


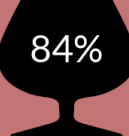
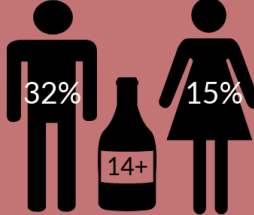

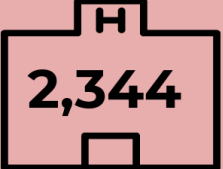









# The Provision and Impact of Alcohol in Fife

January 2018

# The Provision and Impact of Alcohol in Fife Summary

1,069 Alcohol Premises	 <p>363 Off-sales</p>	 <p>249 On-sales</p>	 <p>457 On/Off-sales</p>
Alcohol Consumption	 <p>84% adults drink alcohol</p>	 <p>32% 15% 14+</p>	<p>Ever had proper drink</p>  <p>42% 72% Young people aged 13 15</p>
Alcohol Hospital Stays	 <p>2,344 Fife residents stays</p>	 <p>96% Emergency Admissions x2 rate of admission to females 45-54 age group highest rates</p>	 <p>Rates in most deprived areas x6 Rates in least deprived areas</p>
Alcohol Deaths	<p>On average 62 deaths each year</p>	 <p>60% deaths 55-59 age group highest rates Main cause Alcoholic liver disease</p>	 <p>Rates in most deprived areas x3 Rates in least deprived areas</p>
Alcohol anti-social behaviour incidents	<p>1,003 incidents</p>	 <p>42% residential locations 79% incidents More than 50% occur at weekend</p>	<p>Offences include:</p> <ul style="list-style-type: none"> <li>Assault</li> <li>Breach of Peace</li> <li>Threatening or Abusive Behaviour</li> </ul>
Alcohol Provision, Harm and Inequalities	<p>Localities with highest off-sales had higher levels of alcohol health harm</p>	<p>More deprived areas in Fife have higher rates of off-sales premises</p>	<p>The most deprived areas in Fife have higher levels of alcohol-related health harm</p>

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## 1. Background

Alcohol is a legal drug which causes a wide range of harms to individuals, families and communities. Evidence suggests that even low levels of regular alcohol use can cause harm.<sup>1</sup> Regular use of alcohol at higher levels increases the risk of diseases that are leading causes of preventable ill-health and death across Scotland, including cancer and heart disease.<sup>1</sup> Furthermore there are significant and persistent inequalities in alcohol-related harm. Working towards improving health and reducing inequalities is a core strategic aim of organisations in Fife as set out in NHS Fife Clinical Strategy 2016-21, Fife Health and Social Care Partnership Strategic Plan 2016-19 and Fife's Community Plan 2011-20.<sup>2</sup> Increasing price, reducing availability and controlling the marketing of alcohol are seen as the most effective measures to reduce alcohol-related harm.<sup>3</sup>

## 2. Introduction

In Scotland alcohol cannot be sold without a license. It is the responsibility of Licensing Boards to consider all applications to sell alcohol in their local area. Licensing Boards regulate who can sell alcohol, where, when and how it can be sold and the number of premises that can sell it.<sup>4</sup>

The Licensing (Scotland) Act 2005, which came into force in September 2009, increased the scope of licensing boards to control the availability of alcohol by setting five licensing objectives to be used in creating licensing policy and making licensing decisions.<sup>4</sup>

The Act includes a duty on licensing boards to publish a licensing policy statement setting out their strategic approach to licensing policy and action the board will take over a three year period to promote the licensing objectives. The Act also requires licensing boards to assess overprovision of licensed premises and use this assessment in the consideration of license applications.<sup>4</sup>

Fife Licensing Board is due to publish its latest statement of licensing policy by November 2018. The first stage in creating a licensing statement which promotes the licensing objectives and the assessment of overprovision is the collection and analysis of evidence.<sup>4</sup>

This report presents current information on the provision of alcohol in Fife, alcohol consumption and the impact alcohol has on public health and crime and disorder which will provide evidence on each of the licensing objectives and overprovision.

### Licensing Objectives:

- Preventing crime & disorder
- Securing public safety
- Preventing public nuisance
- Protecting children & young people from harm
- Protecting & improving public health

### 3. Method

Fife is a large geographical area with a population of 370,030 persons. Looking at information at just the Fife level can mask differences between the communities within Fife. As such information has been presented for each of Fife's seven Health and Social Care Partnership Locality geographical areas which are structures for the planning and delivery of local services in Fife. The boundaries of these localities are consistent with Fife Council Local Area Committee boundaries which makes them a commonly used method of looking at differences within Fife.

To examine the impact of inequalities we have used the Scottish Index of Multiple Deprivation 2016 quintiles. This looks at the differences within Fife across five categories each containing 20% of the population with five differing levels of multiple deprivation, from most to least deprived (as shown in map in Appendix 1).<sup>a</sup>

However these are still large areas. Therefore, consistent with the approach taken by other local authority areas in Scotland, information is also presented at small geographical areas called intermediate zones.<sup>a</sup> Intermediate zones are widely used for analysing and presenting data due to their sufficient population and availability of different sources of data. There are 104 intermediate zones in Fife with an average population of 3,561 persons. They can be linked to licensed premises via postcode and built up to sit within the boundaries (with some overlap) of each of the seven localities.<sup>a</sup>

A survey was also developed seeking views on alcohol provision, consumption and anti-social behaviour. It was sent to Fife People's Panel members and distributed via social media. A total of 265 responses were received and the results are presented in the appropriate sections of this report.

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<sup>a</sup> Please see glossary for full definitions of these terms.

#### 4. Alcohol Provision

As at December 2017 there were a total of **1,069** licensed premises in Fife. This corresponds to 36 places to buy alcohol for every 10,000 adults aged 18 and over living in Fife compared to 38 per 10,000 in Scotland. 363 were 'off-sales' premises (e.g. shops, off-licenses & supermarkets) and 249 'on-sales' (e.g. pubs, clubs & restaurants) premises and 457 'on/off sales' (e.g. pubs that sell alcohol to be drunk off the premises).

Figure 1: Licensed Premises in Fife



Source: Fife Licensing Database Dec 2017

Across Scotland, Fife has the fourth highest number of licensed premises, with only City of Edinburgh, Glasgow and Highland local authority areas having more. Fife's number of licensed premises in the 2016/17 amounts to 6% of the Scottish total. This is broadly similar to Fife's population share, with it being the third largest council area in Scotland (by population) and having 6.9% of Scotland's population.

Within Fife North East Fife (NE Fife), as the largest locality area in terms of both geography and population, has the largest number of licensed premises at 292. 35% of all NE Fife licensed premises are within the town of St Andrews. With 111 premises, Levenmouth has the smallest number of all the localities (Table 1).

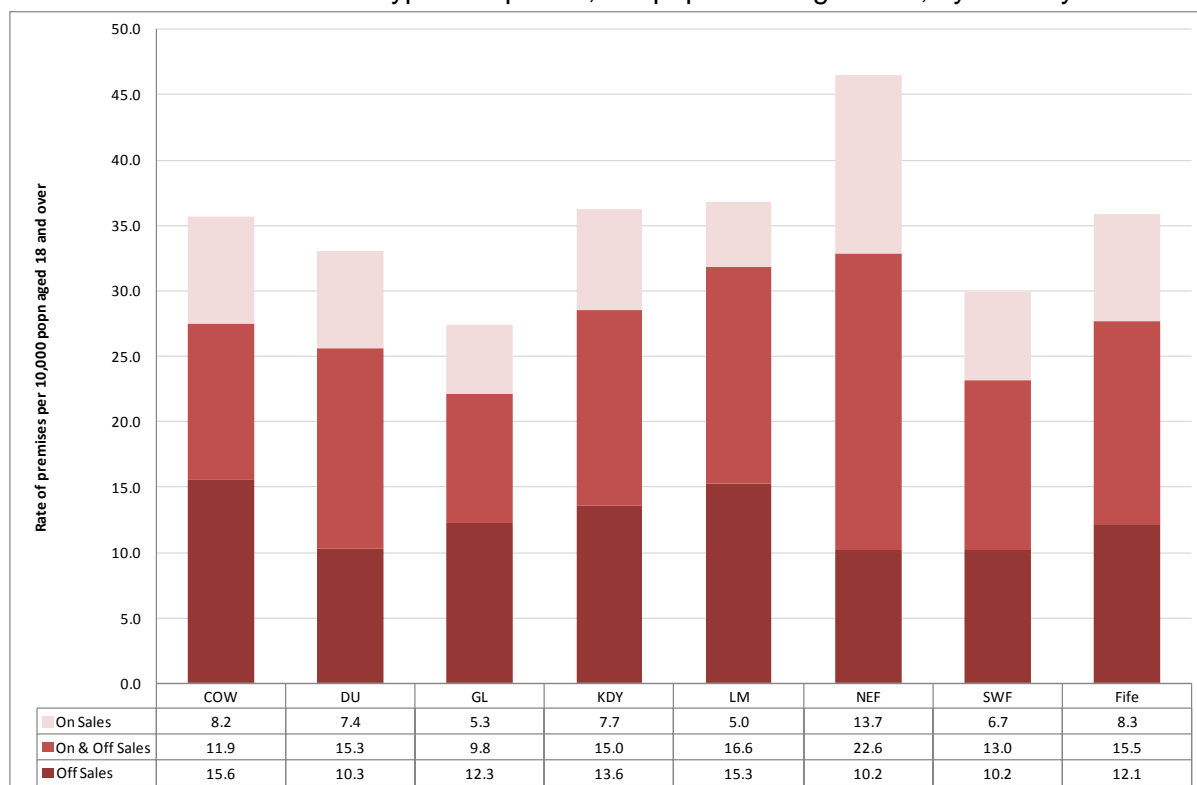
Table: 1: Number of Licensed Premises by Locality

Cowdenbeath	Dunfermline	Glenrothes	Kirkcaldy	Lvnmouth	NE Fife	SE Fife
117	147	109	174	111	292	120

Source: Fife Licensing Database April 2017

Fairer comparisons can be made across the localities by looking at the rate of licensed premises per head of population aged 18 and over (the legal drinking age). NE Fife has the highest rates per 10,000 population aged 18+ for both 'on/off sales' (22.6 per 10,000) and 'on-sales' (13.7 per 10,000) but the smallest rate for 'off-sales' premises.

