



Alcohol-related Harms in Nightlife Settings on the Island of Ireland

A Knowledge Exchange hosted by the North South Alcohol Policy
Advisory Group.

3rd December 2020

Institute of
Public Health



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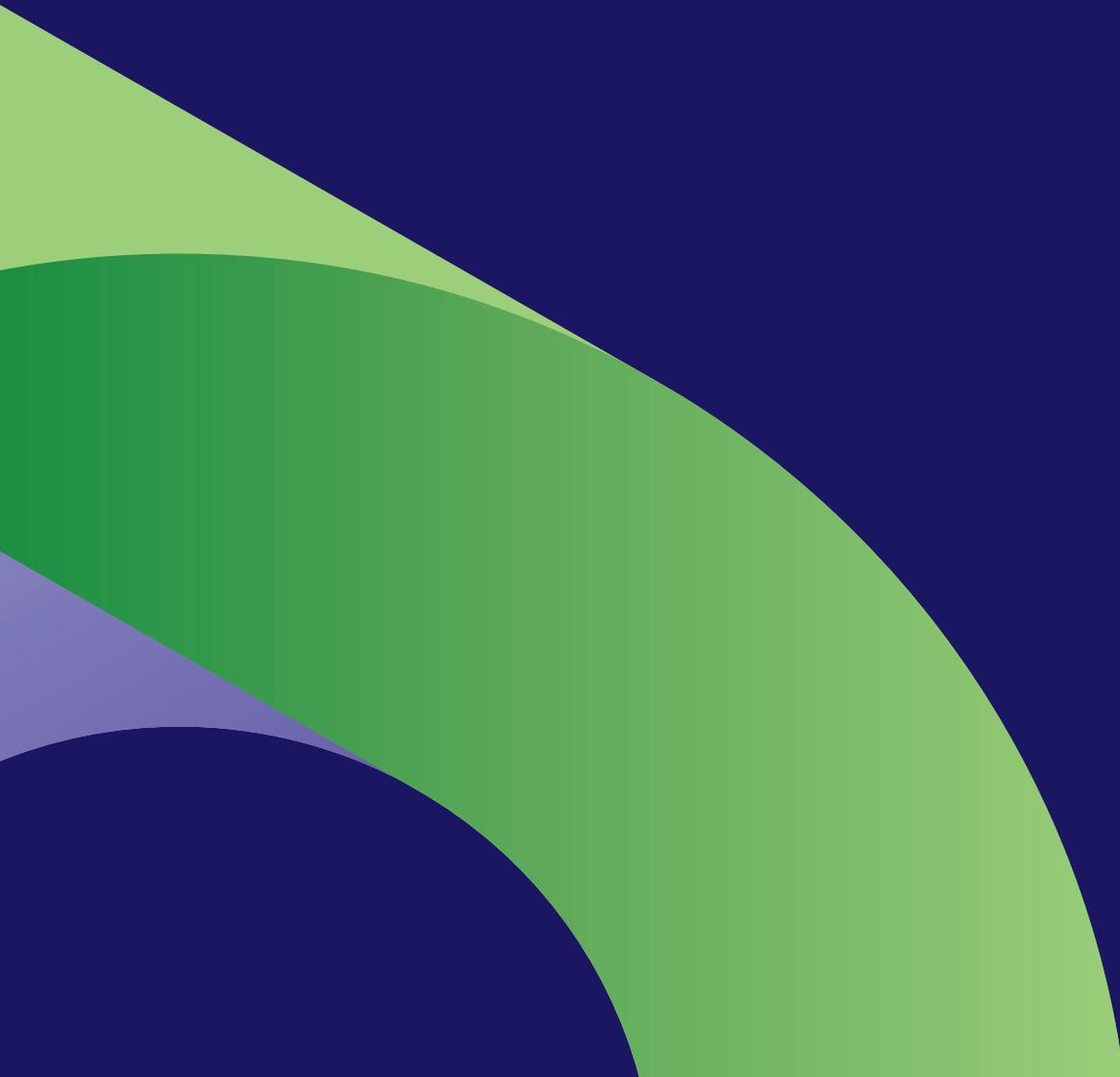


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Foreword

The annual North South Alcohol Policy Advisory Group Knowledge Exchange provides an opportunity to share evidence and policy developments relevant to reducing alcohol-related harm on the island of Ireland.

The 2020 event was focused on reducing alcohol harm in night-life settings which has presented significant challenges for policy makers in recent years. Evidence is emerging on how to balance the pleasures and benefits of night life in our towns and cities with the need for a safe environment where the risk of harm, and sometimes tragedy, is minimised.

The pandemic response has effectively closed nightlife settings which has created enormous hardship for those working in the night-time economy, but they will return, and this is an aspect of our lives in which 'an economy of wellbeing'¹ can be realised.

This document is designed to provide a summary of the presentations made on the day, and the core points of discussion which ensued. We are grateful to everyone who participated in the event and shared the benefit of their expertise, research, and insights.



