No Half-Measures

A report on the impact of alcohol misuse on the work of emergency service and emergency healthcare workers.

November 2003

The Alcohol Harm Reduction Group

Contents

Foreword

Alcohol Concern, Turning Point and the London Drug and Alcohol Network have joined forces to form the Alcohol Harm Reduction Group, a coalition created to set up and manage a series of projects, funded by Comic Relief, to encourage and inform the implementation of a comprehensive National Alcohol Harm Reduction Strategy for England. The research presented in this report powerfully illustrates the extent of excessive drinking in England and demonstrates the urgent need for new thinking on how to tackle alcohol misuse.

Judging by the comments and experiences reported in this document, those working on the frontline of public health and public safety are struggling to cope with the fallout from our nation's drink problem. The violence, disorder, illness and injury that is the inevitable result of excessive and dangerous drinking on this scale leads to an enormously increased workload, and not inconsiderable personal risk, for emergency service workers.

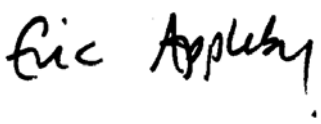
This report not only demonstrates the worrying extent of excessive drinking and the impact that it has on society, but also the strong desire of the public to see the Government act to alleviate the problem. Furthermore, it reveals a shocking lack of public knowledge about what constitutes sensible drinking, undermining the Government's own guidelines.

In response to the increased profile of so-called "binge drinking" this year, some commentators have argued that decisions on how we drink are the responsibility of the individual alone, with neither other individuals nor society at large having the right to interfere. This research explodes that myth. Alcohol misuse does not only affect a small minority of people, it is a problem directly involving millions of people around the country, with repercussions affecting us all, regardless of age or class.

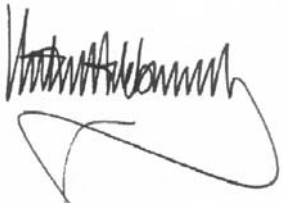
Our emergency services are frequently derided by the media and the public as being inadequate, but so long as the public and the Government insist on relying on already overstretched police and paramedics for the management of our evening economy, we can surely not be too expectant of significant service improvements.

This additional strain placed on our emergency services means diverting scant resources from other vital public service priorities – other members of the public taken ill and other victims of crime. This is proof, if more proof was needed, that alcohol misuse should be a matter of serious concern for the whole country.

The Alcohol Harm Reduction Group has published a series of recommendations for what the Government must include in its, now overdue, National Alcohol Harm Reduction Strategy to tackle alcohol misuse and relieve the pressure on our public services. We strongly urge that the Government stands firm in its intention to address alcohol-related harm in England - half-measures are not an option.



Eric Appleby
Chief Executive,
Alcohol Concern



Lord Adebowale
Chief Executive,
Turning Point

Shona Beaton
Chief Executive,

Introduction

In 2002, the Prime Minister announced that he had tasked the Cabinet Office (Strategy Unit) with the drafting of a National Alcohol Harm Reduction Strategy for England. This announcement represented the culmination of many years work for campaigners in the alcohol sector, including Alcohol Concern, Turning Point and the London Drug and Alcohol Network.

In Britain, policy relating to alcohol has been spread across different departments and different levels of Government, with little in the way of a strategic vision to draw together relating strands of policy, such as licensing, policing and healthcare. Policies regarding the production, sale and consumption of alcohol have not changed significantly since the First World War.

The social and public health problems relating to alcohol misuse have, however, grown to alarming levels. With the devolved Government's of Scotland and Wales already having taken measures to address these 'alcohol-related harms', the UK national Government tasked the Strategy Unit first with gauging the extent of the country's alcohol problem, and secondly with drawing up a strategy to reduce these harms in England.

Alcohol-related harm in Britain

In September, the Cabinet Office (Strategy Unit) published its *Interim Analytical Report*, which outlined the effects of alcohol misuse in Britain. It estimated that the total cost of individual, social and economic harms in the UK stemming from the misuse of alcohol could be as much as £20 billion every year[i].

It is not difficult to envisage why this figure is so high. According to the report, up to 22,000 a year die as a result of alcohol misuse and it detrimentally affects the health of millions of others.[ii] We have one of the biggest 'binge drinking' problems in Europe, with our young people drinking more, faster and from a younger age than elsewhere on the continent. There are over one million violent incidents related to alcohol every year in the UK, many taking place in or around licensed premises.[iii] High rates of family breakdown, domestic violence, sexual assaults, underage sex and teenage pregnancy are all social phenomena which can be strongly linked to alcohol misuse.

Throughout the summer and autumn of 2003, alcohol misuse, and specifically binge drinking amongst the young, has had a high profile in the media and has stirred up a lively national debate about the British drinking culture. A society previously very resistant to interference in its drinking habits has seemingly begun to recognise that a serious problem exists.

