

Policing and Crime Bill



EQUALITY IMPACT ASSESSMENT
Crime Reduction and Community Safety Group
Crime and Drugs Strategy Directorate
Alcohol Strategy Unit

PRELIMINARY SCREENING

Date of Screening	29/10/2008
Name of Policy Writer	Charlotte Hickman
Director General	Vic Hogg

Enable the Home Secretary to draw up a new mandatory code of practice for the alcohol industry, and allow local authorities to 'block apply' licensing conditions	X	This is a new policy
		This is a change to an existing policy
		This is an existing policy

Policy Aims, Objectives & Projected Outcomes

This policy will allow the Home Secretary to establish a new code of practice which will include

- A. a small number of mandatory conditions
- B. a larger list of conditions where local authorities have the discretion to 'block apply' them to a number of premises at once
- C. guidance for local authorities.

This EIA only covers the enabling power for the Home Secretary to draw up this code. It does not cover the impacts of the content of such a code. The content will be drawn up following further consultation and so the impacts will be fully assessed at a later date.

The objective of this policy is to encourage the more responsible sale of alcohol, and therefore reduce the level of alcohol-related crime and disorder that can be a significant problem for the wider community.

Will the policy have an impact on national or local people/staff?	YES
Are particular communities or groups likely to have different needs, experiences and/or attitudes in relation to the policy	YES
Are there any aspects of the policy that could contribute to equality or inequality?	NO
Could the aims of the policy be in conflict with equal opportunity, elimination of discrimination, promotion of good relations?	NO
If this is an amendment of an existing policy, was the original policy impact assessed?	N/A

If your answer to any of these questions is **YES**, go on to the full EIA.

If you have answered **NO to any particular questions**, please provide explanatory evidence.

If you have answered **NO to all of these questions** then you must also attach the following statement to all future submissions that are related to this policy and ensure it is signed off by senior management. You must also include this statement within any regulatory impact assessment that is related to this policy.

“This policy was screened for impact on equalities on [insert date]. The following evidence [Evidence] has been considered. As a result of this screening, it has been decided that a full equality impact assessment is not required. “

FULL IMPACT ASSESSMENT

STATISTICS & RESEARCH

What relevant quantitative & qualitative data do you have in relation to this policy?

Please site any quantitative (e.g. statistical research) and qualitative evidence (monitoring data, complaints, satisfaction surveys, focus groups, questionnaires, meetings, research interviews etc) of communities or groups having different needs, experiences or attitudes in relation to this policy area.

Equality Target Areas	<p>How does the data identify potential or known positive impacts?</p> <p>How does the data identify any potential or known adverse impacts?</p>
<p>Race (consider e.g. nationalities, Gypsies, Travellers, languages)</p>	<p>White people tend to drink more than ethnic minorities, and there are particularly high levels of alcohol consumption among the White Irish community (<i>HIAT 2005</i>)</p> <p>However, over half of all male ethnic minority offenders were classed as harmful or hazardous drinkers¹. (<i>Home Office 2003</i>). There is also an association between social inequality & substance misuse. A higher proportion of BME groups experience social inequality (<i>Alcohol Concern 2003</i>)</p> <p>2% of assaults without injury (which is a close proxy for alcohol-related violence) were racially or religiously motivated (<i>British Crime Survey</i>)</p> <p>Alcohol awareness campaigns, particularly those based around unit measures and logos, have been inaccessible to some BMEs, even where translations have been available. (<i>Banton et al 2006</i>)</p>
<p>Disability (consider social access and physical access)</p>	<p>Disabled people are not mentioned in current industry guidelines.</p> <p>Learning disabled young people are more likely to drink due to social isolation including bullying and to be socially vulnerable because of drinking; including risk of sexual assault and rape and financial exploitation (<i>University of Ulster 2006</i>)</p>

¹ Hazardous drinkers regularly exceed 21 units a week for men and 14 for women. Harmful drinkers regularly exceed 50 units a week for men and 35 for women.

