SUBMISSION

Mental Health Commission - public consultation on national standards for Child and Adolescent Mental Health Services (CAMHS)

Alcohol Action Ireland

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About us

Alcohol Action Ireland (AAI) is the national independent advocate for reducing alcohol harm. We campaign for the burden of alcohol harm to be lifted from the individual, community and State, and have a strong track record in effective advocacy, campaigning and policy research.

Our work involves providing information on alcohol-related issues, creating awareness of alcohol-related harm and offering policy solutions with the potential to reduce that harm, with a particular emphasis on the implementation of the Public Health (Alcohol) Act 2018. Our overarching goal is to achieve a reduction in consumption of alcohol and the consequent health and social harms which alcohol causes in society.

AAI has contributed to the development of several national and international strategies on mental health, including, most recently, input to Ireland's next suicide reduction policy. Therefore, we are delighted to take this opportunity to provide a submission to the Mental Health Commission's public consultation on National Standards for Child and Adolescent Mental Health Services (CAMHS).

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Introduction

Alcohol is no ordinary commodity; it is a depressant drug with significant health implications for those who use it, and it is a significant risk factor for suicide, as recognised by the World Health Organisation.[1] Research on alcohol has shown how its consumption can play a variety of negative roles in relation to mental health difficulties. Not least, alcohol can be a contributory factor to mental health distress, it can be an exacerbator of existing mental health difficulties, while mental health difficulties can be a maintaining factor for alcohol consumption.

Research shows that many people drink alcohol in a belief that it may help them overcome difficult emotions or situations.[2] However, using alcohol to cope[3] with trauma[4] or feelings of loneliness, depression, and anxiety may increase a person's risk of developing alcohol dependence, as well as other long-term health and social harms associated with heavy alcohol consumption. Resultantly, the development of national standards for CAMHS must include dealing with the harms experienced by children and you people from alcohol – be that directly or indirectly.

Children and young people in Ireland experience harm from alcohol in multiple ways, but this submission will focus on the following issues:

- Exposure to alcohol before birth (FASD)
- Being introduced to alcohol at an early age and being exposed to harmful marketing practices
- Being brought up in homes where there is parental problem alcohol use
- Exposure to risk from others who are engaged in alcohol use

Exposure to alcohol before birth (FASD)

Foetal Alcohol Spectrum Disorders (FASD) are a group of disorders caused by consumption of any amount of alcohol at any time from 6 weeks before conception (either parent) and for the duration of the pregnancy and are associated with a range of lifelong physical, mental, learning/educational, social, and behavioural difficulties.[5] FASD comprise Foetal Alcohol Syndrome (FAS), partial Foetal Alcohol Syndrome, Alcohol Related Birth Defects, and DSM-5 Neurodevelopmental Disorder – Prenatal alcohol exposure.[6] The symptoms of FASD may vary from child to child but are lifelong.[7]

FASD is often an invisible disability, yet prenatal alcohol exposure is the leading preventable cause of neurodevelopmental disorder. According to the HSE, only a small proportion of children with FASD have visible facial features (facial dysmorphia), with the majority of children with FASD having no visible signs of disability at birth.[8] Indeed, difficulties due to FASD may not manifest until preschool or school age.

Tragically, Ireland has the third highest level of FASD in the world, possibly affecting up to 7.4% of the population as highlighted by the HSE.[9] The best available evidence estimates that about 600 Irish babies are born each year with Foetal Alcohol Syndrome (FAS), with a further 9-10 times this number of babies born annually who have other Foetal Alcohol Spectrum Disorders.[10]

FASD is preventable through avoiding alcohol before conception and during pregnancy. However, this requires the efforts of government and the HSE at a national level. Central to preventing FASD is a whole-of-government strategy to drive evidence-based measures that lead to a reduction in FASD and to drive appropriate assessment and intervention strategies when the diagnosis is suspected or made.[11]

Shamefully, there is no such national strategy or model of care in Ireland for the prevention of FASD or for the response to children and adults with FASD. Neither are there any standard diagnostic policies or guidelines for diagnosing or treating children with FASD in Ireland. As a result, many do not receive the care and support they need.

Therefore, it is essential that the Department of Health and the HSE develop a model of care and statutory guidelines for FASD. As part of the model of care there is a need for the State to adopt the International Classification of Function, a validated tool for standard needs assessment, and provide interventions and supports to children and adults with FASD.

The development and roll-out of supports for those with FASD must also be done in a regionally balanced manner so that they exist in every part of the State. Furthermore, it is essential that supports provide for adults and people when they reach 18 years old.

Alcohol Action Ireland recommends:

- Develop clinical diagnostic guidelines, diagnostic pathways, and tailored supports for FASD
- Develop a model of care for child neurodevelopmental disorders to include FASD
- Provide awareness, education and support for FASD

Being introduced to alcohol at an early age and being exposed to harmful marketing practices

Alcohol is one of the most heavily marketed products with the annual spend on alcohol marketing in Ireland conservatively estimated at €115m. The purpose of marketing is to create a need or desire for a product. Alcohol is not a staple, it is not a necessary purchase, therefore a market must be created for it – and new drinkers must be recruited to create and expand that market.[12] Young people are an important market for the alcohol industry in this regard.