Chart 1: Licensed Premises Type rate per 10,000 population aged 18+; by Locality



Source: Fife Licensing Database April 2017

Levenmouth has the smallest rate of on-sale premises at 5 per 10,000 population closely followed by Glenrothes. On-sale premises make up just 14% of the total number of premises in Levenmouth compared to the 41% of all premises which are off-sale. Cowdenbeath has the largest rate of off-sale premises of the seven localities, 15.6 per 10,000 population. Off-sale premises account for 44% of the total number of premises in this area the largest proportion of any locality.

National research has shown that rates of total alcohol outlet density per 10,000 population were higher in the most deprived areas than the least deprived in Scotland.<sup>6</sup> For off-sale premises, density rates increased linearly with deprivation with rates in the most deprived areas being significantly higher than rates in all of the other deprivation categories.

We are unable to look at alcohol outlet density in the same way as the national research to look at differences in premise rates in our areas of differing levels of deprivation. We have instead calculated the rate per 10,000 population aged 18 and over for the Fife Scottish Index of Multiple Deprivation 2016 quintiles, each of which contains 20% of the Fife population living in the most to least deprived areas in Fife (Table 2).<sup>a</sup>

Table 2: Licensed premises rate per 10,000 population by type and SIMD 2016 Quintile

	Most Deprived	Quintile 2	Quintile 3	Quintile 4	Least Deprived
Off-sales	16.5	18.4	12.7	7.9	5.9
On-Sales	5.8	13.8	6.0	6.3	9.5
Total premises	32.7	54.4	35.9	29.6	27.6

Source: Fife Licensing Database April 2017

Table 2 shows that the most deprived areas in Fife do have higher rates of both off-sales and total premises than the least deprived areas. For off-sales the rate in the most deprived areas is almost three times greater than the rate in the least deprived. However it also shows that it is the second most deprived areas (called quintile 2) that have the highest rates of all types of licensed premises in Fife. This means that the 40% most deprived areas in Fife have the highest levels of off-sales (most deprived and quintile 2).

Rates of total alcohol premises vary significantly across the 104 intermediate zones in Fife, from 3.8 per 10,000 population to 198 per 10,000 population. Figure 1 (Appendix 1) shows how rates can vary within each of the seven area committees. Ten intermediate zones had rates much higher than the Fife average which included areas in central Kirkcaldy, Dunfermline, St Andrews and Cupar. A further 25% of Fife intermediate zones had rates higher than the Fife average areas, for example Dysart, Cowdenbeath and Kincardine. Almost two thirds of areas had rates below the Fife average but there was only one intermediate zone in Fife where alcohol could not be purchased.

### **Views on Alcohol Provision in Fife**

52% of survey respondents stated they felt the number off-sale outlets were 'about right' and 28% felt there were 'too many'. A higher proportion (57%) felt the number of 'on-sale' premises was about right with 18% stating there were 'too many'.

"I don't think there's a problem with the amount of alcohol outlets..."

Female, Dunfermline AC

"Drink is so readily available in my area I couldn't tell you a local shop that didn't sell it."

Male, Levenmouth AC

"Pubs are an important part of a community socialising together."

Female, SW Fife AC



## **5. Alcohol Consumption**

### **Adults**

The survey of people living in Fife showed that 70% of respondents said that they drank alcohol 'in their own home or a friend's home' compared to 4% who stated they drank alcohol 'in a pub' and 3% 'in a restaurant'. 71% of survey respondents said that they bought most of their alcohol in supermarkets and a further 6% bought alcohol from their local shop. This mirrors national figures showing 73% of all alcohol purchased in Scotland was bought from a supermarket or other off-licence. In 2016 10.5 litres of pure alcohol were sold per adult in Scotland, a total of 46.9 million litres. This is equivalent to 20.2 units of alcohol per adult per week or about 10 standard (175ml) glasses of wine (12% ABV).<sup>7</sup>

Moderate weekly alcohol consumption is defined as no more than 14 units for both men and women, with those exceeding this amount classified as hazardous or harmful drinkers. Data from the Scottish Health Survey in Fife showed the proportion of adults who drink alcohol at levels beyond the 14 units per week decreased from 40% of men and 17% of women in 2008-9 to 32% of men and 15% of women in 2014-15. This however still equates to almost 71,000 adults in Fife.

The relationship between alcohol consumption and deprivation is complex. Adults living in the least deprived areas are most likely to drink beyond moderate weekly levels, drink on more days of the week but drink smaller amounts on a single occasion. Almost half of all adults living in the most deprived areas report drinking only once a week but drink more on a single occasion. Of adults who drink beyond 14 units a week those living in the most deprived areas will drink more units than those living in least deprived areas.

### **Young People**

Decreases have also been seen in the number of young people reporting drinking alcohol.<sup>8</sup> In 2013, 42% of 13 year olds and 72 % of 15 year olds in Fife reported 'ever having a proper alcoholic drink' compared to 73% and 91% in 2002. Reports of more frequent alcohol consumption have also decreased, in 2002 17% of 13 year olds and 40% of 15 year olds reported that they that 'they usually drank alcohol at least once a week' which had decreased to 7% and 17% by 2013.<sup>8</sup>

The most common sources of alcohol for young people in both age groups in Fife were 'from a friend' (39%), 'from a relative' (35%) and 'from home with or without permission' (29%). Fifteen year olds were most likely to get alcohol 'from a friend', whilst 13 year olds were most likely to get alcohol 'from home with or without permission'. Purchases of alcohol by young people from a shop or supermarket were rare, 6% reported that they had bought alcohol from a shop and 2% from a supermarket.<sup>8</sup>

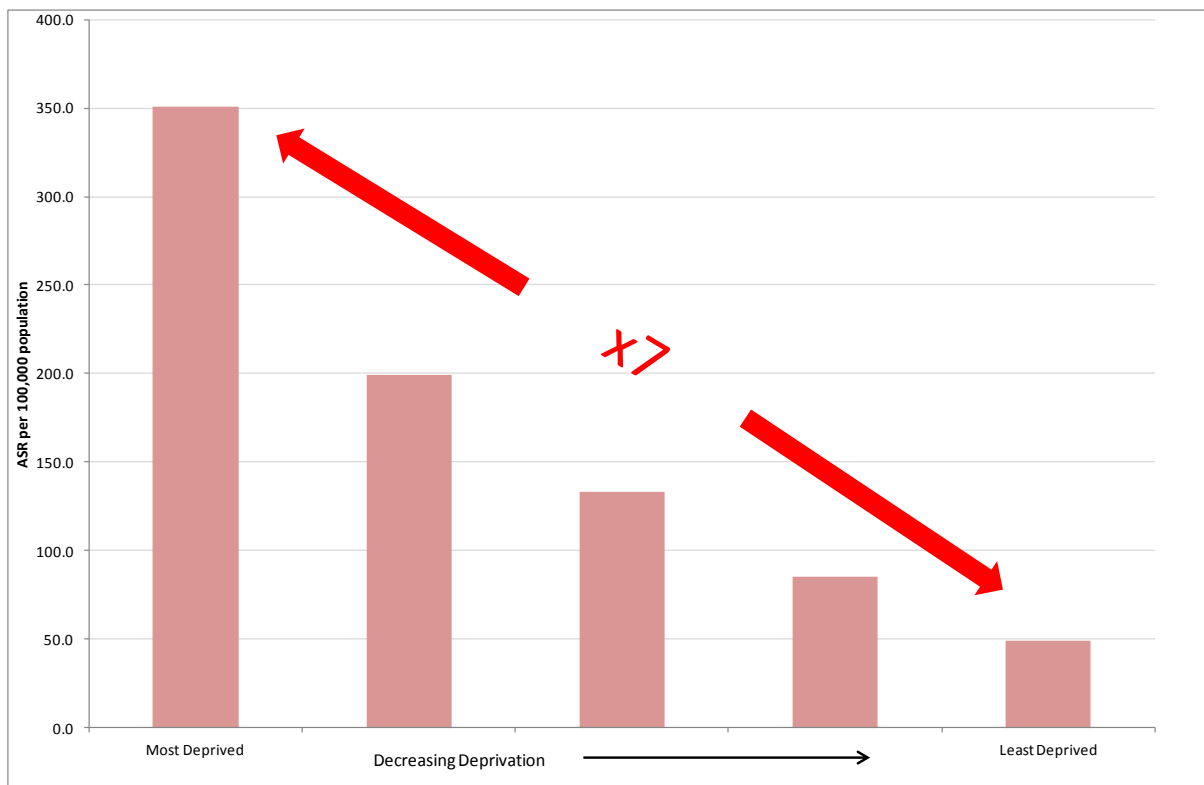
## 6. Alcohol Related Health Harms

Alcohol use has been associated with a range of short and long term physical and mental health problems. Health harms can include those that may occur soon after consumption such as acute intoxication or unintentional injuries. Other health harms from regular drinking can develop over years and can include seven types of cancer, heart disease, liver disease and stroke.<sup>1</sup> In a recent study looking at the diseases which caused the most burden in Scotland, in terms of early death and disability, those attributable to alcohol consumption accounted for 8% of the total burden of disease.<sup>9</sup> Alcohol-related mortality and hospitalisation rates have been defined as the most reliable and robust indicators of alcohol-related health harm and as such have been chosen as the measures of health harm we will use in this report.<sup>3</sup>

### 6.1 A&E Attendances

During 2016/17 there were 666 alcohol-related A&E attendances in Fife.<sup>a</sup> 62% of these attendances were made by men. A third of attendances involved adults aged 25-44 with a further third being made by adults aged 45-64. 10% of attendances involved children aged 15 and under. There is a marked inequality gradient in alcohol-related A&E attendances at Fife A&E departments. Rates among those living in the most deprived areas in Fife are seven times greater than those of Fife residents living in the least deprived areas.

