# Analytical Essay on Health Psychology: Issue of Alcohol Abuse

According to The World Health Organization (WHO, 2020) health is “A state of complete physical, mental and social-wellbeing and not merely the absence of disease and infirmary”. Prior to this statement, in the early 19th century, the Biomedical Model was arguably the most prominent and accepted approach to health. The Biomedical Model heavily discusses biological factors such as, chemical imbalance, external and internal infections, physical injury, and genetic abnormalities, as the main or only cause of illness (Wade & Halligan, 2004) . The model therefore states that health and illness cannot co-exist, people either have an illness or they don’t. At the time, the Biomedical Model was beneficial as it deflected responsibility from a patient and strengthened compliance to Doctors orders. (Wade & Halligan, 2004) . However, failure to recognise psychological factors, behavioural factors, and the treatment of the mind and body as separate entities, resulted in the rise of more progressive approaches, such as Health Psychology. Health Psychology is defined as “the application of psychological knowledge and methods to the study, prevention, and management of physical diseases and disorders” (Smith, 2001) . In the 1980’s Health Psychology became a growingly more popular approach to health, as it synchronised psychological, behavioural and biological factors, with consideration of an individual’s environmental and social circumstances. All said factors, are considered to reflect the state of an individual’s physical health. (Brannon, Feist, & Updegrass, 1988) . A Health Psychologist in practice, would work closely with an individual to advise, help them recognise the impact of their health behavioural choices, and the impact it is having on their health. Said health behaviours include both positive behaviours such as healthy diet, regular exercise, consistent sleep, and negative behaviours such as smoking, unprotected sex, and alcohol abuse. Alcohol can be enjoyable when regulated and consumed within our limits, however in the short and long term, the side effects and risks, can make us vulnerable. The short-term side effects and risk of alcohol abuse are drowsiness, distorted vision and judgement, nausea and headaches. Although the short-term side effects may clear up fairly quickly, in the long run an individual may be in far more danger. Long-term alcohol abuse can result in many alcohol related illnesses such as, cancer, a stroke, and cardiovascular disease (WHO, Global Status Report on Alcohol and Health 2018, 2018) . In 2018, the United Kingdom recorded 7,551 deaths, directly related to alcohol (John, 2019) . Therefore, it is within great concern of not only of the general public, but Health Psychologists, in where to begin to tackle alcohol related illnesses. To understand Health Psychology in more depth it is important to understand the key principles and theory such as, Promoting and Maintaining Health, Preventing and Treating Illness, and the theoretical Health Belief Model, in relation to preventing alcohol related illnesses.

The first key principle of Health Psychology is the promotion and maintenance of health. The intent of promoting and maintaining health is to encourage people to make healthy and positive changes to their behavioural patterns and maintain it! to further reflect a healthy and positive physical state. Positive health behaviours intended to promote include, a healthy diet, consistent exercise and a regulated alcoholic intake. To make these changes, it must be understood that our physical health is consequential to the behaviours and lifestyle choices we partake in (Bennet, 1997) . The work of Health Psychologists promoting and maintaining health, can be seen in many campaigns, many of which relate to preventing alcohol related illnesses. In

Scotland, alcohol abuse and consumption has been steadily on the rise since the 1980s. In fact, it was reported by the Scottish Government that in 2018, adults in Scotland drank 36% more than the recommended average 14 unit(s) of alcohol per week. The report concluded 1,136 alcohol related deaths in one year, which narrows down to 22 deaths per week (Government, 2020) . In recognition of this issue, the Scottish Government launched a Health Psychology informed campaign in 2019 to titled “Count 14”. Count 14 is a campaign which targets the health behaviour alcoholic intake and aims to reduce and regulate how much alcohol we consume per week, regarding 14 units over at least 3 days as a safe guide. The campaign also incorporates realistic life situations such as ‘Pub quiz nights’, ‘Weekday Match’ and ‘Friday Payday’ to make gaging alcoholic intake a lot more realistic and simpler. (NHS, 2019) . The integration of the key Health Psychology principles, promoting and maintaining health, in the Count 14 campaign, is clearly very productive way in tackling binge drinking, as it provides advice about how we can regulate our alcoholic intake over the course of a week, in a way that is healthy and manageable, further preventing the risk of alcohol related illnesses.

