West Lothian Alcohol Licensing Forum

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

**Wednesday 25 November 2026 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 Minutes of Licensing Forum Meeting held on 3 June 2026 & 2 September 2026 (herewith)

5. Minutes of Licensing Board – For Information Only

   a) 1 May 2026
   b) 12 June 2026
   c) 14 August 2026
   d) 11 September 2026
   e) 9 October 2026

6. Updates:

   a) Chair Update
   b) Police Update
   c) Other Updates

7. Workplan Updates and Current Workplan (herewith)

8. Alcohol Focus Scotland

   a) E-Focus May 2026 (herewith)
   b) E-Focus June 2026 (herewith)
   c) E-Focus July 2026 (herewith)
   d) E-Focus August 2026 (herewith)
   e) E-Focus September 2026 (herewith)
   f) E-Focus October 2026 (herewith)

9. Joint Licensing West Lothian Licensing Board and Licensing Forum Meeting 2026

10. Licensing Policy Q&A – LSO

11. Membership and Recruitment

12. Timetable of Meetings 2027

**NEXT MEETING – 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 at

committeeservices@westlothian.gov.uk

MINUTE of MEETING of WEST LOTHIAN LOCAL LICENSING FORUM held within MS TEAMS VIRTUAL MEETING ROOM, on WEDNESDAY 3 JUNE 2026

**Present and Apologies**

| First Name | Surname | Category | |
|---|---|---|---|
| Helen | Davis | WL Youth Action Project | Absent |
| Laura | Dougall | NHS Public Health | Present |
| Mike | Duncan | WL CHCP | Present |
| Douglas | Frood | LSO | Present |
| Nicola | Hughes | Housing | Absent |
| Lisa | Moore | Education | Apologies |
| Donna | Pearey | Police Scotland | Present |
| Arun | Randev | Trade | Present |
| Donald | Stavert | Local Resident | Present |
| Mark | Vance | Social Work/Health | Apologies |
| | | | |

| | | | |
|---|---|---|---|
| Anastasia | Dragona | Clerk | Present |

## 1 DECLARATIONS OF INTEREST

There were no declarations of interest made.

## 2 ELECTION OF CHAIR AND VICE CHAIR

Arun Randev was elected as Chair for the calendar year.

## 3 LICENSING FORUM MINUTES

The Forum approved the minutes of its meetings held on 4 March 2026.

## 4 MINUTES OF LICENSING BOARD

The Forum noted the Licensing Board minutes of 13 February 2026, 13 March 2026 and 10 April 2026.

## 5 UPDATES

Police update – Officers were busy with the upcoming local Gala Days, Commonwealth Games, World Cup and other events and faced resource challenges as a result. Routine alcohol-related incidents were also dealt with, and alcohol thefts remained high.

LSO Update – The Licensing Board had made the decision to ask premises to apply for individual licences for the World Cup period under Section 68 of the Licensing Act; licenses cost £10 and were valid for 14 days, and would

include a suite of conditions that would apply for the period of extended hours applied for and applications could also be made for conditions to be disapplied or could be withdrawn. There would be informal feedback to the Licensing Board following the World Cup events.

Decision

To note the updates.

## 6 WORKPLAN UPDATES AND CURRENT WORKPLAN

It was noted that the Chair had asked for six-monthly meetings between the Forum and the Licensing Board. Members were also reminded that the joint meetings were a statutory requirement.

Members were also advised that the government granted individual Licensing Boards powers to make their own decisions with minimal guidance.

Decision

It was agreed that an NHS Lothian report showing national data on licensing across Scotland would be circulated to members when ready.

## 7 ALCOHOL FOCUS SCOTLAND

The forum noted the E-focus newsletters dated February 2026, March 2026 and April 2026 and brief discussion on the increased availability on zero alcohol beer followed.

## 8 LICENSING POLICY Q&A

Relevant discussion was covered under agenda item 5 (*Updates*).

## 9 MEMBERSHIP AND RECRUITMENT

Members noted that Jim Carlin had resigned.

Members were asked to continue efforts to recruit members or invite guests to attend Forum meetings as appropriate.

Specifically, it was noted that members of the NHS Lothian Youth Commission could be invited to a future meeting if one of the commercial determinant they chose to focus on was alcohol.

Decision

Members from the NHS Lothian youth commission to be invited as guests to a future meeting, if alcohol is chosen as a commercial determinant.

MINUTE of MEETING of WEST LOTHIAN LOCAL LICENSING FORUM held within MS TEAMS VIRTUAL MEETING ROOM, on WEDNESDAY 2 SEPTEMBER 2026

**Present and Apologies**

| First Name | Surname | Category | |
|---|---|---|---|
| Helen | Davis | WL Youth Action Project | Present |
| Laura | Dougall | NHS Public Health | Apologies |
| Mike | Duncan | WL CHCP | Present |
| Douglas | Frood | LSO | Apologies |
| Nicola | Hughes | Housing | Present |
| Lisa | Moore | Education | Apologies |
| Donna | Pearey | Police Scotland | Apologies |
| Arun | Randev | Trade | Apologies |
| Donald | Stavert | Local Resident | Present |
| Mark | Vance | Social Work/Health | Absent |
| | | | |

| | | | |
|---|---|---|---|
| Anastasia | Dragona | Clerk | Present |

Owing to a lack of the necessary quorum no business could be transacted.

**WEST LOTHIAN LOCAL LICENSING FORUM**

**WORKPLAN – November 2026**

| SUBJECT | PERSON RESPONSIBLE | TIMESCALE | PROGRESS TO DATE |
|---|---|---|---|
| Chair's Update | Chair | November 2026 | Standing item |
| Police Scotland Update | Police Scotland | November 2026 | Standing item |
| Other Updates | Members as required | November 2026 | Standing Item |
| Licensing Policy Q&A | LSO | November 2026 | Standing item |
| Formulation of a Workplan | All | November 2026 | Ongoing |
| Membership & Recruitment | All | November 2026 | Standing Item |
| Timetable of Meetings 2027 | All | November 2026 | Annually in December |

**Dragona, Anastasia**

**From:** Alcohol Focus Scotland <enquiries@alcohol-focus-scotland.org.uk>
**Sent:** 28 May 2026 12:30
**To:** Dragona, Anastasia
**Subject:** Alcohol Focus Scotland latest - May 2026

West Lothian Council

**CAUTION :** This email originated from outside of West Lothian Council. Please take care before taking any action based on this email. If you have any doubts, please log a call via the IT Self Service Portal .

Newsletter from Alcohol Focus Scotland

View this email in your browser




May 2026

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- **National directory for drug and alcohol services relaunched**
- **World Cup alcohol marketing campaign raises concerns about youth exposure**

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- Alcohol Change UK: Food and Belonging
- Alcohol Research 2026: New Thinking New Directions
- Support our Work

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UPDATE

# ONS Alcohol Death Stats Published

The Office for National Statistics (ONS) has published their **latest figures** for alcohol specific deaths in the UK. Overall, in 2024, there were 9,809 deaths

**from alcohol specific causes in the UK, a rate of 14.8 per 100,000 people. This represents a small decrease on the previous year (10,473) and also a reduction in the rate of deaths, previously at 15.9 per 100,000.**

In Scotland alone, there were 1,185 alcohol-specific deaths, a modest reduction of 92 on the previous year. However, alcohol deaths in Scotland remain high, at more than double the level of 30 years ago.

Northern Ireland (21.4 per 100,000) and the North-East of England (21.1 per 100,000) now have the highest alcohol death rates in the UK. Attempts to introduce minimum unit pricing in Northern Ireland recently ran out of Parliamentary time, whilst England continues to have no plans to introduce MUP. Scotland still has one of the highest rates in the UK (20.9 per 100,000 people) but the gap with England has been narrowing as the increase in deaths since the pandemic has been steeper in England than Scotland; likely due to the protective effect of minimum unit pricing in Scotland.

Carolyn Lochhead, CEO of Alcohol Focus Scotland said:

“It’s good news that today’s figures show a year-on-year reduction in deaths caused by alcohol in Scotland. But alcohol is still responsible for more deaths here than in England and Wales. Each of these numbers represent real people – someone’s parent, sibling, or friend – who lost their lives too early. While Scotland was once a world leader in tackling the harm caused by alcohol, in recent years we have fallen woefully behind.

“The new Scottish Government must take decisive action and follow through on previous commitments to address the relentless marketing of alcohol, as well expand lifesaving liver screening and invest in alcohol treatment. Unless we get serious about tackling alcohol harm, we will continue to see increasing deaths, ill-health and costs to the economy”.



UPDATE

# In Focus: New AFS CEO Blog

**In the first of a new series of monthly CEO blogs, Carolyn Lochhead, chief executive of Alcohol Focus Scotland, shares her thoughts post-election on Alcohol Focus Scotland's hopes for the new Parliament.**

For Scotland's 129 MSPs, last week was likely an unforgettable week. After a long, hard campaign, they have been sworn into Parliament to represent their constituents. Half are brand new parliamentarians, and taking their seats for the first time will be a magical moment. MSPs will be returning to parliament with their constituents in mind - thinking about the people they met, the stories they heard, and how they can use their elected roles to change their lives for the better.

But for at least fifty families in Scotland, this week will be unforgettable for all the wrong reasons. Because alcohol kills at least that number of people in Scotland every week. That includes those who lose their lives to liver disease, but also cancer, stroke, suicides and accidents. Every alcohol related death is preventable and leaves an unfillable gap in a family.

Figures released this week showed that while alcohol related deaths are decreasing – extremely welcome news - Scotland still recorded higher rates of deaths than our neighbours in England and Wales, and significantly more than pre-pandemic levels. Here, alcohol- related deaths are still double what they were 30

years ago. So we need urgent action.

**Read the blog in full**

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UPDATE

# SHAAP launches new collaborative project on women and alcohol

**SHAAP has launched a new collaborative project, Women and Alcohol, aimed at improving understanding of the distinct ways alcohol affects women and strengthening the evidence base for gender-responsive alcohol policy. The initiative is being developed in partnership with Alcohol Focus Scotland, the Institute of Alcohol Studies, women's health organisations and researchers, bringing together evidence and lived experience to explore how alcohol harms impact women's health and lives.**

The project highlights that alcohol harms affecting women have often been under-researched, under-recognised and under-served by policy. While women experience alcohol-related harm differently from men, both biologically and socially, research, services and policy have historically been shaped around male patterns of drinking and harm. Areas identified for greater attention include breast cancer, perimenopause, pregnancy, postnatal mental health and domestic abuse.

The work will also examine wider social and structural factors, including gendered alcohol marketing, stigma, alcohol products targeted at women, and the availability of women-specific treatment and support services. By taking a broad approach, the project aims to build a more complete picture of how alcohol affects women across different stages of life and in different social contexts.

As part of this work, partners plan to convene a deliberative event around International Women's Day to bring together stakeholders and develop

recommendations for future research, policy and practice.

To launch the project, in a new blog for SHAAP, Professor Carol Emslie highlights the growing mismatch between increasingly sophisticated alcohol marketing aimed at women and alcohol policies that often fail to consider gender. Drawing on evidence from the World Health Organization, the blog argues that while men and women experience alcohol use and alcohol-related harm differently, policy responses have not always reflected these differences.

**Read the blog in full**

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UPDATE

## Institute for Alcohol Studies publishes new strategy

**The Institute of Alcohol Studies (IAS) has published its new strategy for 2026–2029, outlining a long-term vision to reduce alcohol harm and improve health across the UK. The strategy is built around a series of ambitious targets, including halving the prevalence of risky drinking, reversing the rise in alcohol-specific deaths, and significantly increasing access to specialist alcohol treatment.**

The strategy argues that alcohol harm remains a major and growing public health challenge, with impacts felt across healthcare, social services, the criminal justice system and the wider economy. It highlights the disproportionate burden

experienced by people living in deprived communities and emphasises the need for sustained, evidence-based action following more than a decade without a national alcohol strategy for England.

To support these goals, IAS calls for a package of population-level measures, including minimum unit pricing, restrictions on alcohol marketing, improved product labelling, lower drink-driving limits, and increased investment in prevention and treatment services. The strategy also advocates for greater local powers to regulate alcohol availability and for clearer safeguards around government engagement with the alcohol industry.

Overall, the strategy presents a roadmap for translating evidence into policy action and reducing alcohol-related harm over the coming decade. It reinforces the growing consensus that meaningful progress will require coordinated action across government, health services and communities, supported by strong political leadership and a sustained focus on prevention.

**Read more**

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UPDATE

## National directory for drug and alcohol services relaunched

**The Scottish Drugs Forum has relaunched the national directory for drug and alcohol services in Scotland. This free and publicly accessible tool helps people find local support quickly and when they need it – whether for themselves or someone they care about.**

For services, this is an important opportunity to ensure your organisation's information is accurate and up to date so people can be connected to the right support as quickly as possible.

If your service is listed, please take a moment to review your entry. And if your service isn't listed, contact SDF so they can add it.

**Visit the directory**

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UPDATE

## World Cup alcohol marketing campaign raises concerns about youth exposure

**A new article from Big Alcohol Exposed – a project of Movendi International - highlights concerns about the scale of alcohol marketing planned around the 2026 FIFA World Cup, arguing that major alcohol companies are using the tournament to drive consumption at a time when younger generations are drinking less than previous cohorts.**

The article points to marketing campaigns by global alcohol producers, including sponsorship deals, branded fan zones, athlete endorsements and extensive promotional activity linked to the tournament across North and South America.

The article argues that the World Cup is being positioned as a key commercial opportunity for alcohol companies seeking to reverse declining alcohol consumption among younger adults. It highlights industry reports and investor communications suggesting that major sporting events are increasingly viewed as important drivers of alcohol sales and brand engagement, particularly among younger consumers.

Of particular concern is the potential exposure of children and young people to alcohol marketing. The article notes that previous World Cup tournaments generated billions of alcohol brand impressions globally, including substantial

exposure among under-18s. It also cites evidence linking alcohol marketing in sport with increased alcohol use among young people and the normalisation of drinking within social and family settings.

Scottish Health Action on Alcohol Problems (SHAAP) and Alcohol Focus Scotland have been leading calls for stronger regulation of alcohol marketing in sport in Scotland. As preparations for the 2026 World Cup continue, we need policies that protect children and young people from exposure to alcohol promotion and reduce the influence of marketing on drinking attitudes and behaviours.

Alcohol Focus Scotland has continued to raise the issue of alcohol in sport – including **pushing back strongly** against attempts to bring alcohol back to football terraces.

**Read more**

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UPDATE

## New guide highlights the importance of language in tackling stigma

**The Anti-Stigma Network has published a new Anti-Stigma Language Guide, aimed at helping organisations communicate about alcohol and drug use in ways that reduce stigma and support inclusion. The guide is designed for a wide range of sectors, recognising that the language used in healthcare, media, workplaces and public services can shape attitudes towards people affected by alcohol and other drug use.**

The guide emphasises that language plays an important role in influencing how people are perceived and treated, highlighting the potential harms of terminology that can shame, blame or define individuals by their alcohol or drug use. It advocates for more person-centred language that recognises people as individuals

first, rather than reducing them to labels or stereotypes.

Importantly, the guide stresses that its purpose is not to “police” language, but to encourage reflection on how words can either reinforce or challenge stigma. It acknowledges that language continues to evolve and that discussions about terminology should support, rather than hinder, open conversations about alcohol and drug-related harm.

The guide reinforces the growing recognition that reducing stigma is an important part of improving health outcomes. By promoting respectful and inclusive communication, it aims to help create environments where people feel able to seek support and engage with services without fear of judgement or discrimination.

**Read more**

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UPDATE

## IAS Blog: New study suggests alcohol causes more cancers than previously estimated

**In a new blog for the Institute of Alcohol Studies, Dr Peter Sarich, Senior Research Fellow at the Cancer Elimination Collaboration at the University of Sydney, discusses new research suggesting that alcohol is responsible for more cancers in Australia than previously thought. Drawing on data from more than 225,000 participants, the study estimated that 7,804 cancer cases in 2024—around 4.6% of all cancers diagnosed—were attributable to alcohol use, exceeding previous estimates.**

The research found that alcohol contributed to a range of cancers, including colorectal, breast, upper aerodigestive tract and liver cancers. Risk increased with consumption, with every additional 10 drinks per week associated with a 19%

increase in the risk of an alcohol-related cancer. The study also estimated that if everyone adhered to Australia's low-risk drinking guidelines of no more than 10 standard drinks per week, more than 3,700 alcohol-related cancer cases could be prevented each year.

Dr Sarich notes that awareness of the link between alcohol and cancer remains low, despite alcohol being a known cause of at least seven types of cancer. The findings add to a growing body of evidence highlighting alcohol as an important and modifiable cancer risk factor and underline the potential for population-level measures to reduce alcohol consumption and prevent avoidable cancers.

The blog reinforces the importance of improving public understanding of alcohol-related cancer risks and implementing evidence-based policies that support lower alcohol consumption. As alcohol-related cancers remain largely preventable, the findings highlight a significant opportunity to improve population health through effective prevention strategies.

**Read the blog**

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UPDATE

# New Canadian guideline calls for routine alcohol screening in healthcare

**A new clinical practice guideline published in the *Canadian Medical Association Journal* recommends that healthcare professionals routinely ask all adult patients about their alcohol consumption, reflecting growing evidence that alcohol-related health risks occur at lower levels of drinking than previously recognised. The guideline aims to simplify alcohol screening by embedding brief conversations about alcohol into routine healthcare, alongside the provision of information, support and referral where**

**appropriate.**

The recommendations closely mirror the direction set out in the recent **Public Health Scotland ABI review**, which called for a renewed focus on making conversations about alcohol a routine part of health and social care. The review recommended moving beyond a narrow focus on screening targets towards a more flexible, evidence-informed approach that normalises discussions about alcohol across a range of settings, including primary care, pharmacies and dentistry.

Both the Canadian guideline and the Scottish review recognise that alcohol conversations are most effective when they are simple, person-centred and integrated into everyday practice. They also highlight the importance of equipping health and social care professionals with the training, resources and confidence needed to raise the issue of alcohol, while reducing barriers such as limited time and concerns about stigma. In Scotland, the ABI review further emphasised the need to improve public understanding of alcohol-related harm and ensure that conversations about alcohol form part of a wider prevention strategy to reduce health inequalities.