Marked public concern

A recent MORI poll, carried out for Alcohol Concern on behalf of the Alcohol harm Reduction Group, showed a high level of public concern about the impact of the British drinking culture. In the poll, we asked the respondents if they were concerned about 'binge drinking', drunkenness and disorderly behaviour among British people:

- A clear majority (78%) said that they were concerned, with 43% declaring themselves "very concerned"
- Concern was greater among older age groups, with 92% of the 55+s saying that they were concerned
- However concern was high even amongst a younger age group - 66% in the 16-34 age [iv]

Binge drinking resulting in drunkenness has been cited as one of the main causes of anti-social behaviour and violence. The Interim Analytical Report explains that alcohol intoxication can result in changes in mood and emotion and may induce a range of other short-term psychological and psychomotor effects, including impaired coordination, lengthened reaction time, increased risk-taking and decreased responsiveness to social expectations.[v]

The report on *The Evening Economy and the Urban Renaissance*, published in July 2003 by the House of Commons Housing, Planning, Local Government and the Regions Select Committee[vi], expressed concern that the evening economy in town and city centres focuses very much on young people going out drinking, to the exclusion of older groups, and that this focus contributed to high levels of crime and disorder.

This point is illustrated very strongly by figures from the MORI poll. MORI asked the British public how regularly they visited their local town or city centre, for any activity, during the evening. The results were as follows:

- Of the respondents, it was those in the 16-34 age group, who visited their local town or city centre in the evening most often, with 45% going "at least once a week"
- Half (50%) of respondents answered "less than once a month", or "never"
- In the 35-54 age group, there was a big drop to 25% of respondents who said that they visited their local town or city centre once a week or more often. This figure was down to only 15% for those aged 55+, with 71% of that age group claiming to visit their local town centre in the evening "less than once a month", or "never"[vii]

These figures clearly confirm the view of the Select Committee that much of the adult population is not involved in the evening economy, with younger age groups making the most use of the available amenities. This dominance of young drinkers in the evening economy is despite the availability in many town and city centres of evening activities such as cinema and theatre going, restaurants and bingo.

The House of Commons Housing, Planning, Local Government and the Regions Select Committee recommended that local authorities take measures to encourage the development of more diverse local evening economies to draw a more mixed range of people into our town and city centres in order to minimise the likelihood of alcohol-related violence and disorder.

This report

To investigate the extent of the alcohol problem existing in England at the moment, particularly the problem among the young, Alcohol Concern has, as part of the Alcohol Harm Reduction Group's '*No Half Measures'* campaign, carried out a research project designed to illustrate the seriousness of the alcohol misuse problem in Britain.[viii]

Across the whole range of harms caused by alcohol misuse, from liver cirrhosis to car accidents to casual violence, it is the country's public services and public service workers who are in the front line. They are ideally placed to offer informed views about the nature of Britain's alcohol problem.

We canvassed these views by carrying out a consultation of police, paramedics, senior A&E clinical staff and fire fighters. We recorded the opinions of emergency service workers on issues relating to alcohol misuse, including the extent of the problem, the role of young people in that problem, and the effect that it has on the ability of their services to carry out their roles effectively.

This consultation included:

- A series of focus groups held around England, involving police officers, paramedics and fire fighters

- A telephone poll of senior/lead consultants in Accident and Emergency departments and police Sergeants in police stations around England

The results of the consultation are summarised in the following four sections. The full results of the consultation are shown in Appendices 1, 2 and 3.

This research aims to highlight the importance of a comprehensive National Alcohol Harm Reduction Strategy being published and implemented as soon as possible.

Policing

Alcohol and crime and disorder

It is a clear and unequivocal finding from the consultation that alcohol misuse plays a very significant role in crime and disorder. 88% of police Sergeants polled agreed that alcohol misuse is the most significant factor in public disorder problems facing the country.[ix]

In the focus groups, officers reported being swamped by incidents either directly caused by alcohol or exacerbated by it. Thursday, Friday and Saturday nights were said to be the worst times for these alcohol-related problems, with offences ranging from public nuisance, noise and petty vandalism to serious assaults, murders and rapes.

Police officers around the country had clearly also picked up on the extent of the problem. We asked police officers in what proportion of incidents they attend or crimes they investigate, on average, is alcohol a factor.

- 40% of officers thought that alcohol is a factor in 3 out of 5 incidents
- That figure doubled to nearly 80% when officers were asked specifically about Friday and Saturday nights
- 54% of officers thought that alcohol was a factor in an at least 3 out of 5 violent incidents they attend
- 60% of those officers we polled thought that the frequency with which they attend incidents involving alcohol misuse had increased over the last five years.[x]

These figures show that alcohol is a general factor in crime, a strong factor in violent crime and plays a particularly central role on weekend evenings. They also show a clear majority view that the problem has worsened in recent times.

> *"Your Thursday, Friday, Saturday night alcohol abuse involving young people – fights, criminal damage, public disorder, generally needing help because there's no-one else available….my estimate is about 80% of our time."*[xi]
> - Police Officer, south west England

Binge drinking

In the focus groups, the phenomenon of binge drinking was a strong theme throughout the discussions, with 18-24 year olds being blamed for many of the alcohol-related crime and disorder problems. Older drinkers, street drinkers and those suffering from long-term alcohol abuse and dependency problems were felt not to be as serious a problem for law enforcement. This is despite the fact that the Government's Anti-Social Behaviour Action Plan focuses mainly on these groups.

