

**REPORT TO:** Health and Wellbeing Board

**DATE:** 11 March 2015

**REPORTING OFFICER:** Director of Public Health

**PORTFOLIO:** Health and Wellbeing

**SUBJECT:** Pregnancy and Alcohol Social marketing campaign

**WARD(S):** Borough-wide

## 1.0 PURPOSE OF THE REPORT

1.1 To highlight a new social marketing campaign to educate women of the harm that drinking alcohol in pregnancy can cause, in order to reduce alcohol related harm to the unborn baby.

## 2.0 RECOMMENDATION: That the board support the campaign aims:

- To bring about a change in attitude and behaviour, towards drinking alcohol in pregnancy.
- Reduce the risk to the unborn baby due to drinking alcohol in pregnancy, and subsequently improve child development.

## 3.0 SUPPORTING INFORMATION

3.1 A child's experience pre-birth and during the early years is critical to the child's physical, cognitive and social development. During this development phase the foundations are put in place for the rest of that child's life and this period offers a once in a lifetime opportunity to give that child the 'best start in life'.

3.2 UK guidance recommends that pregnant women should avoid drinking alcohol, and if they do choose to drink, they should not drink any more than 1 or 2 units of alcohol once or twice per week and should not get drunk.

3.3 Alcohol-related harm during preconception and pregnancy is caused by alcohol passing freely across the placenta from mother to foetus. Potential outcomes of alcohol consumption during pregnancy may include miscarriage, stillbirth, low birth weight (LBW), learning disabilities and hyperactivity as well as foetal alcohol spectrum disorder (FASD). The highest risk period for harm is the first 3 weeks of pregnancy, before women may know they are pregnant.

- 3.4 Evidence is as yet unclear regarding how much alcohol is safe to drink during pregnancy. The healthiest and safest option is therefore for women not to drink when trying for a baby or when pregnant.
- 3.5 There is no local data showing the number of women who drink in pregnancy or the quantity they consume. When national drinking rates during pregnancy were modelled to Halton there are a higher proportion of women who stop drinking during pregnancy than the English average. This is due to Halton having a higher proportion of younger mothers and a lower percentage of women working in managerial and professional jobs.
- 3.6 Each year in Halton:
- Around 1,600 women become pregnant
  - Of these women around 1,300 (80%) were drinking before pregnancy
  - Of these women around 800 (60%) will give up drinking during pregnancy
- 3.7 **Foetal alcohol spectrum disorder (FASD)**  
FASD is the umbrella term for a range of preventable alcohol-related birth defects. Risk factors for foetal alcohol spectrum disorder are drinking in very early and late pregnancy and binge drinking
- 3.8 FASD is a direct result of prenatal alcohol exposure and can be prevented if pregnant women do not drink alcohol. There is no routine data available on the number of local children affected, but anecdotal evidence from paediatricians suggested that FASD is increasing and is a condition that is under diagnosed.
- 3.9 The effects of FASD can be mild or severe, ranging from reduced intellectual ability and attention deficit disorder to heart problems and even death. Many children experience serious behavioural and social difficulties that last a lifetime.
- 3.10 Experts estimate that in Western countries, one child in 100 is born with FASD as a result of their mother's drinking alcohol while pregnant. Modelled to the Halton birth rate 16 children would be born with FASD each year.
- 3.11 Current activity in Halton to reduce alcohol consumption during pregnancy includes:

- All pregnant women are advised of safe drinking guidelines
  - Halton midwives and health visitors have been trained in the early identification and support of pregnant women who misuse alcohol. This includes when and how to refer to local treatment services.
  - There is a dedicated Alcohol and Substance Misuse Liaison Midwife who coordinates antenatal care services for pregnant women identified as misusing alcohol.
- 3.12 The Halton Alcohol Strategy (2014-19) identified the need to improve general awareness and understanding of safe drinking levels during pregnancy. The action plan recommended developing an awareness campaign aimed at the general population to increase awareness of the danger of drinking during pregnancy.
- 3.13 The Health Improvement social marketing team instigated the development of the campaign through baseline research to establish women's knowledge and their attitudes towards drinking in pregnancy. A set of questions were developed based on previous research and delivered via face to face interviews on the street, in children's centres and via an online questionnaire.
- 3.14 The findings were clear that FASD did not mean anything to the general population and that there was a general disengagement with the subject. Women did not identify themselves as a 'heavy drinker', although they were unclear as to what 1 unit of alcohol was, and FASD in their mind was an 'alcoholics' issue.
- 3.15 Most women were shocked that drinking alcohol at conception could be detrimental to the developing foetus, so this was clearly an indication that work needed to be done around the pregnancy planning preventative messaging.
- 3.16 A set of creatives were developed and road tested at the local Children's Centres, but were initially dismissed with residents requesting a harder hitting approach. A further set of designs were produced and road tested. This provided us with a clear direction for the pre pregnancy and pregnant preventative concepts to establish a two pronged approach moving forward.
- 3.17 The final campaign creative was taken to a midwife focus group, the community, partnership groups and was approved by the alcohol and

families specialist midwife.

- 3.18 The campaign was launched at the end of February, with a big bang outdoor media approach with billboards, supermarket posters at entrances, bus sides and internals.
- 3.19 The campaign also includes PR, social media advertising and messaging using the hashtag #boozefreebump to use on all social media communications. The Health improvement team, CCG, NHS and Halton Borough council websites amongst other partners will support the messages and will include the campaign data.
- 3.20 Midwives will use a new information leaflet, to provide more information to pregnant women when they book in with the midwife and at Early Bird ante natal sessions.
- 3.21 Posters and flyers will be distributed to all GP surgeries and in community locations across the borough.
- 3.22 The campaign will be evaluated by further insight work with the targeted audiences in July 2015; this will be compared to the previous insight to establish changes in attitude/behaviour. Alongside this a sample of women will be identified at booking in stage and followed through to birth to establish attitude and behaviour change after exposure to the campaign messages. The use of social media will also be measured to establish their effectiveness.

#### **4.0 POLICY IMPLICATIONS**

- 4.1 Halton's Health and Wellbeing Strategy identifies Improved Child Development as one of five key priorities for action. This priority was chosen for a number of reasons including; child development has a significant impact on child health and wellbeing which remains into adult life. This work aims to directly impact upon child development.

#### **5 OTHER/FINANCIAL IMPLICATIONS**

- 5.1 There are no additional financial implications above the cost of the campaign.

#### **6 IMPLICATIONS FOR THE COUNCIL'S PRIORITIES**

##### **6.1 Children and Young People in Halton**

All issues outlined in this report focus directly on this priority and improving child development.

## 6.2 Employment, Learning and Skills in Halton

Population level reductions in alcohol consumption will contribute to reducing the number of children with learning difficulties and other related health conditions, and improve long term educational outcomes.

## 6.3 A Healthy Halton

All issues outlined in this report focus directly on this priority.

## 6.4 A Safer Halton

Part of the overarching alcohol strategy to reduce alcohol related issues in Halton.

## 6.5 Halton's Urban Renewal

No direct implications have been identified.

## 7 RISK ANALYSIS

None

## 8 EQUALITY AND DIVERSITY ISSUES

This is in line with all equality and diversity issues in Halton.

## 9 LIST OF BACKGROUND PAPERS UNDER SECTION 100D OF THE LOCAL GOVERNMENT ACT 1972

### Appendix 1