Comprehensive research now clearly tells us that alcohol marketing including advertising, sponsorship and other forms of promotion, increases the likelihood that adolescents will start to use alcohol, and to drink more if they are already using alcohol.[13] In short, children and younger people navigate a tsunami of alcohol promotion every day that ensures messages about drinking are increasingly normalised.

Ireland's Public Health (Alcohol) Act 2018 (PHAA) contains provisions to restrict alcohol advertising to young people. While these recently enacted measures are helpful, they also fail to protect children and adolescents in the main space inhabit – online.[14] Social media plays a dominant role in young people's lives and as a result digital marketing, and in particular social media marketing, has unique strengths over traditional marketing, including low cost and opportunities for tailored audience targeting and engagement.[15] Therefore, it is an important avenue for the alcohol industry to target and influence young people.

Young people are an important market for the alcohol industry. Comprehensive research clearly tells us that alcohol marketing, including advertising, sponsorship and other forms of promotion, increases the likelihood that adolescents will start to use alcohol, and to drink more if they are already using alcohol.[16] Moreover, in the modern world traditional media still remains very powerful, especially in terms of establishing brand awareness and consideration.[17] Research indicates that, compared to other means of marketing, traditional advertising has a strong influence on customer acquisition.[18] However, its most important role in modern advertising is to provide information to help consumers make their final purchase decision.[19]

In this way traditional advertising derives power from its intersection with digital and social media marketing. Therefore, it is unsurprising that with the advent of digital technologies, many agencies have integrated traditional and digital to offer more holistic campaigns.[20] Hence, it is little wonder that research

revealed Diageo, the multinational alcoholic beverage company, to be the number four broadcast advertiser to children in Ireland.[21]

Furthermore, a lacuna in the law has allowed alcohol companies to use zero-alcohol products, with identical branding to the master brand, to circumvent the advertising restrictions in the PHAA. This is exactly what the PHAA was supposed to protect against, especially in terms of alcohol advertising being seen by children, because evidence shows that exposure to alcohol marketing encourages children to drink at an earlier age and in greater quantities than they otherwise would.[22]

Therefore, it is little wonder that alcohol is the most commonly used substance among young people in Europe and is most commonly the first substance used by children.[23] Every year in Ireland, approximately 50,000 children start drinking. This can pose a serious risk to their health and well-being as alcohol is an age-restricted, toxic substance associated with a range of health conditions, diseases and injuries.

Alcohol is so deeply entrenched in our lives that it is easy to discount the health and social damage caused or exacerbated by drinking alcohol.[24] However, alcohol consumption among young people is a particular public health concern for government and policy makers as it carries significant health risks.[25] Research from the Netherlands found indications that alcohol consumption can have a negative effect on brain development in adolescents and young adults and entails a risk of later Alcohol Use Disorder.[26] There is also extensive evidence that drinking alcohol as a child, which is the norm rather than the exception in Ireland, is more likely to lead to heavy episodic drinking and is a known risk factor for later alcohol dependency.[27]

In Ireland, alcohol use declined among young people aged 15–24 years from the mid-2000s to the mid-2010s. However, since 2015 that downward trend has been reversing. Healthy Ireland Survey data shows that youth drinking has been increasing for almost a decade, with consumption now back at 75% – which is higher than the national average. [28]

As well as the aforementioned effects it has on brain development, alcohol also poses a risk to children and young people because it is no ordinary commodity; it is a depressant drug with significant health implications for those who use it, and it is a significant risk factor for mental health and suicide, as recognised by the World Health Organisation.[29] A psychotropic depressant of the central nervous system, alcohol promotes simultaneous changes in several neuronal pathways, exerting a profound neurological impact that leads to various behavioural and biological alterations.[30]

Alcohol has long been linked with poor mental health, including both self-harm

and suicide.[31] Research on alcohol has shown how its consumption can play a variety of negative roles in relation to mental health difficulties. Not least, alcohol can be a contributory factor to mental health distress, it can be an exacerbator of existing mental health difficulties, while mental health difficulties can be a maintaining factor for alcohol consumption. In Ireland, alcohol was found to be associated with one-third of self-harm hospital presentations in 2020[32] and a factor in close to half (44%) of all suicide cases.[33]

Furthermore, it is clear from research that many people seeking help for addiction problems also present with complex needs and are struggling with anxiety and/or depression or other serious mental health problems.[34] Evidence indicates that 30-50% of people with severe mental illness have co-existing substance use problems, and the same study outlined that 85% of those attending an alcohol service had reported suffering from a psychiatric disorder in the previous year.[35] Indeed, those with dual diagnosis are at increased risk of suicide compared to those with solely substance-use or mental disorders.[36]

Dual diagnosis is well known to be associated with poor outcomes due to the absence of, or limited level of services to cater to the complex needs of those with dual diagnosis.[37] However, it is hoped this will now change following the publication of the HSE Model of Care for Dual Diagnosis developed by the National Working Group under the National Clinical Programme for Dual Diagnosis and endorsed by the College of Psychiatrists of Ireland.
While these are very welcome developments, concern remains that people, and especially young people, both problems will be excluded from getting an integrated service. This is because, depending on their location in the country, people who need both interventions still will not have access to the new service. Work in the area of dual diagnosis now needs to move towards the practical delivery of comprehensive services and a rapid extension of HSE work in this area.

