



Northern Ireland
Assembly

Committee for Communities

OFFICIAL REPORT (Hansard)

Licensing and Registration of Clubs
(Amendment) Bill:
Northern Ireland Alcohol and Drug Alliance

25 February 2021

NORTHERN IRELAND ASSEMBLY

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Members present for all or part of the proceedings:

Ms Paula Bradley (Chairperson)
Ms Kellie Armstrong (Deputy Chairperson)
Mr Andy Allen
Mr Mark Durkan
Mr Alex Easton
Ms Sinéad Ennis
Ms Karen Mullan
Mr Robin Newton

Witnesses:

Ms Pauline Campbell	NI Alcohol and Drug Alliance
Ms Andrea Trainor	NI Alcohol and Drug Alliance

The Chairperson (Ms P Bradley): Members, our next briefing is from the NI Alcohol and Drug Alliance (NIADA). I welcome Pauline Campbell and Andrea Trainor. You are both very welcome. You have five to 10 minutes to brief the Committee, and then members will ask some questions.

Ms Pauline Campbell (NI Alcohol and Drug Alliance): My name is Pauline Campbell, and I am the vice chair of NIADA. To give a flavour of who we are, NIADA is an alliance that was formed in the summer of 2016. It facilitates cooperation among voluntary and community sector organisations, supporting those affected by alcohol and drug use and their families. Our main purposes are: to come together as organisations to create an independent and cohesive voice; advocate and hope to influence policy, practice and service delivery; campaign for the voluntary and community sector to be involved in the development, design and delivery of alcohol and drugs services; provide members with direct access to Public Health Agency (PHA) and Department of Health decision-making processes; and provide members with networking, information sharing and publicity opportunities. The chairperson of NIADA is Anne-Marie McClure, who is the CEO of Start360. We have 13 member organisations, including Ascertainment, Start360, Simon Community NI, DePaul, Northlands and Addiction NI, to name a few. Our vision is to have a society where people who are affected by alcohol and drug use have access to the right services in the right place at the right time. Our mission is to work collaboratively to raise awareness and to influence policy and practice on the impact of alcohol and drug use on individual families and communities.

In the context of the response to the consultation, all our member organisations provide services such as education, prevention, hidden harm services, low-threshold treatment, recovery services and residentials, and support in the field of addiction. We work with individual family members, the homeless, adults, young people and communities who have all been impacted by alcohol, drug and

polydrug misuse. We have seen personally the impact that alcohol misuse, dependency and addiction have on our service users, their families and communities.

We estimate that we work with over 50,000 individuals per year. In the last three to five years, we have seen complex presentations by individuals and family members. There is dual diagnosis, polydrug use and early onset. The majority are in the 14-to-18 age category and have a family history. Alcohol is seen as a gateway drug, and it is the most commonly used one. It is always in the picture. As an overview, more males than females access our services.

I am sure that you are aware of the Northern Ireland Statistics and Research Agency's (NISRA) report that was published a couple of weeks ago on alcohol-specific death rates in the UK from 2001 to 2019. For the first time, Northern Ireland is on a par with Scotland for alcohol-specific deaths. We have seen an increase in alcohol-related deaths since 2013.

The COVID pandemic has hit us all, and all our services are working online. Pubs are closed, and you cannot buy any drink from an off-licence after 8.00 pm, but we are still seeing an increase in alcohol-related referrals to our services. There may be a number of reasons for that. It may be to do with the fact that people are isolated or that they are in denial. We have really seen an increase in family members availing themselves of the services. I just thought that that was a very interesting point.

In 2019, there were 77 alcohol-related referrals to Carlisle House, which is a residential treatment service. That increased to 81 in 2020. Davina's Ark, which is in Newry, had 62 alcohol-related referrals in 2020, and Addiction NI had 902 in 2020. As well as other services, Dunlewey Addiction Services provides a young people's service in the Southern Trust area, funded by the PHA, for 11- to 25-year-olds. In 2018-19, 27% of the referrals for the young people's service were for alcohol. From 1 April 2020 to January 2021, there were 122 referrals to the 11- to 25-year-old service, 45% of which were alcohol-related. Fifty-eight per cent were male, and 35% were female. Those are the figures for alcohol only; I have not included the figures for drugs.