Suzanne Costello
Chair
North South Alcohol Policy Advisory Group



1. Ref: World Health Organization (2020). European Programme of Work, 2020–2025 – “United Action for Better Health in Europe”. Available at: <https://apps.who.int/iris/bitstream/handle/10665/333908/70wd11e-rev4-EPW-200673.pdf?sequence=1&isAllowed=y>

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Introduction

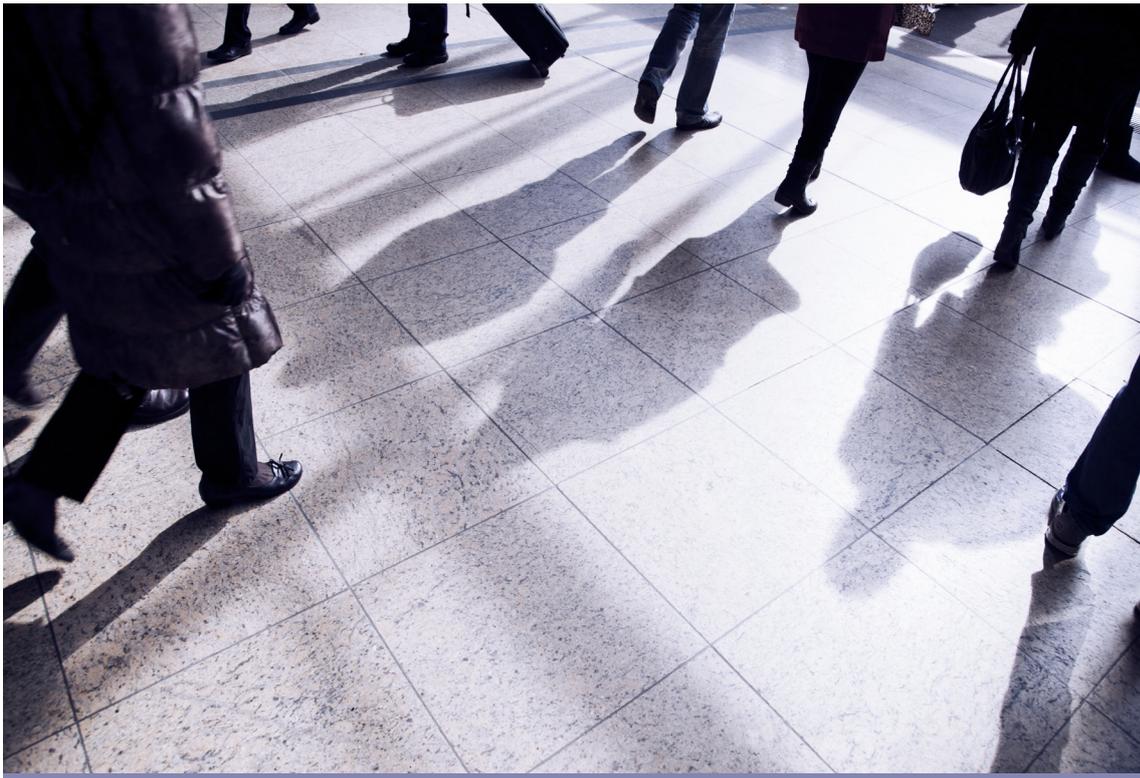


Introduction

North South Alcohol Policy Advisory Group

The North South Alcohol Policy Advisory Group (NSAPAG) was established in 2013 at the request of the Chief Medical Officers in Ireland and Northern Ireland and is chaired by the Institute of Public Health. The aim of the NSAPAG is to contribute to reducing alcohol-related harm on the island of Ireland.

The NSAPAG seeks to strengthen all-island alcohol initiatives, develop opportunities for North South cooperation on alcohol and identify policy solutions and other measures to improve the legislative and regulatory arrangements impacting on supply and use of alcohol. Membership comprises representatives from government departments, academia, professional bodies and healthcare delivery agencies. Previous events, reports and outputs of the North South Alcohol Policy Advisory Group can be found at www.publichealth.ie.



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Presentations



Presentations



*Chair - Dr. Chris Luke, Consultant in Emergency Medicine/
Adjunct Senior Lecturer, University College Cork*

Dr. Chris Luke welcomed colleagues and speakers from across the UK and Ireland. Reflecting on his experience as a consultant in emergency medicine, he welcomed a public health approach to addressing alcohol-related harms. He acknowledged 'nightclub medicine' as a 'pro pleasure, pro business' approach based on partnership between the health service and licensed premises, driven by evidence and experience and aimed at reducing alcohol-related harms to nightlife revellers.

He acknowledged the progress to date in terms of publicising the level of alcohol damage to our societies, achieving political recognition of alcohol damage and pursuing legislation such as the Public Health (Alcohol) Act 2018, however, he emphasised the considerable work remaining.

He discussed the additional, alcohol-related issues occurring in the context of the COVID-19 pandemic, acknowledging the increased off-licence and online sales of alcohol, rising tensions between publicans and the requirement for pandemic restrictions on opening the licensed sector and the relentless 'river of alcohol-related admissions' presenting at emergency departments in Ireland.

He emphasised the value of inspiring interested professionals to get involved in reducing alcohol-related harm, and the need for examples of successful interventions and workable solutions. He noted the importance of interdisciplinary collaboration across a variety of fields – clinicians, politicians, policy makers, businesses and academics, setting the scene for presentations from experts in the area of alcohol policy.

“One of the busiest night-time settings on the island of Ireland is the local hospital emergency department”



Alcohol and the Night-time Economy: Policy Context for the Island of Ireland



Dr. Helen McAvoy, Director of Policy, Institute of Public Health

Dr. Helen McAvoy provided an overview of the policy context across the island of Ireland in relation to alcohol and the night-time economy. She focussed on policy responses to prevention and management of alcohol-related harm in nightlife settings across Ireland and Northern Ireland.

