

Targets established in the 2018 legislative programme to reduce our consumption by twenty percent are plausible but remain far from being obtained; adherence to the Department of Health/HSE low-risk guidelines on alcohol consumption indicates that a forty percent reduction should be targeted, if we are to exclude the significant public health risks arising.

In Ireland, over seven people each day, according to the Global Disease Burden data 2016, are dying from alcohol related illness. Acute and chronic alcohol misuse, and related emergency department and cirrhosis admissions, are the leading health consequences of the continuing availability of cheap, strong alcohol in our communities.

The cost to our society, where demands on public resources for health and housing are so acute, is greater than €3 billion per annum.

Vital action, stalled by the influence of vested interests, will have to be taken by a new government; spurious economic rationale cannot be allowed to trump the health of a nation. More widely, a renewed strategic vigour will have to be brought to bear on the many aspects of Ireland's continuing corrosive relationship with alcohol.

In this respect, Alcohol Action Ireland have produced a five-point plan, which we believe should form the basis of an action plan on alcohol for a new government and a Minister for Health within the 33rd Dáil to be elected on 8th February.



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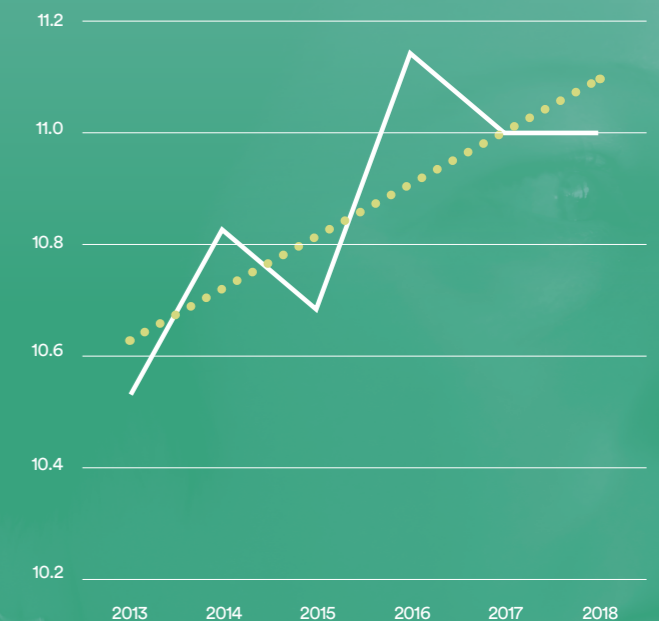
Election 2020

What we expect from the forthcoming 33rd Dáil and a new Government.

The 32nd Dáil witnessed considerable developments in alcohol policy. The passage of the Public Health (Alcohol) Act, 2018 was a significant marker in the history of addressing alcohol harm. For the first time, it establishes a suite of measures to reduce Ireland's consumption of alcohol through a set of controls and regulations to curb the demand and supply of alcohol across society.

Over the last decade, Ireland has made no progress in reducing our overall consumption, as we still drink 11 litres of pure alcohol per capita per year; over 60,000 children every year still fall victims to the tsunami of alcohol marketing and commence drinking, and all the while, over 200,000 children go to bed silently every night in homes where alcohol is the persistent source of trauma.

Annual alcohol consumption in Ireland 2013-18 as litres per capita (>15 yrs old)



1 Coherent implementation of the Public Health (Alcohol) Act 2018

While some elements of the legislation have been commenced, the central 'best-buys' of policy initiatives have yet to be made operational:

- Minimum Unit Pricing of alcohol products, which offers significant gains for public health, must be implemented immediately and, if possible, in tandem with the restored Northern Ireland Executive;
- Content of alcohol advertising, which will transform how alcohol is marketed at children;
- Broadcast watershed on alcohol advertisements, and
- the accurate labelling of all alcohol products

these must be advanced, and legally commenced, as a priority by a new government.

2 Establishment of a state-sponsored Office to lead on alcohol policy

In order to comprehensively address the impact of alcohol harm on Ireland's society and economy, there is a need to establish a statutory office within the Department of Health.

It is imperative that the Public Health (Alcohol) Act alone is not regarded as the panacea to Ireland's problems with alcohol.

There are multiple areas where alcohol misuse has effects across Irish society e.g. demand on our health and social services, workplace productivity, public safety and the highly destructive but most hidden of all, impacts on children and family life and the potential of future generations.

Addressing alcohol issues requires a co-ordinated 'whole-of-government' approach. The scale of the societal problem around alcohol is such that it now needs a dedicated focus to drive change, evaluate policy and gather data and research.

