WHAT'S YOUR VIEW?
Findings from the South East Big Drink Debate
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**EXECUTIVE SUMMARY**

**INTRODUCTION**

**KEY FINDINGS**

**ALCOHOL CONSUMPTION IN THE SOUTH EAST**

— By region
— By gender
— By age

**IMPACT OF ALCOHOL CONSUMPTION**

— Health
— Crime and disorder
— Older drinkers
— Workplace and economy
— Local communities
EXECUTIVE SUMMARY
The debates generated lively discussion and captured a range of views. Topics included alcohol price and promotion, anti-social behaviour, understanding of units, adults drinking excessively in their home and the British alcohol and pub industry.

A six-point manifesto has now been set-out reflecting views expressed at the debates and highlights a vision for tackling alcohol issues in the region. The public are being asked to pledge their support for one or more of these points.

You can sign-up to the manifesto online and make comments: www.bigdrinkdebateSE.org.uk/manifesto until 31 January.

After this the next stage will be for the Big Drink Debate steering group – a diverse set of professionals and organisations – to consider the points selected by the public and plan what will be done to address these issues in the South East.

News and updates will be announced on the website, www.bigdrinkdebateSE.org.uk
INTRODUCTION
“ALTHOUGH THE SOUTH EAST ENJOYS A RELATIVELY GOOD STANDARD OF LIVING AND HEALTH, ALCOHOL CONSUMPTION AND ITS CONSEQUENCES FOR HEALTH AND SOCIAL WELL-BEING HAVE BECOME INCREASINGLY IMPORTANT ISSUES.”

The Big Drink Debate aims to understand the South East’s attitude to alcohol, how much people consume, how they perceive alcohol related health and social issues and what we can all collectively do to address the problems that come from excessive drinking. Working with a wide network of public, private and voluntary sector organisations, and the public, the project intends to seek views from across the region to develop a coordinated approach to tackling alcohol issues.

The South East Big Drink Debate covers Berkshire, Buckinghamshire, Oxfordshire, Hampshire and the Isle of Wight, Surrey, West Kent, Medway, Eastern and Coastal Kent, West Sussex, East Sussex Downs and Weald, Hastings and Rother and Brighton and Hove. It is led by NHS South Central, NHS South East Coast and the Government Office for the South East, with close involvement from police, the drinks industry, retailers and universities among others.

The long term aim of the South East Big Drink Debate is to inform alcohol priorities in the South East using a manifesto developed by the public and professionals. Findings from the research and debates have informed the manifesto outlined later. The public and organisations are encouraged to sign up – www.bigdrinkdebateSE.org.uk/manifesto.

This report, published in December 2009, outlines the aims of the South East Big Drink Debate, illustrates alcohol consumption across the region, consequences of excessive drinking and potential ways to tackle these issues in the South East. It contains key findings from data collected during an initial research phase, combined with findings from the two debates.

Background

Despite alcohol consumption falling in most wine producing countries it has been rising in recent years in the UK, which is now one of the heaviest alcohol consuming countries in the world (Institute of Alcohol Studies, 2009). Alcohol continues to be an integral and complex aspect of British culture.

Although the South East enjoys a relatively good standard of living and health, alcohol consumption and its consequences for health and social well-being have become increasingly important issues. The General Household Survey (2004) reports that the proportion of men (26%) and women (16%) in the South East region who drank on five or more days in the last week is higher than most other regions and is above the average for England. There are some differences within the region, with Surrey and Sussex peaking in consumption levels and women in the region drinking, on average, less than half the amount of alcohol consumed by men. However, the Health Survey for England (2004) suggests that women’s consumption levels are steadily rising both in the South East and across England.

As a result, it is likely that more people will suffer from alcohol related health issues than did twenty years ago, and that women will increasingly suffer from health and social problems associated with alcohol.

As well as health impacts, excessive drinking also affects crime and disorder. It is estimated that nearly half (45%) of all violent incidents are linked to alcohol and 37% of domestic violence cases involve alcohol (British Crime Survey 2007/08).