	<p>There is currently “a lack of appropriate, accessible and targeted information and support to encourage and enable people with learning disabilities and/or mental health problems to improve their physical health, particularly where they are in residential settings such as residential care homes and hospitals.” (<i>DRC 2006</i>)</p>
Gender	<p>On average, men drink significantly more than women. However, drinking patterns amongst women, particularly young women, have changed significantly over the last 20 years and binge drinking among this group is almost as common as for young men. (<i>ONS 2008</i>)</p> <p>Skilled women tend to drink more than unskilled women, whereas unskilled men drink more than skilled men. (<i>SUAHRP 2003</i>)</p> <p>Men are significantly more likely than women to get into a fight or damage something during or after drinking. (<i>SHUARP 2003</i>)</p> <p>360,000 alcohol-related incidents of domestic violence and 19,000 sexual assaults related to alcohol. Alcohol is reported as a factor in approximately one third of domestic violence incidents (<i>SHUARP 2003</i>)</p> <p>Many young male offenders were drinking heavily and frequently often to conform to social expectations. Most did not recognise that they had a problem. (<i>Home Office 2003</i>)</p> <p>Many women feel excluded from town centres at night, particularly at the weekend (<i>The Civic Trust 2005</i>)</p> <p>Voluntary standards and guidelines are frequently ignored (<i>Alcohol Concern, 2003</i>): complaints have been upheld against products such as Roxxoff, and WKD, where alcohol was associated with sexual success for men.</p>
Gender Identity	No data available

Religion and Belief	Hate crimes are most likely to occur between 3pm and midnight (<i>Home Office 2007</i>)
Sexual Orientation	<p>The industry guidelines do not mention LGBT people.</p> <p>The typical homophobic offender is a young white male, aged 16-20, and offences are most likely to be committed between 3pm and midnight. (<i>Home Office 2007</i>)</p> <p>Given patterns of drinking and the links to offending amongst young white men, it is likely that alcohol is also a contributory factor in this type of offending. (<i>SUAHRU 2003</i>)</p>
Age	<p>Although fewer young people are drinking alcohol, those who do are drinking more than before. Average consumption doubled during the 1990s and has remained at this higher level since (<i>NHS Information Centre 2008</i>)</p> <p>Young people have not been receptive to the 'sensible drinking' message (<i>SUAHRP 2003</i>).</p> <p>Many older people feel excluded from town centres at night, particularly at the weekend (<i>The Civic Trust 2005</i>).</p> <p>There is a link between alcohol and domestic violence, and children and young people will be directly or indirectly affected. Surveys suggest between 30 and 60 per cent of child protection cases involve alcohol (<i>SUAHRP 2003</i>).</p>

What research have you considered commissioning to fill any data gaps?

For example, you may need to ensure quantitative & qualitative data groups include stakeholders with respect to this policy.

N.B Include any recommendations in your action plan

We are considering commissioning further research into the effect price-based promotions (such as all-you-can-drink for £x) have on levels of alcohol consumption.

Who are the stakeholders, community groups, staff or customers for this policy area?

Anyone who drinks alcohol

Anyone who uses the night-time economy

Alcohol industry, particularly those who own or manage licensed premises and the trade bodies who represent the industry (such as British Beer and Pub Association, Wine and Spirit Trade Association and the Association of Convenience Stores)

Local Authorities

LACORS

Police

Trading Standards

Youth Justice Board and Youth Offending Teams

Department for Health

Department for Children, Schools and Families

Department for Culture, Media and Sport

Department for Business, Enterprise and Regulatory Reform

Department for Communities and Local Government

Ministry of Justice

What are the overall trends and patterns in this qualitative & quantitative data?

Disproportionality; regional variations; different levels of access, experiences or needs; combined impacts.

Assessing the trend in alcohol consumption is difficult due to a change in methodology in 2006². However, average weekly alcohol consumption among adults has remained largely stable over the past decade. The prevalence of binge drinking among males has slightly declined, particularly amongst 16-24 year olds. However, amongst women binge drinking has increased, particularly among 25-44 year olds. Less under 18s are drinking than before, but those who did are drinking more.

Alcohol-related violence has decreased significantly since the mid-1990s.

