

Health Impact Assessment of Alcohol Licensing in Aberdeen City – Results Summary

29th October, 2017

This document summarises the major themes identified by the health impact assessment of alcohol licensing in Aberdeen City conducted in 2017. The full report contains details of the methods and quotes used and is available from the Clerk and details the methods used and the quotes used to draw conclusions. **Bold points** were mentioned multiple times or considered to be of importance after discussion among the researchers.

Two broad themes are described which reflect the topics discussed. *Theme A* relates to specific parts of the Statement of Licensing Policy for Aberdeen City 2013-16. *Theme B* covers each of the licensing objectives in turn.

Theme A. Statement of Licensing Policy

1. Applications and objections

The *applications process* was thought to be lacking in transparency with regards to the guidelines followed in making decisions as well as containing a number of administrative difficulties. **Community councils in particular spoke the delays they have in receiving notifications (via 2nd class mail) and the short time they have to respond.** They've noted decisions being made in their absence and premises opening up in their locality that they would have objected to. The Board isn't obliged to wait for their response. Some of these issues are mitigated by licence toolkit training but not every board has taken part in this. Often, the community council does not meet before the scheduled Licensing Board meeting posing challenges in forging timely and representative replies.

There is a perception that powerful legal representation, as well as having time to prepare responses, can also push through the applications of large clients with the resources to hire them. The on-sales trade representative had attended Board meetings and thought that the **objections are easy to dismiss** from environmental health, the Police and public health as being too general for a given premises. The decisions on occasional and extended hours licence applications often take a protracted amount of time with the final decision heard close to the date itself affecting the venue's preparations. The trade and community councils had engaged in applications and objections, respectively, in the past. **They would prefer some indication of how the application was progressing, as well as feedback on how the final decision was made.** This could be via an update system on the website stating which stage an application had reached, or correspondence to indicate that an application had been received and was under consideration.

2. Enforcement and review

City centre premises received a number of **spot checks** often at peak times by the Police and occasionally by Licensing Standards Officers. There is a process for the Police to monitor off-sales sites but usually only after a complaint is made. A commonly held view was that that training for on-sales staff was more rigorous and there was greater enforcement of standards in on sales premises, particularly those opening late in the city centre than in off-sales premises.

Questions were made about the level of training in off-sales establishments and if these sites should have more awareness training to recognise when people should not be served.

3. Hours of trading

A view was expressed by the recovery group that there were certain times of day when some vulnerable groups (e.g. schoolchildren petitioning adults) buy alcohol.

The only argument made in favour of **extended hours** of trading (outside of more business) was the possibility of patrons *slowly dispersing* home rather than all leaving at the same time. *Staggered closing times* was proposed (and has been tried in other cities e.g. Glasgow) but the Police representative thought this meant the latest closing venue became overcrowded and described situations where **intoxicated people hanging around and within food vendors after licensed venues had closed as a source of potential public disorder.**

4. Overprovision

All community groups interviewed recognised the decline in on-sales sites and increase in the number of off-sales premises. **Supermarkets were mentioned as making alcohol easier and cheaper to obtain and always succeeding at obtaining or making major changes to their licence.** The group representing individuals in recovery from alcohol dependence had members of all ages, both genders and from a variety of social backgrounds who lived across the city. **The group unanimously reported at least two off-sales sites within five minutes walk of their home.** Their chances of trying to address their addiction and reintegrate into community life are threatened by this proximity to alcohol.

Theme B. Licensing Objectives

1. Preventing crime and disorder

Crimes listed included violent crimes and public disturbances such as street-drinking.

Challenge 25 was found to be strictly enforced in most premises including off-sales sites - this was put down to the salesperson risking the fine and a criminal record. **Bans** were used by a number of on and off-sales sites but were found to be less effective in the latter and were usually of shorter duration.

2. Securing public safety

This section mainly covered the pioneering **Torry Alcohol Action Group (TAAG)** - on- and off-sales sites linked by RadioLink with regular meetings of participants to discuss issues. It was working well with trouble kept to a minimum and bans working well but depends on the willingness of volunteers and most (if not all) establishments signing up. It is currently being re-started. The project had stopped due to a number of operational factors resulting in limited capacity to support it. It is considered by Torry Police to be an important project that engages the local community.