Taken together, these developments point to a growing international consensus that routine conversations about alcohol have an important role to play in prevention and early intervention. By normalising discussions about alcohol and identifying risk earlier, healthcare systems can support healthier choices, reduce alcohol-related harm and improve population health outcomes.

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# IAS Small Grants Scheme

**The Institute of Alcohol Studies (IAS) opened applications for its 2026 Small Grants Scheme in the week commencing 20 April. The scheme provides funding to support research that can contribute to alcohol policy debates,**

**with awards ranging from £500 to £15,000. Applicants will have eight weeks from the opening date to submit outline proposals.**

Proposals will be assessed against a set of key criteria, including their potential to inform alcohol policy, alignment with the IAS long-term vision, the track record of applicants, and the feasibility and value for money of the proposed research.

The scheme is open to applicants based at UK universities, who would normally be expected to hold a PhD or equivalent professional qualification. IAS particularly encourages applications from early career researchers, defined as those within seven years (full-time equivalent) of completing their PhD.

Apply

UPDATE

## Money, Power, Health Podcast: Commercial Power, Conflicts of Interest and health policy with Elena Whitham

**In a recent episode of the *Money Power Health* podcast, former Scottish Government Minister for Drugs and Alcohol Policy Elena Whitham shares her experiences of developing health policy in areas where public health goals can come into conflict with commercial interests. Drawing on her journey from local government to national politics, she reflects on the challenges of addressing alcohol and drug-related harm in Scotland.**

The discussion explores what commercial influence on policymaking can look like in practice, particularly in areas where strong evidence exists for interventions that may affect industry profits. Whitham describes how policymaking often involves

balancing competing interests and highlights the importance of maintaining a focus on reducing harm and improving health outcomes, particularly for communities most affected by inequality.

A key theme of the conversation is the role of evidence, advocacy and collaboration. Whitham highlights the contribution of academics, public health organisations and wider civil society in supporting evidence-informed policymaking and ensuring that the voices of affected communities are heard.

The podcast offers a valuable insight into the realities of health policymaking and the challenges of advancing measures to reduce alcohol-related harm. It reinforces the importance of transparency, independent evidence and sustained engagement across sectors in creating a healthier and more equitable Scotland.

**Listen to the Podcast**

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CAMPAIGN

## Alcohol Awareness Week 2026 invites people to reflect on their relationship with alcohol

**This year's Alcohol Awareness Week, coordinated by Alcohol Change UK, will take place from 6–12 July 2026 on the theme "Alcohol and me". The**

**campaign aims to encourage people to consider the role alcohol plays in their lives and explore how it may be affecting their health, wellbeing, relationships and everyday experiences.**

The campaign comes against a backdrop of widespread alcohol-related harm and a culture in which alcohol is often presented as a normal part of social occasions and daily life. Through stories, practical tools and advice, Alcohol Awareness Week will encourage people to take a moment to reflect on their drinking, understand their level of risk, and consider whether any changes could benefit their health and wellbeing.

Throughout the week, Alcohol Change UK will share resources to help people learn more about alcohol's impact, including information on cutting down and personal stories of change. The campaign emphasises that there is no one-size-fits-all approach, encouraging open conversations about alcohol and its effects on individuals, families and communities.

Alcohol Awareness Week provides an opportunity to increase understanding of alcohol-related harm and promote healthier choices. By encouraging people to reflect on their relationship with alcohol, the campaign aims to support positive change and contribute to wider efforts to improve public health.

**Find out more about Alcohol Awareness Week**

CAMPAIGN

# End the delivery trap

**Alcohol Change UK has launched its "End the Delivery Trap" campaign, highlighting growing concerns about the rapid rise of on-demand alcohol delivery services and the risks they pose to public health. With alcohol now available at the tap of an app and delivered within minutes, the campaign warns that regulation has failed to keep pace with technological change, leaving significant gaps in existing licensing systems.**

The campaign sets out how this increased convenience is reshaping drinking behaviours, making it easier for people to continue drinking for longer, order more alcohol in the moment, and access alcohol without robust safeguards such as age or intoxication checks. Around one in five adults are now using rapid delivery services to order alcohol weekly, with higher use among those already at greater risk of harm.

Crucially, the campaign emphasises that this is not about individual responsibility, but about the wider systems that shape behaviour. Rapid delivery services can make it harder for people to cut back and can exacerbate harm for those already struggling, including people in recovery. Evidence also suggests that existing protections are inconsistently applied, with weaknesses in age verification and delivery practices.

Alcohol Change UK is calling for urgent updates to the Licensing Act in England and Wales and stronger safeguards, including robust age and intoxication checks, limits on delivery hours, and options for individuals to block their own access to alcohol delivery. Together, these measures aim to ensure that digital convenience does not come at the cost of increased alcohol harm, and that the systems around us better support healthier choices.

**Join the Campaign!**

POLICY

# People with alcohol dependence express nuanced views on alcohol pricing policies

**A new briefing note from researchers at the University of Stirling and the Sheffield Addictions Research Group explores what people with current or recent experience of alcohol dependence think about alcohol pricing policies, including Scotland's minimum unit pricing (MUP). Based on interviews with 22 people experiencing alcohol dependence and financial hardship, the study found that views on pricing policies were often complex and shaped by personal experiences of addiction and poverty.**

Many participants felt that increasing the price of alcohol had limited impact on people with entrenched alcohol dependence, as the cost of alcohol was often not a deciding factor in their drinking. Some described reducing spending on essentials, borrowing money or switching to cheaper products to afford alcohol. However, many also recognised that pricing policies could help prevent harmful drinking in the wider population and reflected that they may have benefited from such measures before becoming dependent themselves.

The research also found support for a range of complementary alcohol policies. Participants highlighted alcohol advertising, home delivery services and the prominent display of alcohol in shops as factors that could trigger cravings and make recovery more difficult. Many also called for greater public awareness of alcohol-related harms and improved access to treatment and recovery services, with some suggesting that revenue generated through alcohol pricing policies should be reinvested into support services.

Overall, the findings suggest that while alcohol pricing policies alone may not address the needs of people with established alcohol dependence, they are viewed as part of a broader package of measures to reduce alcohol-related harm.

The authors argue that pricing policies should be accompanied by investment in treatment and recovery services, alongside stronger action on alcohol marketing, availability and public awareness.

**Read the briefing**

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CONSULTATIONS

# Evaluation of Alcohol Duty Reforms

**The UK Government is evaluating the impacts of the alcohol duty reforms introduced on 1 August 2023, three years on from their implementation.**

**The reforms moved the alcohol duty system to a strength-based structure and introduced two new targeted reliefs: Draught Relief (DR) and Small Producer Relief (SPR).**

HMRC subsequently simplified and digitised the administrative processes for domestic production and duty payment, including launching the Manage your Alcohol Duty service in early 2025.

The evaluation will consider how successful these reforms have been in meeting their intended objectives, specifically:

1. Greater consumer choice, particularly of low-strength products.
2. Reduced alcohol related harm.
3. Support for on-trade business via DR, which was designed to reduce the tax burden on draught alcoholic products under 8.5% ABV sold in on-trade venues, such as pubs.
4. Support for small producers via SPR, which extended the duty relief previously only available to small brewers to all small producers of alcoholic

products under 8.5% ABV and addressed barriers to growth by smoothing the withdrawal of relief as production increases.

5. Reduced administrative burden and a simplified process for users.

**Submit a response**

RESEARCH

## How often we see alcohol in movies: A Systematic review and Meta-analysis

**A new systematic review and meta-analysis has found that alcohol is portrayed in the vast majority of movies, highlighting the extent to which audiences are routinely exposed to alcohol imagery on screen. Bringing together evidence from 20 studies, the review found that 84% of films featured alcohol at least once, while almost one in four five-minute movie segments (24%) contained an alcohol reference.**

The study also found that alcohol appeared frequently within films, with an average of 21 alcohol-related scenes per movie. Across the films analysed, alcohol was visible on screen for an average of 263 seconds—more than four minutes per film. Most of the studies included in the review were conducted in the United States and examined the presence and frequency of alcohol portrayals through content analysis.

These findings are particularly important given the well-established association between exposure to alcohol imagery and increased alcohol use, particularly among young people. The authors note that media consumption has expanded significantly in recent years through streaming services and digital platforms, potentially increasing exposure to alcohol content.

The review highlights the widespread normalisation of alcohol in popular media and adds to calls for stronger regulation of alcohol portrayals in films. The authors

suggest measures such as incorporating alcohol content into age classification systems and restricting alcohol product placement to help reduce exposure and its potential influence on drinking behaviours.

**Read the study**

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RESEARCH

## Study sheds light on how the brain adapts during recovery from alcohol dependence

**A new study from researchers at the University of Manchester has explored how the brains of people recovering from alcohol dependence respond to rewards and feedback. Using brain activity recordings (EEG), the researchers compared 20 people who had been abstinent from alcohol for an average of 20 months with a group of people without a history of alcohol dependence.**

The study found that people in recovery performed just as well as the comparison group on tasks involving learning and decision-making. However, their brains processed rewards and feedback differently, suggesting that some of the effects of alcohol dependence on the brain can persist even after long periods without drinking.

Importantly, the researchers found signs that these differences may change over time. Some of the altered brain activity was most evident among those in the earlier stages of abstinence, while longer periods without alcohol were associated with patterns that may reflect ongoing recovery and adaptation in the brain. The study also identified potential brain-based markers that could help researchers better understand and monitor recovery in the future.

Overall, the findings suggest that while many cognitive functions can recover following alcohol dependence, underlying changes in how the brain processes

rewards may persist for some time. The authors argue that a better understanding of these changes could support the development of more effective treatments and recovery support in the future.

**Read the study**

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TRAINING

## Workbook for staff of licensed premises

**The Alcohol Focus Scotland Workbook for Staff of Licensed Premises is an ideal tool for personal licence holders to provide the 2 hours minimum training to all their staff as required by the Licensing (Scotland) Act 2005.**

The workbook has been specifically created to be a valuable guide for staff members, providing essential knowledge to enhance their role within the licensing framework.

**Buy Now**

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EVENT

## What are the prospects for applying MAT Standards to Alcohol in Scotland?

**Online Event**
**Monday 8th June, 12.45pm – 2pm**

The second seminar of the SHAAP 2026 Alcohol Occasionals will be delivered by Dr Ayotunde Isiaka (Alcohol and Drugs Action, University of Aberdeen) and John Mooney (University of Aberdeen, Public Health Scotland).

The seminar will focus on research titled *"**The Feasibility and Prospects for Adapting Medication-Assisted Treatment (MAT) Standards for Alcohol in Scotland**"* which explored the applicability of MAT standards to alcohol treatment specialist services, using peer-reviewed publications as well as grey literature and direct observation of MAT standards implementation processes.

**Book your place**

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EVENT

## FASD Hub Upcoming Events

**FASD: Insights & Strategies for Professionals**

**Online Event**
**Thursday 18th June, 9.30am – 12.30pm**

**This course is suitable for professionals working in the Third Sector, education or working with adoptive, fostering or kinship families. It is not suitable for medical/clinical practitioners.**

**Written and delivered by the FASD Hub Team, this 3 hour course covers topics including:**

- Alcohol and its impact on society
- How alcohol affects the developing fetus
- FASD, prevalence and common challenges
- Strategies for working with young people who have FASD
- Signposting to further information

All attendees will receive a digital handbook after the session.

**Book your place**

**FASD: Next Steps for Caregivers**
**Online Event**
**Wednesday 24th June, 10am – 2.30pm**

**This practical training focuses on real-life strategies you can use at home, school, and in daily routines to support children and young people with FASD or prenatal alcohol exposure. It is designed for parents/caregivers who already have a solid understanding of FASD (ideally having attended *What is FASD?* or *FASD Unlocked*).**

In this course you will learn practical tools for:

- Using the neurobehavioral approach to reframe thinking
- Identifying your child's stress response triggers
- Supporting emotional regulation
- Facilitating positive transitions
- Talking to your child about FASD
- And more!

**Book your place**

---

EVENT

## Alcohol Change UK: Food and Belonging

**An Alcohol Change UK online learning event**
**Thursday 2nd July**
**10.00am to 12.35pm**
**£70 including VAT and booking fee**

Alcohol issues are rarely just about alcohol. Harmful alcohol use often goes hand-

in-hand with social disconnection and disordered eating. People who are alcohol-dependent are often underfed, underweight and undernourished, and this can increase the harm that alcohol causes in their lives.

Supporting people with severe alcohol problems to eat well is one clear route to reducing alcohol harm. Cooking and eating with others boosts physical and mental health and helps build the friendships and community that are the foundations of recovery.

Join Alcohol Change UK on 2 July to find out why food and nutrition should be an integral part of drug and alcohol treatment, and what you can do to make that happen.

**Book your place**

---

EVENT

## Alcohol Research 2026: New Thinking New Directions

**6th-7th October 2026**
**University of Stirling**

**Researchers, policymakers, practitioners, and stakeholders are invited to join Alcohol Research 2026: New Thinking, New Directions, a new conference dedicated to advancing innovative, interdisciplinary perspectives on alcohol research, policy, and practice.**

Organised by the University of Stirling in collaboration with the New Directions in the Study of Alcohol Group, the conference aims to foster fresh ideas, highlight emerging evidence, and facilitate critical dialogue in addressing complex and evolving challenges in alcohol-related harm, prevention, treatment, and policy. The conference is also supported by the Scottish Alcohol Research Network.

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**Find out more**




## Support our Work

Do you share our passion for reducing the harm caused by alcohol in Scotland?

**To fundraise for AFS, or if you would rather support us with either a one off or regular donation, visit our JustGiving page.**

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**Dragona, Anastasia**

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**Subject:** Alcohol Focus Scotland latest - June 2026

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**Newsletter from Alcohol Focus Scotland**

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June 2026

- **One in five alcohol products keep consumers in the dark on health information, new study finds**
- **AFS Vacancy: Business Development Manager**
- **In Focus: CEO Blog June 2026**
- **Drugs Uncut Podcast: AFS CEO discusses Scotland's alcohol policy challenges and priorities for change**
- **New podcast explores how healthcare professionals can have better conversations about alcohol**

- **New IAS blog explores who is choosing alcohol-free and low-alcohol drinks – and why**
- **IAS podcast explores how social media is reshaping alcohol marketing**
- **Alcohol Awareness Week 2026 encourages people to reflect on "Alcohol and me"**
- **Cancer Prevention Action Week underlines the need for clear alcohol product labelling**
- **New study finds no protective effect of low-level alcohol consumption on mortality**
- **Study suggests alcohol may amplify the impact of unhealthy diets on obesity**
- **Childhood adversity linked to greater risk of multiple addictive behaviours**
- **Workbook for staff of licensed premises**
- **SHAAP Alcohol Occasionals**
- **ACUK Food and belonging**
- **Alcohol Research 2026**
- **Donate to AFS**

UPDATE

# One in five alcohol products keep consumers in the dark on health information, new study finds

**One in five alcohol products sold in the UK fail to meet minimum voluntary labelling guidelines set by the alcohol industry regulator, the Portman Group, according to new analysis of over 530 alcohol product labels – the biggest study of its kind to date.**

The research from Alcohol Focus Scotland and the Alcohol Health Alliance UK found that basic nutrition and health information, such as units of alcohol, ingredients, and health and pregnancy warnings, was inconsistent or wholly absent from labels, leaving consumers without important information about what is in their drinks and the associated health risks.

The study found:

- One in four products do not include units per serving, limiting consumer ability to track intake
- 8% of products do not include units per container, a minimum requirement
- Only 6.7% of products include any health warning
- Just 1.3% of products include warnings relating to cancer or liver disease
- Full nutritional information appears on only 13.4% of products.

Meanwhile industry-funded messaging (such as ‘drink responsibly’) appears on nearly 90% of products. Researchers also found that legal and health information was often displayed in very small text or pictograms, with some measuring as little as 2.5mm in diameter.

Public support for clearer labelling is strong, with 74% of Scottish adults backing health warning labels. Currently, alcohol labels are only required to show ABV, volume, and allergens — unlike other food and drink products.

With alcohol linked to more than 200 health conditions, including cancer, campaigners argue that voluntary labelling has failed. Alcohol Focus Scotland and the Alcohol Health Alliance are calling for mandatory UK-wide standards, including health warnings, nutritional information, and clear unit labelling, to help consumers make informed choices.

Carolyn Lochhead, chief executive of Alcohol Focus Scotland, said: “Consumers are being kept in the dark about the potential health harms of alcohol products. It is ludicrous that a pint of milk is required to carry more information than alcohol products.

“With more than 50 people a week dying of preventable alcohol-related causes in

Scotland, this situation cannot continue. Consumers have the right to know what they are drinking so that they can make genuinely informed choices about their health.

“Self-regulation has clearly failed. It’s time for the governments to act and introduce mandatory health warning labels on alcohol products.”

Gillian Brown of Our Circle for Alcohol Free Mums, a coaching programme and online community for mums who want to become and stay alcohol free said: “I feel I have the right to know the correct information about what I am consuming to understand the risks and make informed choices. I make choices about so many other things I eat and drink based on their labels –why should alcohol be any different?

“I am classed as high risk for breast cancer, and I have been receiving screening since my early 30s. Yet I had no idea about the direct links between alcohol and breast cancer.

“The industry asks us to “drink responsibly” but how can we be “responsible” without the full picture?”

**Read more**



UPDATE

# AFS Vacancy: Business Development Manager

**£44,290 per annum – 34.5 hours per week.**
Flexible and hybrid working.

Alcohol kills fifty people every week in Scotland and drains up to £10 billion from our economy each year.

As Scotland's national alcohol charity, we've been tackling alcohol harm for over half a century. We are now looking for a creative, energetic and experienced Business Development Manager to help us achieve even more. In this newly created role, you'll work directly with the CEO and Board to create and implement an income generation strategy, identifying and pursuing charitable and commercial opportunities for growth. You'll lead our highly capable operations team, and work as part of a supportive Senior Management Team.

This is an exceptional opportunity to help shape the future of a well-established national charity and have a real impact on Scotland's health and wellbeing.

**Find out more and apply**



UPDATE

# In Focus: CEO Blog June 2026

***In the second of a new series of CEO blogs, Carolyn Lochhead, chief executive of Alcohol Focus Scotland, reflects on Scotland's football fans abroad and our reputation as big drinkers.***

I'm writing this the week after Scotland beat Haiti: and what a week it is. We're at the top of our group, and there's a few days before our next game to enjoy the antics of the Tartan Army as they baffle Boston with their kilts, traffic cones and bagpipes.