² The General Household Survey asks respondents about the volume of alcohol consumed, rather than the number of units. Due to an increasing trend towards premium beers and larger wine glasses, it was necessary to increase the average number of units that certain volumes were assumed to have contained.

However, the proportion of violence which is alcohol-related has remained stable.

Unfortunately, much of the evidence on alcohol use and crime is taken from surveys and due to the small sample sizes for certain minorities it is very difficult to assess any changes over time for specific groups.

Please list the specific equality issues that may need to be addressed through consultation (and further research)?

These provisions will affect how licensed premises are managed and how alcohol is served. Further consideration will need to be given to the extent to which different groups consume alcohol and the extent to which different groups use licensed premises in order to assess the impacts on them.

Consideration will also need to be given to the impact this proposal may have on small businesses and whether or not that will disproportionately affect some groups and / or communities.

This EIA only covers the proposal to allow the Home Secretary to establish new code of practice, including a small number of mandatory licensing conditions and a longer list of conditions which local authorities can then apply to more than one premise at a time. It does not therefore cover the impacts of the content of such a code. The content will be drawn up following further consultation and so the impacts will be fully assessed at a later date.

GATHERING EVIDENCE THROUGH COMMUNITY ENGAGEMENT

INTERNAL STAKEHOLDER ENGAGEMENT: Consulting & involving Other Government Departments, Staff, Agencies & NDPBs

Does this policy affect the experiences of staff? How? What are their concerns?	
Staff	These policies will affect those working in local authorities, particularly those involved in licensing. They will also affect those working in 'responsible authorities' (i.e. those involved in enforcement) such as the Police and Trading Standards.
Staff Networks & Associations	
Trade Unions	

How have you consulted, engaged and involved internal stakeholders in considering the impact of this proposal on other public policies and services?

For example your policy may affect access to housing, education, health, employment services.

A cross-governmental Taskforce was established to develop this policy. This comprised officials from the Home Office, DH, DCSF, DCMS CLG and BERR. LACORS, LGA and ACPO were also consulted.

What positive and adverse impacts were identified by your internal consultees? Did they provide any examples?

Positive: an independent review has shown that the current voluntary industry standards are not being adhered to and irresponsible practices do occur. These practices can lead to excessive levels of drunkenness, unacceptable behaviour and crime and we know that some groups feel excluded from the night-time economy as a result. This policy is therefore expected to bring about significant benefits for all members of the community through less crime and disorder and a better-managed night-time economy, as well as collateral health benefits from reduced alcohol misuse.

Allowing local authorities the discretion to apply some of the conditions in the code of practice will ensure that they are mostly imposed on those premises where there is a risk of crime and disorder. This should thereby minimise the potential burdens on those premises which are already well managed.

Negative: BERR were concerned with the potential adverse impacts this policy may have on small businesses because of the additional burdens placed upon them. CLG were concerned with the potential for additional

burdens on local authorities and others involved in enforcement and the implications this could have for the wider community.

Feedback the results of this internal consultation and use it as a basis for work on external consultation

EXTERNAL CONSULTATION & INVOLVEMENT

External stakeholders were consulted through a 3-month public consultation undertaken by the Department of Health in July 2008 which received 2,336 responses.³ Consultation events involving a further 141 individuals and organisations, including 15 representatives of diverse groups, also took place. The majority of respondents were from the public and third sector (police, health, local authorities). Alcohol producers and trade bodies provided a number of very detailed responses as well as participating in the consultation events.

How did your engagement exercise highlight positive and negative impacts on different communities?	
Voluntary Organisations	No impacts identified
Race	No impacts identified
Faith	No impacts identified
Disability Rights	No impacts identified
Gender	No impacts identified
Gender Identity	No impacts identified
Sexual Orientation	No impacts identified
Age	Positive: 46 respondents felt that more needed to be done to tackle underage sales and felt that a mandatory code would be beneficial as it could contain requirements to operate proof of age schemes.

Regional Engagement events identified the need for certain premises to be exempted from a retail code, such as old people's homes and religious communities.

