



<b>Report Title</b>	<b>Healthy, Wealthy &amp; Wine</b>
<b>Organisation</b>	<b>Bolton Engagement Alliance</b>
<b>Dates:</b>	<b>21 September, 2017</b>

### Acknowledgements

The Engagement Alliance would like to thank participants in Westhoughton for sharing their views and experiences.

### Disclaimer

This report relates verbatim comments gathered during the time of our visit. All comments recorded have been added to Healthwatch Bolton's databank of patient comment.

### Background

A recent Public Health Intelligence Team (PHIT) report for Bolton (2016) noted the combination of relative affluence and high alcohol intake for women in several local areas; Bromley Cross, Heaton, Lostock, Westhoughton South, Westhoughton North and Chew Moor.

This report will look at the comments from local women about behaviour and alcohol intake in Westhoughton, with a view to understanding whether the PHIT report findings relate to them.

### Strategic drivers

- Understanding of attitudes and experiences in relation to PHIT statistical findings.
- Clarification of possible reasons for the findings, as well as solutions rooted in local knowledge.

A total of 45 comments were recorded in this research. A selection of these comments are used in this snapshot.

### Method

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At the start of the research the following statement was presented to participants as context for discussion:

*According to a Public Health Intelligence Team Report (July 2016),*

*“Bromley Cross, Heaton, Lostock, Westhoughton South, Westhoughton North and Chew Moor are neighbourhoods who are affluent, often with older residents. Their health, given their age, is especially good. Lifestyle behaviours are good, but there are issues with alcohol intake.*

*These are wealthy areas, most residents will be well-educated and in senior jobs, with some retired. They have very good health, although some cancers are over represented, and alcohol consumption is well above average, especially for women.”*

A semi-structured interview questionnaire was then used to gather opinion from participants. This questionnaire covered:

- Whether people identified with the findings of the PHIT report.
- Truthfulness when speaking about alcohol intake to health professionals.
- Thoughts on how individuals could be motivated to acknowledge levels of alcohol intake.
- Ideas for a message to promote positive behavioural change related to alcohol.
- Avenues for enabling moderation, or reduction in alcohol intake, that could be put into place.

Responses were recorded verbatim alongside each question asked.

*\*Engagement officers tried to arrange more discussion groups, but experienced difficulty to recruit for this topic.*

## **Topics/Themes**

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- *Public Health* • *Alcohol* • *Behaviour Change*

## **The Comments**

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The initial response from those present was that the statement presented did not accurately characterise Westhoughton. One resident said that not everybody was retired or from a senior position. Whilst they acknowledged alcohol being drunk, this was not always in high volumes.

There has been concern that people might not be reporting their alcohol intake accurately to health professionals. In this research most disagreed, and felt they did tell the truth when asked. If they did not fully disclose the amount drunk, then this could also be due to difficulties in remembering with complete accuracy:

- “If you think you haven’t had a drink for a few weeks you average it out.”

As discussion went on people did recognise alcohol could be a problem, and they had several reflections on the reasons for this. Much of the comment was around wider debate on alcohol in society, as well as in Westhoughton. Possible solutions were also explored.

### **Ideas for reducing alcohol intake - education**

Residents suggested education and awareness are important ways to reduce drinking. There were a variety of ideas, some centred on schools, others health professionals, as well as enabling individuals to make informed choices. There was one suggestion that role models such as celebrities should set an example regarding alcohol.

- *“Schools need to be more involved; educate children when they are young.”*
- *“Young people (under age) forced to go to education on alcohol abuse (similar to speeding drivers going to speed awareness class) or face a fine.”*
- *“Have more open discussions about alcohol in schools.”*
  
- *“Doctors should spend more time with someone to find out the reasons why they drink.”*
- *“Health professionals could offer incentives such as free cinema tickets (to give you something else to do).”*
- *“Use a testing system for a certain amount of time to measure whether you have alcohol in your bloodstream.”*
  
- *“It needs to be gauged to the individual.”*
- *“Messages need to come from family/close friends rather than health professionals.”*
- *“Offer free or reduced gym membership.”*
- *“Suggest people keep a diary.”*
  
- *“Celebrities should set a better example.”*

### **Ideas for reducing alcohol intake - restrict/deter**

There were some suggestions based on restricting and deterring people from drinking more. A key concern was driving under the influence, and there were three comments supporting tough responses to this. One response mentioned fining people that came to A&E drunk. A resident said that the legal drinking age could be increased to 21.

- *“There needs to be zero tolerance for drunk driving.”*
- *“There should be tougher penalties for drink drivers (longer bans).”*
- *“Drivers causing death while under the influence should be tried for murder.”*
  
- *“Charge an A&E fine if taken there.”*
  
- *“Raise the legal drinking age limit to 21 years.”*

### **Ideas for reducing alcohol intake - distract**

The lack of local things to do was highlighted as a cause of drinking overall in Westhoughton. Facilities were felt to be both lacking and unsuitable for adults.

- *“There’s nothing for adults to do in Westhoughton in the evening.”*
- *“There is nothing for the mid-age range people to do.”*
- *“Alcohol drinking is down to boredom at all ages.”*
- *“Reasonably priced activities are needed.”*

### **Alcohol as a commercial problem and a commercial responsibility**

People said that easy availability and affordability were related to increased alcohol intake. The low cost of alcohol in supermarkets was felt to be a key area, as was the way pubs promote the sale of drinks. One comment points out alcohol is too expensive in pubs, and this could result in drinking at home.

- *“Supermarkets are selling alcohol too cheap.”*
- *“Raise the price of alcohol.”*
- *“More emphasis on cost.”*
- *“Soft drinks should be much cheaper than alcohol - sometimes they are more expensive.”*
  
- *“The law needs to change so that pubs can’t serve alcohol until noon.”*
- *“Pubs etc. should stop offering ‘specials’.”*
- *“Supermarkets to stop selling alcohol alongside food. Alcohol should be sold in off licence type premises only and not supermarkets.”*
  
- *“People drink at home before going out as alcohol is so expensive in pubs.”*

### **Younger People’s habits thought to be more concerning**

All of the participants in this study are adults over middle age. People felt that younger people had a higher alcohol intake. Thoughts on why ranged from lack of dedicated things to do, to factors encouraging young people to drink; commercially and culturally.

- *“There are no church youth groups anymore.”*
- *“Where do teenage boys go? Alcohol and drug abuse is leading to poor mental health.”*
  
- *“Young people are encouraged to drink with offers on shots, etc.”*
- *“There’s nowhere for young people to go without alcohol.”*
  
- *“Drinking is a youngster’s rite of passage to adulthood.”*
- *“Our daughters (in their 20s and 30s) drink much more than we ever did.”*
- *“When the current young people get to middle age they are going to be very heavy drinkers.”*

## **Conclusions**

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Initially residents did not recognise the findings in the PHIT report - they did not feel they drank too much, and not all residents are retired and wealthy.

Most felt they would report accurately to professionals about how much they drank. Though some agreed it might be averaged out and it was hard to know exactly.

Despite this, problems with alcohol were recognised and there were suggestions on how to approach this:

- Solutions - residents thought a combination of education for the young and incentives from health professionals might work to reduce high alcohol intake.

- A commercial issue - it was felt low prices and promotions in pubs encouraged people to drink more. Some people therefore supported an increase in the price of alcohol and a reduction in the number of offers and promotions in outlets.
- Younger people - there was concern over the levels of drinking amongst younger people. Suggested responses to this included better education and more to do for young people in the evenings.
- Nothing to do - overall residents felt there was little for younger and middle aged people to do in Westhoughton to do in the evening. This was given as a reason people drank.