ALCOHOL HARM REDUCTION STRATEGY 2020 – 2024 (Version 2)

The North Wales Area Planning Board

Foreword

This Alcohol Harm Reduction Strategy for North Wales has been produced on behalf of the North Wales Area Planning Board, working in collaboration with partners across the region. It is the first one that has been produced for North Wales and builds on the North Wales Substance Misuse Needs Assessment. It also aligns with the Welsh Government Substance Misuse Delivery Plan 2019-2022 which seeks to reduce the harms associated with substance misuse, including alcohol, to the individual and wider society.

Alcohol is thoroughly integrated into all aspects of society and our culture, is widely available, and has become increasingly affordable. Where alcohol is drunk sensibly it is enjoyed by many.

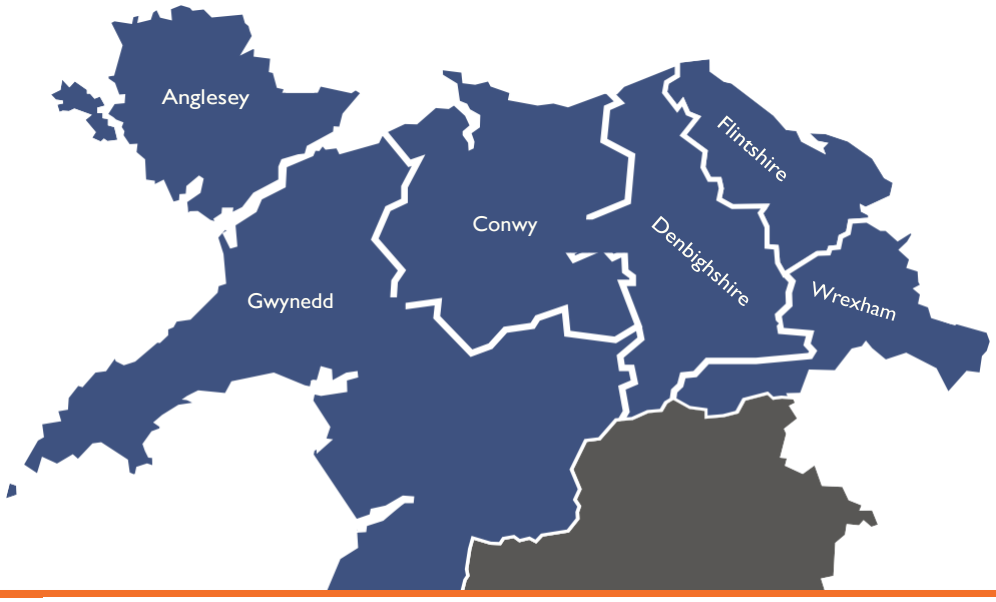
However, alcohol is a strong drug with serious health implications. Alcohol misuse has a marked effect on the physical and mental health wellbeing of the individual, as well as affecting their family and wider society. Alcohol misuse is strongly linked to crime and disorder, antisocial behaviour, assault and domestic violence. Alcohol misuse is a major cause of death and illness in Wales with around 1,500 (one in twenty of all deaths) deaths each year being attributable to alcohol.

There is no single organisation well placed to address all the harmful impacts of alcohol. This strategy sets out our partnership commitment to reduce the harms of alcohol misuse over the next 5 years and will require a collaborative approach across the region whilst also addressing local issues. This is why the strategy has been developed in partnership and is endorsed by me, as Chair of the North Wales Area Planning Board, on behalf of strategic partners for substance misuse (alcohol).

Changing a culture and our relationship with alcohol is a long process consisting of incremental changes over a period of time. This strategy sets out the priority areas required to achieve the long-term goal of reducing the harmful patterns and impacts of alcohol consumption and highlights the need for a whole system approach of collaborative partnership working to address the multiple harms of alcohol consumption.

Andy Jones

Chair - North Wales Area Planning Board



Introduction

The ambition is to have a culture in North Wales that promotes and enjoys a positive relationship with alcohol, where non-drinking or low level of alcohol consumption is valued and considered the norm. In addition, where alcohol adversely impacts on lives, abstinence is supported as a choice.

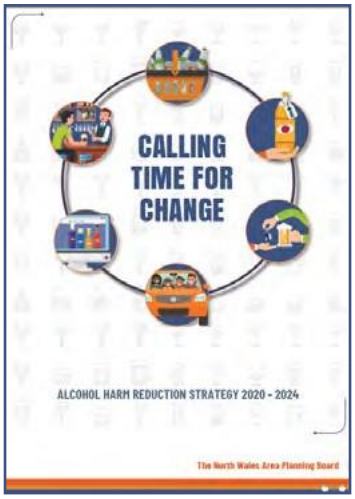
Our Area Planning Board (APB) is a partnership, which supports the planning, commissioning and performance management of substance misuse services for people across the whole of North Wales. Its role is to deliver the aims of the Welsh Government's Substance Misuse Delivery Plan 2019 – 2022.

Within this, our key responsibilities are to:

- **Prevent harm**
- **Support those who misuse substances to improve their health and maintain recovery**
- **Support and protect families**
- **To tackle the availability of substances, and protect individuals and communities through enforcement**
- **Develop stronger partnerships; workforce development and service user involvement.**
- **Improve the experience and quality of care for individuals and families through greater engagement and involvement**

This strategy aligns to the five ways of working in the Well-being of Future Generations Act (Wales) 2015[1]. This legislation was enacted in order to ensure that all decisions taken by public bodies in Wales support sustainable development, thus ensuring that what we do today to meet the needs of our population does not compromise the ability of our future generations to meet their needs.

How the Strategy has been developed



The APB prioritised the development of a strategy for reducing the harm from alcohol. Across the different partners that make up the APB there are differing interpretations of what harm reduction means. It was therefore important to identify a range of partners to contribute to and develop the strategy. The Strategy has also taken account of the findings identified in the North Wales Substance Misuse Needs Assessment (2019).

This local strategy aligns with the National Alcohol Misuse Prevention Partnership (NAMPP) alcohol harm reduction multifaceted approach and adopts an Alcohol Theory of Change (ATOC) framework. The ATOC is a mechanism used to link evidence-based activities to the aims and outcomes of alcohol harm reduction. Presenting the strategic priorities and activities in this way informs and shapes future work on developing an implementation/action plan, and how progress and effectiveness can be monitored.