However, the benefits of pubs and the industry to culture and the economy shouldn’t be downplayed. Community pubs are one of Britain’s oldest and most popular institutions and attract many visitors to the UK. Most are small businesses, run by tenants, lessees and owners, and together they employ over 600,000 people (British Beer and Pub Association, 2009).
INTRODUCTION TO THE SOUTH EAST BIG DRINK DEBATE

“The first stage of research collected data already available from the NHS South Central and NHS South East coast regions and mapped it against criteria to draw out key themes.”

Research

The first stage of research collected data already available from the NHS South Central and NHS South East coast regions and mapped it against criteria to draw out key themes. Information was sought on drinking frequency and consumption, as well as on various attitudinal measures including motivations for drinking, what encourages people to reduce their drinking and perceptions of people who drink ‘too much’. The data that was available to do this was very varied in topic, depth, age and sample size.

Where appropriate to do so, national data has been included to supplement what was available locally. All national data quoted is the most up to date that is available. All sources are included at the end of this report (see references section).

After initial research had been carried out public opinion was captured at two events in Oxford and Maidstone, held on 19 and 24 November 2009. The debates were attended by 145 people from a range of different professional backgrounds including police, universities, voluntary organisations, retailers, schools and members of the general public.

The debate events focused on six main discussion topics:

- The 18 year old out on a Friday night or the 40 year old regularly drinking wine in the evening: whose drinking should we be more worried about?
- Alcohol is a dangerous influence on young people today
- Is it acceptable to drink excessively?
- The only way to reduce alcohol consumption is to place a minimum price on alcohol
- Workplaces have a responsibility to advise their staff on their drinking
- We should be proud of our drinking culture and industry

28% of people in Surrey are increasing risk drinkers – the highest rate in the South East (NWPHO, 2005)

16% of people in Slough are increasing risk drinkers – the lowest rate in the South East (NWPHO, 2005)
SUMMARY OF KEY FINDINGS
“PEOPLE AT THE DEBATES BELIEVE THAT HIGHER PRICING ON ALCOHOL WOULD HAVE THE BIGGEST IMPACT ON HELPING PEOPLE TO CUT DOWN THEIR DRINKING.”

The summary of findings highlighted here are discussed in more detail later in the report.

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<td>Men and women in the South East have relatively high rates of drinking compared to other regions, including London (see p11)</td>
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<td>A higher percentage of young people aged 16-24 regularly binge drink compared with older groups (see p13)</td>
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ALCOHOL CONSUMPTION IN THE SOUTH EAST
“IN THE SOUTH EAST, THE HIGHEST PERCENTAGE (28%) OF PEOPLE DRINKING AT INCREASING RISK LEVELS IS IN SURREY AND SUSSEX, AGAINST THE NATIONAL AVERAGE OF 24%.”

The consequences for health and social well-being through alcohol consumption are increasingly significant issues in the South East. According to the General Household Survey (GHS) (2004) the proportion of men (26%) and women (16%) in the South East who reported drinking on five or more days in the last week is higher than in most regions, including London and the North West and across England as a whole.

By region
Alcohol consumption patterns in the South East vary within the region, with the highest percentage (28%) of people drinking at increasing risk levels in Surrey and Sussex against the national average of 24% (Health Survey for England, 1994-2002). Increasing risk drinking is defined as regular consumption of between 22 units and 50 units of alcohol per week for males, and between 15 and 35 units of alcohol per week for females (North West Public Health Observatory from HSE, 2004). Hampshire and the Isle of Wight have the lowest percentage (20%) of people drinking at these levels.

Scaling down further, the local authorities which have the highest percentage of increasing risk drinkers in the South East can be found in Surrey (North West Public Health Observatory (NWPHO), 2005).

Highest proportion of increasing risk drinkers in Surrey:
• Runnymede (26%)
• Surrey Heath (26%)
• Guildford (26%)
• South East (21%)
(NWPHO, 2005)

Slough has the lowest (16%) number of increasing risk drinkers, followed by Thanet (17%) and Gravesham (18%).

In Surrey and Sussex, the proportion of women drinking more than 14 units per week is 22.8%, the highest level for women across the region (HSE, 1994-2002). Conversely, only 16% of women in Hampshire and the Isle of Wight are drinking at these levels.