Furthermore, as this is a heavily contested environment, with a global alcohol industry actively working against the implementation of public health policy, a dedicated office with a statutory role could redress an imbalance of power and lend leadership to shaping global strategic policy initiatives.



3 A childhood free from alcohol harm

An important objective of a new government must be to strive to ensure that every child in Ireland can have a childhood free from alcohol harm. Protecting our children in their developing environment, raising awareness of parental alcohol misuse, and tackling underage drinking, are central to this task.

The impact of alcohol on children can have life-long implications. Children in Ireland are currently experiencing harm from alcohol in multiple ways, including:

- Exposure to alcohol during pregnancy
- Living in families where there is hazardous use of alcohol;
- Exposure to risk from others' high-risk alcohol consumption;
- Introduction to alcohol at too early an age.

Ireland is one of the top five countries with the highest estimated prevalence of alcohol use during pregnancy. It is estimated that 600 babies are born with Foetal Alcohol Syndrome each year and around 40,000 people are living with the condition.

Given the historical pattern of alcohol misuse in Ireland, where 1.34 million people are classified as having a harmful relationship with alcohol, we believe it is probable that 200,000 children today are likely to be living with the traumatic circumstances of a childhood damaged by parental drinking.

Forty percent of 15-17 year olds in Ireland are regularly drinking and have experienced being really drunk. By the time our children leave teenage years, 93% will have been enrolled to our enduring drinking culture, joining Ireland's young adults as the EU's No.1 binge drinkers.

The decoupling of alcohol and product sponsorship from popular culture and sport is central to breaking this enrolment cycle.

Many political and economic leaders across society place high expectations on our children to be the new entrepreneurs, the future scientists and the innovators yet we seem indifferent to the destruction alcohol has on such potential.

4 Services for all affected by alcohol harm

Whether one is seeking early intervention or a sustained period of treatment for dependency issues, traumatised by current or past adverse childhood experiences or coping with the difficulties of mental illnesses, access to timely public services is challenging.

Health Research Board data indicates that there are between 150–200,000 dependent drinkers in Ireland. International data suggests that at any one time, 10% of such a cohort (15,000 – 20,000) is likely to seek treatment. However, in Ireland only 3,500 new cases enter treatment per annum.

This indicates a critical shortage of alcohol treatment services and the need for a comprehensive review of existing services and the development of new initiatives:

• Development of Alcohol Care Teams

Alcohol care teams, developed in our acute hospitals, would reduce acute hospital admissions, readmissions and mortality, improve the quality and efficiency of alcohol care, and have key evidence-based, cost-effective and aspirational components.

A clinician-led, multidisciplinary team, with integrated alcohol treatment pathways across primary and community care, would coordinate and facilitate collaborative, multidisciplinary, person centred care.

• Services for those impacted by alcohol Harm to Others

AAI believes it probable that 400,000 people in Ireland are adult children from alcohol impacted families, and that a further 200,000 children today, are living with, and impacted by, alcohol related adverse childhood experiences. Such individuals and families need recognition and access to ongoing trauma-informed support services.

Adults with such experiences have poorer physical and mental health and share poorer social outcomes. However, the provision of accessible services especially before problems become deeply rooted has the potential to greatly reduce harm from alcohol.

• Alcohol and Mental Health Services

Alcohol has a significant impact on mental health. Alcohol and substance misuse tend to be higher in young men and are associated with increased suicide risk. Irish women are now drinking more, and more often, than in previous generations. It is noteworthy that women are proportionately more susceptible to depression, being affected by it at twice the rate of men.

We strongly recommend that a renewed strategy takes an integrated public health approach to providing person-centred services.

Critically, consideration must be given to increasing the levels of public funding available for alcohol treatment services to those dedicated to drug treatment services. Currently, significant proportions of available funding for drug preventative strategies and treatment programmes are solely devoted to the impact of illicit drugs.

5 Review Ireland's Low-risk Drinking Guidelines

Establish a scientific expert group to review Low-risk Drinking Guidelines for Ireland in light of global developments and the recent scientific evidence on risk. People have a right to accurate and timely information, and clear advice about alcohol and its health risks. The current guidelines were reviewed and agreed well over a decade ago, and revision is now required.

A new Government has a responsibility to ensure that this information is provided for citizens and reflects international best practice and understanding of the impact of alcohol on health and wellbeing.

Addressing Ireland's corrosive relationship with alcohol, and the impact of its related harms across all generations, in such a strategic manner, has the potential to transform the health and wellbeing of our society, reduce public expenditure and stimulate even greater economic and social progress for our nation.

