



HEALTH EQUITY PILOT PROJECT

What the evidence tells us: Reducing inequalities in alcohol consumption and harm

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Reducing alcohol-related harm

Effectiveness of alcohol control policies

Alcohol control policy

Taxation and price regulation

Regulating marketing

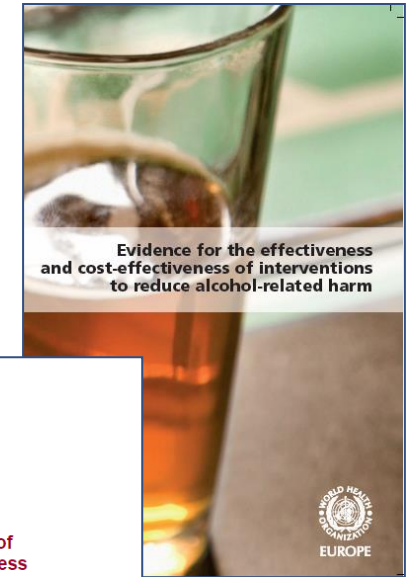
Regulating availability

Providing information and education

Managing the drinking environment

Reducing drink driving

Brief interventions and treatment

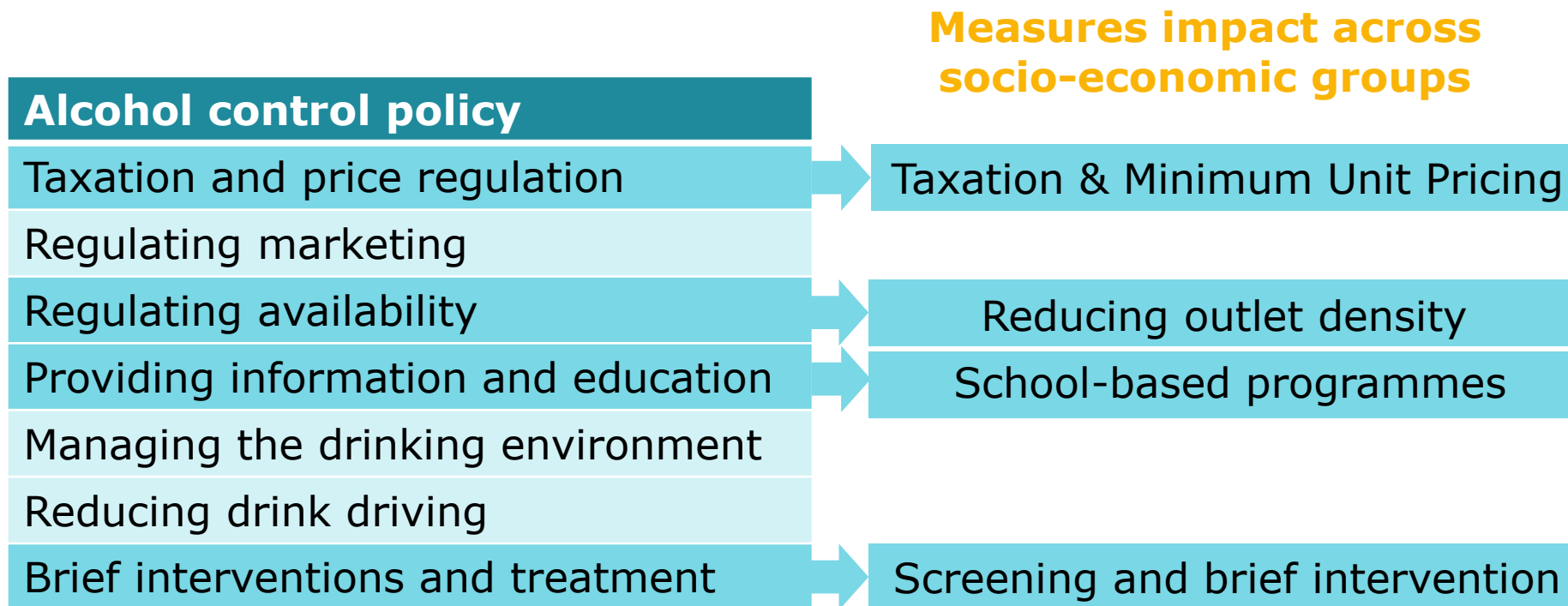


Reducing inequalities in alcohol consumption and harm



Reducing alcohol-related harm

Effectiveness of alcohol control policies

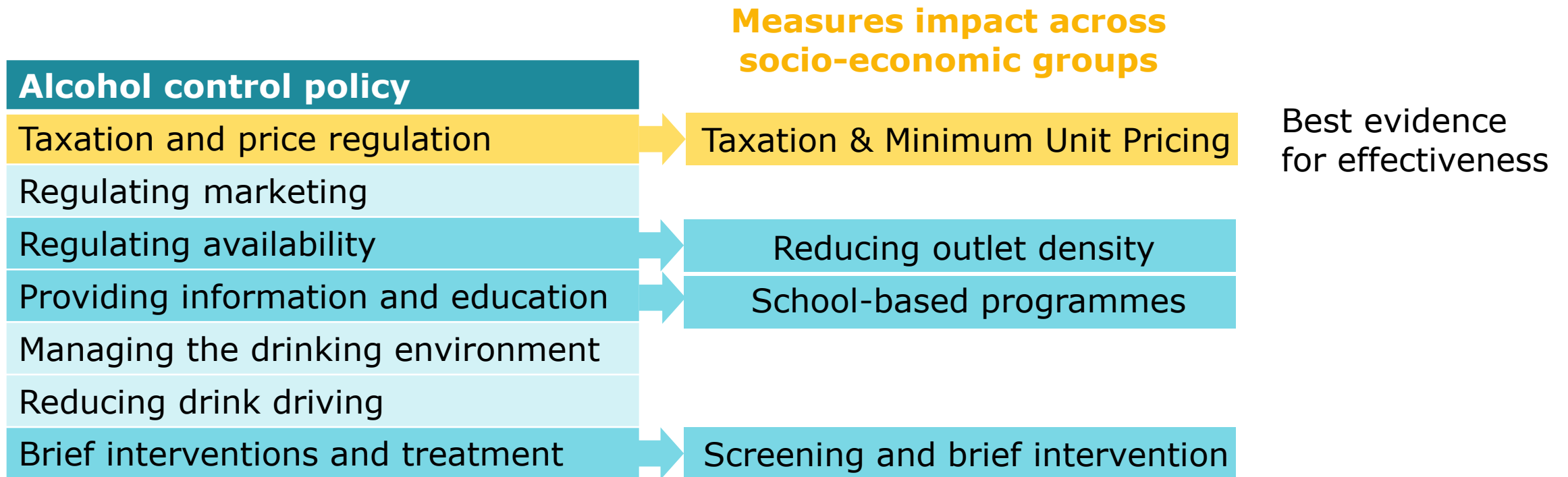


Reducing inequalities in alcohol consumption and harm



Reducing alcohol-related harm

Effectiveness of alcohol control policies



Reducing inequalities in alcohol consumption and harm



Taxation and pricing policies

Reducing affordability



- Policies that affect the affordability of alcohol.
- 10% increase in price = 5% decrease in consumption.
- Greater impact on heavier drinkers, lower income drinkers
- WHO “best buy” for reducing alcohol harms



↓ Alcohol-related mortality



↓ Traffic crash deaths



↓ Alcohol-related hospitalisations



↓ Violence and crime

Reducing inequalities in alcohol consumption and harm



Taxation and pricing policies

Evidence for effectiveness

Finland: decrease in taxes (2004) has most effects on consumption and harm in **low educated** groups

Canada: Increase in minimum price has most effect on alcohol-related hospital admissions among those with **low family income.**



UK: modelling studies of taxation and minimum unit price show greatest effects on consumption and harm among heavy drinkers in **low socio-economic / occupational** groups. Strength-based approaches most effective.

Low socio-economic groups affected the most



Minimum Unit Price legislation

Scotland - Background

Unit of alcohol
8g or 10ml of pure
alcohol

- Minimum Unit Pricing (MUP) based on strength of alcohol