Certain applications of the Code should be sensitive to cultural needs; for example how to make point of sale information relevant to non-English readers (this specific point was identified in respect of alcohol labelling).

During these events, feedback about the needs of 'hard to reach groups' primarily highlighted roles for the NHS and voluntary organisations in providing support and advice, rather than identifying unique considerations for the Code.

³ *Safe, Sensible, Social - Consultation on further action*, Department of Health 2008.

Feedback the results of your community engagement (i.e. involvement and consultation) to all participants including internal and external stakeholders

ASSESSMENT & ANALYSIS

Does the EIA show a potential for differential impact on any group(s) if this proposal is introduced? If Yes, state briefly whether impact is adverse or positive and in what equality areas.

Yes. This proposal is intended to lead to the more responsible sale of alcohol in order to reduce the harms associated with excessive consumption, and to promote the four licensing objectives. As a result, it will have a differential impact on different groups depending upon how frequently they binge drink and how likely they are to commit alcohol-related crime and disorder.

The Government's National Alcohol Strategy identified young adults as a priority group. Evidence shows that they are the most likely to binge drink and are therefore at risk of becoming either perpetrators or victims of crime. This policy involves tackling those irresponsible practices which can lead to excessive drunkenness, and so we would expect this to have a larger impact on young adults. However, this impact is proportionate and entirely consistent with our objective of reducing alcohol-related crime and disorder.

Amongst young adults, there is the potential for a dissimilar impact on different racial groups, as white people are more likely to binge drink. Again, this is proportionate and consistent with our objectives as they are also more likely to commit alcohol-related crime. There is however, the potential for a disproportionate impact on young women. Binge drinking among young women has increased in recent years, and it is now almost as prevalent as amongst young men. This policy will therefore impact on men and women to a similar extent, despite young women being less likely to commit alcohol-related crime.

However, the significant benefits that all members of the community will experience through less crime and disorder, a better managed night-time economy, and collateral health benefits from reduced alcohol misuse will outweigh this, and so an adverse impact is not anticipated.

What were the main findings of the engagement exercise and what weight should they carry?

Responses from those involved in the alcohol industry typically favoured a system of self- or co-regulation. We are sympathetic to these arguments and believe that self-regulation is a desirable choice when working with industry. However, we do not believe that a revised voluntary code would be any more effective than the one that large sections of the alcohol industry signed up to in 2005. An independent review by KPMG found that the existing voluntary code was not helping to reduce crime and disorder and that as well as not complying with the principles of the code many of those selling alcohol were actually breaching the law as well.

90% of respondents believed that the standards should be made mandatory, and respondents were particularly concerned about tackling irresponsible promotions, underage sales and the sale of alcohol in off-licenses.

Based on the evidence gathered by KPMG, the responses to the consultation and extensive discussions with stakeholders we have concluded that self-regulation alone is not a viable way forward.

Does this policy have the potential to cause unlawful direct or indirect discrimination? Does this policy have the potential to exclude certain group of people from obtaining services, or limit their participation in any aspect of public life?

This policy will not cause unlawful or indirect discrimination, and will not exclude people from obtaining services or limit their participation in public life.

How does the policy promote equality of opportunity?

By making sales of alcohol more responsible, this policy should result in less people misusing alcohol or consuming excessive amounts, which can lead to significant social problems including crime and disorder.

How does your policy promote good relations? How does this policy make it possible for different groups to work together, build bridges between parallel communities, or remove barriers that isolate groups and individuals from engaging in civic society more generally?

An independent review has shown that the current voluntary industry standards are not being adhered to and irresponsible practices do occur. These practices can lead to excessive levels of drunkenness, unacceptable behaviour and crime and we know that some groups feel excluded from the night-time economy as a result. This policy is therefore expected to bring about significant benefits for all members of the community through less crime and disorder and a better-managed night-time economy, as well as collateral health benefits from reduced alcohol misuse.

How can the policy be revised, or additional measures taken, in order for the policy to achieve its aims without risking any adverse impact?

