

Greater Manchester

Big Alcohol Conversation

Focus Group Guidance

GMCVO

Greater
Manchester
Health and
Social Care
Partnership

10GM

A joint venture to
support the local VCSE
in the ten boroughs of
Greater Manchester

Introductory text for focus group facilitators

Please note that the below explanatory text can also be adapted by those carrying out 1-2-1 conversations with individuals

To be read out by event facilitators at the start of each focus group:

This focus group is part of the Big Alcohol Conversation which comes out of a vision to make Greater Manchester one of the best places in the world. A place where everyone can have the best start in life, live well and age well, safe from the harms caused by alcohol.

The statistics paint a stark picture. Alcohol is estimated to cause a range of harms which together cost our region around £1.3bn a year – that's £500 for every man, woman and child.

But alcohol also plays an important part in our region's vibrant towns and cities. Our night life is celebrated around the world. The vast majority of people who drink enjoy doing so sensibly.

The aim of this work is to reduce the harms associated with alcohol while supporting Greater Manchester's communities and night time economies to grow and thrive. The Big Alcohol Conversation is an important step on the journey to achieving this.

We are not looking into people's individual behaviour, or seeking to moralise or judge anyone about their relationship with alcohol. Instead we want to hear the stories behind the statistics:

- What do people understand about the scale and nature of alcohol harm in their communities?
- Whether the facts on paper fit with residents' experiences in their daily lives?
- And how – and indeed if – things should change when it comes to the way we drink?

We'd like to assure you that all information provided will remain anonymised – unless we ask for, and you provide us, specific consent otherwise. If you have any questions about your involvement, you can ask your event facilitator, or email gmhscp.bigalcoholconversation@nhs.net

Thank you for giving your time to join in The Big Alcohol Conversation. This is your chance to have your say and help us create a new ambition for alcohol across our region. Together we can make a difference.

Accompanying Q&A for focus group facilitators

Please note that the below Q&A text can also be adapted by those carrying out 1-2-1 conversations with individuals

What is the purpose of this focus group?

This is one of dozens of similar events taking place right across Greater Manchester to ensure the Big Alcohol Conversation involves voices that are reflective of the whole of the city-region. In

addition to completing the main Big Alcohol Conversation survey, this is your chance to have your say in more detail on the scale and nature of alcohol-related harm in your community.

Why have I been invited and what is the purpose of this focus group?

You have been invited by a community group you are in touch with that the Big Alcohol Conversation organisers are keen to hear from.

Who is organising this?

The Big Alcohol Conversation is being led by the Greater Manchester Health and Social Care Partnership, made up of our local NHS organisations and councils, NHS England, our emergency services, the voluntary sector, Healthwatch and others including the Mayor of Greater Manchester. The focus groups are being organised by dozens of voluntary, community, social enterprise and faith groups across Greater Manchester, supported by the GM Health and Social Care Partnership, GMCVO and 10GM.

Do I have to take part?

No, it's up to you to decide whether to take part. You decide whether you want to join in the conversation. You are free to leave at any time.

What will happen if I take part?

A series of questions will be asked by the event facilitator in relation to the scale and nature of alcohol harm. There will not be questions seeking that you share detailed personal information. The focus group will last no longer than an hour and a half.

Are there any risks or benefits of being involved?

There are no risks associated with either taking part or not taking part in this focus group. However, if you are upset in anyway or find that you would like to speak to someone confidentially then please contact your event facilitator in the first instance. If you would like to speak to an expert alcohol support service, details of local organisations are available from the 'In My Area' section of The Big Alcohol Conversation website: <https://www.thebigalcoholconversation.org/bus-tour>

What will you do with the information collected in this focus group?

The information collected as part of this will be written up and submitted to the organisers of the Big Alcohol Conversation. Unless you have specifically agreed otherwise, all responses will be anonymised so you will not be identifiable. We will use the information collected across the Big Alcohol Conversation to produce an 'Ambition for Alcohol' document that will guide and influence future alcohol policy in Greater Manchester.

Will my taking part be kept confidential?

We'd like to assure you that anything that you say will remain confidential – unless we ask for, and you provide us with specific consent otherwise.