1 Welsh Government (2019). Substance Misuse Delivery Plan 2019-2022. Available at: https://gov.wales/sites/default/files/publications/2019-10/substance-misuse-delivery-plan-2019-22.pdf Accessed 29 Nov 19.

Aim

The aim of the strategy is to reduce alcohol related harms through:

- **Promotion of a safe and sensible approach to alcohol consumption**
- **Protection of families and wider communities from adverse impacts of alcohol**
- **Reducing the impact of alcohol related harms**
- **Producing robust working relationships and referral pathways between service providers.**

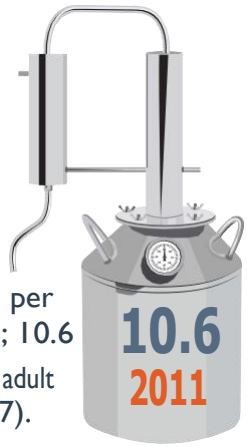
The Strategy informs the APB future programme of work in respect of Alcohol Harm Reduction, and further supports the Board in highlighting areas likely to contribute to the reduction of harm from Alcohol that lie outside its sphere of control. The Strategy shapes future allocation and spend of APB monies and resources that are separately put in by partner agencies and consumers.

What we know about the harm from alcohol

Alcohol is **60%** more affordable than it was in 1980.

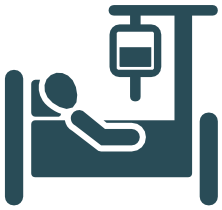
Alcohol misuse increases the risk of injury, absenteeism, poor performance and unemployment (PHE 2016).

More alcohol is currently sold per person than three decades ago; 10.6 litres of **pure alcohol** per adult (2011) versus 9.5 litres (1987).



There were on average **84 alcohol-specific deaths** annually in North Wales over the three-year period 2015 to 2017.

Alcohol misuse costs Wales approximately **£25b** per year in healthcare, crime and lost productivity costs.



In 2017/18 there were an estimated **11,682** hospital (broad definition) admissions in North Wales.

7,647 males

4,035 females

Drinking behaviour

The current guideline states that to keep health risks from alcohol to a low level it is safest not to drink more than 14 units a week on a regular basis.[2] Table 1 gives an overview of the numbers of estimated adults in North Wales who drink above the current guidelines.

Table 1: Numbers of estimated adults in North Wales who drink above guidelines: those drinking hazardously and those drinking harmfully

	Estimated Adult **Population** (18+, Mid 2017 ONS)	Adults drinking **'hazardously'** Men; **15-50 units** per week Women; **15 -35 units** per week		Adults drinking **'harmfully'** Men; **more than 50 units** per week Women; **more than 35 units** per week		**Totals**
North Wales	**557,313**	**84,700**		**15,300**		**100,000**
Anglesey	56,365	7,500	13.3%	1,700	3%	9,200
Gwynedd	100,332	16,600	16.5%	3,600	3.6%	20,200
Conwy	95,364	12,800	13.4%	2,800	2.9%	15,600
Denbighshire	75,794	11,800	15.6%	1,600	2.1%	13,400
Flintshire	123,127	17,200	14%	2,600	2.1%	19,800
Wrexham	106,331	18,900	17.8%	3,100	2.9%	22,000

*Source: figures calculated using data from Public Health Wales Observatory and the mid-2017 ONS population estimates

(**293,135** individuals) of people in Wales drink more than the recommended daily limits.

49% of school-aged children report that they drink alcohol. This ranges from **22% in Year 7** (age 11-12) to **78% in year 11** (age 15-16).

Impact of alcohol misuse on families and communities

There were **4,404 public disorder offences** across North Wales in 2017/2018, the majority of which involved alcohol.
(Office of National Statistics, Crime Statistics 2019).

2 Department of Health (2016) UK Chief Medical Officers' Low Risk Drinking Guidelines https://www.gov.uk/government/publications/alcohol-consumption-advice-on-low-risk-drinking Accessed June 2019

In North Wales there are:

865 children receiving care due to parental substance or alcohol misuse.

120 children over the age of 10 receiving care with a reported problem of substance and alcohol misuse (7.4 % of all those receiving care).

In a recent review in 2018 one county in North Wales found that, **a spouse or partner of the victim was the offender in 41.7% of alcohol related violence**, with nearly two-thirds (65.3%) of the offences occurring within a dwelling. Hospitality establishments were the most common premises for offences to occur outside the home with 12.1% of the total.

Where are we now

This Strategy is the first Alcohol harm reduction strategy specifically for North Wales and recognises and builds on recommendations identified in the local (North Wales) Substance Misuse Needs Assessment (SMNA).

Much work has taken place in the development of partnerships in the region to tackle alcohol related issues and the delivery of services to support those that experience, directly or indirectly, the harms of alcohol. A high proportion of this partnership working has taken place at a local level with a limited reach.

Learning from the various alcohol projects in North Wales supports the need for a coordinated, regional multi-agency approach to tackling alcohol related harms.

Whilst the broad and diverse range of organisations engaged in dealing with alcohol related issues across the region demonstrates effective partnership working, further work is required to strengthen early identification of hazardous and harmful drinkers across all age groups, in addition to supporting prevention and early intervention approaches. This work needs to be embedded at a population, organisational, community, family and individual level.

Future Vision

The vision for this strategy is that through partnership working across the region, a change in the drinking culture in North Wales will be effected, reducing the harm caused by alcohol to individuals, families and communities, and creating an environment where low level or abstinence from alcohol consumption is the norm and where harmful and hazardous drinkers are identified early and supported via intervention programmes.

This change can only be brought about by the active engagement and involvement of APB partners, public, volunteer and 3rd sector bodies across the region, working in a collaborative and integrated manner. The vision is to effect cultural change. Any cultural change takes time; both for the passing of old aspects of a culture and the adoption and embedding of new behavioural norms and attitudes. This is reflected in the long-term nature of the Strategy.

This Strategy articulates how the APB, together with its partners and stakeholders across North Wales will bring about that cultural change, working toward the themes identified under the Alcohol Theory of Change.

Priority 1

Safe and Supportive Environment

We will promote responsible retailing and support a safe, vibrant and diverse night-time economy, through working in partnership with local alcohol businesses to reduce alcohol related harm.

We will work with partners to provide supportive environments in the workplace and school settings.

What do we know?

Supportive environments offer people protection from factors that can threaten good health and make healthy choices the easiest choices. Settings refer to environments where people live, learn, work & play, such as schools, hospitals, workplaces and cities.

