



Report on data to inform the City of Edinburgh Licensing Board's Duty to Assess Overprovision

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1. Introduction

Licensing Boards have the power to identify areas of overprovision where it is deemed that the granting of further licensing would undermine the 5 five objectives enshrined in the Licensing (Scotland) Act 2005. These are:

- Preventing Crime and Disorder
- Securing Public Safety
- Preventing Public Nuisance
- Protecting and Improving Public Health
- Protecting Children from Harm

In Edinburgh the Licensing Board has identified the Grassmarket, Cowgate and streets leading to it as a long established area of overprovision. In November 2011 Jim Sherval, Public Health Specialist in NHS Lothianⁱ, completed an assessment of overprovision provision on behalf of the Board. This led to the Board adopting a policy of a presumption not to grant any new licenses across the city unless the applicant could demonstrate that it did not impact on overprovision.

In July 2013The Board announced its intention to consult on its Licensing Policy Statement for 2014 onwards. This includes a statement on overprovision. Further information on the consultation is available at

http://www.edinburgh.gov.uk/info/20171/licensing_board/1034/the_licensing_board.

This report has been produced by the Alcohol and Drug Partnership to inform the Board's assessment of overprovision.

2. Alcohol Related Challenges across Scotland

Over the past few decades, Scotland has seen a substantial increase in alcohol-related harm which is linked to a rise in alcohol consumption. Consumption has increased by over a litre of pure alcohol per adult since the early 1990s and the number of alcohol-related deaths has almost tripled since the 1980s¹. Recent figures suggest that there has been a decline in alcohol sales over the last three years in Scotland; however, rates are still far higher than in England and Wales². Alcohol-related harms have wider effects than just health, and alcohol has a contributory role in crime, domestic violence, social disorder, fire fatalities, violence, child neglect and work related problems¹.

Alcohol costs Scotland an estimated £3.56 billion per year³. Academic research suggested that increased alcohol consumption is due to alcohol being inexpensive and widely available, as well as increased acceptance of drunkenness and regular drinking.

Since the 1960s, the restrictions around the sale of alcohol have become more relaxed, particularly in terms of off-trade, with alcohol being more widely available and greater competition has resulted in price promotions, discounts and the selling of alcohol as a loss leader. From 1980 to 1997 there was a 31% increase in the number of off-sales licences¹. Between 2005 and 2009 there was a 12% increase in off-sales purchases and 15% decrease in on-sales⁸. Clearly the proportion of alcohol sold through off-sales has increased, with two thirds of alcohol in Scotland now sold through off-sales licenses⁴.

The most effective way to reduce alcohol-related harm is to reduce the affordability, availability and attractiveness of alcohol⁵. The most effective and cost-effective ways of preventing alcohol-related harm are through managing the price and availability of alcohol⁶.

Edinburgh faces similar challenges around alcohol as the rest of Scotland.

3. Licensed premises in Edinburgh

Almost 51 million litres of pure alcohol were sold in Scotland in 2009, 68% of which was sold as through the off-trade⁴.

The City of Edinburgh Council's Business Intelligence Service conducted some desk-based research into licensed premises and related outcomes. Edinburgh has a higher rate of total licensed premises, on-sales premises and off-sales premises per 10,000 of the population compared to Scotland as a whole. Compared to Glasgow, Aberdeen and Dundee, Edinburgh has the highest rate per head of licensed premises. Edinburgh is estimated to have 25% more licensed premises and 50% more pubs per head than the Scottish average⁹. However it is important to note the Edinburgh is a popular tourist destination and approximately 20% of all licensed premises are in the City Centre.

Data from the City of Edinburgh Council's Licensing Department shows that as of July 2013 there were 1,726 licensed premises in Edinburgh, 71% on-sales and 26% off-sales. On-sales premises sell alcohol for consumption on the premises and include restaurants, pubs, bars, hotels, leisure and sport venues and cafes. Off-sales premises sell alcohol for consumption elsewhere, such as supermarkets, convenience stores, takeaways and other retail stores. Table 1 shows the breakdown of licences in Edinburgh.

Table 1. Alcohol licences by type, August 2011 and March 2013 (Source: City of Edinburgh Council Licensing Department)

Venue type	Total 2013
Adult entertainment	4
Cafe	64
Convenience store	217
Hostel/backpackers	5
Hotel	135
Multipurpose venue	60
Nightclub	13
Off-sales	45
Other	27
Other retail	83
Pub/bar	421
Restaurant	360
Social club/sports club/private members club	163
Supermarket	84
Takeaway	19
Theatre/cinema/casino/bingo	26
TOTAL	1,726

Table 2 shows the number and rate per 10,000 of the population of licensed premises in each neighbourhood partnership. The City Centre has the highest number of premises (611), followed by Leith (247) and South Central (235). The City Centre (84%), Almond (76%) and Inverleith (72%) have the highest proportion of on-sales premises.

Excluding the City Centre, South Central has the highest number of on-sales premises per 10,000 of the population (45.3), followed by 34.2 in Leith, 33.9 in Inverleith and 24.5 in Almond. Liberton/Gilmerton and Forth have the fewest, with 7.7 and 7.8 per 10,000. In terms of off-licences, Forth (63%) and Liberton/Gilmerton (56%) have the highest proportion of licensed premises. Excluding the City Centre, South Central also has the highest number of off-sales premises per 10,000 of the population (18.6), followed by 15.4 in Leith and 13.9 in Forth; Pentlands has the fewest at a rate of 5.3 per 10,000 people. It is important to note that there are 75 off-sales premises in the City Centre and 74 in the Leith area.

Table 2. Number of licences and rate per 10,000 of the population aged over 18 years (Source: City of Edinburgh Council Licensing Department)

Neighbourhood Partnership**	Total		On-sales***		Off-sales***	
	Number	Per 10,000	Number (% total)	Per 10,000	Number (% total)	Per 10,000
Almond	63	32.1	48 (76%)	24.5	13(21%)	6.6
City centre	611	264.0	513(84%)	221.6	75(12%)	32.4
Craigtoun/Duddingston	37	20.2	20 (54%)	10.9	17(46%)	9.3
Forth	40	22.3	14 (35%)	7.8	25(63%)	13.9
Inverleith	94	46.9	68 (72%)	33.9	24(26%)	12.0
Leith	247	51.5	164(66%)	34.2	74(30%)	15.4
Liberton/Gilmerton	45	18.3	19 (42%)	7.7	25(56%)	10.2
Pentlands	56	17.4	38(68%)	11.8	17(38%)	5.3
Portobello/Craigmillar	68	31.3	38 (56%)	17.5	30(44%)	13.8
South Central	235	65.3	163(69%)	45.3	67(29%)	18.6
South West	149	31.9	81(54%)	17.4	62(42%)	13.3
Western Edinburgh	81	22.1	51(63%)	13.9	28(35%)	7.6
TOTAL	1726	39.0	1217(71%)	27.5	457(26%)	10.4

*Those figures highlighted in red are above the average for Edinburgh

** A map of Neighbourhood Partnership areas is shown as Appendix 1

***Data are presented for 1674 licensed premises; no data were available for 18 and 34 premises were classed as both on- and off-sales

4. Overprovision and The City's Economic Regeneration and Development

There are 4 key programmes within The City of Edinburgh Council's Economic Strategy for 2012-17: A strategy for jobs. These are:

1. invest in the city's development and regeneration
2. support inward investment
3. support businesses
4. help unemployed people into work or learning

As noted already in terms of the tourism industry, alcohol licensing can play a role in the economic development of the city. Restaurants, bars, nightclubs and off-sales premises whether used by tourists or local residents can provide employment for local residents. They can also be a draw to the city and to high streets offering benefits to other retail outlets and businesses. However there is a balance that needs to be struck as alcohol use can have a significant impact on worker productivity and readiness for employment. Increased availability of alcohol may lead to regeneration but may also have a more detrimental impact on the employment prospects of local residents as well as their health and local crime levels.

