



A Meeting of the Forum will be held via MS Teams  
on

**Wednesday 5 June 2024 at 16.00hrs**

**AGENDA**

1. Apologies for absence
2. Declarations of interest – members should declare any interests they have in any business on the agenda, or any conflicts of interests arising, and decide if they should withdraw from dealing with any item of business
3. Order of Business
4. Confirm Draft Minute of Licensing Forum Meeting held on 6 March 2024 (herewith)
5. Minutes of Licensing Board – For Information Only
  - a) [9 February 2024](#)
  - b) [8 March 2024](#)
  - c) [12 April 2024](#)
6. Updates:
  - a) Chair Update
  - b) Police Update
7. Alcohol Focus Scotland
  - a) E-Focus February 2024(herewith)
  - b) E-Focus March 2024 (herewith)
  - c) E-Focus April 2024 (herewith)
8. [Statement of Licensing Policy](#) & Update from LSO – LSO
9. Feedback from Alcohol Focus Scotland Training Session – Formulation of a workplan – NHS
10. Flash report feedback
11. Minimum Unit Pricing – LSO & Trade

12. ASB at Livingston Centre

13. Euro 2028 Commercial Rights Protection Consultation

14. Membership and Recruitment

15. Future Meeting Dates (to be approved):

- 4 September 2024 at 4pm via MS Teams
- 4 December 2024 at 4pm via MS Teams

16. Workplan (herewith)

**NEXT MEETING – 4 September 2024 (TBC)**

#### **FORUM OBJECTIVES**

- (a) To keep under review the operation of the 2005 Act in West Lothian and in particular, the exercise by the West Lothian Licensing Board of its functions under the Act.**
- (b) To give such advice and to make such recommendations to the Board in relation to those matters as the Forum considers appropriate.**

For further information contact Anastasia Dragona 01506 281601

[anastasia.dragona@westlothian.gov.uk](mailto:anastasia.dragona@westlothian.gov.uk)

MINUTE of MEETING of WEST LOTHIAN LOCAL LICENSING FORUM held within MS TEAMS VIRTUAL MEETING ROOM, on WEDNESDAY 6 MARCH 2024

### **Present and Apologies**

<b>First Name</b>	<b>Surname</b>	<b>Category</b>	
Helen	Davis	WL Youth Action Project	Present
Mike	Duncan	WL CHCP	Present
Douglas	Frood	LSO	Present
Anne	Crookston	Education	Absent
Laura	Dougall	NHS Public Health	Apologies
Mark	Vance	Social Work/Health	Present
Arun	Randev	Trade	Present
Sandy	Ross	Housing (substituting for Alison Smith)	Present
Alison	Smith	Housing	Apologies
Donna	Pearey	Police Scotland	Apologies
Anastasia	Dragona	Clerk	Present

#### **1. ELECTION OF CHAIR**

Arun Randev was elected as Chair for the year.

#### **2. DECLARATIONS OF INTEREST**

There were no declarations of interest made.

#### **3. LICENSING FORUM MINUTES**

The Forum approved the minutes of its meeting held on 6 December 2023.

##### **Matters Arising:**

It was noted that the following update from Best Bar None was still pending: "In response to a query from members, the Coordinator undertook to provide figures for licensed premises joining the scheme before and after Covid as a means of assessing interest in the scheme within the West Lothian area."

#### **4. MINUTES OF LICENSING BOARD**

The Forum noted the Licensing Board minutes of 12 May 2023, 14 July 2023, 11 August 2023, 8 September 2023, 13 October 2023, 10 November 2023 and 12 January 2024.

## **5. UPDATES**

It was noted that Housing Services had regular contact with Police Scotland and therefore the Housing representative could present updates when the Police Scotland representative was not in attendance.

Flash reports were also suggested for collating updates, which some members had already been completing as part of their roles outwith the Forum. These could be circulated with the agenda and would be useful in making members aware of updates before a meeting.

### Decision

The flash reports template would be circulated to members for initial assessment and comments.

## **6. ALCOHOL FOCUS SCOTLAND**

The Forum noted the E-Focus Newsletters dated May 2023, June 2023, July 2023, August 2023, September 2023, October 2023, November 2023 and January 2024.

### Decision

The newsletters should continue to be circulated with the agenda as the members found them useful.

## **7. STATEMENT OF LICENSING POLICY**

The LSO advised that the Licensing Policy for 2023/28 had been published. He then referred to the recent "Bengal Ltd" decision, which established the difference between the public and individual complainers. He also advised that the proposed minimum unit pricing of 65 pence had not yet come into effect.

### Decision

1. To note the update from the LSO.
2. LSO to share "Bengal Ltd" decision with members.
3. Minimum Unit Pricing to be included on the next agenda.