For the growth in binge drinking amongst the young, many officers blamed the emergence of "larger and louder" venues, with limited seating, competing for the custom of the increasing number of young people with disposable income to spend. The aggressive marketing of youth-orientated alcohol products, including alcopop drinks, was also cited as a catalyst for the worsening situation.

> *"Manchester can hold 250,000 [people] on a night out and its probably only attracting 120,000, so there's an awful lot of shortfall there. Each venue had got half its capacity, in which case it's not running at a profit and that's where you get the ridiculous offers……We had one, '£10 all you can drink inside'. What does that encourage?"*[xii]
> - Police Officer, Greater Manchester

However, police officers made it clear that the disorder problems associated with young people and binge drinking were not just related to the amount of alcohol drunk, but also to the sheer numbers of young people drinking in one area of a town.

> *"You get an environment with 15,000 people in [a town centre] and 12,000 of those could be under 25. By 2 in the morning you have violence right across town which can lead to the most tragic of consequences, and regularly does. I think on one particular occasion about 6 weeks ago, my officers dealt with one rape and two murders within 200 yards [of each other]".*[xiii]
> - Police Officer, London

The impact on policing

Another very important theme that emerged from the consultation was the strong impact that the responsibility for dealing with alcohol-related disorder makes on the resources of police forces and the working conditions of their officers. Many of the police officers we talked to thought that alcohol-related crime and disorder diverted resources away from other policing priorities. One officer based in Somerset described the role of the police in his town as, "*little more than a glorified UN peacekeeping force*"[xiv], due to the amount of their time spent managing alcohol-related disorder. Other officers supported this view.

> *"My whole job revolves around alcohol. We're there to deal with crime, but we're constantly distracted by disorder offences …….. If you took away all the alcohol from the town centre….you'd have no disorder".*[xv]
> - Police Officer, Greater London

This view was backed up by evidence from the poll which showed that 69% of officers questioned thought that attending incidents involving alcohol misuse frequently diverts police manpower from tackling other kinds of crime. A further 25% of those polled thought that this was sometimes the case.[xvi]

The poll also revealed that 92% of respondents said that they had experienced a physical attack from members of the public who were under the influence of alcohol. One third of all respondents said that they had experienced such attacks "frequently". This demonstrates the toll that dealing with alcohol misuse can take on officers themselves.[xvii]

As well as the risk of assault, officers complained that alcohol misuse contributed to higher workloads and a sense of dissatisfaction at the high proportion of their time being dedicated to minor, alcohol-related incidents rather than serious and premeditated crime.

All police officers who took part in the focus groups expressed frustration at the prevalence of alcohol-related crime and disorder and the often shameful behaviour of young people out on the town. Some thought that excessive drinking had become an obsession among the young.

> *"It's what's seen as being socially acceptable, fashionable, at the moment among young people, including women……[to] go out and get completely bladdered and, in fact…..if someone doesn't drink they're looked upon as strange or unusual."*[xviii]
> - Police Officer, Greater London

Paramedics and A&E clinical staff

Alcohol and emergency healthcare

The Cabinet Office (Strategy Unit)'s Interim Analysis revealed that alcohol misuse accounts for around 150,000 hospital admissions every year and one-third of all A&E attendances, at a cost to the health service of around £1.7 billion every year.[xix]

The consultation of senior Accident and Emergency clinical staff and paramedics revealed a very significant impact made on their work by alcohol misuse. Over 90% of A&E staff polled agreed that alcohol misuse is one of the most serious public health problems facing Britain today.[xx]

It was equally clear from the results that alcohol misuse has a major impact on the A&E workload. Over 50% of respondents said that alcohol misuse accounted for a "very significant" proportion of the illness and injuries treated in their department, with 55% thinking that more than 3 in 5 patients treated on Friday and Saturday nights are in A&E as a result of alcohol misuse.[xxi]

The paramedics who took part in our focus groups offered us a similar perspective, but with the added advantage that they are frequently able to observe how an illness or injury occurred. Participants explained that the range of problems they treat that stem from alcohol misuse can include injuries sustained in violent attacks, trips and falls and road traffic accidents, as well as patients suffering from heart attacks, liver disease and strokes. As with the police, the paramedics cited young people's binge drinking as being the main source of the problems at the moment.