It's funny how football, more than any other sport, gets so tied up with how we see ourselves as a nation. I recall a conversation some years ago with an independence-supporting former MSP, who believed firmly that the one change which could tip a majority of people in Scotland into voting Yes was if FIFA ruled that we had to play as part of a UK-wide team.

I don't know if that's true. But the way in which international football brings so many of us together in shared hope, joy and despair does give us a chance to see how we collectively show up as a country. And there's so much to love. Scotland fans are stoic. Good-natured. Adaptable. Goodness knows we've had to be all those things, over the years. We turn up wherever Scotland are playing, ready to have a good time, even when we lose. It's a truly admirable approach.

But as well as our boundless optimism, we're also known as serious boozers.

**Read the blog**

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UPDATE

## Drugs Uncut Podcast: AFS CEO discusses Scotland's alcohol policy challenges and priorities for change

**In a recent episode of the *Drugs Uncut* podcast from the Scottish Drugs Forum, hosts Kirsten Horsburgh and Jason Wallace speak with Alcohol Focus Scotland's chief executive Carolyn Lochhead about Scotland's relationship with alcohol, the challenges facing alcohol policy, and the changes needed to reduce alcohol-related harm. The conversation explores Alcohol Focus Scotland's priorities and the organisation's vision for creating a healthier Scotland.**

Throughout the discussion, Carolyn highlights the scale of alcohol harm in Scotland and the need for a stronger focus on prevention. She argues that while Scotland has been a global leader in some areas, including the introduction of minimum unit pricing, progress has stalled in recent years despite alcohol deaths remaining near record levels. Carolyn reflects on the extent to which alcohol has become normalised in Scottish society and discusses the difficulties of advancing evidence-based policies in a context where alcohol is widely available, heavily

marketed and culturally embedded. The podcast also explores broader questions about the integration of alcohol and drugs policy, gaps in current support systems and what meaningful change could look like over the coming years.

**Listen to the podcast**

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UPDATE

## New podcast explores how healthcare professionals can have better conversations about alcohol

**In the latest episode of SHAAP and RCGP Scotland's *Conversations about Alcohol* podcast series, host Dr Rachel Phillips is joined by Katriona Paterson, Clinical Nurse Manager with a special interest in mental health and substance use. The episode focuses on the evidence behind different consultation styles and explores how healthcare professionals can engage patients in meaningful conversations about alcohol.**

The discussion examines approaches that move beyond simply advising people to drink less, instead focusing on building trust, understanding individual circumstances and supporting people to reflect on their own alcohol use. Katriona highlights the importance of person-centred, non-judgemental conversations that recognise the complexity of alcohol-related problems and help reduce stigma.

**Listen to the podcast**

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UPDATE

# New IAS blog explores who is choosing alcohol-free and low-alcohol drinks – and why

**In a new blog for the Institute of Alcohol Studies, Lucy Burke examines how people's reasons for drinking alcohol may help explain who is most likely to consume alcohol-free and low-alcohol (NoLo) drinks. Drawing on recent research, the blog explores whether NoLo products are helping people reduce their alcohol consumption and who is most likely to benefit from their growing availability.**

The research found that NoLo drinks are more commonly consumed by heavier drinkers and people from more socially advantaged backgrounds. However, drinking motives appear to play an important role. People who drink alcohol to cope with stress, anxiety or low mood were less likely to consume NoLo products, while those whose drinking is driven by social or enhancement motives were more likely to try them as alternatives to alcoholic drinks.

While NoLo products may help some people substitute alcohol with lower-strength alternatives, the benefits may not be shared equally across the population.  Lucy points out that understanding *why* people drink is essential when assessing the potential effectiveness of any NoLo policy.

**Read the blog**

UPDATE

# IAS podcast explores how social media is reshaping alcohol marketing

**In the latest episode of the Institute of Alcohol Studies' *Alcohol Alert Podcast*, Professor Nicholas Carah discusses the rapidly evolving world of digital alcohol marketing and its implications for public health. The episode, *Hooked by Design: How Social Media Fuels Alcohol Harm*, examines how social media platforms have transformed alcohol advertising from traditional mass marketing into highly personalised and data-driven promotion.**

Professor Carah explains how social media platforms collect vast amounts of user data, allowing alcohol companies to target their marketing with unprecedented precision. Rather than simply showing the same advert to everyone, digital platforms can identify and engage people who are most likely to respond to alcohol marketing, creating a feedback loop that continually refines and amplifies promotional content. These systems are particularly concerning for products such as alcohol, where increased consumption can lead to significant health harms.

The discussion also explores the challenges this poses for regulation. While many alcohol marketing rules were developed for traditional media, social media platforms blur the boundaries between advertising, entertainment and user-generated content.

**Listen to the podcast**

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CAMPAIGN

# Alcohol Awareness Week 2026 encourages people to reflect on “Alcohol and me”

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**This year's Alcohol Awareness Week 2026 will take place from 6–12 July and is centred on the theme "Alcohol and me". Coordinated by Alcohol Change UK, the campaign aims to encourage people to take a step back and consider the role alcohol plays in their own lives, health and wellbeing.**

This year's theme recognises that alcohol is often presented as a normal and expected part of everyday life, from celebrations and social occasions to relaxing at home. Alcohol Change UK is inviting people to explore how alcohol may be affecting them personally, whether through sleep, energy levels, mental wellbeing, relationships or longer-term health risks. The campaign encourages individuals to spend a few minutes reflecting on their drinking, learning more about their level of risk, and considering whether any changes could improve their health and wellbeing.

Throughout the week, Alcohol Change UK will share practical resources, including tools to help people understand their drinking patterns, advice on cutting down, and stories from people who have experienced alcohol harm and made positive changes.

**Find out more**

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CAMPAIGN

## Cancer Prevention Action Week underlines the need for clear alcohol product labelling

**This year's Cancer Prevention Action Week (15–21 June), led by the World Cancer Research Fund, focused on the theme "Science Not Fiction – Evidence Saves Lives." The campaign encouraged people to look beyond headlines, trends and misinformation and instead rely on trusted, evidence-**

**based information when making decisions about their health. Clear and accurate information is essential to helping people understand cancer risk and take effective action to reduce it.**

Alcohol was one of the key topics highlighted during Cancer Prevention Action Week, with the World Cancer Research Fund emphasising that alcohol increases the risk of seven types of cancer and that there is no safe level of drinking when it comes to cancer risk. The campaign sought to help people distinguish between evidence-based health advice and misinformation, reinforcing the importance of clear communication about established cancer risk factors.

The theme resonated strongly with findings from the **recent report** by Alcohol Focus Scotland and the Alcohol Health Alliance UK, which found that many alcohol products fail to provide consumers with basic health information. Together, the campaign and Alcohol Focus Scotland's labelling research highlighted a common message: people have a right to clear, accurate and evidence-based information about the products they consume fuelling calls for mandatory health warning labels on alcohol products.

**Read more about this year's Cancer Prevention Action Week**

RESEARCH

## New study finds no protective effect of low-level alcohol consumption on mortality

**A new study published in the *Journal of Studies on Alcohol and Drugs* challenges the long-held belief that low levels of alcohol consumption may be beneficial for health. Drawing on data from the Alcohol Intake and Health Study, researchers found no evidence that drinking small amounts of alcohol protects against death from any cause. Instead, the risk of mortality increased progressively as alcohol consumption rose.**

The study found that alcohol consumption, including at what may be perceived as “moderate” levels, is associated with increased mortality and morbidity risks. For

men drinking 6.5 drinks a week had life-time alcohol-attributable mortality risks of around 1 in 1,000, while for men consuming around 14 drinks per week, the risk of an alcohol-related death rises to approximately 1 in 25. The findings identified increased risks across a range of health outcomes, including cancer, cardiovascular disease and injury, reinforcing evidence that alcohol-related harm occurs at lower levels of consumption than was previously thought.

The authors argue that the findings should inform future drinking guidelines and help individuals make more informed decisions about their alcohol use.

**Read more**

RESEARCH

## Study suggests alcohol may amplify the impact of unhealthy diets on obesity

**A new study published in *Obesity Reviews* has explored how alcohol interacts with diet to influence energy intake and weight gain. Researchers from the University of Sydney developed a model to better understand why previous studies have produced mixed findings on the relationship between alcohol and obesity, despite alcohol being high in calories.**

The researchers suggest that alcohol may increase people's preference for savoury foods after drinking. In diets based largely on minimally processed foods, this may lead people towards protein-rich foods that help them feel full. However, in modern food environments dominated by ultra-processed foods, many savoury products contain relatively little protein despite tasting savoury. This can lead people to consume more calories overall while still not satisfying their nutritional needs.

Using population dietary data, the study found evidence that alcohol may exacerbate the effects of ultra-processed diets by encouraging greater consumption of energy-dense foods and contributing to higher overall calorie intake. The authors argue that alcohol's impact on weight gain cannot be

understood in isolation and is influenced by the wider food environment in which people live.

**Read more**

RESEARCH

## Childhood adversity linked to greater risk of multiple addictive behaviours

**A new study published in *Addictive Behaviors* has found that people who experience multiple adverse events during childhood are more likely to develop a range of addictive behaviours later in life. Researchers surveyed more than 800 adults in Italy and examined links between childhood adversity and behaviours including alcohol use, smoking, drug use, gambling, overeating, gaming and compulsive shopping.**

The study found that people who had experienced multiple adverse childhood experiences reported higher levels of several addictive behaviours, particularly tobacco use, overeating and compulsive sexual behaviour. Importantly, the researchers found that these behaviours were also more likely to occur together, suggesting that childhood adversity may increase vulnerability to a broader pattern of addiction rather than a single harmful behaviour.

Alcohol along with tobacco played a central role within these interconnected patterns. Among people who had experienced multiple adverse childhood events, alcohol use was strongly linked with other substance-related behaviours, including tobacco, cannabis and cocaine use. The authors suggest that addictive behaviours may sometimes develop as coping mechanisms for dealing with the lasting emotional impact of difficult childhood experiences.

The authors argue that identifying and responding to cumulative adverse childhood experiences early could help reduce the risk of a range of addictive behaviours developing later in life.

**Read more**

TRAINING

## Workbook for staff of licensed premises

**The Alcohol Focus Scotland Workbook for Staff of Licensed Premises is an ideal tool for personal licence holders to provide the 2 hours minimum training to all their staff as required by the Licensing (Scotland) Act 2005.**

The workbook has been specifically created to be a valuable guide for staff members, providing essential knowledge to enhance their role within the licensing framework.

**Buy Now**

EVENT

## SHAAP Alcohol Occasionals

**Navigating the promise and risks of industry-funded partnership**
**Online Event**
**Monday 7 September, 12.45pm – 2pm**

The third seminar of the 2026 Alcohol Occasionals will be delivered by Abbie Irving (University of Edinburgh). The seminar is titled "Navigating the promise and risks of industry-funded partnership: local public and third sector organisations' experiences of Community Alcohol Partnerships (CAP)" and will focus on research

conducted during Abbie's PhD which examined local CAP partners' participation in CAP and their views on the significance of its alcohol industry funding.

**Book your place**

**The impact of extended alcohol trading hours in Glasgow and Aberdeen**
**Online Event**
**Monday 5 October, 12.45pm – 2pm**

The fourth and final seminar of the 2026 Alcohol Occasionals will be delivered by Professor Niamh Fitzgerald (University of Stirling). The seminar, titled "Understanding the impact of recent extensions to late-night alcohol trading hours in Glasgow and Aberdeen: findings from the ELEPHANT study", will explore research which aimed to understand and evaluate the introduction, operation and impact of the later trading hours introduced in the two cities.

**Book your place**

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EVENT

## ACUK Food and belonging

**An Alcohol Change UK online learning event**
**Thursday 2 July**
**10.00am to 12.35pm**
**£70 including VAT and booking fee**

Alcohol issues are rarely just about alcohol. Harmful alcohol use often goes hand-in-hand with social disconnection and disordered eating. People who are alcohol-dependent are often underfed, underweight and undernourished, and this can increase the harm that alcohol causes in their lives.

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**Book your place**

---

EVENT

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**University of Stirling**

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Organised by the University of Stirling in collaboration with the New Directions in the Study of Alcohol Group, the conference aims to foster fresh ideas, highlight emerging evidence, and facilitate critical dialogue in addressing complex and evolving challenges in alcohol-related harm, prevention, treatment, and policy. The conference is also supported by the Scottish Alcohol Research Network.

**Find out more**

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# Donate to AFS

Do you share our passion for reducing the harm caused by alcohol in Scotland?

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**Sent:** 30 July 2026 13:48
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July 2026

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- **Scottish Alcohol Sales Decrease in 2025**
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- **Study reveals young people's concerns over alcohol sponsorship in sport**
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- **Detoxification and other support available in residential rehabilitation settings**
- **New Lancet Commission highlights the vital role of primary care in tackling liver disease**
- **The beautiful game versus our favourite drug**
- **AFS Policy Team Updates**
- **A return on investment analysis for the 2017 increase in alcohol excise taxation in Lithuania**
- **ASH, AHA and OHA respond to Ethics and Integrity Commission review on lobbying transparency**
- **On the Label: Implementation of Health Warnings on Alcohol Products in 13 European Countries**
- **Modelling study: alcohol control policies could prevent thousands of cancer cases across the EU**
- **Models of care for alcohol use disorder in general hospital settings: a scoping review**
- **Seeing the similarities: applying a coherent lens to harmful products as drivers of suicide**
- **Genetic risk for alcohol use disorder and suicide attempt**
- **Structural discrimination and alcohol consumption: a systematic review**
- **Important Notice on Alcohol Focus Scotland Licensing Board Members and Standards Officer Training**
- **Workbook for staff of licensed premises**
- **SHAAP Alcohol Occasionals**
- **Alcohol Research 2026**
- **Embracing complexity: An Alcohol Change UK Online Learning Event**
- **Donate to AFS**

UPDATE

# Alcohol Action Network Launched

**Alcohol Focus Scotland is delighted to announce the launch of a new project aiming to further cement the voices of lived and living experience across the work we do to reduce the unacceptable levels of alcohol harm in Scotland.**

The Alcohol Action Network will build on Alcohol Focus Scotland's current involvement work where we routinely seek views from people with lived and living experience. By formalising the support we offer and expanding opportunities for involvement we hope people will be able to contribute to our work in even more meaningful ways.

The network will bring together people from across Scotland who have experience of alcohol harm, whether through their own drinking or through the drinking of someone close to them. Members will receive training in media, communications, advocacy and alcohol policy, helping them to share their experiences safely, confidently and effectively.

Alcohol Focus Scotland will create opportunities for members to engage with decision-makers, contribute to media stories and help shape our policy and campaigning work. Their expertise will help ensure that Scotland's response to alcohol harm is informed by the people most affected by it.

We want to bring together a diverse network of advocates from communities across the country, to amplify lived experience, challenge stigma and build more effective policies for the future.

We'd love to hear from people from all walks of life and every part of Scotland who want to use their experience to help create positive change.

If that sounds like you and you want to find out more or apply, you can download our recruitment pack or submit an expression of interest.

Alcohol Action Network Recruitment Pack

Expression of Interest Form



Alcohol Action Network

ALCOHOL FOCUS SCOTLAND

UPDATE

# Scottish Alcohol Sales Decrease in 2025

**A new update from Public Health Scotland has shown that in 2025 the volume of alcohol sold has continued to fall, representing a 15% decrease since 2017.**

Throughout the period from 2017 to 2025 the volume of pure alcohol sold per adult drinker per year in Scotland has fallen steadily from 12.7 litres in 2017 to 10.7 litres in 2025. The 2025 figure is equivalent to 20.7 units per week – more than the Chief

Medical Officers' low-risk guidelines of 14 units and remains higher than the alcohol consumption of our neighbours in England and Wales.

At the same time, more people than ever before identify as a non-drinker. This number has risen to 20% in 2024, up from 12% in 2008.

The majority (76%) of alcohol sold in 2025 in Scotland continues to be sold in supermarkets and shops.

In response to the figures, Sophie Bridger, policy manager at Alcohol Focus Scotland, said, "While it is encouraging that alcohol consumption in Scotland has fallen by 15% since 2017, too many people are still drinking at levels that harm their health.

"Minimum unit pricing has helped reduce consumption, but alcohol-related harm remains unacceptably high. The new Scottish Government must take decisive action to cut alcohol consumption further by tackling relentless alcohol marketing and reforming the licensing system."

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## Children and young people have a right to a childhood free from alcohol marketing

**In a new blog for Children in Scotland, Amy Smith, Senior Policy Coordinator at Alcohol Focus Scotland, sets out why restricting alcohol marketing is essential to protecting children's rights, arguing that exposure to alcohol advertising drives earlier and heavier youth drinking and conflicts with Scotland's obligations under the UNCRC.**

She highlights Alcohol Focus Scotland's joint Alcohol-Free Childhood campaign and calls on the new Scottish Government to bring forward comprehensive

marketing restrictions without further delay.

**Read the blog_**

UPDATE

# Study reveals young people's concerns over alcohol sponsorship in sport

**New research from the University of Stirling, funded by Scottish Health Action on Alcohol Problems (SHAAP), has found that young people in Scotland see a clear contradiction between sport's healthy image and its widespread sponsorship by alcohol brands. Researchers led by Dr Richard Purves of the Institute for Social Marketing and Health held ten online focus groups with 44 young people aged 11 to 17, exploring their views on alcohol sponsorship of sports teams, competitions and events.**

Participants demonstrated a sophisticated understanding of sponsorship as a marketing tactic, with many describing exposure to alcohol branding as a daily occurrence, particularly through televised football and rugby. While young people were often critical — one participant called it "a bit ironic" for a health-linked activity like sport to be partnered with alcohol — many also said this constant exposure had made the association feel normal, even to those who questioned it. Most participants supported action to reduce their exposure, including restricting when alcohol sponsorship can appear during broadcasts and limiting branding at sporting venues.

SHAAP Chair Dr Alastair MacGilchrist said the findings give policymakers clear evidence, in young people's own words, that restricting alcohol sponsorship in sport is a "sensible, proportionate step to protect children from marketing they neither chose nor benefit from."

This research speaks directly to the concerns at the heart of the **Alcohol-Free Childhood campaign**, which calls for children to be able to grow up free from exposure to alcohol marketing. The study offers powerful, first-hand evidence that young people themselves recognise the harm in normalising alcohol through sport, reinforcing AFS's call on the Scottish Government to bring forward comprehensive restrictions on alcohol marketing without further delay.

