

BOPDHB Position Statement

Alcohol and Other Drugs

Introduction

The Bay of Plenty District Health Board (BOPDHB) is required under legislation:

- to improve, promote, and protect the health of people and communities;
- to promote the inclusion and participation in society and independence of people with disabilities;
- to reduce health disparities by improving health outcomes for Maori and other population groups;
- to exhibit a sense of social responsibility by having regard to the interests of the people to whom it provides, or for whom it arranges the provision of, services;
- to exhibit a sense of environmental responsibility by having regard to the environmental implications of its operations.

The BOPDHB has prepared a series of position statements which demonstrate its commitment to these objectives, and outlines its viewpoint on different health issues.

1.0 The Bay of Plenty DHB affirms the following:

- 1.1 It will undertake activities to support Government policy,
 - i) to reduce alcohol consumption at a population level
 - ii) to reduce excessive drinking by adults and young people
 - iii) to reduce the harm caused by alcohol use, including crime, disorder, public nuisance, and negative public health outcomes
 - iv) to support the safe and responsible sale, supply and consumption of alcohol
 - v) to improve community input into local alcohol licensing decisions
 - vi) to improve the operation of the alcohol licensing system
- 1.2 It will actively work towards reducing alcohol and other drug related harm inequalities in identified high-risk populations.
- 1.3 It supports the reduction of the adult drink driving limit to a Blood Alcohol Concentration of 0.05 to reduce the number of deaths and injury on our roads, and the impact that has on trauma admissions to BOPDHB hospitals.
- 1.4 It supports public health professionals in the continued monitoring of licensed premises.
- 1.5 It will advocate this position statement when opportunities arise on alcohol issues to district and regional councils and government select committees, and providing input into district and regional alcohol policies and plans.



- 1.6 It will promote alcohol and other drugs harm reduction strategies through the provision of information to health care professionals and the public.
- 1.7 It will work to increase access to Alcohol and Other Drugs treatment options across the Bay of Plenty, particularly for high-risk populations.
- 1.8 It will work to increase opportunities for screening and brief interventions in appropriate health settings such as the Emergency Department and primary care.
- 1.9 It will link with PHOs, NGOs, other parts of the health sector and the community to ensure that it has a full understanding of current alcohol and other drug issues as experienced by the population of the BOP, and can then determine the best interventions to address any emergent issues.
- 1.10 It will engage with other sectors such as Education, Justice, NZ Police and Corrections, in a coordinated approach to plan for, promote, support and deliver alcohol and other drug harm reduction and treatment strategies through partnerships based on shared outcomes and coordinated investment.
- 1.11 When opportunities arise, it will advocate for the following approaches that are endorsed by the World Health Organisation:
 - i) raised alcohol prices
 - ii) raised purchase age of alcohol
 - iii) reduced alcohol accessibility, particularly through the reduction in the number of outlets that sell alcohol
 - iv) reduced marketing and advertising of alcohol
 - v) increased drink-driving counter-measures

2.0 The Bay of Plenty DHB notes that:

- 2.1 Alcohol is the world's most commonly used drug. The health effects of use and abuse of alcohol are variable on an individual; however there is no dispute that alcohol is a significant cause of disease and disability, and has wider implications within NZ society than other drugs.
- 2.2 Alcohol use is deeply embedded in New Zealand. While moderate alcohol use presents few immediate problems for most people, any consumption of alcohol has potential harmful effects, particularly vulnerable populations such as young people, unborn children, older people, and patients with hepatic infections. Excessive use comes at a high cost, through accidental injury, violence, motor vehicles crashes, cancer, mental health problems; alcohol addiction; and other alcohol related disorders. Decreased alcohol consumption should result in a healthier New Zealand population and lead to lower health care costs.
- 2.3 There is increasing use of recreational drugs especially amongst younger people, and abuse of prescription medicines, often amongst older people. A range of measures are required to reduce harm from these drugs, from Police surveillance and enforcement to better monitoring of the prescribing and use of medicines. The public health approaches to reducing the harm to communities is largely managed by the Ministry of Health, with five BOP providers being contracted to deliver Community Action on Youth and Drugs (CAYAD) programmes.
- 2.4 Preventing intoxication would significantly reduce the harm from alcohol. The social and physical context affects the potential for harm from intoxication, so strategies are needed that protect the drinker and others by altering the social environments where people drink.



- 2.5 While the health sector can make a strong impact on decreasing alcohol related harm, a coordinated approach across sectors is identified as best practice to achieve real gains in New Zealand communities. A sustainable strategy to change the New Zealand drinking culture requires a multi strand approach addressing supply control, demand reduction and harm minimisation.

Adopted by the BOPDHB Board at its meeting on 18 April 2012.

Review This position statement will be reviewed in three years, or as necessary.

ⁱ World Health Organisation

ⁱⁱ Babor, T., Caetano, R., Casswell, S., Edwards, G., Giesbrecht, N., Graham, K., et al. (2003). *Alcohol: no ordinary commodity: research and public policy*. London: Oxford University Press.

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