Alcohol and the night-time economy

- A vibrant night-time economy plays a crucial role in not only sustainable growth, but also by making a positive contribution to Welsh life and culture. Night-time economies are a valuable asset to Wales. However, growth in the night-time economy has been associated with increasing levels of anti-social behaviour, unintentional behaviour, accident and emergency admissions, criminal activity and substance misuse. There is a balance needed to retain the economic benefits but reduce the costs imposed by irresponsible drinking.
- **49%** of drinkers consume alcohol at home or at a friend's house before going to Wrexham Town Centre for their night out. Known as preloading, this can contribute to higher levels of intoxication and an increased risk of harm[3].
- As a popular University City, Bangor has a vibrant night-time economy with a high concentration of licenced premises opening late in a relatively small city centre area. This presents challenges in respect of controlling antisocial behaviour and ensuring that everybody enjoys a safe night out with the correct controls in place to discourage harmful alcohol consumption. Recent test purchasing operations carried out by North Wales Police in Bangor have indicated a problem with **underage alcohol sales** from licensed premises.

Alcohol and the workplace

- Alcohol misuse increases the risk of injury, absenteeism, poor performance and unemployment (PHE 2016).

Alcohol and Schools

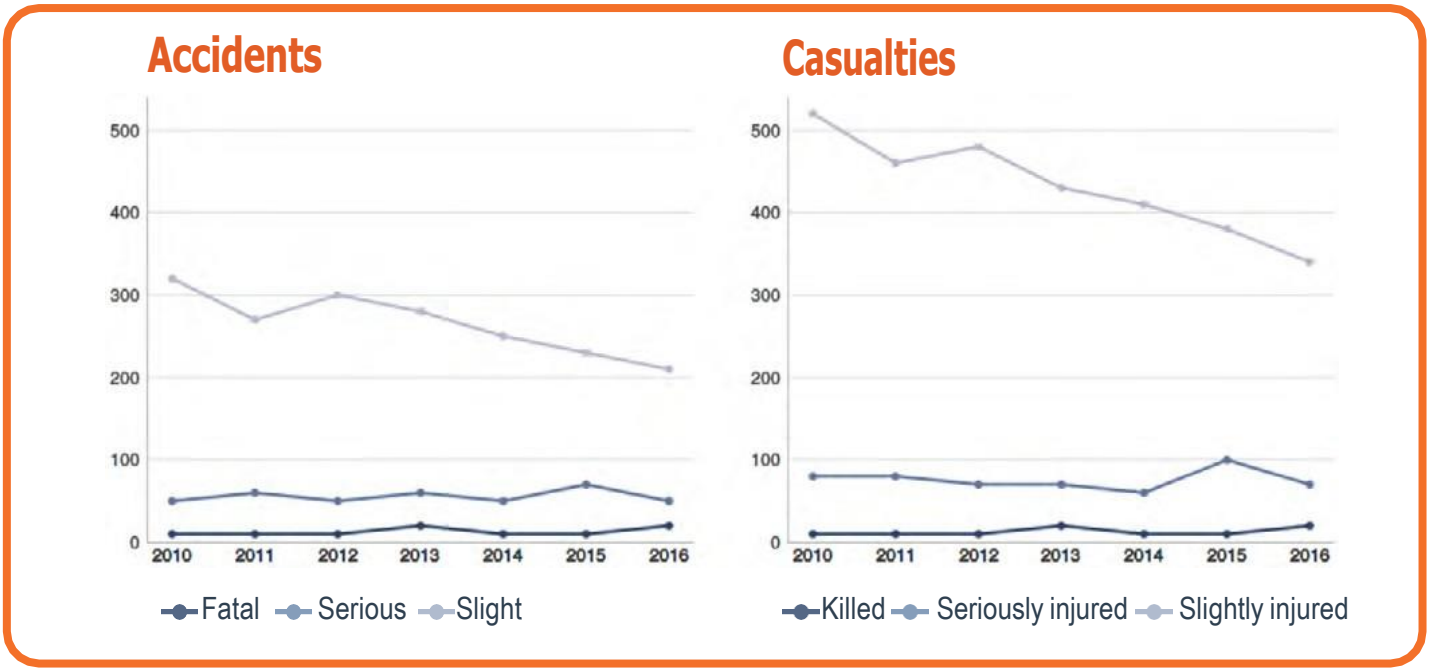
- In North Wales there were **10.3 pupils per 1,000 pupils** excluded permanently from school due to drug and alcohol use in 2016/2017.

3 http://allcatsrgrey.org.uk/wp/wpfb-file/wrexham-drink-less-enjoy-more-pilot-intervention-report-2018-pdf

Drink Driving

- There is strong evidence of a direct relationship between the amount of alcohol consumed and the ability to drive safely. Young people and men are disproportionally involved in alcohol related road crashes. Drink driving is the **leading cause of alcohol related deaths** amongst those ages 16-42 years (PHE, 2016).
- There were **4,404 public disorder offences** across North Wales in 2017/2018, that majority of which involved alcohol (Office of National Statistics, Crime Statistics 2019).

Graph 2: Drink driving accidents and casualties by type. Wales 2010-2016



Data source: STATS19, Department of Transport

What has been achieved so far?

- **The Best Bar None (BBN)** schemes currently operating in Wrexham and Conwy and being prepared for in Denbighshire, is a national scheme to improve safety in licensed premises and reduce alcohol related violence. Local BBN schemes are partnerships between the Council, North Wales Police & North Wales Fire & Rescue Service, Licensees & Security firms.
- **Street Pastors** work in the night time economy across the region offering a friendly, caring and non-judgmental assistance to vulnerable people within the night time economy[4].
- **Town based welfare centres.** Across the region these are welfare centres, either in fixed or pop up locations, staffed by volunteers providing a safe space where people who have become vulnerable due to consuming too much alcohol or taking drugs, can receive medical attention and support.
- **Regional Pop up Centres** have been established at large events to provide medical attention and support; for example Llandudno Armed Forces Day
- **Knife detection scanners** and body cameras are utilised at certain venues across the region – to deter and detect potential incidences of alcohol related violence.

4 https://www.streetpastors.org/

- **National and local Drink Drive Campaigns** - twice yearly campaigns of 2-month duration in the summer and Christmas. The number of drink drive arrests has reduced 13% from 2014 to 2018, showing a consistent reduction.
- **School policies for Substance Misuse** are in place across North Wales and provide a clear reference for teachers, families and pupils to identify where support is available and how schools respond to particular situations when they occur.
- A number of organisations in the region have gained accreditation under the **Corporate Health Standard** which includes policy, support and awareness around alcohol.