## **8. FEEDBACK FROM ALCOHOL FOCUS SCOTLAND TRAINING SESSION**

### Decision

It was agreed that the NHS representative would be asked for an update

and to lead the formulation of a workplan.

#### **9. DRINKSAFE UPDATE**

The Forum advised that DrinkSafe was a commercial tool and its use was in the discretion of individuals or businesses.

##### Decision

To note that DrinkSafe was a commercial tool.

#### **10. POTENTIAL ESTABLISHMENT OF A NATIONAL LICENSING FORUM GROUP**

The Forum is supportive of the initiative but noted that funding would be required for the initiative to be progressed.

##### Decision

To note that the Forum was supportive of the initiative; however, funding would be required for the initiative to be progressed.

#### **11. 2023 JOINT WEST LOTHIAN LICENSING BOARD AND WEST LOTHIAN LICENSING FORUM SESSION**

The Licensing Board and Licensing Forum had met in December 2023 as per the statutory requirement.

Ways the Forum could be useful to the Licensing Board were then discussed. Members were asked to further consider how the Forum could be helpful to the Board, including the flash reports previously suggested as well as the formulation of a concrete workplan to guide the Forum's proceedings.

##### Decision

Members were asked to consider ways the Forum could be helpful to the Licensing Board.

#### **12. MEMBERSHIP AND RECRUITMENT**

The Forum discussed potential ways of attracting membership and agreed that contributions from Community Councils as well as local youth would be useful. Caution should be exercised when communicating issues to the Forum, as those should be within the Forum's remit.

##### Decision

Community Councils to be approached, either directly or via the Council's Regeneration Officers, for contributions.

**13. MEETING DATES 2024**

It was noted that the next meeting was scheduled to take place on 5 June.

Decision

The June meeting date was approved, while further meeting dates would be agreed at subsequent meetings.

**14. WORKPLAN**

Members reiterated the need for a strong workplan to guide the business of the Forum.

Decision

Members were to consider topics for discussion at future meetings.

**Dragona, Anastasia**

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**From:** Alcohol Focus Scotland <enquiries@alcohol-focus-scotland.org.uk>  
**Sent:** 29 February 2024 16:30  
**To:** Dragona, Anastasia  
**Subject:** Alcohol Focus Scotland latest - Feb 2024

Newsletter from Alcohol Focus Scotland

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February 2024

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- **People in recovery and MUP**
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- **Wellbeing And Sustainable Development Bill**
- **A review of alcohol services in Scotland's acute hospitals**
- **Policy Actors' Perceptions of Conflicts of Interest and Alcohol Industry Engagement in UK Policy Processes**
- **'Just a colour?': Exploring women's relationship with pink alcohol brand marketing within their feminine identity making**
- **Neurodiversity in schools: Intro to Fetal Alcohol Spectrum Disorder (FASD)**
- **How can we raise awareness of the link between alcohol and breast cancer?**
- **CPG on Improving Scotland's Health: March Meeting**



## Scottish Government announce plans to increase MUP

Following a **consultation** on minimum unit pricing (MUP) in late 2023, the Scottish Government has brought forward two pieces of secondary legislation: one to continue the policy and one to increase the price to 65p per unit. The Scottish Parliament is expected to vote on the two draft items of legislation before the end of April 2024.

Welcoming the announcement, Alison Douglas, chief executive of Alcohol Focus Scotland, said, “It’s encouraging to see cross-party support on the issue. With the recent rise in alcohol deaths, and the impact of the pandemic, we need the Scottish Parliament to work together. Without support to increase the price, the positive effects we’ve seen will be reversed, with hundreds of people experiencing suffering and loss because of alcohol. This is particularly true for people living in our most deprived communities, where we’ve seen the greatest benefits from MUP.”

The announcement came after a Health, Social Care and Sport Committee **meeting** where MSPs took evidence on the impact of minimum unit pricing from public health advocates including our chief executive, Alison Douglas, as well as from industry representatives. **Read our written evidence.**

Ahead of the vote, we are campaigning to ensure that the policy is maintained and increased. **Write to your MSP** and ask them to vote in favour of continuing and increasing MUP, to save and improve the lives of people in Scotland.

 **Read our full comment**

 **More on MUP**

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MUP works.

To optimise this life-saving policy the Scottish Parliament must:



Vote to  
retain MUP



Uprate to at least  
65p per unit



Link with  
affordability



## UPDATE

### People in recovery and MUP

Listening to and highlighting the voices of lived and living experience is an important part of our work at Alcohol Focus Scotland. Over the past 2 years, our **Involvement team** has been working with people and organisations to help guide the development of alcohol policy.

More recently, our Involvement Team has been speaking with people in recovery about their thoughts on MUP. Last month, the team spoke with people from **Borders in Recovery** to hear their opinion of MUP.

