

## Impact case study (REF3)

<b>Institution:</b> University of Bedfordshire		
<b>Unit of Assessment:</b> A3		
<b>Title of case study:</b> Reshaping alcohol policy and practice to include older people		
<b>Period when the underpinning research was undertaken:</b> 2010 to date		
<b>Details of staff conducting the underpinning research from the submitting unit:</b>		
<b>Name(s):</b>	<b>Role(s) (e.g. job title):</b>	<b>Period(s) employed by submitting HEI:</b>
Sarah Wadd	Director Substance Misuse and Ageing Research Team and Principal Research Fellow	April 2010 to date
Michelle McCann	Research Fellow	April 2010 to date
Maureen Dutton	Public and Expert by Experience Researcher (PEER)	September 2015 to date
Jennifer Seddon	Research Fellow	September 2016 to date
Chris Papadopoulos	Principal Lecturer in Public Health and Director of Health Research	2012 to date
<b>Period when the claimed impact occurred:</b> 1 <sup>st</sup> August 2013 to date		
<b>Is this case study continued from a case study submitted in 2014?</b> No		
<b>1. Summary of the impact</b> (indicative maximum 100 words)		
<p>Older people (50+) in the UK now drink more and are more likely to exceed the recommended drink limits than any other age group. Our research demonstrated high levels of alcohol-harm in older people including undiagnosed cognitive impairment in those with alcohol problems, low levels of knowledge among older people and professionals, prejudice and unlawful age discrimination in alcohol services. This led to changes in government policy and professional practice, cognitive screening and improved access to alcohol services, older people seeking help and committing to reduce their drinking and more positive attitudes towards older people with alcohol problems.</p>		
<b>2. Underpinning research</b> (indicative maximum 500 words)		
<p>In 2010, Wadd established the inter-disciplinary and cross-departmental Substance Misuse and Ageing Research Team (SMART). The team has delivered a strategic research programme focused on priorities identified by stakeholders including older people with alcohol problems, ensuring that the research gives attention to real-world needs.</p> <p>In the first decade of the 21<sup>st</sup> Century, health and social care workers were seeing an increasing number of older people with alcohol problems. Most were identified at a late stage when their alcohol problems were more difficult to treat. In 2010, SMART conducted the Working with Older Drinkers study to identify best practice in recognising and responding to older people with alcohol problems (3.1). In 2013, SMART carried out a study which identified a significant degree of undiagnosed cognitive impairment in older people with alcohol problems and found that routine screening for cognitive impairment was acceptable to alcohol service users (3.2).</p> <p>In the early part of the decade, alcohol was characterised as an issue that mainly affects young people. In 2014, SMART analysed existing data on alcohol use and harm by age group and</p>		

found that older people were more likely to be admitted to hospital or die from alcohol harm than other age groups (3.3).

In 2015, Wadd was appointed as the academic lead for a £25m UK-wide programme called Drink Wise, Age Well (DWA) which ran during a five year period from 2015-2020. The aim of DWA was to reduce alcohol-related harm in older people. SMART conducted the UK's first questionnaire study on alcohol use in later life for DWA in 2015 (3.4). 16,678 older people from 30 general practices in England, Scotland, Wales and Northern Ireland took part. One in five participants were risky drinkers. The study identified factors associated with risky drinking, low levels of knowledge about recommended drink limits and high levels of alcohol-related stigma.

In 2016, Wadd and Dutton carried out a study on accessibility and suitability of residential alcohol treatment (rehab) for older people (3.5). The study found that 75% of the rehabs listed on Public Health England's online directory had upper age limits that excluded older people. Some older were subjected to ageist language and attitudes in rehabs. In 2017, in collaboration with the International Longevity Centre, SMART carried out a mixed-methods study which identified direct and indirect age discrimination in relation to alcohol policy and practice which was unlawful, for example, older people not being offered alcohol treatment because of their age and alcohol services with no access for people with disabilities (3.6).