What will we do differently?

- Work with Licensing Authorities to ensure Licensing Policies reflect and are supportive of the priorities of this Alcohol Harm Reduction Strategy.
- Promote the expansion and uptake across North Wales of the Best Bar None initiative.
- Raise awareness of the benefits of responsible retailing and using well-managed premises.
- Support all workplaces (public and private) to promote safer drinking (recommended units), develop an alcohol-free policy during working hours and develop a supportive culture with links to support services and promotion of mutual aid.
- Seek out good/best practice and ensure, where appropriate, that it is replicated/rolled out across the region.
- Work with educational leads to attain the highest minimal standards for educational settings in relation to alcohol across the region.

Priority 2

Changed attitudes and social norms

We will increase knowledge and understanding of alcohol related harms and enable people in North Wales to have a positive relationship with alcohol and work towards a culture in which non-drinking or a low level of alcohol consumption is valued and accepted as a norm.

What do we know?

As a Country the UK has seen an increase in binge drinking[5] amongst individuals and this type of drinking now accounts for half of all alcohol consumed in this Country.

Children

Children develop an awareness of alcohol at an early age through social media, television, advertising and their home environments and by the age five have already formed basic attitudes and opinions about alcohol. Factors which influence young people's alcohol use includes; curiosity, need for acceptance and belongingness, peer pressure, urge to rebel, boredom, copying habits they see in their environment (home, peer groups, community) and as a coping mechanism and a confidence boost.[6, 7]

Adverse Childhood Experiences (ACEs) are stressful events occurring in childhood, such as growing up in a household where alcohol or substance misuse is present. ACEs are a common occurrence with **50% of the adult population of Wales experiencing at least one ACE.** ACEs have a detrimental impact on health across the life course; those experiencing 4 or more ACEs are more likely to be a high-risk drinker (four times), have been a victim of violence in the last 12 months (fourteen times), served a prison sentence (20 times).

Higher prevalence of alcohol use is found amongst vulnerable groups including those who: are in contact with Young Offender Teams, have mental health problems, receive care or support, have carers or families who misuse substances, are not in education, employment or training and school excludees.[6]

In North Wales[7]:

- **49%** of school-aged children report that they drink alcohol
- **19%** of school aged children drink five or more alcoholic drinks on days they drink
- **68%** of school-aged children had drunk alcohol for the first time under the age of 15.

Of those in Year 11 that reported drinking:

- **31%** were drunk for the first time at age 15
- **19%** at age 14
- **8%** at age 13 (all similar to the Welsh average).

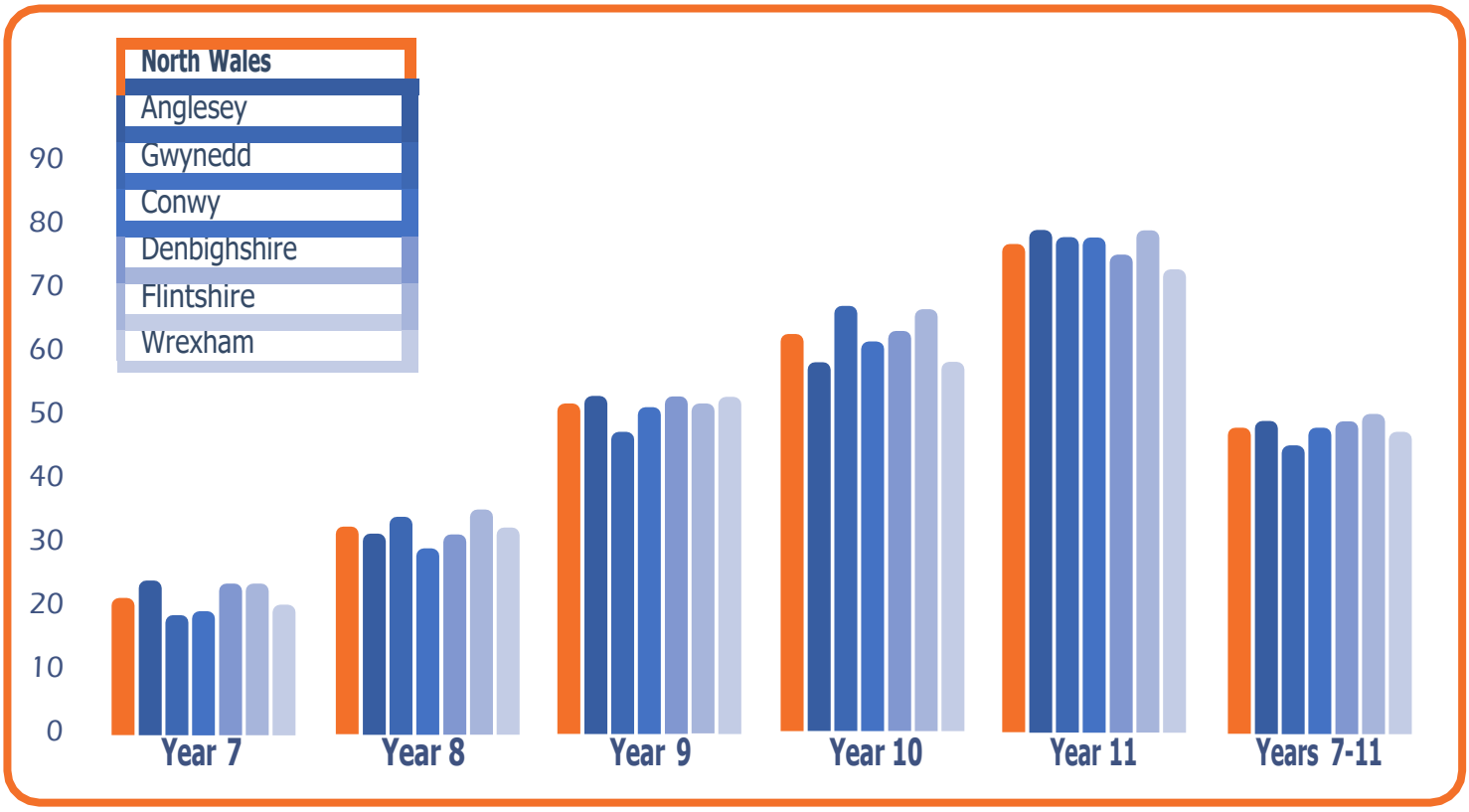
Family affluence did not influence school-aged children weekly drinking.