Contact Details for the Greater Manchester Big Alcohol Conversation:

If you have any questions about your involvement, you can ask your event facilitator, or email gmhscp.bigalcoholconversation@nhs.net

The Big Alcohol Conversation: Additional explanatory notes

ACTION section of the Big Alcohol Conversation survey...

Which of the following would you like to see happening to tackle alcohol-related harm?

Alcohol should be sold in fewer places

What does this mean?

Greater Manchester has over 7,400 bars, pubs, clubs, shops and other premises which sell alcohol. That's an average of almost 6 in every square kilometre. But in many areas, the density is much higher.

Some people think that making alcohol so easily available encourages drinking and helps make it a feature of many people's everyday lives. And areas where there are higher numbers of licensed premises can be linked to higher rates of anti-social behaviour and worsened public health. The argument follows that if you reduce the number of places where alcohol is available, you can reduce its harms and potentially the amount people drink.

What could it look like?

As the title suggests, a smaller number of venues would be allowed to sell alcohol. But this wouldn't be about limiting numbers overall; the exact approach would likely be more targeted. For example, capping the number of retailers in areas where a high number already exist, or limiting sales around schools, hospitals or areas where there are particularly high numbers of vulnerable people or levels of anti-social behaviour. Measures could also be taken to limit the sale of alcohol at family-focused and community events, to help reduce the immediate harms and indirect behavioural influences of adults' drinking on children.

Where can I find out more?

A recent study by the Alcohol Focus Scotland charity found that alcohol-related crime, death and illness rates are significantly higher in areas with the most places to buy alcohol. Read more at <https://www.alcohol-focus-scotland.org.uk/campaigns-policy/availability-and-licensing/alcohol-outlet-availability/>

Children should be educated about alcohol and its harms

What does this mean?

Many schools currently teach about alcohol and alcohol harm as part of their Personal, Social and Health Education (PSHE) lessons. However, PSHE itself is not compulsory in all schools, there is no standard curriculum, and the teachers providing the advice are rarely specialists in the impacts of alcohol. There is a wide range of resources available to support their teaching, but these are not always independently produced or verified.

This all means that even when the issues are taught, they are not necessarily done so in an informed, engaging or impartial way.

And the biggest influence on children's attitudes to alcohol comes outside of school – from their families. Research has found that parents tend to be less concerned about alcohol than other issues facing their children, and that many parents introduce their children to alcohol earlier than the Chief Medical Officer's recommended minimum age of 15 in an attempt to help their children learn about alcohol in a 'safe' environment.

What could it look like?

While PSHE remains outside of the national curriculum, it is difficult to provide for compulsory education in schools around alcohol and its harms.

But Ofsted's ratings for all schools consider PSHE provision, and all local authority controlled schools must include some Personal, Social and Health Education, drawing on good practice. A campaign could promote the importance of alcohol education, and ensure that those schools which include it base their teaching on a 'best-in-class' standard of independently produced information.

And parents / carers could be better educated too – on the most appropriate ways of influencing and informing their children about safe and responsible drinking.

Where can I find out more?

Public Health England's 'Rise Above' programme provides free resources to support secondary school teachers when promoting positive health, wellbeing and resilience among young people aged 11 to 16. The content on alcohol is available at <https://riseabove.org.uk/tag/drinking-smoking-drugs/>

The Institute of Alcohol Studies' 'Like Sugar For Adults' report examines the influence of adults' behaviour around alcohol on children. You can download the report from <http://www.ias.org.uk/uploads/pdf/IAS%20reports/rp28102017.pdf>

Health should be considered when licenses to sell alcohol are applied for

What does this mean?

Local councils already have powers to restrict sales of alcohol where it could cause local harm. When granting alcohol licenses, they consider potential impacts on crime and disorder, public safety, public nuisance, and children's protection.

Introducing health as an additional licensing condition could help protect and promote the wellbeing of local residents by preventing the granting of further licenses to sell alcohol where this is likely to have a negative impact on people's health.

What could it look like?

Residents and communities could have a greater say in whether shops, venues and events are able to sell alcohol.

