

Consultation response to the Glasgow City Council 2018 Draft Licensing Policy Statement from the Glasgow Centre for Population Health

The Glasgow Centre for Population Health (GCPH) welcomes the opportunity to comment on the 2018 Draft Licensing Policy Statement. The GCPH supports the pre-consultation exercise that has been undertaken and the effort taken to gather the evidence to inform and develop the Draft Licensing Policy Statement and the Draft Overprovision Assessment. We recommend that the Licensing Board continues to maintain a close working relationship with the organisations involved in the pre-consultation exercise.

Fulfilling the public health objective

The GCPH recognises the need for balance between supporting a night-time economy and fulfilling the licensing objectives of preventing crime and disorder, securing public safety, preventing public nuisance, protecting and improving public health and preventing children and young people from harm. Given the large contribution that alcohol-related harm makes to the city's disease burden and the fact that that alcohol-related harm makes a significant contribution to health inequalities in the city, in fulfilling the public health objective we would propose a principle that alcohol licensing is mindful of the need to reduce alcohol consumption at both a population level and in communities where disproportionate harm is experienced from alcohol related conditions. Through this principle we support the understanding promoted by Alcohol Focus Scotland in their manifesto for a healthier, safer, fairer Scotland¹ that reducing the amount the population drinks benefits the health of everyone but that people in the poorest communities will benefit most. In framing its public health objective, the licensing board could take its lead from the NHS Greater Glasgow and Clyde Public Health Strategy 2018-2028; *Turning the Tide through Prevention*² that aims to narrow the gap in healthy life expectancy both *within* Greater Glasgow and Clyde *and between* Greater Glasgow and Clyde and the rest of Scotland by 2028. Given alcohol's role in differential population health outcomes, a reduction in alcohol consumption would contribute to these aims and therefore provides licensing with a key role to play in reducing health inequalities through creating a city where choices to drink moderately, or not drink at all, are supported within and beyond the night-time economy. The ways in which alcohol is promoted (or, on the other hand, the ways in which alternatives to alcohol are promoted) as well as issues of availability are important here.

We welcome therefore the actions indicated in section 3.6, page 28 and would add the provision and promotion of lower strength alcoholic drink options as well as soft drinks. Information about low risk consumption should be visible, emphasising that the guidance from the Chief Medical Officers is the same for men and women: it is safest not to drink more than 14 units a week, and to limit the amount taken in any single session. The message that women who are pregnant should not drink any alcohol at all, should also be emphasised. Providing this information will help to lower expectations around normative levels of alcohol consumption.

The GCPH appreciates the recognition by the Licensing Board that Glasgow has an unhealthy relationship with alcohol and that those involved in the licensing process must play their part in helping to address this. A 2011 report indicated that alcohol dependency in Greater Glasgow and Clyde is 40% higher than the rest of Scotland³. As stated in the Draft Licensing Policy Statement, the

¹ Alcohol Focus Scotland. *A manifesto for a healthier, safer, fairer Scotland*. <https://www.alcohol-focus-scotland.org.uk/media/138036/AFS-manifesto-2016.pdf>

² Stòr NHSGGC Repository. *Turning the tide through prevention: Public Health strategy 2018-2028*. <http://www.stor.scot.nhs.uk/ggc/handle/11289/579831>

³ Shipton D, Whyte B. *Mental Health in Focus*. Glasgow: GCPH; 2011. Available at: https://www.gcph.co.uk/publications/284_mental_health_in_focus last accessed 02/10/2018.

current estimate of Glasgow adults with a serious alcohol misuse problem is 13,500. Glasgow has the highest rate of alcohol-related deaths in Scotland with approximately 8,500 alcohol-related hospital admissions in a typical year. Glasgow has one of the fastest growing liver cirrhosis mortality rates in the world and has experienced a substantial rise in alcohol-related harm. Around 40% of A&E attendances in Glasgow are alcohol related⁴.

There is a socioeconomic gradient in alcohol-related harm⁵. In Glasgow, the alcohol-related death rate in the most deprived areas is five times as high as in the least deprived areas⁶. Research has shown that neighbourhoods with a higher density of alcohol outlets have higher levels of alcohol consumption and alcohol-related harm⁷ and that deprived areas have higher densities of alcohol outlets⁸ and in Glasgow, combined 'environmental bads' (alcohol, fast food tobacco and gambling outlets combined) are clustered in deprived areas⁹.

Alcohol and the economy

The GCPH acknowledges that the licensed trade plays a key role in the city's economy through the provision of jobs and revenue through taxation, as well as contributing to the city's image as a vibrant and exciting place to live, work and visit. This does not, however, mean that the serious negative effects of alcohol can be set aside. The contribution the licensed trade makes to the city economy, though important, must be balanced against the negative costs incurred as a result of alcohol-related harm, disease burden, crime and disorder. We also observe that many of the jobs created in the licensed trade in the city are part time and poorly paid (the Institute of Alcohol Studies reports that the licensed trade's median wage is the second lowest of all occupations¹⁰). We would welcome further consideration of how the licensing board may improve the conditions of those working in the licensed trade beyond the provision of appropriate training and meeting health and safety obligations. We would propose that consideration is made of employee pay and conditions as a determinant of health when identifying examples of 'great practice' as outlined in paragraph 8.8, page 53. There is scope to diversify the night-time economy, so that it is less strongly alcohol-based.