5 The NHS defines binge drinking as "drinking lots of alcohol in a short space of time or drinking to get drunk". Everybody is different, it is not easy to say exactly how many units in one session count as binge drinking. The definition used by the Office of National Statistics for binge drinking is having over 8 units in a single session for men and over 6 units for women.

6 NICE (2017) *'Drug Misuse Prevention: targeted interventions NG64'* https://www.nice.org.uk/guidance/ng64 Accessed June 2019

7 School Health Research Network (2018) *Students' Health and Wellbeing in 2017/18* DECIPHer (reports are available for each Local Authority Area in North Wales)

Graph 3: **Percentage of school aged children who report they drink alcohol, 2017/18**



Source: The Student Health and Wellbeing Survey 2017/18 (WG)

Each year since 2015/16, there are around 77 alcohol-specific admissions to hospital for under 18s in Betsi Cadwaladr University Health Board (BCUHB). 60% are females (the annual average numbers are 47 females, 29 males).

Adults:

There is higher prevalence of drinking above guidelines in males, across most ages and in many of the age groups, it is double that of females. With one in five older men and one in ten older women drinking enough to harm themselves.

Alcohol consumption is similar across income groups; however, for those living in deprivation there is a higher rate of alcohol related hospital admissions.

Local research[8] on binge drinking amongst 18-25 year olds in Wrexham identified:

- **80%** had preloaded on at least one night out in the previous 12 months
- **43%** agreed that 'a good night out means getting drunk'
- **88%** agreed that getting drunk is socially acceptable in Wrexham's nightlife
- **97%** thought that people on a night out in Wrexham typically reach a high level of drunkenness.

8 Butler, N., Quigg, Z., Bates, R., Ross-Houle, K., Hughes, K., Bellis, M.A. (2018) *STAD in Europe (SiE): Process and outcome evaluation of Wrexham's Drink Less Enjoy More intervention* Public Health Institute, Liverpool John Moores University

Awareness of risks:

Many people who choose to drink alcohol are aware that drinking alcohol carries a number of risks, both in terms of what it can do to a person's body and in terms of the risks associated with being drunk.

Parents as a positive influence on their children's attitudes to alcohol

The family is an important influence on children's views about normal and acceptable drinking. Young people who have parents/carers with less restrictive attitudes towards their alcohol use are more likely to start drinking alcohol than their peers. They are also more likely to drink and get drunk more frequently.[9]

Schools and colleges include alcohol education in the curriculum

Schools and colleges have an important role to play in helping children and young people consider the harmful consequences of alcohol. NICE recommends a whole school approach to alcohol including alcohol education in the curriculum.[10]

Alcohol industry marketing is regulated

There is good evidence that adolescents exposed to advertising are more likely to start to drink, or if they already drink to drink more.[11] There is some evidence between increases in advertising spend and adult alcohol consumption[9]. There is also evidence of a positive association between exposure to alcohol marketing and alcohol consumption.[9, 12]

What has been achieved so far?

- **"Drink Less Enjoy More"** This multi-agency harm reduction project in Wrexham addressed binge drinking among young people, with a focus on reducing preloading. It involved training bar staff; vulnerability training to young people and door staff; test purchasing and a public awareness campaign[13].
- **Insight pack** developed by North Wales Area Planning Board 'strategic partnership' to inform marketing messages to population segments.
- **All Wales School Liaison Core Programme** delivered to all primary and secondary schools throughout North Wales by School Community Police Officers.
- **Don't Touch Tell/Don't Drink Think programme** delivered to all primary schools across North Wales in a 3-year rolling programme (commissioned by APB, delivered by CAIS).
- **School policies for Substance Misuse** are in place across North Wales and provide a clear reference for teachers, families and pupils to identify where support is available and how schools respond to particular situations when they occur. However, there is variation in procedure across the policies.

9 Cambridge Institute of Public Health (2019) *Parents' lenient attitudes towards drinking linked to greater alcohol use among children* https://www.iph.cam.ac.uk/parents-lenient-attitudes-towards-drinking-linked-to-greater-alcohol-use-among-children/ Accessed June 2019

10 NICE (2017) '*Drug Misuse Prevention: targeted interventions NG64'* https://www.nice.org.uk/guidance/ng64 Accessed June 2019

11 Public Health England (2018) *The Public Health Burden of Alcohol and the Effectiveness and Cost-Effectiveness of Alcohol Control Policies An evidence review* https://www.gov.uk/government/publications/the-public-health-burden-of-alcohol-evidence-review

12 Brown, K. (2016) Association Between Alcohol Sports Sponsorship and Consumption: A Systematic Review Alcohol and Alcoholism 51 agw006. 10.1093/alcalc/agw006 https://www.researchgate.net/publication/295879464_Association_Between_Alcohol_Sports_Sponsorship_and_Consumption_A_Systematic_Review Accessed June 2019

13 http://allcatsrgrey.org.uk/wp/wpfb-file/wrexham-drink-less-enjoy-more-pilot-intervention-report-2018-pdf

- **Teacher training** is provided by CAIS (commissioned by APB) in the form of a two-day training programme for staff across the region.
- **Dry bar events** have been held by AGRO (Anglesey and Gwynedd Recovery Organisation) and the North Wales Recovery community.
- **Recognition of ACEs** and the part alcohol contributes to ACEs.

What will we do differently?

- Use data and insight to develop targeted educational messages that enable people to accurately assess their drinking patterns (including units consumed) and assist them in adhering to the Chief Medical Officers' drinking guideline.
- Deliver initiatives aimed at reducing preloading and serving alcohol to drunk people.
- Promote the availability of training to bar staff and door staff to enable them to effectively recognise the signs of vulnerability and how to support affected individuals.
- Promote strategies to parents and carers that will contribute to minimising harm to their children and promote social norms and positive attitudes around alcohol that contribute to their healthy and safe development.
- Promotion of alcohol-free drinks and development of dry bar events.
- Advocate for tighter regulation of alcohol advertising at a national level.
- Lobby for change to licensing requirements and application process.

Priority 3

Reduced Availability

We will reduce alcohol related crime, disorder and anti-social behaviour by preventing and tackling alcohol related offending by individuals and irresponsible alcohol retailing.

We will ensure that robust and appropriate statements of licensing policy are in place and compliance with them is tested.

What do we know?