In terms of higher risk drinking, defined as consumption of more than 50 units of alcohol per week for males, and more than 35 units of alcohol for females, (NWPHO, 2005) the highest proportion of adults drinking at these levels are in:
• Southampton (6%)
• Brighton and Hove (5.9%)
• Portsmouth (5.6%).

The lowest levels of higher risk drinking in the South East are in Winchester (2.9%) Wokingham (2.9%) and Hart (3%) compared to a regional average of 4%.
By gender

Gender differences in alcohol consumption across the South East can further be reflected in GHS data (2004). The percentage of men drinking more than 4 units on at least one day in the South East (36%) is similar to the national average (39%). Likewise, the proportion of women in the South East drinking more than 3 units on at least one day is the same as the national average (22%).

Drinking patterns between genders are also represented in binge drinking data. Binge drinking, where the amount consumed in one session is eight or more alcohol units for a man and six or more units for a woman, typifies the drinking habits of 22% of men and 10% of women in England (GHS, 2004). In the South East, binge drinking has lower rates compared to other regions, including the North East and Yorkshire and Humberside, but higher rates than London.

22.8% of women in Surrey and Sussex are drinking more than 14 units per week (HSE, 1994-2002)

22% the rate of binge drinking in Southampton and Oxford – the highest in the region (NWPHO, 2003-05)

16% of women in Hampshire and the Isle of Wight are drinking more than 14 units per week (HSE, 1994-2002)

2.9% of people in Winchester and Wokingham are drinking at higher risk levels – the lowest rate in the South East (NWPHO, 2005)
“ALTHOUGH THE VOLUME OF ALCOHOL CONSUMED TENDS TO DECREASE WITH AGE, OLDER GROUPS DRINK MORE REGULARLY THAN YOUNGER AGE GROUPS.”

By age

Across the region alcohol consumption patterns also fluctuate considerably with age. Although the volume of alcohol consumed tends to decrease with age, older groups drink more regularly than younger age groups.

Findings from the debate discussion (Figure 1.0) highlight that adults aged 30-60 are considered to be the most ‘problematic’ drinkers in the South East with 35% of the vote. Concern for drinkers aged 30-60 from the audience vote supports earlier evidence of this age group consuming alcohol the most regularly per week. Young adults drinking in town centres follows closely (31%), with older people and under 18s seen as not such a significant issue.

It is important to note that the definition of ‘problematic’ varies considerably from person to person. During discussion at the debates, some stated that this was simply drinking above the recommended guidelines, whereas for others, problematic was considered to be characterised by vomiting, memory loss or unconsciousness.

“Three groups are drinking more than previously: women in their twenties, people in late middle age, and those very young children who commence drinking early.”

Dr Yvonne Doyle, Regional Director of Public Health, NHS South East Coast

45 yrs

or more is the age of men in Surrey who consume alcohol the most regularly in a week (Surrey Big Drink Debate Survey, 2009)

55-64

year olds in Milton Keynes had the highest drinking prevalence (Milton Keynes Lifestyle Survey 2007)
“IN SURREY, FEMALES AGED 45 YEARS AND OVER DRANK ALCOHOL MORE REGULARLY THAN YOUNGER FEMALES.”

According to the Surrey Big Drink Debate Survey (2009) men in Surrey aged 45 years old and over were found to consume alcohol the most regularly in a week. Females aged 45 years old and over also drank alcohol more regularly than younger females. Of all age groups, 18-24 year olds were reported to consume the greatest volume of alcohol in one week but in relation to other ages, consumed it less frequently i.e. binge drinking. The results also indicate that older women in Surrey consumed less alcohol than their male counterparts, while young women (aged 18-24 years old) consumed more alcohol than women of other ages.

Evidence from Milton Keynes Lifestyle Survey (2007) shows the highest drinking prevalence in 55-64 year olds. Conversely the age group with the highest prevalence of binge drinking is 18-24 year olds, with a third of this group (36%) reporting doing so.

Compared with older age groups, a higher proportion of young people aged 16-24 regularly binge drink (more than 8 units of alcohol in one day for men, and more than 6 units of alcohol in one day for women) (GHS, 2004). Although nationally binge drinking does appear to be going down among young adults, it is more common among young men than young women. In the South East 20% of men binge drink compared with 9% of females in the region (GHS, 2004). However, twice as many young women aged 16-24 binge drink than those in the 25-44 age group, and four times more than the proportion of 45-64 year olds.

