

# Public health issue: alcohol misuse



**ASSIGN  
BUSTER**

\n[[toc title="Table of Contents"](#)]\n

\n \t

1. [Methodology](#) \n \t
2. [2. Epidemiology of Alcohol Misuse](#) \n \t
3. [Social Determinant on Health](#) \n \t
4. [Addressing Alcohol Misuse Issues](#) \n \t
5. [Local Public Health](#) \n \t
6. [Recommendations and Strategies](#) \n \t
7. [Current Strategies](#) \n \t
8. [Recommendations](#) \n \t
9. [Conclusion](#) \n

\n[/toc]\n \n

Alcohol misuse as defined by the World Health Organization (WHO) is the alcohol use that places people at risk for problems, including “ at-risk use,” “ clinical alcohol abuse,” and “ dependence.” Although the use of alcohol brings with it a number of pleasures, alcohol increases the risk of a wide range of social harms, generally in a dose dependent manner (WHO 2011).

Alcohol misuse is one of the most devastating non-communicable diseases that contributes, or directly causes chronic ill-health, high mortality, violent crime, and anti-social behaviour (Alcohol Concern, 1997). According to the global status report on alcohol and health published in 2011 by World Health Organisation (WHO), the harmful use of alcohol results in 2.5 million deaths each year globally (WHO 2011). According to the same report, by 2011, alcohol misuse is the world’s third largest risk factor for disease burden, and

it is the leading risk factor in the Western Pacific and the Americas and the second largest in Europe. Alcohol is associated with many serious social and developmental issues, including violence, child neglect and abuse, and absenteeism in the workplace (Harvey, 2000).

Excessive alcohol consumption is a major cause of different types of diseases and conditions, including injuries, mental and behavioural disorders, gastrointestinal conditions, cancers, cardiovascular diseases, immunological disorders, lung diseases, skeletal and muscular diseases, reproductive disorders and pre-natal harm, including an increased risk of prematurity and low birth weight (Moore and, Pearson, 1986). For most conditions, alcohol increases the risk in a dose dependent manner, with the higher the alcohol consumption, the greater the risk. For some conditions, such as cardiomyopathy, acute respiratory distress syndrome and muscle damage, harm appears only to result from a sustained level of high alcohol consumption, but even at high levels, alcohol increases the risk and severity of these conditions in a dose dependent manner. The frequency and volume of episodic heavy drinking are of particular importance for increasing the risk of injuries and certain cardiovascular diseases (Moore and Pearson 1986).

The causes of alcohol misuse can be traced to many factors including family history, psychological factors such as anxiety or depression, the addictive pharmacology of alcohol, and the environment in which people live. Some research works show that genes could influence people drinking habits and their susceptibility to alcohol addiction. For others who drink alcohol above the guidelines, at ‘hazardous’ and ‘harmful’ levels, alcohol misuse may be

due to habit, lifestyle, lack of awareness of the health effects and an absence of obvious symptoms.

This assignment seeks to discuss the problems associated with alcohol misuse, and the collective efforts currently being put in place in terms of research and government policies to address it. The understanding of local, national and global trends of alcohol misuse and the associated diseases will be demonstrated using the available statistical data from the Public Health Observatory.

Following the introductory section, where background of alcohol misuse, the justification for choosing it, and the importance of alcohol misuse as a public health concern are provided, Section 2 will discuss the epidemiology and trends of alcohol misuse. In Section 3, the social determinants of alcohol misuse will be explored, while Section 4 will address how the issues and problems of alcohol misuses are tackled at both national and global level. Section 5 will be devoted to the local public health. Specifically, the problems associated with alcohol misuse in Bradford will be discussed. The last section will provide some recommendations and strategies to address the issue of alcohol misuse.

