm reduction strategy that provides guidance to individual prisons to

have alcohol intervention programmes in place that link up with drug treatment work in prisons. The strategy needs to be supported by significant extra investment.

There should be effective screening tools put in place such as the AUDIT tool developed by the World Health Organisation to identify hazardous drinkers as they are received into custody.

There should be ring fenced alcohol treatment programmes available, particularly in training and dispersal prisons, for severe dependent alcohol users and motivational programmes for hazardous users.

Onward referrals should be set up for those on release from custody to provide offenders with continuing support once back in the community.

Procedures need to be put in place to monitor the number of people who enter prison with alcohol problems, the numbers who then complete detoxification courses and the numbers who take up and complete an intervention programme.



The courts should be encouraged to divert offenders with alcohol related problems who have committed non-violent offences into treatment programmes or education schemes in the community

Enver Solomon, author of Alcohol and re-offending – who cares? and PRT’s policy officer, said:

“Prisons, particularly young offender institutions, are flooded with prisoners with alcohol problems. It is a failure on the part of the Prison Service that so little has been done to change their behaviour. In most cases they will leave prison unchallenged and unchanged. Access to alcohol treatment is not a luxury it is a necessary step to prevent further offending and more victims.”

Juliet Lyon, director of the Prison Reform Trust, said:

“We are used to hearing about drug-induced crime but it is alcohol which fuels violence, public disorder and road traffic accidents. Far more could, and should be done, by the NHS and the criminal justice system to reduce hazardous drinking.” ■

Licensing Guidance the paper it's w

Westminster City Council has told the government that its Guidance on how its new Licensing Act will work is not worth the paper it's written on.

Commenting on an earlier draft of the Guidance, Councillor Audrey Lewis, the Council's Cabinet Member for Licensing, condemned the document as "*contradictory, full of holes, legally suspect and a virtually useless collection of bland statements that have no practical application.*"

Councillor Lewis continued: "If the government and all its advisers do not know how this legislation is going to work then what hope do council licensing officers have? Councils will have to decide what conditions should be attached to premises licences with no help from this so-called Guidance while dealing with a huge volume of applications during the transition period. There needs to be a road map of how this legislation is going to work. Unfortunately what we have at the moment may as well be a blank page."

The City Council's concerns were conveyed to the Government in a letter to Richard Caborn, Minister of State at the Department of Culture, Media and Sport.

Cllr Lewis wrote: "*Even issues that the government has attempted to address, such as the*

cumulative impact of licensed premises in a particular area, are addressed in an incoherent way."

'Cumulative impact' – the cumulative problems that arise from concentrations of alcohol and entertainment premises in particular areas – was one of the major issues that arose during the passage of the new Act through Parliament. Originally, DCMS planned to deny the new licensing authorities any specific powers to deal with cumulative impact, and conceded on the point only very reluctantly and as a result of strong representations. On this issue, the DCMS view was and presumably remains the exact opposite of the Home Secretary's, and the grudging nature of its concession perhaps explains why, in Councillor Lewis's judgement, what the Guidance says about "cumulative impact" is confused, and demonstrates that the issue has not been understood. Councillor Lewis's letter reads:

"There are many problems with (this section of the Guidance), but to take three by way of example:

(i) It is clear that the Secretary of State thinks that cumulative impact is only an

issue for premises selling alcohol (paragraph 3.15). That is not the case in Westminster, which has areas where the number of late night cafes causes problems, and also the West End, where late night cafes add to and exacerbate the problems caused by drink-led premises. The incidence of disorder around late night cafes has been of great concern to the Police.