Although the South East has a high proportion of increasing risk drinkers, particularly in Surrey and Sussex, and higher rates of binge drinking than London, the majority of respondents at the debates felt that it is never acceptable to get drunk. Nearly half (48%) of respondents believed that it is never acceptable to get drunk and only 9% thought it was acceptable to get drunk whenever you want (Figure 1.1).
IMPACT OF ALCOHOL CONSUMPTION
While there have been some changes, the UK drinking culture still reflects the excessive drinking pattern characteristic of Northern Europe with, in consequence, relatively high rates of alcohol related hospital admissions and alcohol related crime. The annual number of alcohol related deaths in the UK more than doubled between 1991 and 2005 (Office for National Statistics, 2006) and nationally there are 1.2 million instances of alcohol related violence per year (Interim analytical report, Strategy Unit, 2003).
IN THE SOUTH EAST THE IMPACT OF PROBLEM ALCOHOL use on the health and well-being of the population can be measured by looking at alcohol related hospital admission data (Department of Health/Association of Public Health Observatories, 2008/9). As shown in Figure 2.0, a number of areas in the South East, including Eastbourne (1,874), Portsmouth (1,794), Thanet (1,749), Haslings (1,728), Brighton and Hove (1,708), Rushmoor (1,701) and Worthing (1,561), have alcohol-related hospital admission rates above the national average (1,582.7).

The lowest alcohol related hospital admission rates can be found in the Isle of Wight where less than half (784.3) of the national average are admitted per 100,000 population.

As well as health impacts, excessive drinking has a significant effect on crime and disorder. However the rate of alcohol related crime in the South East is lower than in England as a whole.

The highest rates of alcohol related crime within the region per 1,000 population are seen in:
• Slough (17.3)
• Reading (16.8)
• Southampton (16.1)

The lowest rates of alcohol related crime within the region per 1,000 population are seen in:
• Wealden (3.1)
• Waverley (3.7)
• Mid Sussex (3.7)
• South East (7.9)
• England (8.6)

Likewise, alcohol related violent crime in the South East (5.9) is lower than in England as a whole (6) and considerably lower than in London (8.5).

Drawing on earlier insights around more frequent alcohol consumption rates in older drinker groups, compared with younger drinkers in the region, discussion from the debates highlighted concern about the impact of older drinkers on both health and crime statistics.

Likewise, alcohol related violent crime in the South East (5.9) is lower than in England as a whole (6) and considerably lower than in London (8.5).

Alcohol and its impact on the workplace and economy is another significant issue. Loss of productivity, early retirement, accidents at work and increased sickness absence are some of the ways in which alcohol impacts. It is estimated that seventeen million working days are lost each year due to alcohol related sickness absence at a cost to the country of £6.4 billion per annum (The Strategy Unit, 2003).
Local communities

However, despite the negative impact of excessive drinking on some areas, the alcohol industry is also a major contributor to the economy and pubs often play a bigger role than just being private businesses. Pubs add more value to economies than beer sold through shops and supermarkets because they generate more jobs (Public Policy Research, 2009). Over 600,000 people rely on beer and pubs for their employment (British Beer and Pub Association, 2009).

As well as providing funding to the economy, research conducted by the Campaign for Real Ale (CAMRA, 2008) shows that 84% of people believe a pub is as essential to village life as a shop or post office and that they play an important role in the heart of their local communities.

Audience members at the debates were asked to vote on what worried them most about alcohol related issues in the region (Figure 2.1). Antisocial behaviour was the biggest concern (21%), followed by underage drinking (20%) and health (18%).

Comments from audience and panel members also highlighted additional concerns about alcohol related issues, particularly relating to young people.

A panel representative from Turning Point, the UK’s leading social care organisation, also agreed that alcohol is a dangerous influence on young people today.

“I think alcohol is a dangerous influence but it doesn’t have to be. I don’t think we can blame young people picking up these messages which are brought out through intense targeted marketing and projected through mass popular culture.”