The group were strongly in favour of raising the MUP, feeling that it should be set even higher than 65p. Whilst recognising the limited impact of MUP on current dependent drinkers, they felt that MUP was important in preventing people from developing dependency in the first place. An alcohol harm prevention levy was a very popular idea; the group were shocked to discover that retailers profit from the policy and thought the money would be better spent on alcohol treatment and care. **See their views demonstrated in illustration.**

 [Check out our MUP playlist on YouTube](#)

## UPDATE

## Levy on supermarkets could raise £57 million a year

**New research** from the Fraser of Allander Institute at the University of Strathclyde shows that a levy on shops and supermarkets that sell alcohol could raise £57 million a year.

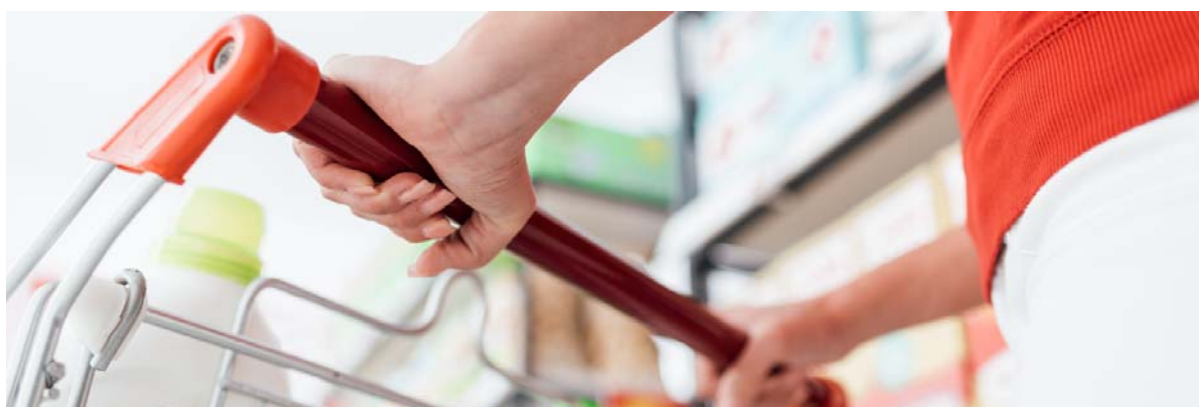
While off-sales of alcohol have gone down by an estimated 3.5% due to minimum unit pricing, this research provides new estimates that suggest revenue from alcohol has increased by more than £30m a year. This means shops and supermarkets are likely making greater profits.

The report findings demonstrate the potential for retailers that profit from the sale of alcohol to contribute towards the financial burden alcohol places on society. According to recent estimates, alcohol costs Scotland up to £10 billion every year, including £700 million in health and social care costs.

Alcohol Focus Scotland have welcomed the Scottish Government's announcement in the recent Budget that they are considering reintroducing the Public Health Supplement.

 [Read more](#)

 [Get in touch to discuss the levy](#)



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**Wellbeing And Sustainable Development Bill**

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Alcohol Focus Scotland has responded to the Scottish Government **consultation** on proposals for a Wellbeing and Sustainable Development Bill, intended to help improve decision-making and the implementation of the National Performance Framework.

AFS believes it is crucial that the health and economic impacts of health harming products, such as alcohol, are actively considered as part of Scotland's Wellbeing Economy, and continue to be reflected in the National Performance Framework. We highlighted that the development of a wellbeing economy could provide an opportunity to reduce the harm caused by alcohol by prioritising policies and interventions that focus on improving overall societal well-being rather than solely focusing on economic growth. This approach could involve implementing measures such as investing in public health campaigns, enhancing access to treatment and support services, promoting community engagement, and regulating alcohol marketing and availability to create a healthier environment for individuals and communities.

By adopting a wellbeing-focused approach, Scotland could also address the root causes of alcohol-related harm and work towards creating a more resilient society.

 **Read our response**

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## **RESEARCH**

### **A review of alcohol services in Scotland's acute hospitals**

Scottish Health Action on Alcohol Problems (SHAAP) commissioned a review of alcohol services in major Scottish hospitals, finding provision is fragmented.

SHAAP have urged the Scottish Government to rapidly improve the provision and impact of alcohol care teams, to ensure people with alcohol problems get the support and treatment they deserve.

 **Read the report**

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## RESEARCH

### **Policy Actors' Perceptions of Conflicts of Interest and Alcohol Industry Engagement in UK Policy Processes**

Alcohol industry interference has been identified as a major barrier to public policy progress in reducing alcohol harm. New research published in the International Journal of Health Policy and Management examines how different policy actors view alcohol industry involvement in policy, and their beliefs on what sorts of interactions are appropriate and not appropriate.

The researchers aimed to address the current lack of alcohol-specific guidance on conflict of interest (COI) and a lack of agreement amongst researchers, policymakers, and civil society actors on what constitutes a COI and thus what forms of industry engagement should be precluded.