> *"The biggest impact we have are the evening revellers. The alcohol abuse, certainly the violent side of it, becomes a real problem on Thursday, Friday and Saturday nights……90% of my time is taken up with dealing with the results of drink, whether that be vomiting young kids or violence."*[xxii]
> - Paramedic, Somerset

> *"A great percentage of the calls will have an alcohol-related undertone. We have a box on our personal registration form that we fill out [to record the nature of the incident], and quite often the initial reason for an injury would be ticked off, like assault, but we could tick the alcohol-related box as well. If we did that, I think you would be surprised, it would be about 80-90% [of incidents]."*[xxiii]
> - Paramedic, Greater London

Binge drinking and under-age drinking

Again, binge drinking was a key theme mentioned around England, cited as a cause of frequent illness and injury. The paramedics were concerned that a lack of knowledge about the dangers of alcohol and heavily targeted marketing, aimed particularly at the young, were exacerbating the problem. It was commonly expressed at the focus groups that the problem was getting worse, with some paramedics involved showing particular concern for under-age drinkers.

> *"I've been in the job 32 years and then you didn't get unconscious 12 year olds. Now you do and you get loads of them. They disappear into school playing fields, parks and such like – dark dingy places where they can have their little parties. Now our big concern is that kids are afraid because they don't know what to do with a friend [who has drunk too much]…..and they leave them there."*[xxiv]
> - Paramedic, Cheshire

The view that the situation is worsening is backed up by our poll of A&E consultants which showed that 70% of respondents thought that the number of patients they were treating whose illness or injuries were the result of alcohol misuse had increased over the last five years.[xxv]

Impact on healthcare workers

Given the well-publicised pressures that frontline health service staff are already under we were anxious to investigate whether the prevalence of alcohol in their jobs added to this pressure or lessened their ability to do their jobs effectively.

Some paramedics voiced concerns about the risk of physical attack from drunken members of the public. In London, paramedics said that it was the threat of being attacked by drunken young men with broken bottles, rather than professional criminals, that had led to them being issued with stab proof vests. Vests have also been issued in other areas of England.

> *"We've had a massive increase in the number of staff assaulted or insulted recently - 20 years ago it was unheard of……..usually it's down to drink or drugs."*[xxvi]
> - Paramedic, Manchester

90% of opinion poll respondents said that they, or their staff, had been victims of physical or verbal abuse from drunken patients in their A&E department, showing that alcohol-related violence can be as much a problem in hospitals as it can on the streets.[xxvii]

Many of the paramedics we spoke to feared that it was not just ambulance crews who were put at risk by the high level of alcohol misuse. Some felt strongly that dealing with the effects of alcohol misuse diverts limited paramedic resources away from other members of the public who need medical help for reasons that are not self-inflicted.

Their colleagues in Accident & Emergency departments around England seem to mirror this concern. Nearly 80% of those polled thought that their A&E department did <u>not</u> have sufficient staff, resources or training to deal with the health impact of alcohol misuse.[xxviii] This reveals the extent of the pressure that can be placed on our frontline emergency healthcare staff as a result of alcohol misuse, as well as raising considerable doubt about whether England's emergency health services can continue to cope with the full impact of alcohol misuse without impacting on the general quality of service.

> *"From the public's point of view, if you look at the A&E waiting room where you've got people in there with legitimate accidents, if you want to call them that, and they sit there for hour after hour watching the ambulances coming in and dropping these drunks off, taking up all the beds, taking up the cubicles. So they impact on other deserving members of society."*[xxix]
> - Paramedic, Taunton

Fire Service

Fire fighters who took part in focus groups around England highlighted a different aspect of alcohol misuse. Their jobs do not bring contact with drunk members of the public in the same way as police or paramedics, but they frequently see a serious but less publicly visible danger.

The Cabinet Office (Strategy Unit)'s Interim Analytical Report said that between 38 and 45% of all fire deaths are alcohol-related, though some fire fighters thought that the total may be even higher than this. They explained that many of these deaths were the result of people coming home drunk after a night out and putting themselves, and sometimes their families, at risk.[xxx]

> *"From June [last year] to June [this year] between 11.30 and 4am, we had 14 chip pan fires and I'd bet the majority are down to alcohol".* [xxxi]
> - Fire Officer, Somerset

> *"On our database, since 1996, we've had 147 accidental fire deaths where the blood count is above zero of alcohol. Sometimes we don't get that back from the coroner and it may not get entered on our database, but a lot of the fire deaths we have, pushing 60%, are alcohol-related. What we found was a significant correlation was alcohol and smoking, rather than alcohol and cooking; the single person, blind drunk, having a cigarette and they just fall asleep."*[xxxii]
> - Fire Officer, London

It is important to stress that a key reason cited for fires resulting in deaths was the failure of some people to fit working smoke alarms in their homes, but the role that alcohol can play in causing home fires must be noted.

Some fire fighters thought that many fires started deliberately are linked to alcohol, whether burnt out cars or arson at schools or homes.

> *"The other way that drinking relates to our job is in respect of arson. Somebody's got a grudge against somebody and, once again, drink comes in, the personality changes and they probably go and do something they wouldn't otherwise do if they hadn't got alcohol inside them."*[xxxiii]
> - Fire fighter, Greater London

Fire fighters also encounter the effects of alcohol misuse when attending road traffic accidents in which either a driver or a pedestrian has been drinking.

