POLICY BRIEF

Health Research Board (HRB) Applying Research into Policy & Practice (ARPP)

Overview and findings of research on the implementation of a multi-component alcohol policy in Ireland

PROJECT OVERVIEW

This project is funded through a HRB Applying Research into Policy & Practice (ARPP) research grant. The title of the project is: **Improving public health through better implementation of alcohol policy: A multi-method study examining and addressing the factors influencing successful implementation.** The alcohol policy of focus in the research is Ireland's **Public Health (Alcohol) Act**.

The project comprises a number of Work Packages as follows:

- **Work package 1** aims to examine barriers and facilitators to the implementation of this multi-component alcohol policy (Study 1)
- **Work package 2** aims to explore awareness and support for this policy among the general public in Ireland (Study 2)
- **Work package 3** aims to examine media framing of the policy during the implementation phase (Study 3)

Research for this study commenced in 2024 and will run until November 2027. Principal Investigator for the project is **Dr Susan Calnan**, a Post-doctoral Research Fellow at the School of Public Health, University College Cork (UCC).

PUBLIC HEALTH (ALCOHOL) ACT

The **Public Health (Alcohol) Act** is a multi-component alcohol policy aimed at reducing alcohol consumption levels and its associated harms in Ireland. It was enacted in October 2018 and is being implemented on a phased basis. Policy measures contained in the Act include the following:

- **Structural separation** of alcohol products in mixed trade outlets (commenced Nov 2020)
- **Alcohol advertising restrictions** including no advertising on the field of play of sports or within 200m of schools & creches (Nov 2021)
- **Minimum Unit Pricing (MUP)** setting a floor price of 10 cent per gram of alcohol (Jan 2022)
- **Health information labelling** on alcohol products, including cancer warnings and calorie content (delayed until 2028)

Significance of the Act

This is the first time that Ireland has adopted a **public health approach** to alcohol control. The Act faced significant opposition from the alcohol industry in the pre-enactment stage of the policy process. It took over 1,000 days for the policy to be finally enacted.

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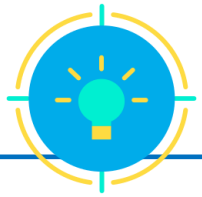
Note: The advisory group for this HRB-ARPP research project comprises researchers from public health, alcohol policy, plus representatives of the charity/community sector.

UCC University College Cork, Ireland Coláiste na hOllscoile Corcaigh

WHY DO WE NEED ALCOHOL POLICY?

Although alcohol is often synonymous with social activity and celebration in this country, it is responsible for over **200 disease and injury** conditions. In Ireland, an estimated four deaths every day are alcohol related (Kabir & Gilheany, 2022). The **social impacts** of alcohol are also significant, including public disorder, road traffic accidents, and harm to others such as family and friends.

Evidence-based alcohol policy is crucial to help reduce the negative impacts of alcohol on society. This includes reducing the economic burden arising from alcohol's impacts, including on our healthcare and justice systems.



Overview of Study 1

Study overview: This study sought to examine perceived barriers and facilitators to implementation of the Public Health (Alcohol) Act in Ireland following its enactment.

A **qualitative** study design was used, involving interviews with a range of participants: policy stakeholders, private sector actors and public health policy experts. The study mapped barriers and facilitators to a well-known implementation science framework called the Consolidated Framework for Implementation Research (CFIR).

Why is implementation important?

Implementation is crucial because if policies are not implemented properly, they may not have the desired impact. The growing field of 'implementation science' focuses on evaluating the implementation of services, interventions and policies, often using theories, models or frameworks.