- (ii) The Guidance appears to permit policies to address cumulative impact only in relation to applications for new premises licences, not in relation to applications to increase the trading hours or capacity of existing premises by variation of the licence (paragraphs 3.16 and 3.26); and
- (iii) The Guidance does not permit a special policy relating to cumulative impact to address the terminal hour. The combination of points (ii) and (iii) leads to the absurd position that where it is late night premises which are the problem that problem cannot be dealt with by the adoption of a policy preventing more premises from opening late at night, and an application from

nce: not worth ritten on

premises proposing to open until twelve midnight must be regarded as just as

objectionable as one from premises proposing 24 hour opening. It is dishonest of



the Guidance not to recognise anywhere, even in the chapter on Hours of Trading and even in the Annex dealing with conditions relating to public nuisance, that nuisance is worse at times when people are trying to sleep than it is at ordinary times of the day. This simple fact could surely be acknowledged without compromising the commitment to the principle of flexible opening hours, and the fact that it has not been does seem to indicate the very narrow, "applicant-focused" perspective from which the Guidance has been drafted.

Westminster's anxieties related to a whole range of issues that it believed the Government had neglected or failed to understand. These included the transition period; the absence of guidance on conditions to be attached to licences; the form applications for licences will take, and a lack of clarity about the role of Councils as objectors to licence applications.

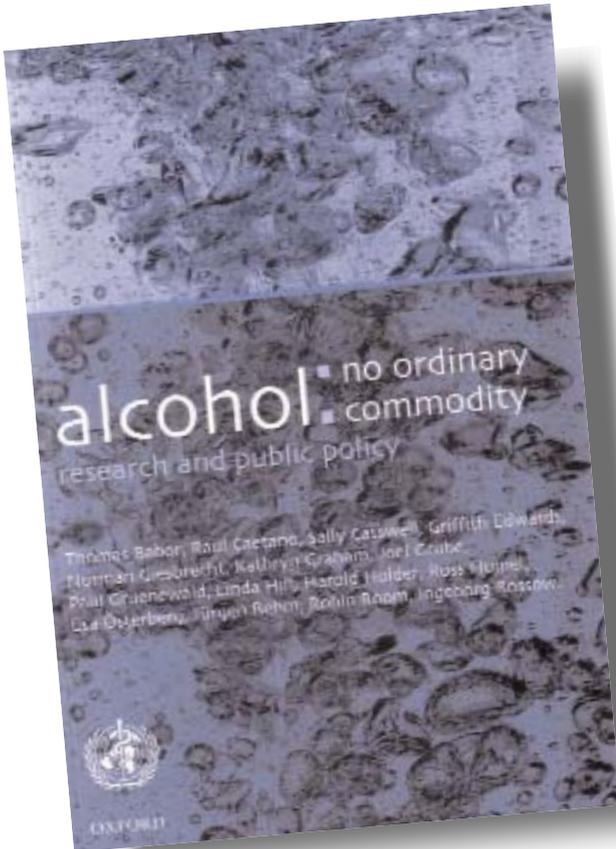
DCMS clearly felt it unnecessary to pay Westminster the courtesy of a reply, despite its being the premier licensing authority in the country. ■

Alcohol: no ordinary commodity

Thomas Babor et al, Oxford University Press.

Andrew Varley

This is a major publication and a landmark in the development of our understanding of public policy as regards alcohol. It includes sections on epidemiology and the need for an alcohol policy; strategies and interventions; and the formation of effective alcohol policy. Its contributors include the leading international scholars in the field and their combined experience and ideas provide compelling evidence for the importance of effective alcohol policy around the world.



The authors are ambitious in their claims and not afraid to stress what they perceive to be the contemporary importance of the subject: “People consume not only goods, but also services, and alcohol policy is

one such service. In any jurisdiction alcohol policy serves two purposes: to enhance benefits resulting from the use of beverage alcohol, and to contain and reduce alcohol-related harms. Citizens have the right to assess and audit policies on health care provision, education, and crime prevention. They also deserve to know whether enacted alcohol policies are apt and well-chosen. Alcohol policy issues overlap with almost every aspect of the public policy domain. Alcohol-related issues are pervasively important for the state at both central and local levels; they cannot be minimised or ignored. In an age of consumerism, it behoves policy-makers to ensure that alcohol policies are fashioned with public health interests in mind.”