No adverse impact is expected although this depends on the content of the code. For example, we are considering whether to ban promotions offering free drinks (e.g. to women) and whether to require premises to offer small wine glasses, both of which could impact upon young women. The content will be drawn up following consultation and will be impact assessed at a later date.

Are there any concerns from data gathering, consultation and analysis that have not been taken on board?

Please justify and explain the reason for your decision.

No

ENSURING ACCESS TO INFORMATION

How can you ensure that information used for this EIA is readily available in the future?

(N.B. You will need to include this in your action plan)

Much of the data used in this EIA is from national surveys which are expected to continue.

How will you ensure your stakeholders continue to be involved/ engaged in shaping the development/ delivery of this policy?

(N.B. You will need to include this in your action plan)

We anticipate there will be another public consultation on the content of a mandatory code of practice. We will also continue to engage with representatives of the alcohol industry, local authorities, and with officials from other government departments.

How will you monitor this policy to ensure that the policy delivers the equality commitments required?

(N.B. You will need to include this in your action plan)

DCMS and the Ministry of Justice will continue to collect licensing and prosecution data respectively so that we can monitor the use of these proposals.

The Home Office and the Department of Health will continue to collect data on crime and hospital admissions respectively so that we can monitor the outcome of this proposal on different groups.

Now submit your EIA and related evidence for clearance.

ACTION PLAN

Recommendations	Responsibility	Actions required	Success Indicators	Target Date	What progress has been made?
Publication Arrangements	Home Office Alcohol Strategy Unit	Publish EIA	EIA is published on Home Office website	December 2008	
Further Consultation	Home Office Alcohol Strategy Unit	Continue to meet with cross-governmental Taskforce and stakeholders to develop content of code of practice	Meetings take place and content is finalised.	Draft ready for consultation by Spring 2009 Final code ready to lay before Parliament by late 2009	
	Home Office Alcohol Strategy Unit	Conduct public consultation on content of revised code	Consultation occurs	Spring 2009	
Further Assessment	Home Office Alcohol Strategy Unit	Conduct EIA of the content of the code of practice and publish	EIA is published on Home Office website	Late 2009	
Monitoring & Review Arrangements	DCMS	Collect licensing statistics data annually, including number of license reviews	Data is collected	Ongoing	

	Ministry of Justice	Data on the number of retailers prosecuted for failing to comply with licensing conditions will be collected.	Data is collected	Ongoing	
	Home Office	Collect data on the number and nature of alcohol-related crimes through the British Crime Survey	Data is collected	Ongoing	
	Department of Health	Collect data on number of alcohol-related hospital admissions	Data is collected	Ongoing	

Please ensure that the action plan is agreed by your Director/ Minister

THE EQUALITY IMPACT ASSESSMENT REPORT

Background:

The alcohol industry's Social Responsibility Standards were launched in November 2005 to coincide with the implementation of the new Licensing Act. They were signed by 16 trade associations and draw together industry good practice, advice and codes of conduct. Adherence to the Standards is voluntary except for the aspects relating to legislation, advertising and the Portman Group code of practice.

In February 2008, the Home Office commissioned KPMG to conduct a review into the effectiveness of these Standards in contributing to a reduction in alcohol harm⁴. KPMG concluded that those selling alcohol to the public were not aware of the voluntary code of practice that had been agreed by the key trade organisations, and that the code did not have an impact in reducing levels of crime and disorder. In particular, KPMG found evidence of:

- people who appear to be under-18 frequently being admitted to age restricted venues in which they cannot purchase alcohol legally;
- the promotion of alcohol through low price offers, inducements by DJs to consume greater quantities, and glamorisation through links with sexual imagery;
- encouragement to drink more and faster through shots and shooters being “downed in one”;
- sales to blatantly intoxicated people;
- several health and safety issues inside bars and clubs e.g. overcrowding, broken glass and spilled alcohol;
- poor dispersal practices (although there is some very good practice);
- several instances of anti-social behaviour and low level crime (fights and assaults, urinating and vomiting in public places, criminal damage)

This EIA therefore deals with the impact of a proposal to introduce a mandatory code of practice for the alcohol industry in order to tackle these irresponsible practices.

