

Union of Students in Ireland Alcohol Strategy

What is USI?

The Union of Students in Ireland (USI) is the national representative body for students in Further and Higher Education. Founded in 1959, USI celebrated its 50th anniversary in 2009 and now represents more than 250,000 students in over forty colleges across Ireland.

Objectives of USI

1. An education and training system open to all, irrespective of any consideration, including consideration of national origin, ethnic background, age, ability, sex, sexuality, creed, political beliefs or economic circumstances, so that each individual can realise their full potential.

2. An education and training system which truly serves the interests of the people of Ireland.

3. The right of students to a decent standard of living including the right to adequate financial support, proper housing and future prospects of employment in Ireland.

4. The defence and promotion of all democratic and human rights.

5. The provision of student services for the benefit of the membership on the principle that control of student services should lie with the membership.

6. To represent the interests of the students of Ireland at international level.

Background to this policy:

Drinking is often regarded as being a part of Irish culture – many of our biggest international brands are alcohol related, and a pint of Guinness is seen by many as a rite of passage for international visitors to Ireland.

In Ireland, there is a significant amount of variation in actual drinking behaviour: 23% of Irish adults abstain completely from alcohol, compared to 10% in most of western continental Europe. However among those who do drink in Ireland, alcohol consumption per person is twice as high as the rest of Europe. Binge drinking, (defined as drinking a bottle of wine, 25 centilitres of sprits, or four pints of beer in one sitting), is far more common in Ireland than the rest of Europe. 48% of Irish adult men engage in an episode of binge drinking at least once a week compared to 9% in Germany, 8% in France, and 11% in Italy.[1]

The literature on alcohol consumption has identified a number of key influences. The most validated personality assessment tool which is currently used is based on the "Big-Five" personality framework, a multidimensional typology which assesses personality on five dimensions— extraversion, agreeableness, conscientiousness, emotional stability, and openness to experience.[2,3] Parental and sibling factors have also been shown to be determinants of alcohol consumption patterns.[4] Also, many studies have shown that peers exert a decisive influence over adolescent risk-taking behaviour, with a greater influence than parental effects.[5] Finally, the age at which the person begins to consume alcohol has been implicated in later patterns of heavy alcohol use by a number of articles. This could be due to common unobserved factors affecting both onset and later alcohol use. However, there is strong evidence that alcohol consumption is habitual and highly persistent.[6]

There is a wealth of evidence from both Ireland and abroad which demonstrate the various harmful effects related to alcohol consumption.

A national study which involved 2,500 patients in six major acute hospitals across the country, found that 28% of all injury attendances in the accident and emergency departments were alcohol related. The highest proportion of alcohol related injury patients presented between midnight and 6am on six nights of the week. The patient profile showed that three-quarters of those in attendance with alcohol related injuries were male and almost half were in the 18-29 age group. Of all those in attendance for alcohol related injuries, 13% were alcohol dependent. However 64% of those who attended with alcohol related injuries reported that the accident/injury would not have happened if they had not been drinking. In other words, the injury was due to a drinking event on that specific occasion.[7] In the UK, a study which calculated how harmful drugs were classified a number of substances into how they harmed the user and how they harmed others. The more categories of harm that had positive answers – the higher the harm score for that substance. The most harmful drugs to users were heroin, crack cocaine, and metamfetamine, whereas the most harmful to others were alcohol, crack cocaine, and heroin. When the two part-scores were combined, alcohol was the most harmful drug followed by heroin and crack cocaine.[8]

Evidence shows, however, that alcohol related harm also creates an economic cost. From examining the loss of work output and the costs of healthcare, road accidents, crime and social security payments, studies estimated the economic cost of alcohol abuse in Ireland in 2003 was €2.65 billion.[9]

In Europe, one in four deaths of men in the age group 15 to 29 is related to alcohol, and this would be roughly in line with the proportion of deaths in this group in Ireland.[10]