3. Preventing public nuisance

This was only mentioned in passing. Street-drinking was reported as being commonplace by some communities and required Police intervention. Drunken people could be found on public transport, especially at night; this was used by young people who couldn't get a lift from friends and who found taxis prohibitively expensive.

4. Protecting and improving public health

Access and visibility:

The children and young people's groups (CYP) reported that they still obtained their alcohol waiting outside shops and asking adults to buy for them. They would also raid their parents' cabinets and **mentioned a seller on Facebook**. Ordering alcohol as part of a takeaway delivery was another reported means by which CYP groups obtained alcohol.

The recovery group didn't think that reducing shelf space or hiding alcohol would deter them from buying but thought it would deter impulse buys. They also noticed alcohol being placed in prominent positions *e.g.* end of aisles. One man thought that it was odd that there was no limit to the alcohol that could be bought in one purchase - "enough to kill yourself". **This group also described how off-sales sites exploited their vulnerability by encouraging them to buy alcohol when they didn't want to, or to buy more; and to have their usual purchases ready for them in a bag when they came through the door.**

Preloading:

This was recognised as a common, current practice but some issues were highlighted including how they become the problem of the on-sales site when they enter it and how difficult and time-consuming this situation can be to manage.

Education:

It was thought that the amount of alcohol education in schools and delivered to children and young people is minimal compared to drugs education. The **community councils also used to provide information through community centres** which was thought to combat alcohol use in children and young people and provide alternative activities to drinking.

Normality of alcohol and its central role in making and sustaining social relationships.

This section mainly provided an appreciation of drinking being a normal thing to do, even in young people's social circles - "everyone drinks". As a result, people in recovery spoke about having to avoid former friends who still drank or places that served alcohol.

Pricing:

Alcohol was bought from off-sales and consumed at home mostly due to **price and convenience**; supermarkets could undercut other vendors. **Customers prioritised buying alcohol for the cheapest price and consuming at home, rather than paying extra to enjoy the more social and convivial atmosphere of an on-sales venue.** A perception of the social workers was that **raising prices would disproportionately affect poorer people who would prioritise alcohol above essentials possibly resulting in them neglecting their children and other family members.**

Drivers and non-drinkers:

Everyone agreed that **free or cheaper drinks for drivers** / non-drinkers was a good idea. The range of drinks sold by on-sales reflects consumer choice and some soft drinks also appeal to drinkers. However, any drink sold must first be profitable for the vendor.

Mental health:

Alcohol was named by a number of groups as a **coping mechanism** for dealing with stressful issues in people's lives. It was related to **isolation and depression**; often for people without homes, jobs, victims of domestic abuse or other, similar situations. On-sales premises *e.g.* Unight members, are starting to train their staff to recognise mental health signs and to offer more appropriate support. **Social services described difficulties in accessing psychiatric care for vulnerable clients** where these services requested the person be sober (or drug free) for three months before a mental health assessment is possible.

Social support:

A number of services assisting vulnerable groups within Aberdeen City were highlighted and include those assisting people in recovery, homeless and victims of domestic abuse. These organisations are essential in navigating difficult and lengthy forms requiring many details and much personal information but also provide a point of social contact to mitigate the degree of isolation.

Housing:

Much of social support targeted housing to provide a stable basis for recovery and is a great concern when absent. **A number of those who had abused alcohol had periods of homelessness and sofa-surfing** and may engage in risky or criminal behaviour to obtain money for alcohol such as stealing or prostitution.

Domestic abuse:

One organisation who worked with homeless people specifically assisted those who had suffered domestic violence. **Alcohol may be the cause of the abuse or, conversely, a means of coping with it.** They described situations of victims of domestic abuse being housed in insecure, deprived areas where alcohol and drugs were present and where they were isolated without friends.

5. Protecting children from harm

There was concern that **"vulnerable adults"** were not considered and measures not taken to protect them from specific harms. They were aghast at **occasional licences** at school events (or other events aimed at children) where responsible adults had access to alcoholic drinks. However, they at least wanted some **awareness training** for the serving staff to recognise risky situations, whatever the venue. **They wondered if off-sales vendors received the same training as pubs.**

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