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SECOND OPINION.

By Gerry Hickey.

A step in the right direction.

The recent launch of the alcohol industry’s “drinkaware” campaign is a welcome shift in a positive direction. However, this is not to say that it should be endorsed unconditionally.

It is encouraging to see on the web-site the inclusion, be it low-key, of a suggestion that some people ought not to take alcohol at all. Web-links to voluntary helping agencies and some selective information on the mental health aspect reflect the beginnings of a helpful strategy to assist our society tackle its chronic alcohol problem. This is not before time.

However, the suggested “standard” intake calculations ignore a key factor. When dealing with a powerful mood-altering drug it is somewhat naive to generalise in the assumption that logic dictates intake once consumption has commenced.

For problem drinkers the damage needs to be measured in terms of effect rather than quantity as even one drink can cause loss of control over their intake and resultant behaviour. Such individual effects cannot be assessed by generalisations and calculations and this needs to be highlighted.

There is a conspicuous absence of detail as to what constitutes problem drinking and the inclusion of a statement such as the following would be very helpful. “Problem drinking is a pattern of drinking in which a person has lost control over their drinking so that it is interfering with some vital area of their life such as family, friends, job, school, health or other such area important for them.” Such a definition needs to be prominently incorporated into any guidelines. It also needs to be incorporated as a health warning into the various advertising campaigns promoting alcohol if not on product containers themselves. This action would validate the industry’s declared healthy motives.

Frequently, we only address the resulting trouble caused by alcohol consumption. In doing so we fail to treat the core issue of problem drinking. Drunk drivers are not challenged about their drinking habits. Fittingly, they are fined and barred from driving. Yet the core issue of their reckless and possible problem drinking mostly goes unchallenged. The same applies generally to alcohol fuelled attendances at A & E wards and public order offences presenting at Garda stations.

Dealing with the consequences is not dealing with the real issue and surely these situations present an ideal opportunity for alcohol Education and Prospective Intervention. Brief-intervention at Garda stations and A & E wards would go some way towards at least naming the problem directly with the abuser and

giving them the opportunity to take positive action. It should not be too difficult to devise a manner of making it appealing for the patient or arrestee to partake in the process.

There is substantial evidence to show that many people ought not to take alcohol at all. Culturally there is intense peer-pressure to partake. A major, continuous and actively promoted campaign for positive, inclusive social attitudes to those in our society not taking alcohol through choice or for health reasons is lacking. And what of those trapped within the ripple effects of someone else's problem drinking? Men, women and children can suffer for a lifetime from the horrendous negative side effects of a family member's drinking. They too are frequently left abandoned in alcohol's trail of destruction, afraid, unheard and unaided.

The alcohol industry having its eye on profit will always be treated with suspicion when putting health guidelines forward. But alcohol is here to stay and we desperately need redress measures around it. It is unreasonable and unfair to expect voluntary groups, invaluable as they are, to constantly mop up alcohol's negative side effects.

I suggest a Government backed Independent Authority, pro-active in accessing the educational, intervention and treatment implementation roles. Sufficiently protected from commercial interference, it could seriously consider discussing substantial, unconditional financial input by those who profit from the alcohol product.

Web based information will not reach everyone and there is a need for consistent, widespread, high profile educational promotion as to what constitutes problem drinking. Appropriate counteractive options and remedial action need to be highlighted in a similar manner to those used to promote its apparent positive effects. By doing this the industry can play their part in being responsible and be seen to be acting sensibly.

Gerry Hickey. November 2006.

Biography:

Gerry Hickey is a Counsellor / Psychotherapist in private practice in Dublin. He is a long-time active campaigner concerning alcohol related harm.