Alcohol Action Ireland recommends:

- Ensure alcohol's impact on mental health is acknowledged
- Emphasise prevention, early intervention, and integration of services
- Deliver comprehensive services young people with dual-diagnosis

Being brought up in homes where there is parental problem alcohol use

Growing up in a home with parental problem alcohol use (PPAU) has been recognised internationally as an adverse childhood experience (ACE) for over 20 years, and the physical and mental consequences of PPAU have also been studied. It is also well recognised that children's exposure to domestic violence is a serious ACE and that such children are victims in their own right. One third of children in Ireland have at least one parent who regularly binge drinks or is dependent on alcohol.[38]

Harmful alcohol use by a parent or caregiver has been shown to have a range of detrimental consequences for children, including negative health, educational, and social outcomes.[39] Furthermore, given the close connection between alcohol and domestic violence it is likely that hundreds of thousands of children are living in homes with alcohol-fuelled violence.

Studies have found that there is a serious risk that parents with alcohol problems may neglect their children. Such neglect can have a negative impact on children's emotional and physical development and education and puts them at risk of physical and sexual abuse. We know that because of PPAU family situations can deteriorate to the extent where children are neglected and abused – dirty nappies going unchanged, children going without regular meals, or physical, emotional, or sexual abuse. Indeed, children are often the unseen victims of domestic abuse. The European Union Agency for Fundamental Rights survey on violence against women found that 73 % of women who have been victims of violent incidents by their previous or current partner indicate that children living with them were aware of the violence.[40]

Alcohol use is implicated in an increased risk of child maltreatment, including physical or sexual abuse and neglect.[41] However, despite the existing scholarship on alcohol and its accelerating role in DSGBV, many health professionals do not make the connection between PPAU and possible physical and psychological abuse of children in the home. A study carried out by UCC and AAI found that 70% of mental health professionals receive no training on problem alcohol use in the home despite the serious psychological impacts on children and adolescents.[42]

Too often children are only considered once a parent presents with an alcohol problem or is in treatment. The reality is that children need services and supports independently of whether a parent is in treatment or not. Not acting is

unconscionable as early interventions and support are key to offset trauma and lifelong harm. Key in this is that all professionals – from teachers to mental health professionals, understand the impact of PPAU and have the resources to support children and families at a whole of population level, not just if there are child welfare concerns.[43]

Alcohol Action Ireland recommends:

- Ensure mental health professionals have professional training about the impact of PPAU on children and young people
- Ensure CAMHS have the resources to support children and families impacted by PPAU at a whole of population level
- Prioritise children for support regardless of whether a parent has presented for alcohol treatment or not

Exposure to risk from others who are engaged in alcohol use

Alcohol and crime have a closely interconnected relationship, with alcohol consumption being a contributing factor to crime and antisocial behaviour. Alcohol plays a key role in crimes such as public order offences, domestic violence, assault and murder, as well as rape and sexual assault.[44] It is not always possible to tell the exact number of crimes caused due to alcohol use, but studies have estimated that between 30% and 65% of assaults, disorderly conduct, public order, and other social code incidents are associated with alcohol use.[45]

However, harmful alcohol use is not simply a matter of individual responsibility. The impact of alcohol-related crime and anti-social behaviour has a ripple effect, extending beyond those directly affected and impacts entire communities, society, and the economy. Furthermore, it has a pernicious effect on people's perceptions of safety and security, especially in our town centres and city centres.

Many studies have demonstrated significant, and positive, associations between alcohol consumption and rates of criminal violence, and we can say with some confidence that more drinking tends to result in more violence, and less drinking tends to result in less violence.[46] This puts children and young people at risk of being victims of crime at the hands of those who have consumed alcohol.

Furthermore, alcohol is a factor in a significant proportion of youth crimes.[47] A 2021 report noted that alcohol and/or drug use was often the main offence that brought young people into contact with An Garda Síochána and subsequently to probation services. Research from the HRB outlined that 86% of probation services clients aged 18-24 years reported alcohol and/or drug use, and alcohol was linked to the crime committed by 38% of those referred.[48] Garda figures indicate that annually around 3% of 12- to 17-year-olds commit an offence. These offences tend to be public order in nature and associated with alcohol and drug use.[49]

Alcohol Action Ireland recommends:

- Provide support for children and young people who have committed, or been the victim of, a crime where alcohol has been involved

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