The links between overprovision and the economic strategy are set out below.

Programme 1 - *Invest in the city's development and regeneration*

The City's Economic Strategy identifies the following priority areas in terms of high street development and regeneration:

- Corstorphine
- Gorgie/Dalry
- Morningside/Bruntsfield
- Tollcross
- Nicolson Street/Clerk Street
- Stockbridge
- Leith Walk;
- Leith Central
- and Portobello

From these it is important to note that the areas which are highlighted already have higher than average numbers of license Premises, alcohol related hospital admissions and alcohol related crime (per 10,000 population).

In all areas of the city but particularly in those where alcohol related crime or anti social activity is high, further provision of access to alcohol must be considered carefully.

Programme 4 - *help unemployed people into work or learning*

The strategy sets out a plan to have effective employability services supporting people back into work. This includes a range of support and help targeted at young people, those who are recently unemployed, those in insecure work and those who are more vulnerable in the community - this would include those who have a history of drinking too much alcohol and not in employment.

Local research appears to identify a link between the availability of alcohol and barriers to employment. The City of Edinburgh Council's Business Intelligence Service conducted some desk-based research into licensed premises and related outcomes. Analyses were conducted to determine whether there is a relationship between high alcohol provision and a range of outcomes; strong relationships were found between high rates of off-sales premises in an area and high rates of crime, Job Seekers Allowance claimants and in particular young Job Seekers Allowance claimants.

In the context of overprovision caution should be used in increasing the number of licensed premises in areas where there are already higher numbers of people in receipt of Job Seekers Allowance.ⁱⁱ

Tourism

"Edinburgh, the inspiring capital of Scotland, is a historic, cosmopolitan and cultured city"¹¹ attracts millions of visitors each year. In 2011, a total of 3.69 million people visited Edinburgh and stayed a total of 11.3 million nights and spent a total of £1,160 million¹². It is estimated that each tourist spends approximately £83.65 per day in Edinburgh, almost a third of which is spent on eating and drinking (£23.37)¹¹.

In the most recent visitor survey, 20% of visitors reported pubs and bars as their main reason for visiting Edinburgh; 61% of tourists reported visiting pubs and bars during their stay¹³. However, only 4% viewed pubs and bars as the most enjoyable

part of their visit, compared to 8% for restaurants, 9% for atmosphere and 16% for friendly people.

In this survey, a number of people provided comments about a range of different aspects of the city. Two reported enjoying the pubs and the nightlife in the City; however, two comments highlight the less enjoyable parts of the night time economy:

“During a walk later in the evening we came across too many drunk people which made us feel unpleasant and uncomfortable.”

“More night life activities. There is nothing to do much and your shopping malls and shops closed so early. I don't drink so there is nothing much to do for me at night.”

The majority of tourists will use the city centre for eating and drinking as opposed to other areas of the city and as a consequence it is not unreasonable to see a significant higher proportion of licensed premises within the City Centre. Alongside this it is important to note that there are times in the year when visitors to the city will increase significantly namely during Hogmanay and The Edinburgh Festival. This has implications for overprovision as there is an increase in people looking for venues to eat and drink.

The policy statement needs to take a balanced approach in reflecting the desires of the visiting population and the needs of local residents. This is particularly significant in the City Centre where many visitors will eat and drink and also where there are significant alcohol related problems, which have a detrimental impact on residents. This can be seen later in the report particularly in Section 7.

5. Alcohol-Related Problems in Edinburgh

Consumption

Data from the Scottish Health Survey (2011)¹⁴ show that people in Edinburgh appear to drink more alcohol compared to Lothian and Scotland (Table 3). People in Edinburgh report more harmful and hazardous drinking, consume more alcohol per week and per day and are more likely to drink outwith Government guidelines. The figures in red in the table below highlight the areas in which Edinburgh residents report more harmful drinking patterns than the rest of Lothian and Scotland. It is important to note that 12% of people in Edinburgh do not drink alcohol; however, it is likely that they are still affected by the wider social harms of alcohol.

Table 3. Alcohol consumption by adults in Edinburgh, Lothian and Scotland
(Source: Scottish Health Survey, 2011)

	Edinburgh	Lothian	Scotland
Moderate	61%	62%	64%
Hazardous/harmful	27%	25%	23%
Mean units/week	13.4	12.7	12.0
Mean units/day	5.0	4.7	4.5
Consumed more than daily limits	42%	40%	38%
Males (4 units/day)	46%	45%	43%
Females (3 units/day)	38%	36%	34%
Consumed more than double daily limits	24%	22%	21%
Males (8 units/day)	28%	27%	26%
Females (6 units/day)	20%	18%	17%
Drinks within Government guidelines*	41%	42%	43%
Drinks outwith Government guidelines*	47%	45%	43%
Drank on >5 days	12%	13%	12%
Non-drinker	12%	12%	13%

*Government guidelines recommend that women should drink no more than 14 units per week and no more than 3 units on their heaviest drinking day; men should drink no more than 21 units per week and no more than 4 units on their heaviest day.

The estimated volume of pure alcohol sold in Scotland in 2009 equates to 1,190 units of alcohol per year for every adult, which is an average of 22.9 units per week⁸. However, the table above shows that people in Scotland reported drinking 12 units per week, a difference of 10.9 units per week. This is likely to represent significant under reporting of consumption across Scotland

According to data from the Lothian Health and Lifestyle Survey (2010)¹⁵, Edinburgh residents reported higher levels of alcohol consumption at weekends and midweek and most days compared to Midlothian, East and West Lothian; those living in North Edinburgh are less likely to be non-drinkers and more likely to drink everyday compared to the rest of Lothian, including South Edinburgh. Those living in Edinburgh were also more likely to report consuming between 11 and 15 units and over 16 units on the last day they drank alcohol than those in the rest of Lothian, men and women in North Edinburgh had the highest rates. When asked if their current drinking had an effect on their health, 10.4% in North Edinburgh and 12.7% in South Edinburgh felt that it benefitted their health, whilst 35.8% and 32.5% felt that their alcohol consumption was harmful to their health. Just over half of residents in Edinburgh thought their alcohol consumption had no effect on their health, compared to 60% in the other local authority areas.

Children

According to the Growing Up in Scotland survey (2007)¹⁶, 7% of primary caregivers of children under five, usually mothers, in Lothian report drinking alcohol 4-6 times per week compared to 5% in Scotland; 24% report drinking alcohol 2-3 times a week, compared to 17% in Scotland; and 18% in Lothian and 20% in Scotland report drinking once a week. The number of people reporting that they consume more than five units is similar for Lothian and Scotland.