The Institute of Alcohol Studies will draw on this research to inform the development of guidelines for UK government to mitigate risks associated with commercial conflicts of interest in alcohol policy settings.

 **Read the blog post**

 **Read the research**

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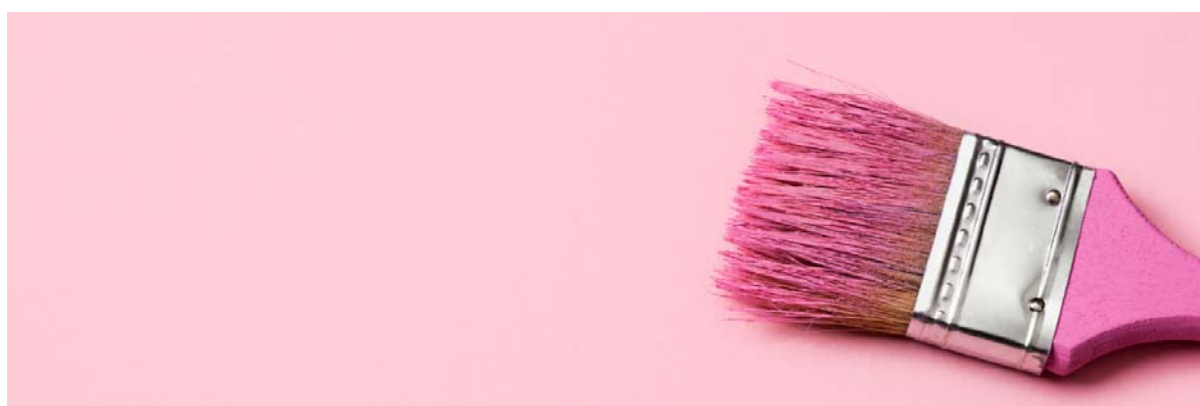
## RESEARCH

## **‘Just a colour?’: Exploring women's relationship with pink alcohol brand marketing within their feminine identity making**

New research concludes that in the current context of contemporary feminism, in which (young) women are endorsing feminist identities, women's relationship with feminism influences their attitudes to marketing, such as pinking; the overuse of the colour pink as a feminine aesthetic, and their likelihood of consuming such products.

The research, published in the International Journal of Drug Policy, explored how women relate to and view the pinking of alcohol products and marketing, and how such products feature in their performance of femininities through drinking practice. Whilst pink marketing is effective in appealing to some women as part of their feminine identity-making, the pinking of products actually prevents others from purchasing and consuming such products as it is deemed unrelatable to their identities.

 [Read more](#)



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### **EVENT**

## **Neurodiversity in schools: Intro to Fetal Alcohol Spectrum Disorder (FASD)**

This online webinar on **Wednesday 13 March** hosted by Education Scotland will be of interest to practitioners working across all sectors of education who are interested in expanding their knowledge and understanding of neurodevelopmental presentations in the classroom.

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The session will provide a brief introduction to Fetal Alcohol Spectrum Disorder (FASD) and signposting to access further information, guidance and support in relation to supporting learners with FASD in Scottish education settings.

 **Read more and sign up**

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## **EVENT**

### **How can we raise awareness of the link between alcohol and breast cancer?**

Breast cancer is the most common cancer in the UK. In women, even low levels of alcohol consumption increase breast cancer risk. Overall, the more someone drinks, the more their risk of breast cancer increases.

Researchers at Oxford Brookes University conducted a study about alcohol and the risk of breast cancer. They asked:

- How can we raise awareness of the link between alcohol and breast cancer?
- How can we support women who are thinking about reducing their alcohol consumption?

 **Join the free webinar on Thursday 21 March to hear about their findings**

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## **EVENT**

### **CPG on Improving Scotland's Health: March Meeting**

The next meeting of the Cross-Party Group on Improving Scotland's Health will be held as a hybrid meeting, online and in Parliament on **Tuesday 26 March 2024, 18:15-19:30**.

We will be joined by **Jenni Minto MSP, Minister for Public Health and Women's Health**. The Minister will speak about progress made so far in tackling non-communicable diseases (NCDs), by addressing the risk factors of alcohol, tobacco, and unhealthy food; the Scottish Government's future priorities; and how the CPG can

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support the aim of creating a public health Parliament.


The meeting is only for interested MSPs and registered group members who have completed a declaration of interest (DOI) form, who will have already received the registration link for in-person and online attendance. Please contact the secretariat at [CEO@ashscotland.org.uk](mailto:CEO@ashscotland.org.uk) if you would like to become a member of the CPG.

 **Find out more about the CPG**



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March 2024

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  - **Alcohol and the Brain**
- 
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## HSCSC votes in favour of continuing and increasing MUP

The Health, Social Care and Sport Committee has now voted in favour of retaining and uprating MUP to 65p – with strong cross-party support.