Ben Whittaker, Vice President Welfare, National Union of Students

“I should be proud of our great pubs and breweries. What has happened is that other drinks have come in and the culture has changed. Spirit consumption has shot up and we need to be careful not to alienate moderate people. We have something to be proud of and we cannot flush this away.”

Iain Loe, Research and Information Manager, Campaign for Real Ale

“The experience of young people is that you go out and drink as much as you can. Children who see parents drinking harmfully miss school and this is damaging. Turning Point research found that there are 1 in 11 children living with parents who misuse alcohol. We also see people in their twenties attending rehab.”

Peter Lock, Regional Manager for Substance Misuse Services, Turning Point

Figure 2.1
Debate question
Are you worried about any of the following alcohol-related issues?

- Alcohol advertising 9%
- Antisocial behaviour 8%
- Closing of local pubs 5%
- Health 20%
- The Gov. telling me how much to drink 18%
- Underage drinking 18%
- Violence 1%
- None of the above 1%
TACKLING EXCESSIVE DRINKING
“DISCUSSION WAS PROVOKED AROUND THE FEASIBILITY OF MINIMUM PRICING.”

Higher pricing on alcohol
To tackle excessive drinking in the South East a number of themes emerged from the debate discussions. As highlighted in Figure 3.0 the biggest factor which audience members perceived would encourage people to stop drinking is placing higher prices on alcohol. Nearly 35% of respondents thought that higher pricing would impact on alcohol consumption levels in the South East.

A number of audience members at the debates argued that alcohol is too cheap and price does affect how much people drink.

“Higher pricing on alcohol to tackle excessive drinking in the South East a number of themes emerged from the debate discussions. As highlighted in Figure 3.0 the biggest factor which audience members perceived would encourage people to stop drinking is placing higher prices on alcohol. Nearly 35% of respondents thought that higher pricing would impact on alcohol consumption levels in the South East. A number of audience members at the debates argued that alcohol is too cheap and price does affect how much people drink.

“Molson Coors believes that minimum pricing is worth exploring. But the devil is in the detail and we need to be very careful of unintended consequences. If you drive alcohol prices too high, the consumption simply goes underground. For example, in many countries up to 50% of the consumption can be non-commercial (personal imports, smuggled, home brewed or illegally produced). This not only means that legitimate producers lose business but Government tax revenue falls and there can be serious quality problems. In many countries, deaths from drinking illegal alcohol can be a serious problem.”

Paul Hegarty, Head of Corporate Communication, Molson Coors Brewery

“‘One person’s irresponsible promotion is another person’s good deal for the weekend. On minimum pricing, we need to look at the patterns of consumption; many countries in which alcohol is cheapest don’t have a binge drinking problem. We need to look at cultural aspects to drinking and get out of the fixation that increasing the price of alcohol automatically solves the problem of alcohol misuse.”

Gavin Parlington, Head of Communications, Wine and Spirit Trade Association

From a health perspective Dr Yvonne Doyle, Regional Director of Public Health for NHS South East Coast said: “Irresponsible promotions are harmful, particularly to young people. It is now possible to buy alcohol in large quantities well within the pocket money of many children and teenagers. This is a concern to me as heavy drinking in later life often commences with binge drinking at very young ages.”

“Higher prices
Limiting shop purchases
Less alcohol advertising
More information on health and social consequences
A change in licensing hours

Figure 3.0
Debate question
What do you think would encourage people to cut down the amount they drink?

34% 15% 29% 11%
0% 5% 10% 15% 20% 25% 30% 35%
“ALMOST 30% OF AUDIENCE MEMBERS THOUGHT THAT INFORMATION ON HEALTH AND SOCIAL CONSEQUENCES COULD HELP TO TACKLE EXCESSIVE DRINKING.”

Less alcohol promotion and advertising

Some panel and audience members argued that irresponsible alcohol advertising, particularly to young people, drives alcohol consumption in this group.

Ben Whittaker, Vice President Welfare, NUS, said “We should have serious concerns about the way in which the industry try and develop brands for life, and targeted campaigns that only encourage people to drink more than the healthy limits of alcohol. I think we should worry about the drinking culture in Britain and the industry has some part to play.”