It is estimated that approximately 7,000 children in Edinburgh are living with parents who have problematic alcohol use¹⁷. However, it is likely that the actual numbers are higher due to issues with reporting, recording, definitions and identification; many children will be unknown to services and parents may not drink enough to feel they need treatment but their consumption may be harmful to their children. There are approximately 1,000 children aged under 18 years in Edinburgh with Foetal Alcohol Spectrum Disorder (FASD), with around 55 children born with FASD in Edinburgh each year¹⁷.

Young People

Data from the Scottish Adolescent Lifestyle and Substance Use Survey (2010)¹⁸ shows similar rates of alcohol consumption for 13 and 15 year olds in Edinburgh

compared to Scotland. In Edinburgh, 41% of 13 year olds and 78% of 15 year olds have ever had an alcoholic drink, compared to 44% and 77% in Scotland. The number of adolescents reporting that they have ever consumed alcohol has reduced over the last decade, from 64% to 53% to 41% for 13 year olds and 84% to 79% to 78% for 15 year olds. The number of adolescents reporting that they have consumed more than five drinks on one occasion was higher in Edinburgh than in Scotland, with 50% of 13 year olds and 72% of 15 year olds in Edinburgh compared to 30% and 51% in the rest of Scotland.

Costs of Alcohol Related Harm

The Scottish Government produced a report in 2010 which estimated the cost of alcohol related harm in Scotland as over £3.5 billion, with 7.5% of costs due to health service expenditure, 6.5% to social work services, 20.4% to crime, 24.3% to productive capacity and 41.2% to wider social costs³. Alcohol Focus Scotland provided estimates for Edinburgh, with alcohol related harm costing £221.28 million, which is equivalent to £455 per person. Health service costs were estimated at £23.46m (10.6%); social care as £29.91m (13.5%); crime £82.21m (37.2%); and productive capacity as £85.7m (38.7%)¹⁹.

Crime

Excessive alcohol consumption is an aggravating factor in a range of crime and community safety issues across the city ranging from minor incidents of anti-social behaviour to serious violent crime.

Data from the Edinburgh Community Safety Partnership's 2013-14 strategic assessment highlights the impact of alcohol-related crime in the city. In terms of violent crime, the largest proportion of serious assaults (45%) are committed in public spaces over the weekends with the majority of public space serious assaults spontaneous in nature. More than a quarter (26%) of serious assaults committed in a public space and 23% in a private space are alcohol aggravated, however, it is likely that the number is much higher due to inconsistencies in recording alcohol as a factor.

Minor assault is a high-volume crime ranging from between 5,600 to 6,800 crimes annually over the past five years. Minor assaults typically occur in the City Centre and surrounding areas over weekends and during the night time economy period of Thursday to Sunday 9pm to 4am. A large proportion (37%) of minor assaults in private spaces are recorded as domestic incidents and more than one quarter (26%) are recorded as alcohol aggravated.

Based on Police experience, the vast majority of minor assaults are assumed to be alcohol aggravated, even though only a quarter are recorded as such.

In Edinburgh, alcohol is not just an aggravating factor in violent crime but also impacts hugely on anti-social behaviour, disorder, domestic violence and hate crime; and is a causal factor in accidental fires and road casualties. In terms of vandalism, the majority of these crimes (64%) occur in public places and temporal analysis identifies weekends, late evening into early morning as peak times, which supports the premise that many are alcohol aggravated. The largest majority of vandalisms take the form of damage to vehicles followed by damage to street furniture, shops or business premises.

The majority of hate crime takes place on public streets, more often linked to the night-time economy period, and generally correlate to alcohol-related crime and disorder hotspots. Almost one-third of crimes take place within supermarkets, pubs/clubs and food outlets where workers and security staff are subjected to verbal and sometimes physical abuse. This may occur when they refuse to serve under-age or disruptive customers or refuse individuals entry to premises.

Data from Police Scotland shows that there were a total of 988 alcohol-related offences in Edinburgh. A total of 4,576 offences were recorded in which alcohol was an aggravator, 31% were for minor assault, 19% for threatening and abusive behaviour, 9% breach of the peace, 5% vandalism and 4% assault of an emergency worker.

“Alcohol is a relatively affordable commodity and the more readily accessible it becomes the more there is the chance of misuse. The daily experiences of

police officers in Edinburgh support the broadly acknowledged facts: that alcohol, when over-consumed by certain people, leads to violence and injury. This violence occurs in public, in licensed premises, on public transport and, increasingly, in private. Domestic violence and the impact it has on generations of families and communities remains heavily influenced by over-consumption. Any over-provision of alcohol increases the probability of this problem continuing from generation to generation.” (Matt Richards, Superintendent, Edinburgh Division, Police Scotland)

Hospital Admissions and Deaths

Alcohol-related hospital discharges increased dramatically between 2006 and 2007 and then decreased until 2009, however it appears to be increasing again, as shown in figure 1. 91% of all alcohol-related hospital admissions were emergency admissions, with a peak in admissions on Sundays.

Figure 1. Total number of general acute inpatient/day case discharges with an alcohol-related diagnosis in Edinburgh from 2006 to 2012 (Source: *Alcohol Information Scotland/ISD Scotland*)

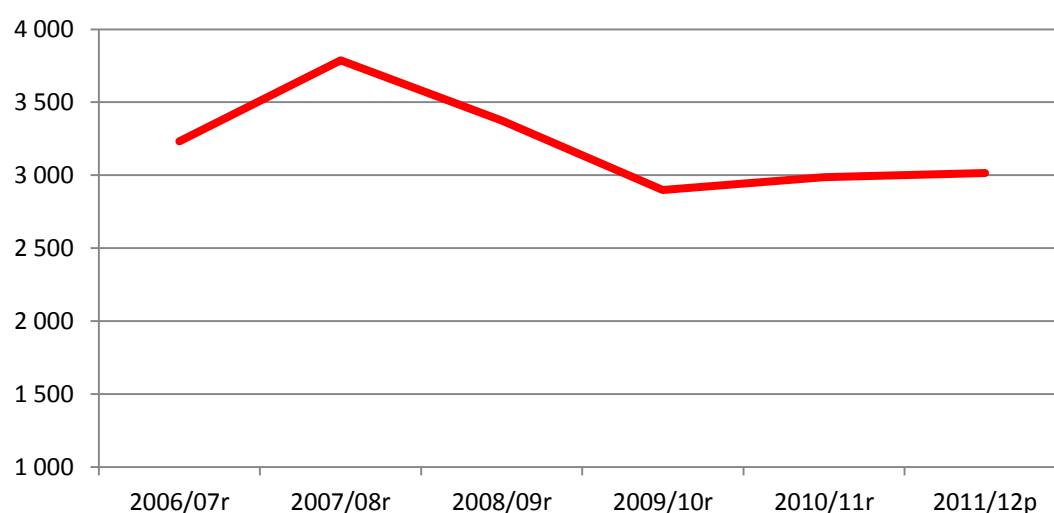
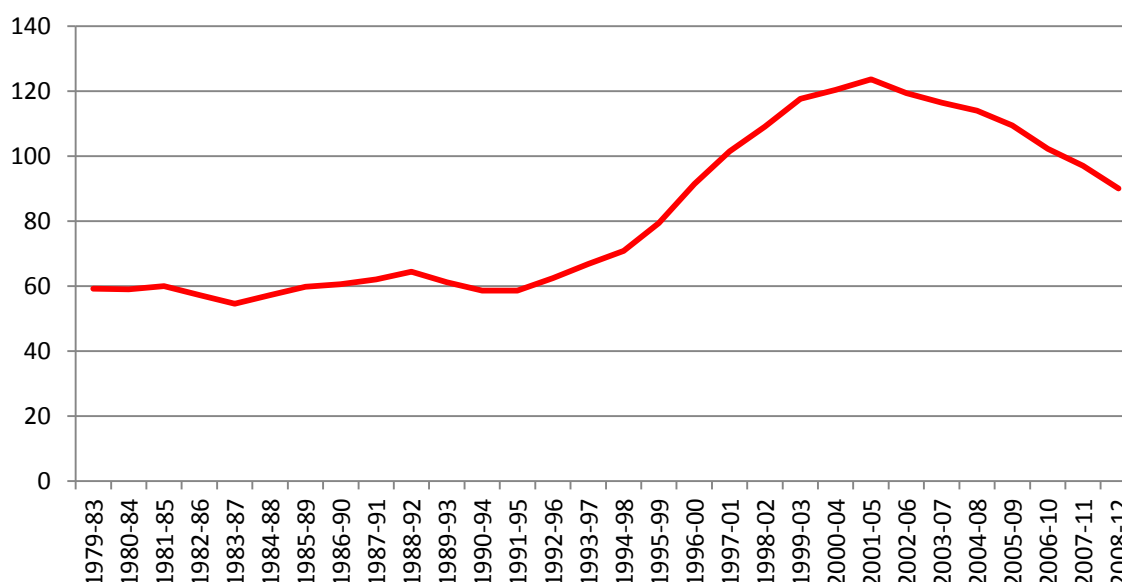


