An expert on international alcohol marketing has said correct government policy intervention can prevent a public health crisis.

Dr David Jernigan, who has advised the World Health Organisation (WHO) and the World Bank on the subject, said research has shown the greater the exposure to marketing, the more likely an individual is to develop problems with alcohol.

Longitudinal studies in Europe, the US and Asia have linked marketing to young people’s progression from experimentation to problem drinking.

Dr Jernigan said aspects of the French approach have proven successful - not linking the marketing of alcohol to lifestyle, celebrities or sports events.

“It’s role modelling. Young people see themselves in advertising and alcohol advertising will never show you anything negative,” he told The Irish Times before addressing the national conference of the Alcohol Forum in Donegal on Friday, with the theme “Ireland, Irishness and Alcohol: Changing the Relationship”.

The Alcohol Forum is a registered charity working to “prevent and reduce alcohol related harms in communities”.

Coincidentally, its fourth annual conference coincides with the final stages of the often controversial Public Health (Alcohol) Bill, currently before the Seanad.

Dr Jernigan is an Associate Professor in the Department of Health, Behaviour and Society at the Johns Hopkins Bloomberg School of Public Health in Baltimore.

While not commenting explicitly on the Irish legislative provisions, his work and research focuses squarely on many of the issues that have ignited debate.

Ireland, he said, is not alone in this: Estonia is bringing in marketing restrictions next month and Lithuania will follow in January. South Africa too has a bill in process.

In a report on 166 countries conducted by the World Health Organisation in 2014, 22 per cent had bans in place on public television and 20 per cent for private stations.

This type of regulation falls away in other media, such as print and billboards, and particularly in social media and on the internet where, paradoxically, younger people spend more of their time.

Dr Jernigan said the proposed laws here are “a really important step forward”; culture shapes societies and the greatest influence on alcohol culture is the industry itself, channelling considerable sums of money toward marketing.

While one of the most contentious aspects of the Bill has been the idea of segregating alcohol from other products in shops, Dr Jernigan said there has simply been no research exploring the effects this has on consumption or behaviour.

“What we do know is that the more places there are to buy alcohol, the more people will drink and the more problems there will be,” he said.

Highlighting the area of licensing premises to sell alcohol, Dr Jernigan pointed to a Health Research Board report last year which showed there was one licence for every 197 people in Ireland. This compares to his native Baltimore where the rate, criticised for excessiveness, was one licence for about every 450 people.

The most important policy area, he said however, is minimum unit pricing.

“The bottom line is that the cheaper the alcohol is the more people will drink. The more people drink the more problems they will have.”

It is reasonable for the State, he said, to create a price floor in order to secure a safe environment for society.

“Left alone, market forces will treat alcohol just like everything else and alcohol is not the same as laundry soap. It’s not an ordinary commodity.”