Referring to the fact that alcohol consumption plays a major role in morbidity and mortality on a global scale, the authors point to the progress made during the last fifty years in the scientific understanding of the relationship between alcohol

and health. “Ideally, the cumulative research evidence should provide a scientific basis for public debate and governmental policymaking.” It is inevitably the case, however, that a great deal of this scientific evidence is reported in academic journals and often appears to have little reference to prevention or treatment policy. This led to the formation in 1992 of the Alcohol and Public Policy Project: a small group of experts brought together with the intention of providing “a policy-relevant review of the literature”. In fact, a very effective start to the process had been made almost twenty years earlier when Alcohol control policies in public health perspective appeared in 1975. Under the impetus provided by the APPP, the successor publication, Alcohol policy and the public good, appeared in 1994.

At an alcohol policy conference, held in Chicago in 1998, a group of APPP experts agreed to begin plans for another volume. This book is the welcome result. Alcohol: no ordinary commodity sets out to describe recent advances in alcohol research that have direct relevance to the development of alcohol policy throughout the world at all levels. The intended audience of the book includes, of course, researchers, addiction service providers, clinicians, and prevention planners, but the authors have especially had in mind policy-makers – the people who have immediate responsibility for public health and welfare. It is to be hoped that they keep it by them and apply its lessons: the world will be a healthier place if they do. ■



Further publications available from the Institute of Alcohol Studies

Counterbalancing the Drinks Industry

Counterbalancing the Drinks Industry: A Report to the European Union on Alcohol Policy

A response to a report published by the European drinks industry and a defence of the WHO Alcohol Action Plan for Europe.

Alcohol Policy and The Public Good

Alcohol Policy and the Public Good: A Guide for Action

An easy-to-read summary of the book written by an international team of researchers to present the scientific evidence underpinning the WHO Alcohol Action Plan for Europe

Medical Education

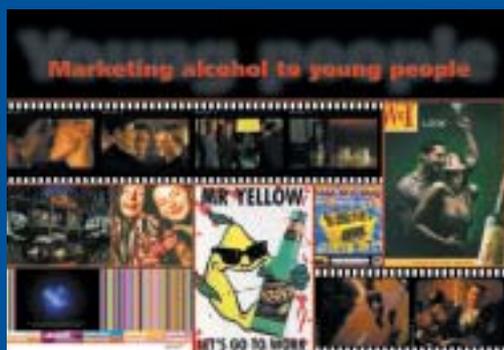
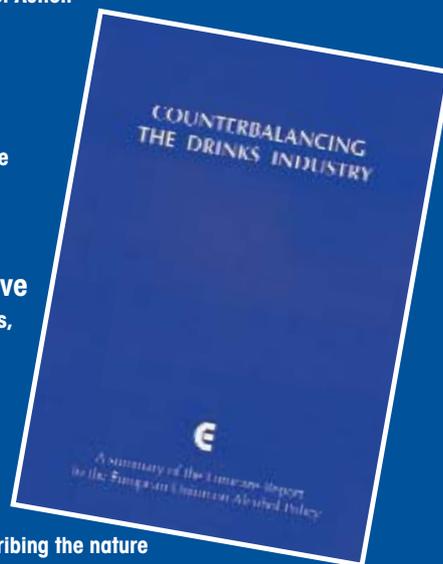
Medical Education in Alcohol and Alcohol Problems: A European Perspective

A review of educational programmes on alcohol and alcohol problems in European medical schools, identifying gaps in provision and proposing guidelines for a minimal educational level within the normal curriculum of under- and post-graduate medical students.

Alcohol Problems in the Family

Alcohol Problems in the Family: A Report to the European Union

A report produced with the financial support of the European Commission describing the nature and extent of family alcohol problems in the Member Countries, giving examples of good practice in policy and service provision, and making recommendations to the European Union and Member Governments.



Marketing Alcohol to Young People

Children are growing up in an environment where they are bombarded with positive images of alcohol. The youth sector is a key target of the marketing practices of the alcohol industry. The booklet depicts the marketing strategies of the industry and shows how advertising codes of practice are being breached.

alcohol



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