Chart 1: A&E Attendances in Fife by SIMD 16 Quintiles; 2016/17



Source: Information Services (NHS Fife)

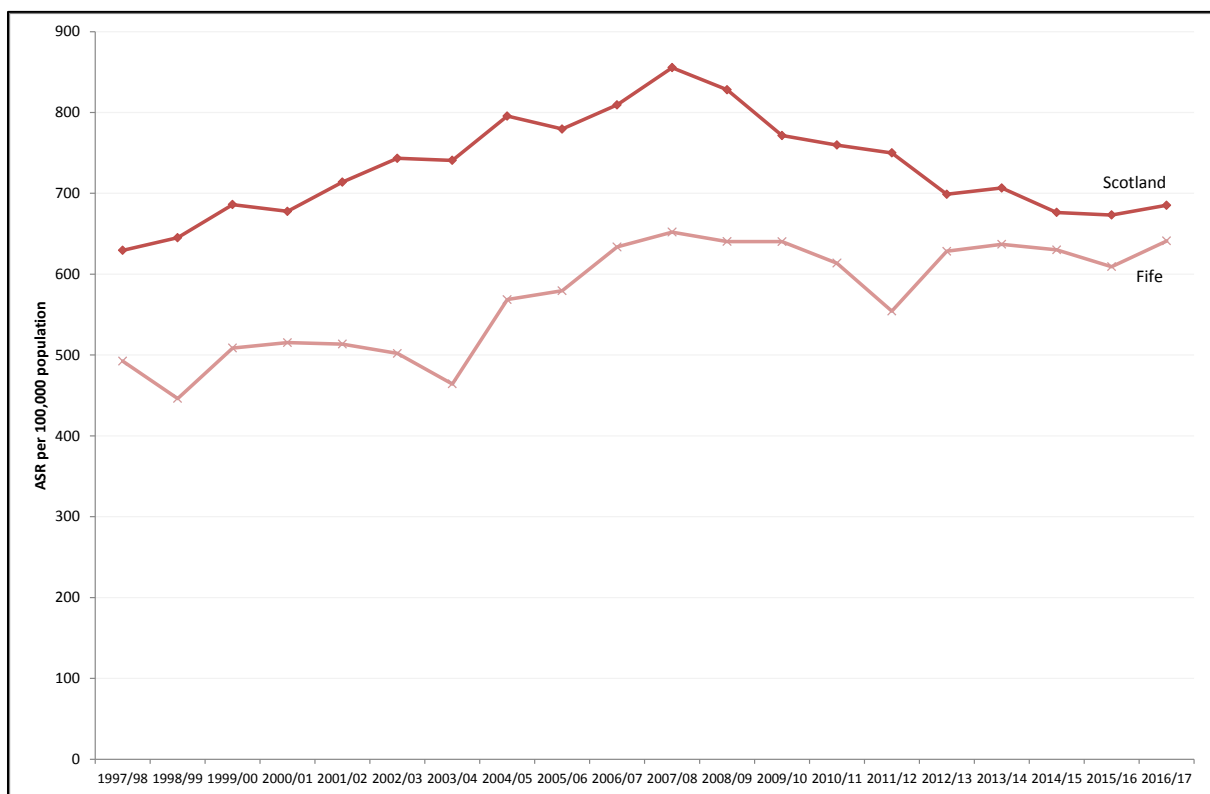
## 6.2 Alcohol-related hospital admissions

During 2016/17 there were 2,344 admissions of Fife residents to acute hospitals with an alcohol related diagnosis, which corresponds to an age-standardised rate of 641 admissions per 100,000 population.<sup>a</sup> These admissions relate to 1,163 individuals. 43% of these individuals had previously been admitted to hospital with an alcohol-related reason.

Nearly all (96%) alcohol-related hospital admissions of Fife residents were as a result of an emergency (unplanned) admission in 2016/17. Males account for almost twice as many alcohol-related hospital admissions than females and admissions rates peak in the age group of 45-54 years.

Rates of admissions are considerably (30%) higher now than they were in 1997/98, the current rate is the second highest rate in 20 years (Chart 3). During this time Fife has consistently had lower alcohol admission rates than Scotland but in the last five years the gap between these rates has narrowed. Rates rose sharply in that late 90s and early 2000s reaching a peak in both Fife and Scotland in 2007/8 but since then rates have fluctuated more in Fife compared to the overall downward trend nationally.

Chart 3: Trends in alcohol-related hospital admissions 1997/98 to 2016/17; Fife & Scotland

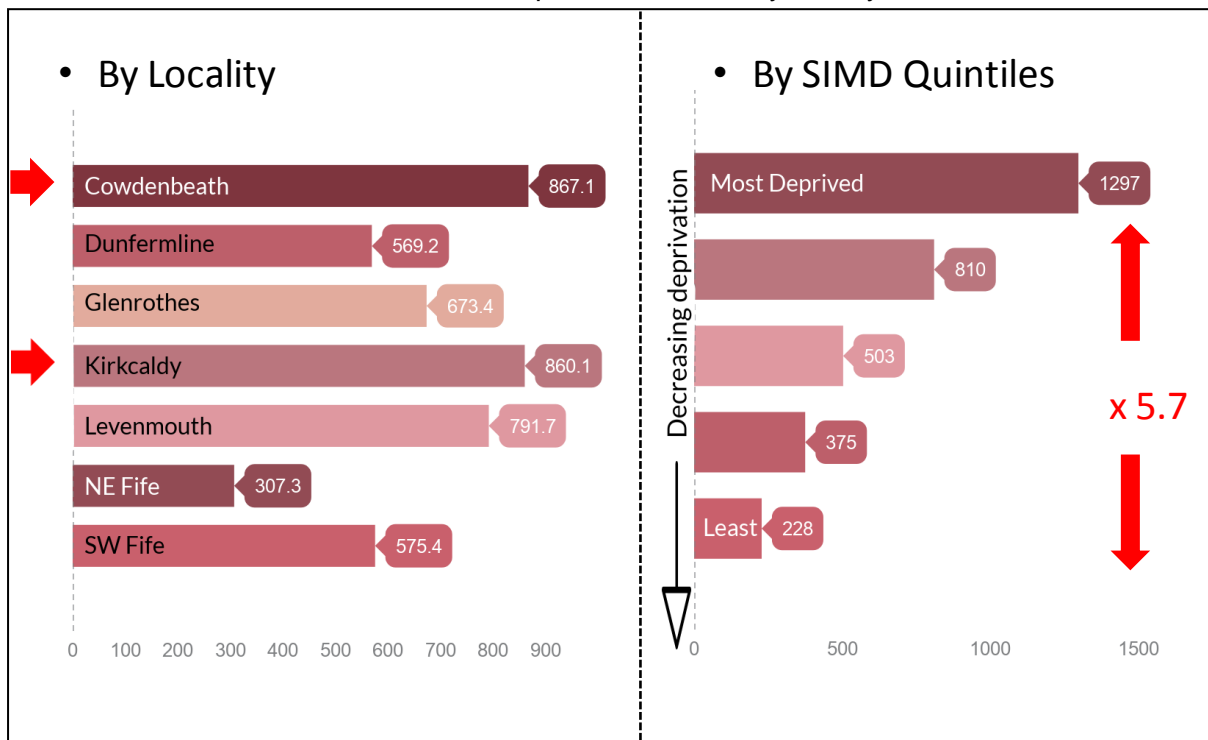


Source: Information & Statistics Division, NHS Scotland

Fife residents living in Cowdenbeath Locality had the highest rates of alcohol-related admissions to hospital in 2016/17 and NE Fife the lowest (Chart 4). In line with A&E attendances there was a marked inequality gradient in rates of alcohol-related hospital admissions. Rates increased with increasing deprivation and rates among residents living in the most deprived areas in Fife were 5.7 times higher than those living in the least deprived areas (Chart 4). This inequality has been persistent over time, the rates ten years ago in the

most deprived areas were 5.2 times greater than the least deprived areas and five years ago six times higher.

Chart 4: Fife resident alcohol-related hospital admissions by locality; 2014/15-2016-17



Source: Information Services (NHS Fife)

Significant variations in alcohol-related hospital admissions rates can be seen throughout Fife if we look at rates in the smaller geographical areas of intermediate zones. All of the 104 intermediate zones had at least one alcohol-related hospital admission involving their residents during 2016/17. Rates were much higher than the Fife average in a fifth of intermediate zones which included Methil East, Methil West, Cowdenbeath South and Rosyth Central. A further 22 intermediate zones had rates higher than the Fife average which included Lochgelly East and Glenrothes Auchmuty (Figure 2, Appendix 1).