⁴ City of Glasgow Licensing Board. *Draft Licensing Policy Statement for Consultation*. <https://www.glasgowconsult.co.uk/UploadedFiles/Draft%20Policy%20Statement%20-%20Licensing%20Board%204th%20Edition.pdf> last accessed 02/10/2018.

⁵ Shortt N, Tisch C, Pearce J, Mitchell R, Richardson A, Hill S, Collin J. A cross-sectional analysis of the relationship between tobacco and alcohol outlet density and neighbourhood deprivation. *BMC Public Health* 2015;15:1014.

⁶ Glasgow Centre for Population Health. *Briefing paper findings series 42: Alcohol-related harm in Glasgow: a national, city and neighbourhood perspective*. Glasgow: GCPH; 2014. Available at: https://www.gcph.co.uk/publications/492_findings_series_42-alcohol-related_harm_in_glasgow last accessed 02/10/2018.

⁷ Shortt N, Rind E, Pearce J, Mitchell R and Curtis S. Alcohol Risk Environments, Vulnerability, and Social Inequalities in Alcohol Consumption. *Annals of the American Association of Geographers* 2018;108(5):1210-1227.

⁸ Shortt N, Tisch C, Pearce J, Mitchell R, Richardson A, Hill S and Collin J. A cross-sectional analysis of the relationship between tobacco and alcohol outlet density and neighbourhood deprivation. *BMC Public Health* 2015;15:1014.

⁹ Macdonald L, Olsen J, Shortt, N and Ellaway A. Do 'environmental bads' such as alcohol, fast food, tobacco, and gambling outlets cluster and co-locate in more deprived areas in Glasgow City, Scotland? *Health and Place* 2018;51:224-231.

¹⁰ Institute of Alcohol Studies. *Splitting the Bill: Alcohol's Impact on the Economy*. <http://www.ias.org.uk/uploads/pdf/IAS%20reports/rp23022017.pdf>

Crime and disorder

The Draft Licensing Policy Statement also draws the link between the consumption of alcohol and crime and disorder, citing the 2010/2011 Scottish Crime and Justice Survey which revealed that victims stated offenders were under the influence of alcohol in 63% of violent crime. The Statement also notes the strong association between alcohol consumption and gender-based violence¹¹. In Glasgow, the strongest associations with higher crime rates within neighbourhoods are income deprivation and the number of licensed alcohol outlets, with an association between alcohol availability and all types of local crime rates¹².

There is growing evidence of a link between the number of licensed alcohol outlets in neighbourhoods and the levels of alcohol-related harm, crime and disorder. Currently, approximately 96% of applications for new licensed premises are approved each year in Scotland¹³. As one of the priorities in the Glasgow Community Planning Single Outcome Agreement was to reduce the availability of alcohol in communities¹⁴, the GCPH firmly believes that further attention should be given to fulfilling the licensing objectives when the Licensing Board makes decisions on new licences. We agree with the inclusion of the problems associated with the use of new psychoactive substances and other illegal substances and support the consideration of how applicants would address these in licensing applications. We also support the inclusion of a local condition requiring licence holders to provide staff training on child sexual exploitation.

Availability, overprovision and community voice

The GCPH supports maintaining current licensed hours for both on-sales and off-sales premises on the basis of the principle that increased opportunity to consume alcohol will have a detrimental effect on health outcomes and inequalities within the city and in comparison with the rest of Scotland. We support the more robust approach to ensuring that the terminal licensed hour of 1am granted to restaurants is not used by bars to remain open later. We also support the differential in terminal licensing hours between those located within and outwith the city centre, as well as maintaining the existing licensing hours for outdoor areas. Despite the evidence presented on the contribution of the night-time economy in support of a proposed pilot scheme to extend licensed hours to 4am in the city centre, we remain unconvinced that the additional hour will generate considerable additional income for the city, create more jobs nor impact on Glasgow's reputation as a world class venue for live music. The liberalisation of licensing hours was a contributing factor to the increase of alcohol consumption in Scotland, England and Wales since the mid-1990s¹⁵, so the GCPH does not support the pilot scheme. Should the scheme go ahead despite our recommendation, careful monitoring and evaluation needs to be in place to not only assess the impact on alcohol-related harm, crime and disorder, but to also determine whether the extended

¹¹ City of Glasgow Licensing Board. *Draft Licensing Policy Statement for Consultation*. <https://www.glasgowconsult.co.uk/UploadedFiles/Draft%20Policy%20Statement%20-%20Licensing%20Board%204th%20Edition.pdf> last accessed 02/10/2018.