Methodology:

This EIA is based upon:

- The Equality Impact Assessment that was published alongside *Safe. Sensible. Social. The next steps in the National Alcohol Strategy* in June 2007. The strategy included proposals to review the existing standards and to investigate the possibility of a mandatory code.⁵
- Discussions with other government departments involved in the cross-governmental Taskforce. This comprised officials from the Home Office, DH, DCSF, DCMS and BERR. CLG, LACORS, LGA and ACPO were also consulted.
- Discussions with the alcohol industry
- Responses to a 3-month public consultation, *Safe, Sensible, Social - Consultation on further action*, from July to October 2008.

⁴ Review of the Social Responsibility Standards for the production and sale of Alcoholic Drinks, Home Office 2008

⁵http://www.dh.gov.uk/en/Publichealth/Healthimprovement/Alcoholmisuse/DH_4001740?IdcService=GET_FILE&ID=169485&Rendition=Web

- Regional engagement events, at which industry, health and enforcement stakeholders, as well as diverse groups, were present.
- Data from the *British Crime Survey*, the *General Household Survey* and *Drug use, smoking and drinking among young people in England*
- A range of published research (see references list)

This assessment has taken account of seven key diversity strands currently covered in varying degrees by legislation: race, gender, gender identity, disability, religion, sexual orientation and age.

Consultation & Involvement:

Consultation with internal stakeholders was conducted through a cross-departmental Taskforce. As detailed above, these meetings comprised officials from a number of government departments.

External stakeholders were consulted through a 3-month public consultation undertaken by the Department of Health in July 2008 which received 2,336 responses.⁶ Consultation events involving a further 141 individuals and organisations, including 15 representatives of diverse groups, also took place. The majority of respondents were from the public and third sector (police, health, local authorities). Alcohol producers and trade bodies provided a number of very detailed responses as well as participating in the consultation events.

When asked what are the most important issues that need to be addressed in an alcohol retailing code (unprompted) responses covered; restrictions on alcohol promotions, proof of age schemes, separate check-out areas, requirements to sell the smallest measure, mandatory standards, compulsory training, restrictions on advertising (particularly those aimed at young people), setting minimum prices, ending cut-price promotions providing information at point of sale and ensuring water and soft drinks were available at cheaper prices. A number of respondents (including those from alcohol trade bodies) argued that not enough emphasis has been placed on the sale of cheap alcohol by off-licenses.

Around 90% of those who responded to the consultation question on whether a new alcohol retailing code should be made mandatory through further legislation felt that it should. However, the alcohol producers and trade bodies who responded argued that improvements could best be achieved through a system of co- or self-regulation with standards agreed between the Government and the alcohol industry.

We are sympathetic to these arguments and believe that self-regulation is a desirable choice when working with industry. However, we do not believe that a revised voluntary code would be any more effective than the one that large sections of the alcohol industry signed up to in 2005. An independent review by KPMG found that the existing voluntary code was not helping to reduce crime and disorder and that as well as not complying with the principles of the code many of those selling alcohol were actually breaching the law as well. Based on the evidence gathered by KPMG, the responses to the consultation and extensive discussions with stakeholders we have concluded that self-regulation alone is not a viable way forward.

⁶ *Safe, Sensible, Social - Consultation on further action*, Department of Health 2008.

Assessment & analysis

An Equality Impact Assessment was published alongside the National Alcohol Strategy in June 2007. This proposal was outlined in the Alcohol Strategy and this EIA considers it in more detail. Following further consultation with both internal and external stakeholders some potential impacts have been identified, both positive and negative. However, a key issue around assessing the likely equality impacts of these measures has been a lack of data and evidence. Although we have reasonable data about the drinking behaviour of some groups, we have less information about their offending behaviour, especially in relation to alcohol-related crime and anti-social behaviour. There is also a lack of data around the existing level of enforcement activity. We will therefore continue to assess the potential equality impacts as the content of the code is developed.