She outlined the current policy change agenda in Ireland, with an overview of the Night Time Economy (NTE) taskforce which has been convened under the current Programme for Government (PfG). The NTE taskforce terms of reference include a commitment to bring forward recommendations on modernising licensing laws. Within the PfG, there are longstanding commitments through the Public Health (Alcohol) Act to reduce alcohol-related harm and alcohol consumption overall, using a broad set of measures including Minimum Unit Pricing (MUP).

She also discussed the current change agenda in Northern Ireland and referred to the government strategy *New Decade, New Approach*. The strategy sets out commitments to reform alcohol licensing laws, to deliver a new drug and alcohol strategy and to hold a public consultation on Minimum Unit Pricing in 2021. It was noted that there are proposed changes to liquor licensing laws currently under live discussion as part of the reform of the Licensing and Registration of Clubs (Amendment) Bill.

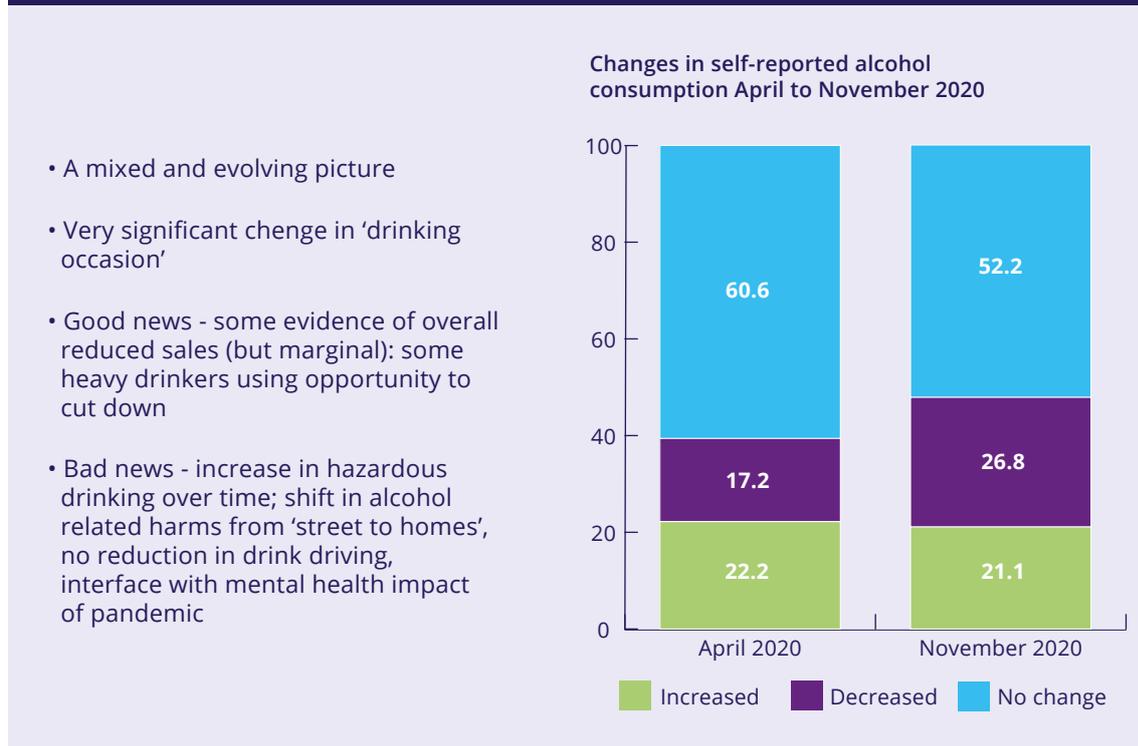
She acknowledged the complex issues that have emerged at the interface of the pandemic response and the ongoing response to alcohol-related harms.

COVID-19 and the law - some alcohol-related issues

- Designation of alcohol retail within 'essential retail services'.
- Restrictions to opening, curfews and reduced operating hours and capacity for licensed premises and the designation of 'wet' and 'dry' pubs.
- Viral transmission:
 1. drinking occasions in licensed premises – social behaviours, environmental factors (ventilation, distancing, shared facilities, smoking areas)
 2. domestic or 'outdoor' drinking occasions – house parties, street drinking, and organised outdoor get togethers.
- Compliance of licensed premises with COVID-19 laws and policing of online deliveries and takeaway sales alongside the compliance of individuals.
- Alcohol-related harms shifting from 'street to home' – domestic violence, child protection, house parties.
- Exposure of front-line workers to harms – police, health and social care, public transport – e.g. mask wearing, use of spit hoods, anti-social behaviour and 'high contact' behaviour while intoxicated.

Domestic violence, child protection, high contact interaction, policing, mask wearing, increased transmission risks for frontline workers are just some of the alcohol-related issues. There are still unknowns in terms of how alcohol consumption has changed during the pandemic, as the emerging evidence is presenting a mixed picture. Whereas alcohol consumption overall may be little changed, it appears that some subgroups of the population have increased their consumption during the pandemic restrictions.

Figure 1. Alcohol consumption during the pandemic to date



The varied response by governments was noted; the law provides a *de facto* recognition that viral transmission can be added to the already long list of alcohol-related harms, and a recognition that public health concerns can now be considered in alcohol licensing decisions. In Northern Ireland, there has been enhanced cooperation between public health and criminal justice in managing alcohol issues, this can be considered a positive outcome of the pandemic from an alcohol policy perspective.