Figure 2 shows the number of alcohol-related deaths in Edinburgh from 1979 to 2012. Death rates have increased dramatically since the early to mid 1990s. There has been a slight reduction since the early 2000s; however it is important to note that all alcohol related deaths are avoidable and the number of alcohol-related deaths in Edinburgh remains far higher than in the 1970s and 1980s. Despite the reduce of

over 20 deaths per annum since the year 2000 more needs to be done to reduce the high proportion of preventable deaths.

Figure 2. Number of alcohol-related deaths in Edinburgh from 1979 to 2012, 5 year rolling averages (Source: GROS)



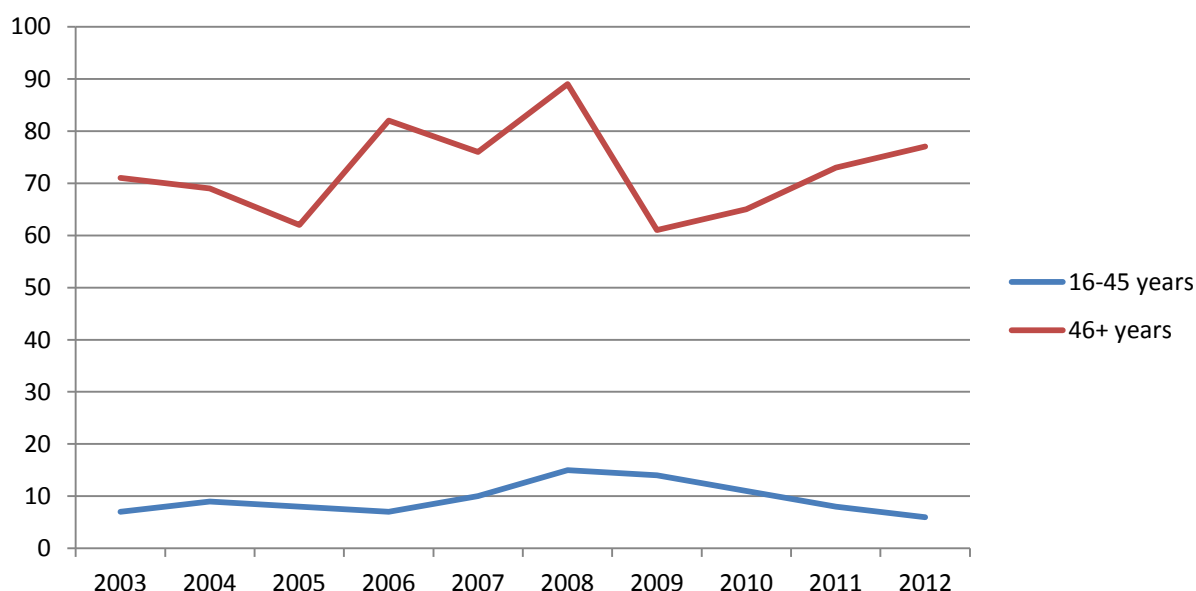
“In the 25 years since I started working with liver disease in Edinburgh, I have seen a dramatic rise in deaths from liver failure due to alcohol. This is a tragedy on many levels. These patients are not old – indeed they should be in the prime of their life. And of course it is entirely preventable. Restricting the availability of alcohol is crucial to reducing excessive consumption and thereby reducing the appalling death rate from liver disease in Scotland.” (Dr Alastair MacGilchrist, Liver Specialist, RIE).

Alcohol Related Brain Damage

Alcohol related brain damage (ARBD) occurs when the structure and functioning of the brain is affected due to the long-term consumption of alcohol; there is no single definition and covers a wide range of conditions which are characterised by impaired mental function²⁴. Figure 3 shows the hospital admissions for ARBD over the last decade; while the numbers are small, patients often require a great deal of care and support, often in care homes. NHS Lothian, the City of Edinburgh Council and

Edinburgh ADP recognise the growing effect of ARBD and have recently funded a social worker post to support those being discharged from hospital.

Figure 3. Number of general acute inpatient/day case and psychiatric discharges with an alcohol-related brain damage diagnosis in Edinburgh from 2003 to 2013 (Source: ISD Scotland)



Ambulance Callouts

Data from the Scottish Ambulance Service shows that between March 2011 and February 2012 there were a total of 5,192 instances when alcohol was recorded during an incident which required an ambulance. 1,728 were female (33%) and 3,420 (66%) were male. Of the 5,192 incidents, 3,816 (73%) resulted in the person(s) being taken to hospital. Over 25% of all incidents took place between the hours of 11pm and 1am.

“Ambulance crews in Edinburgh are on the front line when responding to 999 calls associated with alcohol-related incidents. Paramedics respond quickly to help people who are drunk and often vulnerable. However, paramedics are often subject to abuse by patients and/or their friends and sometimes they are attacked and assaulted when trying to care and look after their patients. Ambulance staff do receive training in how to protect and defend themselves in such situations but nothing can really prepare them on how to deal with an uncooperative and drunk person (often in an intimidating environment) until

they have experienced it firsthand” (Peter Connor, Head of Ambulance Service Operations, Scottish Ambulance Service, Edinburgh and Lothian).

The negative effects of alcohol have recently caught the media’s attention, with two articles reporting on the high number of assaults to paramedics in Scotland^{25,26}. The number of assaults reported by ambulance staff has increased by more than a third, from 228 in 2010 to 306 in 2012, bringing the total to 839 verbal and physical assaults over the three year period. Staff reported being pushed, punched, spat at and assaulted with weapons as well as being subject to verbal abuse. According to the Scottish Ambulance Service, alcohol is a “key factor” in the majority of incidents where staff are threatened or assaulted. The ambulance station in Edinburgh has the highest number of assaults compared to the other stations in Scotland, with 100 assaults being reported between 2010 and 2012, the equivalent of three assaults per month; the media have described Edinburgh as “most dangerous place for ambulance staff”^{25,26}.

