

# Worcestershire Health & Well-being Board

## JSNA Briefing on Alcohol

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## Background

Alcohol related harm is a significant public health issue and is one of seven key areas that Public Health England (PHE) has outlined as a priority for the next five years<sup>3</sup>. It is also a key priority of the Health and Well-being Board in Worcestershire.

It is estimated that around 10.4 million adults in the UK are drinking at levels that pose some risk to their health, which means that around 1 in 4 people would benefit from reducing the amount of alcohol that they drink<sup>4</sup>. The Global Burden of Disease Study 2013 revealed that, in England, alcohol use disorder is the biggest risk factor for early death, ill health and disability for those aged 15 to 49 years<sup>4</sup>.

Alcohol related harm has a significant impact upon an individual both physically and psychologically. Drinking above the recommended levels increases the risk of certain types of cancer including liver, breast and oral. It is a determinant for liver disease, heart disease, depression, suicide, unsafe sex and injuries. Harmful drinking also has wider reaching effects including impacts upon children and families, domestic and partner violence, employment, housing, crime, violence and road traffic accidents.

Some populations experience multiple severe disadvantages in relation to alcohol. For example, 1.7% of the population are in receipt of alcohol-related benefits, compared to 0.7% of the population in receipt of alcohol-related benefits in 2010/11.

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## Protected Characteristics – National Data

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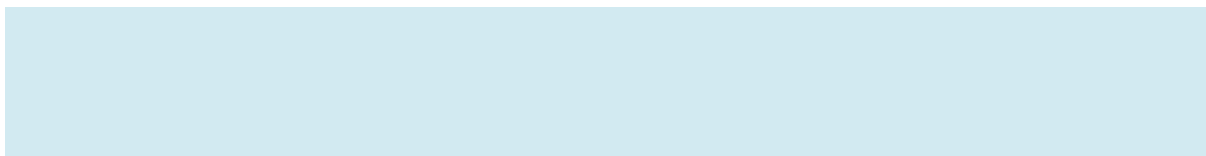
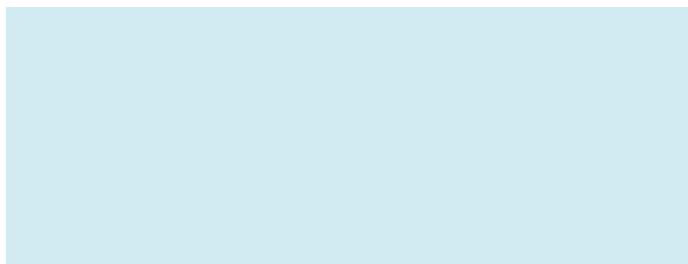
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## Alcohol Related Hospital Admissions: Data notes

Statistics relating to Alcohol can be difficult to navigate and understand because of the complexity of language used. Alcohol use disorder contributes significantly to 48 health conditions, wholly or partially, due either to acute alcohol intoxication or to the toxic effect of alcohol use disorder over time. Conditions include cardiovascular conditions, cancers, depression and accidental injuries. Risk of Ri isth



## Alcohol Related Hospital Admissions

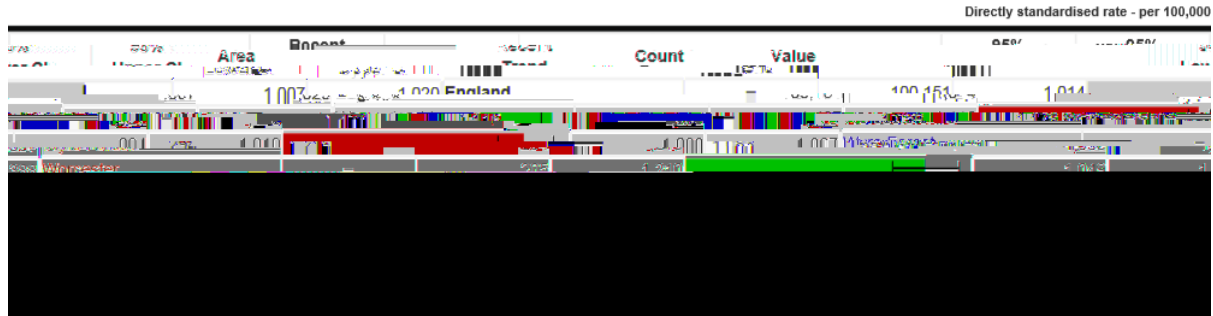
Worcestershire as a county has significantly lower rates across a range of key indicators for

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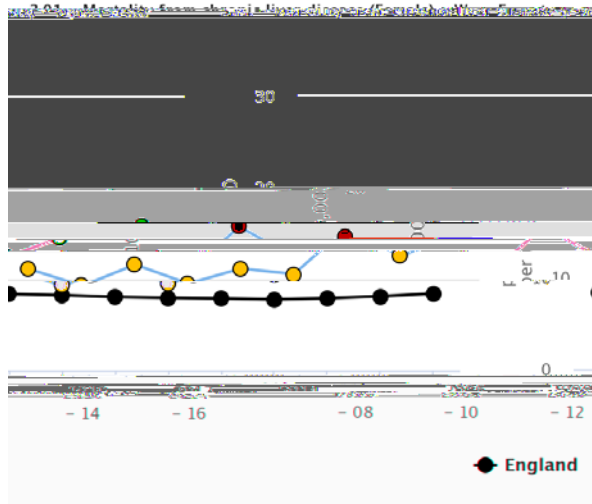
Conversely, Worcestershire has a significantly higher rate of people aged 65 and over who have an admission episode for alcohol-related conditions (narrow). Wyre Forest, Worcester and Wychavon all having significantly higher rates of hospital admissions for alcohol related conditions when compared to other district areas. It has been identified that there has been a significant fall in admission episodes in both Bromsgrove and Redditch and that this is likely due to a number of factors including the possibility of differences in treatment pathways, hospital episode coding, or new initiatives.

