



## **Bristol Health & Wellbeing Board**

<b>Bristol's Big Drink Debate</b>	
Author, including organisation	Public Health Bristol
Date of meeting	16 <sup>th</sup> August 2017
Report for information	

### **1. Purpose of this Paper**

To present the findings of the Big Drink Debate to the HWB highlighting findings that will inform future alcohol harm reduction activity.

### **2. Executive Summary**

Please see the executive summary in the Bristol's Big Drink Debate report which is attached at Appendix 1.

### **3. Context**

The harm caused by alcohol is a significant concern for public, primary and secondary health and statutory services in Bristol. Alcohol-related hospital admissions in Bristol are significantly higher than the England average for both men and women and alcohol-related deaths in men are significantly higher than the national average (28.5 per 100,000; national 16.1), and are rising. Bristol City Council has identified alcohol as one of the Public Health priorities and has developed a strategy to reduce alcohol consumption in the City. Public Health has identified alcohol as a priority lifestyle behaviour and is working with partners to reduce the harm caused.

### **4. Main body of the report**

Please see attached report at Appendix 1.

## **5. Key risks and Opportunities**

Please see attached report at Appendix 1.

## **6. Implications (Financial and Legal if appropriate)**

The recommendations in the report indicate the implications for future work related to changing attitudes to alcohol consumption in Bristol. These are limited to public health policy, commissioning and the design of health improvement interventions.

## **7. Evidence informing this report.**

The report is a presentation of new evidence about attitudes to alcohol in Bristol.

## **8. Conclusions**

The work undertaken under the banner of the *Big Drink Debate* will help to shape our efforts to reduce the harm caused by alcohol. It suggests we should link concerns about weight gain with alcohol-harm-reduction messages and broadcast messages that emphasise the normality of drinking within the Chief Medical Officers (CMO) Guidelines for low risk drinking. The high proportion of people drinking within CMO limits supports our intention of working with businesses and licensees to help them expand their range of no and low alcohol options.

## **9. Recommendations**

That the Health and Wellbeing Board considers the detail of the Big Drink Debate report and considers its implications.

## **10. Appendices**

**Appendix 1:** Bristol's Big Drink Debate 2016/17: What do you think about alcohol?