### 3. References to the research (indicative maximum of six references)

- 3.1** Wadd S, Lapworth K, Sullivan M, Forrester D, Galvani S: Working with older drinkers, Tilda Goldberg Centre for Social Work and Social Care, Alcohol Change UK, Report, 2011, [https://s3.eu-west-2.amazonaws.com/files.alcoholchange.org.uk/documents/FinalReport\\_0085.pdf?mtime=20181117150457&focal=none](https://s3.eu-west-2.amazonaws.com/files.alcoholchange.org.uk/documents/FinalReport_0085.pdf?mtime=20181117150457&focal=none)
- 3.2** Wadd S, Randall J, Thake A, Edwards K, Galvani S, McCabe L, Coleman A. Alcohol misuse and cognitive impairment in older adults. Alcohol Change UK, Report, 2014, <https://alcoholchange.org.uk/publication/alcohol-misuse-and-cognitive-impairment-in-older-people-an-exploratory-study>
- 3.3** Wadd S and Papadopoulos C. Drinking behaviour and alcohol-related harm amongst older adults: Analysis of existing UK datasets. BMC Research Notes. 2014; 7(1): 741.
- 3.4** Wadd S. Alcohol use in older adults: Analysis of survey and alcohol treatment data. 2020. Report to Drink Wise, Age Well. <https://uobrep.openrepository.com/handle/10547/624705>
- 3.5** Wadd, S, Dutton, M. Accessibility and suitability of residential alcohol treatment for older adults: a mixed method study. Substance Abuse Treatment, Prevention, and Policy. 2018; 13: 49.
- 3.6** Wadd, S, Holley-Moore, G, Riaz, A. and Jones, R. Calling Time: Addressing ageism and age discrimination in alcohol policy, practice and research, Report, 2017, <https://www.drinkwiseagewell.org.uk/media/publications/pdfs/calling-time-addressing-ageism.pdf>

### 4. Details of the impact (indicative maximum 750 words)

#### a) Government strategy and policy

In 2015, SMART's portfolio of research led to Wadd being appointed academic advisor to a high level policy group for older people and alcohol harm which included MP's, the drinks industry and Public Health England. This group submitted four parliamentary questions which were answered by the UK Government (e.g. 5.1), drawing their attention to the issue.

The Welsh Government's Advisory Panel on Substance Misuse used SMART's research, including the Working with Older Drinkers report, 20 times in its 2017 review of 'Substance Misuse in an Ageing Population' (5.2). The Government implemented several of the panel's recommendations including alcohol training for professionals working in services for older people. Increasing knowledge among health and social care professionals was a key recommendation in our Working with Older Drinkers report.

During 2018, SMART's report on ageism and age discrimination was used to highlight the needs of older people with alcohol problems in the Scottish Government's Alcohol and Drugs Strategy (5.3), the Drugs, Alcohol and Justice Cross-Party Parliamentary Group and All-Party Parliamentary Group on Alcohol Harm's Alcohol Charter (5.4) and the Royal College of Psychiatrist's 'Invisible Addicts' report (5.5). Our 2018 study on the accessibility and suitability of residential alcohol treatment (rehab) for older people led to Public Health England removing age cut-off's from its directory of rehabs (5.6), making it easier for older people to access them.

### **b) Professional practice**

Findings from our Alcohol Use in Older Adults survey were used to develop training which DWAW delivered to 9,570 professionals from 150 organisations across the UK including the police, fire and rescue service, Citizens Advice Bureau, NHS, the 911 service, trade unions and care homes. 90% of people who attended the training say they intend to make changes to their practice (5.7). This training is now mandatory for staff delivering alcohol treatment for We Are With You, a provider that works extensively across England and Scotland.

On the basis of the findings from SMART's 2013 cognitive impairment study, DWAW introduced routine cognitive screening for people attending alcohol intervention services (5.7). The screening identified 639 people with previously unidentified cognitive impairment at entry to the service meaning that alcohol treatment could be adapted to meet their needs and they could be offered support from health and social services.

Our impact on professional practice extends beyond the UK. For example, in the period 2016-2019 our research was cited in Australia's National Research Centre on Alcohol and Other Drugs Workforce Development practical guide and information sheets (5.8), the American Society for Addiction Medicine's Handbook of Addiction Medicine (5.9) and Canada's report on Improving Quality of Life: Substance Use and Aging (5.10).