The fire fighters who attended the focus groups actually felt that they now attended fewer drink driving incidents than they did earlier in their careers. Of the fire fighters who operate in urban areas, many did not consider serious road traffic accidents to be a major part of their work.

The latest Government statistics have revealed a 6% rise in the number of drink driving deaths this year, to 560 in total, despite a 1% drop in the total number of road deaths. However, the general trend for drink driving incidents over the last few years has been downwards.[xxxiv]

Addressing the Problems

At our focus groups of emergency service workers, we asked participants their views on what was needed to reduce the incidence of alcohol-related problems. There were four key themes to their responses.

Personal responsibility

Across all three services, participants in the focus groups felt that the Government and the public alike expect the emergency services to deal with the effects of what is actually a massive societal problem. They argued that far too little focus is put on personal responsibility. Some expressed the view that, not only is this an unfair burden on the emergency services, it is also unrealistic.

Many of the police officers who were spoken to had particularly strong views that members of the public relied too much on the emergency services being there to protect and care for them when they have drunk too much. They believed that, if the perception of the services being an automatic support system could be removed, the public would be forced to act more responsibly. Frequently mentioned was the idea of charging people if emergency services are called to an incident where alcohol misuse is the main problem.

> *"It's the complete abdication of responsibility that people think they have the right to assume when they have a drink, and they don't. They need to realise that and they need to realise that they're responsible for their own health, their own financial situation, their own transport and no-one is going to bail them out, I'd go so far as to say that if you become incapable through drink and the police arrest you, you should be made to pay. If you then require any of the additional services, the ambulance or the fire crews, you should be billed for that as well."*[xxxv]
> - Police Officer, Greater London

> *"The only thing that is actually going to knock the drink problem on the head is if you start charging those who are either arrested or taken to A&E the true cost of the resource they have taken up……We're unable to deal with crime because we spend most of our time doing public decency related to alcohol abuse. Why should we not be able to charge for that?"*[xxxvi]
> - Police Officer, Taunton

Officers tended to recognise that the idea of charging for "unnecessary" use of emergency services was likely to raise significant practical and ideological problems, but the concept, is indicative of the strength of feeling displayed.

The alcohol industry

The second major theme in focus group discussions was the role of the alcohol industry. In Manchester, where the highly successful City Centre Safe scheme has been operating, police officers felt that better use could be made of existing powers to shift some of the responsibility for maintaining order on to the operators of licensed premises.

> *"A lot of our work is centred around licensees and their responsibilities. They have to be responsible for the actions of patrons of their clubs, so we actively try and detect and enforce drunkenness, under age drinking, permitting riotous behaviour, permitting violent behaviour and lots of offences under the Licensing Act and the Public Entertainment Act. Although that may not directly affect any of the crime, we*

just believe that if licensees take more responsibility for better managed premises, figures for assault and crime will improve."[xxxvii]
- Police Officer, Manchester

Some participants felt that if police removed the licenses of troublesome premises, including some branches of the large chain bars, a strong message would be sent that licensees have to ensure that their premises are free of excessive drunkenness and all the problems that it can bring.

As a result of this, we used the MORI telephone poll to ask the public if they thought private companies such as drinks manufacturers, pub and bar owners and tour operators should do more to reduce binge drinking, drunkenness and disorderly behaviour. 75% agreed that such companies should do more, apparently showing a high level of agreement with the sentiments expressed by some of our focus group participants.[xxxviii]

Public education

The third theme, and perhaps the strongest, that emerged from discussions, particularly from paramedics and fire officers, was the need for better public education on the effects of alcohol misuse, especially for young people. Many felt that the public is ill informed about the risks inherent in excessive drinking.

"We should be going into schools and saying to kids, 'this is what it will do to your liver', like the smoking - 'Smoking kills', well so does alcohol, it just takes longer for you to die……..whether it's high blood pressure, cirrhosis of the liver, bowel cancer and all the other problems that go with taking what is basically a poison on a regular basis."[xxxix]
- Paramedic, northwest England

"We're trying to say 'look, if you've got a young family, have a fire plan, make sure of their safety……make sure you've got a smoke alarm fitted'. Worst case scenario, they come home absolutely blotto and they start smoking, then at least the protection's already in."[xl]
- Fire Officer, south west England

This ignorance was said to be a primary factor in putting people at risk. Many participants spoke of regularly coming across young people who, unable to recognise their limits and moderate their drinking, lose control of their actions whilst binge drinking. They claimed that many are not aware of how excessive alcohol can put them in danger. Some described the type of horrific incidents that this can lead to, including sexual assault and date rape, where perpetrators take advantage of women who have drunk to excess.

"Spikings, statistically, are miniscule. [In date rape cases] chances are, 99.9% of the time, they have drunk to excess and they're not in charge of their own actions."[xli]
- Police Officer, London

The need for better public education about sensible drinking was further highlighted by the MORI poll. We asked respondents if they knew what the Government's current recommendations are on the amount of alcohol they should drink.