By demonstrating how the further sale of alcohol might realistically impact on local people's health, they could help a council decide whether to grant, refuse or impose certain conditions on a retailer's alcohol licence application. And where venues are already proven to harming the health of local people, existing licenses could be modified or taken away.

Where can I find out more?

Alcohol Research UK is a charity building reliable, research-based evidence to reduce alcohol-related harm. A recent report called for councils to consider the health of local people and the burden on hospitals when making licensing decisions. Read a summary at

<http://alcoholresearchuk.org/alcohol-insights/alcohol-outlet-density-and-alcohol-related-hospital-admissions-in-england-a-geographical-analysis>.

You can already have a say in alcohol licensing decisions. Voicing your support or concerns about new or existing venues can make a difference to where, when or how alcohol is sold in your area. Find out how you can comment on an alcohol licence at <https://www.gov.uk/comment-on-an-alcohol-licence>.

High strength, cheap alcohol should be less readily available

What does this mean?

There are a range of options. Government has traditionally used taxes and duties to increase the price of alcohol. But this has started to be taken further.

In some neighbourhoods of the country, communities and retailers have come together and banned the sale of certain high-strength, low cost drinks such as ciders.

In Scotland, and soon to be in Wales, Minimum Unit Pricing is preventing shops, pubs and clubs from selling strong alcohol below a set price.

What could it look like?

The different ways of clamping down on cheap alcohol have different impacts.

A blanket increase in taxes and duties means all affected drinks will cost more – unless producers or retailers absorb the rises to keep prices low. This approach is opposed by some people who think it is unfair to use alcohol harm as a justification for making ‘responsible’ drinkers pay more.

Banning the sale of certain drinks in theory means they become unavailable – but this can be difficult to enforce as in many cases people can simply buy the same products elsewhere.

Minimum unit pricing’s impacts vary depending on the price set. But it normally results in strong drinks which can cause the most harm increasing in price, without impacting on the cost of drinks of more moderate strength. For example, the 50p minimum unit price in Scotland and Wales means a can of 5.2% lager can cost no less than £1.15, a pint of 4.5% cider no less than £1.30, a bottle of 13.5% wine no less than £5, and a 2-litre bottle of strong 7.5% cider no less than £7.50.

Where can I find out more?

Academics from the University of Sheffield have led the way in researching Minimum Unit Pricing. A summary of their findings can be found at

<https://www.sheffield.ac.uk/scharr/sections/ph/research/alpol/faq>.

The Drinkaware Trust is an independent alcohol education charity, funded largely by donations from UK alcohol producers, retailers and supermarkets. You can read a discussion they’ve hosted on whether Minimum Unit Pricing should be introduced at <https://www.drinkaware.co.uk/about-us/viewpoints/should-minimum-unit-pricing-be-introduced-in-the-uk>.

I should be able to read on the bottle / can about how alcohol affects health

What does this mean?

There is often confusion around the strength of our drinks and the potential harms they can cause. The information available on our cans and bottles can contribute to this confusion.

There is presently no legal requirement for drinks containers to provide such information. There are instead best practice guidelines, drawn up by an organisation called The Portman Group – which was established by UK alcohol producers themselves – in consultation with other alcohol trade bodies. Using these guidelines is voluntary. Some products contain no, little, different or out of date information.

What could it look like?

Rules could be put in place to ensure that standard information appeared on all alcoholic drinks – providing clearer, more detailed, independently verified and monitored guidance to consumers. This could include the Chief Medical Officer's guideline of not regularly drinking more than 14 units a week, cigarette-style warnings of links to cancers and other conditions, drink-drive and/or drinking in pregnancy warnings, and calorie information.

This could help people be better informed about their drinking and its potential health impacts, and to better balance their consumption against potential risks.

Where can I find out more?

The Portman Group's current best practice guidance on communicating alcohol and health-related information to consumers is available at <http://www.portmangroup.org.uk/codes/alcohol-marketing/communicating-alcohol-and-health-related-information>

The Royal Society for Public Health is an independent health education charity which has proposed one new way of labelling alcoholic drinks. Their ideas are available at <https://www.rsph.org.uk/our-work/policy/drugs/labelling-the-point.html>

It should be easier to socialise without alcohol

What does this mean?