Alcohol also has a significant link to poor mental health. The World Health Organisation has estimated that the risk of suicide when a person is currently abusing alcohol is eight times greater than if they were not abusing alcohol, which is linked to its ability to "facilitate suicide by increasing impulsivity, changing mood and deepening depression". [7, 10] Furthermore, in 2006/2007 alcohol was a factor in 41% of all cases of deliberate self-harm in Ireland. It was more common in cases involving men (44%) than women (38%).[11]

The CLAN Survey suggested that binge drinking (defined as drinking 75 grams of pure alcohol in one sitting) at least once a week was common among both male (61 per cent) and female (44 per cent) students. Out of every 100 drinking occasions, 76 ended in binge drinking for male students and 60 for female students. Being sociable, drinking for enjoyment and drinking for relaxation were the reasons most students cited for consuming alcohol. One in ten students used alcohol to forget worries and one in twenty used alcohol when anxious or depressed.[12]

Among college students, the likelihood of experiencing problems and harm increased with an increase in the frequency of heavy drinking, sometimes called 'binge drinking'. Students were twice as likely to miss college and reported their studies were harmed as a result of their regular heavy drinking. Money problems, fights, unprotected sex and accidents were three times more likely to occur among students who engaged in regular heavy drinking. In addition, those who were engaged in regular heavy drinking were less likely to use positive coping strategies when dealing with anxiety and depression.[7] The CLAN study also reported that impaired judgement due to alcohol was cited as a reason for non-use of condoms for males (11%) and females (9%) who were sexually active15. Students who were regular binge drinkers were two to three times more likely to engage in unintended sex (21% vs 8%) and in unprotected sex (19% vs 6%) than other drinkers.[12]

The purpose of this document is to outline, using evidence-based practice, what both USI and local students unions can do to encourage and enable our members to adopt more a more responsible approach to and action towards alcohol. We have also identified national policy decisions which would also be of significant benefit towards developing this. However it must be borne in mind that there is no such thing as risk-free drinking, only low-risk drinking.

Aims/Actions:

Training:

Aims:

To assist local welfare officers in their work on alcohol awareness and with students at risk of developing alcohol dependency

Actions:

The USI Welfare Officer will ensure a training module I provided for welfare officers at USI Officer Training on alcohol awareness issues, by an accredited organisation on the issue of alcohol awareness/alcohol abuse and misuse, and should take place before Christmas. This training should not be undertaken by an agency with a vested interest in the alcohol industry, but one that is objective to the industry and the situation as described above.

USI Events:

Aims: That USI events such as USI Officer Training, National Council and Congress would maintain a low-risk approach to socialising and a professional attitude towards the work at hand.

Actions:

- National Council: The USI Welfare Officer is to liaise with the local Students' Union hosting National Council to consult on entertainment and an event where alcohol is not the main focus e.g. cinema, bowling, table quiz for the main night of socialising (ie the Friday of National Council)
- USI Officer Training: USI Officerboard is to liaise with host institution to ensure that events where alcohol is not the main focus are provided as many evenings as possible throughout the week of USI Officer Training.
- Congress: USI officerboard, in particular the Welfare Officer and President are to ensure that a code of conduct for delegates at congress should be approved by National Council on an annual basis, and this should include a clause on the issue of alcohol misuse and alcohol related anti-social behaviour.

All other USI events: The alcohol-aware ethos of USI events shall fall under the responsibility of the relevant organising officer.

USI Officerboard will be responsible for upholding the Union code of conduct at Union events.

Local Students' Union officers should be mindful of their position as student leaders and take this into account with their own behaviour and attitudes.

Price, availability and marketing:

Aim:

That our members be protected from the effects of low cost selling, overavailability and excessive and subliminal marketing practices.