- Only 7% of men got the answer right (3-4 per day), with another 8% answering with the appropriate weekly recommended allowance[xlii] (21 units)
- 22% of women answered correctly (2-3 units per day), with another 10% answering with the appropriate weekly figure (14 units)
- Nearly half (46%) did not know[xliii]

Considering the Government has estimated that eight million people in Britain exceed the allowance, these very low figures are extremely telling.[xliv] Men and women in the 16-35 age group, the most 'at risk' age group according to the Government, were no more likely to know their recommended allowance than older respondents.

Government

Participants mentioned other schemes that might be implemented to tackle alcohol-related harm, from bans on open alcohol containers in public to raising the age at which people are legally sanctioned to drink alcohol. However, with all ideas that were identified, a common strand was the need for more active involvement from the Government to turn ideas into action.

Across the series of focus groups carried out, there was broad agreement that the Government needed to reconsider the best way of limiting alcohol-related harm and act to relieve the pressure on emergency services. We tested this view further, through our poll of police officers and A&E consultants.

- 87% of consultants polled agreed that the Government needs to do more to reduce the incidence of alcohol-related illness and injury[xlv]
- Nearly 80% (79.5%) of police Sergeants agreed that the Government needs to do more to reduce the incidence of alcohol-related disorder and violence[xlvi]

We asked the British public a similar question. 72% of respondents agreed that the Government needs to do more to reduce binge drinking, drunkenness and disorderly behaviour.[xlvii]

Clearly, there are differing views on what needs to be done to reduce alcohol-related harm among the groups we consulted. However, what is clear from this research is that emergency service workers, perhaps the people best placed to comment on the impact of alcohol misuse, have common views that the problem is extremely serious, that something must be done to lessen its impact and that it is the Government which must take the lead.

Annex 1

MORI telephone survey

- MORI Social Research Institute interviewed a representative quota sample of 1,001 adults aged 16+ across Great Britain. Interviews were conducted by telephone between 19-21 September 2003, using random digit dial
- Data are weighted to the known national population profile
- '*' indicates a value of less than half of one per cent but greater than zero
- Where results do not sum to 100, this may be due to multiple answers or computer rounding
- Base all (1,001), unless otherwise specified

Q **How concerned are you personally about so-called 'binge drinking', drunkenness & disorderly behaviour among British people? Are you** (ALTERNATE ORDER) **very concerned, fairly concerned, not very concerned or not at all concerned?** SINGLE CODE ONLY

Base: Adults aged 16+	(1,001) %
Very concerned	43
Fairly concerned	35
Not very concerned	16
Not at all concerned	5
Very concerned / Fairly concerned	78
Not very concerned / Not at all concerned	21
Don't know	1

( )

Q **I am now going to read out some statements about 'binge' drinking, drunkenness and disorderly behaviour. How strongly do you agree or disagree with each? Firstly…**READ OUT A-B. ALTERNATE ORDER. SINGLE CODE ONLY

	Strongly agree %	Tend to agree %	Neither agree nor dis-agree %	Tend to disagree %	Strongly disagree %	No opinion %	Agree %	Disagree %
A **…The Government should do more to reduce 'binge' drinking, drunkenness and disorderly behaviour**	45	27	7	13	7	1	72	20
B **…Companies such as drinks' manufacturers, pub and bar owners and tour operators should do more to reduce binge drinking, drunkenness and disorderly behaviour**	50	25	7	11	6	1	75	17

Q **As you may know, there is a recommended alcohol consumption allowance, measured in units. Do you know what the current recommended allowance is for you, per day or per week?**

(IF RESPONDENT HAS A SPECIFIC DRINKING 'LIMIT' FOR EG MEDICAL REASONS, ASK **'…Do you know what the current recommended allowance is for someone of your gender?'**

NB RECORD ANSWER IN UNITS PER DAY OR PER WEEK, AS BELOW
SINGLE CODE ONLY

Base: Adults aged 16+	(1,001)
	%
0-1 unit per day	3
2-3 units per day	18
3-4 units per day	5
5-6 units per day	1
7-10 units per day	2
More than 10 units per day	*
0-7 units per week	4
8-13 units per week	4
14 units per week	6
15-20 units per week	2
21 units per week	5
22-30 units per week	3
31-50 units per week	*
More than 50 per week	*
Don't know	46

( )

ASK ALL

Q **How regularly, if at all, do you visit your local town or city centre, for any activity, during the <u>evening</u>? Please give your answer in number of times per week, or number of times per month.** SINGLE CODE ONLY

Base: Adults aged 16+	(1,001)
	%
Twice a week or more often	15
About once a week	14
Around 2-3 times a month	9
Once a month	10
Less than once a month	16
Never	34
It varies	2
Don't know	*

( )

Annex 2

Focus Group research

Focus group was carried out by;

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Background / Objectives

Alcohol Concern contended that the misuse of alcohol disproportionately affects the caseload of the emergency services in England. There was no current research amongst the emergency services to clearly demonstrate this and so it was decided to commission a small-scale qualitative project to test the theory.

It was considered to be the case that such a project would also be valuable in better understanding the nature of alcohol-related harm in England.

