



Best buys for reducing alcohol-related harm

Jennie Connor
Professor, Preventive and Social Medicine
University of Otago

Strategies to reduce alcohol-related harms

- Alcohol policies : measures aimed at keeping the health and social harms from the use of alcohol to a minimum (WHO)
- Other policies
 - General road safety measures
 - Gun control
 - Educational opportunities
 - Reducing socioeconomic inequality, discrimination
 - Improving social services

Best buys amongst policies and programmes....

- Effectiveness
- Cost-effectiveness
- Feasibility and acceptability

Systematic reviews and meta-analyses

- Synthesising many different studies
 - Usually highest level of evidence
- policies that regulate the sale and supply of alcohol are most effective

Price

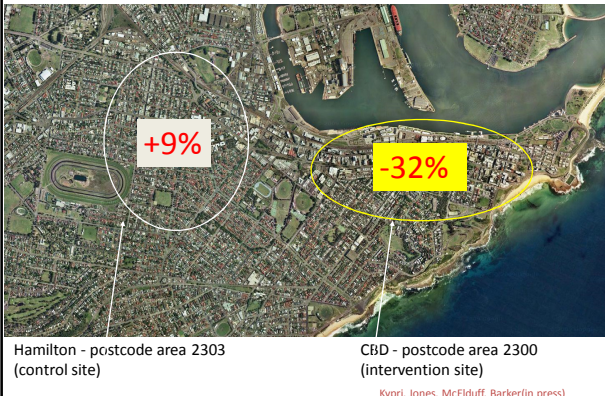
↓ Affordability

- Increase excise tax faster than inflation (1)
- Set minimum price to eliminate cheap strong beverages

Availability

- Licensing systems + enforcement (in lieu of government monopoly on sales (1))
- Minimum purchase/drinking age + enforcement on sellers (2)
- Reduce outlet density (2)
- Reduce hours and days of sale (3)

“The Newcastle experiment”



Marketing

- Reduce volume of advertising (1)
- Sponsorship
- Social media
- Stakeholder marketing
- Lobbying...

Road traffic environment

- ↑ Deterrence of drink driving
 - Lower legal BAC limits (1)
 - Random breath testing (1)
 - Additional restrictions on novice drivers (2)
 - Mandatory treatment (2)
 - Alcohol ignition locks (2)

Individual interventions

- Screening and Brief Intervention (SBI) (1)
- Organisational support for SBI (2)
- Cognitive Behavioural Therapy for dependence (1)
- Benzodiazepines for withdrawal (1)
- Glutamate inhibitors (Acamprosate) and opioid antagonists (Naltrexone) for dependence (1)

Summary - effective strategies

- Increasing price
- Decreasing availability
- Banning advertising
- Reducing drink driving
- Individual intervention for hazardous drinkers

School-based education does not reduce harm, but can raise awareness

Cost-effectiveness

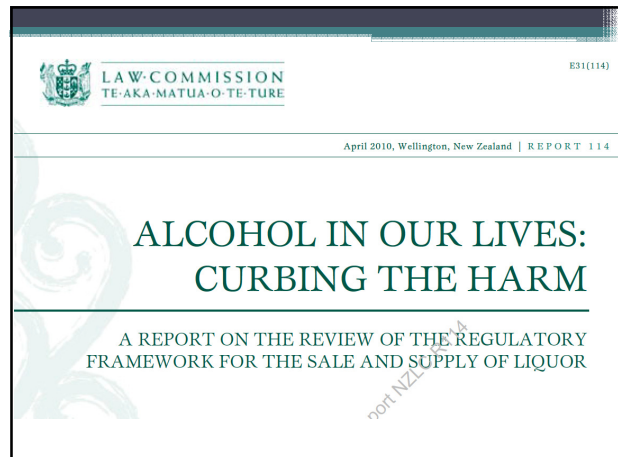
- If not effective cannot be cost-effective
- Population-based strategies are more cost-effective than individual-based strategies
- Tax increases are the most cost-effective of all
- Regulation of availability and advertising, and drivers, requires persistent enforcement

Summary - best buys

- Making alcohol more expensive
- Reducing availability
- Banning alcohol advertising

....are highly cost-effective

- Drink driving interventions
 - Individual interventions
-are effective but more expensive



An integrated package of policies is proposed in this report, the key elements of which are:

- a new Alcohol Harm Reduction Act to replace the Sale of Liquor Act 1989;
- increasing the price of alcohol through excise tax increases in order to consumption; **Increase price**
- regulating promotions that encourage increased consumption of alcohol; **Regulate promotion**
- moving, over time, to regulate alcohol advertising and sponsorship; **Regulate advertising and sponsorship**
- increasing the purchase age for alcohol to 20 years; **Increase purchase age to 20**
- strengthening the responsibility of parents supply;
- increasing personal responsibility for unacceptable or harmful behaviours induced by alcohol;
- cutting back the hours licensed premises are open; **Reduce opening hours**
- introducing new grounds upon which licences to sell alcohol can be declined;
- allowing more local input into licensing decisions through local alcohol policies and District Licensing Committees (the bodies we are recommending replace District Licensing Agencies);
- streamlining the enforcement of the alcohol laws and placing the overall decision-making in a new Alcohol Regulatory Authority (building on the existing Liquor Licensing Authority) presided over by District Court judges especially selected for the task; and
- a substantially improved and reorganised system for the treatment of people with alcohol problems. **Improved treatment**