The Committee voted after more than 80 organisations from across Scotland and beyond, including dozens of medical, faith organisations and charities, **wrote to them** calling for cross-party support for the renewal of MUP and to uprate the price to 65p per unit.

The Committee's decision came on a day when Public Health Scotland **released figures** showing the true scale of alcohol harm, with 2820 people estimated to die from alcohol each year when deaths from conditions such as alcohol-related cancers and cardiovascular disease are counted. This is more than twice as high as alcohol-specific death figures that are reported annually.

Responding to the news, **Alison Douglas, CEO of Alcohol Focus Scotland** said the vote is "another big step forward towards renewing and uprating the minimum unit price (MUP) for alcohol to 65p per unit, and we're delighted that there is strong cross-party support for this policy.

-  [Read more about the letter](#)
  -  [Read the Official Report](#)
  -  [Read our reaction to the vote](#)
-

## The Scottish Parliament

Must come together to continue  
and increase minimum unit  
pricing to #65pMUP

#MUPSavesLives

### UPDATE

## New PHS Dashboard reveals true scale of alcohol harm in Scotland

Public Health Scotland has published a new **Alcohol Dashboard**, which includes figures on alcohol attributable deaths and hospital admissions for the first time since a **Scottish Public Health Observatory Report in 2018**.

In addition to the 1185 deaths wholly attributable to alcohol in 2020, reported as alcohol-specific deaths, there were 1635 deaths partially attributable to alcohol. This means that in total there were 2820 deaths due to alcohol in 2020, more than double the number reported in annual death statistics.

Commenting on the new Alcohol Dashboard figures, **Alison Douglas, CEO of Alcohol Focus Scotland** said: "We welcome the launch of Public Health Scotland's Alcohol Dashboard which can help inform policy and practice on reducing alcohol harm in Scotland both nationally and locally. It is particularly useful to have new data on alcohol attributable deaths and hospitalisations in Scotland. This provides a much clearer – but concerning – picture of the scale and breadth of alcohol health harm in Scotland and the massive burden alcohol is currently placing on our NHS."

 [Read more](#)

### UPDATE

## Alcohol related hospital admissions down but alcohol harm still too high

**New figures** published by Public Health Scotland have shown that there were 31,206 alcohol related hospital admissions (stays) in Scotland in 2022/23. This represents a significant 11% reduction on hospital admissions in 2021/22 at 35,187.

Responding to the data, **Alison Douglas, CEO of Alcohol Focus Scotland said:**

“While welcome, this reduction in alcohol related hospital admissions is no cause for complacency. The level of admissions due to alcohol remains high and represents an entirely preventable burden on our already overstretched NHS.

“Worryingly, there is evidence of increasing inequality in these data, with people in our most deprived communities now seven times more likely to be hospitalised due to alcohol than those in our most well-off communities – compared with six times more likely in the previous year.”

 [Read more](#)



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 **UPDATE**

## Questioning initiatives funded by the alcohol industry

The Scotch Whisky Association (SWA) have recently announced an investment of £300,000 to reduce young people’s drinking.

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On the face of it, this investment may seem positive. However, **research** into such industry-funded Community Alcohol Partnerships (CAPs) in the UK, found little evidence of their effectiveness and concluded that “Their main role may be as an alcohol industry corporate social responsibility measure which is intended to limit the reputational damage associated with alcohol-related anti-social behaviour.”

The existence of and support for such initiatives is also used by Big Alcohol as an alternative to evidence-based policies which threaten how they market and sell their products, such as minimum unit price which SWA delayed for over six years at a cost of hundreds of lives.

Alison Douglas  
CEO, Alcohol Focus Scotland

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## **Junk food ads banned from Sheffield City Council-owned billboards**

Sheffield City Council has banned adverts for unhealthy food, pollution and alcohol from all authority-owned hoardings, online media, and sponsorship opportunities.

The ban also covers short-term loans, low or zero alcohol drinks from alcoholic brands, fossil fuel products, some breast or infant milk formulas, petrol, diesel and hybrid plug-in vehicles, gambling and betting products, and airlines and airports. The ban is expected to come into force next month.

Greg Fell, Sheffield's public health director, said that when Transport for London banned junk food ads, the loss of income predicted by some never actually happened.

**AdFreeCities** has reported that in Sheffield, 60% of advertisements were found in the poorest areas of the city, while just 2% of adverts were found in the most affluent locations.

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 [Learn more](#)



## POLICY

### Overstatement undermines health interventions

The Social Market Foundation (SMF) has launched the final briefing in a trilogy exploring the merits and political case for more interventionist public health measures. The final briefing, ***Weighing the pounds***, evaluated economic arguments for and against public health interventions, finding that exaggeration on both sides, but especially from industry, is missing the bigger picture of being able to save/improve lives.