Work focussed in the following areas has been proven to be successful in reducing alcohol related harms:

- Fewer areas with a high density of outlets selling alcohol.
- There are limits on the opening hours of outlets selling alcohol.
- Robust and appropriate statements of licensing policy are in place.
- Alcohol is not available for children aged 17 and under.

Density of Licensed Premises

Evidence shows that areas with a high concentration of outlets selling alcohol are associated with higher and more frequent levels of alcohol consumption, violence, injuries, road traffic crashes, disorder, sexually transmitted infections, child abuse and suicides. Areas of high deprivation are more likely to have high outlet density and this may contribute to health inequalities.

In general, as the density of off-licences in an area increases, so do alcohol specific [hospital] admissions in young people. Analysis has shown that nearly 10% of all alcohol specific hospital admissions in England, excluding London, are directly attributable to off-licence density; meaning availability rather than any other external factor is the cause of one in ten of such harms (One on every corner (2011).

There is evidence that limiting opening hours, and particularly late night opening hours of outlets selling alcohol reduces alcohol related harm.

Alcohol & Licensing policy

An effective licensing process is an important mechanism to control the availability of alcohol and minimise related harm. Local Pubwatch schemes have been implemented throughout the region - Its aim is to achieve a safer drinking environment in all licensed premises throughout the UK.

Alcohol and Children

Drinking under the age of 18 is associated with increased risk taking and health harming behaviour and a range of social, health and educational problems. Parents are one of the main sources of alcohol for underage drinking other common ways that children obtain alcohol are from friends, or to ask someone else to buy it. Developments in new technologies and social media also makes alcohol available beyond an average teenager's normal peer group.

What has been achieved so far?

Alcohol Related Violence Data Sharing -Partnership between Wrexham County Borough Council, North Wales Police, Welsh Ambulance Service NHS Trust, Public Health Wales and Betsi Cadwaladr University Health Board to share alcohol related violence data. An information sharing protocol has been signed and the first 12 months of data exchanged between partners has been collected and analysed, with the aim of identifying the scope and circumstances of alcohol related harm.

Test Purchasing – underage sales. Between April 2018 and March 2019, 27 premises in Wrexham were targeted, resulting in 11 failures. Similar exercises have been conducted in other local authorities.

Fake ID – Restorative Justice is a Wrexham programme for dealing with those individuals who use or facilitate the use of ID to gain access by under aged persons to licensed premises with the intention of purchasing alcohol. The programme has been live in Wrexham since January 2018. The system provides positive support to licensees and their staff, deters the use of false ID, improves compliance with underage drinking law and provides a single point of contact to reduce police involvement and resources.

Alcohol Licensing - At the last review of North Wales Licensing Policies information was included to reflect the links between alcohol and health. Since 2019 BCUHB, as a Responsible Authority, has been responding to licensing applications under the Licensing Act 2003.

What will we do differently?

Work to ensure that sufficient resources in place to ensure that the law on underage sales is effectively enforced.

Invest in the violence (including alcohol related violence) surveillance system developed by South Wales and managed by Public Health Wales. A good evidence base is essential to determine the extent of alcohol related harm and where resources should be directed. It can highlight whether a cumulative impact policy (CIP) should be implemented, for example, or consideration whether there should be limits on opening hours of outlets selling alcohol.

Develop data collection between partners to establish a pilot licensing tool to assist responsible authorities to respond effectively to licensing applications.

Lobby for change to licensing laws to reduce the impact of alcohol on communities.

Work towards ensuring that alcohol misuse is included on the agenda for event organisers to consider and that an organiser pack is developed and provided, which includes a risk assessment template.

Consideration to be given to working with substance misuse treatment providers to attend large events to promote awareness and education about substance misuse and encourage engagement with treatment where needed.

Priority 4

Reduced affordability

We will assist Welsh Government and Local Authorities to ensure that alcohol is not available at a very low cost per unit of alcohol.

What do we know?

There is clear evidence that price and affordability is a key factor in alcohol consumption and alcohol related harms to individuals and the wider community. Increasing the price of alcohol using a minimum pricing approach, provides a mechanism through which health improvement can be achieved as well as a reduction in the impacts of alcohol misuse.

There is evidence from a number of countries notably Canada, Finland, Sweden, USA and Scotland to demonstrate that in response to an increase in the minimum unit price (MUP) of alcohol there is a decrease in alcohol consumption and, more importantly in alcohol related harm and deaths. This has been borne out by Scotland which introduced minimum unit pricing for alcohol in 2018 and has since seen a drop in alcohol sales for the first time in 25 years.

Specific analysis has concluded that the benefits of introducing a minimum unit price for alcohol in Wales include:

- A reduction in alcohol consumption, alcohol related harm and costs associated with those harms.
- A positive impact on those who are hazardous and harmful drinkers.
- **A minimum unit price of £0.50 pence would boost the Welsh economy by £783m through reduction of illness, crime and workplace absence over a 20-year period.**

What has been achieved so far?

- Minimum unit pricing (MUP) forms an important part of Welsh Government's overall strategy for reducing alcohol-related harm, due to its ability to target the habits of those individuals who are most likely to suffer illness and death – those people who drink at hazardous and harmful levels, including young people. It is designed to target alcohol products, which are sold at very low prices relative to their alcohol content.
- In March 2019 Welsh Government introduced minimum unit pricing for alcohol (MUP) in Wales under the Public Health (Minimum Price for Alcohol) (Wales) Act 2018. The MUP is set at 50 pence, below which it is an offence for alcohol to be supplied by alcohol retailers. This is a proportionate response to tackling the health risks of excessive alcohol consumption, striking a balance between health benefits and intervention in the market.

What will we do differently?

- Work with Welsh Government and Local Authorities to ensure that appropriate monitoring and evaluation is in place to understand how MUP is working and what changes may be indicated, including elsewhere in the system.
- Support Local Authorities in the enforcement on MUP.

Priority 5

Support for behaviour change

We will improve individual's health and well-being through promoting healthier choices, the provision of early help to those wanting to change and effective alcohol recovery services for those who need them.

What do we know?

The Opinion & Lifestyle survey 2017 highlighted that 19% of drinkers in Wales reported very heavy binge drinking on the heaviest day of the previous week. Comparing the data for Wales in 2017 to the previous three years, there appears to be no clear pattern of decrease in heavy binge drinking and very heavy binge drinking.

In **North Wales 17.9%** of adults were drinking above the weekly guidelines in 2016/17 – 2017/18 which is lower than the Welsh average, however in **Gwynedd 20.2%** of adults were drinking above the recommended guidelines.

