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Editorial

Harm reduction and alcohol policy

This special issue arose out of a session on harm reduction in relation to alcohol, held in Belfast in March 2005, during the annual conference of the International Harm Reduction Association—the 16th International Conference on the Reduction of Drug Related Harm. This was, of course, not the first time that analogies between the drug and alcohol scenes had been noted by this audience, but it was the first time in this series of conferences that plenary and major sessions were devoted specifically to the subject of alcohol. It was, therefore, an important event, going beyond the significance of the papers presented—though the quality of these papers and the interest shown in the session were the drivers that led to building on them and putting together this special issue.

The discussion on harm reduction as an approach to managing issues arising from alcohol consumption came at a particularly useful time.

On the one hand, this approach, much contested in its early days, seems more recently to have emerged as the key way of thinking in constructing alcohol policies. It is now, up to a point, the conventional wisdom. Growing interest in the approach is evidenced also by the volume of work now being done on the subject, much of it referred to in this issue, and in the major international conferences on Alcohol and Harm Reduction held in Recife in 2002 and in Warsaw in 2004, in the conference in Vancouver in May this year, and in the forthcoming Cape Town conference in October 2006 (http://www.q4q.nl/alcohol4/home.htm).

By contrast, whole population measures, while necessary, are seen not to address (or at least not to address adequately) the significant problems arising for certain categories of problem consumers.

From the point of view of government policy, the harm reduction approach might seem attractive in principle, pointing the way to precise targeting of services and, therefore, best value for expenditure. From the point of view of equity, it would seem right to target greatest need (or greatest risk). From the liberal perspective, focussing on individual freedoms, the flip side of the harm reduction approach is to minimise the degree to which the general population is inhibited by rules aimed in practice at the needs of a minority.

However, if harm reduction is now the conventional wisdom in alcohol policy, it does not go unchallenged—either by health experts and academics, or by the developing course of events. The World Health Organization, for one, continues to lay heavy emphasis on whole population measures, particularly on restricting supply, almost to the stage of dismissing other approaches with contempt. Critics suggest that at least some harm reduction approaches, especially educational ones, yield poor value results, when compared with more directive (some would say more heavy-handed) approaches.

It is worth remembering that the concept of "harm reduction" covers a range of possible interventions, the common feature of which is merely that they do not aim at abstinence. Thus, harm reduction can include working with individual drinkers, helping them to manage their problem with more insight. It can also mean modifying the public drinking environment (for example, in ways to avoid violence), or adapting aspects of public policy to encourage moderation (for example, through taxation or control of bar opening hours).

Another context is the threefold approach to prevention and intervention, as recommended by the US Institute of Medicine: (1) universal prevention (aimed at the whole population); (2) selective intervention (aimed at high-risk groups, such as college students or members of native/aboriginal tribes); and (3) indicated prevention (aimed at individual high-risk drinkers) (Mrazek & Haggerty, 1994).

On the face of it, the case for more directive approaches may appear to be reinforced by recent developments in western society, characterised by the so-called "binge drinking" phenomenon, but as part of a much bigger (and not well understood) societal change in recent years in how people spend their leisure time, with more emphasis especially among the young on clubbing and drinking.

Measham's article (2006) talks graphically of the dramatic cultural changes in young peoples' leisure habits, resulting in a culture of heavy drinking. It is a particular description of the young, urban contemporary leisure scene in England, and England does (along with the rest of the UK) seem to have particularly acute problems in this field, to the extent of drinking being the whole purpose of, rather than an adjunct to,

a night out. But the same worrying phenomenon is appearing elsewhere.

A key question – perhaps the most urgent question we have to face at the moment – is how much does this emerging issue change the terms of debate? We may infer that Stockwell (2006) would respond, "Quite a lot." Though not relating his analysis specifically to the kind of cultural change addressed by Measham and not denying some value in the harm reduction approach, Stockwell still sees a reduction in overall alcohol consumption throughout the population (and, presumably by implication, the rules and regulations to support that) as crucial.

However, Witkiewitz and Marlatt (2006) remind us that harm reduction is not just a fashionable theory, but a well-documented and tested set of interventions with much empirical support, based on a growing body of research. No doubt there is still much to do, including finer analysis of what works best in which circumstances—Kosok's (2006) article on "moderation management" is a good (and, so far, encouraging) example. Incidentally, Witkiewitz and Marlatt also remind us of the early academic struggle in the US to establish the validity of the concept, against an established conventional wisdom and (it would appear) some academic skulduggery and personal aggravation. Plus ca change

It is interesting to note the extent to which policy makers (for example, in recent developments in the UK) are not following this line. In an earlier edition of this Journal, Plant and Plant (2005) document the confusion among policy makers in England. A major liberalisation of licensing hours has been introduced, against the kind of background addressed here by Measham (2006), with the avowed purpose of developing a more "Mediterranean" drinking culture. This is taken to mean that if people have more time to drink in bars, they will adopt a more relaxed attitude and drink less, because, for instance, the pressure to "drink up" at closing time is removed. Yet, it is clear that this no doubt desirable outcome is no more than a pious aspiration, adopted in the absence of (or, according to Plant and Plant, in defiance of submitted) evidence, against the advice of almost all relevant experts, including the police, and apparently also against common sense. The cock up theory being generally more persuasive than the conspiracy theory of history, these changes seem less likely to arise from (say) industry pressure than to be simply a particularly egregious example of government policy makers setting out on a path and either failing to notice, or at least being unable to respond to, a major shift in the landscape occurring at the same time.

In the case of England's northern neighbour, a small country with a huge and very particular historical hangover, O'Donnell's report (2006) describes a quite different set of regulatory changes: also liberal in relation to licensing hours, but recognising the policy complexity of the issue and specifically giving more prominence to such issues as public health and the views of the local community. England and Scotland, therefore, now become two very distinct test beds of policy change, and it will be interesting to observe the outcomes

over the next few years. The article by Mistral, Velleman, Templeton, and Mastache (2006) continues the focus on the UK's particularly intense problems and, abutting on some of the territory covered also by O'Donnell, describes a series of community prevention initiatives.

One important area for optimism about the harm reduction approach lies in the development of schemes for early intervention with college students, and this provides an important focus in the present issue. White (2006), Newman, Shell, Major, and Workman (2006), Lewis and Marchell (2006), and Hernandez et al. (2006) provide strong evidence of what can be done. Neighbors, Larimer, Lostutter, and Woods (2006) provide a helpful review of the available literature, with particular coverage of young people.

Finally, this issue provides further helpful updates on harm reduction in Brazil (Gorgulho & Da Ros, 2006), Japan (Higuchi, Matsushita, & Osaki, 2006), and South Africa (Rataemane & Rataemane, 2006).

Readers will make their own assessment of this collection of papers. It seems to us, not forgetting Stockwell's useful corrective steer, that harm reduction as an approach to alcohol policy is here to stay, if only because the mix of more liberalised markets, increasing consumption, and broader changes in culture at least in western societies do not seem to lend themselves to the imposition (or re-imposition) of seriously more inhibiting systems of rules. In addition, the evidence of what can be achieved preventatively with young people – albeit most strikingly where these young people are especially accessible to help, as in a US college campus environment – gives some confidence.

We hope that this issue of the Journal will provide a helpful contribution to a debate that clearly still has a long way to go.

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