She concluded with policy considerations for public health in this complex change agenda:

Questions at a point in time

IMMEDIATE (Pandemic)

- Alcohol is (mostly) social. Intoxication alters drinkers risk-taking behaviours and elevates risks to others. How can we support evidence-based approaches to reducing viral transmission in licensed, domestic and outdoor social drinking occasions?
- How can we best protect our frontline workers from the elevated viral transmission risk associated with alcohol use?

SHORT TO MEDIUM TERM ('Live' policy windows)

- If licensing reforms increase hours of sale, how will that change consumption and harms?
- Continued availability of cheap alcohol facilitates excess consumption. Now more than ever is it time for minimum unit pricing?

LONG TERM (Building back better)

- If reforms expand licensing will this further normalise alcohol with more 'offer' in drinking occasions?
- What would public health as a licensing objective look like on this island? Is there political appetite to consider this?

“We now have concerns about the interface between the broader mental health impact of the pandemic, economic insecurity, job loss, social isolation and the issues of alcohol”



Alcohol Consumption and Harms in Nightlife Settings in Ireland



Dr. Deirdre Mongan, Research Officer, National Drugs & Alcohol Strategies, Health Research Board

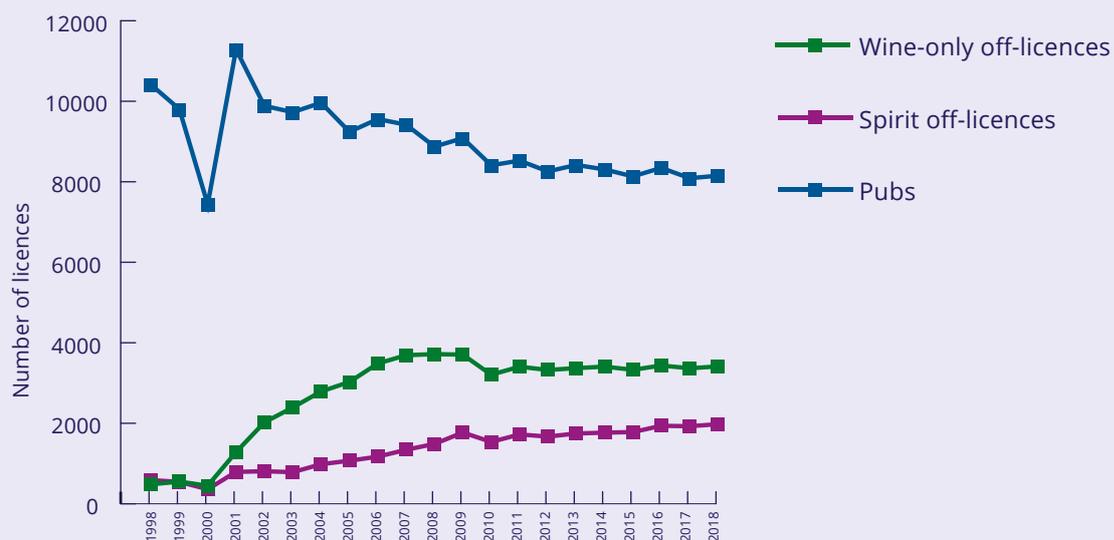
Dr. Deirdre Mongan presented data on alcohol consumption and harms in nightlife settings in Ireland. She outlined drinking patterns in Ireland that may contribute to harms, with a particular focus on patterns among those aged 18-24 as the group with the highest level of problematic drinking and most likely to consume alcohol in nightlife settings. This group had particularly high rates of alcohol dependence and episodes of binge drinking compared to the rest of the adult population.

Data illustrating alcohol use in schoolchildren showed a trend towards a continuous decrease in lifetime alcohol use among 13-15 year olds over the past 20 years; however, patterns among older teenagers (17+) remained unchanged.

'Pre-drinking' trends were again notably higher among 18-24 year olds, with confirmed associations with increased alcohol consumption. There is concern around drinking patterns in older teenagers with a need for more prevention work in this age group.