¹² GoWell. *Briefing Paper 20: Neighbourhood structures and crime rates in Glasgow*. Glasgow: GoWell; 2012. http://www.gowellonline.com/publications/125_briefing_paper_20_neighbourhood_structures_and_crime_rates_in_glasgow last accessed 30/09/2018.

¹³ The impact of alcohol in Scotland infographic. Available at: www.healthyenvironmentsresearch.files.wordpress.com/2015/06/final-infographic.png last accessed 30/09/2018.

¹⁴ Glasgow Community Planning Partnership. *Glasgow's Single Outcome Agreement 2013*. <https://www.glasgowcpp.org.uk/CHttpHandler.ashx?id=15989&p=0> last accessed 28/09/2018.

¹⁵ Glasgow Centre for Population Health. *Briefing paper 42: Alcohol-related harm in Glasgow: a national, city and neighbourhood perspective*. Glasgow: GCPH; 2014.

hour contributes to additional income for the city, the creation of more jobs or Glasgow's reputation as a world class live music venue. In addition the evaluation should include the impact on the "rush" to consume alcohol at the end of night and whether the extended hour leads to a more gradual dispersal of customers (presented as part of the reasoning for extending the licensing hours).

The GCPH supports the continuation of the standard terminal hour of 9pm for children. Further evidence is needed before the extension to 11pm for young persons aged 16 and 17 could be supported. The evidence that pregnant women should not consume any alcohol is also a crucial component of the city's responsibilities to protect children from alcohol-related harm. This implies the need for female-friendly venues that provide alternatives to alcohol, and processes of culture-change that normalise abstinence from alcohol for women who are, might be, or are seeking to become, pregnant. This is in addition to the licensing board's commitment to support changes in culture and attitudes designed to reduce the misuse of alcohol in the city particularly affecting children and young persons, for example through encouraging licenced premises to become more child-friendly.

The GCPH supports the work undertaken in the pre-consultation exercise to gather the evidence to inform and develop the Draft Overprovision Assessment and the recognition there is a causal link between the density of licensed alcohol outlets in certain neighbourhoods and alcohol-related harm, crime and disorder.

The GCPH supports the inclusion of a rebuttable presumption in the Draft Overprovision Statement where there will be a presumption against the grant of further licensed premises in neighbourhoods identified as overprovision localities. Consideration of any new application needs to be taken in the context of the recognised causal link between the density of licensed alcohol premises in certain neighbourhoods and alcohol-related harm, crime and disorder. We welcome the manner in which the document conceptualises overprovision in going beyond number of alcohol outlets to take account of alcohol-related health data for an area. We would ask that future drafts of the licensing strategy recognise that many of Glasgow's communities have an outlet density higher than the Scottish average and therefore that considerations of oversupply should take account of areas within easy travelling distance.

The GCPH also supports the gathering of local views about overprovision and we support extensive community consultation about the Draft Overprovision Statement. Research has also highlighted the need to make the application process more accessible to communities^{16,17}. Key factors inhibiting community engagement in the licensing process are awareness of alcohol issues and the licensing process, understanding of the decision-making process and the skills and resources to engage in the process. Some suggested changes to enhance the community voice in the licensing process include making changes to the length and timing of the licensing meetings, increasing the window to develop licensing objections, extending the boundaries of areas able to make objections, requiring applicants rather than solicitors to present their case, providing support for communities to make objections and transparency in how decisions are made¹⁸. The GCPH recommends that the Licensing

¹⁶ Iconic Consulting. *Strengthening the community voice in alcohol licensing decisions in Glasgow*. Glasgow: GCPH; 2014. Available at: https://www.gcpH.co.uk/publications/589_strengthening_the_community_voice_in_alcohol_licensing_decisions_in_glasgow last accessed 02/10/2018.

¹⁷ Health Impact Assessment of the City of Glasgow Licensing Board Licensing Policy Statement. <https://www.glasgow.gov.uk/CHttpHandler.ashx?id=1329&p=0> last accessed 02/10/2018.

¹⁸ Iconic Consulting. *Strengthening the community voice in alcohol licensing decisions in Glasgow*. Glasgow: GCPH; 2014.

Board extends the exemplary process of involving communities in the development of the Draft Overprovision Statement to the processes of making decisions on licensing applications.

The GCPH supports the policy restricting the number of extended applications granted in a calendar year. We also support the recognition of the high standards achieved by some licensed premises in delivering a duty of care in support of the licensing objectives and rewarding these premises with additional extended hours to assist in driving up and maintaining high standards across the city.

The GCPH supports the recognition that consideration is taken of new licensing applications for off-sales premises based on alcohol-related harm outwith areas identified as overprovision areas. The GCPH also supports the additional requirements for alcohol deliveries. We also support the policy relative to toughened glass and would encourage implementing the reduction on single use plastic. The GCPH recommends this be a condition for licensed premises and that enforcement is monitored.

The GCPH welcomes any opportunity to comment further on this consultation response to the Draft Licensing Policy Statement.