### 6.3 Alcohol-related deaths

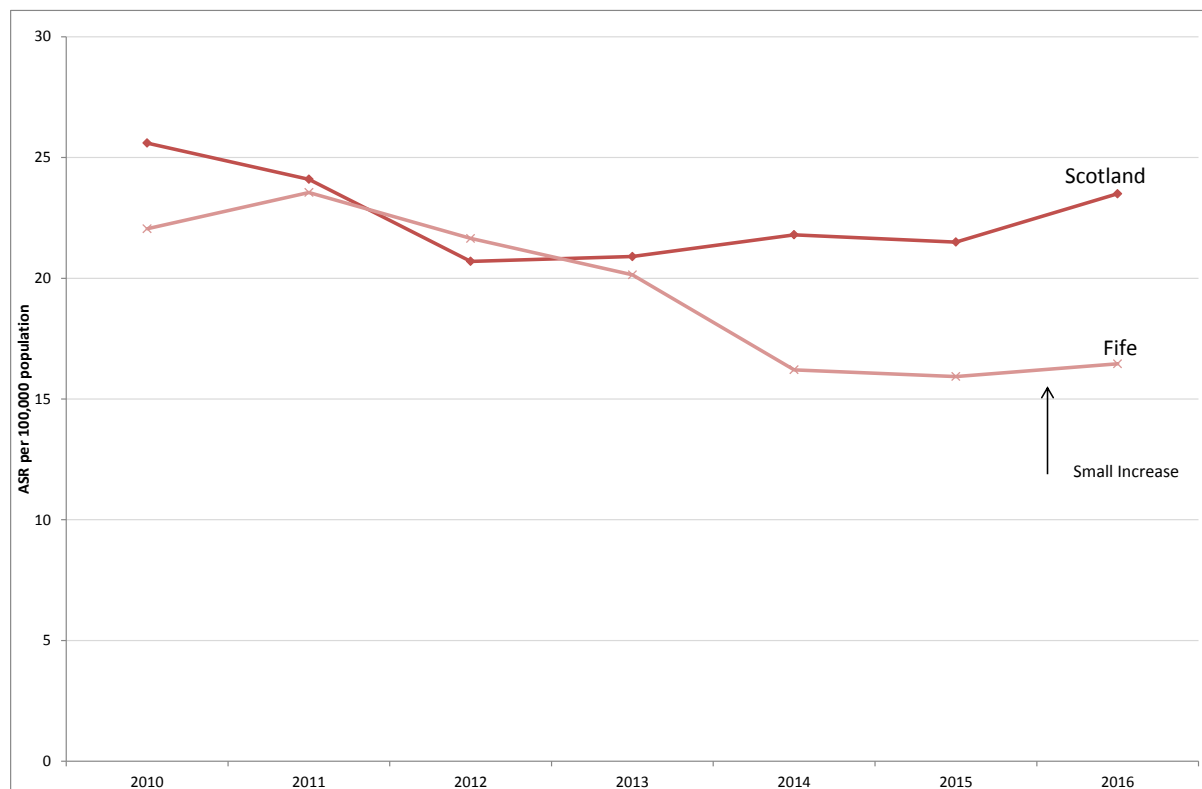
Alcohol-related deaths are usually attributable to health problems resulting from long-term sustained drinking at harmful levels. In line with other reports this report will focus on deaths in which alcohol was the main underlying cause of death. However there are also a considerable number of deaths each year where alcohol consumption contributed to the cause of death. Nationally it is estimated that 6.5% of deaths were attributable to alcohol consumption in 2015, which in Fife would equate to 262 deaths.<sup>9</sup>

Alcohol was the underlying cause of an average of 62 deaths each year between 2014 and 2016 in Fife, which was a greater number than drug related deaths and suicides. Alcohol-related deaths are more common among men and rates of alcohol-related death were highest among those aged 55-59.

This was a slight increase on the average reported for the previous three year-period and the first increase since 2011. The average number of deaths corresponds to an age

standardised rate of 16.5 deaths per 100,000 population.<sup>a</sup> Fife has had lower rates of alcohol-related death than Scotland since 2011-2013, but both have seen decreases in recent years but a small rise in the most recent figures (Chart 5). The rate of alcohol-related death in Fife ranks as 20<sup>th</sup> out of 32 local authority areas, one being the highest rate in Glasgow City and 32 the lowest in Shetland Islands.<sup>10</sup>

Chart 5: Trends in alcohol-related deaths 2010-12 to 2014-16; Fife & Scotland

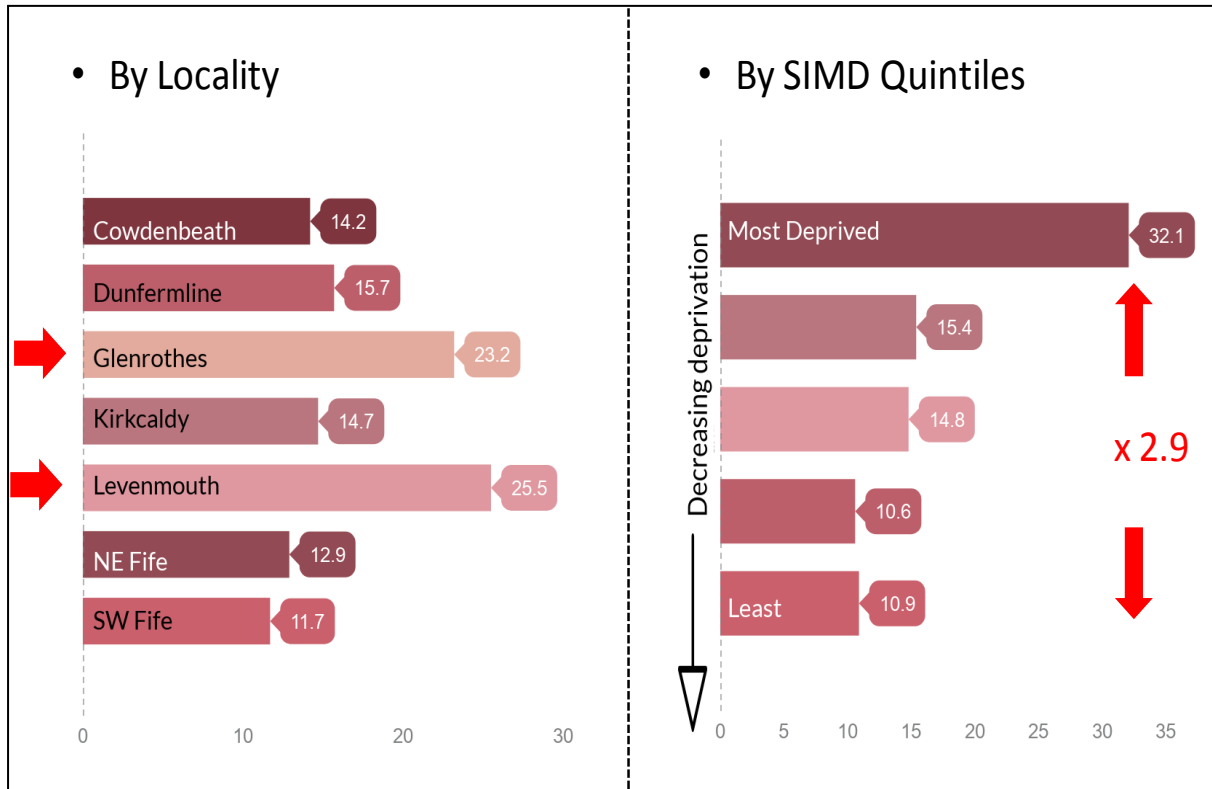


Source: ScotPHO

Fife residents living in Levenmouth area committee/locality had the highest age standardised rates of alcohol-related deaths and Dunfermline the lowest (Chart 6). These were different to the areas that had the highest and lowest rates of alcohol-related hospital admissions.

Inequalities are also evident in alcohol-related deaths but not as marked as those observed in alcohol-related hospital admissions. Rates among those living in the most deprived areas were almost three times greater than those in the least deprived areas (Chart 6). Unlike hospital admission rates alcohol-related death rates do not decrease linearly with decreasing deprivation. Rates are higher among residents of the least deprived areas (quintile 5) than those living in the next least deprived areas (quintile 4).

Chart 6: Alcohol-related deaths by locality and SIMD Quintile; 2012-2016



Source: Information Services (NHS Fife)

As seen with hospital admissions significant variations in alcohol-related death rates can be seen across the 104 intermediate zones in Fife, although the numbers involved are small. For deaths occurring during 2012-16, rates were much higher than the Fife average in 16 intermediate zones which included Leven North, Glenrothes Collydean and Dunfermline Brucefield. A further 32 intermediate zones had rates higher than the Fife average which included Newburgh, Inverkeithing East and Cardenden (Figure 3 in Appendix 1).

## 7. Alcohol-related Social Harms

Harm related to alcohol use does not just impact on health but can significantly affect individuals, families, wider communities and the economy through a range of means including crime and disorder. It is estimated that more than half of Police officers time is spent dealing with alcohol-related incidents.<sup>11</sup> A summary of selected social harms being experienced in Fife is provided in this chapter followed by a detailed presentation of information on alcohol-related crime and disorder.

### 7.1 Alcohol-related accidental fires

In Fife during 2016/17 there were 33 accidental dwelling fires where impairment due to alcohol or drugs was suspected as a contributory factor, this was 13% of all fires in this category. Across Scotland there were 725 fires of this category which resulted in nine fatal casualties and 256 non-fatal casualties.<sup>12</sup>

### 7.2 Alcohol-related child protection cases

In Fife the number of child protection cases due to parental alcohol misuse during 2014-16 was 164. This corresponds to a rate of 7.1 per 10,000 children, higher than the Scottish rate of 5.1 per 10,000 children. However there may be differences in recording alcohol misuse between local authorities which may contribute to differing rates across Scotland.<sup>13</sup>

### 7.3 Alcohol-related environmental health impact

During 2017 there were 58 complaints made to Fife Council Licensing Standards Officers about on-sale premises.<sup>14</sup> The majority of the complaints are about music noise. The complaints were mainly due to one-off events and there is a seasonality pattern to the complaints, more are made when doors and windows are left open in warm weather.

### 7.4 Alcohol-related economic impact

Alcohol-related harm is estimated to cost the Scottish economy £3.6bn a year.<sup>15</sup> Estimates for Fife give a figure of £130m which can be broken down into four main categories (Table 1). The highest proportion of the total costs are those within the category of crime which includes the cost to Police of dealing with alcohol-related crime but not the additional cost of any court proceedings. Productive capacity costs include the estimated cost of alcohol use to the economy in the form of presenteeism (being present at work, but performance negatively affected by alcohol use), absenteeism, unemployment and premature mortality.<sup>15</sup>

Table 1: Estimated Economic Cost of Alcohol Misuse in Fife

	COST
HEALTH SERVICE	£16.64m
SOCIAL CARE	£15.04m
CRIME	£55.54m
PRODUCTIVE CAPACITY	£43.40m
<b>TOTAL</b>	<b>£130.62m</b>

Source: Alcohol Focus Scotland

Alcohol-related harm is estimated to cost the health service in Fife almost £17m each year with highest cost in this category related to hospital admissions but other costs include A&E attendances, ambulance journeys and GP consultations. An additional £15m is estimated to be spent on social care which includes social work caseloads due to problem alcohol use and community service orders and probation orders related to alcohol.<sup>15</sup>

## 7.5 Alcohol-related crime and disorder

Alcohol-related crime and disorder can relate to both offences that can be directly linked to alcohol such as street drinking or driving under the influence and also offences where alcohol is recognised as a contributory factor such as assault.

