

Reducing alcohol-related harm in Stockton-on-Tees: a strategic framework, 2019-2023

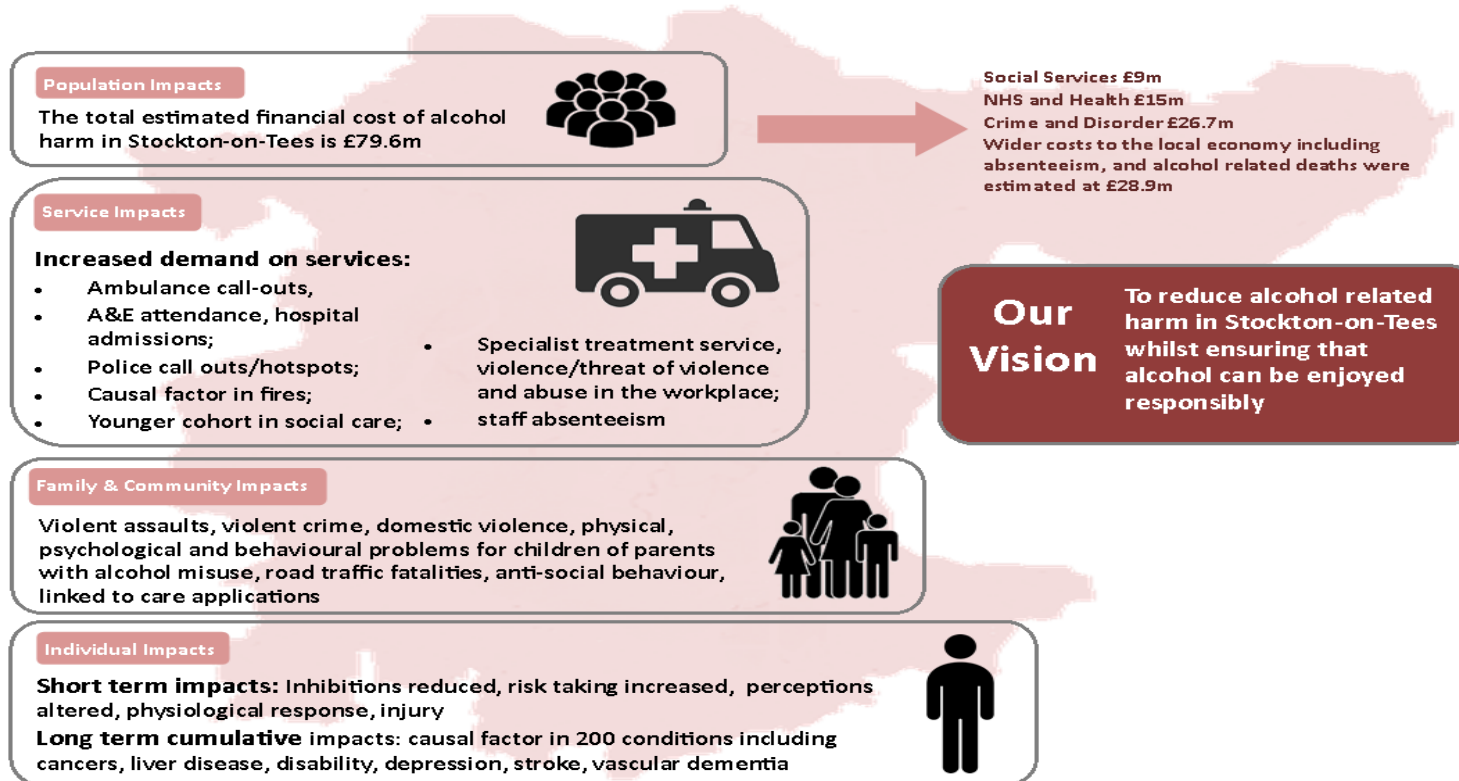
Stockton on Tees Health and Wellbeing Board

June 2019

1. Alcohol in our culture

Alcohol is embedded in our culture and our day to day lives. Alcohol is associated with socialising, relaxing, celebrating and commiserating. Different drinks for different occasions, situations, age groups, social groups, activities and status. Alcohol is socially acceptable, affordable and readily available. The majority of adults drink alcohol.

National and local reports tell us that many of us drink without knowing the risks to our health. Some 38% of Stockton-on-Tees residents drink at levels of increased risk of harm to their health (Balance Perception Survey, 2015). Alcohol-related harm is not only felt by individuals, it impacts on our families, our communities, our services and workforces as well as our wider economy. The harm being disproportionately greater for vulnerable and disadvantaged communities.



2. How the strategic framework was developed

Sponsored by the Health and Wellbeing Board, this strategic framework will contribute to the delivery of the Health & Wellbeing Board's strategic priorities (2019-23)

- 1. Children and families have a better start*
- 2. People in Stockton-on-Tees live well for longer*
- 3. Healthy places and stronger communities*

This strategic framework is built from national guidance; the public health evidence base and local intelligence as summarised within the JSNA.

3. Stakeholder engagement

A stakeholder event in February 2019 was attended by over 40 representatives from across public and voluntary sector organisations. Contributions from which have helped to shape the priorities and target groups within the strategy.

A stakeholder questionnaire sought views from carers; elected members and partner organisations, some of which were followed up with in-depth interviews. Users and former users of alcohol treatment services participated in in-depth interviews and focus groups. These contributions are reflected in improvement plans across a number of service areas.

4. Impacts of alcohol-related harm

The impacts of alcohol-related harm are felt at a population level, a community level and at an individual level, therefore our priorities need to reflect this. At an individual level a targeted approach is required to reach our most vulnerable and at risk

- Our Looked After Children
- High risk drinkers (including home drinkers)
- Individuals who drink to get drunk

At a population level we will support the evidence base to

- Address affordability
- Reduce demand, limit availability, marketing and advertising

5. Priorities

We will work with communities* to address our four priorities

1. We will increase our understanding and capacity to maximise our impact across the system to
 - a. Support a vibrant and diverse night time economy and reduce the demand for alcohol
 - b. Promote responsible drinking
 - c. Protect frontline staff
 - d. Reduce the opportunity for alcohol-related harm
2. We will increase awareness and understanding of alcohol and its related harms within our communities and support our workforces to respond
3. We will create environments which promote Making Every Contact Count, early identification of risky drinking and smooth pathways to support
4. We will implement prevention strategies; early intervention strategies as well as effective treatment, support and recovery for individuals and families.

*Our Communities

- Geographical: our residents
- Frontline workforce: service providers
- Service Users
- Carers
- Strategic decision makers
- Elected members
- Local businesses