### **c) Public awareness, engagement and education**

DWAW's education and awareness programme for the public draws directly on our Alcohol Use in Older Adults study. For example, our finding that older people are concerned about the impact of alcohol on their memory was translated into the message "cutting back on alcohol may improve your memory and sharpen your mind". Because our Alcohol Use in Older Adults Study survey found that 74% of participants were unable to correctly identify the recommended drink limits, increasing knowledge of the recommended drink limits was a key goal for DWAW training.

By the end of the programme, 18,858 older people across the UK had attended DWAW training workshops. 94% of attendees said their knowledge and understanding of alcohol had improved and 93% were able to identify the recommended drink limits (5.7). A total of 6,575 people received screening and brief advice and 43% said they intended to make changes to their drinking (5.7). More than 15 million people were exposed to media messages about our Alcohol Use in Older Adults survey in January 2016 (5.7). In the month following the media coverage, 1,332 more people sought information, help or advice from DWAW than in the previous month (an increase of 187%) (5.7).

Drawing on our findings from the Alcohol Use in Older Adults study in relation to alcohol stigma, DWAW developed a social media anti-stigma campaign targeting the general public which

reached more than a million people across the UK. 83% of people who saw the campaign said they were more likely to believe that society should treat older people with alcohol problems with a tolerant attitude (5.7).

#### 5. Sources to corroborate the impact (indicative maximum of 10 references)

- 5.1 Chadlington. 2017. <https://www.parliament.uk/business/publications/written-questions-answers-statements/written-question/Lords/2017-11-28/HL3656/>
- 5.2 Advisory Panel on Substance Misuse. 2017. Substance misuse in an ageing population. <http://www.cardiffandvaleapb.org/download/APOSM-Ageing-Population-Report.pdf>
- 5.3 Scottish Government. 2018. Rights, respect and recovery: alcohol and drug treatment strategy. <https://www.gov.scot/publications/rights-respect-recovery/>
- 5.4 Drugs, Alcohol & Justice Cross-Party Parliamentary Group and All Party Parliamentary Group on Alcohol Harm: 2019. Alcohol Charter. <https://s3.eu-west-2.amazonaws.com/files.alcoholchange.org.uk/documents/Full-Alcohol-Charter.pdf?mtime=20190320113141&focal=none>
- 5.5 Royal College of Psychiatrists. 2018. Our Invisible Addicts (2<sup>nd</sup> edition). [https://www.rcpsych.ac.uk/docs/default-source/improving-care/better-mh-policy/college-reports/college-report-cr211.pdf?sfvrsn=820fe4bc\\_2](https://www.rcpsych.ac.uk/docs/default-source/improving-care/better-mh-policy/college-reports/college-report-cr211.pdf?sfvrsn=820fe4bc_2)
- 5.6 Addaction, 2019 <https://www.wearewithyou.org.uk/media/press-release-archive/addaction-welcomes-decision-to-remove-age-fields-from-online-rehab-directory/#:~:text=Drink%20Wise%2C%20Age%20Well%2C%20a%20programme%20led%20by,adults%20to%20access%20alcohol%20and%20drug%20rehabilitation%20services>
- 5.7 Drink Wise, Age Well data report. 2020. Provided as PDF.
- 5.8 Australia's National Research Centre on Alcohol and Other Drugs Workforce Development. 2015. Preventing and Reducing Alcohol- and Other Drug-Related Harm among Older People: A practical guide for health and welfare professionals. <https://nceta.flinders.edu.au/application/files/4815/0646/7747/EN605.pdf>
- 5.9 American Society of Addiction Medicine. 2016. Handbook of Addiction Medicine. Oxford: Oxford University Press. Held by Institution. <https://oxfordmedicine.com/search?source=%2F10.1093%2Fmed%2F9780190214647.001.0001%2Fmed-9780190214647&q=wadd>
- 5.10 Canadian Centre on Substance Use and Addiction. 2018. Improving Quality of Life: Substance Use and Aging <https://ccsa.ca/sites/default/files/2019-04/CCSA-Substance-Use-and-Aging-Report-2018-en.pdf>