Obtaining an accurate picture of alcohol-related offending is complex but one option is to examine detected cases where the sobriety of the offender has been recorded on the crime file. This is not always recorded for a number of reasons including it being unclear whether the offender was intoxicated, or the detection happening some time after the event and it not being possible to prove intoxication. It is therefore possible that the number of offences where alcohol is a contributory factor may be higher than reported; nevertheless this method represents the most robust method currently available of analysing such offences.

### Street Drinking Charges

During 2016/17 there were 199 street drinking charges in Fife (Table 3). The most common charge was 'urinate/defecate in a public place' followed by 'in possession of an open container containing alcoholic liquor'.

Table 3: Street drinking charges by type of offence in Fife; 2016/17

	No.
Consume alcohol in a designated public place	46
Drunk & incapable	28
Found to be in possession of an open container containing alcoholic liquor	53
Urinate/defecate in a public place	72
<b>Total</b>	<b>199</b>

Source: Police Scotland

Dunfermline central, Kirkcaldy central and St Andrews are the areas in Fife linked to the most street drinking charges, likely due to the night-time economy and large student presence there. The largest number of offences occurred between Friday and Sunday, peak periods are 18:00–0300 on Friday and Saturday, and 18:00–00:00 on Sunday. Men accounted for more than 85% of all street drinking charges. This type of charge was most likely to be linked with younger age groups, individuals aged 16-21 are linked with 37% of street drinking charges.

### Anti-Social Behaviour Incidents

In 2016/17 there were 1,003 anti-social behaviour (ASB) incidents recorded where the offender was noted as drunk or had been drinking. A wide range of offences were committed but the main categories of offences are shown in Table 4. Breach of the peace has the strongest link to alcohol with 32% of these offences being linked with an intoxicated



offender. In contrast, only 6.4% of vandalism charges show a similar link. Assault to injury charges show a stronger link with alcohol than the more common assault charges.

There is a strong correlation between alcohol-related ASB offences and gender with males accounting for 79% of offences in 2016/17. 31% of offences were committed by persons aged 25-34 and a further 25% by persons aged 18-24.

Table 4: Offences recorded in Fife and their relationship with alcohol; 2016-17

	Offences with alcohol involved	% of all offences
Assault	139	7.2%
Assault to injury	164	9.3%
Vandalism	78	6.4%
Breach of the Peace	122	31.9%
Threatening or Abusive Behaviour	325	10.4%
Carry a knife	8	9.6%

Source: Police Scotland

Just over half of all alcohol-related incidents in Fife were committed in a public space (52%), 42% were committed in residential locations and 6% in other locations. Saturday and Sunday are the primary days for both location types, accounting for 51% of incidents in residential locations and 62% of public space incidents.

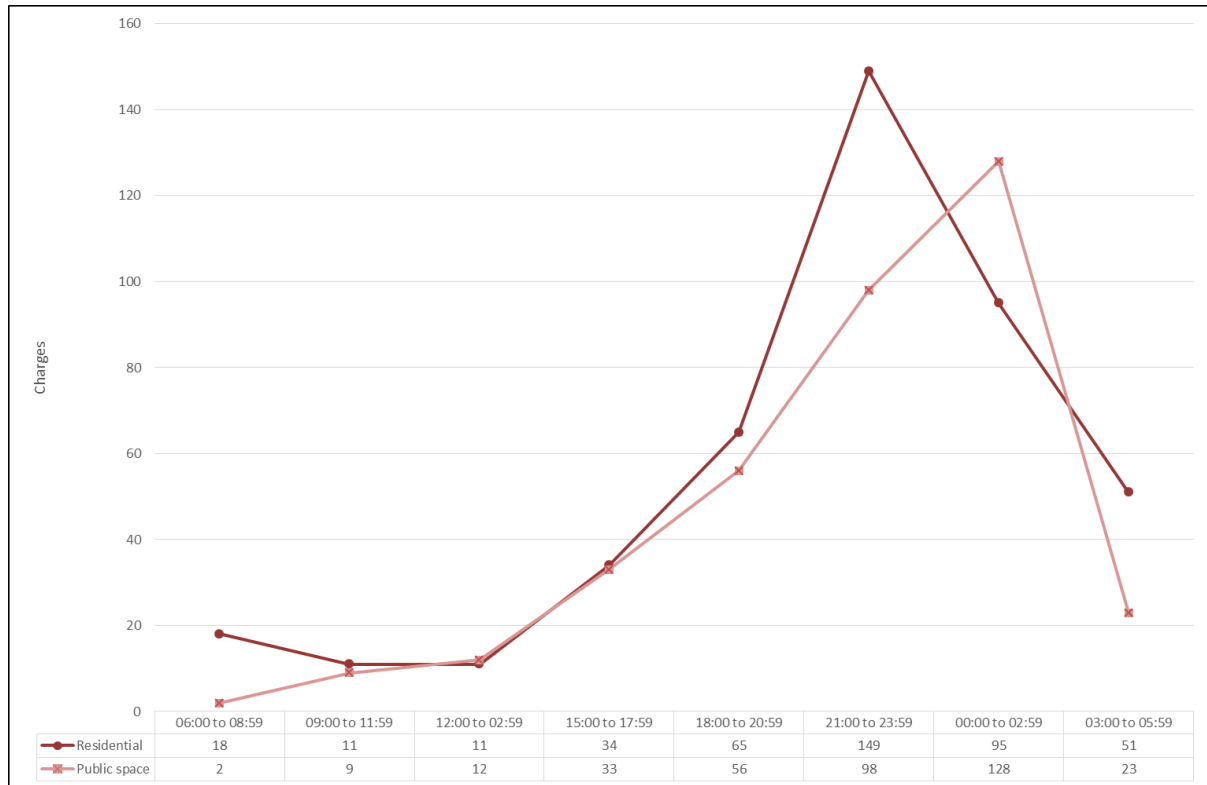
Table 1: Day of the week patterning of ASB Incidents by location; 2016/17

	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday	Sunday
Residential	14%	8%	9%	9%	9%	26%	26%
Public Space	8%	4%	8%	8%	10%	28%	34%

Source: Police Scotland

9pm to midnight is the peak time period for incidents at all locations. However incidents at residential locations are more likely to occur at this time than those in public spaces (Chart 8). The greatest proportion of public space incidents occur between midnight and 02:59, with this time period accounting for 41% of all public space charges.

Chart 8: ASB Incidents by location and time of day; 2016/17

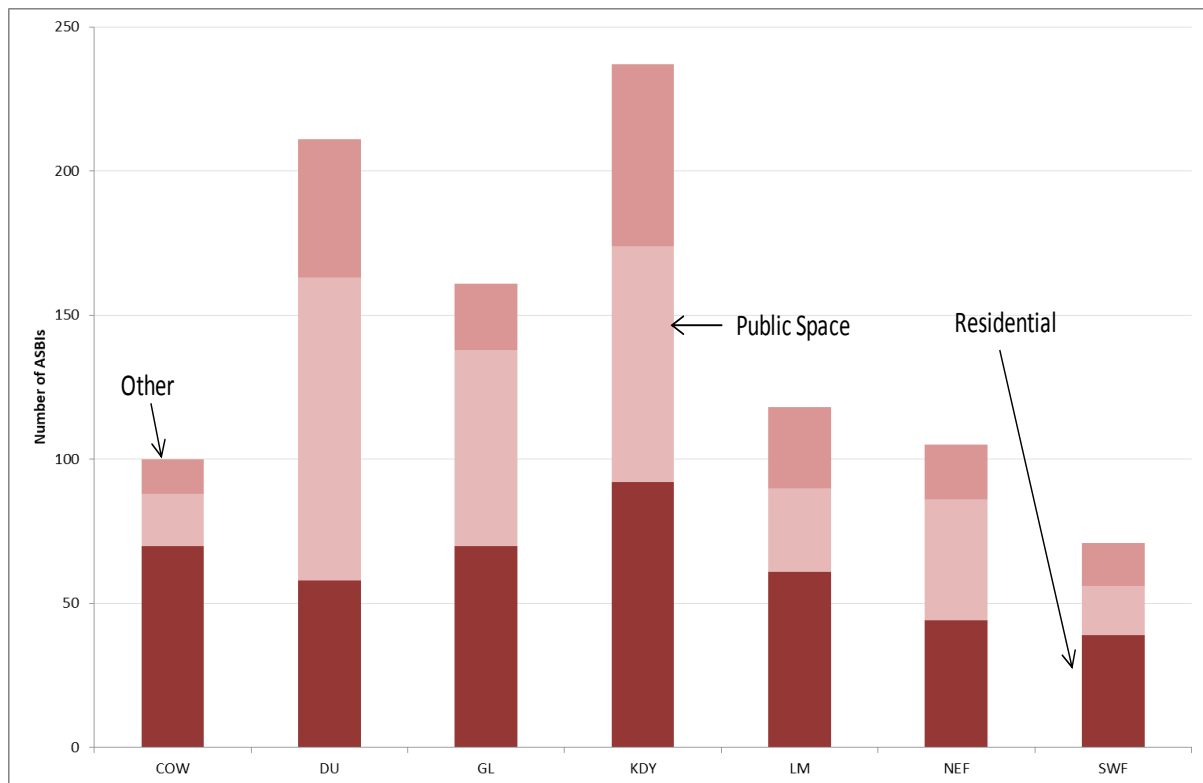


Source: Police Scotland

Kirkcaldy locality had the highest number of alcohol-related ASB incidents followed by Dunfermline (Chart 7). SW Fife had the lowest number of alcohol-related ASB incidents in 2016/17. Localities with the highest public space offences (e.g. Dunfermline and Kirkcaldy) contain parts of Fife with a defined night-time economy.