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RESULTS OF STUDY

- A total of **15 interviews** were conducted in the period March to August 2024.
- A greater number of barriers than facilitators were reported overall.
- Private sector actors placed a greater emphasis on **cost-related factors** as barriers to implementation (e.g. cost of implementing structural separation).
- Policy stakeholders & experts highlighted the persistence of **industry lobbying** during implementation and the under-resourcing of public health advocates.
- All categories of participant perceived a **lack of planning** for both implementation and policy evaluation, a dearth of **resources** for inner setting actors (e.g. enforcement officers, DoH civil servants), and a lack of **high-level leadership** on the policy (e.g. Ministerial level).
- Other perceived barriers included the **complexity** of implementing a multi-component policy and gaps in innovation design (e.g. lack of policy measures targeting digital marketing of alcohol & sale of no-low alcohol products).
- Perceived **facilitators** included the policy's alignment with international 'best buy' policy recommendations (e.g. World Health Organization) and the expertise of inner setting actors (e.g. civil servants, EHOs) & relational connections between inner setting actors (e.g. EHOs & retailers).

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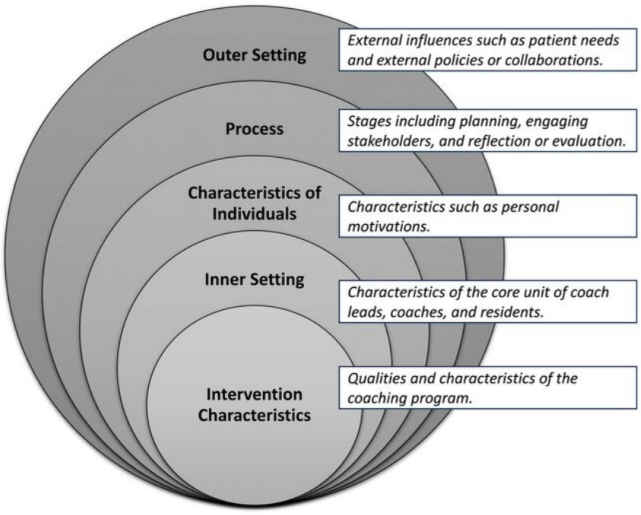
A NOTE ON CFIR

CFIR is a well-known implementation science framework used to map determinants (barriers & facilitators) of implementation (Damschroder et al, 2009). The framework consists of **five 'domains'** to which determinants can be mapped, as shown in the diagram below. Within each of these domains are a range of 'constructs' (n=67), which help to further define the issues documented.

This study found that barriers and facilitators to implementation of the Public Health (Alcohol) Act in Ireland existed across all five domains of CFIR and for a total 21 constructs.



CONCLUSIONS

Results of our **first study** in this HRB-ARPP research project highlight the multi-level range of factors influencing the implementation of the Public Health (Alcohol) Act in Ireland. Given the **range of barriers** perceived, our study highlights important considerations including: the need for strategic implementation planning, for adequate resourcing of inner setting actors, and for ongoing evaluation & monitoring of the Act's policy measures. The study also notes the potential for continued lobbying during the implementation phase, highlighting the reality of the '**politics of implementation**'.

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RECOMMENDATIONS

- Creating a **dedicated implementation plan** for the policy is important to ensure more robust planning for the post-enactment phase.
- This could include planning for future **evaluation & monitoring** of policy measures to ensure there is ongoing evidence of policy impact & effectiveness.
- Greater focus on **adequate resourcing** of those tasked with policy implementation (e.g. enforcement officers, civil servants) is crucial to enable effective implementation & monitoring.
- Continued **lobbying by industry** actors during the implementation phase should be anticipated & planned for .
- Adequate '**future proofing**' of policy measures may be important in view of real-world events, e.g. increasing MUP floor price due to inflation.
- **Sustained communications** throughout the implementation phase could help to increase public awareness & support for policy measures. This is particularly important for a multi-component policy undergoing phased implementation.

Further information

A link to the published findings for Study 1 can be found at: https://www.sciencedirect.com/science/article/pii/S0955395925001707

For any queries, please email **Dr Susan Calnan**, Principal Investigator at: **susan.calnan@ucc.ie**

References:

- Kabir, Z., & Gilheany, S. (2022). *Global burden of disease: Estimates of alcohol use and attributable burden in Ireland*. Alcohol Action Ireland & SPH, UCC.
- Damschroder, L. J., Aron, D. C., Keith, R. E., Kirsh, S. R., Alexander, J. A., & Lowery, J. C. (2009). Fostering implementation of health services research findings into practice: A consolidated framework for advancing implementation science. *Implementation Science, 4*(1), 50.