The alcohol specific mortality rate in Wales for 2015-17 per 100,000 was 12.5, with North Wales being slightly lower at 12.0.

Alcohol specific mortality per 100,000 during the 2015-17 period in north Wales was highest in the Isle of Anglesey (13.4) and lowest in Gwynedd (10.5).

Males aged 55-74 had the highest levels of drinking in Wales with around a third drinking above 14 units of alcohol in a usual week.

What has been achieved so far?

- Alcohol brief interventions: Under the 'Have a word' campaign, over 13,308 people in Wales have been trained to deliver Alcohol Brief Interventions.
- Kaleidoscope project delivering an integrated criminal justice substance misuse service across the six counties of North Wales and within the North Wales Custody Suites. Offering brief interventions, community mutual aid signposting, group work programmes and recovery workbooks.
- Multiple mutual aid and peer led groups across North Wales, including:
  - North Wales Recovery Community: based on the concept of mutual aid individuals are supported to develop the positive support network and social capital necessary to develop meaningful lives, breaking the cycle of substance use, offending and homelessness.
  - AGRO (Anglesey and Gwynedd Recovery Organisation): a volunteer-based organisation founded on the values of inclusivity and mutuality; it is an organisation run by people in recovery for people in recovery. More than three quarters of the organisation's Board are people in recovery or who have had experience of recovery; this provides for an approach that is truly recovery and member focused.
  - Cyfle Cymru peer mentors across North Wales help people to develop confidence, and provide support to access training, qualifications and work experience. Helping people affected by substance misuse and/or mental health conditions to gain the skills necessary to enter the world of work.
  - DAN24/7 Wales drug and alcohol helpline, providing advice and support for substance use issues, available 24hrs a day 7 days a week.
  - Champions House in Wrexham- a supportive environment for people seeking help to recover. Offers support from a local recovery network for anyone who is looking towards a future without addiction.
  - I CAN Centres offering emotional support, somebody to talk to and signposting to support services for people who present at North Wales' three Emergency Departments. They are available to people over the age of 18 who are experiencing emotional distress but don't need to be treated at an Emergency Department or by a Mental Health Practitioner.
  - The Department of Work and Pensions (DWP) identify and build relationships with local drug & alcohol treatment providers, mutual aid groups and peer led services and help them understand any changes in benefit rules or provide them with jobcentre practice. They encourage customers who disclose substance use issues to seek support through a local network of providers. Service users are able to apply for a 6-month drug & alcohol conditionality easement for those in structured recovery treatment.
  - Work & Health Programme delivered through Remploy across North Wales, offers tailored, community-based employment support for people with a disability or health condition (including alcohol addiction), and the long-term unemployed, to help them develop their skills and enter work.
  - Frequent flyer groups set up to provide analysis and subsequent support to individuals who attend Emergency Departments regularly with alcohol related issues.

What will we do differently?

Review current brief intervention programme, identify areas trained, numbers of staff trained, gain insight into barriers and facilitators to inform future planning of programme delivery, e.g. supporting staff to be released for training

Review evidence and statistics to identify specific areas in which the brief intervention programme would be beneficial and target those areas to receive brief intervention training:

- Across Wales approximately half of all alcohol attributable admissions noted some form of cardiovascular disease, link brief intervention training into relevant cardiovascular screening sites/initiatives.
- In Wales Males aged 55-74 had the highest level of drinking, link brief intervention training into the Wales Abdominal Aortic Aneurism screening programme (screens males aged 65) and other male orientated screening.
- Pharmacies.
- Consider areas such as beauty salons, hairdressers/barbers as has been developed within mental health awareness/suicide prevention.

Work jointly with partners to ensure referral pathways to alcohol treatment are clear and develop a 'no wrong door' system. Ensure all agencies are able to support any individual requiring alcohol assistance by giving up to date information, accurate and relevant advice and signposting to the most appropriate agency for that individual.

Monitor and review alcohol treatment and alcohol liaison service to ensure robust and comprehensive service delivery across North Wales.

Ensure that the 'Ask and Act' initiative is implemented and delivered in North Wales cognisant of alcohol frequently being a causative factor in domestic abuse and sexual violence. Ensure that where alcohol related domestic abuse is identified there are processes/ services in place which seek to address the issue.

Establish Alcohol Conditional Bail – in cases of more serious alcohol related offences e.g. assault and drink driving. When bailed from custody, the offender is made an appointment with the alcohol treatment provider who will assess for alcohol misuse/dependence and make a recommendation as to whether the offence was linked, and further interventions are required. This recommendation can then be used in the sentencing process and further treatment can be mandated.

Alcohol Treatment Requirements (ATR) – used for offenders with severe alcohol misuse or dependency who are at high-risk of re-offending because of their alcohol use. Individuals are identified by the probation service and their alcohol misuse is assessed while awaiting a court appearance; the treatment provider's recommendation is then included in the pre-sentence report and an ATR can be mandated as part of a community sentence.

Priority 6

Children, Young People and Families

We will protect children, young people and families from alcohol related harm and support them to achieve better outcomes through early identification, safeguarding and interventions.

What do we know?

Harmful amounts of alcohol have a detrimental effect on the unborn, children and young people. There is limited knowledge and understanding of Foetal Alcohol Spectrum Disorder (FASD). (BMA, 2016).

Risk factors for poor outcomes at age 2 include exposure to substances (Alcohol, tobacco and drugs).

25 pregnant women were referred to Health Board Substance Misuse Midwife in 2018/19.

Adverse Childhood Experiences (ACEs) are stressful events occurring during childhood, which include growing up in a household in which alcohol misuse is present. ACEs can have a detrimental impact on health across the life course, contributing to increased health inequalities and mortality.

Regular heavy drinking reduces the time and resource that parents are able to spend with their children and alcohol misuse is often a factor in cases of child abuse and neglect.

What has been achieved so far?