Fire and Rescue

Data from Lothian and Borders Fire Service show that between April 2012 and January 2013 there were 77 incidents in Edinburgh where the cause of the fire was thought to be due to someone being under the influence of alcohol and/or drugs (Table 4).

Table 4. Location of incidents where people were suspected to be under the influence (Source: Lothian and Borders Fire and Rescue Service)

Neighbourhood partnership	Total (%)	Injured/rescued (%)	Fatality
Almond	3 (4%)	1 (33%)	0
City centre	3 (4%)	2 (67%)	0
Craighentony/Duddingston	8 (10%)	3 (38%)	0
Forth	3 (4%)	0 (0%)	0
Inverleith	3 (4%)	1 (33%)	0
Leith	3 (4%)	0 (0%)	0
Liberton/Gilmerton	4 (5%)	3 (75%)	0
Pentlands	7 (9%)	5 (71%)	0
Portobello/Craigmillar	25 (32%)	14 (56%)	1
South Central	6 (8%)	2 (33%)	0
South West	11 (14%)	7 (64%)	0
Western Edinburgh	1 (1%)	0 (0%)	0
TOTAL	77	38 (49%)	1

Road Safety

A report by Police Scotland was written in response to a recent problem profile of casualties in the city centre which identified alcohol consumption as one of the main contributory factors in the high number of pedestrian road traffic casualties. Data from 2008 to 2012 show the number and location of incidents with causation factor of “pedestrian-impaired by alcohol” as well as mapping of licensed premises. The city centre has the highest provision of licensed premises; New Town, including George Street, and the West End, including Lothian Road and the Grassmarket have the highest provision with over 600 licensed premises between them, followed by a further 167 licensed premises in the High Street and the Cowgate. Southside and Meadows and Morningside have another 134 licensed premises, Leith has 148 and Stockbridge and Canonmills 70. It is worth noting that whilst the Leith Walk area has fewer licensed premises (89), it is geographically smaller and so proportionately they add to the overall high level of provision for the North and Leith area. Gorgie/Dalry features among one of the areas with higher provision with 61 premises while Fountainbridge has 41.

Collisions where a pedestrian has been injured as a result of a road traffic collision due to alcohol impairment are largely concentrated into the area where there is higher provision of licensed premises, mainly the city centre. Lothian Road, George Street, the Cowgate and the area near the Omni Centre have at least three incidents; also three incidents in Leith Walk and Great Junction Street. A total of 84 pedestrians have been injured in an accident with a motor vehicle whilst drunk, with 22 being killed or seriously injured. The number of casualties has increased over the years, with 16 in 2008/9, 19 in 2009/10, 26 in 2010/11 and 23 in 2011/12. Collisions tend to happen over Friday and Saturday nights between 10pm and 4am, when pubs and clubs close, also a slight peak on Fridays between 4pm and 5pm.

Of the 84 people, 65 (77%) were male, 18 female. A total of 61 incidents were classed as minor, 18 as serious and three were fatal. Pedestrians ranged from 14 to 71 years of age, with a median age of 28 years. Thirty two (38%) of incidents took place in the City Centre, 7 each in Forth and Sighthill/Gorgie and 6 each in Leith Walk and Craighentenny/ Duddingston. The four fatalities occurred in the City Centre,

Leith Walk, Sighthill/Gorgie and on the M8 between Edinburgh and Glasgow; three were male and one female, all aged between 19 and 41 years.

Police Scotland data from April 2012 to March 2013 show that there were a total of 30 road traffic accidents in which alcohol was involved in Edinburgh. Of the 30 people, 27 were male (90%) and were aged between 18 and 72 years with a median age of 36 years. Three were fatal, 17 minor and 10 serious. In the majority of incidents (18, 60%) pedestrians were injured, with 6 drivers, 5 passengers (one pillion on motorcycle) and one bicycle rider. In the majority of incidents (18, 60%) the pedestrian was under the influence of alcohol, while 8 drivers, two motorcyclists, one bus passenger and one cyclist were drunk. Seventeen incidents were caused by a drunk pedestrian, 6 of which were minor, 10 serious and one fatal. Eleven of the 30 incidents took place in the city centre, 3 in Southside/Newington, 2 each in Sighthill/Gorgie, Pentlands, Leith, Leith Walk, Fountainbridge/Craiglockhart, Craighentenny/Duddingston and Almond and one in Corstorphine/Murrayfield and Liberton/Gilmerton.

6. Impact of Licences – Evidence from the Literature

There is a long observed link between number of licensed premises in an area and alcohol problems. Since 2000, more than 50 separate studies have been published which have demonstrated a significant association between outlet density and a range of alcohol problems, including violence, hospital admissions, risky/underage drinking, alcohol related traffic accidents, sexually transmitted disease, and child abuse/neglect²⁹.

A substantial number of studies have examined the relationship between outlet density and a variety of alcohol related problems. The clearest evidence of a relationship comes from natural experiments in countries where large scale policy changes have been implemented over a short period of time. For example, in Canada, between 2003 and 2008 increased density of off-sales outlets was associated with a rise in alcohol sales per head of population as well as 27.5% increase in alcohol related death rate per 1000 of the population for each extra outlet. Evidence consistently shows a link between areas of high outlet density and increased risky drinking and alcohol related harm, particularly violence. A recent systematic review showed significant positive relationships between density of outlets and levels of violence, alcohol-related traffic accidents, self reported injuries and suicide, STDs and child abuse and neglect. Association found between outlet density and domestic violence, with 29% above average increase in the domestic violence rate for each additional outlet per 1000 residents of a postcode. In England, nearly 10% of all alcohol specific hospital admissions of young people could be attributed to off-licence density, with every two extra off-licences per 100,000 resulting in one alcohol specific admission of an under 18 year old per 100,000. In Switzerland, banning the sale of alcohol between 9pm and 7am and sales from petrol stations and video stores resulted in a significant decrease in hospital admissions for alcoholic intoxication in adolescents; strongest effect on 10-15 year olds¹.

According to the World Health Organisation (2010) increased density of alcohol outlets is associated with increased levels of consumption among young people, increased levels of assault and other harm such as homicide, child abuse and neglect, self inflicted injury and with less consistent evidence, road traffic injuries.

Reducing the hours and days of sale of alcoholic beverages leads to fewer alcohol-related problems, including homicides and assaults³⁰.

Young et al. (2013) conducted a study to measure the association between young peoples' alcohol consumption and the density and proximity of alcohol outlets within Glasgow. They analysed self-reported alcohol consumption, number of licensed premises, the distance in metres from pupils' homes to premises and the number of premises within 1200 metres. More than half of pupils reported drinking alcohol weekly and 16% reported drinking daily. Statistically significant associations were found between alcohol consumption and the availability of off-sales premises; no associations were found with other types of licensed premises. Those living within 200m of an off-sales outlet were almost twice as likely to drink alcohol on a weekly basis as those living within 800m of such outlets. Also, those living in areas of high density, where there were over 30 off-sales outlets within 1200m from their home, were 50% more likely to drink weekly. The number of pubs and distance from pupils' homes had no effect on whether they consumed alcohol on a weekly basis³¹.

