

DEVELOPING AN ALCOHOL RISK REDUCTION PATHWAY WITH PARENTS AND HEALTH VISITORS (PARENT)

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ALCOHOL AND PUBLIC HEALTH

- Alcohol is a leading risk factor for premature death and disability [1]
 - WHO suggests there is no “safe” level of alcohol use for general population [2]
 - “Low risk” drinking guidelines in the UK suggests both men and women keep their consumption <14 units per week [3]
- Parental drinking can have negative effects on children’s physical and mental wellbeing [4]
- Alcohol use while pregnant increases the risk of e.g. miscarriage, premature birth, and Foetal Alcohol Spectrum Disorders [5,6]

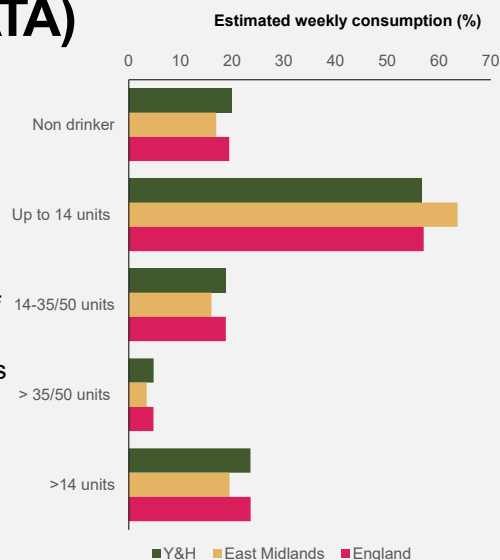
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ALCOHOL USE (2022 DATA)

- Estimated weekly alcohol intake in Yorkshire and The Humber is very similar to that of England average
- In East Midland, there are fewer non-drinkers but higher than England average proportion of people drinking up to 14 units/week. Consumption at increasing and high risk levels are lower than England average.

Source: Health Survey for England



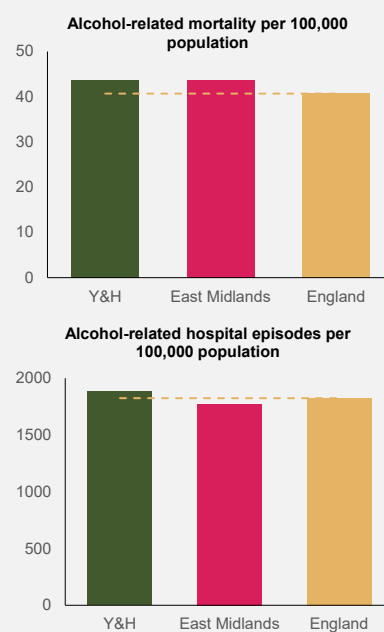
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ALCOHOL-RELATED HARM (2023 DATA)

- Yorkshire and The Humber fairs worse on all alcohol mortality (specific and related) and hospital admissions indicators
- East Midlands fairs worse on all alcohol mortality indicators (specific and related) while most indicators for hospital admissions is close to, or slightly higher than, England average

Source: NHS England Alcohol Profiles



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HEALTH VISITORS' ROLE IN DISCUSSING ALCOHOL

- Addressing alcohol consumption from the antenatal period through the first 5 years aligns with Making Every Contact Count [7]
- This rarely happens due to organisational and individual-level barriers such as limited training on alcohol screening and knowledge of best practice in response to level of risk-drinking.
- There is a gap in knowledge has informed this study by exploring how HVs can be agents of change alongside parents in reducing the prevalence/mitigating the risk of alcohol-related developmental disorders in England.

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AIM

To explore current practice among Health Visitors (HVs) regarding alcohol assessment and advice alongside parental perceptions on the acceptance on this approach for raising awareness for preventing and limiting alcohol-related harms, informing the co-creation of a HV-led care pathway in Yorkshire, Humber and Derbyshire.

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OBJECTIVES

1. Assess how and when HVs ask about alcohol consumption with new parents, what advice they give, and what actions they take
2. Identify barriers and facilitators of HVs practice behaviour regarding alcohol assessment, intervention, and support
3. Understand how a dialogue about alcohol consumption could be embedded in routine contact visits between HVs and new parents
4. Develop a draft HV-led care pathway co-created with stakeholders.

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WORKSTREAM 1

- Cross-sectional national online survey, drawing on the Theoretical Domains Framework, of health visitors and wider 0–19 service team.
- Estimated 800 responses are expected following invitation to approximately 4000 health visitors and wider 0–19 service team members.
- Survey will be distributed via Institute for Health Visiting (iHV) newsletter and social media.
- Inclusion criteria: currently working in England as a health visitor or member of the health visitor team working in the 0–19 service delivering the five core visits.

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WORKSTREAM 2

- Qualitative study with health visitors and wider 0–19 service team.
- 4-5 online (Microsoft Teams) focus group discussions (FGDs) with 4-6 participants in each; total 20 participants.
- Inclusion criteria: currently working in Hull, East Riding of Yorkshire or Derbyshire as a health visitor or member of the health visitor team working in the 0–19 service delivering the five core visits

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WORKSTREAM 3

- In-depth interviews with 20 parents about their views on how, when and whether a dialogue about parental alcohol consumption could be embedded in core contact visits by HVs.
- Inclusion criteria: parents who have been seen by a health visitor or a member of the health visiting team working a part of the 0–19 team within the last two years (24 months) and live locally in Hull, East Riding of Yorkshire or Derbyshire, England.

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WORKSTREAM 4

- A workshop to discuss findings from the first three streams to co-develop a health visitor led care pathway.
- An online stakeholder event involving HVs, skills mix team members, 0–19 service managers and commissioners, representatives from professional organisations (such as iHV and Office for Health Improvement and Disparities, local authorities, maternal and infant health-related charities such as Fetal Alcohol Spectrum Disorder network UK and parents.
- Findings from Workstream 1-3 will be shared and discussed in the meeting to get views on the findings, make recommendations for and consider the key components of a care pathway

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THANK YOU

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