Public support for reform, NZ, 2010

	Agree or Strongly Agree	Neutral	Total unopposed
Restriction on alcohol advertising or promotion seen or heard by young people	82%	14%	96%
Raising minimum purchasing age to 20	78%	9%	87%
Reducing the hours that alcohol can be sold	66%	18%	84%
Banning alcohol sponsorship for sporting, musical and cultural events that young people go to	59%	21%	80%
Raising the price of cheap alcohol	57%	19%	76%
Banning all alcohol advertising or promotion	50%	27%	77%
Number of liquor outlets	Too few 22%	About right 33%	Too many 65%

2010 Health and Lifestyles Survey: Alcohol Related Attitudes. Wellington: Health Sponsorship Council

Government proposals

I want to reduce harm, especially crime and victimisation, caused by heavy episodic drinking. I do not, however, want to unduly inconvenience low and moderate drinkers. My reform proposals therefore target those who drink excessively, particularly at licensed premises and in the public domain. [Simon Power in cabinet paper on reform]

No increased tax (or price control)

Minor changes to availability

No control of supermarket sales

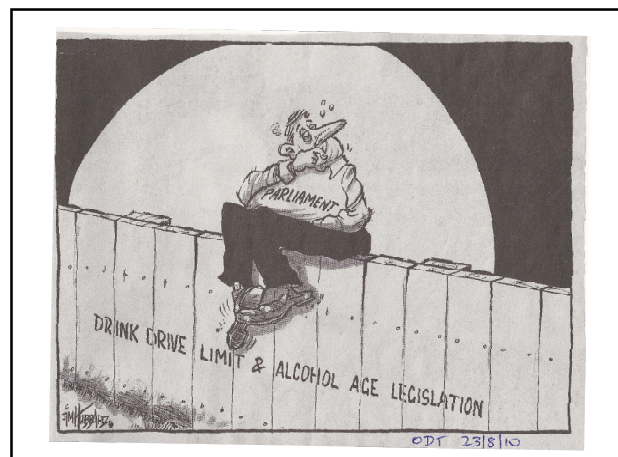
No major change to on-licence hours

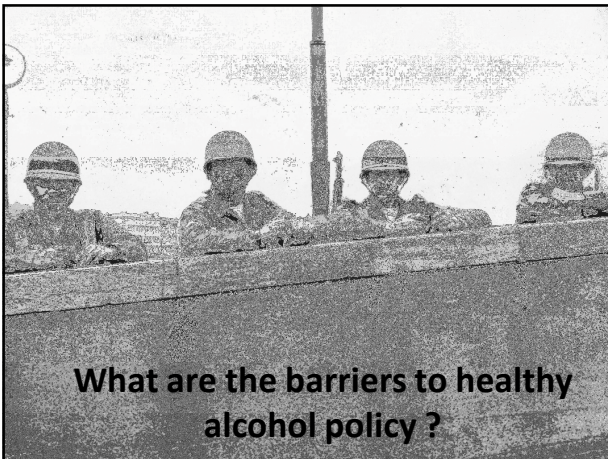
Minor restriction to off-licence hours

No control of promotion or marketing

Split purchase age proposal (conscience vote)

[No reduction in adult legal BAC limit]





Political resistance...themes

- Denial of the nature of the problem – ambivalence about alcohol
- Skepticism about effectiveness of policies
- Fear of backlash
- Political imagery

- Influence of the alcohol industry

Unfinished business

NZ policy

- Progress on politicising the issue in NZ – party policies
- Progress on education of politicians, the public, and the media about alcohol harm and strategies
- There is no more evidence that is required before we act
- More research could fill in gaps and change the emphasis (HtO) and keep the issue on the agenda
- Continued advocacy is required – ever broader based
- Need to make alcohol and election issue
- We still need the same policies...nothing has changed

“...the preconditions that facilitated development of a strong global and national response to the tobacco epidemic are also present for alcohol. These preconditions include: evidence of alcohol-related harm; evidence of cost-effective interventions and experience in implementation; understanding of strategies and tactics used by the industry; and pressure to change by NGOs”

“Therefore, taking action on alcohol remains a matter of political will—both nationally and internationally”.

Casswell and Thamarangsi, Lancet 2009; 373 : 2247-57

Key references

Babor et al, 2010

Anderson et al Lancet 2009; 373 : 2234-46

Alcohol and Global Health 2

Effectiveness and cost-effectiveness of policies and programmes to reduce the harm caused by alcohol

Peter Anderson, Dan Chisholm, Daniela Fuster