Potential positive impacts

According to the 2007/08 British Crime Survey⁷, victims believed the offender(s) to be under the influence of alcohol in 45 per cent of all violent incidents, equivalent to 947,000 violent offences. Whilst the number of alcohol-related violent offences has fallen significantly since the mid-1990s the proportion of violent offences that are alcohol-related has remained stable.

More than half of people surveyed (52%) also thought that alcohol was one of the major causes of crime, an increase from 49% in the previous year. However, a much smaller proportion (7%) thought it was the *main* cause of crime in Britain today. Results from the 2006/07 survey⁸ also show that 18% of all violence occurred in a pub or club and 48% of all violent offences occurred between Friday night and Monday morning.

The 2008 Review of the Licensing Act⁹ found that overall there had been a 1% fall in violence, harassment and criminal damage in the 12 months following the introduction of the Licensing Act. However, there was a 22% increase in offences reported between 3am and 6am. Whilst these represent only 4% of the offences committed at night, the Government has committed to undertake further research into post-midnight drinking patterns and their impact on crime and disorder.

Perceptions of problems with alcohol are also increasing. The percentage of people who think drunk and rowdy behaviour is a fairly or very big problem in their area has risen, from 19% in 2003/4 to 25% in 2007/8¹⁰.

Alcohol-related crime and disorder can have significant negative consequences for the wider community. The Home Office estimates that alcohol-related crime costs England and Wales between £8bn and £13bn¹¹ each year. An independent review has shown that the current voluntary industry standards are not being adhered to and irresponsible practices do occur. These practices can lead to excessive levels of drunkenness, unacceptable behaviour and crime and we know that some groups feel excluded from the night-time economy as a result. This policy is therefore expected to bring about significant benefits for all members of the

⁷ The results of which are published in *Crime in England and Wales 2007/08*, Home Office Statistical Bulletin 07/08

⁸ Published in the supplementary tables of *Crime in England and Wales 2006/07*

⁹ Based on a sample of 30 police forces, accounting for approximately 75% of recorded crime.

¹⁰ *Crime in England and Wales 2007/08*, Home Office Statistical Bulletin 07/08

¹¹ See Impact Assessment

community through less crime and disorder and a better-managed night-time economy, as well as collateral health benefits from reduced alcohol misuse.

Potential negative impacts

We have identified three key diversity strands where this policy has the potential for adverse impacts: age, gender and race.

Age

This policy is particularly likely to impact on younger adults. Evidence shows that whilst, on average, young adults drink roughly the same amount of alcohol as older people, they are much more likely to binge drink¹² and it is this type of consumption which is most closely linked to crime and disorder. 30% of men aged 16-24 admitted binge drinking in the last week compared to 21% of 45-64 year olds. For women, the figures are 25% compared with 12%.¹³ This high prevalence of binge drinking puts this group at a particularly high risk of either becoming perpetrators or victims of crime, and as a result this group were one of the main focuses of the Government's National Alcohol Strategy. This policy involves tackling those irresponsible practices in licensed premises which can lead to excessive drunkenness. As such, we would expect this to have a larger impact on young people, but we believe this impact is entirely consistent with our objective of reducing alcohol-related crime and disorder.

Gender

Amongst young adults, there is also the potential for a disproportionate impact on women. Average weekly alcohol consumption is around twice as high for men as it is for women, and this is common across all age groups. However, as detailed above, binge drinking is only slightly more common amongst young adult men compared with young adult women. We would therefore expect this policy to have a similar impact on both sexes. However, this impact is disproportionate for women because they are less likely to commit alcohol-related crime. 28% of men aged 18-25 admitted offending in the last year compared to 17% of women¹⁴ and, although the sample sizes are too small to draw firm conclusions, we believe a similar ratio exists for alcohol-related crime and disorder.

However, we believe that the significant benefits of less crime and disorder and a well-managed night-time economy, along with the collateral health benefits, more than outweigh any potential adverse impact.