Pubs and clubs are at the traditional hearts of many of our neighbourhoods. When they close, they can leave big gaps in these communities. And our night life more widely has alcohol as a key ingredient. But does a good night out need to mean drinking alcohol?

There is an increasing number of quality low- or no-alcoholic drinks available in our shops, but this is not widely reflected in what is available in our pubs and bars.

But this is about culture as much as access. Can our residents be inspired to take up other opportunities to socialise, beyond a good night out or relaxing night in? And people regularly report being made to feel awkward if they are in a small minority not drinking in a group.

What could it look like?

Shops and venues could be pushed to stock a larger range of low- and no-alcohol drinks. An important part of this is showing producers and retailers that there is a demand for these products. And these drinks could be made available at lower prices. 'Duty' makes up a significant proportion of the costs of some drinks; this is not chargeable on low- and no- alcohol alternatives, but the prices of these drinks rarely reflect this.

But the bigger picture would be changing social norms – making alcohol less of an expected part of many social situations, from the pre-match drink, to the big night out or work networking event. Levels of drinking are regularly reported to be falling among younger people; could this be repeated across the wider population?

Where can I find out more?

Club Soda is a "Mindful Drinking Movement". They aim to create a world where nobody has to feel out of place if they are not drinking alcohol. You can find out how they are doing this at <https://joinclubsoda.co.uk>

This autumn, the BBC reported on the growing demand for alcohol-free student housing, as a growing number of young people choose not to drink. Read their story at <https://www.bbc.co.uk/news/uk-45171571>.

People should be able to access high quality alcohol support services

What does this mean?

Across Greater Manchester, our local authorities provide expert support services for people whose lives are affected by alcohol problems. But these are provided by different organisations in different areas, resulting in inconsistent support and experiences for those in need. And providing these services is not compulsory; in some areas of the UK, their funding has been reduced as a result of councils' spending pressures.

Where these services do exist, access can be a barrier. Residents sometimes lack awareness the range of support that is available, don't know how to access what is provided, or feel uncomfortable asking for help.

What could it look like?

We could make the case for continued investment in alcohol services across Greater Manchester, arguing for the current level of high quality support to continue or further develop.

The devolution of our health and social care services gives opportunities for our health system to buy these services at a Greater Manchester, rather than a local council, level – potentially ensuring better value and access to the same level of quality of support no matter where in our region you live.

Services could also become more accessible – with greater awareness of what is available, more ways to get to them from outside of formal medical or local council routes, and an increased culture of support by friends, family, employers and other personal networks to help people feel able to ask for the help they need.

Where can I find out more?

The Joint Commissioning Panel for Mental Health brings together a range of organisations to improve mental health and wellbeing through services. The panel has set out why investing in alcohol services is important, at <https://www.jcpmh.info/wp-content/uploads/jcpmh-drugsalcohol-guide.pdf>

People should try to drink less

What does this mean?

For generations, some people have seen excessive drinking as a lifestyle choice which is a scourge on their communities. They have called for people to take responsibility and drink less – or face harder measures to make them do so.

But this is not always so straightforward. Many people drink safely and responsibly. And many others consider themselves to do so, even if exceeding recommended low-risk health limits. Part of the issue is lack of awareness, clarity or belief in the guidelines. Many people need to be convinced as to why they should try to drink less.

For others, drinking might be more of a visible problem. But for many in this situation, trying to drink less will be a big step to take, and linked with a wider range of physical, emotional and behavioural issues.

What could it look like?

People could simply be pushed to take more responsibility for their own behaviour. There are a number of tools already available to help people do this – such as online drinks calculators and drink diaries to help keep a record of the amount you drink. These could be made more widely available, and promoted through lifestyle and wellness services.

Support is also important – as discussed in the ‘it should be easier to socialise without alcohol’ section above, reducing drinking across the population needs a cultural as well as an individual behavioural change. And as in the ‘people should be able to access high quality alcohol support services’ section above, those with particular needs should feel able to access high quality services or assistance to help them to drink less.