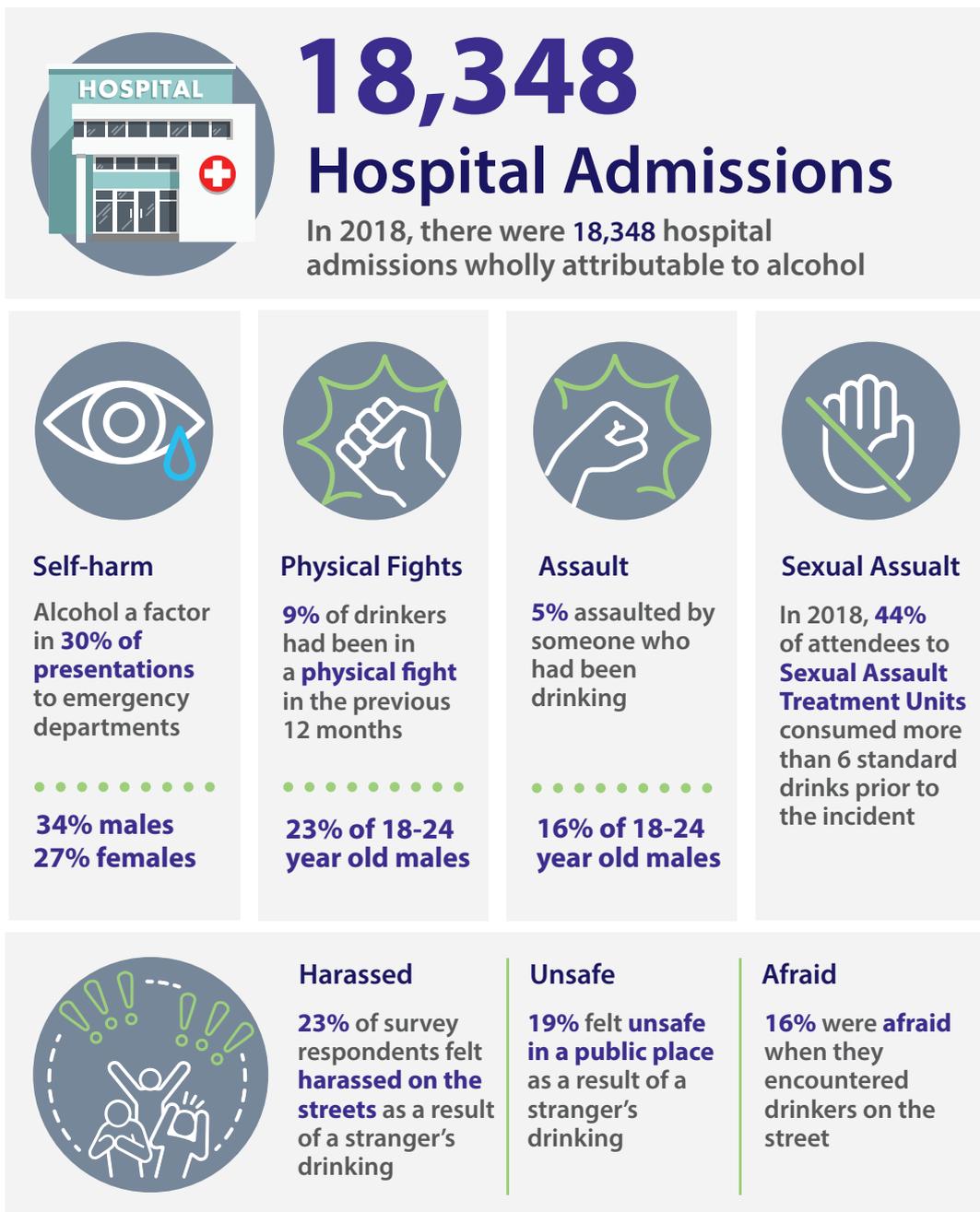
Insights were shared on where adults in Ireland are drinking. There has been a considerable shift over the past 20 years towards off-licence sales, with this sector making up 61% of alcohol volume share in 2016 and a five-fold increase in the number of off-licenses issued since the introduction of the Intoxicating Liquor Act in 2000.

Figure 2. Alcohol licensing



Dr. Mongan highlighted the main alcohol-related harms arising from nightlife settings which included self-harm, crime and public disorder and sexual assault. The data clearly indicated the significant role alcohol consumption plays in sexual assault in Ireland. The data indicate that Ireland has a high level of problematic drinking patterns, that alcohol-related harm arising from nightlife settings is likely to be considerable and that improvements in routine data collection are required in order to further assess the impact of alcohol and nightlife settings.

Figure 3. Examples of alcohol-related harms in nightlife settings.



Alcohol Consumption and Harms in Nightlife Settings in Northern Ireland



*Dr. Joanna Purdy, Public Health Development Officer,
Institute of Public Health*

Dr. Joanna Purdy presented data on alcohol consumption and harms in nightlife settings in Northern Ireland, as well as data on public safety concerns when socialising in nightlife settings.

She noted particularly high levels of binge drinking rates among both men and women in Northern Ireland. Among young people, drinking trends were similar to those in Ireland over the last 20 years, with a decline in the proportion of young people ever having drunk alcohol and having been drunk. Increased drinking patterns were seen with an increase in age. She discussed where young people are accessing and consuming alcohol; the home, someone else's house and special occasions such as a wedding were the top locations. For adults, again there has been a notable increase in people drinking in their own home.

Data on alcohol-related harms in Northern Ireland showed a significant increase of almost double the total costs for alcohol-related emergency department attendances, over the past ten years. She highlighted potential benefits of Minimum Unit Pricing (MUP) in reducing alcohol related harms. Findings from a modelling study showed notable gains from the implementation of this policy measure, including a reduction in hospital admissions, reduced deaths, reduced costs and harm reductions for health, crime and workplace absence.

Public safety concerns regarding the night-time economy showed that over a third of survey respondents reported that 'people drinking or being drunk in public' was the single most serious problem in the night-time economy. This emphasised the importance of creating safe environments within nightlife settings where people can feel comfortable socialising in their town centres. Another notable concern was alcohol-related anti-social behaviour in the night-time economy.

Problems in the night-time economy (% survey respondents)

- People drinking or being drunk in public (50%)
- Young people hanging around (36%)
- People being noisy, rowdy or disruptive (34%)
- People drinking or being drunk in public was the single most serious problem within the night-time economy (36%)
- Alcohol-related anti-social behaviour was a 'very' or 'fairly' big problem in the night-time economy (63%)
- Alcohol-related anti-social behaviour had increased in the 12 months prior to the survey (31%)

Consistent with alcohol related harms in Ireland, data in relation to alcohol-related harms in Northern Ireland involved crime, domestic abuse, self-harm, sexual offence and violence.