## **Methodology**

The research methods used for this assignment included reviewing posters, television adverts, internet research on alcoholism and journals. The main website was the national institute of alcohol abuse, but others included healthy living, NHS Stockport. These research methods were very useful as

they provided a wealth of information which resulted in a thorough investigation into alcoholism and the effects on an individual's lifestyle

## **2. Epidemiology of Alcohol Misuse**

The alcohol misuse is a global phenomenon, which hinders both individual and social development. On a global level, World Health Organization (WHO 2011) reported that:

The harmful use of alcohol results in 2.5 million deaths each year.

320 000 young people between the age of 15 and 29 die from alcohol-related causes, resulting in 9% of all deaths in that age group.

Alcohol is the world's third largest risk factor for disease burden; it is the leading risk factor in the Western Pacific and the Americas and the second largest in Europe.

Researchers in numerous countries have conducted analyses of alcohol consumption and general population surveys to ascertain the level and consequences of alcohol use. In recent years, investigators also have made attempts to compare drinking rates and other drinking variables across different countries. One reason for researching across national borders is the need for descriptive epidemiology (Room and Makela 1988).

The total economic cost of alcohol to the EU was estimated to be €125 billion (WHO Europe, 2009), while the government of United Kingdom estimated the cost of alcohol related harms to the National Health Service (NHS) to be £2.7 billion in 2006/07 prices (NHS 2012).

Alcohol consumption is a major cause of ill-health in England. More than 10 million people (31 per cent of men and 20 per cent of women) are now regularly drinking above the guidelines set by Government (NAO, 2008), and many of these are likely to suffer ill-health or injury as a result.

In England, it is estimated that 18 per cent of the adult population (7.6 million) are drinking at ‘hazardous’ levels; another seven per cent (2.9 million) are showing evidence of harm to their own physical and mental health, including approximately 1.1 million people who have a level of alcohol addiction (NAO, 2008).

### **Social Determinant on Health**

Alcohol use and abuse is a major preventable public health problem. To be able to do this, we must be able to understand the social determinant of alcohol misuse and abuse. Different factors such as gender difference, race, culture, ethnicity, social class, poverty levels are among the most important factors that have been found to influence the level of alcohol consumption.

According to the research findings reported in the Alcohol Needs Assessment Research Project (ANARP), 2004, about 38% of men and 16% of women (age 16-64) have an alcohol use disorder, which is equivalent to approximately 8.2 million people in England.

It has also been reported in the literature that alcohol use disorders generally decline with age. In relation to ethnicity, black and minority ethnic groups have a considerably lower prevalence of hazardous/harmful alcohol use but a similar prevalence of alcohol dependence compared with the white population (ANARP, 2004).

Another important social determinant of alcohol misuse is the family background. The family plays a central role in the use of alcohol by children and adolescents. Early drinking and much subsequent use of alcohol by children and adolescents is sanctioned and sometimes encouraged by their families. Unlike experimentation with alcohol, problem drinking is associated with low levels of family social support and with dysfunctional coping strategies of families that may lead children to use drinking as an adaptive behavior.

### **Addressing Alcohol Misuse Issues**

The harmful use of alcohol is a serious health burden, and it affects virtually all individuals on an international scale. Both the government policy (NHS) and the scientific literature have recognized the necessity to control the general population's alcohol consumption. According to the World Health Organisation (WHO), the global strategy to control the misuse of alcohol will focus on ten key areas of policy options and interventions at the national level and four priority areas for global action. The ten areas for national action are summarized as follows:

Leadership, awareness and commitment;

Health services' response;

Community action;

Drink-driving policies and countermeasures;

Availability of alcohol;

Marketing of alcoholic beverages;

Pricing policies;

Reducing the negative consequences of drinking and alcohol intoxication;

Reducing the public health impact of illicit alcohol and informally produced alcohol;

Monitoring and surveillance.