Cowdenbeath and Levenmouth localities have the highest proportion of residential incidents and the highest rates off-sale premises. 70% of the offences in Cowdenbeath with a link to alcohol were at residential locations, the highest of any committee area.

Chart 7: Alcohol-related ASB Incidents by location and locality; 2016/17



Source: Police Scotland

Rates of alcohol-related ASB incidents vary significantly across the 104 intermediate zones in Fife (Figure 4, Appendix 1). Seven intermediate zones had rates much higher than the Fife average which included the areas Dunfermline Central, Kirkcaldy Central, Glenrothes Auchmuty and St Andrews Central. The rate in Dunfermline Central was the highest of all intermediate areas, 160.3 per 10,000 population, accounting for 10% of the total alcohol-related ASB incidents in Fife. A further 21% of Fife intermediate zones had rates higher than the Fife average areas, including Dysart, Ballingry and Methil East.

### Views on Alcohol-related crime & disorder in Fife

Respondents to the survey highlighted several issues affecting them linked to alcohol-related crime and disorder and public nuisance (Table 5). The most common was rubbish or litter left lying around, followed by rowdy behaviour as a result of drunkenness. Noise, rowdy behaviour and environmental impact were more likely to be highlighted as the key issues than physical harm.

Table 5: Survey respondents experience in the last 12 months in their area

Rubbish or litter lying around resulting from people drinking alcohol outside	44.9%
Rowdy behaviour as a result of drunkenness	24.5%
Vandalism, graffiti or other deliberate damage to cars/other property as a result of drunkenness	15.1%
Young people under 18 purchasing alcohol in local shops/take away	15.1%
Noisy neighbours or regular loud parties due to drunkenness	13.2%
Groups or individuals intimidating or harassing others as a result of drunkenness	11.3%
Adults buying alcohol in local shops/take away for young people under 18	8.7%
Accidents and physical harm to people who have been drinking excessively	5.3%
Physical harm to others in street caused by drunkenness	2.6%
Physical harm to family members in the home caused by drunkenness	1.1%

Source: Fife ADP Alcohol Survey

## 8. Alcohol provision, alcohol-related harm & inequalities: examining the relationships

This report has thus far shown that there are areas in Fife that have much higher or higher levels of alcohol provision in terms of both all premises and off-sales premises than the Fife average. It has also been shown that there are communities in Fife are experiencing high levels of alcohol-related harm as measured by hospital admissions, mortality rates and alcohol-related anti social behaviour incidents.

National research reported that rates of total alcohol outlet density per 10,000 population were higher in the most deprived areas than the least deprived in Scotland.<sup>6</sup> For off-sale premises, rates increased linearly with deprivation with rates in the most deprived areas being significantly higher than rates in all of the other deprivation categories.<sup>6</sup> This report has also shown that the 40% most deprived areas (quintile 1 and 2) in Fife have the highest rates of off-sale premises. These areas also have considerably higher rates of alcohol-related hospital admissions and mortality.

Numerous research studies have shown a clear link between the number of licensed premises in an area and levels of alcohol harm.<sup>4</sup> Across Scotland research showed that neighbourhoods with the highest numbers of alcohol outlets had significantly higher alcohol-related death rates and alcohol-related hospital admission rates.<sup>16</sup> Alcohol-related death rates in neighbourhoods with the most alcohol outlets were more than double the rates in those with the fewest outlets. The researchers suggest that these relationships were stronger for off-sales premises.<sup>16</sup>

Further research also provides evidence to suggest that off-sales make a greater contribution to alcohol-related harm which the authors conclude is due; alcohol being in general cheaper in off-sales than on-sales, large quantities are available from off-sales and there is no control over the quantity of off-sales consumed compared to on-sales where the

quantity is supervised.<sup>17</sup> The locality in Fife with the highest rate of off-sale premises (Cowdenbeath) has the highest rate of alcohol-related hospital admissions. It also has the highest proportion of residential ASB incidents. The area with the second highest rate of off-sale premises (Levenmouth) has the highest rate of alcohol-related deaths.

It must be acknowledged however that examining differences in Fife by both locality and inequalities as measured by the five SIMD quintiles still only allows us to see differences across large areas or large population groups. In order to facilitate an understanding of the relationship between alcohol provision (total and off-sales), alcohol-related health harm, alcohol-related crime and disorder and inequalities (as measured by income deprivation) in local areas in Fife we have created a set of seven locality profiles.

Each profile contains an overview of the impact of alcohol in Fife and information on alcohol premises (total and off-sales) and alcohol-related harm including hospital admissions, deaths and anti-social behaviour incidents for Fife, the locality and smaller local areas (intermediate zones) within that locality.

There is no agreed definition of what constitutes harm and what constitutes over provision of licensed premises.<sup>4</sup> In the profiles, consistent with the approach taken in other local authority areas, we have used the definition of much higher than Fife average and higher than Fife average to indicate levels which are of potential concern.<sup>5,a</sup> This information can be used to consider local areas in Fife in terms of the level of provision or over provision already in existence in these areas and the levels of alcohol-related harms consistent with the five licensing objectives.

The relationships shown are complex. There are individual local areas in Fife and within each locality with high levels of provision and high levels of harm and inequality. However there are also areas with lower than average levels of provision with high levels of harm and inequality and vice versa. The overall pattern though can be summarised as;

The group of local areas in Fife with higher than average rates of off-sale provision have a greater proportion of areas with higher rates of health harm, ASB incidents and income deprivation than those with lower than average rates of off-sale provision. A similar pattern exists but the differences are not as pronounced for areas with higher or lower rates of total premises.

## **9. Summary, conclusions and recommendations**

### **9.1 Summary**

This report has provided information to support each of the five licensing objectives and an examination of overprovision that can be used in the development of new licensing policy and in making licensing decisions. The evidence presented can be summarised under each of the five objectives as follows:

#### **Preventing crime & disorder, securing public safety and preventing public nuisance**

1,003 alcohol-related anti-social behaviour incidents were recorded ranging from breach of the peace to assault to injury. Kirkcaldy locality had the highest number of alcohol-related ASB incidents. Cowdenbeath and Levenmouth localities had the highest proportion of residential incidents. There were 39 fires in Fife where impairment due to alcohol or drugs

was suspected as a contributory factor. 58 complaints were made about licensed on-sale premises.

### **Protecting children & young people from harm**

Rates of drinking among teenagers have been decreasing in Fife, but 42% of 13 year olds and 72% of 15 year olds reported 'ever having a proper alcoholic drink'. 10% of all alcohol related attendances to Fife A&E departments were made by children aged 15 and under. 42% of alcohol-related behaviour incidents occurred in residential locations where it is possible children were present. There were 164 child protection cases in Fife due to parental alcohol misuse during 2014-16.

### **Protecting & improving public health**

At least 71,000 adults drink more than the weekly recommended amount of alcohol in Fife. There were more than 2,000 alcohol-related hospital admissions involving Fife residents in 2016/17 and an average of 62 alcohol-related deaths each year between 2014 and 2016. Inequalities are evident in alcohol-related health harm in Fife. Cowdenbeath has the highest rate of hospital admissions and Levenmouth the highest rate of alcohol-related deaths.

## **9.2 Conclusions**

- Parts of Fife have levels of alcohol provision higher and much higher than the Fife average
- There are areas in Fife experiencing significant levels of alcohol-related harm; health and anti-social behaviour incidents
- There is clear evidence of a link between deprivation and alcohol-related harm
- There is an association in Fife between high levels of provision and high levels of harm and inequalities.

## **9.3 Recommendations**

Based on the evidence presented this report recommends that;

1. Further off-sales licenses should be restricted in Cowdenbeath and Levenmouth areas where there is already substantial evidence of alcohol-related harm.
2. A ban on any further off-sales licenses across Fife should be considered as alcohol-related harm is more strongly associated with off-sales and this measure would avoid drift of purchasing in neighbouring areas.

## Appendix 1

Figure 1: Fife Licensed Premises by Intermediate Zone as rate per 10,000 population aged 18 and over.