I will move on to our thoughts on the Bill. We have 13 members, and it was difficult to pull together everybody's thoughts and put them into one submission, but we did it. Overall, we agree with the Bill, but our area of concern is children and young people. We welcome the proposals on the alignment of closing time for liquor and entertainment, the refreshment provision, the delivery of intoxicating liquor to young persons and the prohibition on self-service and sales by vending machines. The members feel that we need to come from a harm-reduction and prevention route rather than wait until crisis point. It is really important that we educate our young people and reduce the normality of drinking so that young people do not grow up to be adults who reach out for help with problem drinking. We really recommend that the public health messages about alcohol be the driving force behind the policy's objectives.

We welcome the study that will be led by the University of Stirling to understand recent changes in opening hours for bars and nightclubs and how they have impacted on health, crime levels and emergency services in Scotland. That will be the first study in the UK to look at how opening hours affect ambulance call-outs and crimes, and it will explore the impact on public services and business operations. It will also build on previous studies from Norway, Amsterdam and Australia that found that opening even an hour later after midnight led to significantly more assaults or alcohol-related ambulance call-outs.

Going back to young people, we recommend that all the necessary safeguards are put in place in order to protect children from the promotion of alcohol and to prevent access to alcohol when they are in licensed premises. There is a wealth of information and evidence on the negative impact that exposure to excessive alcohol consumption has on children and the impact that it has at ground level; for example, there can be hidden harm from extended family drinking, which affects all social classes and has cultural acceptance. The physical and mental impact of problematic drinking can impact anyone. Rather than increase the opportunity for exposure, we need to reduce it with positive things and consider alternatives.

The members wanted me to say that an increase in the price of alcohol and minimum unit pricing would really have an impact and help. In the near future, there will be a consultation on minimum unit pricing, and NIADA has been closely networking with the Republic of Ireland and the department of health in Scotland, and we are aware of the evaluations of minimum unit pricing that are being carried out. The theme of our virtual conference this year will be minimum unit pricing. Reducing the availability of alcohol and the number of alcohol outlets in different communities would also have an

impact. Really important is restricted marketing and consultation on outdoor alcohol advertising and the sponsorship of events to protect children.

Before you ask questions, I will briefly say that we have commissioned two pieces of research by Queen's. One is on alcohol and drug use in the workplace, and the other is on service users' experience during lockdown. There were some interesting results, and we are more than happy to share the research papers.

The Chairperson (Ms P Bradley): OK. Pauline, is that you finished?

Ms Campbell: That is me finished. Thank you.

The Chairperson (Ms P Bradley): Thanks, Pauline. We would love to see those research papers; they would certainly help the Committee. In two weeks' time, we will go into our deliberations, so any information would be greatly appreciated.

As a constituency MLA, a resident of Northern Ireland and a mum, a daughter and a sister, I absolutely see the harm that the misuse of alcohol does to people, families and communities. That is why it is essential that we, as a Committee, listen to all the views that are expressed. You mentioned Carlisle House, which was also mentioned by the Presbyterian Church along with the lack of services in Northern Ireland for all addictions. We have seen, as you said, such an increase in alcohol abuse that we are now at the same level as Scotland. That is quite frightening. Much of that is beyond the remit of our Bill.

You mentioned minimum unit pricing, which I raised with the Minister on Tuesday in the Chamber. He hopes that the consultation on that will begin before the end of this mandate, but it will be up to those in the next mandate to bring about the legislation. We have been waiting for that for probably as many years as we have been waiting for the licensing Bill. I sat on the Health Committee for a number of years, so I remember it well. I thank you and all your organisations, because without you we would be in a far worse position. You pick up the pieces not only for the users but for the many families whose lives are greatly affected. Thank you for all that you do.

I want to ask a couple of questions. You stated that the Bill is too heavily weighted towards economic benefits and does not sufficiently address public health. Given the remit of the Bill, what more could be put into it to bolster the public health aspect?