The findings of this study suggest that living close to alcohol off-sales premises increases the likelihood of 15 year olds drinking alcohol on a weekly basis. The proximity and density of on-sales outlets, such as pubs, had no effect on young peoples' alcohol consumption, which may be due to the higher cost of alcohol and the stricter enforcement of age restrictions within such premises. While there are a number of limitations to the study, including the fact that the study was conducted in one geographical location, it is apparent that living near a high number of off-sales premises significantly increases the likelihood of young people drinking alcohol on a weekly basis. The authors argue that restricting the number of off-sales outlets and increasing the distance between outlets may reduce levels of alcohol consumption among young people; however, they also recognise that such an approach could potentially encourage large groups to gather around the few remaining outlets.

7. Linking Licensing and Alcohol Related Harm in Edinburgh

Appendix 2 sets out the city by Intermediate Zone (for further information about intermediate zones see

<http://www.scotland.gov.uk/Publications/2005/02/20732/53083>) and by

Neighbourhood Partnership area (see appendix 2). It maps the following pieces of data per 10,000 of the population:

- On sales licenses
- Off sales licenses
- Alcohol related Crime
- Alcohol related hospital discharges

The figures which are higher than the city average are highlighted in red.

The table identifies that the **City Centre** and **Leith** Neighbourhood Partnership Areas have higher numbers of alcohol licenses, crimes and hospital discharges than the Edinburgh city average.

When looked at by intermediate zone it identifies that the following areas have higher numbers alcohol licenses, crimes and hospital discharges than the Edinburgh city average.

- Tollcross
- Dalry and Fountainbridge
- Southside and Canongate
- Old Town and Leith Street
- South Leith
- Leith Docks
- Portobello.

The map in Appendix 3 shows the geographic distribution of the areas of Edinburgh with high rates of alcohol-related hospital admissions, alcohol-related crime, on-sales premises and off-sales premises in red and the black areas have low numbers of on-sales premises but high number of off-sales and high rates of alcohol-related crimes and hospital admissions. The seven problematic areas are included in the map, as

well as areas with slightly lower rates of licensed premises, crime and hospital admissions, which are close to or higher than the average for Edinburgh.

8. Recommendations Resulting from this Report

Alcohol Focus Scotland has outlined a number of potential interventions that Licensing Boards could implement to regulate the availability of alcohol³². These recommendations are: managing the overall availability of alcohol in order to prevent and reduce both acute and chronic alcohol-related problems; restricting licensed hours for both on-sales and off-sales premises; limiting the number, type and capacity of on- and off-licensed premises; managing the operating conditions of licensed premises; and imposing conditions on individual premises. It is anticipated that these measures can reduce and prevent alcohol-related problems, reduce violence and public disorder, limit the amount of alcohol purchased by vulnerable groups such as adolescents and those with alcohol dependency, and challenge the widely held view in Scotland that consuming alcohol is a normal and acceptable part of everyday life.

Recommendations

1. The Licensing Board should accept the information provided in this report and considers the level of alcohol-related harm in the City of Edinburgh when preparing licensing policy and making local decisions.
2. Local policy should consider the overall supply of alcohol in Edinburgh as well as individual premises due to changes in patterns of purchasing from off-licensed premises.
3. The Licensing Board should communicate to the Edinburgh Alcohol and Drug Partnership (EADP) if this report has been helpful and if data should continue to be monitored and reported on. Alternatively, the EADP should seek clarification as to which further data would be of use to the Board and ask for their commitment to continue to be involved in the process.
4. As noted already there is already a well established area of overprovision within the City. Using local evidence there are options for the Licensing Board in considering whether to extend this area of overprovision. If the Board identifies an area as overprovided for, this would mean it would have a presumption against granting further licences in that area; however the

Licensing Board would need to consider each application on its own merit and could reserve its position to grant an application where it considers that the Licensing Objectives would not be undermined. The options offered to the Board, which aim to address the high number of licensed premises and related harm, are:

Option 1: The current identified area of overprovision (Grassmarket, Cowgate and surrounding streets) should be extended to the whole of the Edinburgh City and all future on-sales and off-sales premises licences should be refused, unless the applicant can demonstrate that the new licence will not contribute to overprovision.

Option 2: The current identified area of overprovision should be extended to include the City Centre and Leith neighbourhood partnership areas, including the seven areas with the highest rates of licensed premises, alcohol-related hospital admissions and alcohol-related crimes. These areas are Tollcross; Dalry and Fountainbridge; and Portobello. All future on-sales and off-sales licences should be refused in these areas, unless the applicant can demonstrate that the new licence will not contribute to overprovision.

Option 3: The seven most problematic areas of the City with high rates of licensed premises, alcohol-related hospital admissions and alcohol-related crimes should be declared as areas of overprovision and all future on-sales and off-sales licences within these areas should be refused, unless the applicant can demonstrate that the new licence will not contribute to overprovision. These areas are Tollcross; Dalry and Fountainbridge; Southside and Canongate; Old Town and Leith Street; South Leith; Leith Docks; and Portobello.

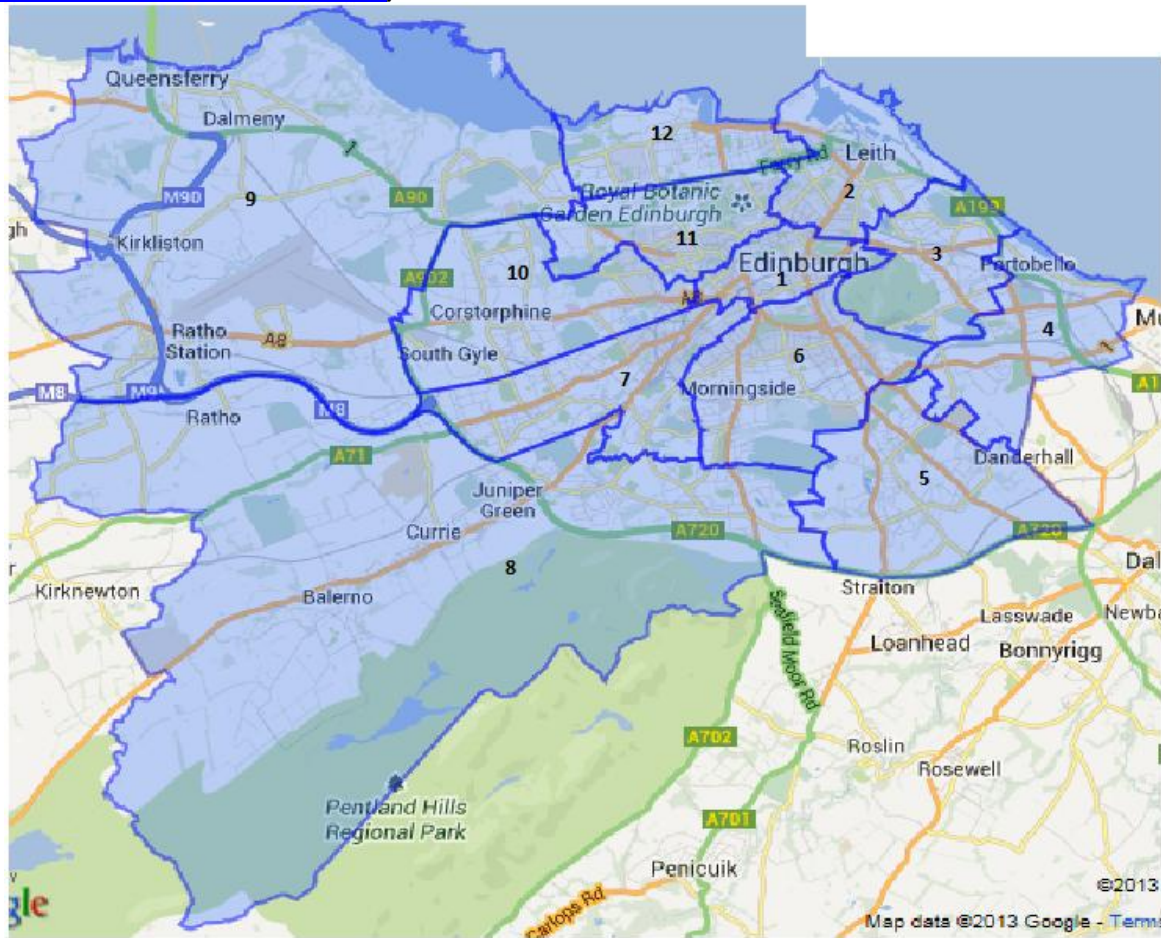
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Appendix 1