In Health Psychology the prevention and treatment of illness describes the intent to help an individual understand and reflect on their behaviour, and communicate clearly with health professionals, in order to prevent, and if so, treat their illness. Health Psychologists also interpret negative health behaviours into their dialogue, so it is clear what behaviours are putting an individual at risk. Said negative health behaviours include, smoking, unprotected sex, and binge drinking. (Sutton, 2004) . One of the main health psychology informed prevention schemes, is regular health checks. In 2009, the NHS introduced a ‘NHS Health Check Programme’ which aimed to prevent illness, specifically cardio-vascular disease (an alcohol related illness), by inviting 40-74-year olds to a risk assessment. Around 1.8 million people in the UK qualified for a risk assessment. The risk assessment consisted of questions about their alcoholic intake, smoking habits, active routine, and a BMI measurement procedure. During this assessment advice and management skills were provided in order to decrease and prevent their risk of CVD. In the first year, attendance only reached 5.8%. However, the percentage of attendees increased to 30.1% in 2012. Arguably the most interesting result of this programme is that the percentage of attendees that were at higher risk of CVD, were from socially deprived areas (14.9%), than those of socially benefited areas (12.3%). In total, it is estimated that the programme prevented 2,500 cardiovascular related hospital admissions / deaths (Robson, Dostal , & Sheikh, 2016) . Cardiovascular disease is an alcohol related illness, as alcohol induces high blood pressure and in the long run strains the muscles of the heart (WHO, Cardiovascular Diseases (CVDs), 2017) . As previously mentioned, irresponsible alcoholic intake is one of the negative health behaviours Health Psychologists aim to help an individual understand and tackle. This is covered in the ‘NHS Health Check Programme’, as they identify the illness (CVD) and further provide advice on behavioural change (reduced alcoholic intake). The Health Psychology principles preventing and treating illness demonstrated in ‘NHS Health Check Programme’ exemplify that intervening, clear communication with health professionals, and educational advice are incredibly beneficial in preventing and treating alcohol related illnesses.

The Health Belief Model (HBM) is a theoretical model which was created by Health Psychologists and Social Scientists in the 1950s. The purpose of the Health Belief Model is to help predict and identify specific health behaviours, in order to gage an individual’s willingness to change said behaviours and the barriers which may prevent them from doing so (Jones, et al., 2015) . The Health Belief model is one of the most widely accepted theories of behaviour, as it clearly communicates proposed health behaviours, and the probability of change, which is

unique to every single individual. In order to theorise the probability of changing behaviour, we may exemplify the Health Behaviour Model in terms of alcoholic intake as the behaviour and such as Cardiovascular Disease as the risk. First an individual's Societal status / Demographic, Psychological factors, and health behaviour habits will be identified. For example, is the individual employed? Is the individual from a deprived area? Is the individual Vulnerable? These factors will be considered when understanding the influence, they have on an individual's behaviour (alcoholic intake) and further on their health (Cardiovascular disease). Especially when it has previously been evidently proposed that individuals from a deprived area are more likely to be at higher risk of Cardiovascular disease, than those of a higher societal area. (Robson, Dostal , & Sheikh, 2016) . The individuals Societal status / Demographic will also be further interpreted as an influence on an individual's 'Perceived Susceptibility'. This factor refers to how much an individual believes that a certain health behaviour (Alcohol Intake) will increase their risk of illness (Cardiovascular disease). People who do not believe they are at risk of cardiovascular disease, are unlikely to change or regulate their alcoholic intake. Another factor considered, is an individual's 'Perceived severity'. This factor refers to how serious they think the risk of cardiovascular disease is. An individual will not regulate their alcoholic intake, if they do not think that Cardiovascular disease is that serious. Further, the 'Perceived benefits' is also considered and refers to how beneficial changing their behaviour is to an individual. If an individual does not think that reducing their alcoholic intake will benefit them as they will miss out on nights out, parties, social events etc., they are unlikely to change their behaviour, even if it means risking potential cardiovascular disease. In contrast the 'Perceived costs' must also be considered, if changing their behaviour will disadvantage an individual, they are unlikely to change it, regardless of the risk. If an individual believes that reducing their alcoholic intake will be difficult to adapt to, both mentally and physically, the less likely they are to change their behaviour and risk cardiovascular disease. A further supporting two categories may also be considered. 'Cues to action' refers to what initiates someone to change their behaviour, what is the motivation behind it. In terms of alcohol related illnesses, the cue to action may be, losing a loved one to alcohol addiction or simply just a TV ad about the risks of binge drinking. Secondly, an individual's 'self-efficacy', must be considered this refers to how much an individual believes they have the potential to change their behaviour and stick to it. If an individual self-efficacy is low and they do not believe they are capable, the more likely they are to shy away from changing their behaviour (Champion & Skinner, 2008) . The Health Behaviour Model is a productive and beneficial demonstration of theorising specific health behaviours (Alcoholic Intake), in regards to preventing alcohol related illnesses (Cardiovascular Disease), as it carefully considers each individuals reality so that advice and treatment can be uniquely tailored to the individual, decreasing the likelihood that the individual will indulge in behaviour putting them at risk of cardiovascular disease, and increasing their confidence that they have skill and potential to do so.

In Conclusion, after careful consideration and discussion of the key principles and theory in Health Psychology such as, Promoting and Maintaining Health, Preventing and Treating Illness, and the theoretical Health Belief model it is clear, that Health Psychology is incredibly beneficial in preventing alcohol related illnesses. Health Psychology is beneficial in preventing alcohol related illnesses, as many Health Psychology informed campaigns such as the 'Count 14' campaign and the 'NHS Health Check Programme' demonstrate clear communication between health services / professions and the general public. They also include and consider each individuals behaviour and perceptions in order to effectively overcome negative health behaviours such as binge drinking, before and after they arise, which put an individual at risk.