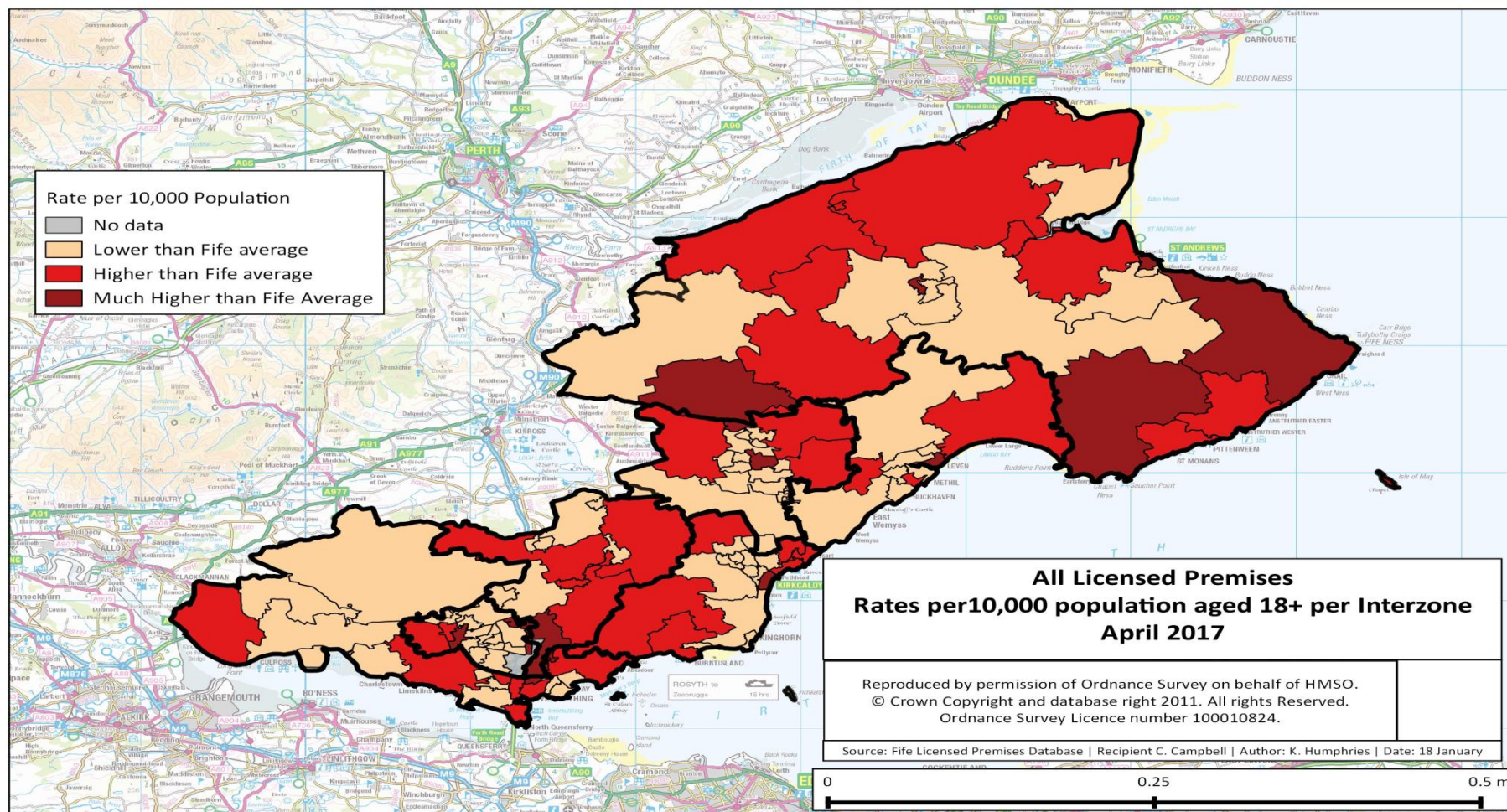


Figure 2: Fife resident alcohol-related hospital admissions by Intermediate Zone; 2016/17