**Figure 6 Admission episodes for alcohol-related conditions (Narrow) – Over 65's (Persons) 2016-17**



## Alcohol Related Mor9924iho

Figure 8 Mortality from Chronic Liver Disease, Female, Wyre Forest



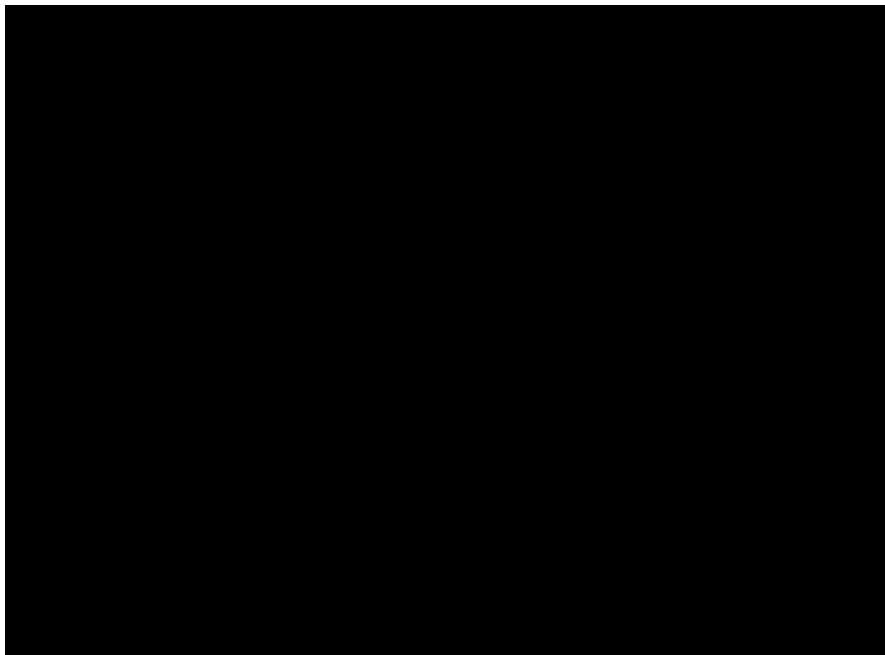
Source: Public Health England (2018) Public Health Outcomes Framework, Available from: <https://fingertips.phe.org.uk>

## Wider Impacts

Wyre Forest has a significantly higher proportion of claimants of benefits due to alcoholism at 176.1 per 100,000 population compared to the England average at 132.8



Figure 9 Number of Premises Licensed to Sell Alcohol per Km<sup>2</sup> (2015-16; Crude Rate)



## Local Priorities and Plans

A national strategy for Alcohol is due to be released later in 2018. A local strategy for tackling problems from alcohol related harm has been launched by Worcestershire County Council and covers the period 2016-2021<sup>15</sup>. The strategy looks at reducing the levels of alcohol that people are drinking as well as risky behaviors associated with drinking too much and will focus specifically on middle-aged drinkers, older people and those populations with poorer health outcomes. 03/10/2018

| Raising awareness  | Preventing alcohol related harm                        |
|--|--|
| Train peer-to-peer supporters to deliver health messages | Set up Worcestershire data officers group              |
| Provide alcohol awareness sessions for front line staff  | Toolkit for DPH responses to licensing applications    |
| Behavioural insights/change                              | Raise awareness of alcohol harm in the workplace       |
| Use of social media for health messages                  | Sign up licensed premises to Worcestershire Works Well |
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## Social Return on Investment: Drug and Alcohol Treatment Services

A national tool to estimate the return on investment for putting money into drug and alcohol services has been released by Public Health England. The tool uses information from different domains to estimate the benefits to wider society when drug and alcohol users are in treatment and also when they are in treatment and remain in recovery. The areas of benefit are as follows:

**NHS and Local Authority Gross Benefits:** NHS care, Adult carers, needle and syringe exchange programmes, housing and social care costs.

**Crime Gross Benefits:** Reduction in crime rates, reduction in crime related costs both social and economic return.

**Quality Adjusted Life Years (QALY) Benefit:** A QALY estimates how many extra years of reasonable quality drug or alcohol users get from being in treatment and/or recovery. A financial value is assigned to a QALY to express the value that society places on a life.

The total value of investment in drug and alcohol treatment services in 2016-17 in Worcestershire was £4,194,000. Most of the total budget (89.7%) was used for structured treatment services; of which £3,230,836 was for drug treatment services and £533,164 for alcohol treatment services. The remaining 10.3% of the budget, which totalled £430,000, was used for prevention, harm reduction and recovery support for both drugs and alcohol.

For every £1 spend on alcohol treatment services in Worcestershire there is estimated to be a social return on investment of:

£4.80 for individuals in treatment

£41.80 for individuals in treatment and recovery

The gross benefit per person is estimated to be:

£2,915 whilst they are in treatment

£25,125 long-term



[Alcohol-use disorders: diagnosis and management of physical complications \(CG100\)](#)

covers the care of adults and young people (aged 10 years and older) who have any physical health problems that are completely or partly caused by alcohol use.

<https://www.nice.org.uk/guidance/cg100>

## Data notes

Organisations that have carried out the original collection and analysis of the data bear no responsibility for its further analysis or interpretation.

## Further Information and Feedback

This briefing has been written by Worcestershire County Council's Public Health Team. We welcome your comments on these briefings and how they could better suit your requirements, please do contact us with your ideas.

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