Alcohol-related crime as a percentage of all recorded crime by offence (2019/20)

Crime	Number of recorded incidents	% of all recorded crime	
VICTIM BASED OFFENCES	Violence against the person	13,867	33.6
	Violence with injury	6,713	49.3
	Violence without injury	6,550	37.1
	Harassment	604	6.0
	Sexual Offences	546	15.3
	Robbery	111	17.6
	Theft Offences (Burglary)	270	4.4
	Theft Offences	1,498	6.5
	Criminal Damage	2,803	15.0
OTHER CRIMES AGAINST SOCIETY	Drug offences	471	6.0
	Possession of weapons offences	280	25.4
	Public order offences	136	10.5
	Miscellaneous crimes against society	312	10.5
TOTAL RECORDED CRIME - ALL OFFENCES	20,294	19.0	

Dr. Purdy highlighted the useful data monitoring systems currently in place in Northern Ireland, but acknowledged the opportunities to further analyse existing data to better understand the types and extent of alcohol consumption and related harms. She concluded her presentation by referencing an important piece of work by the Department for Communities on Alcohol Retail Outlet Density in Northern Ireland. Additional resources from government-led departments and agencies are available through the All-island Alcohol Data Directory.

The Relationship Between Alcohol Licensing and Alcohol-related Harms and some COVID-19 Perspectives



Professor Niamh Fitzgerald, Institute for Social Marketing, University of Stirling

Professor Niamh Fitzgerald presented on the evidence between alcohol licensing and alcohol-related harms and provided some COVID-19 perspectives. She gave an overview of several studies in progress at the University of Stirling in the area of alcohol licensing and associated harms. Professor Fitzgerald also discussed the spatial (density) and temporal (hours and days of sale) availability of alcohol within on and off licensed premises.

What levers exist in licensing systems to influence premises type and operation?

- Fitness to hold a licence
- Withdrawal of licences (by 'reviews') or refusal of renewal of licences for repeated offences
- Prohibitions on 'sales to drunks'
- Mandatory training for licence holders or server training
- Discouraging award of licences to specific premises types: overprovision/ Cumulative Impact Zones (Scotland, England and Wales)
- In Ireland, licence applications can be refused on grounds of 'unfitness or inconvenience of the new premises'
- Many of these levers are supported by businesses: Best Bar None; PubWatch etc.

Her presentation examined where licensing can make a difference to alcohol-related harms under three headings:

1. Premise type and operation - the key takeaway was that premises are managed and run to different levels of risk, competence, and responsibility. The COVID-19 pandemic has presented further challenges for risk management such as viral transmission, physical distancing requirements etc. She discussed the evidence for premises-based interventions which suggested the clearest evidence for effectiveness comes from multi-component interventions that combine server training with mandatory enforcement of existing laws and community level components. She also presented a number of levers that exist in licensing systems to influence premises type and operation (see section above).
2. Where alcohol can be purchased - both overall premises numbers and clustering can be important for harm. Three main mechanisms were identified: easy access, competitive price pressures and marketing. The evidence linking spatial availability to alcohol-related harm show that increases in outlet density are associated with increases in alcohol consumption, and to some extent violence and other harms. Cross-sectional studies show strong associations in neighbourhoods between outlet density, deprivation, and alcohol-related harms. Studies are ongoing in Scotland to examine how communities view outlet

density and to look longitudinally at outlet density to understand what comes first - premises or harms (see research by Prof. Niamh Shortt, University of Edinburgh). She discussed the difficulties for licensing systems across the UK and Ireland in controlling spatial availability, as there are no mechanisms for reducing availability. Prof. Shortt's research examines how the sale of alcohol is distributed in the most deprived communities and the impact this has on low-income groups.

3. What times can alcohol be purchased (temporal availability)? - there's an important relationship between on and off-licence premises hours for alcohol availability – as became apparent in the COVID-19 pandemic. International systematic reviews have found that extensions in late night opening of alcohol premises are linked to increased intoxication, assaults, injuries, or use of public services. Recent studies in diverse large towns and cities in Norway, the Netherlands and Australia have found that even an additional hour of opening time past midnight leads to greater harms either in terms of violence or ambulance callouts.

She concluded her presentation with an overview of their new study "ELEPHANT" (Evaluating later or expanded premises hours for alcohol in the night-time economy) which aims to understand and evaluate the contribution of changes in trading hours for bars and clubs in Glasgow and Aberdeen to harms, services and costs in the local night-time economy. Discussing life 'Post-Covid', she acknowledged the opportunity to examine what harms have been reduced throughout the pandemic restrictions on the night-time economy, and the opportunity to reshape and restore the positive aspects of the night-time economy while ensuring we do not go back to the same level of alcohol-related harms.

“ Opening hours ... is where there is most evidence and a neglected area in terms of practice. We don't see a lot of activity around opening hours, compared to say outlet density in Scotland. If you add an extra hour of opening to standard late-night hours that allows everyone who's out in the night-time economy to drink for an extra hour. So there maybe a mechanism that makes it unsurprising that there would be a link with harm. ”



Welsh Approach to the Management and Monitoring of Alcohol Harms in the Night-time Economy