Map of Edinburgh Neighbourhood Partnership Areas (Source: www.edinburghnp.org.uk)



Key

- | | |
|--------------------------------|----------------------|
| 1 City Centre | 7 South West |
| 2 Leith | 8 Pentlands |
| 3 Craigentinny and Duddingston | 9 Almond |
| 4 Portobello and Craigmillar | 10 Western Edinburgh |
| 5 Liberton and Gilmerton | 11 Inverleith |
| 6 South Central | 12 Forth |

Appendix 2

Licensed premises, alcohol-related hospital admissions and alcohol-related crimes per intermediate zone, areas highlighted in red are higher than those for Edinburgh as a whole (*Source: Police Scotland/ GROS/ScotPHO/HIU*)

Intermediate zone/neighbourhood partnership	On-sales per 10,000 population	Off-sales per 10,000 population	Alcohol-related hospital admissions per 10,000 population	Alcohol-related crimes per 10,000 population
EDINBURGH	27.5	10.4	89.4	106.5
Almond				
TOTAL	24.5	6.6	67.5 (mean)	55.7
Ratho, Gogarburn & Airport	57.2	7.1	72.0	101.1
Kirkliston	13.5	8.1	90.4	67.4
Barnton & Cammo	7.2	7.2	51.3	0.0
Cramond	3.6	0.0	43.6	8.4
Silverknowes & Davidson's Mains	19.7	5.6	66.1	41.8
South Queensferry(East) & Dalmeny	45.8	8.7	74.7	86.1
South Queensferry West	3.0	3.0	74.7	64.0
City Centre				
TOTAL	221.6	32.4	91.3 (mean)	512.6
Tollcross	113.9	21.5	115.2	475.4
Dean, West End & West Coates	168.7	24.3	65.7	197.2
Old Town & Leith Street	372.5	59.9	168.7	1881.1
New Town West	111.0	20.0	48.7	255.5
Hillside & Calton Hil	36.6	17.4	94.1	90.9
New Town East	49.6	0.0	55.1	65.6
Craigentinny and Duddingston				
TOTAL	10.9	9.3	110.9 (mean)	119.1
Willowbrae & Duddingston Village	18.9	6.3	68.8	37.3
Duddingston	0	9.1	56.1	2.7
Southside & Canongate	50.5	13.6	169.9	428.8
Northfield	9.0	6.0	122.5	40.8
Mountcastle	4.6	4.6	69.0	28.2
Abbeyhill, Meadowbank & Marionville	8.2	11.5	104.9	101.8
Restalrig (Loganlea)	3.2	9.5	131.2	57.5
Craigentinny	15.4	3.8	80.3	41.8
Restalrig & Lochend	3.0	12.0	196.0	129.2
Forth				
TOTAL	7.8	13.9	117.0 (mean)	66.6
Muirhouse	7.8	13.0	183.4	104.0
West Pilton	0	3.1	142.3	71.6
Boswall & Pilton	2.4	7.1	86.3	45.8
East Trinity & Bonnyhaugh	13.7	6.9	58.8	46.4
Trinity	7.8	10.4	59.0	8.7
Waterfront & Granton	5.0	15.0	172.0	104.4
Inverleith				
TOTAL	33.9	12.0	70.3 (mean)	24.0
Blackhall	6.7	6.7	58.5	18.5
Stockbridge	37.7	11.0	74.7	34.0
Craigeleith	2.7	5.4	51.2	18.6
Comely Bank	10.1	6.7	47.3	0.0
Drylaw	7.5	10.0	130.5	65.1
Inverleith	36.2	6.0	59.7	22.5
Leith				
TOTAL	34.2	15.4	134.2 (mean)	124.0
Lorne	23.5	12.5	148.5	119.9

