

Consultation questions

This submission has been prepared by the Institute of Alcohol Studies with input from Dr Carly Lightowlers from the University of Liverpool.

Question 1

We have set out our main priorities in the [Objectives](#). Do you think these are the right priorities?

Yes/No

Please give reasons for your answer:

We welcome the focus on making prevention a priority in Objective 4.

To do so effectively, it is important to consider the role alcohol plays in violence and domestic abuse, and introduce policies that help reduce alcohol consumption and harm.

The relationship between alcohol and domestic abuse is complex. While alcohol is never a cause of domestic abuse and should not be used for narratives that place the blame for incidents of abuse on drinking alone, research has repeatedly suggested that alcohol is a compounding factor and increases both the occurrence and the severity of domestic violence.¹

Multiple studies have suggested that a substantial portion of domestic violence perpetrators have been drinking at the time of their assault (with estimates ranging from 25% to 73%).² Police data shows that domestic incidence call-outs increase at times when alcohol consumption is likely elevated, for example during contentious football matches or cultural events such as New Years.³ Within intimate relationships where one partner has a problem with alcohol or other drugs, domestic abuse is more likely to occur than not.⁴

Further, alcohol appears associated with severe violence, with these cases found to be twice as likely as others to involve alcohol.⁵

Indeed, the impact of licensed premises closures during the COVID-19 pandemic has impacted trends in at home drinking⁶ and been accompanied by a rise in

¹ World Health Organization (2006). [Intimate partner violence and alcohol](#).

² Bennett L., & Bland P. (2008). [Substance Abuse and Intimate Partner Violence](#). National online recourse centre on violence against women; Gilchrist E. et al. (2003). [Domestic Violence offenders: characteristics and offending related needs](#). Home Office.

³ Alcohol Change UK (2014). [Roles of Alcohol in Intimate Partner Abuse](#).

⁴ Galvani, S. (2010) [Supporting families affected by substance use and domestic violence](#), The Tilda Goldberg Centre for Social Work and Social Care, University of Bedfordshire, ADFAM.

⁵ McKinney, C.M. et al (2009). [Alcohol availability and intimate partner violence among US couples](#). Alcoholism: Clinical and Experimental Research, 33(1), pp.169-176.

⁶ BMJ (2020). [Covid-19 and alcohol - a dangerous cocktail](#); Callinan S. and MacLean S. (2020). [COVID-19 makes a stronger research focus on home drinking more important than ever](#).

domestic violence reporting⁷ – so it is likely that alcohol plays a role in many of these cases given the existing evidence of the link. Yet, despite this, the impact of the pandemic on alcohol-related domestic violence has not been adequately considered in alcohol and domestic violence policy responses.

Alcohol ought to be considered in any discussion of domestic abuse. In terms of making prevention a priority, action needs to be taken that can help reduce alcohol consumption, including action on alcohol availability, marketing, and affordability. Moreover, adopting a gendered preventative public health approach that centres on alcohol-related domestic violence as a problem in its own right may be beneficial in reducing VAWDASV.

Alcohol marketing: introduce comprehensive restrictions on alcohol advertising in public spaces.

Research has found that alcohol advertisements visible outside off-premise outlets were associated with increased violent crime over and above the association between the outlets themselves and violent crime. Reducing the visibility of alcohol advertisements from the street could thus help to decrease the risk of violence associated with alcohol outlets.⁸

Furthermore, the night-time environment is highly sexualised and marketing in this environment uses women's bodies and sexualities, for example through photographs of female patrons.⁹ Such content may work to normalise the objectification and sexualisation of women, and as a result, may impact on attitudes towards and treatment of women within society as a whole. Reducing regressive gender stereotypes is important so as not to undermine efforts at reducing VAWDASV.¹⁰ Action must be taken to shift these norms if we are to see a reduction in violence against women and girls across society.

There is also clear evidence that exposure to alcohol marketing has a negative impact on children and young people; it leads young people to drink at an earlier age, to drink more than they otherwise would, and increases the likelihood that they will go on to develop an alcohol problem.¹¹ Restricting alcohol marketing is recommended by the World Health Organisation (WHO) as one of the most effective policies to reduce alcohol-related harm.¹²

Affordability: tackle cheap alcohol by reviewing the level of minimum unit price

⁷ BBC (2020). [Coronavirus: Domestic abuse calls up 25% since lockdown, charity says](#); Guardian (2020). ['Calamitous': domestic violence set to soar by 20% during global lockdown](#).

⁸ Trangenstein et al. (2020). [Alcohol Advertising and Violence](#).

⁹ Atkinson A. et al. (2019). [A rapid narrative review of literature on gendered alcohol marketing and its effects: exploring the targeting and representation of women](#).

¹⁰ Atkinson A. et al. (2019). [A rapid narrative review of literature on gendered alcohol marketing and its effects: exploring the targeting and representation of women](#).