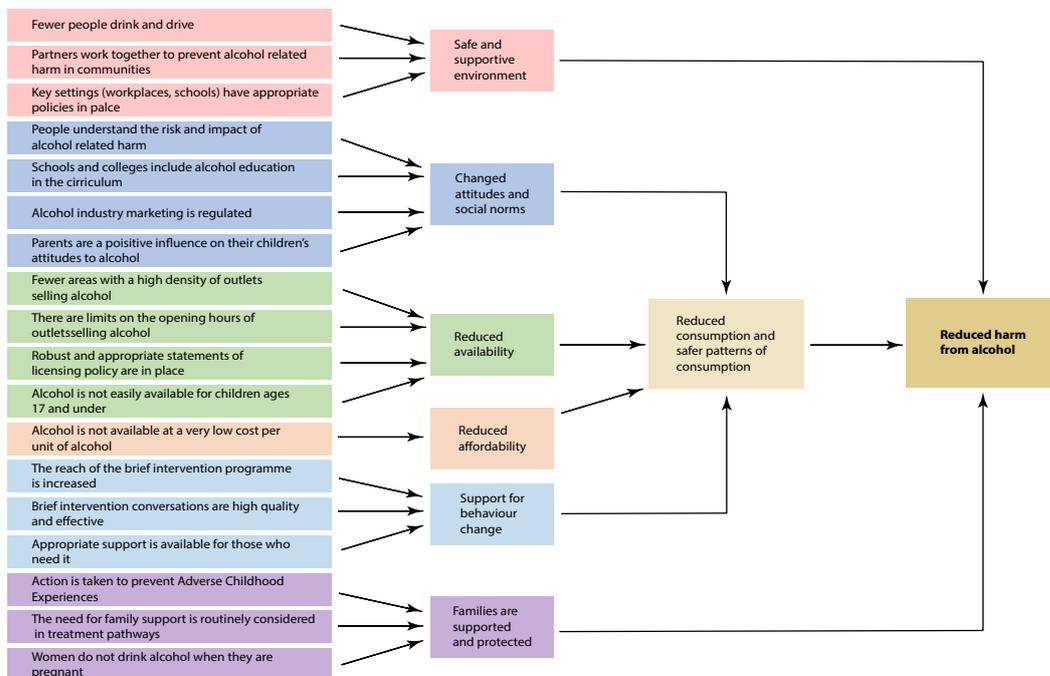
Joanne Hopkins, Director of the Adverse Childhood Experiences Support Hub, Public Health Wales

Joanne presented on the Welsh approach to the management and monitoring of alcohol harms in the night-time economy (NTE). She noted the opportunities and traditions of alcohol consumption within the Welsh context, not just in the NTE in towns and cities but in community clubs and centres in rural areas and the significance of this for alcohol licensing decision making.

Data presented offered a stark illustration of drinking patterns in Wales, with males drinking significantly more than females across all age groups. Notably, males aged 55-74 had the highest level of alcohol consumption in Wales. Data for alcohol-specific hospital admissions in Wales were almost double that of females in 2018.

Joanne shared insights on the ‘alcohol theory of change’ employed in Wales in order to address and reduce alcohol-related harm, and the subsequent process of implementing MUP on public health grounds, an area within the Welsh Assembly’s legislative competence, in March 2020.

Figure 04. Alcohol Theory of Change

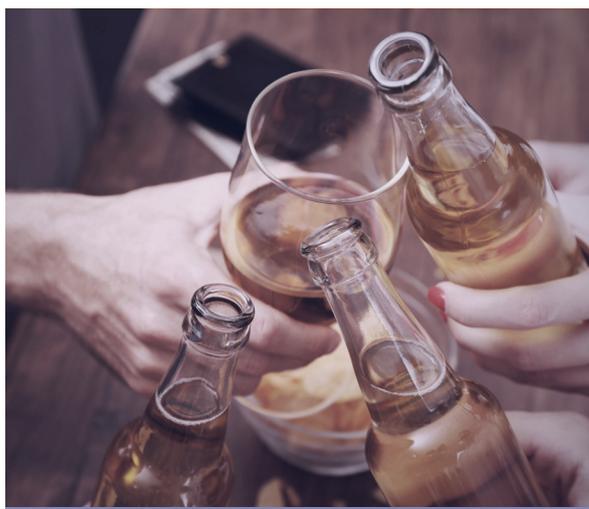


Source: Public Health Wales Observatory (2020) Interventions to prevent and reduce harm from alcohol - Alcohol Theory of Change. Available at: <https://phw.nhs.wales/services-and-teams/observatory/evidence/#health>

Joanne discussed the impact of COVID-19 on alcohol consumption in Wales, which saw an increase of alcohol sales and 'stockpiling' prior to lockdown. In preparation for the re-opening of the NTE, 'rapid assessments' were conducted in summer 2020. She emphasised the need for an integrated approach in reducing alcohol-related violence and harm, she highlighted a number of key preventative measures such as effective street lighting, safe and efficient transport, taxi marshals and understanding why people are behaving in harmful manners when intoxicated. She reiterated the importance of understanding the culture and demographics of alcohol consumption in Wales and employing the relative measures in communities outside of cities and larger towns.

She highlighted channels of monitoring in Wales: Public Health Wales Observatory and the Violence Prevention Unit.

