

# Evidence Briefing 1: Context

## What is alcohol and drug prevention?

### Introduction

This context briefing contains 3 aspects of alcohol and drug prevention. Those are:

1. Definitions and types of prevention,
2. Headline stats about alcohol and drugs, and the health and social impact of their use, and
3. Main policies relating to alcohol and drugs.

In section 1, we look at definitions and types of prevention. We see what this means, explain why it is important, and an example of the partners that could be involved.

In section 2, we examine some of the headline stats about alcohol and drugs, and the health and social impact of their use. This helps underline the importance and some of the key drivers for alcohol and drug prevention work.

In section 3, we list some of the key policies and strategies relating to alcohol and drugs prevention.

While this briefing paper covers key information on 3 aspects of alcohol and drug prevention, it is important to recognise it is not exhaustive on the topic. References can be found at the end of this briefing to support the information contained within section 2 *Headline stats about alcohol and drugs, and the health and social impact of their use*. This is however essentially a ‘snapshot’ overview of the evidence. Within section 3 *Main policies relating to alcohol and drugs*, readers can click directly on the policy/strategy and will hyperlink directly to that document. The reader is advised that further evidence and research can be found in [Annex 3](#).

## Section 1 - Definitions and Types of Prevention

There are various definitions of prevention that typically include some or all of the following elements:

- Discouraging **any** use of alcohol and drugs
- **Delaying** the use of alcohol and drugs
- Avoiding the development of **harmful alcohol or drug use** or **dependence** amongst those who are using substances
- Preventing individuals from **additional** alcohol or drug use
- Reducing the **harm** associated with alcohol or drug use
- Tackling **risk factors** and increasing individuals' **resilience** to prevent problem alcohol or drug use

In the Greater Glasgow and Clyde Alcohol and Drug Prevention Framework, the definition for prevention is as follows:

**Prevention is defined as encouraging and developing ways to support and empower individuals, families and communities in gaining knowledge, attitudes and skills in which to avoid or reduce alcohol and drug issues and alcohol and drug related harm.**

This working definition is necessary to ensure that all planners and practitioners have a clear agreed focus for their work within the prevention field. It also removes the misconception that prevention is only about work with children and young people by clearly setting out the wider boundaries of prevention.

Particular emphasis in this framework is placed on the importance of early intervention through education and through the adoption of 'universal', 'selective', 'indicated' and 'environmental' targets for prevention work that aim to reduce risk factors and develop protective and resilience factors associated with the prevention of alcohol and drug related harm.

Put simply, prevention initiatives / services should aim to ensure that a specific target group avoids behaviours that have a negative effect their health and wellbeing as well as undertaking behaviours that promote positive health by following certain strategies.

It is recognised that there are **different types of prevention**:

- **Universal prevention** addresses a population at large and targets the development of skills and values, norm perception and interaction with peers and social life
- **Selective prevention** addresses vulnerable groups where alcohol and drug use is often concentrated and focuses on improving their opportunities in difficult living and social conditions
- **Indicated prevention** addresses vulnerable individuals and helps them in dealing and coping with the individual circumstances which may put them at greater risk of escalating alcohol and drug use.
- **Environmental prevention** addresses reducing the availability and accessibility of alcohol and drugs in the community.

Effective prevention and education in Greater Glasgow & Clyde involves a **wide range of stakeholders** including (but not limited to) those working in:

- |  |                            |   |
|--|----------------------------|---|
| • Alcohol and drug recovery services           | • Primary care             | • Police Scotland                             |
| • Recovery communities                         | • Mental health services   | • Scottish Prisons Services                   |
| • Community and voluntary organisations        | • NHS Scotland             | • Youth groups                                |
| • Homelessness and housing services            | • Employers                | • Education Services                          |
| • Community Safety                             | • Fire and Rescue Services | • Health and Social Care Partnerships (HSCPs) |
| • Government departments and Local Authorities | • Licensing Boards         | • Licenced premises                           |

## Section 2 - Headline stats about alcohol and drugs, and the health and social impact of their use

Alcohol Sales and Use Stats:	Health and Social Impacts of Alcohol Use:
1 in 3 men, and 1 in 6 women drink at hazardous or harmful levels in Scotland	1 in 2 people report one or more harms as a result of someone else's drinking
19 units of alcohol purchased per adult per week in Scotland	22 people per week die from alcohol-related causes. Those living in the 10% most deprived areas of Scotland 4.5 times more likely to die an alcohol-specific death than those in the 10 per cent least deprived areas
24% of adults exceed the weekly low risk guidance	60% of young of young offenders were drunk at the time of their offence
In Scotland male drinkers consume alcohol on 2.9 days per week on average, compared to 2.5 days for women	There were 996 alcohol related hospital stays across both general acute and psychiatric hospitals combined within NHS GGC in 2018/19
There are 40% more licensed premises in the most deprived areas in Scotland	Excessive consumption of alcohol in Scotland Alcohol in costs £3.6 billion per year.