“The main reason they advertise is to drive premium products, otherwise people will buy products based on price. We make sure we arrange our advertising so that we over index on adults. Any advertising that goes to children who can’t buy our products is wasted money. The alcohol industry is keen to promote responsible drinking as it is in our commercial interest.”

Paul Hegarty, Head of Corporate Communication, Molson Coors Brewery

Education and culture change

Almost 30% of audience members thought that information on health and social consequences could help to tackle excessive drinking.

A county council representative said: “In the beginning parents do have an influence on how kids see alcohol. I would like to see more work with parents in helping them educate their children about alcohol, particularly parents who are not aware of the impacts of alcohol.” Supporting this idea, another audience member asserted: “The key to changing attitudes is education; we need to prepare children to treat alcohol with respect by the time they reach 18.”

“Real ale or quality wine is something to be savoured, and this is what needs to be communicated. It is trying to get appreciation of taste across through education from parents and schools.”

Iain Loe, Research and Information Manager, Campaign for Real Ale

Workplace

The majority of respondents (52%) at the debate believed that workplaces do have a responsibility to advise staff on their drinking, but only if this interferes with their work (Figure 3.1). 41% of people answered ‘yes’ when asked about whether employers have a responsibility to advise staff on their drinking.

“There is evidence that workplace policies can have a real benefit for people who have alcohol dependencies and offer valuable support to them, and it is one of the ways we can really start to shift the culture away from one of indifference.”

Professor John Newton, Regional Director of Public Health, NHS South Central

Comments from the audience suggested that alcohol is related to workplace stress, levelling that workplaces contribute to people’s alcohol intake.

Ben Whittaker, Vice President Welfare, NUS, agreed that employers can make a real difference and ensure that employees are looked after through clear commitments to health and wellbeing in the workplace. “We know, especially at times like Christmas, the party season starts – employers should look to do more than just put 5500 behind the bar.”

“The main reason they advertise is to drive premium products, otherwise people will buy products based on price. We make sure we arrange our advertising so that we over index on adults. Any advertising that goes to children who can’t buy our products is wasted money. The alcohol industry is keen to promote responsible drinking as it is in our commercial interest.”

Paul Hegarty, Head of Corporate Communication, Molson Coors Brewery

Discussion closed with a suggestion from an audience member on the importance of an effective workplace policy. “I believe if we all have workplace policies for alcohol that actually include teaching and training for staff, rather than have a policy that nobody looks at, we would really get somewhere with tackling the problem of alcohol in the workplace.”
“WHilst alcohol is something that features in the lives of most of the local population and is an integral part of socialising and celebration, the damage that it can, and does cause when enjoyed to excess should be considered.”

The South East Big Drink Debate has shown that the opinions and drinking behaviours of the residents of the South East are diverse. Alcohol is something that is enjoyed by the vast majority of adults across the region and pubs form an important part of our local community and culture. It is also important to acknowledge the contribution to the economy and employment the industry itself makes.

Whilst alcohol is something that features in the lives of most of the local population and is an integral part of socialising and celebration, the damage that it can, and does cause when enjoyed to excess should be considered. This manifests itself not just in accident and emergency departments on a Friday and Saturday night but also in people’s homes in the form of domestic abuse, conflict and family breakdown.

Regional alcohol experts and the public alike have aired concerns around not just binge drinking younger people, but also older adults at home frequently consuming alcohol, often unaware of the number of units they are having and the harm that it could be doing to their long term health. It is these ‘quieter’ drinkers that impact most heavily on the hospital admission figures and costs to the NHS.

The South East has a relatively high rate of drinking compared to other regions of the country and contributors to the Big Drink Debate generally indicated that the damage that is caused by this is something that needs to be addressed.

The South East Big Drink Debate manifesto (see page 25) considers the issues that people said were most important and how they would like to see these addressed.

Please visit the Big Drink Debate website to pledge your support to the manifesto: www.bigdrinkdebateSE.org.uk/manifesto

On the website you can state which manifesto points you agree with. Professionals across the region will use the manifesto points garnering the most support to inform their alcohol campaigns and policy.

All news and updates will be announced on the website in 2010.
This manifesto crystallises the views of the many members of the public and professionals from across the South East who engaged in the Big Drink Debate in autumn 2009. It sets out their vision for addressing alcohol-related issues in the South East, enabling local people to confirm their support and help inform future alcohol priorities.