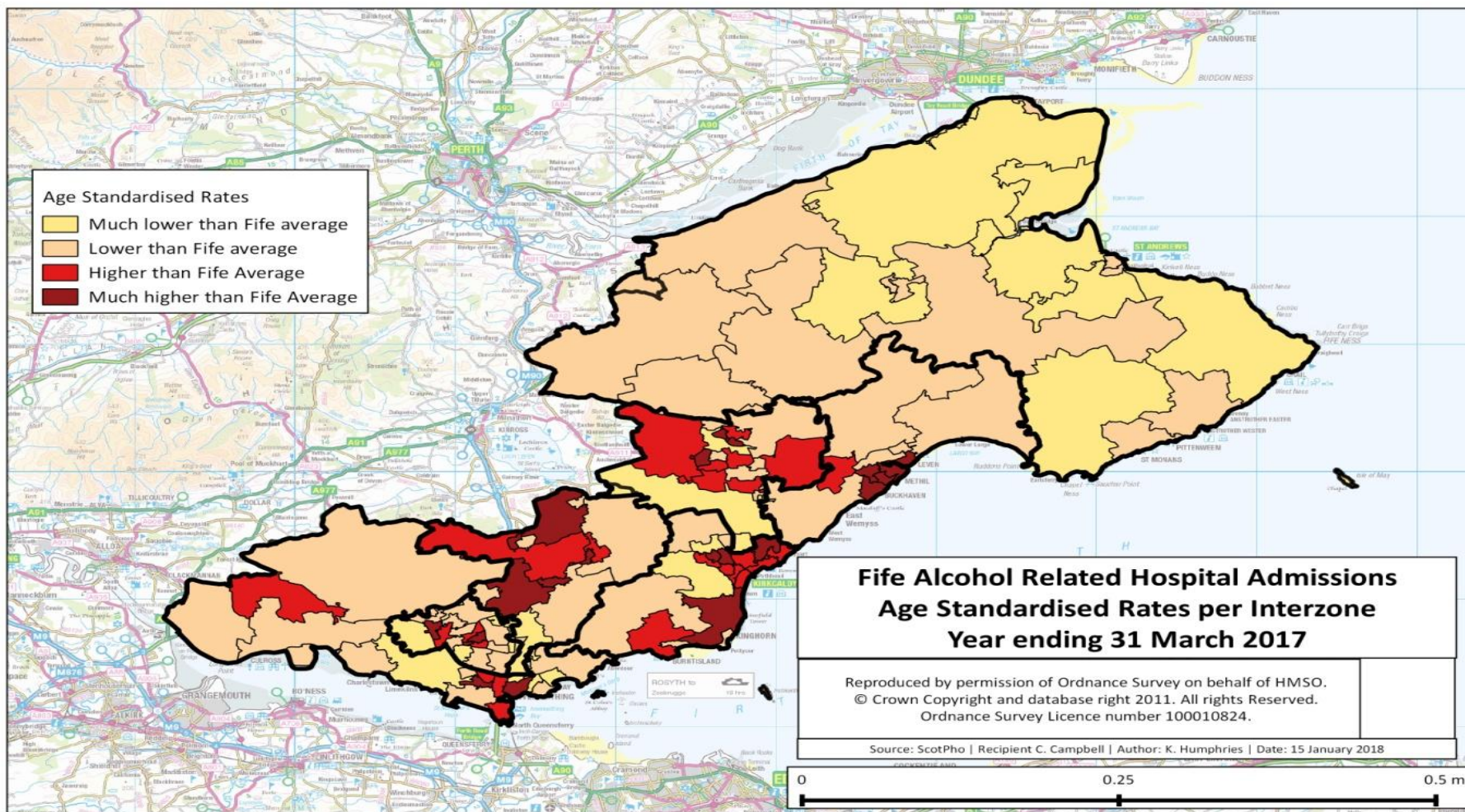




Figure 3: Alcohol-related deaths by Intermediate Zone; 2012-16

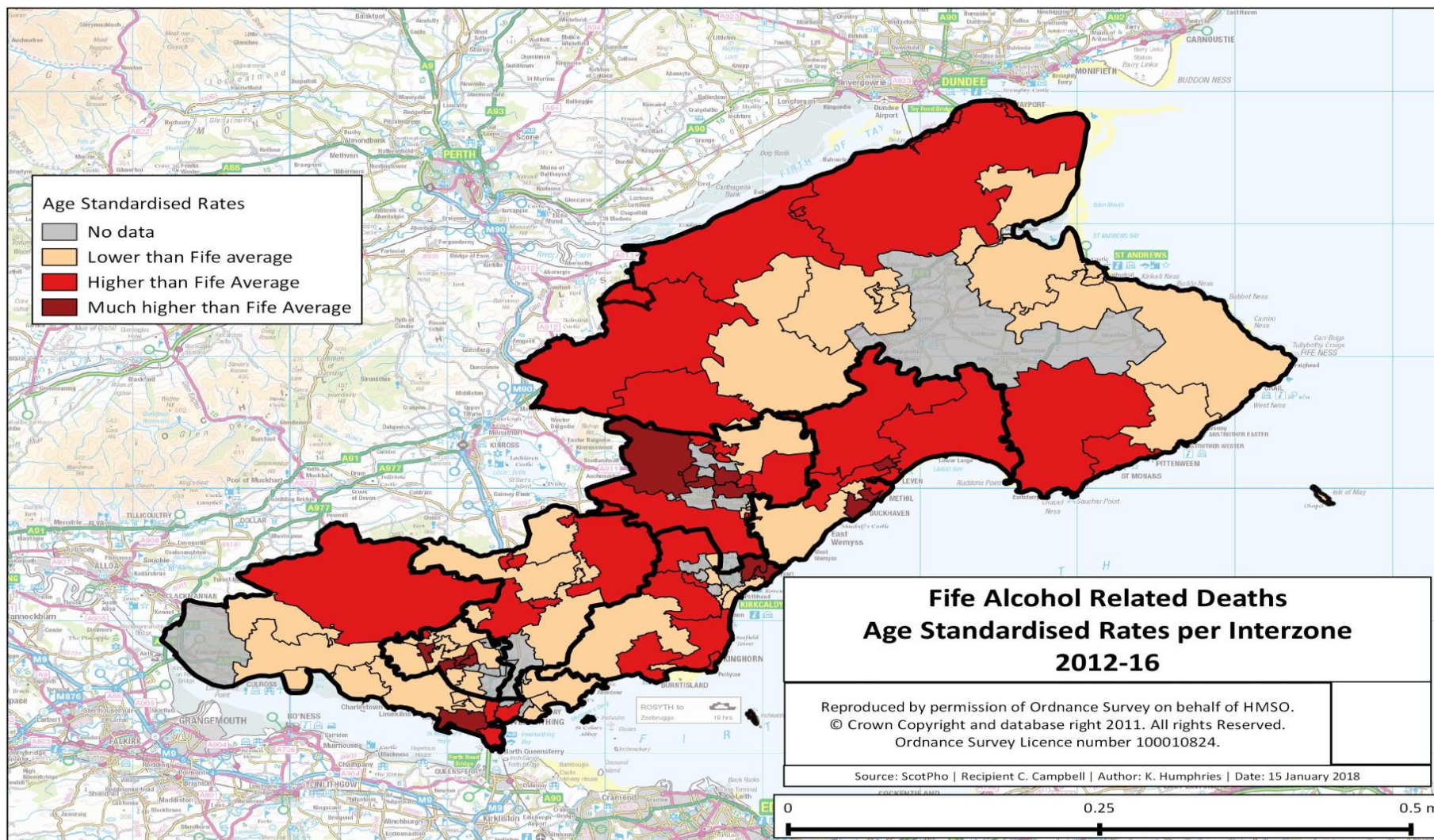


Figure 4: ASB Incidents by Intermediate Zone, 2014/15-2016/17

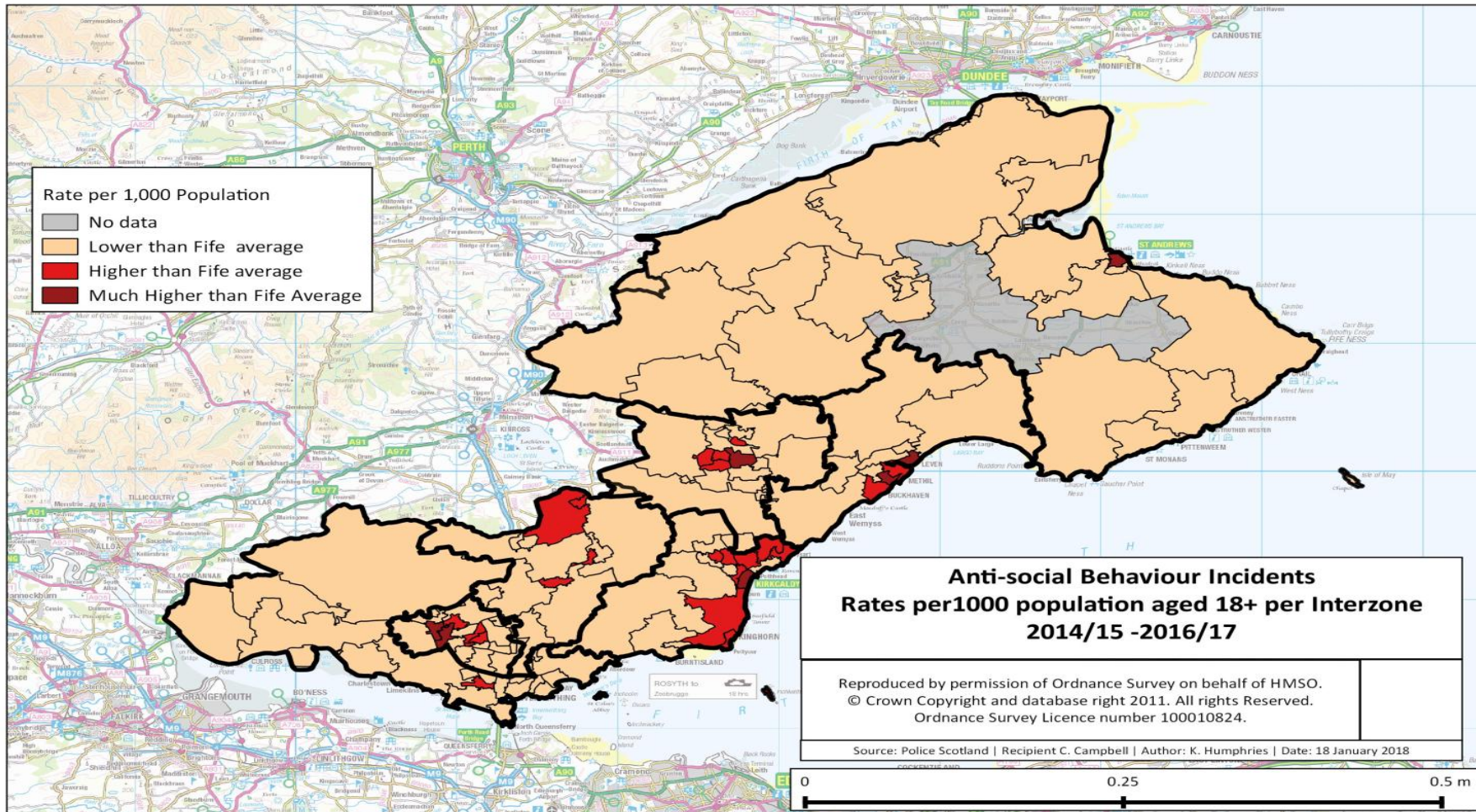
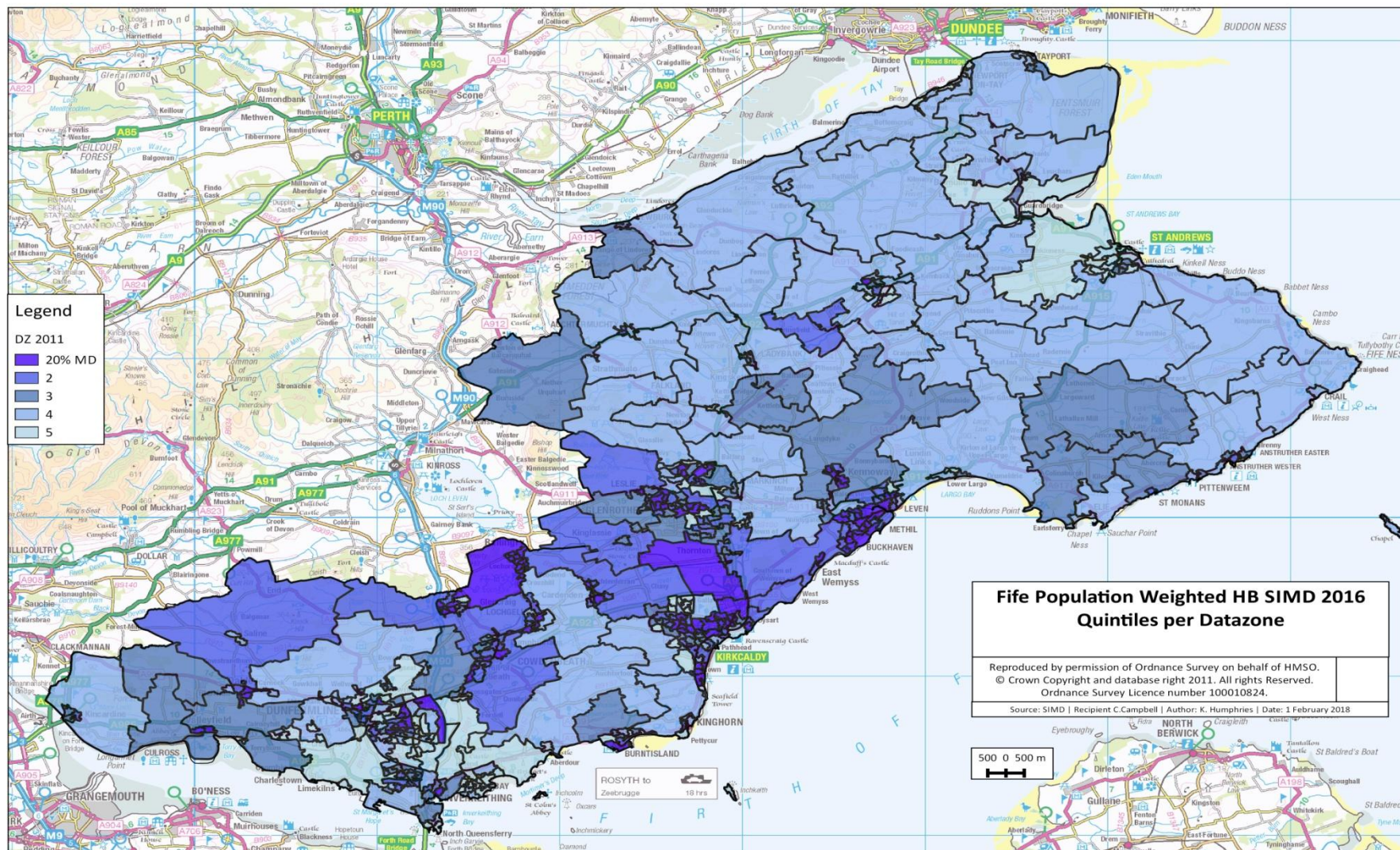


Figure 5: Fife SIMD 16 Quintiles



## **Glossary**

### **Geographical Areas**

Intermediate zones are small geographical areas with populations of between 2000-6000 persons. There are 104 intermediate zones in Fife. They do not build up to fit exactly within Localities/ Area Committees and have been grouped under these boundaries based on which locality contains the majority of each intermediate zone. The SIMD 16 Fife quintiles are based on the 494 data zones in Fife which have been ranked and then grouped by deprivation so that each contains 20% of the population of Fife living on the most to least deprived areas.

### **Licensed Premises**

Data on licensed premises in Fife was extracted from the Fife Licensing Database in December and April 2017. It was matched to intermediate zones and other geographical areas via premise postcode. The number of premises was converted to a rate by dividing the number by the population aged 18 and over in the relevant geography.

### **Alcohol-related hospital admissions**

Data was extracted from the ScotPHO Intermediate Zone Health and Wellbeing Profiles in December 2017 and are the European age-sex standardised rates (EASR) of general acute inpatient & day case stays in 2016/17 with an alcohol-related diagnosis (from an agreed set of diagnoses in any of six diagnostic positions). Data for the seven localities for 2016/17 was produced by Information Services, NHS Fife. European age-sex standardised rates are rates in which age and sex differences of different populations have been controlled for which provides more accurate comparisons over time and between areas.

### **Alcohol-related deaths**

Data was extracted from the ScotPHO Intermediate Zone Health and Wellbeing Profiles in December 2017 and are the European age-sex standardised rates of the annual average rate of death during 2012-16. Alcohol-related mortality is an agreed group of causes of deaths where the 'underlying cause' of death is alcohol, i.e. the disease or injury which initiated the chain of morbid events leading directly to death. Data for seven localities covers the three year period of 2014-16 and was produced by Information Services, NHS Fife.

### **Anti-social behaviour incidents**

Data for the three years 2014/15 to 2016/17 was extracted from Police Scotland databases using known sobriety of offender 'was drunk' or 'had been drinking' and examining the offences committed at both public and private space locations in Fife. The number of offences was converted to a rate by dividing the number by the population aged 18 and over in the relevant geography.

### **Income Deprivation**

This data is collated for the Scottish Index Multiple Deprivation 2016 and downloaded for areas in Fife from KnowFife Dataset. It represents the percentage of the population living in each area who receive certain benefits or tax credits (including children who are dependent on a recipient of benefits).

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