**Read the study**

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UPDATE

## AFS at Recovery Connects

**Alcohol Focus Scotland was privileged to attend the 2026 Recovery Connects Festival at Queens Park this month. The festival is one of the highlights of the Scottish Recovery Community calendar and represents a great opportunity to celebrate recovery, enjoy music and entertainment in an alcohol and drug free space and connect with likeminded individuals and organisations.**

We were out in force on the day talking to people about how we can prevent and reduce alcohol harm in Scotland, including promoting our new lived and living experience project – the **Alcohol Action Network**.




UPDATE

# Digital Intoxication: Alcohol Marketing explained – a new IAS documentary

The Institute for Alcohol Studies (IAS) has published a new documentary, **Digital Intoxication: Alcohol Marketing Explained**.

The film unpacks how alcohol companies exploit the same "addictive by design" platforms now facing landmark lawsuits over child safety, with insight from Professors Antonia Lyons, University of Auckland and Nic Carah, University of Queensland, with testimony from Karen, a Balance North East spokesperson.

The film covers:

- How AI-driven "lookalike" targeting finds heavy drinkers and pushes marketing to people just like them
- How celebrities and influencers promote their own alcohol brands without disclosing them as ads
- The rise of alcohol marketing in e-sports, gaming and the metaverse - reaching audiences that skew heavily under-18
- Why regulation has failed to keep pace, and what a WHO-style ladder of measures could look like

With governments from Australia to the UK now moving to restrict children's access to social media altogether, it feels like a timely moment to make the case for tackling alcohol marketing the same way.



UPDATE

# Taking bold action to improve health: lessons from Scotland

**In a new blog for The King's Fund, Paul Johnston, Chief Executive of Public Health Scotland, reflects on lessons from Scotland's Minimum Unit Pricing (MUP) journey following a recent conference on health inequalities.**

He notes that MUP, introduced in 2018 after a five-year industry legal challenge, was estimated to have prevented around 150 deaths and 400 hospital admissions within less than three years, with the greatest impact seen in the most deprived communities, while a Public Health Scotland evaluation found little evidence of the negative economic or social effects predicted by industry critics.

Johnston is candid that MUP alone is not enough — alcohol harms remain high, with alcohol-specific deaths and hospital admissions almost six and seven times higher respectively in Scotland's most deprived areas compared to the least deprived. He argues policymakers should be willing to act on strong evidence even without absolute certainty, to properly evaluate and strengthen policies that work (as happened when MUP rose from 50p to 65p per unit in 2024), and to adopt proven approaches more quickly across the UK — citing Wales's adoption of MUP as a positive example and calling for equivalent action in England and Northern Ireland, alongside UK-wide progress on alcohol advertising and labelling. He warns that industry voices must not be allowed to disproportionately influence or delay these decisions.

**Read the blog**

UPDATE

# Alcohol Brief Interventions – next steps for Scotland

**Scottish Health Action on Alcohol Problems (SHAAP) has published a report from a conference it held at the Royal College of Physicians of Edinburgh in May 2026, bringing together researchers, policymakers and clinicians to consider the future of Scotland's Alcohol Brief Interventions (ABI) programme at a point when the Scottish Government is considering how to reinvigorate it. The event drew on the latest research, including findings from a recent Public Health Scotland review of the programme.**

The report sets out six recommendations for refreshing ABIs in Scotland: relaunching the programme to reflect the changed health and social care landscape and make better use of digital tools; broadening it into a more holistic, non-stigmatising and trauma-informed "family of conversations" about alcohol; expanding delivery into more settings with outcome-focused targets; simplifying the approach through screening and stratifying people into "no problem," "small problem" and "big problem" categories; investing in training, education and capacity, including at undergraduate level; and strengthening leadership and accountability at national, local and service level.

**Read the report**

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UPDATE

# Detoxification and other support available in

# residential rehabilitation settings

**The Scottish Government has published new findings from a survey of all 28 known residential rehabilitation facilities in Scotland, exploring the availability of detoxification services and the wider pre-, through- and after-care support offered to people in residential rehabilitation.**

The survey, conducted between September and October 2025 as part of the work of the Future of Residential Rehabilitation Working Group, found that only half of facilities (14 of 28) offer detoxification on-site, most commonly for opiates (92%), prescription-only painkillers (85%), and alcohol and benzodiazepines (both 77%). Where detoxification is provided, all facilities operate within a recognised regulatory framework, most commonly registration with the Care Inspectorate (71%), and all have written policies for managing early discharge.

The report also highlights that most facilities offer a broad range of wraparound support: 79% provide some form of pre-care ahead of admission, 86% offer additional support during a client's stay (most commonly family and mental health support), and 96% provide after-care, with peer support (82%), housing support (68%) and employability support (57%) the most commonly offered. Notably, only 15% of facilities involve service users in the design or review of the service they provide, and only 12% involve psychologists in mental health or cognitive assessments, despite these being reported by 61% of facilities.

These findings reinforce concerns Alcohol Focus Scotland has consistently raised about the residential rehabilitation landscape in Scotland. While it is encouraging that after-care and family support are now widely embedded, the fact that only half of facilities can offer detoxification on-site points to a continuing gap in the treatment pathway — one that risks leaving people waiting longer, or facing additional barriers, before they can even begin residential treatment.

**Read the report**

UPDATE

# New Lancet Commission highlights the vital role of primary care in tackling liver disease

**A major new Lancet Gastroenterology & Hepatology Commission, published in July 2026, has set out the crucial role primary care must play in preventing, detecting and managing liver disease. Liver UK (the new name for the British Liver Trust and Children's Liver Disease Foundation) contributed to the Commission, which was led by Dr Helen Jarvis, a GP in the Northeast of England.**

Liver disease causes around 2 million deaths worldwide each year and is increasingly driven by alcohol-related liver disease and metabolic dysfunction-associated steatotic liver disease (MASLD), with the burden falling disproportionately on people in more deprived communities.

The Commission argues that GPs and primary care teams are uniquely placed to prevent liver disease, identify risk factors, diagnose disease earlier and coordinate long-term care, and calls for liver health to be built into wider strategies for managing long-term conditions and tackling health inequalities. It also highlights the damaging effect of stigma, noting that it discourages people from seeking help and can worsen outcomes once they do, and calls for greater awareness, education and person-centred care. Liver UK's own "Make Early Diagnosis of Liver Disease Routine" campaign is cited within the report as an example of successful advocacy already helping to change how liver disease is diagnosed and managed within primary care.

This international recognition of the central role primary care must play in catching liver disease early lends significant weight to AFS's own long-standing calls for action here in Scotland. As we have previously highlighted, chronic liver disease in Scotland is projected to increase by 54% by 2044, with the majority of cases caused by alcohol, and three-quarters of cirrhosis patients still only diagnosed in

emergency departments when it is too late for effective treatment.

**Read more on the Commission**

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UPDATE

# The beautiful game versus our favourite drug

**In a new opinion piece for The BMJ, William Gilmore, Senior Research Fellow at Curtin University's National Drug Research Institute, and Sir Ian Gilmore, Chair of the Alcohol Health Alliance, warn that growing political and industry pressure to relax alcohol bans at football stadiums risks fuelling further alcohol-related harm.**

The authors highlight the strong evidence linking football matches to spikes in domestic violence, particularly when a supported team loses, and note that alcohol producers continue to sponsor clubs at every level, deepening the normalisation of drinking within sport despite well-established health harms.

With Scotland's stadium alcohol ban already facing pressure from trial exemptions, and English politicians openly questioning current restrictions, the authors argue that the case for loosening rather than tightening the law is weak, and caution that the alcohol industry stands ready to frame resulting harms as a matter of individual behaviour rather than its products.

**Read the article**

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UPDATE

# Helping people through alcohol withdrawal: your views wanted on proposed AToM2 study

**NHS Greater Glasgow and Clyde is inviting people with personal experience of alcohol withdrawal or recovery — including those who have supported someone through it — to help shape a proposed new study, AToM2, before it goes forward for funding.**

Led by Professor Donogh Maguire, the study would investigate whether giving magnesium and thiamine (Vitamin B1) during a hospital admission for alcohol withdrawal could help people recover more effectively and continue that support once they return home.

The need is stark: previous research at Glasgow Royal Infirmary found that up to one in six people admitted to hospital with alcohol withdrawal did not survive the following year, with more than 60% of those patients found to have low magnesium levels — yet most do not currently receive ongoing supplementation after discharge. AToM2 would test this simple, safe and inexpensive intervention across three phases, following people through their hospital stay and for up to a year afterwards, with the aim of reducing the severity of withdrawal and improving survival for one of Scotland's most vulnerable patient groups.

NHSGGC wants your input to make sure the study is designed to be as safe and accessible as possible. There's a short video (around 6 minutes) explaining the project, followed by an anonymous survey that takes just 3–5 minutes to complete.

**Watch the video and complete the survey**

Or contact the team directly at **ggc.public.involvement@nhs.scot**

POLICY

# AFS Policy Team Updates

**One of the most crucial tools in addressing alcohol-related harm is availability. As such, the licensing landscape is an important area of our work at AFS. We are currently working on reports which will revisit work last conducted in 2018: looking at local licensing boards' policies and their annual reports. This is a complex system, with complex issues – and one which we know needs reform. These reports will show us where change is most needed.**

Since the election in May, we've been engaging with MSPs across the parliament to build support for the asks in our manifesto. We need this parliament to act urgently to reduce harm caused by alcohol. We'll be working with the government to make sure their upcoming alcohol harm prevention plan addresses availability, affordability, and acceptability of alcohol. We'll ensure that it includes what we hear from across our communities, and responds effectively to their needs.

Despite alcohol being a leading cause of cancer, public awareness of this risk is alarmingly low. Our new joint report with Alcohol Health Alliance, **A Clear Way Forward**, highlights how little information is provided on alcohol labels and calls for new mandatory labelling requirements. The public have a right to know what's in their drink.

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POLICY

# A return on investment analysis for the 2017 increase in alcohol excise taxation in Lithuania

**This study, published in *Addiction*, examines the economic and health impact of Lithuania's substantial 2017 alcohol excise tax increase — 112% for beer, 111% for wine and 23% for spirits — which sharply reduced alcohol affordability. Researchers led by Jürgen Rehm and Mindaugas Štelemėkas assessed costs and benefits from a societal perspective, comparing healthcare, childcare, legal and productivity costs in the 12 months before and after the policy came into force.**

The results are striking. Tax revenue rose by 20% (over €100 million) in the first year, while alcohol-attributable productivity losses fell by around €35.3 million. Overall, the policy generated a net societal benefit of over €136 million, and for every €1 the Lithuanian government spent implementing the tax rise, it saw a return of €420 — a figure that held up (ranging from 292:1 to 530:1) across multiple sensitivity analyses. The study concludes that the tax increase delivered both a large financial return and reductions in alcohol-attributable mortality and hospitalisations.

This is a powerful illustration of how tax and pricing policy can simultaneously improve public health and strengthen public finances, reinforcing the evidence base AFS draws on in calling for robust, well-structured alcohol taxation as one of the most cost-effective tools available to reduce alcohol harm.

these findings strengthen the case for the UK Government to use excise duty more assertively as a public health lever and add further weight to AFS's long-standing call for the Scottish Government to introduce automatic, inflation-linked uprating of Minimum Unit Pricing — ensuring Scotland's own pricing policy doesn't lose potency over time in the way an unprotected duty regime can.

**Read the study**

POLICY

# ASH, AHA and OHA respond to Ethics and Integrity Commission review on lobbying transparency

**Action on Smoking and Health (ASH), the Alcohol Health Alliance (AHA) — of which Alcohol Focus Scotland is a member — and the Obesity Health Alliance have welcomed the Ethics and Integrity Commission's recommendations following its review into lobbying, disclosure and access to government.**

Speaking on behalf of all three alliances, Caroline Cerny highlighted the extensive evidence that industries profiting from harmful products, including tobacco, alcohol and unhealthy food, have long lobbied to delay or weaken public health measures, often without transparency.

The response calls the EIC's recommendations a vital step towards ensuring policy decisions are open and accountable and reiterates the public's right to know who is seeking to influence decisions affecting their health, particularly where those doing the influencing have a direct financial stake in the outcome.

**Read the press release**

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RESEARCH

## On the Label: Implementation of Health Warnings on Alcohol Products in 13 European Countries

**A new study, published in *Drug and Alcohol Review*, provides fresh evidence on how alcohol health warning labels are actually implemented across Europe. Researchers conducted store audits across 32 stores in 23 cities in 13 European countries, assessing 1,636 products for the presence, content and format of health warnings.**

They found that 69.7% of products displayed some form of health warning, but the

overwhelming majority related to pregnancy (68%), drink-driving (21.4%) or age restrictions (16.6%). Responsible drinking messages appeared on just 6.9% of products, while warnings about the actual health harms of alcohol use — such as cancer or liver disease — appeared on a mere 0.3%. The predominant format was pictogram-only, which the authors note aligns with industry preference for minimal, vague warnings rather than clear, evidence-based communication. They conclude that comprehensive, evidence-based regulatory frameworks are needed, moving beyond the current narrow focus on specific subgroups to ensure all consumers are informed about serious health consequences, particularly cancer risk.

These findings echo — and reinforce — AFS's own recent report with the Alcohol Health Alliance, ***A Clear Way Forward: The Case for Better Alcohol Labelling***, which audited over 530 UK products and found an almost identical pattern: near-universal pregnancy pictograms, but specific cancer warnings on just 1.3% of products, and industry responsible drinking messaging appearing more than ten times as often as any genuine health warning.

**Read the study**

RESEARCH

## Modelling study: alcohol control policies could prevent thousands of cancer cases across the EU

**A new modelling study, published in The Lancet Regional Health – Europe, has for the first time estimated just how many cancer cases could be prevented across the EU if governments took stronger action on alcohol.**

Alcohol is a proven cause of seven types of cancer, and researchers looked at what would happen if countries introduced measures such as higher alcohol taxes, a Sunday sales ban, a ban on alcohol marketing, or a combined package of policies similar to reforms already introduced in Lithuania.

The findings are striking. In 2022, an estimated 146,000 cancer cases across the EU — around 1 in 6 cases of the relevant cancer types — were caused by alcohol.

Every policy option modelled would reduce this toll, but combining several measures together, as Lithuania has done, had by far the biggest impact, preventing an estimated 9,220 cancer cases. Raising alcohol taxes alone would prevent over 8,000 cases, a marketing ban over 6,000, and a ban on Sunday alcohol sales around 5,500. Breast cancer and oesophageal cancer saw the largest reductions across the board.

The researchers conclude that alcohol policy remains a hugely underused tool for preventing cancer and should be built into EU and national cancer strategies.

**Read the study**

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RESEARCH

## Models of care for alcohol use disorder in general hospital settings: a scoping review

**This scoping review examined how hospitals identify and manage alcohol use disorder (AUD) among general hospital inpatients — a setting that offers a valuable opportunity for early intervention, but where current approaches remain poorly defined and difficult to evaluate.**

Researchers reviewed peer-reviewed studies published between 1990 and 2025, including only those describing at least two components of care, such as screening, brief interventions, medically assisted withdrawal, relapse prevention, psychosocial support, transition to community services, or staff training.

From 51 included studies, the researchers identified four distinct models of care: consultation liaison, screening/brief intervention/referral to treatment, protocol implementation, and supported diversion. These varied substantially in purpose, target population and focus, reflecting a fragmented picture of how hospitals approach AUD.

Consultation liaison models offered the most comprehensive care — with specialist teams providing clinical leadership, evidence-based interventions, links to

community services and workforce training — but rarely incorporated systematic screening to identify patients with AUD in the first place. Across every model examined, the researchers identified a consistent and critical gap: limited integration with mental health care.

**Read the study**

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RESEARCH

## Seeing the similarities: applying a coherent lens to harmful products as drivers of suicide

**This essay, published in PLOS Global Public Health, examines why some products linked to fatal self-harm are tightly regulated while others — including alcohol, gambling products, opioids, firearms and pesticides — are widely promoted and framed as safe when used "appropriately."**

The authors, from the University of Edinburgh, Bristol and Cambridge, argue that this inconsistency shifts responsibility for harm onto individuals rather than onto the products themselves and the industries producing them, even where the evidence linking a product to self-harm is well established.

On alcohol specifically, the paper notes that the World Health Organization estimates 22% of all fatal self-harm can be attributed to alcohol use, and recommends restrictions on alcohol availability, marketing and pricing as important suicide prevention measures. The authors cite evidence that alcohol restrictions have been followed by reductions in self-harm deaths, including after Russia's 2006 alcohol policy and South Africa's Covid-19 alcohol restrictions.

They highlight that, despite this evidence, alcohol remains widely available around the clock in many contexts and is marketed using sophisticated strategies that glamourise its use, while the industry-funded framing of "responsible drinking" shifts blame onto individual consumers rather than the product itself.

The paper draws parallels with gambling, opioids, firearms and pesticides, arguing

that in each case, industry-favourable narratives obscure the role of product design, marketing and availability in driving preventable deaths, and calls for a consistent public health approach that treats all of these products through the same evidence-based lens.

**Read the paper**

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RESEARCH

## Genetic risk for alcohol use disorder and suicide attempt

**This large Swedish cohort study explored how genetic risk for alcohol use disorder (AUD) and genetic risk for suicide attempt relate to a range of other life outcomes.**

Researchers followed over half a million people born between 1965 and 1985 through to the end of 2018, using genetic risk scores to group individuals according to whether they had high or low genetic liability to AUD, to suicide attempt, or to both.

The findings show that these two genetic risks are not simply interchangeable. People with high genetic risk for both AUD and suicide attempt together had the strongest links to negative outcomes, such as drug use disorder.

However, people with high genetic risk for suicide attempt but low genetic risk for AUD stood out as a distinct group: they were the least likely of all groups studied to experience negative outcomes and were actually more likely to have positive educational outcomes than average. This suggests that a lower genetic vulnerability to alcohol problems may offer some protective effect, even for people who carry elevated genetic risk for suicide attempt.

The authors say these findings highlight the importance of unpicking the different genetic and social threads that connect alcohol problems and suicide risk, rather than treating them as one and the same.