1. Recognise hidden harms
Families and relationships can be devastated by the effects of problem drinking. The debates showed growing concern from public and professionals about alcohol-related family breakdown, and the way in which alcohol can exacerbate domestic abuse. We must acknowledge that some impacts of excessive drinking are less visible than others and work with professional bodies to help them tackle these.

2. Looking beyond young adults
Although it is young adults that are often identified with problem drinking, in this region it is older adults who consume more alcohol, more regularly, damaging their long-term health and impacting on public services. We must work together to highlight the risks of regular drinking above the guidelines in adults of all ages.

3. Curb irresponsible promotions
The debates highlighted concern over irresponsible marketing of alcohol to children and young people or at very low prices. They also highlighted that a minimum pricing approach could help curb excessive drinking, especially by those drinking at the most harmful levels. The feasibility of introducing minimum pricing and other ways of curbing irresponsible promotions should be explored.

4. Tackle anti-social behaviour
Despite the South East being one of the safest regions in the country, there are many alcohol-related violent crimes each year and communities are reporting concerns about anti-social behaviour. We must continue to support police forces across the South East in tackling behaviour that harms individuals and communities.

5. Support workplaces
Employers have a duty of care to their staff when it comes to alcohol. We want to help employers develop appropriate and supportive policies and to advise their staff on alcohol-related issues.

6. Working together
We must unite as a region to address alcohol related harm. Public and professionals must share a common purpose to bring about real change.

Do you agree with the manifesto? Your view is important.

To show your agreement for one or more of the six manifesto points here, go to www.bigdrinkdebateSE.org.uk/manifesto

Please note that the Big Drink Debate report and resulting manifesto represent opinions aired at the two events, supported by existing regional research into alcohol-related issues. They do not necessarily reflect the opinions of the members of the project’s steering group, or the organisations they represent.
ACKNOWLEDGEMENTS

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Stakeholder organisations
Action for Change
Addaction
Bower Mount Clinic
Buckinghamshire County Council
Buckinghamshire Drug and Alcohol Action Team
Diageo
Drinkaware
CAMRA
Canterbury City Council
Co-op Group
Dartford Borough Council
East Sussex County Council
Equinox
Foetal Alcohol Spectrum Disorder Trust
Government Office for the South East
HMP Maidstone
Kenward Trust
Kent County Council
Kent Messenger
Kent Police
Kent University
Kent and Medway Community Alcohol Service
Maidstone Alcohol Support Group
Maidstone Borough Council
Medway Council
Medway PCT
National Union of Students
NHS Brighton and Hove
NHS Eastern and Coast Kent
NHS Hampshire
NHS South Central
NHS South East Coast
NHS West Kent
NHS West Sussex
NSPCC
One Stop Stores
Oxford Brookes University Student Union
Oxfordshire County Council
Oxford Conservative Pensioners
Oxfordshire Local Education Authority
Oxford Night Shelter
Oxford Pub Watch
Reading Borough Council
Reading Pub Watch
Riverside Youth Centre
Salvation Army
Sittingbourne Community College
Shepherd Neame Brewery
South East Public Health Observatory
Stonepillow
Sussex Police
Swale Borough Council
Thames Valley Police
The Centre for Public Innovation
The Stroke Association
Tonbridge and Malling Borough Council
Turning Point
University of Oxford
University of Reading
Urban Blue Community Bus
Valley Park Community School
West Sussex Drug and Alcohol Action Team
West Sussex Youth Service
Wine and Spirit Trade Association
YMCA
References


Institute for Alcohol Studies, 2009. Alcohol Consumption and Harm in the UK and EU.


Glossary

• Increasing risk drinking: regular consumption of between 22 units and 50 units of alcohol per week for males, and between 15 and 35 units of alcohol per week for females (North West Public Health Observatory from HSE)

• Higher risk drinking: regular consumption of more than 50 units of alcohol per week for males, and more than 35 units of alcohol per female (North West Public Health Observatory)

• Binge drinking: where the amount consumed in one session is eight or more alcohol units for a man and six or more units for a woman (North West Public Health Observatory)