



Transforming the public health system – Alcohol and Families Alliance (AFA) response

April 2021

Within the structure outlined, how can we best safeguard the independence of scientific advice to Government?

The AFA welcomes the proposal to strengthen the role of the Chief Medical Officer (CMO) as the source of independent expert public health advice and to provide professional leadership of the Office for Health Promotion (OHP).

It is important to safeguard the independence of scientific advice to government and to ensure the effectiveness of public health systems across government and at a national, regional and local level.

In relation to advice on alcohol and families, in 2009, the CMO published guidance around alcohol consumption and children suggesting that an alcohol free childhood is the healthiest and best option. In 2016, the CMO also published guidance on drinking during pregnancy, advising that if pregnant or planning a pregnancy, the safest approach is not to drink alcohol at all. Wider CMO guidance exists encouraging adults not to drink regularly more than 14 units per week, to keep health risks from drinking alcohol to a low level, and for people that do drink as much as 14 units per week, it is best to spread this evenly over 3 days or more.

The AFA supports the CMO's guidance around alcohol and encourages the government to support the effective communication of the CMO's alcohol guidelines, and are encouraged by the envisaged role the CMO will undertake in feeding into and providing oversight of public health systems across Government.

In addition, the majority of substance use and family services are provided by voluntary sector organisations, and a partnership with civil society and the voluntary sector needs to be embedded within the system as it has a key role to play in building the public health evidence base, feeding into independent scientific advice and helping address health inequalities.

Where and how do you think system-wide workforce development can be best delivered?

The AFA welcomes the focus on system-wide workforce development, and believes this should include an expansion of the public health remit in order to tackle the wider determinants of health. Furthermore, this should extend to the public health workforce and include roles across national and local government and the NHS.

In doing so, any such approach would also need to work with regional public health teams and local authorities, to ensure any intervention is tailored and effective to varying local needs.

Properly resourced training and resources should be available for practitioners and professionals working across frontline public health services, to better understand how to support and signpost people and their families affected by wide-ranging health issues, including alcohol, and the interplay with other related health issues.

How can we best strengthen joined-up working across government on the wider determinants of health?

The AFA strongly welcomes the commitment to cross-departmental and joined-up working and investment across national and local government. People affected by alcohol misuse and their families would benefit greatly from this approach, as well as communities across the country and wider society. Alcohol misuse is an issue that interconnects with a range of other challenges including mental ill health, domestic abuse, physical health, housing and crime. Whilst these issues currently fall under the remit of a range of different departments, it is vital that addressing these issues is co-ordinated and properly resourced.

Any joined-up approach should also include the voice of people and families with lived experience, as well as voluntary organisations involved in the delivery of frontline services, using their experiences and expertise to feed into future policy development.

Joined-up working should extend beyond government, and needs to take place in frontline public health services too – including drug and alcohol treatment services, mental health services, domestic abuse services, social care, primary care, carers' services and criminal justice services.

How can we design or implement these reforms in a way that best ensures prevention continues to be prioritised over time?

Insufficient public health funding is a key challenge, and the capacity of frontline services, including substance use and family services has suffered considerably over recent years as a result. The OHP will require significant funding in order to deliver in line with the Government's commitment to improve long-term health outcomes nationally and at local levels, where the NHS, voluntary sector organisations and local authority commissioners will play a crucial role in fulfilling this commitment.

Stigma can play a particularly damaging role to those affected by a range of public health issues, in particular families affected by alcohol misuse, and can be a powerful block, preventing people from getting the support they need, and sometimes causing their problems to escalate further. Public awareness is key to preventing stigma from obstructing people getting the support they need. Focus in recent years relating to mental health through celebrity endorsements and mass media campaigns has successfully encouraged public debate on this topic, making it easier for people to reach out for help. A similar change in public attitudes to people with alcohol problems would be beneficial for families, and should extend to wider public health issues too. The involvement of people and families with lived experience in the planning and implementation of reforms would also help in preventing stigma and ensuring any approach understands the experiences of the people it exists to benefit.