Actions:

USI will:

- Call for regulation of the density of premises to be a factor before the awarding of a license to any new premises.
- Work with local unions to investigate limiting the quantity of alcohol customers can buy in on-campus licensed premises.
- The Welfare Officer will put together research regarding the effectiveness or otherwise of minimum pricing on alcohol consumption, and propose a motion to USI Congress on the issue. Should this set any new policy, this alcohol policy should be updated to include it.
- Lobby for a mandatory code of practice in alcohol marketing.
- Lobby for a ban on alcohol advertising before 9pm.
- Work with local colleges to investigate banning alcohol-related sponsorship of clubs, societies and events, and the replacement of this with alternative sponsorship.
- Call for the banning nationally of alcohol sponsorship for sports teams/events where the majority of participants are under 18. The Welfare Officer will investigate the feasibility of expanding this to all sports teams/events.

Local Students' Unions should:

• Strive to remove alcohol promotion from their campuses

- Ensure that any alcohol promotion on their campuses is responsible and does not promote high risk drinking
- Where possible, assist clubs and societies in finding sponsorship from sources other than the alcohol industry.
- Enforce alcohol policies that outline appropriate advertising, marketing and sponsorship guidelines in relation to alcohol on campus.
- Work with college authorities to develop a college-wide alcohol policy where one is not already in place.

Anti- Social Behaviour and drink-related aggression:

Aim: To ensure our colleges are safe for all members of the community.

Action:

USI will:

- Assist local students' unions in their work in creating safe communities.
- Work with national bodies on the issue of sexual assault and drink-related aggression.
- Call for a national zero-tolerance policy to alcohol related law enforcement.
- Call for a feasibility study into the introduction of a limited number of 24 hour licensed premises (pubs and clubs), which can reduce the amount of alcohol-related anti-social behaviour.[13]

Local Students' unions should:

- Work with community stakeholders, eg college management, community Gardaí, residents, city/county council and local business organisations to ensure a coordinated, community based approach to the issue of anti-social behaviour. This should be with the guidance of USI officers where relevant.
- Ensure that events such as RAG/Raise and Give Week maintain a focus on the charitable aspect, with responsible approach to alcohol events and alternatives available to those who do not wish to take part in alcohol events but wish to participate in the charity aspect of the week.
- Work with relevant centres and support organisations to provide support for those affected by drink related harm.

- Work with the college to ensure discipline procedures within the college are fair to both the victim and the perpetrator and are enforced.
- Explore the feasibility of initiatives such as the Student Patrol as seen in colleges such as WIT, UCC and GMIT. [Note 1]
- Compile a list of local supports and services available.

Education, Awareness and Support:

Aims:

1) To provide knowledge about alcohol that empowers students to make informed decisions about their own behaviour.

Actions:

USI will:

- Make information about e-pub available to students' unions [Note 2]
- Provide materials to local students' unions, including posters, flyers etc that outline the facts about alcohol abuse in a non-judgemental, unpatronising and empowering manner.
- Work with national agencies to ensure co-ordination of efforts and maximum support for national alcohol awareness initiatives.
- Call for the national introduction of a Lifeskills programme [Note 3] at late primary level education for all children. Being a peer mentor could possibly be as part of the Transition Year programme in a nearby secondary school.

Local Students' Unions should:

- Investigate the usefulness of the e-pub programme for their college.
- Work with college authorities in producing an alcohol awareness module for first years to complete during orientation.
- Run alcohol awareness events, especially in lead up to events such as RAG Week.
- Investigate education programs for both staff and students.
- Ensure that Responsible Server Training is provided for staff in students' union run and other college bars.
- Liaise with local youth political groups, where appropriate, to gain support for effective policies and campaigns.

2) To provide support to those affected by addictions and those at risk of developing an addiction [Note 4]

USI will:

- Promote national addiction services to students and students' union officers.
- Support local work in addiction and support however possible.

Local Students' Unions should:

- Promote local addiction support services to students.
- Promote and protect support groups for students affected by addiction by whatever means possible.
- Provide links to counsellors and groups for those affected by addiction.
- Students Unions to call on senior management to establish a University/College wide working group to examine the issue of alcohol related harm among students.

Responsibility for the Alcohol Policy:

Unless otherwise states, USI Officerboard is responsible for the implementation of the USI Alcohol Policy. The USI Welfare Officer shall provide any support needed by COs to implement their own alcohol policies.