Ms Campbell: It is quite difficult for me, because I can speak on behalf of Dunlewey, but we have 13 member organisations, and I am conscious that I need to represent NIADA. Would you mind just asking the question again?

The Chairperson (Ms P Bradley): Is there anything else that you would like to see in the Bill or anything that you would like us look at or are there any amendments that we can bring forward to bolster the public health side of the matter? You think that the Bill is very much weighted towards the economic benefits, and I see why you think that.

We have spoken to the Public Health Agency as well, and it also has concerns about the public health aspect. Is there something more that we need to look at in order to bolster the public health side? It could be a review. Do you have an opinion on that? The Committee has heard from various people who say that a review needs to be in the Bill and that there must be a review of extended opening hours within a year. Do you agree with that, for example?

Ms Campbell: We totally agree that there must be a review of extended hours. We have concerns about individuals stockpiling and preloading and about the damage that binge and excessive drinking can do to an individual from an emotional and physical point of view.

One of the other things that we are really concerned about and want to put forward is advertising alcohol, particularly to young people, and how exposure from a very young age can impact on young people and adolescents. As we have seen, the years between 14 and 25 can be the starting point for people to use substances. The younger the person is when they start to drink, the greater the risk of alcohol-related harm not just in adolescence but across their lifespan. Advertising and the extended presence of young people in social clubs and sporting clubs should somehow be restricted. We find the link between alcohol and sport to be a bit contradictory, and we worry about advertising, which normalises the culture of alcohol.

The Chairperson (Ms P Bradley): Thank you for that. In a number of places, your paper talks about the Republic of Ireland's Public Health (Alcohol) Act 2018. Do you think that, although it is not within the scope of the Bill, if we had such legislation, this Bill would be more acceptable if those concerns about public health were addressed?

Ms Campbell: I do. We looked closely at the Republic of Ireland, and we are aware that there is no advertising in cinemas or close to schools. We also heard that there are a couple of loopholes whereby there is advertising beside schools, but it is for non-alcoholic drink. Alcohol advertisements on public service vehicles, at public transport stops and stations, at crèches and local authority playgrounds should be prohibited. We see the validity of those measures and strongly recommend that the Department for Communities considers similar measures in Northern Ireland.

The Chairperson (Ms P Bradley): Advertising is a part of the Bill, so when the Committee begins its deliberations we may need to look at how that could be expanded slightly if possible. We could look at that.

I liked your comment about the codes of practice:

"This is akin to asking the fox to guard the chicken shed."

I take it that you would very much not want a code of practice to be industry-led and would want it to be led from elsewhere. It is proposed in the Bill that it be statutorily led, so is that acceptable, or would you like to see something more than that?

Ms Campbell: No, it is just exactly as you said. I also want to go back to the point about the advertising. Scottish ladies' football does not accept sponsorship from alcohol or gambling. It is important to take that on board.

The Chairperson (Ms P Bradley): *[Inaudible.]* OK.

Mr Newton: I thank the delegation, and I admire your skills in bringing together the number of organisations that are under your umbrella to promote one paper. You might want to offer your skills on that to the Executive *[Laughter.]* I do not have a question as such, but I join the Chair in the tribute that she paid to you for the work that you do at the very sharp end of things with those who have, unfortunately, become addicted, and, indeed, your work with the wider family of the addict on the impact that it has. Like the Chair, my office is in an inner-city area, and we see an awful lot of the problems. This is really just a comment, but I think that this might an ambition of yours; it is an ambition of mine, although I do not know how we can achieve it. When you were responding to clauses 12 and 8, which permit young people to remain on licensed premises, you used the words:

"The Mediterranean drinking pattern and places to drink show us that more moderate drinking is the norm".

That seems to be a worthy ambition, if we could ever arrive there. In the Northern Ireland culture of drinking, I do not really think that that is possible without a major sea change in attitudes in society. Am I right in that, and is that your thinking as well?

The Chairperson (Ms P Bradley): Pauline, we cannot hear you.

Ms Campbell: Oh, sorry. Maybe that is a good thing.

Yes, we talked about the Mediterranean model. However, there has been — if I can just go back to my notes here; sorry.