Methodology

Three group discussions were held with serving representatives of all three of the main the emergency services - police, paramedics and fire service.

Three locations were chosen in different parts of the country:

- Taunton, Somerset
- Central London
- Manchester

Local emergency services were contacted to volunteer representatives to take part in the groups. Care was taken to ensure that, across the three groups and the three services, metropolitan, suburban and rural emergency service workers were all represented.

The groups took place in August and September 2003. The groups were unstructured and free flowing, but focussed on respondents' experiences, their analysis and their recommendations regarding alcohol misuse.

The results are not representative of the views of emergency service workers as a whole, but are very highly indicative.

A full summary of results and transcripts of the proceedings are available on request.

Annex 3 – part one

Carried out by Field and Research Matters Ltd, **1st floor, 41 The Street, Ashtead, Surrey KT21 1AA.**

Total sample – 117 police officers officers (Sergeants) at police stations in the following areas, East Midlands (7%), East of England (6%), London/South East (32%), North East (5%), North West (20%), South West (7%), West Midlands (19%), Yorks & Humberside (4%)

Q.1 On average, in what proportion of incidents you attend or crimes you investigate is alcohol misuse a factor?

80-100%: 3%	**60-79%: 37%**
40-59%: 40%	**20-39%: 15.5%**
0-19%: 0%	**Don't know: 4.5%**

Q.2 On average, in what proportion of the incidents you attend on Friday and Saturday nights is alcohol misuse a factor?

80-100%: 46%	**60-79%: 33%**
40-59%: 18%	**20-39%: 3%**
0-19%: 0%	**Don't know: 0%**

Q.3 On average, in what proportion of violent incidents you attend is one or more of the individuals involved under the influence of alcohol?

80-100%: 15%	**60-79%: 39%**
40-59%: 41%	**20-39%: 5%**
0-19%: 0%	**Don't know: 0%**

Q.4 Do you feel that attending incidents involving alcohol misuse diverts police manpower from tackling other kinds of crime?

Frequently: 69%	**Sometimes: 25%**
Occasionally: 3%	**Rarely: 0%**
Never: 0%	**Don't know: 3%**

Q.5 Whilst on duty have you experienced a physical attack from members of the public who are under the influence of alcohol?

Frequently: 33%	**More than once: 50.5%**
Once: 8.5%	**Never: 8%**
Don't know: 0%	

Q.6 Has the frequency with which you have attended incidents or investigated crimes in which alcohol misuse is a factor changed over the last 5 years?

Increased significantly: 32%	**Increased: 28%**
No noticeable change: 31%	**Decreased: 2%**
Decreased significantly: 0%	**Don't know: 7%**

Q.7 Based on your personal experience, how far do you agree with the following statement? "Alcohol misuse is the most significant factor in public disorder problems in Britain today".

Strongly agree: 37%	**Tend to agree: 51%**
Neither agree nor disagree: 9%	**Tend to disagree: 3%**
Strongly disagree: 0%	**No opinion: 0%**

Q.8 Based on your personal experience, how far do you agree with the following statement? "The Government needs to do more to reduce the incidence of alcohol-related disorder and violence".

Strongly agree: 49.5%	**Tend to agree: 30%**
Neither agree nor disagree: 18%	**Tend to disagree: 1.5%**
Strongly disagree: 0%	**No opinion: 1%**

Annex 3 – part two

Carried out be Field and Research Matters Ltd.

Total sample – 115 senior/lead consultants in Accident and Emergency Departments in the following areas around England, East Midlands (7%), East of England (7%), London/South East (43%), North East (15%), North West (9%), South West (6%), West Midlands (9%), Yorks & Humberside (4%).

Q.1 On average, how significant is the proportion of patients you treat whose illness or injuries have occurred as a result of alcohol misuse?

Among the most significant: 19%	**Very significant: 34%**
Moderately significant: 43%	**Not significant: 0%**
Don't know: 4%	

Q.2 What proportion of your patients on Friday and Saturday nights is being treated for illness or injuries that have occurred as a result of alcohol misuse?

80-100%: 30%	**60-79%: 25%**
40-59%: 22.5%	**20-39%: 13%**
0-19%: 2.5%	**Don't know: 7%**

Q.3 Do you feel that the treatment of patients whose illness or injuries have occurred as a result of alcohol misuse creates a strain on the resources of the department and its staff?

Frequently: 52.5%	**At times: 40%**
Occasionally: 5%	**Rarely: 2.5%**
Never: 0%	**Don't know: 0%**

Q.4 Have you, or your staff, experienced physical or verbal abuse from patients whose illness or injuries have occurred as a result of alcohol misuse?

Frequently: 59%	**More than once: 38%**
Once: 2%	**Never: 1%**
Don't know: 0%	

Q.5 Has the frequency with which you have treated patients whose illness or injuries have occurred as a result of alcohol misuse changed over the last 5 years?