Note 1: Student Patrol

The Student Patrol initiative is an effort to tackle and control anti-social behaviour of student, by students. This can be of great benefit to students, other members of the community, and local Gardaí. Students are trained by former patrollers and other appropriate professionals, and patrol the residential areas in and around their college where students live, dealing with students who find themselves in trouble, reminding students of the problems they might face if laws are broken, and cleaning up litter.

Note 2: E-Pub

E-Pub is an interactive web survey that allows people to enter information about their drinking patterns and receive feedback about their use of alcohol. The assessment usually takes less than 10 minutes to complete, is anonymous and self-guided, and requires no face-to-face contact time.

Note 3: Lifeskills

The Lifeskills intervention is two years in length, following students to the end of the eighth grade in America (students aged 13 - 14). Older peer leaders (grades 10 to 12 - aged 15 - 17) receive a four-hour training session prior to the beginning of each school year (different peer leaders are selected for each grade). These workshops include an overview of the problems of tobacco, alcohol and marijuana and a general introduction to the intervention. The remainder of the workshops consist of discussion, demonstration and participation in various program activities and training in basic classroom management. All peer leaders also attend briefings prior to each lesson to familiarise themselves with the lesson's specific content.

This training programme has been proved to be effective as statistically, those that complete the programme start drinking alcohol at a later age than those tho don't complete the programme, and consume less alcohol than those who don't complete the programme. We would suggest that the programme in Ireland take place in fifth and sixth class as a significant amount of people have started consuming alcohol by the age of 12, so the intervention should be before this to be effective.

Note 4: Addiction

This document only deals with alcohol addiction, and there are many types of addictions of which alcohol in only one. The USI Welfare Officer has been mandated to write a document specifically regarding addiction and abuse of other substances.

References:

- 1. Ramstedt M & Hope A, The Irish drinking culture—drinking and drinking related harm, a European comparison, Unpublished paper, 2005.
- Lemos Giraldez, S., and A. M. Fidalgo Aliste. "Personality Disposition and Health-related Habits and Attitudes: A Cross-sectional Study." European Journal of Personality, 11, 1997, 197–209.
- 3. Smith, T. W., and A. J. Christensen. "Hostility, Health, and Social context," in Hostility, Coping, and Health, edited by H. Friedman. Washington, DC: American Psychological Association, 1992, 33–48.
- 4. Windle, M. "Parental, Sibling and Peer Influences on Adolescent Substance Use and Alcohol Problems." Applied Developmental Science, 4, 2000, 98– 110.
- 5. Allen, M., W. A. Donohue, A. Griffin, D. Ryan, and M. M. Turner. "Comparing the Influence of Parents and Peers on the Choice to Use Drugs." Criminal Justice and Behavior, 30, 2003, 163–86.
- 6. Delaney L, Harmon C & Wall P, Behavioral Economics and Drinking Behavior: Preliminary Results from an Irish College Study, Economic Inquiry January 2008.
- 7. Health Service Executive, Alcohol Related Harm in Ireland, April 2008.
- 8. Nutt DJ et al, Drug harms in the UK: a multicriteria decision analysis, Lancet 2010; 376: 1558–65.
- 9. Byrne S, Update on estimates of the cost of alcohol problems in Ireland. Referenced in Strategic Task Force on Alcohol: Second Report, 2004.
- 10. WHO 2001 World Health Organisation. Global Burden of Disease study. World Health Organisation. Geneva: World Health Organisation, 2001.
- 11. National Suicide Research Foundation, National Registry of Deliberate Self-harm Ireland, Annual Report 2006- 2007
- 12. The Heath of Irish Students: College Lifestyle and Attitudinal National (CLAN) Survey
- 13. Mohammed E.M. et al, The effect of the new "24 hour alcohol licensing law" on the incidence of facial trauma in London, British Journal of Oral and Maxillofacial Surgery 2008.