Read the study

RESEARCH

## Structural discrimination and alcohol consumption: a systematic review

**This systematic review examined the relationship between macro-level structural discrimination — racism, sexism and heterosexism embedded in social systems and institutions, rather than individual acts of discrimination — and alcohol consumption or related harm.**

Researchers searched four databases and grey literature, identifying 25 eligible studies, the large majority US-based, covering structural racism (11 studies), sexism (7), heterosexism (4) and intersectional discrimination (3).

Findings varied considerably by type of discrimination and how it was measured. Most structural racism studies used racial segregation as their exposure measure, but results were inconsistent even within the same outcome categories; more consistent emerging evidence linked greater race-based poverty and incarceration gaps to higher alcohol consumption and harm, particularly among Black and Hispanic populations.

For structural sexism, evidence suggested a complex picture: greater gender equality was associated with a higher likelihood of women drinking at all, while greater structural sexism itself was linked to higher rates of risky drinking and alcohol-related deaths.

Structural heterosexism showed a positive association with high-intensity drinking and alcohol use disorders among sexual minority populations, though evidence here remains limited.

The authors note that no studies examined the combined impact of multiple, overlapping forms of structural discrimination, and call for greater consistency in

how structural discrimination is measured, alongside more intersectional and longitudinal research designs.

**Read the study**

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TRAINING

## Important Notice on Alcohol Focus Scotland Licensing Board Members and Standards Officer Training

**As of 1 July, Alcohol Focus Scotland has officially ceased to deliver qualification training courses for Licensing Board Members and Licencing Standards Officers. This is now being carried out by REHIS.**

We have updated our **web page** to reflect this change including information on how to access these courses via REHIS.

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TRAINING

## Workbook for staff of licensed premises

**The Alcohol Focus Scotland Workbook for Staff of Licensed Premises is an ideal tool for personal licence holders to provide the 2 hours minimum training to all their staff as required by the Licensing (Scotland) Act 2005.**

The workbook has been specifically created to be a valuable guide for staff members, providing essential knowledge to enhance their role within the licensing

framework.

Buy Now

EVENT

# SHAAP Alcohol Occasionals

**Navigating the promise and risks of industry-funded partnership**
**Online Event**
**Monday 7 September, 12.45pm – 2pm**

The third seminar of the 2026 Alcohol Occasionals will be delivered by Abbie Irving (University of Edinburgh). The seminar is titled "Navigating the promise and risks of industry-funded partnership: local public and third sector organisations' experiences of Community Alcohol Partnerships (CAP)" and will focus on research conducted during Abbie's PhD which examined local CAP partners' participation in CAP and their views on the significance of its alcohol industry funding.

**Book your place**

**The impact of extended alcohol trading hours in Glasgow and Aberdeen**
**Online Event**
**Monday 5 October, 12.45pm – 2pm**

The fourth and final seminar of the 2026 Alcohol Occasionals will be delivered by Professor Niamh Fitzgerald (University of Stirling). The seminar, titled "Understanding the impact of recent extensions to late-night alcohol trading hours in Glasgow and Aberdeen: findings from the ELEPHANT study", will explore research which aimed to understand and evaluate the introduction, operation and impact of the later trading hours introduced in the two cities.

**Book your place**

EVENT

## Alcohol Research 2026

**6-7 October 2026**
**University of Stirling**

**Researchers, policymakers, practitioners, and stakeholders are invited to join Alcohol Research 2026: New Thinking, New Directions, a new conference dedicated to advancing innovative, interdisciplinary perspectives on alcohol research, policy, and practice.**

Organised by the University of Stirling in collaboration with the New Directions in the Study of Alcohol Group, the conference aims to foster fresh ideas, highlight emerging evidence, and facilitate critical dialogue in addressing complex and evolving challenges in alcohol-related harm, prevention, treatment, and policy. The conference is also supported by the Scottish Alcohol Research Network.

**Find out more**

EVENT

## Embracing complexity: An Alcohol Change UK Online Learning Event

**Wednesday 14 October and Thursday 15 October 2026**
**Two Half Days**
**Online**

People are different, and so are their alcohol issues. Join us online on 14 and 15 October for our 2026 annual conference, where we'll be exploring the complexity of people's lives, the role alcohol plays in that, and how we can offer support that's relevant, accessible and effective.

Confirmed speakers include:

- Charlotte Hazell-Caldwell, on what services need to know about alcohol and domestic violence
- Tess Falzon, on how her team have implemented smoking cessation support for people in treatment for alcohol and other drugs
- Chris Dunbar, on how to make support open and accessible for LGBTQ+ people
- Vanessa Townsend, on supporting recovery from alcohol-related brain damage (ARBD)
- Mushtaq Dakri, on engaging with ethnic and religious diversity.
- Plus, most importantly, we'll be hearing voices of lived experience, including an interview with Aaron Davies on his recovery from an alcohol-related stroke.

**Book your place**



# Donate to AFS

Do you share our passion for reducing the harm caused by alcohol in Scotland?

**To fundraise for AFS, or if you would rather support us with either a one off or regular donation, visit our JustGiving page.**

**Donate Now**

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**Sent:** 27 August 2026 11:31
**To:** Dragona, Anastasia
**Subject:** Alcohol Focus Scotland latest - August 2026

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August 2026

- **Free Alcohol Awareness Sessions**
- **Under the influence? Perspectives of alcohol in the parliamentary workplace among UK MPs and staff**
- **FASD Hub: FASD Awareness Month Webinars**
- **In Focus: CEO Blog**
- **ASA Snapshot Report: The depiction of under-25s in alcohol and gambling ads online**

- **Scottish Alcohol Counselling Consortium Website relaunched**
- **WCRF Blog: It's time to show alcohol and junk food sponsorships the red card**
- **Alcohol-related liver disease deaths in England rose 28% since the pandemic**
- **SHAAP Blog: Community Alcohol Partnerships — growing prominence and concerns about industry funding**
- **Helping people through alcohol withdrawal: your views wanted on proposed AToM2 study**
- **Early exposure to Ireland's new alcohol health warning labels: an emerging picture**
- **Engagement in alcohol-free activities, community disadvantage and heavy drinking after alcohol treatment**
- **Journeys through alcohol use and recovery among people experiencing homelessness**
- **RCPsych Guidance: Switching from chlordiazepoxide for the management of alcohol withdrawal syndrome**
- **Important Notice on Alcohol Focus Scotland Licensing Board Members and Standards Officer Training**
- **Workbook for staff of licensed premises**
- **Upcoming FASD Hub Events**
- **SHAAP Alcohol Occasionals**
- **Alcohol Research 2026**
- **Embracing complexity: An Alcohol Change UK Online Learning Event**
- **Donate to AFS**

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# Free Alcohol Awareness Sessions

In Scotland, alcohol is everywhere. It affects our health, wellbeing and wider society.

Alcohol Focus Scotland are offering a limited number of free alcohol-awareness sessions to teams or groups to help build a deeper understanding of Scotland's

relationship with alcohol, including key facts, figures, and the wider effects on health and wellbeing.

You'll discover the impact alcohol can have on our physical and mental health, relationships, and everyday life. You'll also learn how Alcohol Focus Scotland is making a difference and how you can be part of creating positive change in your community.

Get in touch to find out more and book your team session – email **enquiries@alcohol-focus-scotland.org.uk**

If a team session isn't the right fit for you, you can still take part by joining our open Alcohol Awareness session on 12 November, as part of Alcohol Action Week.

**Key information**

- Session lasts 3 hours
- Free sessions will be delivered between October 2026 and March 2027 and will be offered on a first come first served basis.

**Sign Up Today!**

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UPDATE

## Under the influence? Perspectives of alcohol in the parliamentary workplace among UK MPs and staff

**The Institute of Alcohol Studies has published new research exploring how alcohol shapes the working culture at Westminster, and the impact this has on MPs and parliamentary staff. Drawing on a survey of 191 respondents and 22 interviews, the report finds that alcohol is deeply woven into the parliamentary workplace — with on-site bars and pubs, free alcohol at events, and a networking culture that some see as essential to career**

**progression, all contributing to what one staffer described as a workplace unlike any other: "No other workplace I've had produces its own wine."**

Almost 1 in 10 respondents (8%) reported a negative experience due to someone else's drinking at work, rising to 13% of Westminster-based staff and 9% of MPs, compared to 6% of constituency staff. Younger staff were identified as facing particular risk due to power dynamics and peer pressure. Despite this, 70% of respondents either didn't know or were unsure how to report concerns about a colleague's drinking, and most were unsure whether adequate support was available — with stigma and fear of jeopardising career opportunities cited as key barriers to people seeking help. The report recommends a formal parliamentary alcohol policy, including limiting free alcohol provision to evening events only, tackling drivers such as long hours and late-night votes, and improving signposting to confidential support that isn't limited to abstinence-based recovery.

The report offers a striking case study in how deeply normalised drinking cultures can obscure real harm and create barriers to support — even among those responsible for making the very policy decisions that shape alcohol availability and harm reduction across the country. It's a timely reminder that tackling stigma, and ensuring genuinely accessible support, must go hand in hand with the population-level measures Alcohol Focus Scotland continues to call for.

**Read more**

IAS Institute of Alcohol Studies

UPDATE

# FASD Hub: FASD Awareness Month Webinars

**FASD Month Webinar with Jessica Birch**
**Online event**
**Tuesday 1 September, 10am – 11am**

Don’t miss this FASD Month Webinar on 1st September 10am with Jessica Birch a national advocate and speaker living with FASD.

Join the FASD Hub for an inspiring and thought-provoking webinar with Jessica Birch, a national advocate and speaker living with Fetal Alcohol Spectrum Disorder (FASD).

Jessica is a national advocate and speaker living with Fetal Alcohol Spectrum Disorder (FASD). Following her late diagnosis, she has dedicated her work to building awareness and understanding of this complex brain injury, highlighting the prevalence and lifelong impacts of prenatal alcohol exposure in Australia.

Through sharing her lived experience, Jessica equips individuals, families, carers and health professionals with the insight needed to foster effective support and intervention.

**Find out more and book your place**

**FASD Month Webinar: Making School Work**
**Online Event**
**Wednesday 16 September**

This webinar is designed for parents, kinship carers, foster carers, adoptive parents and extended family members who want to strengthen their partnership with school and help their child thrive.

Schools and families often share the same goal: helping children feel successful,

confident and able to participate fully in school life. Yet communication can sometimes feel challenging, particularly when concerns arise or when families feel their child's needs are not fully understood.

This practical and supportive webinar explores how families and schools can work together to build a shared understanding of a child's strengths, needs, interests and aspirations. Participants will learn strategies for having constructive conversations, sharing information effectively, and focusing on solutions that promote inclusion, wellbeing and positive educational experiences.

**Book your place**




UPDATE

## In Focus: CEO Blog

**No Scotland no party? How Scotland's mythology is weaponised against us, and what we can do about it.**

In her latest blog, Alcohol Focus Scotland chief executive, Carolyn Lochhead reflects on six months in post and Scotland's two conflicting views on alcohol.

Six months into my role as CEO at Alcohol Focus Scotland, I want to talk to you about our country.  Scotland has the kind of brand assets that many corporations would envy. From tartan and bagpipes to shortbread and whisky, we are not short of national symbols; visual shorthand to convey our Scottishness.

It’s something to be proud of. And so are our people: from literary giants like Robert Burns to health pioneers like Elsie Inglis, Scotland’s contribution to the world is significant.

But worldwide, we don’t seem to be celebrated for this rich, varied heritage.

Instead, Scotland is known internationally as a nation that likes to drink.

**Read the blog**



UPDATE

# ASA Snapshot Report: The depiction of under-25s in alcohol and gambling ads online

**The Advertising Standards Authority (ASA) has published a new Snapshot Report examining how well alcohol and gambling advertisers comply with rules banning people who are, or appear to be, under 25 from playing a prominent role in ads or being shown drinking or gambling. Using its AI-based Active Ad Monitoring system, the ASA reviewed around 13,000 unique paid and organic alcohol and gambling ads published online between July and November 2025, of which 4,841 contained human faces and were assessed for compliance.**

While the ASA found the large majority of ads compliant, 2.5% of alcohol ads were rated as clear breaches of the rules and a further 10.8% as possible breaches — notably higher risk rates than for gambling ads (0.4% and 3.4% respectively). Organic social media posts and influencer content, particularly where advertisers shared user-generated content, were identified as the highest-risk ad type, including cases where brands partnered with influencers themselves under 25. Seven alcohol advertisers were responsible for the clear breaches identified, including one whose ads prominently featured UK university students without confirming their ages; this was referred for formal investigation and resulted in an upheld ASA ruling. Other non-compliant advertisers provided assurances that appropriate age checks would be introduced.

While the ASA frames this as evidence that "the vast majority" of advertisers comply, the findings also confirm that alcohol marketing continues to reach young people online in breach of the rules. This report underlines why voluntary, self-policed advertising codes are not sufficient on their own, and reinforces Alcohol Focus Scotland’s call for statutory restrictions on alcohol marketing, rather than relying on industry and self-regulators to catch breaches after they've already reached young audiences.

**Read more**

UPDATE

# Scottish Alcohol Counselling Consortium Website relaunched

**The Scottish Alcohol Counselling Consortium has re-launched their revamped website.**

The new website reflects SACC's growth into the national voice for specialist alcohol counselling in Scotland and showcases their work to strengthen, champion and protect Scotland's voluntary alcohol support sector. It also makes it much easier to:

- Learn about SACC and their impact
- Explore their specialist training programme
- Find out about membership
- Access their directory of member organisations
- Keep up to date with their latest news and resources

**Visit the new SACC website**

UPDATE

# WCRF Blog: It's time to show alcohol and junk food sponsorships the red card

**In a new blog for the World Cancer Research Fund, Melissa Dando, Senior Policy and Public Affairs Officer, examines how alcohol and junk food sponsorship has come to dominate major sporting events, and argues this amounts to "sportswashing" — using sport's positive associations to distract from the harms these products cause. With around 40% of cancer cases linked to risk factors including alcohol and obesity, Dando highlights that this is also a child rights issue, with the UN Committee on the Rights of the Child recognising that marketing of health-harming products to children undermines their rights under the UN Convention on the Rights of the Child.**

Dando points to the scale of the problem at recent major events: AB InBev's extended "Official Beer Sponsor" deal with FIFA through 2030, Corona's sponsorship of the Olympics through 2032, and prominent alcohol advertising even at events like Wimbledon, traditionally known for minimal sponsorship. She draws a direct comparison to tobacco, noting that over 57 countries now enforce comprehensive bans on tobacco sponsorship, and points to the WHO's 2024 resolution calling on governments to limit marketing of unhealthy products at sporting events as a sign that momentum for similar action on alcohol and junk food is building.

**Read the blog**

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UPDATE

# Alcohol-related liver disease deaths in England rose by 28% since the pandemic

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**A new study, published in the Journal of Epidemiology & Community Health, provides the most up-to-date picture of alcohol-related liver disease (ARLD) mortality in England, tracking monthly death rates from 2004 through to the end of 2024 using linked national mortality and hospital records. Researchers examined nearly 100,000 ARLD deaths among adults aged 25 to 84, looking specifically at whether people had recent contact with hospital services before they died.**

The findings are stark. After remaining stable for 15 years, ARLD mortality rose by 27.7% following the onset of the Covid-19 pandemic in March 2020, and has stayed elevated ever since — amounting to over 5,500 excess deaths by the end of 2024. The sharpest increases were among people who died outside hospital, particularly those with no recent hospital-recorded ARLD diagnosis at all: this group saw mortality rise by over 60% and now accounts for over a third of all postpandemic ARLD deaths. As in previous data, deaths were consistently higher among men, middle-aged adults, and people living in more deprived areas and in the Northeast and Northwest of England. The researchers conclude that a large proportion of people are dying from alcohol-related liver disease without ever being identified or supported by health services beforehand, pointing to significant missed opportunities for earlier intervention, and call for stronger public health measures such as stricter marketing regulation and minimum unit pricing.

This English data mirrors trends already well documented in Scotland, where chronic liver disease is projected to increase by 54% by 2044 and three-quarters of cirrhosis patients are still only diagnosed in an emergency setting. It reinforces Alcohol Focus Scotland and our urgent action campaign partners' continued calls for investment in early detection — including wider use of non-invasive liver scanning within primary care — alongside a comprehensive alcohol strategy addressing marketing, pricing and availability, to ensure people at risk are identified and supported long before they reach crisis point.

**Read the study**

UPDATE

# SHAAP Blog: Community Alcohol Partnerships — growing prominence and concerns about industry funding

**Our colleagues at SHAAP have published a new blog by Dr Abbie Irving, a recent PhD graduate from the University of Edinburgh, writing about her doctoral research into Community Alcohol Partnerships (CAPs). Irving traces CAPs' rapid growth in Scotland — from just seven local schemes when she began her PhD four years ago to over 32 by the time she submitted it — and examines what this industry-funded model means for alcohol policy.**

CAPs are funded by alcohol producers, trade bodies and industry-funded CSR organisations, and works through local partnerships involving schools, police, retailers and community groups, focusing largely on underage drinking, youth anti-social behaviour and visible community issues like litter. Irving notes that despite CAPs' growing prominence in policy debates — including the Scotch Whisky Association's recent manifesto call for government support to expand it further — independent evidence of its effectiveness remains limited, with a 2018 review finding little robust evidence that it reduces underage alcohol harm.

She argues CAPs fits a wider pattern of alcohol industry "policy substitution," in which targeted, community-level initiatives are promoted as an alternative to, and distraction from, effective population-level measures like Minimum Unit Pricing, while framing alcohol harm as a visible, youth-focused behavioural issue rather than one requiring action on price, marketing and availability.

**Read the blog**

CONSULTATIONS

# Helping people through alcohol withdrawal: your views wanted on proposed AToM2 study

**NHS Greater Glasgow and Clyde is inviting people with personal experience of alcohol withdrawal or recovery — including those who have supported someone through it — to help shape a proposed new study, AToM2, before it goes forward for funding.**

Led by Professor Donogh Maguire, the study would investigate whether giving magnesium and thiamine (Vitamin B1) during a hospital admission for alcohol withdrawal could help people recover more effectively and continue that support once they return home.

The need is stark: previous research at Glasgow Royal Infirmary found that up to one in six people admitted to hospital with alcohol withdrawal did not survive the following year, with more than 60% of those patients found to have low magnesium levels — yet most do not currently receive ongoing supplementation after discharge. AToM2 would test this simple, safe and inexpensive intervention across three phases, following people through their hospital stay and for up to a year afterwards, with the aim of reducing the severity of withdrawal and improving survival for one of Scotland's most vulnerable patient groups.