¹¹ Public Health England (2016). [The public health burden of alcohol and the effectiveness and cost-effectiveness of alcohol control policies](#); The Institute of Alcohol Studies. [Factsheet: marketing and alcohol](#); Critchlow, N. et al. (2019). [Awareness of alcohol marketing, ownership of alcohol branded merchandise, and the association with alcohol consumption, higher-risk drinking, and drinking susceptibility in adolescents and young adults: a cross-sectional survey in the UK](#).

¹² World Health Organisation (2019). [Technical Package for SAFER. A World Free from Alcohol Related Harms](#).

The price of alcohol is directly linked to alcohol harm, and one of the most effective policies to reduce alcohol harm is to reduce its affordability.¹³ Indeed, multiple studies have found alcohol price increases to be associated with reductions in levels of domestic violence and sexual assault: a 1% increase in alcohol price has been demonstrated to be associated with a 5% reduced risk of being a victim of domestic violence as a wife.¹⁴ US research has further shown that an increase in the price of alcohol reduced the probability of severe violence against wives.¹⁵ Research examining international evidence from across 16 countries found a 1% increase in alcohol tax resulted in a 0.25% decrease in the probability of assault and a 0.16% decrease in the probability of sexual assault.¹⁶ Findings of an evidence review commissioned by the Home Office suggest increases in alcohol price were associated with reductions in overall crime, including violent crime and sexual assault.¹⁷

In the UK, the affordability of off-licence beer has more than tripled, while off-licence wine and spirits have become 163% more affordable since 1987.¹⁸ The introduction of minimum unit pricing (MUP) in Wales in 2020 was a great step to help reduce alcohol harm. However, inflation and income growth mean that the impact of MUP at 50p will decline over time, and, indeed, already has declined since the Welsh Government first stated their support for a MUP at 50p in 2013. The level of MUP should be regularly reviewed and adjusted to ensure it stays effective.

MUP is also showing promise in disproportionately benefitting those of lower socio-economic status.¹⁹ Considering recent findings highlighting how alcohol-related domestic violence victimisation is up to 14 times as common in the lowest socioeconomic groups,²⁰ this shows the potential for alcohol pricing and availability interventions to have a disproportionately positive impact on women and children too.

Availability: seek legislative competency for alcohol licensing and introduce public health as an additional licensing objective

Reducing the availability of alcohol has been proven effective to prevent and reduce alcohol harm. Research found that, as the number of premises selling alcohol in Wales fluctuated with time, so did alcohol harms.²¹ Moreover, studies have found a correlation between crime and the density of shops selling alcohol.²² To be able to effectively regulate the availability of alcohol – and therefore reduce alcohol harm – the Welsh Government should seek legislative competence over alcohol licensing and introduce public health as a fifth licensing objective.

¹³ World Health Organisation (2017). [Tackling NCDs: "best buys" and other recommended interventions for the prevention and control of noncommunicable diseases.](#)

¹⁴ Patra, J. et al. (2012). [Are alcohol prices and taxes an evidence-based approach to reducing alcohol-related harm and promoting public health and safety? A literature review.](#) Contemporary Drug Problems, 39(1), pp.7-48.

¹⁵ Markowitz, S. (2000). [The price of alcohol, wife abuse, and husband abuse.](#) Southern Economic Journal, pp.279-303.

¹⁶ Markowitz, S. (2000). [Criminal violence and alcohol beverage control: evidence from an international study.](#) National Bureau of Economic Research.

¹⁷ Booth, A., et al. (2011). [Alcohol pricing and criminal harm, a rapid evidence assessment of the published research literature.](#)

¹⁸ The Institute of Alcohol Studies (2020). [Budget 2020 analysis.](#)

¹⁹ Meier PS, et al. (2016) [Estimated Effects of Different Alcohol Taxation and Price Policies on Health Inequalities: A Mathematical Modelling Study.](#) PLoS Medicine.

²⁰ Bryant L. and Lightowlers C. (2021) [The socioeconomic distribution of alcohol-related violence in England and Wales.](#)

²¹ Fone et al. (2016). [Change in alcohol outlet density and alcohol-related harm to population health \(CHALICE\): a comprehensive record-linked database study in Wales.](#) Public Health Research.