Attitudes on that would need to change significantly in the Northern Ireland context. We know that it is about people staggering their drinking times and the impact that that has on physical, mental and emotional well-being. I really do not have anything more to say about that; sorry.

The Chairperson (Ms P Bradley): That is fine. Grand.

Mr Newton: Thank you.

Ms Ennis: I thank Pauline and Andrea for coming before the Committee today. There is hardly a family in Ireland that has not been affected by alcoholism or some kind of alcohol addiction problem. I am glad that you mentioned Davina's Ark in Newry, Pauline. I have worked with Davina's Ark, and we have Sister Consilio's as well, so there are good charities that are doing a lot of good work on addiction. I know that Davina's Ark focuses a lot on the trauma that is associated with addiction, which is not often spoken about. While there are services to treat the person with the addiction, often the trauma that is associated with that addiction affects families. A lot of good work is going on in my area with Davina's Ark and Sister Consilio's.

I want to take you back to advertising. You largely covered it, to be fair, but submissions to the Committee over the last number of weeks have shown that advertising seems to be the sticking point with clause 16. There have been contradictory opinions, shall we say, on the effect that advertising has on people who already have an alcohol-related problem or on young people, who are more susceptible to the advertising.

We know that advertising works, or else it would not be a multibillion pound industry. From NIADA's experience, do you agree that excessive advertising, or advertising in general, specifically when it is geared towards younger people, has an effect on them and makes them more susceptible to drink in the first place? For those who already have an alcohol-related problem, does the prevalence of advertising, promotions and things like that affect them being able to manage their addiction?

Ms Campbell: In our experience, yes, it can be very difficult for someone in recovery to see billboards about alcohol and the glamorous advertisements on TV about alcohol. Yes, that can have an impact, but it is important that those individuals have the coping skills in their toolbox to deal with it.

There are a lot of influences on young people in relation to alcohol. It could be anything from their personality to peer pressure, family life or maybe hidden harm at home. Advertising is seen in the alcohol field as glamorous and cool, and some young people can buy in to that.

I have seen recently, as have our members, the increase of non-alcoholic drinks and the choices that allow individuals or young people to go for them. We have seen a big rise in those drinks, but we need to be careful about how our young people are exposed to alcohol. If they choose to drink, they need good preventative education about how to drink and about harm minimisation. We just know that we are on the other side of it, which is the side where people are coming through our doors when alcohol has impacted on them and the consequences have been so damaging for their life and their families.

From NIADA's point of view, we are privileged to work with those individuals because they have had the confidence and courage to deal with their life. Going back to your point about advertising, we would like all advertising on alcohol banned.

Ms Andrea Trainor (NI Alcohol and Drug Alliance): When we were discussing this with our members, one point that came up was that we do not advertise tobacco any more and do not advertise any kind of drugs, so where does advertising alcohol fit in with that? That sparked a conversation on why it needs to be looked at.

Ms Ennis: Sporting organisations are another area where the prevalence of advertising needs to be looked at. The GAA has ended any advertising for gambling, and I think that it is well on the way to phasing out any association with alcohol advertising. That is a good model for other sporting associations to follow because we know that that has a big impact on the lives of young people who are members of sporting organisations.

Ms Campbell: In the Six Nations rugby in 2020, alcohol sponsorship could be seen every 15 seconds. Some research was done on that: every 15 seconds, there was a glimpse of a sponsorship for alcohol. That is overexposure.

Ms Ennis: That is quite shocking when you say it out loud.

That is it from me. I just wanted to tease out that wee piece on advertising. That was very useful. Thank you, Pauline and Andrea.

The Chairperson (Ms P Bradley): No other member has indicated that they want to ask a question, so I will finish this part of the briefing. Thank you, Pauline and Andrea, not only for your submission to the inquiry but for being here with us today. It was a good discussion; you certainly brought up some

points that had not been brought up before. You might be interested to know that our next witness briefing is from the University of Stirling, so, after you hang up your call, you might want to log on to the NI Assembly live TV to watch it, as you mentioned them.

Ms Campbell: Yes, we would be interested in the results from its study.

The Chairperson (Ms P Bradley): Thank you very much, Pauline and Andrea.