- MUP 50p due to come into effect 1st May 2018
- Modelling work: greatest effects among heavy drinkers in low income groups
- Evaluation planned: effects on individuals, businesses and society
- Any adverse effects on harmful drinkers?



Restricting availability

Reducing outlet density

- Regulates number of alcohol outlets in community
- Increases effort to obtain alcohol; limits competition between venues
- Higher density of alcohol outlets in more deprived communities
- Potential to reduce inequalities if targeted in deprived neighbourhoods with high outlet densities.
- Effectiveness in reducing inequalities unclear

Reducing inequalities in alcohol consumption and harm





Increasing education

School-based programmes

- Aim to:
 - Increase knowledge
 - Change attitudes
 - Develop life and social skills
- Effectiveness in reducing inequalities unclear but some evidence that effects can be greater for pupils in low SES areas.
- Protects against wider risky behaviours and adverse childhood experiences that can increase risk of alcohol use/harm later in life.

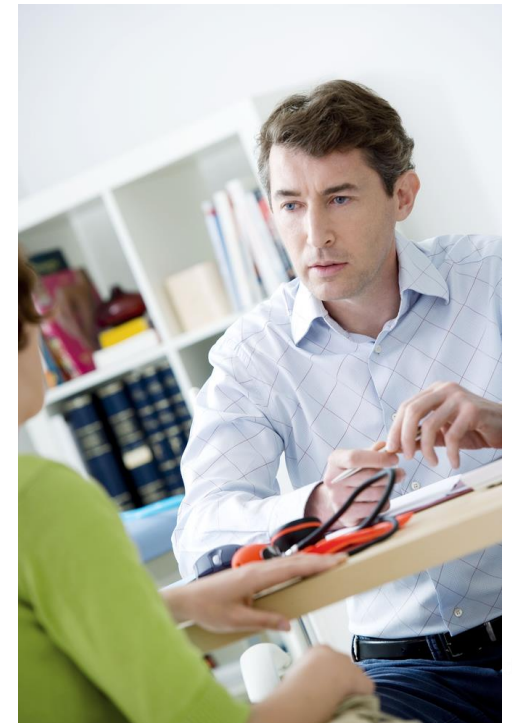




Brief interventions and treatment

Screening and brief intervention

- Identification of harmful drinkers, short feedback and motivational session
- Effectiveness in reducing inequalities unclear
 - Equally effective across different population groups
 - But do inequalities exist in access to and uptake of services?
- May be effective if targeted at lower socio-economic status groups





Gaps in evidence

Other potential interventions

- Multi-component community programmes
- Restrictions in advertising
- Increasing access to health and social services



Summary: what works to reduce inequalities

- Evaluations measuring inequalities are scarce
- Best evidence for effectiveness is for policies that affect affordability (e.g. minimum unit pricing)
- Reducing alcohol outlet density, school-based education and screening and brief intervention may also have potential but more research is needed

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THANK YOU!