²² Richardson et al. (2015). [Is local alcohol outlet density related to alcohol-related morbidity and mortality in Scottish cities?.](#)

Such upstream preventative efforts are important in limiting the extent to which alcohol drinking can subsequently lead to harm, such as domestic and sexual violence, and embroil people in the criminal justice system rather than get them the help they need. Although alcohol treatment and enforced sobriety (e.g. alcohol tagging) can be features of criminal justice intervention, they are only made available after the event, often when crisis has hit or been narrowly averted.²³

Finally, it is important that **adequate high-quality services are provided**. To add to the complex relationship between alcohol and domestic abuse, alcohol may be drunk by the victim as well as the perpetrator. Women who have experienced extensive physical and sexual violence are more than twice as likely to have an alcohol problem than women with little experience of violence and abuse.²⁴ However, despite the close relationship between domestic abuse and substance use, very few survivors access specialist support. This is due, in part, to the lack of services that respond to the multiple needs of people experiencing both domestic abuse and substance use. Research has shown that the lack of integrated or coordinated services, can see survivors prioritising one need over another, i.e. domestic abuse *or* substance use.²⁵

Yet, even accessing either one service can prove difficult. People can find themselves turned away from refuges when accessing domestic abuse support due to their substance use. Likewise, survivors can struggle to find alcohol treatment services that meet their needs and adequately consider their trauma. Women who have experience of violent male partners may be reluctant to engage in mixed-gender services and can even be victims of sexual assault by male service users.²⁶ However, women-only provision of substance use is available in fewer than half of local authorities in England and Wales.²⁷

The provision of domestic violence services in England and Wales was inadequate before COVID-19 began. The sector is under a 'sustained funding crisis', and figures for 2019 show 60 per cent of those referred to domestic violence refuges were turned away.²⁸ This affects some groups to a greater degree than others. Those in the lowest socioeconomic groups might rely most heavily on publicly-funded resources, and when these close, this reduces the propensity of victims to escape violence.²⁹

²³ Lightowlers (2022). [Sentencing people to sobriety and coerced alcohol abstinence](#). Broad R. and Lightowlers C. (2015). [Policy and practice tensions in tackling alcohol abuse and violence in probation settings](#).

²⁴ Women's Aid. [The nature and impact of domestic abuse](#).

²⁵ Fox, S. & Galvani, S. (2020). [Substance Use and Domestic Abuse. Essential Information for Social Workers](#). Birmingham: BASW.

²⁶ Copeland, J. (1997). [A qualitative study of barriers to formal treatment among women who self-managed change in addictive behaviours](#); Ullman, S. (2012). [Women, Alcoholics Anonymous, and related mutual aid groups: review and recommendations for research](#). Bogart, C. & Pearce, C. (2009). ["13th-stepping": Why alcoholic anonymous is not always a safe place for women](#).

²⁷ Agenda and AVA (2017). [Mapping the Maze: services for women experiencing multiple disadvantage in England and Wales Executive Summary](#).

²⁸ Independent (2020). [More than 60% of domestic violence refuge referrals declined last year due to lack of funding](#).

²⁹ Walby, S. et al (2015). [Is violent crime increasing or decreasing? A new methodology to measure repeat attacks making visible the significance of gender and domestic relations](#).

Question 2

Do you think the overall approach we will be taking, as set out in the sections on the [Blueprint](#), is the right one to stop violence against women, domestic abuse and sexual violence?

Yes/No

Please give reasons for your answer:

As outlined above, more attention should be paid to the role alcohol plays in domestic abuse and sexual violence and how interventions aimed at stemming its availability, price and promotion can help reduce violence against women, domestic abuse and sexual violence (VAWDASV).

Question 3

We have set out the principles which underpin the draft [National Strategy](#). Do you agree with these?

Yes/No

Please give reasons for your answer:

We welcome the approach and particularly the focus on a whole society and public health approach. As mentioned above, any strategy that is looking to effectively reduce domestic abuse needs to consider the role alcohol plays and take action to reduce alcohol consumption.

Question 4

Do you agree with our [immediate priorities](#)?

Yes/No

Please give reasons for your answer:

The priorities seem a sensible starting point; however, the terms of reference especially in reviewing the evidence base ought to be set broadly enough to ensure they also take into account the role of alcohol in VAWDASV.

Question 5

What do you think is the most important thing we can do to stop violence against women, domestic abuse and sexual violence?

Question 6

Do you think there is anything we should be doing as part of this Strategy that can have a positive effect on opportunities for people to use the Welsh language?

Question 7

Are there any other things you think we should be doing to stop violence against women, domestic abuse and sexual violence, or do you have any other comments?

Question 8

How should we measure progress and success in delivering the things outlined in this Strategy?

The remaining questions are more detailed:

Question 9

Do you agree with the [scope of the Strategy](#)?

Yes/No

Please give reasons for your answer:

Question 10

We have proposed governance arrangements, which include working with key partner organisation and a number of sub-group/workstreams to tackle specific issues. Do you think working together in this way will improve coordination of work to stop violence against women, domestic abuse and sexual violence?

Yes/No

Please give reasons for your answer:

We believe it is important to include key partners with alcohol expertise in this work. Such expertise should be joined up with public health and violence prevention experts and ensure that overlap in their policies is reconciled rather than being standalone issue. For example, policies on VAWDASV to meaningfully consider alcohol and policies on alcohol harm, licensing etc. to consider VAWDASV.