And to bring about change, people might need to be better educated about the levels and potential harms of their drinking. Clearer, more consistent guidelines could help – moving away from measuring alcohol in ‘units’ and more towards a ‘5-a-day fruit and vegetables’-style message that is simpler to understand. And further awareness raising would boost people’s understanding of the harms of regularly exceeding such limits.

Where can I find out more?

The ‘Drink Free Days’ campaign is taking an alternative approach to helping people to drink less – moving away from talking about ‘how much’ people drink, and towards ‘how often’. The Government-led campaign, in association with Drinkaware, is at <https://www.drinkfreedays.co.uk/> Do you know what a unit of alcohol actually means? Watch the Big Alcohol Conversation’s film about ‘The Big Measure’ to see how some people under-estimate the amount they drink...and the consequences this could have. Visit <https://www.thebigalcoholconversation.org/big-measure/>

There should be less advertising of alcohol

What does this mean?

Alcohol companies invest heavily in advertising, which has been found to have a significant influence on people's drinking. Putting limits on how alcohol can be promoted could reduce its harm.

These limits could be on where alcohol is advertised, and how. These are currently subject to voluntary codes of good practice, regulated by the alcohol industry itself.

Alcohol advertising is felt to be a particular issue around younger people, with some research finding that current marketing practices encourage young people to drink. Specific measures could ensure alcohol advertising features content and messaging less likely to appeal to young people, and does not appear in places where children are most likely to see it.

What could it look like?

In Greater Manchester, we could restrict alcohol adverts around schools and other public spaces, ban them from tv and radio during the day, and stop alcohol advertising on public transport.

More broadly, action could be taken around alcohol brands' sponsorship of music, sports and community events – particularly those attended by younger people.

And we could back the campaign for the regulation of alcohol advertising to be taken away from the alcohol industry itself, and onto a more independent body overseeing compulsory rather than voluntary guidelines.

Where can I find out more?

A campaign in the north east of England is already calling on Government to restrict alcohol marketing to children and young people. Find out more at <http://www.balancenortheast.co.uk/our-campaigns/see-what-sam-sees/>

The 'Addiction' scientific journal brought together leading public health experts to argue for stronger rules around alcohol marketing. Read the details at <http://www.addictionjournal.org/press-releases/current-controls-on-alcohol-marketing-are-not-protecting-youth-warn-public-health>

The Alcohol Information Partnership is funded by eight alcoholic drink producers aiming to ensure balanced debate around alcohol and alcohol misuse in the UK. You can read their response to Addiction's conclusions at <https://www.marketingweek.com/2017/01/10/ad-industry-slams-research-alcohol-ad/>

There should be tougher policing of alcohol-related crime and anti-social behaviour

What does this mean?

Almost a quarter of Greater Manchester residents say that there is a big problem in their local area with people being drunk or rowdy in public places. And more seriously, 15% of violent crimes and 7% of sexual offences were reported as alcohol related.

But communities can feel powerless to respond to this. Rightly or wrongly, some people feel that the police and other authorities don't take their concerns seriously when reporting alcohol-related incidents.

And when it comes to preventing such incidents, drink-free zones can be difficult to introduce, and harder to enforce.

What could it look like?

Alcohol-related harms could be pushed forward as a priority for our services to respond to. And extra police or local community support could be introduced with a specific focus on preventing and responding to alcohol-related incidents.

But additional policing comes with a cost, while many public services are facing budget pressures. One option for meeting these increased costs could be a levy on alcohol producers and/or retailers, with money raised ringfenced for dealing with harms caused by alcohol.

New measures could see 'drink free zones' and other measures to reduce anti-social behaviour made easier to introduce and to enforce. One way to do this could be by empowering and enabling communities themselves to prevent alcohol-related incidents in ways that respond to specific local challenges.

Where can I find out more?

The Institute of Alcohol Studies brings together research and insight on alcohol-related crime in the UK at <http://www.ias.org.uk/Alcohol-knowledge-centre/Crime-and-social-impacts/Factsheets/Alcohol-related-crime-in-the-UK-what-do-we-know.aspx>