Economic arguments are often used to resist public health measures, and increasingly to promote them, though they often confuse quite different types of costs and benefits. It is important to remember that a loss of spending in one particular sector will be at least partly offset by higher spending in others. Ultimately, the objective of public health interventions should be helping us live healthier, longer lives – economic gains, which we have seen are real, are just a bonus.

The **first briefing** in the trilogy looked at the effectiveness of interventionism, while the **second briefing** explored the political constraints on implementing more interventionist policies.

 [Read the briefing](#)

# Weighing the pounds: The economics of public health intervention

BRIEFING PAPER  
February 2024

SMF Social Market Foundation

## POLICY

### Gender-responsive approaches to the acceptability, availability and affordability of alcohol

In a **new briefing**, the World Health Organization (WHO) highlights that gender-related norms persist in our societies, including in the consumption of alcohol.

Despite knowing that men and women consume alcohol differently and are affected by its harm differently, alcohol control policies remain gender blind. Highly gendered approaches to alcohol marketing and gender differences in patterns of alcohol consumption and its associated harm are well documented. Relatively little evidence has examined the different effects of population-level alcohol control policies on different genders, and even less has addressed how gender intersects with socioeconomic status, age, ethnicity, and other factors.

The WHO calls on governments to develop alcohol-control policies that address dimensions of acceptability, availability and affordability and incorporate considerations of gender and gender equity. Additionally, decisionmakers should consider the inclusivity of existing and future alcohol control policies. The WHO also calls on researchers to analyse and present data separately for men and women, rather than just controlling for sex. They note the importance of monitoring and reporting direct and indirect policy effects by gender.

 [Read the briefing](#)



## CONSULTATIONS

### Consultation on the united Nations Convention on the Rights of the Child (Incorporation) (Scotland) Act

The UNCRC has already been incorporated into Scottish law, but Scottish Ministers are required to publish guidance to help public authorities understand and fulfil their duties according to the act, helping to ensure that children's rights are proactively protected, respected and fulfilled. The Scottish Government are seeking views on the following draft statutory guidance:

- **Part 2: Compatibility with the UNCRC requirements, and child rights-respecting practice**
- **Part 3: Reporting duty of listed authorities**

 Find out more and respond by 16 May 2024



## CONSULTATIONS

### Restricting promotions of food high in fat, sugar or salt

The Scottish Government are consulting on the detail of proposed regulations to restrict the promotions of food and drink high in fat, sugar or

## CONSULTATIONS


### Draft Charter of Rights

The National Collaborative have issued a consultation on a **draft Charter of Rights** for people affected by substance use.


This consultation aims to capture



salt (HFSS) where they are sold to the public, including across retail and out of home settings, both in-store and online.

 **Read more and respond before 21 May 2024**

people's views and opinions on the draft Charter of Rights, and inform its continued development.

 **Read more and respond before 3 June 2024**

## RESEARCH

### **The impact of introducing alcohol-free beer options in bars and public houses on alcohol sales and revenue: A randomised crossover field trial**

A **study** carried out by Bristol City Council and the Tobacco and Alcohol Research Group (TARG) at the University of Bristol has found that making alcohol-free beer more available on draught in pubs and bars may help people switch from alcoholic beer.

A group of 14 pubs and bars across Bristol temporarily changed the drinks they offered. When alcohol-free option was available, venues sold 51 fewer alcoholic pints on average. This was replaced by an equal increase in sales of the non-alcoholic options. There was no impact on the money earned by the pubs.

Dr Angela Atwood, associate professor at TARG, said: "This does not restrict consumer choice; in fact, it increases the options available to the customer, and at the same time could reduce population levels of alcohol consumption and improve public health."

 **Read the study**

## RESEARCH

### **Alcohol and the Brain**

A group of international alcohol experts have come together to develop a new report presenting the evidence regarding alcohol's effect on the brain.

The report explains how alcohol physiologically affects the brain, why younger brains are so susceptible to harm, how alcohol is a risk factor in depression and suicide, and how alcohol ages the brain faster than it would age otherwise.

The authors conclude that reducing alcohol consumption, both total consumption as well as binge drinking, is arguably the most important way to promote cognitive and neurological health and prevent or reduce brain harms.

They advocate for:

- effective alcohol control policies, including raising the price and reducing the availability of alcohol
- health care screening and treatment resources including medications to treat alcohol dependence
- individual-level information and behaviour change informed by drinking guidelines


## Read the report

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**To:** Dragona, Anastasia  
**Subject:** Alcohol Focus Scotland latest - Apr 2024

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April 2024

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- **Alcohol one of three main 'modifiable' risk factors for dementia**
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## Parliament votes in favour of MUP

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On 17 April 2024, the Scottish Parliament voted to continue and increase the minimum unit price for alcohol to 65p per unit, concluding a lengthy process which included a robust and independent evaluation by Public Health Scotland, further public consultation and intense parliamentary scrutiny.