NHSGGC wants your input to make sure the study is designed to be as safe and accessible as possible. There's a short video (around 6 minutes) explaining the project, followed by an anonymous survey that takes just 3–5 minutes to complete.

**Watch the video and complete the survey**

Or contact the team directly at **ggc.public.involvement@nhs.scot_**

RESEARCH

# Early exposure to Ireland's new alcohol health warning labels: an emerging picture

**This new survey provides one of the first pieces of real-world evidence on how Ireland's alcohol health warning labels are landing with consumers, despite the widely reported delay to full legal implementation. Researchers surveyed 714 people in Ireland in December 2025, asking about their exposure to and perceptions of the new labels, as well as their cancer knowledge and readiness to change their drinking.**

Just under a third of respondents (32.5%) reported noticing the new labels already appearing on products in supermarkets. Among those who had, the response was largely positive: two-thirds (66%) said the warning informed them about the risks of alcohol, 40% said it made them think about alcohol's impact on their health, and a quarter (25%) said it had led them to buy less or no alcohol on that particular shopping trip. In initial analysis, those who had noticed the labels also showed higher cancer knowledge (77.4% vs 68.2%) and greater readiness to change their drinking (49.8% vs 39.7%) than those who hadn't. However, once other factors were accounted for — particularly people's existing drinking patterns and their exposure to alcohol-and-cancer messaging in the media — this difference was no longer statistically significant. Media coverage of the alcohol-cancer link emerged as by far the strongest predictor of cancer knowledge.

These early findings are a useful, if cautious, first indicator of the effectiveness of health warning labels. They suggest labels can genuinely prompt people to think about, and even act on, alcohol's health risks — supporting AFS's long-standing case, set out in ***A Clear Way Forward***, for clear, prominent, evidence-based labels including cancer warnings. But they also underline the importance of combining labelling with wider public awareness efforts and media coverage of the alcohol-cancer link, rather than relying on labels in isolation, if genuine, lasting shifts in public understanding and behaviour are to be achieved.

**Read the study**

RESEARCH

## Engagement in alcohol-free activities, community disadvantage and heavy drinking after alcohol treatment

**This study, published in the Journal of the Experimental Analysis of Behavior by Katie Witkiewitz and colleagues, examined whether engaging in more alcohol-free activities — such as hobbies, social or recreational pursuits not centred on drinking — helps people drink less heavily following treatment for problem drinking. Researchers analysed data from over 1,700 individuals enrolled across 10 US treatment sites, testing the hypothesis that greater engagement in alcohol-free activities would be associated with reduced heavy drinking.**

The hypothesis was confirmed: people who took part in more alcohol-free activities were less likely to drink heavily. Notably, this protective effect was particularly pronounced among people living in economically disadvantaged communities, suggesting that access to meaningful alternative activities may be especially valuable — and especially lacking — for people recovering from problem drinking in more deprived areas.

**Read the study**

RESEARCH

## Global epidemiology of metabolic and alcohol-associated liver disease (MetALD): risk factors, natural history and clinical implications

**This new review, published in *Nature Reviews Gastroenterology & Hepatology*, sets out the global evidence on metabolic and alcohol-**

**associated liver disease (MetALD) — a condition driven by the combination of alcohol consumption and cardiometabolic risk factors such as obesity and diabetes.**

First formally defined in 2023, MetALD is estimated to affect around 4.1% of the global adult population, though the authors stress this figure is likely a significant underestimate, since alcohol intake is consistently under-reported by patients; objective blood biomarkers can identify up to four times more cases than self-reported drinking alone.

The review highlights that MetALD is not simply "a bit of both" conditions but carries a substantially worse prognosis than metabolic liver disease alone, with a higher risk of progressing to cirrhosis, liver cancer and other serious outcomes — alcohol and metabolic risk factors appear to act together, accelerating liver damage rather than simply adding to one another. MetALD is now the third most common reason for liver transplant listing in the US. The authors point to a clear, cost-effective solution: risk-based screening in primary care using simple blood tests followed by further assessment where needed, allowing earlier identification of people at risk. They call for further research to standardise diagnostic thresholds, develop a dedicated diagnostic code for the condition, and better understand how alcohol and metabolic risk factors interact over time.

The study strengthens the case for Alcohol Focus Scotland's continued calls for wider use of non-invasive liver screening within primary care, so that people with alcohol- and metabolically-driven liver damage can be identified and supported long before they reach crisis point.

**Read the study**

RESEARCH

## Journeys through alcohol use and recovery among people experiencing homelessness

**This qualitative study, published in *Addiction*, explores how people experiencing homelessness in London understand their own journeys through heavy drinking and recovery. Researchers conducted 32 in-depth "journey-mapping" interviews with people currently experiencing homelessness who had used, or been eligible for, alcohol treatment, aiming to better understand why this group remains underrepresented in substance use services despite disproportionately high rates of harmful drinking.**

Participants commonly traced the roots of their heavy drinking back to childhood trauma and difficult family environments, describing alcohol as a way of coping with emotional pain. Homelessness itself was described as both a consequence of drinking and a factor that reinforced it, with the realities of sleeping rough and shared drinking identities within homeless communities compounding the problem. When it came to accessing support, participants identified long waiting times, administrative hurdles and poor past experiences with services as major barriers, while stable housing, personalised care and peer support were consistently described as what made recovery possible. Researchers found that recovery was experienced as a deeply personal process, often triggered by pivotal shifts in self-perception and self-compassion, rather than by treatment alone.

**Read the study**

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RESEARCH

## RCPsych Guidance: Switching from chlordiazepoxide for the management of alcohol withdrawal syndrome

**The Royal College of Psychiatrists has published new guidance for clinical teams and organisations following a Department of Health and Social Care Medicine Supply Notification, issued in March 2026, confirming a shortage of chlordiazepoxide in the UK. Chlordiazepoxide, alongside diazepam, is one of the two benzodiazepines most commonly used in the UK to manage acute alcohol withdrawal syndrome (AWS), as alcohol acts as a depressant on the**

**central nervous system and people who drink heavily on a daily or near-daily basis over months or years can become physically dependent, putting them at risk of significant harm if withdrawal is not properly managed.**

With the duration and severity of the shortage still uncertain, the College's guidance sets out the key questions services need to work through if they need to switch patients to an alternative regime, either temporarily or in the longer term. This includes identifying who across an organisation needs to be involved in making the change safely, ensuring comprehensive staff awareness and targeted training across different professional groups, removing the affected drug as a prescribing option where necessary, and monitoring for any adverse events or unintended consequences at both a patient and system level. The guidance points services back to the UK Clinical Guidelines for Alcohol Treatment for full clinical protocols and highlights accompanying patient-facing FAQs on alcohol withdrawal medication.

**Read the guidance**

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## Important Notice on Alcohol Focus Scotland Licensing Board Members and Standards Officer Training

**As of 1 July, Alcohol Focus Scotland has officially ceased to deliver qualification training courses for Licensing Board Members and Licencing Standards Officers. This is now being carried out by the Royal Environmental Health Institute of Scotland (REHIS).**

We have updated our **website** to reflect this change including information on how

to access these courses via REHIS.

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TRAINING

## Workbook for staff of licensed premises

**The Alcohol Focus Scotland Workbook for Staff of Licensed Premises is an ideal tool for personal licence holders to provide the 2 hours minimum training to all their staff as required by the Licensing (Scotland) Act 2005.**

The workbook has been specifically created to be a valuable guide for staff members, providing essential knowledge to enhance their role within the licensing framework.

**Buy Now**

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EVENT

## Upcoming FASD Hub Events

**FASD Unlocked for Parents & Caregivers**
**Online Event**
**Tuesday 22 September, 9.30am-12.30pm**

This training session is for parents and carers of children with FASD or a history of prenatal alcohol exposure.

3-Hour Course: FASD Unlocked – In-Depth Understanding & Strategies

**Perfect for:** Parents and carers who want to learn more and build on their knowledge

**Find out more and book your place**

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EVENT

# SHAAP Alcohol Occasionals

**Navigating the promise and risks of industry-funded partnership**
**Online Event**
**Monday 7 September, 12.45pm – 2pm**

The third seminar of the 2026 Alcohol Occasionals will be delivered by Abbie Irving (University of Edinburgh). The seminar is titled "Navigating the promise and risks of industry-funded partnership: local public and third sector organisations' experiences of Community Alcohol Partnerships (CAP)″ and will focus on research conducted during Abbie's PhD which examined local CAP partners' participation in CAP and their views on the significance of its alcohol industry funding.

**Book your place**

**The impact of extended alcohol trading hours in Glasgow and Aberdeen**
**Online Event**
**Monday 5 October, 12.45pm – 2pm**

The fourth and final seminar of the 2026 Alcohol Occasionals will be delivered by Professor Niamh Fitzgerald (University of Stirling). The seminar, titled "Understanding the impact of recent extensions to late-night alcohol trading hours in Glasgow and Aberdeen: findings from the ELEPHANT study", will explore research which aimed to understand and evaluate the introduction, operation and impact of the later trading hours introduced in the two cities.

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Book your place

EVENT

## Alcohol Research 2026

**6-7 October 2026**
**University of Stirling**

**Researchers, policymakers, practitioners, and stakeholders are invited to join Alcohol Research 2026: New Thinking, New Directions, a new conference dedicated to advancing innovative, interdisciplinary perspectives on alcohol research, policy, and practice.**

Organised by the University of Stirling in collaboration with the New Directions in the Study of Alcohol Group, the conference aims to foster fresh ideas, highlight emerging evidence, and facilitate critical dialogue in addressing complex and evolving challenges in alcohol-related harm, prevention, treatment, and policy. The conference is also supported by the Scottish Alcohol Research Network.

Find out more

EVENT

## Embracing complexity: An Alcohol Change UK Online Learning Event

**Wednesday 14 October and Thursday 15 October 2026**

**Two Half Days**
**Online**

People are different, and so are their alcohol issues. Join ACUK online on 14 and 15 October for their 2026 annual conference, where they'll be exploring the complexity of people's lives, the role alcohol plays in that, and how we can offer support that's relevant, accessible and effective.
Confirmed speakers include:

- Charlotte Hazell-Caldwell, on what services need to know about alcohol and domestic violence
- Tess Falzon, on how her team have implemented smoking cessation support for people in treatment for alcohol and other drugs
- Chris Dunbar, on how to make support open and accessible for LGBTQ+ people
- Vanessa Townsend, on supporting recovery from alcohol-related brain damage (ARBD)
- Mushtaq Dakri, on engaging with ethnic and religious diversity.
- Plus, most importantly, participants will hear voices of lived experience, including an interview with Aaron Davies on his recovery from an alcohol-related stroke.

**Book your place**




# Donate to AFS

Do you share our passion for reducing the harm caused by alcohol in Scotland?

**To fundraise for AFS, or if you would rather support us with either a one off or regular donation, visit our JustGiving page.**

**Donate Now**

Share | Share | Forward | Share

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## Dragona, Anastasia

**From:** Alcohol Focus Scotland <david.barbour@alcohol-focus-scotland.org.uk>
**Sent:** 30 September 2026 13:10
**To:** Dragona, Anastasia
**Subject:** Alcohol Focus Scotland latest - September 2026

West Lothian Council

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**Newsletter from Alcohol Focus Scotland**

View this email in your browser




September 2026

- **Join us for Scotland's first Alcohol Action Day**
- **Recovery Community Perspectives: Alcohol Marketing - New Report**
- **AFS Vacancy: Senior Policy Coordinator**
- **In Focus: The Monthly AFS CEO Blog - Why we need an Alcohol Action Day in Scotland**
- **What is FASD and how can we prevent it? A chat with Dr Patricia Jackson OBE**
- **Health harming industries are undermining action on Scotland's worsening health, warn experts**

- **Public Health Scotland's Alcohol Consumption and Harms Dashboard: September 2026 update**
- **IAS Blog: Alcohol and pancreatic cancer — an example of how alcohol-caused deaths are greatly under-estimated globally**
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- **World Cup viewers exposed to junk food, alcohol and gambling branding every seven seconds, study finds**
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- **FASD: Insights & Strategies for Professionals**
- **Alcohol Research 2026**
- **Neurodiversity Gateway - Share a Support That Helps**
- **Donate to AFS**

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# Join us for Scotland's first Alcohol Action Day

**Alcohol is an issue that affects every part of Scottish society. Alcohol deaths remain at near record highs, with 50 people dying each week. One in two people report being affected by someone else's drinking. Alcohol contributes to anti-social behaviour in our cities and towns and adds huge pressures to our health service and criminal justice system.**

That's why Alcohol Focus Scotland has joined together with partners across the sector to create Alcohol Action Day Scotland: a day to give organisations across the alcohol sector the opportunity to talk about alcohol in Scotland.

The first ever Alcohol Action Day will take place on Thursday 12 November.

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From November 2026 onwards, Alcohol Action Day Scotland will become an annual opportunity to spark conversations, share experiences, highlight solutions and champion the work that is happening every day.

We're inviting you to join us in making this first Alcohol Action Day a success The theme for the first ever Alcohol Action Day for Scotland will be: Support,

We’re encouraging organisations to think about what that means for their work and to use the day to highlight a campaign, shine a spotlight on the vital work they do to and amplify the voices of people with lived experience of alcohol harm.

**Sign Up to Take Action**

Join us today for campaign updates, access to resources and communications toolkits and ideas for how your organisation can get involved.

**Sign Up to Take Action!**




## Recovery Community Perspectives: Alcohol Marketing - New Report

**People with lived experience of alcohol harm have called for a new approach to alcohol advertising and marketing, saying that its ubiquity acts as a potential trigger that puts them at risk of relapse.**

In a **new report** published by Alcohol Focus Scotland at the end of Recovery Month 2026, outdoor alcohol advertising was consistently identified by participants as one of the most intrusive forms of alcohol promotion. Many described how alcohol advertising saturates public spaces - from bus stops and billboards to shopfronts - making it virtually impossible to avoid.

This constant exposure was described as a powerful and often distressing trigger that could undermine progress and increase the risk of relapse.

That description echoes the findings of a recently published **landmark review** of alcohol marketing by Public Health Scotland which found that alcohol marketing was 'pervasive and persuasive' and that frequent exposure 'drives alcohol consumption and related harms' including among children and young people.

We spoke to 48 people at various stages of recovery from an alcohol problem across four alcohol support services, seeking their views on possible alternative approaches.

There was strong support for a range of actions to restrict alcohol marketing across different settings, including pursuing local restrictions and changes to shop displays.

Participants described the retail environment as one of the most difficult spaces to navigate when trying to reduce or stop drinking. Supermarkets and local shops were widely seen as packed with alcohol promotion, from end-of-aisle displays and signage at the entrance, to offers and branding at the checkout. These were not viewed as neutral design choices but as deliberate strategies to drive impulse purchases.

**Read the Report**

## AFS Vacancy: Senior Policy Coordinator

**Senior Coordinator (Policy)**
**£33,000 full time (34.5 hours per week).**
**Closing date: Tuesday 6 October**

**Alcohol Focus Scotland is seeking a skilled policy professional to join our passionate team. You will have a varied and challenging role, providing policy and research support across a number of policy areas, with an initial focus on alcohol marketing and control on the sale of alcohol.**

Your excellent analytical, organisational and communication skills will be vital in ensuring we meet our goal of effecting policy change in Scotland, to reduce alcohol harm and improve lives.

We are looking for a candidate with:

- Minimum of 3 years' experience working in a fast-paced policy or practice environment
- Experience of analysing, interpreting and communicating evidence and research to support policy and practice development
- Experience of working collaboratively and strategically with external organisations and agencies to effect change

**Apply**

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# In Focus: The Monthly AFS CEO Blog - Why we need an Alcohol Action Day in Scotland

**"Delighted". It's a word I challenge myself never to use. If you regularly share news on social media, as I do, then you'll know it's the adjective we all tend to reach for – but it can't always be true. If you took my LinkedIn feed literally, you'd believe everyone is wildly thrilled about absolutely everything, all the time.**

But this month I did let myself say it. Because I really was delighted to announce that Thursday 12 November will be the first annual Alcohol Action Day for Scotland.

As you know, I joined Alcohol Focus Scotland in February, and one of the first questions I was asked was why there wasn't a Scotland-specific date bringing together everyone affected by the issue. And I couldn't think of a good reason. After all, there's a day for just about everything else – from deeply serious issues such as cancer or MS to more light-hearted matters. Like cheese. I'm not kidding, there is a National Cheese Lovers Day (it's 20 January, in case you'd like to celebrate).

So why not alcohol?

**Read the blog in full**



UPDATE

# What is FASD and how can we prevent it? A chat with Dr Patricia Jackson OBE

**September has been Fetal Alcohol Spectrum (FASD) Awareness Month. We've been supporting FASD Awareness this month by sharing information and advice on our social media channels, as well as supporting the FASD Hub Scotland.**

We also sat down for a chat with Dr Patricia Jackson OBE, an expert in FASD who works with both the FASD Hub Scotland and National FASD. We discussed the prevalence of FASD in Scotland, why the condition is underdiagnosed and the best ways we can support those living with FASD, or prevent people from being affected in the first place.

Additionally, we discussed a recent report into the costs of FASD and how alcohol taxes could play a role in funding treatment and support, providing a huge return on investment for a condition that costs the UK billions each year.



UPDATE

# Health harming industries are undermining action on Scotland's worsening health, warn experts

**Public health policies are under sustained influence by commercial actors linked to tobacco, alcohol, and junk food, according to a new report launched today by health charities, including British Heart Foundation Scotland, Obesity Action Scotland, ASH Scotland, Scottish Health Action on Alcohol Problems and Alcohol Focus Scotland.**

The report from Non-Communicable Disease (NCD) Alliance Scotland - a coalition of 26 health organisations – shines a spotlight on the commercial drivers of ill health at a time where progress to address Scotland's health is stalling.

Work to improve Scotland's health is being watered down, delayed, or blocked altogether by the corporate sector through various tactics, as explored in the report.

It warns that commercial influence can weaken measures designed to reduce preventable illness and premature death and calls for stronger safeguards to ensure public health policy is developed in the public interest.

The report aims to increase awareness amongst key stakeholders, including MSPs, Ministers, and Scottish Government, and contains practical recommendations on how policymakers can help ensure that Scotland's public health is prioritised over industry profit.