Race

Amongst young adults, there is also the potential for a dissimilar impact on different racial groups. Binge drinking is much more prevalent amongst white people than amongst ethnic minorities. 16% of white British people admitted to binge drinking in the last week compared to less than 5% of Asian or black people. Those of mixed race were as likely to binge drink as white people.¹⁵ Therefore, this proposal will have a greater impact on white people. However, as white people are also more likely to commit alcohol-related crime and disorder, this impact is proportionate and is justified in achieving the policy objectives.

¹² Binge drinking is defined as consuming more than double the recommended daily number of units (i.e. more than 8 units for men and more than 6 units for women)

¹³ *Smoking and drinking among adults, 2006*, ONS

¹⁴ *Young People and Crime: Findings from the 2005 Offending, Crime and Justice Survey*, Home Office Statistical Bulletin 17/06

¹⁵ *Smoking and drinking among adults, 2005*, ONS

Summary

This policy is expected to bring about significant benefits for all members of the community through less crime and disorder, a better managed night-time economy, and collateral health benefits from reduced alcohol misuse. There is the potential for a dissimilar impact on different age groups, and within those groups, different racial groups. However, this is proportionate and entirely justified by the different prevalence of binge drinking and offending within those groups. There is though the potential for a disproportionate impact on young women, as they are similarly likely to binge drink but less likely to commit a crime. However, we believe the significant benefits identified above more than outweigh this and so an adverse impact is not anticipated.

We are also confident these measures will not have any effect on the other key diversity strands of disability, gender identity, religion or sexual orientation.

Recommendations

The content of any revised code of practice will be developed through consultation with both internal and external stakeholders to ensure that they are as effective as possible at reducing alcohol-related crime and disorder whilst minimising any potential adverse impacts. A full EIA of the content of the code should also be produced.

In order to monitor the extent to which this proposal is having an impact, data should continue to be collected on:

- the number of licenses reviewed;
- the number of people prosecuted for failing to comply with licensing conditions;
- the number and nature of alcohol-related crimes;
- and the number of people admitted to hospital for alcohol-related reasons.

Date of EIA Report

29th October 2008

Date of Publication of Results

References

Alcohol Concern (2003) Women and alcohol: a cause for concern? Alcohol Concern

Alcohol Concern (2003) "Alcohol drinking among Black and Minority Ethnic (BME) communities in the United Kingdom", Acquire Spring 2003: pull-out digest, Alcohol Concern's Quarterly Information and Research Bulletin, Alcohol Concern

Alcohol Concern (2003) "Advertising alcohol" Acquire Autumn 2003: pull-out digest, Alcohol Concern's Quarterly Information and Research Bulletin, Alcohol Concern

Banton, P.M., Dhillon, H & Johnson, M.R.D. (2006) Alcohol Issues and the South Asian and African Caribbean Communities: Improving Education, Research and Service Development, The Alcohol Education and Research Council

The Civic Trust (2005) Around the Clock: Town Centres for All: A Survey of Local Authority Policy and Provision for Quality and Diversity in the Evening and Night time Economy, The Civic Trust

Department of Health (2007) Safe. Sensible. Social. The next steps in the National Alcohol Strategy

DRC (Disability Rights Commission) (2006) Equal Treatment: Closing the Gap: A formal investigation into physical health inequalities experienced by people with learning disabilities and/or mental health problems, Disability Rights Commission

HIAT (Health Improvement Analytical Team) (2005) Health Survey for England (2004): The Health of Minority Ethnic Groups – headline tables, NHS Health and Social Care Information Centre, Public Health Statistics

Home Office (2007) Hate crime: facts and figures at www.homeoffice.gov.uk/crime-victims/reducing-crime/hate-crime/

Home Office (2003) Minority Groups within Prisons

NHS Information Centre (2008) Drug use, smoking and drinking among young people in England in 2007

Office for National Statistics (2008) Smoking and drinking among adults, 2006

SUAHRP (Strategy Unit Alcohol Harm Reduction Project) (2003) Interim Analytical Report

University of Ulster (2006) An exploration of psychosocial risk factors of hazardous alcohol use in people with learning disabilities: Reasons for drinking among learning disabled people, University of Ulster

Ensure that the EIA Report is published on the Home Office website before your policy/programme is implemented.