Welcoming the vote, Alison Douglas, CEO of Alcohol Focus Scotland said:

“Well done Holyrood. You have chosen to stand up for peoples’ right to health despite the best efforts of Big Alcohol once again to derail this policy. Uprating of the minimum unit price to 65p per unit will save hundreds of lives and reduce demand on our NHS.

“This will improve the lives not just of people who drink but those around them, whose health and wellbeing can be affected. Crucially it will reduce the likelihood that future generations will develop alcohol problems. But there is so much more to do. Now we must address how alcohol is marketed as a glamorous, fun product, while giving us limited information which we need to make healthy choices.”

Alcohol Focus Scotland, alongside SHAAP, as part of the NCD Alliance Scotland, are now calling on the Scottish Parliament to introduce an automatic mechanism to link the minimum unit price to a measure of affordability into the future.

 **Read pages 13-14 to learn more about automatic uprating**



 **UPDATE**

## Alcohol Emergency continues as latest ONS Deaths Data Published

In 2022, there was a record high of 10,048 alcohol-specific deaths in the UK, according to **the latest figures** published by the Office for National Statistics (ONS).

Scotland continues to have the highest rates of alcohol-specific deaths in 2022 (22.6 per 100,000 people, respectively). However, the rate of alcohol-specific deaths has risen more slowly in Scotland than the rate in England since 2019, by 22.2% and 34.3% respectively. This is likely due to the protective effect of minimum unit pricing (MUP) implemented in Scotland in 2018.

Responding to the figures, Alison Douglas, CEO of Alcohol Focus Scotland said:

“Despite the Scottish Government’s acknowledgement that this is a public health emergency, we are still not seeing an adequate emergency response. Alcohol deaths continue to rise, yet people accessing alcohol treatment in Scotland has declined by 40% over the last ten years. This has to change.

“We must improve treatment and recovery support. But we also have to prevent the health and social harms caused by alcohol in the first place. We know what works: making alcohol less affordable, restricting how it is marketed, and reducing how widely available it is. We also know that Big Alcohol is the number one roadblock to implementing these cost-effective measures, because they rely on heavy drinking for much of their profits.”

 [Read more](#)

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 **UPDATE**

## Alcohol and the Heart: Explained

Cardiovascular disease is the biggest killer across the globe, causing 20 million deaths every year. And drinking alcohol directly contributes to cardiovascular disease.

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Yet for many years, the idea that alcohol, particularly red wine, is good for the heart has permeated our media, policy debates, and been spread by industry misinformation. Over the past decade, new study designs have improved our understanding, concluding with the World Heart Federation stating that: “Contrary to popular opinion, alcohol is not good for the heart”.

The latest video of the Institute of Alcohol Studies *Explained* film series explores which cardiovascular diseases alcohol causes, how many hospital admissions it leads to, why observational studies suggest moderate drinking is good for the heart, and how the alcohol industry has tried to influence research on the topic.

 **Watch the video**



## CONSULTATIONS

### **AFS Response to Good Food Nation Plan**

Alcohol Focus Scotland has responded to the Scottish Government’s **consultation** on the Good Food Nation Plan. While we agree that promoting good health and reducing health inequalities are critical to ensuring a Good Food Nation, we are disappointed that the sole reference in the Plan to alcohol is as a positive contributor to Scotland’s economy. The Plan fails to recognise alcohol’s significant contribution to poor diet and the financial cost of alcohol use to Scottish society.

Alcohol makes up nearly 10% of drinkers’ calorie consumption and alcohol intake may

be a risk factor for obesity in some individuals, sustaining diet-related inequalities. Recent estimates of the cost of alcohol use in Scotland sit between £5 and £10 billion each year, including up to £700m in health and social care costs and £1.2 billion in labour and productivity costs. This is comparable to the positive contribution which the industry makes to the economy.

Additionally, the Plan's focus seems to be on individual choices rather than shaping the food environment and tackling the influence of wider determinants. The Plan should include reference to the importance of protecting people's health from commercial influences, which drive consumption of unhealthy foods by making them affordable, accessible and by heavily marketing them.

 [Read our response](#)

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## RESEARCH

### **The Perils of Partnership: Interactions Between Public Health England, Drinkaware, and the Portman Group Surrounding the Drink Free Days Campaign**

New research published in the International Journal of Health Policy and Management has analysed documents obtained through Freedom of Information (FOI) requests regarding communications between Drinkaware, Public Health England (PHE), and the Portman Group, in the years running up to and during the Drink Free Days campaign, a controversial partnership between PHE and Drinkaware.