The four priority areas for global action are:

public health advocacy and partnership;

technical support and capacity building;

production and dissemination of knowledge;

resource mobilization

At national level, Government policy continues to place emphasis on the primary care setting to undertake health promotion. Prior to 1995, the sensible drinking policy in the UK was that men should drink no more than 21 units (168 g) and women 14 units (112 g) per week (Department of Health 1992). However, by 1995, the Department of Health in UK has put in place guidelines for the responsible consumption of alcohol (UK Department of Health 1995). The comparison of UK units/day and grams of pure alcohol/day in light/moderate/heavy drinking is summarized in Table 1.



Table 1: comparison of UK units/day and grams of pure alcohol/day in light/moderate/heavy drinking

## **Local Public Health**

Of most concern to public health is the number of local people drinking excessively. In this work, the public health of Bradford will be discussed.

National data suggests around 20, 000 residents of the Bradford district are dependent drinkers. According to the Bradford and Airedale Health and Lifestyle Survey 2007-2008, the national average consumption in Bradford district is significantly greater than the national average. In all adult, the mean units alcohol consumed by drinkers in a typical week in Bradford is 23% for men and 14. 5% for woman as compared to national average of 21% for men and 11% for woman (BJSNA 2010).

The Bradford and Airedale Healthy Lifestyle Survey (BJSNA 2010) shows that 9% of men and 7% of women are drinking at a harmful (higher risk) level. For men, this finding is in line with the national average; for women, the finding is nearly double (England 4%). Amongst men, this problem is concentrated in the 35-64 age groups; amongst women, the under 24s and 45-54s exceed the district average.

## **Recommendations and Strategies**

### **Current Strategies**

There have been various current strategies currently being put in place both by the local and national government. Some of the current strategies are aimed to:

reduce the number of people who drink alcohol above recommended limits, thus reducing the adverse health impact of alcohol.

reduce alcohol-related crime, disorder, intimidation, nuisance and anti-social behaviour.

develop a comprehensive range of effective treatment, support, rehabilitation and reintegration services for alcohol victims, with easy access and clear care pathways.

reduce the harm caused by alcohol misuse within families and relationships, including domestic abuse and the “ hidden harms” caused to the children of alcohol- misusing parents.

reduce the number of babies born with a disorder in the Foetal Alcohol Spectrum Disorder range, and to decrease the risk of related problems experienced by children born with one of these disorders.

reduce alcohol-related accidents and fires, thus reducing avoidable premature death, disability and less serious injuries.

reduce the economic costs of alcohol misuse.

ensure that information and services are accessible and welcoming to all sections of Bradford’s diverse population.

## **Recommendations**

In other to address the problem of alcohol misuse at local, national, and global level, the following recommendations are provided:

Education is one of the general ways to address the issue of alcohol misuse. Government can make sure that all local schools have programs in place to educate children about the risks posed by alcohol misuse. It is important to arm young people in community with knowledge about the consequences of abusing drink and drugs.

Government at both local and national level should fund youth clubs, art facilities and other activities to give young people alternative things to do instead of spending time on the streets drinking.

The general practitioners as well as nursing practitioners should continue to provide better support/consultancy services to the victims of alcohol.

Provision of support group at different localities to provide improved counselling services and treatment programs for those with substance abuse problems in the community. Discussion should be established with schools, colleges, local employers, government and policy makers to see if they have any facilities in place to identify and help those struggling with alcohol misuse.

## **Conclusion**

The public health issues on alcohol misuse are discussed in this work. Alcohol misuse is found to be one of the most devastating non-communicable diseases that contributes, or directly causes chronic ill-health, high mortality, violent crime, and anti-social behavior. The epidemiology and trends of alcohol misuse was discussed, while the social determinants of alcohol misuse based on gender difference, age, ethnicity, and family background was addressed. The policies put in place by both the local and

<https://assignbuster.com/public-health-issue-alcohol-misuse/>

national government to address the issues and problems of alcohol misuses are assessed. The last section provided some recommendations and strategies to address the issue of alcohol misuse.