New polling published alongside the report also found that almost three quarters of people view these industries' influence on public health decision-making negatively.

Commenting on the report, Carolyn Lochhead, CEO of Alcohol Focus Scotland, said:

“The Scottish Government has rightly declared a public health emergency on alcohol, and fifty people in Scotland die each week from alcohol related causes.

“Yet we continue to see the heavy footprint of industry lobbying, in the form of delayed action and mixed messaging. Health policy must be designed by health experts, not by industries that profit from the sale of products that damage our health. The Government should reaffirm its commitment to putting the health of our nation before the profit of industry.”

**Read more**

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UPDATE

# Public Health Scotland's Alcohol Consumption and Harms Dashboard: September 2026 update

**Public Health Scotland has published its latest update to the Alcohol Consumption and Harms Dashboard, providing new estimates of hospital admissions and deaths from conditions partially attributable to alcohol — that is, conditions like cancer or cardiovascular disease where alcohol is one contributing factor among several — for 2024.**

The figures show the estimated rate of partially attributable alcohol hospital admissions among those aged 16 and over held steady at 424 per 100,000 population, unchanged from 2023, with men 40% more likely than women to be admitted. Partially attributable alcohol deaths fell by 12% to 32.7 per 100,000, though this masks a stark gender gap — the mortality rate for men was 56% higher

than for women — and an even starker inequality gap: people in Scotland's most deprived areas died from these conditions at 2.8 times the rate of those in the least deprived areas (51.2 compared to 18.6 per 100,000).

PHS also revised its 2023 estimates upward slightly (hospital admissions up 0.8%, deaths up 3.6%) following updated Scottish Health Survey consumption data, though it stresses these revisions don't materially change the overall trends previously reported.

**Read the full statistical release** and **accompanying blog from Craig Collins** ***Service Manager, Health Harms Intelligence, Public Health Scotland***

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UPDATE

## IAS Blog: Alcohol and pancreatic cancer — an example of how alcohol-caused deaths are greatly under-estimated globally

**In a new blog for the Institute of Alcohol Studies, Tim Stockwell, Jinhui Zhao, James Clay, Keegan Lawrence and Tim Naimi, researchers at the Canadian Institute for Substance Use Research, University of Victoria, argue that alcohol's true contribution to preventable deaths worldwide is being significantly underestimated — using pancreatic cancer as a striking example.**

Pancreatic cancer is not currently on the WHO's list of alcohol-related cancers, partly because some studies have found low-volume drinking appears "protective" against it. The authors explain this apparent protective effect is likely a statistical illusion caused by the ‘sick quitter’ effect — where people who have quit drinking due to ill health are wrongly grouped with lifetime abstainers, making current drinkers look artificially healthier by comparison.

Reviewing 37 international studies, the authors found that once this bias was properly corrected for, the apparent protective effect of alcohol against pancreatic cancer disappeared entirely, with a clear dose-response relationship between higher alcohol consumption and greater risk emerging instead.

They argue pancreatic cancer should now be reconsidered by WHO's International Agency for Research on Cancer for inclusion on its list of alcohol-attributable cancers and note that similar biases have previously been shown to mask the true risks associated with alcohol and prostate and breast cancer, as well as cardiovascular disease. The authors conclude this points to a "wholesale underestimation" of alcohol's contribution to death and illness across the board and call for global burden of disease estimates to be urgently revisited using bias-free methods.

**Read the blog**

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POLICY

## AFS Policy Team Update

**The new Programme for Government has brought potential for significant reform to both healthcare, and to local government. The full implications for this are not clear yet, but it is likely that the landscape in which AFS works will see significant changes: with implications ranging from the licensing system to the systems and services which support people experiencing alcohol related harms. There are risks as well as opportunities in the proposed changes, and AFS will continue to highlight the critical issue of alcohol harm.**

We've been thinking too about the occasionally paradoxical relationship of Scotland and alcohol. The Programme for Government described a public health emergency on alcohol, while also highlighting the economic benefits of the whisky

industry. Alcohol Focus Scotland chief executive, **Carolyn Lochead's blog** on our relationship with alcohol further explores this dichotomy.

Maree Todd, Minister for Mental Wellbeing, Public Health, Sport, Alcohol and Drugs
has confirmed that the alcohol harm prevention plan will be launching in the coming months. We are hopeful that this will further embed public health approaches to alcohol into our national strategy, and focus on reducing availability, affordability and attractiveness. In particular, we have been highlighting the importance of introducing automatic uprating for minimum unit pricing. MUP has been a success – but we need to see the unit price tied to inflation to ensure it continues to have an impact on preventing future harm.

We will be visiting our first political conference of this government in October and look forward to future engagements in the new year.

We have three reports on the licensing system in preparation for publication. The findings of these provide further evidence that the licensing system is ill equipped to tackle the challenges we are facing. Proposed reform to local government presents a timely opportunity to improve these systems.

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## AFS Involvement Team Update

**We're delighted that recruitment for our new Alcohol Action Network is now complete. The network brings together people with lived and living experience of alcohol harm, including people in recovery and family members affected by someone else's drinking. Members will get training, advocacy opportunities and the chance to have their voices heard on issues that matter to them.**

Now that the election dust has settled, we'll also be arranging visits for MSPs to recovery and community services across Scotland, so they can hear directly from people about the realities of alcohol harm and recovery. If you'd like to host a visit at your service, we'd love to hear from you.

You can email **involvement@alcohol-focus-scotland.org.uk**

It was great to be at People Make Recovery on Glasgow Green recently, hearing directly from people about how alcohol has affected their lives and what they want to see done. Looking ahead, Recovery Ayr is hosting "**Creating a Culture of Recovery**" on Wednesday 28 October from 1 to 4pm. Tickets are free and we'd encourage you to go along.



RESEARCH

## World Cup viewers exposed to junk food, alcohol and gambling branding every seven seconds, study finds

**More than 93,000 visible appearances of brands promoting unhealthy food and drink, alcohol, gambling and speculative products were recorded during coverage of the largest FIFA World Cup in history, new research has found. Unhealthy food and drink brands accounted for more than seven in ten, with 65,722 appearances.**

The research, led by the University of Bristol in collaboration with the University of Oxford, is the first to examine harmful commodity branding across an entire FIFA World Cup. The team used the UK's most powerful supercomputer, Isambard-AI, based at University of Bristol, to analyse all 172.6 hours of live play across the tournament's 104 matches.

The scale of potential exposure was extraordinary. FIFA reported that nearly six billion people around the world engaged with the tournament, while broadcast records were broken in more than 30 countries. For the UK, the researchers estimated that harmful product advertising generated 267 billion impressions across the 53 broadcasts for which audience data were available.

**Read more**

RESEARCH

## Are alcohol-free and low-alcohol drinks more expensive than regular-strength drinks?

**New research from the Sheffield Addictions Research Group (SARG), published in *Addiction* and funded by the National Institute for Health and Care Research, has found that people buying alcohol-free and low-alcohol (no/lo) beer end up paying more overall than those buying standard-strength**

**beer — despite no/lo products having a lower shelf price. The study analysed 2024 sales data across Great Britain to understand why.**

While no/lo beers are priced 19% lower and no/lo ciders 27% lower than their regular-strength equivalents per unit, the researchers found that regular-strength beers are far more likely to be sold in cost-effective multipacks — over half of standard beers came in packs of eight or more, compared to none of the no/lo beers surveyed. As a result, shoppers save only 12% on average buying no/lo beer, compared to a 30% saving available on bulk regular-strength beer, with no/lo ciders offering no real saving at all. The researchers also found that top-selling no/lo beers tend to be marketed as premium products rather than as budget-friendly alternatives to popular mainstream brands, likely contributing further to the price gap.

Lead author Dr Abigail Stevely noted that while this pricing structure may discourage some people from switching to no/lo options, the most effective measures for tackling alcohol harm remain increasing the price of cheap alcohol and restricting its marketing and availability, rather than simply discounting no/lo products.

**Read the study**

RESEARCH

## Food and alcohol disturbance: how "college drinking culture" beliefs drive risky calorie-restriction before drinking

**This cross-national study, published in the *International Journal of Mental Health and Addiction*, examines "food and alcohol disturbance" (FAD) — restricting food intake before or during drinking specifically to get drunk faster — among university students.**

Researchers surveyed over 2,500 student drinkers across six countries (the US,

Canada, England, South Africa, Spain and Argentina), tracking a subset over six months to understand how strongly students believed alcohol was central to the "college experience," how often they engaged in this behaviour, and what alcohol-related problems followed.

The findings show a clear and consistent pattern: students who held stronger beliefs that drinking is integral to college life were significantly more likely to engage in FAD, which in turn predicted more alcohol-related harms — a relationship that held up not just at a single point in time, but also when researchers followed students forward over several months.

Overall, 38% of students reported engaging in FAD in the past month, but this varied sharply by country — England had by far the highest rate (71.5%), notably higher than the US (39.7%), Canada (54.4%), South Africa (47.8%), Spain (27.7%) and Argentina (28.4%). The researchers link England's high rate to its comparatively permissive alcohol availability and marketing environment and note the relationship between these beliefs and the behaviour was also stronger among women than men.

**Read the study**

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TRAINING

## Workbook for staff of licensed premises

**The Alcohol Focus Scotland Workbook for Staff of Licensed Premises is an ideal tool for personal licence holders to provide the 2 hours minimum training to all their staff as required by the Licensing (Scotland) Act 2005.**

The workbook has been specifically created to be a valuable guide for staff members, providing essential knowledge to enhance their role within the licensing

framework.

Buy Now

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## The impact of extended alcohol trading hours in Glasgow and Aberdeen

**Monday 5 October**
**12.45pm – 2pm**
**Online**

The fourth and final seminar of the 2026 SHAAP Alcohol Occasionals will be delivered by Professor Niamh Fitzgerald (University of Stirling). The seminar, titled "Understanding the impact of recent extensions to late-night alcohol trading hours in Glasgow and Aberdeen: findings from the ELEPHANT study", will explore research which aimed to understand and evaluate the introduction, operation and impact of the later trading hours introduced in the two cities.

**Book your place**

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EVENT

## FASD: Insights & Strategies for Professionals

**Tuesday 20th October**
**9.30am – 12.30pm**
**Online**

Supporting an individual with FASD or a family affects by pre-natal alcohol

exposure? This is the course for you.

This course is suitable for professionals working in the Third Sector, education or working with any families (adoptive, biological, fostering or kinship families) who have a confirmed or suspected history of prenatal alcohol alcohol exposure. It is not suitable for medical/clinical practitioners.

Written and delivered by the FASD Hub Team, this 3 hour course covers topics including:

- Alcohol and its impact on society
- How alcohol affects the developing fetus
- FASD, prevalence and common challenges
- Strategies for working with young people who have FASD
- Signposting to further information
-

All attendees will receive a digital handbook after the session.

This is a free event for people supporting families in Scotland.

**Book your place**

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EVENT

## Alcohol Research 2026

**6-7 October 2026**
**University of Stirling**

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**Researchers, policymakers, practitioners, and stakeholders are invited to join Alcohol Research 2026: New Thinking, New Directions, a new conference dedicated to advancing innovative, interdisciplinary perspectives on alcohol research, policy, and practice.**

Organised by the University of Stirling in collaboration with the New Directions in the Study of Alcohol Group, the conference aims to foster fresh ideas, highlight emerging evidence, and facilitate critical dialogue in addressing complex and evolving challenges in alcohol-related harm, prevention, treatment, and policy. The conference is also supported by the Scottish Alcohol Research Network.

**Find out more**

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EVENT

## Embracing complexity: An Alcohol Change UK Online Learning Event

**Wednesday 14 October and Thursday 15 October 2026**
**Two Half Days**
**Online**

People are different, and so are their alcohol issues. Join ACUK online on 14 and 15 October for their 2026 annual conference, where they'll be exploring the complexity of people's lives, the role alcohol plays in that, and how we can offer support that's relevant, accessible and effective.
Confirmed speakers include:

- Charlotte Hazell-Caldwell, on what services need to know about alcohol and domestic violence

- Tess Falzon, on how her team have implemented smoking cessation support for people in treatment for alcohol and other drugs
- Chris Dunbar, on how to make support open and accessible for LGBTQ+ people
- Vanessa Townsend, on supporting recovery from alcohol-related brain damage (ARBD)
- Mushtaq Dakri, on engaging with ethnic and religious diversity.
- Plus, most importantly, participants will hear voices of lived experience, including an interview with Aaron Davies on his recovery from an alcohol-related stroke.

**Book your place**

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# Neurodiversity Gateway - Share a Support That Helps

**Are you a parent or carer of a neurodivergent child/young person?**

Mindroom, the University of Edinburgh and NHS Lothian have partnered on a project to improve access to support for neurodivergent children and young people (including those on assessment waiting lists). As part of this, they are gathering information about support that is currently available. They would love your help!

Please share a support that's helped your child/family - maybe a sleep app, a neurodiversity podcast, or a group to help anxiety. Sharing a support only takes a few minutes and will help improve what's available for others.

**Tell them about it here**




# Donate to AFS

Do you share our passion for reducing the harm caused by alcohol in Scotland?

**To fundraise for AFS, or if you would rather support us with either a one off or regular donation, visit our JustGiving page.**

**Donate Now**

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## Dragona, Anastasia

**From:** Alcohol Focus Scotland <david.barbour@alcohol-focus-scotland.org.uk>
**Sent:** 29 October 2026 16:02
**To:** Dragona, Anastasia
**Subject:** Alcohol Focus Scotland latest - October 2026

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October 2026

- **Urgent measures needed from Scottish Government to prevent further deaths from alcohol say leading organisations**
- **Alcohol Action Day: Two weeks to go!**
- **Parliamentary Launch of Labelling Report**
- **In Focus: CEO Blog**
- **Alcohol Action Ireland report: more than 200,000 children in Ireland living with parental problem alcohol use**
- **SHAAP Blog: Routine A&E data misses around three-quarters of alcohol-related attendances**

- WHO/Europe launches AI-powered hub as survey finds only 15% of people know alcohol can cause breast cancer
- IAS Podcast: The Tobacco and Vapes Act and how alcohol is being left behind
- AFS Policy Team Update
- Alcohol Focus Scotland welcomes Budget rise in Alcohol Duty
- AFS Involvement Team Update
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- Real-world alcohol cue exposure and drinking risk in alcohol use disorder
- Rising sales of alcohol-free and low-alcohol drinks not linked to more at-risk drinkers trying to cut down
- Choline supplementation in early childhood linked to lasting cognitive benefits for children with FASD
- Persistent or rising drinking after disasters linked to worsening depression
- Workbook for staff of licensed premises
- Putting cancer on the label: Lessons for advancing alcohol policy across the globe
- FASD in Practice: Identifying, Assessing and Supporting Children, Young People and Adults
- Donate to AFS

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# Urgent measures needed from Scottish Government to prevent further deaths from alcohol say leading organisations

**Figures released today by the National Records of Scotland show that in 2025 1,152 people died from alcohol-specific causes marking 13th**

**consecutive year deaths caused by alcohol have remained above 1000.**

In response to the figures, leading alcohol organisations have joined forces to set out the urgent measures needed from the Scottish Government to prevent further deaths from alcohol, while reminding anyone affected by an alcohol problem that help is available.

Carolyn Lochhead, chief executive of Alcohol Focus Scotland said: “It’s good news that the number of alcohol-specific deaths fell in 2025. But every one of these 1,152 deaths represents a person whose loss has devastated their loved ones. And alcohol-specific deaths are still more than double the level seen thirty years ago: even though every alcohol death is preventable.

“The Scottish Government has rightly described the situation as a public health emergency, but we’re yet to see a response matching the scale and urgency required. The recent alcohol and drug strategy commits to improving treatment and services, which is vital. But to make real change, we need to give equal priority to preventing people from needing these services in the first place: and that means government action to make alcohol less central in our society. We want to see that happen as part of a comprehensive prevention plan, with action to keep controlling alcohol prices, restrict advertising and reform the licensing system.”

Louise Stewart, Director for Scotland at WithYou, said: “Every one of these deaths could have been prevented with the right help at the right time. Yet most people struggling with alcohol never reach support, and many go years without it. Alcohol is such a normal part of life in Scotland that it can be hard to see when drinking has become a problem, and stigma makes it harder still to speak up. We must do everything we can so people feel able to come forward without fear of being judged.

“That needs real urgency. The commitment to trial alcohol care teams in hospitals is welcome. But we need them now in every major hospital, alongside access to detox wherever someone lives. The earlier we reach people, the more lives we can save.”

**Read the full story**

# Alcohol Action Day: Two weeks to go!

**There are now only two weeks to go until Scotland's first ever Alcohol Action Day! Alcohol Action Day will be an annual event that will, over time, provide opportunities to explore different aspects of the issue, draw attention to relevant campaigns, policy ideas and initiatives, and empower people with lived and living experience to share their stories and views.**

The inaugural theme is 'Support'.

We'll be publishing a toolkit to support organisations and individuals to take part in Alcohol Action Day in a variety of ways, big and small. In the run up to the day we'll be spotlighting examples of great support services working across the country to help people experiencing an alcohol problem, or who simply want to make positive changes to their drinking, as well as calling for more greater investment in treatment, recovery and support services.

You can still join in our campaigning efforts by signing up to our campaign mailing list.

**Sign Up to Take Action!**




## Parliamentary Launch of Labelling Report

**On the Thursday 8 October, we were delighted to attend the Scottish Parliament for the official launch of our recent report 'A Clear Way Forward: The Case for Better Alcohol Labelling', written in conjunction with the Alcohol Health Alliance.**

The report represents the most comprehensive audit to date of alcohol labels in the UK and demonstrates why mandatory alcohol labelling is so needed. Looking at over 530 products, this analysis shows what information the alcohol industry prioritises, what information is missing or inconsistent between products, and where improved alcohol labelling could benefit consumers and the public. It also shows the limits of
the voluntary guidelines, and where a mandatory approach is essential if the public are going to get the information they need.

Our thanks to David Linden MSP for hosting the event.




# In Focus: The Monthly AFS CEO Blog -

***In the latest of her monthly CEO In Focus Blog, Carolyn Lochhead reflects on the latest alcohol deaths figures, progress being made and the essential changes that must be made to save lives in the future.***

This is a story about numbers.