“ The Violence Prevention Unit ... enables us to look at data in a different way. What we haven't had is that overall surveillance of the impact of different things on violence ... we find this extremely helpful in terms of that multi-agency approach of a mixed team looking at the data, providing that risk assessment around what do we know about reporting of these forms of violence including night-time economy related violence and alcohol-related violence during lockdown. ”



3 Discussion



Discussion

Key points from panel discussion

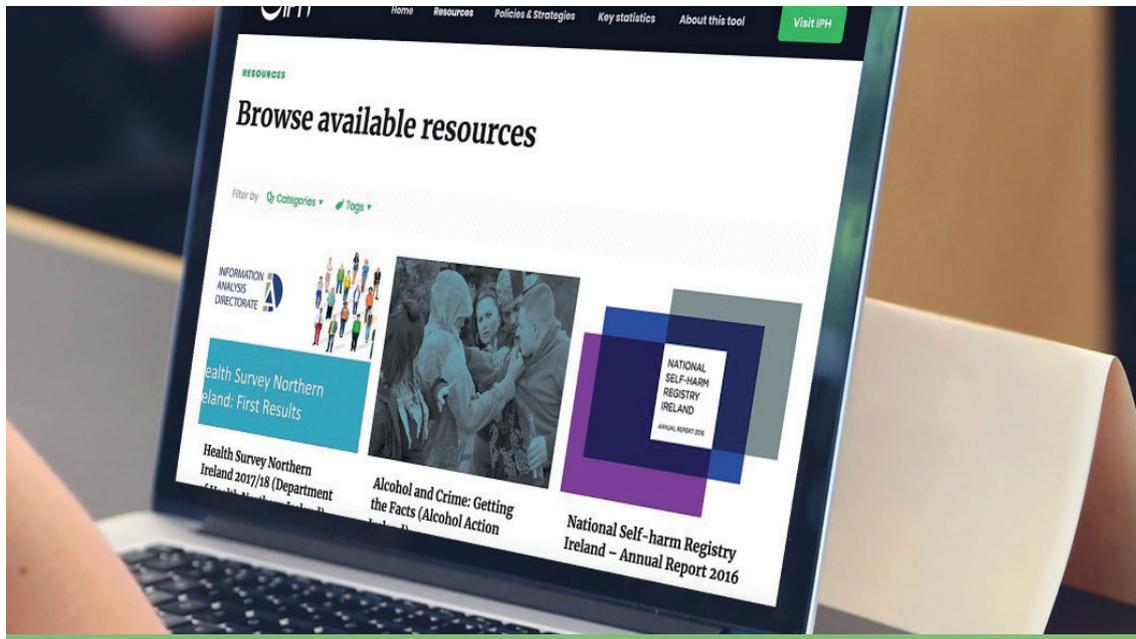
Following the presentations, the speakers joined Professor Joe Barry, Trinity College Dublin and Denise Cahill, Cork Healthy Cities for a panel discussion about the potential for reducing alcohol-related harms across the island of Ireland and the UK. Some of the key points raised included:

- It is a challenge to move the conversation away from a framing of the problem as ‘a few heavy drinkers creating problems for themselves’ to a wider conversation about alcohol creating problems at a societal level.
- Progress on the implementation of the Public Health (Alcohol) Act 2018 has been slow. There is a financial incentive for the alcohol industry if people are drinking more and the pandemic has shown how deeply this affected public discourse with the extent of conversation about the re-opening of pubs.
- Research by the National University of Ireland, Galway², found some concerning attitudes towards consent. About two thirds of students surveyed thought that if a girl had consumed the equivalent of 28 standard drinks (equivalent to a bottle of vodka), she would still be able to give consent. It was noted that Trinity College Dublin Students’ Union has done work on the issue of consent and there is a collective approach to the issue of alcohol and consent through the student bodies in collaboration with the universities.
- The sale of alcohol in on-licensed premises for off-licence consumption was highlighted. Concerns were raised about the ease of access to alcohol, when drinkers are already intoxicated. This is a particular concern in the context of COVID-19. It was noted that the purchase of ‘take-away’ alcohol was banned in Glasgow on the basis of concerns about urination in public places.
- The Central Statistics Office Social Impact Survey (conducted April and November 2020)³ found women were slightly more likely than men to report they were drinking more during the year to date.
- Whilst the majority of alcohol consumption occurs in men, many of the alcohol-related harms tend to fall on women. Concerns were noted about the rising level of alcohol consumption among women during the pandemic, including greater deterioration in women’s mental health.
- The severity of the intoxicating effects of alcohol were highlighted in the context of alcohol availability. The importance of adhering to licensing conditions and having effective measures in place to reduce risk was strongly articulated.
- COVID-19 has broadened understanding of public health and how it is not just the responsibility of the health sector. The discussion highlighted the importance of a community led response to alcohol-related harms, with the need for a multi-agency approach, involving local authorities and the police. The current situation was considered an opportunity to capitalise on the understanding of public health, but not in a way which was competitive with economic development.

2. MacNeela, P., O’Higgins, S., Mclvor, C., Seery, C., Dawson, K., and Delaney, N. (2018). Are Consent Workshops Sustainable and Feasible in Third Level Institutions? Evidence from Implementing and Extending the SMART Consent Workshop. Galway: School of Psychology, NUI Galway.

3. Central Statistics Office (2020) Social Impact of COVID-19 Survey. Available at: <https://www.cso.ie/en/releasesandpublications/ep/p-covid19/covid-19informationhub/socialandwellbeing/>

All-island Alcohol Data Directory



The All-island Alcohol Data Directory was launched in May 2019 as part of a programme of all-island cooperation on alcohol policy from the North South Alcohol Policy Advisory Group (NSAPAG).

The directory features data on alcohol consumption, alcohol-related harms, and retail of alcohol. Data are searchable by population group (ie adults or children) and by region (Ireland, Northern Ireland and other jurisdiction).

Published resources in the directory are open access and originate from government-led departments and research. The resource is updated quarterly, and its data sources are open access. IPH moderates and uploads resources to the Alcohol Data Directory on behalf of the NSAPAG.



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