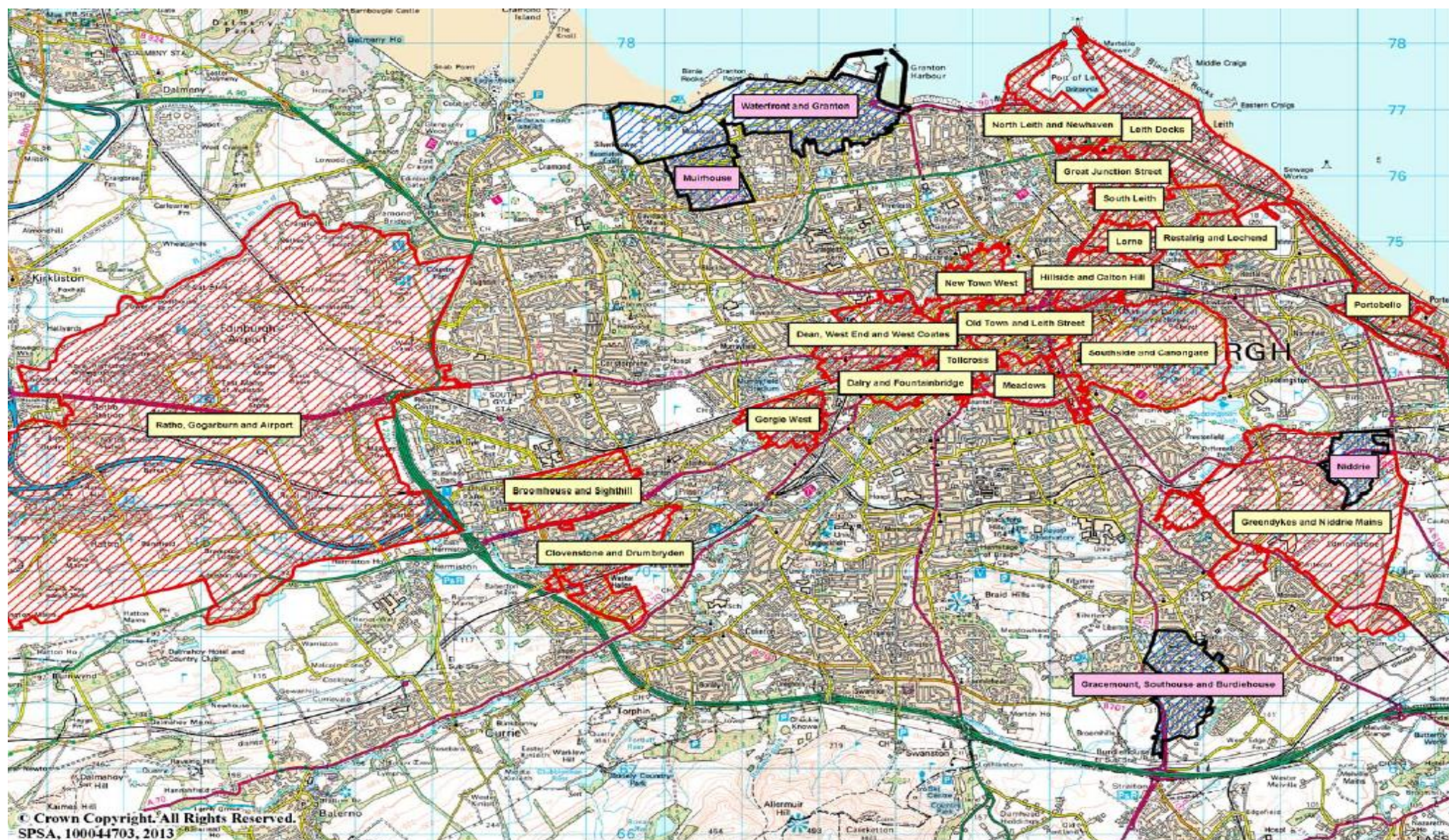
Intermediate zone/neighbourhood partnership	On-sales per 10,000 population	Off-sales per 10,000 population	Alcohol-related hospital admissions per 10,000 population	Alcohol-related crimes per 10,000 population
EDINBURGH	27.5	10.4	89.4	106.5
Broughton	16.4	10.1	95.7	63.2
Hermitage Park & Prospect Bank	8.3	8.3	82.2	39.8
South Leith	35.7	19.9	155.4	195.0
Bonnington & Pilrig	16.2	12.1	151.9	84.6
Great Junction Street	39.9	10.0	153.7	293.2
Leith Docks	76.1	16.3	122.3	138.5
North Leith & Newhaven	28.1	14.0	163.9	101.6
Liberton and Gilmerton				
TOTAL	7.7	10.2	110.7 (mean)	55.8
Gracemount, Southouse & Burdiehouse	2.3	9.2	180.5	130.5
Mortonhall	8.7	4.4	55.8	7.6
Hyvots & Gilmerton Dykes	9.7	19.4	105.6	45.2
Liberton East	0	10.9	56.7	3.0
Ferniehill, South Moredun & Craigour	5.8	5.8	126.2	70.2
Moredun	7.6	3.8	152.9	109.6
Liberton West	11.0	11.0	67.7	19.1
The Inch	4.6	9.2	140.1	24.2
Pentlands				
TOTAL	11.8	5.3	76.2 (mean)	34.2
Balerno	14.3	4.1	63.7	5.2
Bonaly & Pentlands	13.1	5.3	41.5	10.7
Fairmilehead	4.9	2.4	53.5	5.8
Comiston and Swanston	4.8	2.4	53.7	15.6
Currie East	26.8	11.5	63.1	31.0
Currie West	2.3	0	68.1	20.0
Baberton and Juniper Green	14.5	5.8	57.1	25.1
Oxgangs and Firhill	0	5.5	115.7	69.8
Calders	2.5	5.0	174.3	101.7
Colinton & Kingsknowe	5.7	1.9	66.4	27.8
Parkhead	3.7	11.2	81.1	79.8
Portobello and Craigmillar				
TOTAL	17.5	13.8	134.8 (mean)	131.3
South East Bypass	8.5	0	58.3	19.6
Greendykes & Niddrie Mains	6.6	16.6	215.3	476.0
Niddrie	0	6.0	201.3	183.6
Jewel, Brunstane & Newcraighall	13.9	21.0	102.3	49.4
Bingham, Magdalene & The Christians	3.0	8.9	185.8	96.4
Joppa	19.9	6.6	69.9	28.8
Portobello	63.8	24.9	110.6	130.0
South Central				
TOTAL	45.3	18.6	62.1	43.0
Braids	21.8	3.63	48.9	20.6
Craighouse & South Morningside	7.8	15.6	62.3	15.4
Blackford	11.5	4.9	58.8	22.4
Morningside	13.4	13.4	55.4	21.8
Merchiston & Greenhill	21.2	6.4	64.4	38.8
Grange	17.5	7.8	40.2	39.8
Prestonfield	12.8	3.2	88.7	35.6
Dalkeith Road	23.0	8.6	56.4	58.1
Marchmont West	3.5	7.1	44.7	35.4
Marchmont East & Sciennes	11.0	9.2	63.9	21.3
Bruntsfield	19.9	10.0	73.6	12.4

Intermediate zone/neighbourhood partnership	On-sales per 10,000 population	Off-sales per 10,000 population	Alcohol-related hospital admissions per 10,000 population	Alcohol-related crimes per 10,000 population
EDINBURGH	27.5	10.4	89.4	106.5
Meadows	52.6	14.8	87.7	164.8
South West				
TOTAL	17.4	13.3	114.2 (mean)	108.1
Craiglockhart	15.2	5.7	42.7	24.9
Longstone & Saughton Mains	7.7	7.7	134.1	152.9
Broomhouse & Sighthill	12.8	16.0	168.2	146.3
Hutchison & Moat	11.2	6.7	100.2	150.8
Shandon	8.3	6.2	58.8	31.8
Stenhouse	7.6	9.4	129.2	97.5
Gorgie West	11.5	18.3	108.2	122.2
Polwarth	17.3	8.6	74.5	34.2
Gorgie East	14.7	8.8	127.8	122.0
Dalry & Fountainbridge	39.3	15.4	125.2	150.5
Clovenstone & Drumryden	3.4	8.4	187.8	182.4
Western Edinburgh				
TOTAL	13.9	7.6	68.7	46.6
South Gyle	9.4	21.1	65.5	65.3
Forrester Park & Broomhall	6.4	6.4	76.6	51.3
Carrick Knowe	4.1	4.1	73.1	104.9
Balgreen & Roseburn	25.7	12.9	81.2	72.4
Corstorphine	38.5	10.7	74.2	33.5
East Craigs	7.1	2.4	44.9	12.1
Murrayfield & Ravelston	14.1	0	33.0	27.7
Clerwood & Corstorphine (Hillview)	3.5	0	46.6	66.0
Bughtlin & Parkgrove	0	7.1	79.8	21.6
Clermiston	2.3	6.8	112.1	45.1

*Intermediate zones (IZ) were created for use with Scottish Neighbourhood Statistics (SNS) as a level between data zones (500 to 1000 people) and large scale local authorities. IZs contain between 2500 and 6000 people

(Source: <http://www.scotland.gov.uk/Publications/2005/02/20732/53083>)

Appendix 3: Map of the high-impact areas. (Source: Police Scotland/ GROS/ScotPHO/HIU)



The red areas have high rates of alcohol-related hospital admissions, alcohol-related crime, on-sales and off-sales premises; the black areas have low numbers of on-sales premises but high number of off-sales and high rates of alcohol-related crimes and hospital admissions.

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ⁱ Available at http://www.edinburgh.gov.uk/downloads/file/9583/overprovision_in_edinburgh-jim_sherval_nov_2011

ⁱⁱ SQW Consulting (2010). Edinburgh's evening economy: A report for the City of Edinburgh Council. http://www.edinburgh.gov.uk/downloads/file/2918/edinburgh_s_evening_economy