The key implication of the new research is that such partnerships serve commercial interests, including through displacing more effective policy options and marginalising civil society voices. The authors recommend formal processes for identifying and managing conflicts of interest and for public health leaders to prioritise their partnerships with organisations based on evidence and alignment with public health goals to avoid undermining effective policies.

 [Read the study](#)

 [Read a Twitter/X thread by the lead author](#)



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## RESEARCH

### **The Sick-Quitter Effect: Alcohol-related death has been underestimated over the last 30 years**

The relationship between alcohol use and risk of death has been studied widely, and often a J-shaped risk curve is found, where low-level drinkers appear to have decreased risk compared to non-drinkers, and heavy drinkers the highest risk. But many of these studies have not accounted for a critical issue called the ‘sick-quitter effect’.

A new study published in *Addiction* summarises the evidence on alcohol and risk of death in evidence reviews that have been conducted globally, with a focus on the methods that were used.

Their findings suggest that review studies over the past 30 years may have underestimated the number of deaths caused by alcohol. This has implications for studies that model the harms of alcohol, government guidelines on alcohol use, alcohol-related clinical practice guidelines, and government policies aiming to address alcohol-related harms.

 **Read a summary by the lead author**

 **Read the study**

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## RESEARCH



## Alcohol one of three main 'modifiable' risk factors for dementia

A new study published in the Nature Communications Journal has concluded that the frequency of alcohol consumption is one of the three most significant risk factors increasing likelihood of developing dementia.

The study looked at higher order brain regions particularly vulnerable to the ageing process, schizophrenia and Alzheimer's disease. It considered genetic influences and whether these can be altered through common modifiable risk factors for dementia. These include risk factors which could be increased or decreased via behaviour or environmental changes.

The study found that frequency of alcohol consumption, traffic related air pollution, and diabetes were the three biggest modifiable risk factors for this vulnerable brain network.

 [Read the study](#)

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### RESEARCH

## Alcohol and Economic Crises

This new report from the Institute of Alcohol Studies highlights the relationship between a society's health outcomes and socioeconomic conditions, such as levels of income, education, and unemployment. Economic crises can affect population health outcomes in several ways, including impacting health behaviours such as alcohol consumption.

Evidence indicates that population-level alcohol consumption decreases during economic crises, but with increases in high-risk alcohol use seen among some subgroups. Suffering a more severe economic loss, being a man, being unemployed, and being less well educated may increase the likelihood of engaging in more/higher-risk drinking during an economic crisis. Mechanisms for increasing/decreasing alcohol consumption include psychological distress and tighter budget constraints.

Targeted support for people experiencing unemployment, and population-wide

measures to improve access to treatment and support, restrict marketing, and raise the prices of the cheapest alcohol could reduce levels of alcohol harm.

## Read the report



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## TRAINING

### Enhanced Alcohol Awareness

The aim of the workshop is to increase your understanding and knowledge of the impact that alcohol related harm has on individuals, others around them and wider society. Increased knowledge and understanding on health and social harms. The training will provide you with an increased confidence in supporting service users and signposting them to relevant services.

This one-day workshop is available on:

- **Thursday 9 May**
  - **Tuesday 28 May**
  - **Thursday 13 June**
  - **Tuesday 25 June**
-

 **Find out more and book your place**



**Training**

**Enhanced Alcohol Awareness**

## **EVENT**

### **How alcohol marketing regulations can protect people from harm**

This webinar on alcohol marketing is the first in a series exploring the **Alcohol Health Alliance's key manifesto asks** to create a future free from alcohol harm.

The two speakers are Dr Alex Barker (University of Derby) and Michaela Jones (Alcohol Focus Scotland), who will discuss the nature of alcohol marketing and how it impacts us. They will explore what changes to alcohol marketing an incoming government could implement to help children and people impacted by alcohol harm lead healthier, happier, longer lives. The event will be chaired by Dr Katherine Severi (Institute of Alcohol Studies) and include a Q&A session.

 **Book your place**


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**WEST LOTHIAN LOCAL LICENSING FORUM**

**WORKPLAN – June 2024**

<b><u>SUBJECT</u></b>	<b><u>PERSON RESPONSIBLE</u></b>	<b><u>TIMESCALE</u></b>	<b><u>PROGRESS TO DATE</u></b>
Chair's Update	Chair	June 2024	Standing item
Police Scotland Update	Police Scotland	June 2024	Standing item
Statement of Licensing Policy / Update from LSO	LSO	June 2024	Standing item
Chair's Update	Chair	September 2024	Standing item
Police Scotland Update	Police Scotland	September 2024	Standing item
Statement of Licensing Policy / Update from LSO	LSO	September 2024	Standing item
Chair's Update	Chair	December 2024	Standing item
Police Scotland Update	Police Scotland	December 2024	Standing item

Statement of Licensing Policy / Update from LSO	LSO	December 2024	Standing item
Meeting dates 2024	All	December 2024	Annually in December