

Cancer Focus Northern Ireland's response to: NORTHERN IRELAND ASSEMBLY COMMITTEE FOR COMMUNITIES' CALL FOR EVIDENCE AND VIEWS ON THE LICENSING AND REGISTRATION OF CLUBS (AMENDMENT) BILL

Cancer Focus Northern Ireland

Cancer Focus Northern Ireland has been working for 50 years to reduce the impact of cancer on local people's lives.

We provide care and support services for cancer patients and their families; offer a range of cancer prevention programmes to help people lessen their risk of getting cancer; fund scientific research into the causes and treatment of the disease and campaign for better health policy to protect our community and its future

The Harm caused by Alcohol

Alcohol is easy to get hold of, increasingly affordable, advertised everywhere and accepted by many as an integral part of daily life. However, the great majority of the population recognise the harm that alcohol causes. They believe that drinking damages health, drives anti-social behaviour, harms children and families and creates huge costs for the NHS and the Police. Every year there are thousands of deaths and over a million hospital admissions related to drinking. More than two in five violent crimes are committed under the influence of alcohol, as are domestic violence incidents. One fifth of all violent crime occurs in or near pubs and clubs and 45% of adults avoid town centres at night because of drunken behaviour.

The impact of drinking on public health and community safety is so great that radical steps are needed to change our relationship with alcohol. We need to envision a society where low or no alcohol consumption is the norm, drunkenness is socially unacceptable and town centres are safe and welcoming places for everyone to use. Our vision is for a safer, healthier and happier world where the harm caused by alcohol is minimised.

Alcohol and Cancer

Alcohol causes at least seven types of cancer: those of the mouth, gullet (oesophagus), throat (pharynx and larynx), liver, large bowel (colon and rectum), and breast.

Consumption of any amount of alcohol increases cancer risk. The more alcohol consumed, the higher the risk of developing cancer. Reducing consumption or – even better – avoiding alcohol completely reduces cancer risk.

Overall, the risk of cancer in men who consume less than two alcoholic drinks (less than 20 grams of pure alcohol) per day and women who consume less than one alcoholic drink (less than 10 grams of pure alcohol) per day is 6% lower than that in people with higher alcohol intakes. Reducing the consumption from four-or-more to one-or-fewer alcoholic drinks per day, may reduce the risk of liver cancer by 21%, the risk of colorectal cancer by 31%, and in women the risk of breast cancer by 30%.

Reference:

https://cancer-code-europe.iarc.fr/index.php/en/ecac-12-ways/alcohol-recommendation/28-limiting-alcohol

Our Head of Cancer Prevention, Gerry McElwee, was a member of the Strategy team Chaired by Professor Sir Ian Gilmore which produced the independent Strategy published by the University of Stirling in 2013:

"Health First: an evidence-based alcohol strategy for the UK"

Reference:

<u>file:///C:/Users/gerrymcelwee/Desktop/Health%20First%20Alcohol%20Strategy%202013.pdf</u>

The Report had 10 recommendations:

- 1) A minimum price of at least 50p per unit of alcohol should be introduced for all alcohol sales, together with a mechanism to regularly review and revise this price.
- 2) At least one third of every alcohol product label should be given over to an evidence-based health warning specified by an independent regulatory body.
- 3) The sale of alcohol in shops should be restricted to specific times of the day and designated areas. No alcohol promotion should occur outside these areas.
- 4) The tax on every alcohol product should be proportionate to the volume of alcohol it contains. To incentivise the development and sale of lower strength products, the rate of taxation should increase with product strength.
- 5) Licensing legislation should be comprehensively reviewed. Licensing authorities must be empowered to tackle alcohol-related harm by controlling the total availability of alcohol in their jurisdiction.

- 6) All alcohol advertising and sponsorship should be prohibited. In the short term, alcohol advertising should only be permitted in newspapers and other adult press. Its content should be limited to information about brand, provenance and product strength.
- An independent body should be established to regulate alcohol promotion, including product and packaging design, in the interests of public health and community safety.
- 8) The legal limit for blood alcohol concentration for drivers should be reduced to 50mg/100ml.
- 9) All health and social care professionals should be trained to routinely provide early identification and brief alcohol advice to their clients.
- 10) People who need support for alcohol problems should be routinely referred to specialist alcohol services for comprehensive assessment and appropriate treatment.

We launched this Strategy at Stormont via the Assembly's All-Party Group on Cancer. It is extremely disappointing that the Northern Ireland Executive has not significantly progressed these issues in the intervening years.

Conclusion

None of this should be taken for granted. The impact of drinking on public health and community safety is so great that radical steps are needed to change our relationship with alcohol. We need to imagine a society where low or no alcohol consumption is the norm, drunkenness is socially unacceptable and town centres are safe and welcoming places for everyone to use. We must tackle the primary drivers of alcohol consumption. The evidence is clear: the most effective way to reduce the harm from alcohol is to reduce the affordability, availability and attractiveness of alcohol products.

The tools are available. The 'four Ps' of the marketing mix – price, product, promotion and place – are used by alcohol producers and retailers to increase their sales of alcohol. They can also be used by government to reduce alcohol sales, alcohol consumption and alcohol-related harm.



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