I've never been a fan. At school, I loved English, hated maths. I wanted stories, a narrative, a tale to follow. It wasn't until later, when I had the chance to study statistics, that I realised numbers can also tell their own stories.

This week, I spent a lot of time talking about a new number.

1,152.

That's how many people died of alcohol in Scotland last year. It tells us something straight away, doesn't it? It's a story of loss. Heartbreak. Families left behind, questions unanswered, lives cut short. It's an awful story.

But it doesn't give us any context. For that, we need another number.

That number is 33.

That's how many **more** people died of alcohol in 2024 than in 2025. So that tells us another story. It tells us that change is possible. That there is cause for hope. That what we're doing might slowly be working: albeit there is a long, long way to go.

**Read the blog in full**



UPDATE

# Alcohol Action Ireland report: more than 200,000 children in Ireland living with parental problem alcohol use

**Alcohol Action Ireland (AAI), Ireland's national independent advocate for reducing alcohol harm, has published a new report, Childhood, interrupted: Parental problem alcohol use and its harms to children, through its Silent Voices initiative.**

The report draws on testimonies shared through the initiative alongside research and frontline evidence. In his foreword, Ireland's Ombudsman for Children, Dr Niall Muldoon, describes the report as a wake-up call for Irish society.

The report estimates that at least one in six children in Ireland, more than 200,000, are currently affected by alcohol-related harm in the home and that more than 1.5 million people across the state are or have been affected. It sets out how parental problem alcohol use (PPAU) is linked to neglect, abuse, poorer educational outcomes, mental and physical health problems and a greater risk of children going on to develop problems with alcohol themselves.

It also highlights alcohol's role as an accelerant of domestic, sexual and gender-based violence (DSGBV), whilst stressing that alcohol is never an excuse for abuse.

AAI calls for the voices of children to be central to alcohol policy, direct services for children affected by PPAU regardless of whether a parent is in treatment and training for all professionals who work with children, noting that 70% of mental health professionals receive no training on problem alcohol use in the home.

The report calls for alcohol to be included in Ireland's national DSGBV strategy, a whole-of-government approach to protecting children from alcohol harm and a coherent policy to reduce population-level consumption through controls on the availability, advertising and price of alcohol.

**Read the report**

UPDATE

# SHAAP Blog: Routine A&E data misses around three-quarters of alcohol-related attendances

***In a new blog for Scottish Health Action on Alcohol Problems (SHAAP), Dr Chris Humphries, emergency medicine doctor and researcher at the University of Edinburgh and NHS Lothian, sets out the findings of a new study showing that the coded data used to monitor alcohol harm in emergency departments (EDs) captures only a fraction of its true impact.***

Anyone who has worked a night shift in an emergency department (ED) knows how much of what we see is shaped by alcohol. It runs through the falls and head injuries, the assaults and collapses, the withdrawal, and the mental health crises. Yet if you looked only at the coded data that leaves the department, the data that feeds national statistics, research, and service planning, you would see very little of it. In a study my colleagues and I have recently completed and submitted for publication, we set out to measure that gap. For alcohol, it turned out to be large.

**Read the blog in full**

UPDATE

# WHO/Europe launches AI-powered hub as survey finds only 15% of people know alcohol can cause breast cancer

**The World Health Organization Regional Office for Europe (WHO/Europe) has launched a new digital hub to help health professionals talk to patients about alcohol, after a survey across 14 European Union (EU) countries found that only 15% of people know alcohol can cause breast cancer.**

Launched during Breast Cancer Awareness Month, the WHO Alcohol Screening and Brief Interventions Hub brings evidence and practical tools together in one place to help professionals identify alcohol-related risks early and offer support.

Alcohol causes at least seven types of cancer, including breast cancer, as well as cardiovascular and liver diseases. Despite this, awareness of the link with breast cancer was just 21% amongst women surveyed. Alcohol was responsible for an estimated 39,200 new breast cancer cases across the WHO European Region in 2020. Alcohol is often the least discussed behavioural risk factor in healthcare, raised less frequently than smoking, physical activity or diet, with professionals citing a lack of time, training or confidence and concerns about making patients feel judged. Screening and brief interventions (SBI) offer a simple way to identify risk early, using short questions such as the Alcohol Use Disorders Identification Test (AUDIT) followed by a brief conversation to support change.

The hub includes the AUDIT, interactive tools explaining standard drinks and alcohol's health effects and an artificial intelligence (AI) assistant that answers questions using only WHO evidence and shows the source behind every answer. Dr Carina Ferreira-Borges, WHO/Europe Regional Advisor on Alcohol, said the aim is to make conversations about alcohol a routine part of care rather than an awkward extra. The hub was developed through the EU co-funded Evidence into Action Alcohol Project (EVID-ACTION).

**Read more**

UPDATE

# IAS Podcast: The Tobacco and Vapes Act and how alcohol is being left behind

**In the latest episode of the Institute of Alcohol Studies (IAS) podcast, Ailsa Rutter OBE, Director of Fresh and Balance, the programme tackling tobacco and alcohol harm in the North East of England, reflects on why tobacco regulation has moved so much further than alcohol policy.**

Ailsa shares the personal story behind her career, including caring for her father through smoking-related chronic obstructive pulmonary disease (COPD) after he became addicted to tobacco as a child.

The conversation traces the history of tobacco control from the Royal College of Physicians' landmark 1962 report to today's Tobacco and Vapes Act, with the "smokefree generation" sales ban edging closer, meaning that anyone born on or after 1 January 2009 will never legally be sold tobacco. Ailsa highlights the stark contrast with alcohol, pointing to "the absolute lack of national regulation" and legislation to tackle alcohol harm.

The episode also explores the risk that alcohol harm is overshadowed as attention turns to implementing the Act, and why the North East's hard-hitting public health campaigns remain a rarity that the rest of England has yet to follow.

**Listen to the podcast**

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POLICY

# AFS Policy Team Update

**Alcohol Focus Scotland recently attended Scottish National Party conference – the first party conference of this Parliamentary term. As ever, it was great opportunity to meet parliamentarians and talk to them about the harm that alcohol causes in their area.**

In a challenging global context, it's important to remember the widespread harm that alcohol causes and for the challenges it presents to communities and society.

Data on alcohol-specific deaths in Scotland was published this week, and we have been briefing parliamentary colleagues on the implications for their constituencies.

Our activity at Parliament continues at pace, with a successful event on alcohol labelling. We spoke to MSPs about the impact that mandatory health labelling could have and how a four-nation approach could benefit Scotland. A further session on pricing will aim to show MSPs why MUP is one of our most important tools to reduce alcohol harm.

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POLICY

## Alcohol Focus Scotland welcomes Budget rise in Alcohol Duty

**Alcohol Focus Scotland welcomes the UK Government's Budget decision to increase alcohol duty in line with inflation. The Alcohol Health Alliance (AHA), of which AFS is a member, has described the move as a welcome step towards protecting public health and maintaining vital revenue for public services, noting that the Chancellor took this decision despite strong opposition from the alcohol industry.**

Keeping duty in line with inflation is not a real-terms tax increase. It simply prevents alcohol duty from losing value as prices rise. The AHA has urged the Government to build on this decision by putting a long-term approach to alcohol taxation in place, including reinstating an automatic annual alcohol duty escalator of the Retail Prices Index (RPI) plus 2%. This would provide greater certainty for the Government, strengthen public health efforts and ensure that alcohol duty makes a fairer contribution towards the cost of alcohol harm.

AFS continues to support the reintroduction of the alcohol duty escalator. The escalator, which raised duty above inflation each year between 2008 and 2013, coincided with the only period in recent history when alcohol deaths consistently

fell. Reinstating it would help ensure that the progress made through this Budget is not lost in future years.

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UPDATE

# AFS Involvement Team Update

**It's been a busy and productive time for the Involvement Team! We're preparing to launch the Alcohol Action Network, and we're strengthening connections with organisations and groups across Scotland.**

### Alcohol Action Network

The first meeting of the Alcohol Action Network (AAN) will take place on Saturday 31st October. Preparations are well underway, and we're looking forward to bringing members together to share experiences, build knowledge and explore how people with lived and living experience can help shape alcohol policy in Scotland.

Future meetings will focus on alcohol policy, campaigning and media training, supporting members to develop their skills and have their voices heard.

### Alcohol Awareness Training

Interest in our Alcohol Awareness training continues to grow, with sessions planned over the coming weeks. The involvement team will help with delivery. These sessions will help organisations understand alcohol-related harm and its impact on individuals, families and communities.

### Looking Ahead

There's lots to look forward to, including the launch of the Alcohol Action Network, Alcohol Awareness training, the sharing of our co-production work and further

opportunities to connect with communities across Scotland.

Thank you to everyone who has contributed to this work and continues to share their experiences to help reduce alcohol harm.

RESEARCH

## Alcohol consumption and cause-specific mortality in older men: Whitehall-1 study of London civil servants

**A new study published in the European Journal of Epidemiology by researchers from the University of Oxford, the London School of Hygiene and Tropical Medicine and University College London has found that heavy drinking in later life is associated with a significantly higher risk of death.**

The study followed 4,582 male London civil servants, initially recruited in the late sixties, who were resurveyed in 1997–98 at an average age of 76. The study distinguished ex-drinkers from never-drinkers and excluded participants with major disease to minimise the potential for reverse-causation bias. Over an average follow-up of almost 12 years, 91% of participants died. Compared with men who drank less than seven units a week, those drinking 42 units or more had a 38% higher risk of death from any cause, whilst ex-drinkers had a 21% higher risk.

Among current drinkers, each additional 10 units a week was associated with a 5% higher risk of death overall and a 5% higher risk of death from non-vascular causes, driven chiefly by a 19% higher risk of death from alcohol-related cancers.

There was no significant difference in overall mortality between lifelong non-drinkers and light-to-moderate drinkers. The researchers note that many earlier studies suggesting a “protective” effect of moderate drinking in older people failed to separate ex-drinkers from lifelong non-drinkers, meaning people who had stopped drinking due to ill health may have skewed the results.

They add that any apparent heart benefit among light drinkers may reflect healthier lifestyles rather than alcohol itself. The authors acknowledge that the participants

were all men who had worked as civil servants in London and are not representative of the wider UK population. They conclude that the findings support public health strategies to reduce population-level alcohol consumption among older people and prevent alcohol-related deaths in later life.

**Read the study**

RESEARCH

## Young people see sweetened alcohol-free drinks as alternatives to soft drinks rather than to alcohol

**A new study published in the International Journal of Drug Policy has explored how young people view and use alcohol-free and low-alcohol (no/lo) drinks, a market that has grown rapidly in high-income countries as youth drinking has declined.**

Drawing on social practice theory, the researchers examined whether and how these products are becoming part of young people's drinking and wider social lives.

The study involved group interviews with 34 young people aged 12 to 17 living in Greater Manchester. Participants generally viewed no/lo drinks as unappealing adult products, with the exception of sweetened options such as fruit-flavoured alcohol-free ciders. Some of those who drank alcohol felt no/lo drinks had no place in situations where getting drunk was valued, such as parties with friends or getting ready for a night out.

However, most participants saw sweetened no/lo drinks as appealing alternatives to soft drinks or alcohol in settings where intoxication was not the aim, such as family celebrations.

The authors conclude that no/lo drinks are unlikely to replace alcohol among adolescents who drink to bond socially through intoxication, limiting their potential as substitutes. They also note that young people's consumption of these products

at family occasions suggests some adult family members regard no/lo drinks as interchangeable with soft drinks.

**Read the study**

RESEARCH

## Real-world alcohol cue exposure and drinking risk in alcohol use disorder

**A new study published in Translational Psychiatry by researchers from the Central Institute of Mental Health in Mannheim and Charité-Universitätsmedizin Berlin has found that exposure to alcohol-related cues in everyday life is strongly and consistently associated with drinking. The research adds real-world evidence to a body of laboratory work showing that seeing alcohol can prompt people to drink.**

The researchers used smartphone prompts several times a day over four to six weeks to track 129 people in Germany who were not seeking treatment, comprising one group with mild-to-moderate alcohol use disorder (AUD) and a second group of young adults screened for risky drinking. Participants reported whether they had recently encountered alcohol cues, such as alcoholic drinks or settings where alcohol was present, alongside their mood, social situation and whether they were drinking.

After accounting for these other factors, people were significantly more likely to be drinking when they had been exposed to alcohol cues, with the odds of drinking around 16 times higher in the first group and 29 times higher in the second compared with times when no cues were present.

The association held when cue exposure was measured at the previous prompt and when only moments following non-drinking were analysed. Being in company and spending time with people they usually drink with were also linked to drinking in both groups, whereas negative moods such as anxiety or loneliness were not consistently associated with drinking.

The researchers also identified two possible profiles: older participants with more severe AUD and more stressful life events tended to be more responsive to alcohol cues, whilst younger and less severely affected participants were more responsive to social settings. The authors note that the findings are observational and cannot prove that cue exposure causes drinking. They conclude that alcohol cue exposure is a robust correlate of drinking in daily life.

**Read the study.**

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RESEARCH

## Rising sales of alcohol-free and low-alcohol drinks not linked to more at-risk drinkers trying to cut down

**A new study published in Drug and Alcohol Review has found that the growth in households buying alcohol-free and low-alcohol (no/lo) drinks in England has not been accompanied by any change in the proportion of at-risk drinkers trying to reduce their drinking.**

No/lo products, defined as those at or below 1.2% alcohol by volume (ABV), are a growing market in Great Britain and are often promoted as a way to help people drink less, but their public health impact remains unclear.

The researchers analysed household purchasing data alongside monthly survey data from adults in England between 2018 and 2023. At-risk drinkers were identified using the Alcohol Use Disorders Identification Test (AUDIT). Changes in the proportion of households buying no/lo products were not significantly associated with the proportion of at-risk drinkers who were highly motivated to cut down, had tried to cut down in the past year, described their most recent attempt as serious or had used no/lo products during that attempt.

The researchers note that the results were precise enough to rule out any meaningful effect. They conclude that, over this period, increases in no/lo purchasing at population level were not linked to changes in attempts to cut down amongst at-risk drinkers.

**Read the study**

RESEARCH

## Choline supplementation in early childhood linked to lasting cognitive benefits for children with FASD

**A new follow-up study has found that children with foetal alcohol spectrum disorder (FASD) who were given choline supplements in early childhood continued to show cognitive benefits five years later.**

FASD covers a range of lifelong neurodevelopmental conditions caused by prenatal alcohol exposure and very few interventions are available to support those affected.

The researchers followed up 58 children who had taken part in three earlier randomised controlled trials (RCTs) when aged between two and a half and six, in which they received either choline or a placebo. At follow-up the children were nine years old on average. Those who had received choline performed 9.1% better on non-verbal IQ and 11.3% better on working memory than those given the placebo, with higher doses linked to better performance.

High rates of anxiety disorders and impulse-control disorders were seen across the group, although there were no statistically significant differences in mental health diagnoses between the choline and placebo groups.

The authors note that very few RCTs have been carried out in FASD and conclude that choline supplementation appears to have long-lasting benefits for non-verbal IQ and working memory in children with the condition.

**Read the study**

RESEARCH

## Persistent or rising drinking after disasters linked to worsening depression

**A new study published in Alcohol: Clinical and Experimental Research has examined long-term patterns of drinking among adults exposed to disasters and how these relate to mental health. The research followed 941 adults in the US Gulf Coast region between 2016 and 2024, a period that included the Deepwater Horizon oil spill, several hurricanes and the COVID-19 pandemic.**

The researchers identified four distinct drinking patterns over the nine years: low and stable (36%), elevated and stable (47%), decreasing (11%) and increasing (7%). People with elevated stable drinking tended to be younger and more educated and were less likely to be female or Black. Differences in disaster exposure between the groups were modest, with only exposure to the oil spill and disruption from COVID-19 linked to drinking patterns.

Over time, depression increased among those whose drinking remained elevated or rose, whilst illness anxiety, a preoccupation with having or developing a serious illness, increased among those with elevated stable or decreasing drinking. The authors conclude that drinking and mental health following disasters are varied and closely linked and that prevention and support should take account of individual drinking patterns and the context of the disaster.

**Read the study**

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TRAINING

# Workbook for staff of licensed premises

**The Alcohol Focus Scotland Workbook for Staff of Licensed Premises is an ideal tool for personal licence holders to provide the 2 hours minimum training to all their staff as required by the Licensing (Scotland) Act 2005.**

The workbook has been specifically created to be a valuable guide for staff

members, providing essential knowledge to enhance their role within the licensing framework.

**Buy Now**

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EVENT

## Putting cancer on the label: Lessons for advancing alcohol policy across the globe

**Online Event**
**10.30am, Monday November 2nd 2026**

**Join World Cancer Research Fund (WCRF) International for an online webinar as part of London Global Cancer Week 2026, to explore how cancer warning labels can raise awareness of the link between alcohol and cancer and help to tackle alcohol harm.**

Bringing together speakers from the UK, Ireland, and South Korea, the webinar will share practical lessons on advancing alcohol labels, including effective advocacy strategies, overcoming implementation challenges and mitigating industry influence. This webinar is open to all and will be particularly relevant to those working in cancer prevention, alcohol harm reduction, and public health policy.

**Register here**

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EVENT

# FASD in Practice: Identifying, Assessing and Supporting Children, Young People and Adults

**Online Event**

**12-1pm Wednesday 11th November**

**This Faculty of Public Health webinar will explore the identification, assessment and support of children, young people and adults living with FASD.**

Professor Raja Mukherjee, who leads the UK's national diagnostic service for FASD and is a recognised international expert in the field will discuss the impact of prenatal alcohol exposure on learning, memory, emotional regulation and behaviour. He will examine how education, health and other agencies can work collaboratively with families to provide effective support, improve quality of life and reduce future risks.

**Register here**



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**WEST LOTHIAN ALCOHOL LICENSING FORUM**

**TIMETABLE OF MEETINGS 2027**

| DATE OF MEETING |
| --- |
| Wednesday 3 March |
| Wednesday 2 June |
| Wednesday 1 September |
| Wednesday 1 December |

All meetings will be held via MS Teams at 4.00 p.m. unless otherwise stated on the agenda. All meetings are open to the public to attend.

The Clerk is Anastasia Dragona, email: anastasia.dragona@westlothian.gov.uk c/o West Lothian Civic Centre, Howden South Road, Livingston, EH54 6FF.

Agendas and minutes can be found here: https://www.westlothian.gov.uk/wl-licensing-forum