- A range of initiatives delivered through Local Authority departments, which support children, young persons and families with alcohol related problems such as Flying Start and Integrated Family Support Service.
- Pre-conception care offered to women in BCUHB Substance Misuse Services.
- Early Action Together (EAT) – Delivery of a home office funded Wales Nation Adverse Childhood Experiences (ACEs) approach to policing initiative to better understand the generational cycle of crime and address the lack of early intervention when ACEs are present.
- First 1000 Days Programme which seeks to ensure the best possible outcomes from every pregnancy for mother and child and that children are not exposed to or harmed by adverse childhood events caused by alcohol misuse.
- Alcohol awareness sessions take place in primary and secondary schools as part of a comprehensive substance misuse programme, delivered by the 'All Wales School Liaison Core Programme', the Healthy Schools' Team and In2Change substance misuse team.
- The APB commissions substance misuse services across North Wales to Children, Young People and Families; providing universal and prevention, prevention and early intervention as well as structured treatment services; providing specialist support/ treatment to young people identified as having substance misuse issues. Young person's Services are provided across the Region. Wrexham In2change and Inspire, Flintshire Sorted, Barnardo's Conwy and Denbighshire and Be di'r Sgor in the West.

- Commissioned Familial Services in each county seeking to reduce the negative impact of parental substance misuse and reduce the risk of young carers becoming involved in substance misuse themselves. The Families Affected by Parental Imprisonment Service is a further project looking to support families and children affected by parental imprisonment.
- A commissioned service between Child and Adolescent Mental Health Services (CAMHS) and District General Hospitals providing assessments and interventions for young people with substance misuse issues presenting at each of the three DGH in North Wales. Ensuring follow up and intervention on discharge.
- Training is available on a regular basis across North Wales, delivered by CAIS and available for Youth Services, Teachers and other Young person's facing Services to raise awareness of issues and signposting.
- Leaflets have been developed, supported by APB funding. Working with young people, a series of leaflets, were developed including an alcohol leaflet. DAN 24/7 also provides information and a helpline for young people to talk to or text. However, this resource needs to be further developed and promoted.

What will we do differently?

- Foetal Alcohol Spectrum Disorder awareness and educational campaign for health professionals and general public to raise awareness of the impact of alcohol on unborn babies.
- Establish selective preventative strategies aimed at women of childbearing age.
- Raise awareness with parents of the harmful effects of alcohol for children under the age of 18 years.
- Review utilisation of resources and support of DAN 24/7 to better raise awareness of the impacts of alcohol.
- Engage and listen to the voice of children and young people to inform the development of preventative measures on alcohol.
- Develop the role of parents in raising awareness of their alcohol use and the impact on children.
- Further develop maternity services to support families to address issues from an alcohol misuse perspective.
- Ensure that the impact of alcohol on the lives of excluded young people features as part of intervention programmes.

Implementation of the Strategy

This Strategy identifies actions that will rebalance the relationship that the population of North Wales has with alcohol. In order to affect that change and cultural shift to a place where non-drinking or a low level of alcohol consumption is valued and accepted as a norm, thereby reducing the harms associated with alcohol consumption, engagement across a range of bodies is required:

- Primary Care
- Health Board
- Local Authorities
- Police and Criminal Justice System
- Educational services and Services for Young People
- Hospitality/Leisure and retail outlets and other settings which sell alcohol
- Volunteer organisations and charitable bodies.

Local partnerships already exist which can form a focus for reducing the harms caused by alcohol misuse and are excellent examples of good practice. There is a need to build on that to create a better coordinated and multiagency collaborative approach to reducing alcohol related harm in North Wales. A strategic approach to communications needs to be adopted to ensure effective sharing of information, data and good practice across harm reduction initiatives in the region.

The Substance Misuse Needs Assessment and this Alcohol Harm Reduction Strategy set the foundation for the development of the APB Action Plan for tackling the impacts of alcohol misuse in North Wales over the next 5 years.

There need to be links between national policy and local area work. Delivery at the local level must retain the flexibility to meet local priorities whilst operating under the overarching strategy objectives of reducing harm. Local partnerships need to be able to tailor their approached to meet their particular needs of their communities in line with resources available.

A review of current commissioned services needs to be undertaken to ensure that they are meeting needs in light of the Substance Misuse Needs Assessment and to identify gaps in services for future commissioning activity.

More work needs to be undertaken in the early identification of those that are engaged in hazardous and harmful drinking and their subsequent transition to support networks to reduce the harms of alcohol.

A clear framework of directional indicators to work towards and monitoring arrangements needs to be developed, allowing measurement of progress toward the overarching objective of reducing harm.

There needs to be engagement with partners and the public in relationship to Minimum Unit Pricing to improve understanding and support continued lobbying for its introduction and implementation in the future.

Performance Indicators

Safe and supportive environments

Indicators:

- Alcohol-related recorded crime.
- Alcohol-related violent crime.
- Alcohol-related sexual crime.
- Alcohol-related antisocial behaviour.
- Reduction in crime and anti-social behaviour incidents in major towns centres of North Wales.
- Reduction in Drink-Driving offences.

Changed attitudes and social norms

Indicators:

- Accident and emergency attendances for alcohol.
- Proportion of adolescents using alcohol.
- Proportion of adults drinking above guidelines.
- Under-18 alcohol-specific hospital admissions.
- Alcohol-specific hospital admissions (working age adults 18-64).
- Alcohol-specific hospital admissions (older adults 65+).

Reduced availability

Indicator:

- No specific indicators for reduced availability but above indicators will be proxy measures.

Reduced affordability

Indicator:

- No specific indicators for reduced affordability but other indicators on this page will be proxy measures.

Support for behaviour change

Indicators:

- Proportion of adults drinking hazardously.
- Proportion of adults drinking harmfully.
- Number of people in treatment where alcohol was identified as their primary substance.
- Alcohol-related deaths.
- Reduction in alcohol related liver disease.
- Presentations for substance misuse treatment (alcohol).
- Successful completion of substance misuse treatment (alcohol).a
- Adults in substance misuse treatment who successfully engage in community based structured treatment following release from prison.

Families are supported and protected

Indicators:

- Reported cases of domestic abuse associated with alcohol misuse.
- Under-18 alcohol-specific hospital admissions.

Area Planning Board Members

Anglesey County Council
APB Commissioning and Development Team
Betsi Cadwaladr Public Health Team
Betsi Cadwaladr University Health Board
Conwy County Council & Social Services – Children and Young People
Denbighshire County Council & Social Services- Adults
Flintshire County Council
Gwynedd County Council
HMP Berwyn
Housing, Public Protection and Supporting People
National Probation Service
North Wales Community Safety Partnerships
North Wales Police
Office of the Police and Crime Commissioner (OPCC)
Service User Representation
The Host Organisations Head of Finance (Currently Wrexham County Borough Council)
Voluntary Sector
Wales Community Rehabilitation Company
Welsh Government
Wrexham County Borough Council

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