**Table 1<sup>i</sup>**

**Table 2<sup>ii</sup>**

Drug Use:	Health and Social Impacts of Drug Use:
There are an estimated 18,700 people in Greater Glasgow and Clyde with problem drug use	The number of drug-related deaths increased by 27% in 2018 to reach 1,187
6% of Scottish adults have used one or more illicit drugs in the past year	Victims perceived the offender was under the influence of drugs in 44% of violent crimes
Greater Glasgow and Clyde has the highest prevalence rate of problem drug use in Scotland	Opioids have been implicated or potentially contributed to 86% of drug related deaths in Scotland
One third of people with problem drug use are located in Greater Glasgow and Clyde	Adult respondents perceived drug dealing/drug abuse to be the most common issue in their local area with 42% of people believing it to be very or fairly common
In 2017/18, the most commonly reported illicit drug used within the last year was cannabis 6.6% of adults, cocaine 1.8% and ecstasy 1.2%	The number of individuals with problem drug use in Scotland was estimated to be in the range 55,800 to 58,900

**Table 1<sup>iii</sup>**

**Table 2<sup>iv</sup>**

### Section 3 - The current policy landscape

Steps have been taken to reduce alcohol and drug related harm in Scotland on a national level through the Scottish Government Alcohol and Drugs Policy. This includes the following policy actions and key strategies. For example:

Policy	Year	Description
<b>Alcohol</b>		
<a href="#"><u>Challenge 25 Scotland</u></a>	2011	Challenge 25 requires those who are over 18 but look under 25 to present ID if they wish to buy alcohol.
<a href="#"><u>Quantity Discount Ban</u></a>	2011	The ban prevents off-trade retailers from offering discounts on multi-buy purchases of alcohol.
<a href="#"><u>Minimum Unit Pricing</u></a>	2018	Minimum Unit Pricing is a structural pricing intervention in the alcohol sales market. In Scotland, the minimum unit price for alcohol has been set at 50 pence per unit. The Minimum Unit Pricing level is currently being reviewed by the Scottish Government.
<a href="#"><u>Alcohol Framework 2018</u></a>	2018	Updated framework setting out Scottish Government national prevention aims on alcohol.
<b>Drugs</b>		
<a href="#"><u>Take-Home Naloxone</u></a>	2011	Naloxone is a medication that can reverse the effects of opioid overdose. In 2011, the take-home Naloxone programme was launched by the Scottish Government in response to the rising number of opioid-related deaths.

## Alcohol and Drugs Combined

<a href="#">Scotland's public health priorities</a>	2019	Scotland's Public Health Strategy , where Public Health Priority 4 (PHP4) has the following aim: "A Scotland where we reduce the use of and harm from alcohol, tobacco and other drugs"
<a href="#">Rights, respect and recovery</a>	2018	Scotland's strategy to improve health by preventing and reducing alcohol and drug use, harm and related deaths

## References

Table 1

- *Alcohol Framework 2018: Preventing Harm*, Scottish Government, 2018. Available at: <https://www2.gov.scot/Resource/0054/00543214.pdf>;
- *Evaluation of C.H.A.T. resource and training*, Alcohol Focus Scotland, 2016. Available at: <https://www.adamresource.org.uk/wp/wp-content/uploads/2016/06/C.H.A.T.-Community-Pilot-2016.pdf>;
- *Monitoring and Evaluating Scotland's Alcohol Strategy (MESAS): Monitoring Report 2017*, NHS Health Scotland, 2017. Available at: [MESAS monitoring report 2017 - Publications - Public Health Scotland](#);
- *Taking Stock: Views and experiences of alcohol licensing in Scotland 2016/17*, Alcohol Focus Scotland, 2017. Available at <https://www.alcohol-focus-scotland.org.uk/media/287043/Taking-Stock-Report.pdf>;
- Alcohol data by NHS Board, ScotPHO, 2017. Available at: <https://www.gov.scot/publications/scottish-health-survey-2017-volume-1-main-report/pages/51/>

Table 2

- *Alcohol Framework 2018: Preventing Harm*, Scottish Government, 2018. Available at: <https://www2.gov.scot/Resource/0054/00543214.pdf>;
- *Evaluation of C.H.A.T. resource and training*, Alcohol Focus Scotland, 2016. Available at: <https://www.adamresource.org.uk/wp/wp-content/uploads/2016/06/C.H.A.T.-Community-Pilot-2016.pdf>;
- *Monitoring and Evaluating Scotland's Alcohol Strategy (MESAS): Monitoring Report 2017*, NHS Health Scotland, 2017. Available at: [MESAS monitoring report 2017 - Publications - Public Health Scotland](#);
- Alcohol data by NHS Board, ScotPHO, 2017. Available at: <https://www.gov.scot/publications/scottish-health-survey-2017-volume-1-main-report/pages/51/>

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**Table 3**

- *Prevalence of Problem Drug Use in Scotland, 2015/16 Estimates*, ISD NHS National Services Scotland, 2019. Available at: <https://www.isdscotland.org/Health-Topics/Drugs-and-Alcohol-Misuse/Publications/2019-03-05/2019-03-05-Drug-Prevalence-2015-16-Report.pdf>;
- *Prevalence of Problem Drug Use in Scotland, 2015/16 Estimates*. Available at: <https://www.isdscotland.org/Health-Topics/Drugs-and-Alcohol-Misuse/Publications/2019-03-05/2019-03-05-Drug-Prevalence-2015-16-Tables.xlsx>;
- *Scottish Crime and Justice Survey 2014/15: Drug Use*, Scottish Government, 2016. Available at: <https://www.gov.scot/publications/scottish-crime-justice-survey-2014-15-drug-use/>;
- *Older People with Drug Problems in Scotland; A Mixed Methods Study Exploring Health and Social Support Needs*, Scottish Drugs Forum, 2017. Available at: <https://sdf.org.uk/wp-content/uploads/2017/06/Older-People-with-Drug-Problems-in-Scotland-Addressing-the-Needs-of-an-Ageing-Population.pdf>;

**Table 4**

- *Prevalence of Problem Drug Use in Scotland, 2015/16 Estimates*. Available at: <https://www.isdscotland.org/Health-Topics/Drugs-and-Alcohol-Misuse/Publications/2019-03-05/2019-03-05-Drug-Prevalence-2015-16-Report.pdf>;
- *Scottish Crime and Justice Survey 2014/15: Drug Use*, Scottish Government, 2016. Available at: <https://www.gov.scot/publications/scottish-crime-justice-survey-2014-15-drug-use/>;
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