Increased significantly: 22.5%	**Increased: 47.5%**
No noticeable change: 19%	**Decreased: 0%**
Decreased significantly: 0%	**Don't know: 11%**

Q.6 Based on your personal experience, how far do you agree with the following statement? "Alcohol misuse represents one of the most serious public health problems facing Britain today".

Strongly agree: 32.5%	**Tend to agree: 58%**
Neither agree nor disagree: 7.5%	**Tend to disagree: 1%**
Strongly disagree: 0%	**No opinion: 1%**

Q.7 Based on your personal experience, how far do you agree with the following statement? "The Government needs to do more to reduce the incidence of alcohol-related illness and injury".

Strongly agree: 35%	**Tend to agree: 52%**
Neither agree nor disagree: 9%	**Tend to disagree: 2%**
Strongly disagree: 1%	**No opinion: 1%**

Q.8 Based on your personal experience, how far do you agree with the following statement? "A&E departments have sufficient staff, resources and training to deal with the health effects of alcohol misuse".

Strongly agree: 2%	**Tend to agree: 7%**
Neither agree nor disagree: 7%	**Tend to disagree: 42%**
Strongly disagree: 37%	**No opinion: 5%**

Endnotes

[i] Interim Analytical Report, published 19/09/03, Cabinet Office (Strategy Unit), page 89
[ii] Interim Analytical Report, published 19/09/03, Cabinet Office (Strategy Unit), page 33
[iii] Interim Analytical Report, published 19/09/03, Cabinet Office (Strategy Unit), page 56
[iv] MORI telephone poll, carried out for Alcohol Concern, see Annex 1
[v] Interim Analytical Report, published 19/09/03, Cabinet Office (Strategy Unit), page 24
[vi] Report on Urban Renaissance and the Evening Economy, House of Commons Housing, Planning, Local Government and the Regions Select Committee, July 2003
[vii] MORI telephone poll, carried out for Alcohol Concern, see Annex 1
[viii] Research carried out by MORI Social Research Institute (see annex 1), D.M. Stewart (see annex 2) and Field and Research Matters Ltd (see annex 3)
[ix] Field and Research Matters Ltd telephone poll, carried out for Alcohol Concern, see Annex 3 part 1
[x] Field and Research Matters Ltd telephone poll, carried out for Alcohol Concern, see Annex 3 part 1
[xi] Taunton focus group, see Annex 2
[xii] Manchester focus group, see Annex 2
[xiii] London focus group, see Annex 2
[xiv] Taunton focus group, see Annex 2
[xv] London focus group, see Annex 2
[xvi] Field and Research Matters Ltd telephone poll, carried out for Alcohol Concern, see Annex 3, part 1
[xvii] Field and Research Matters Ltd telephone poll, carried out for Alcohol Concern, see Annex 3, part 1
[xviii] London focus group, see annex 2
[xix] Interim Analytical Report, published 19/09/03, Cabinet Office (Strategy Unit), page 49
[xx] Field and Research Matters Ltd telephone poll, carried out for Alcohol Concern, see Annex 3, part 2
[xxi] Field and Research Matters Ltd telephone poll, carried out for Alcohol Concern, see Annex 3, part 2
[xxii] Taunton focus group, see Annex 2
[xxiii] London focus group, see Annex 2
[xxiv] Manchester focus group, see Annex 2
[xxv] Field and Research Matters Ltd telephone poll, carried out for Alcohol Concern, see Annex 3 part 2
[xxvi] Manchester focus group, see Annex 2
[xxvii] Field and Research Matters Ltd telephone poll, carried out for Alcohol Concern, see Annex 3 part 2
[xxviii] Field and Research Matters Ltd telephone poll, carried out for Alcohol Concern, see Annex 3 part 2
[xxix] Taunton focus group, see Annex 2
[xxx] Interim Analytical Report, published 19/09/03, Cabinet Office (Strategy Unit), page 41
[xxxi] Taunton focus group, see Annex 2
[xxxii] London focus group, see Annex 2
[xxxiii] London focus group, see Annex 2
[xxxiv] Road Casualties Great Britain: 2002 – Annual Report, Department of Transport
[xxxv] London focus group, see Annex 2
[xxxvi] Taunton focus group, see Annex 2
[xxxvii] Manchester focus group, see Annex 2
[xxxviii] MORI telephone poll, carried out for Alcohol Concern, see Annex 1
[xxxix] Manchester focus group, see Annex 2
[xl] Taunton focus group, see Annex 2
[xli] London focus group, see Annex 2
[xlii] The weekly allowance figures, whilst still widely used, are not the current recommendations
[xliii] MORI telephone poll, carried out for Alcohol Concern, see Annex 1
[xliv] Interim Analytical Report, published 19/09/03, Cabinet Office (Strategy Unit), page 12
[xlv] Field and Research Matters Ltd telephone poll, carried out for Alcohol Concern, see Annex 3 part 2
[xlvi] Field and Research Matters Ltd telephone poll, carried out for Alcohol Concern, see Annex 3 part 1
[xlvii] MORI telephone poll, carried out for Alcohol Concern, see Annex 1