

# Public health engagement in alcohol licensing in England and Scotland: the ExILEnS mixed-method, natural experiment evaluation

Niamh Fitzgerald<sup>1,2\*</sup> Matt Egan<sup>3,4</sup> Rachel O'Donnell<sup>1</sup>  
James Nicholls<sup>5</sup> Laura Mahon<sup>6</sup> Frank de Vocht<sup>4,7,8</sup>  
Cheryl McQuire<sup>4,7</sup> Colin Angus<sup>2,9</sup> Richard Purves<sup>10</sup>  
Madeleine Henney<sup>9</sup> Andrea Mohan<sup>10</sup> Nason Maani<sup>3</sup>  
Niamh Shortt<sup>2,11</sup> and Linda Bauld<sup>2,12</sup>

<sup>1</sup>Institute for Social Marketing and Health, University of Stirling, Scotland, UK

<sup>2</sup>SPECTRUM Consortium, UK

<sup>3</sup>Faculty of Public Health and Policy, London School of Hygiene & Tropical Medicine, London, UK

<sup>4</sup>NIHR School for Public Health Research, Tyne and Wear, UK

<sup>5</sup>Faculty of Health Sciences and Sport, University of Stirling, Scotland, UK

<sup>6</sup>Alcohol Focus Scotland, Glasgow, Scotland, UK

<sup>7</sup>Population Health Sciences, Bristol Medical School, University of Bristol, Bristol, UK

<sup>8</sup>NIHR Applied Research Collaboration West, Bristol, UK

<sup>9</sup>School of Health and Related Research, University of Sheffield, UK

<sup>10</sup>School of Health Sciences, University of Dundee, Scotland, UK

<sup>11</sup>School of GeoSciences, University of Edinburgh, Edinburgh, UK

<sup>12</sup>Usher Institute, University of Edinburgh, Edinburgh, UK

\*Corresponding author [niamh.fitzgerald@stir.ac.uk](mailto:niamh.fitzgerald@stir.ac.uk)

## Disclosure of interests

**Full disclosure of interests:** Completed ICMJE forms for all authors, including all related interests, are available in the toolkit on the NIHR Journals Library report publication page at <https://doi.org/10.3310/FSRT4135>.

**Primary conflicts of interest:** All authors have been supported by NIHR Public Health Research funding for the work reported in this manuscript. Laura Mahon is employed by Alcohol Focus Scotland. Nason Maani has previously been awarded an NIHR and Health Foundation Harkness Fellowship in Health Care Policy and Practice. Matt Egan, Niamh Fitzgerald and Rachel O'Donnell have received NIHR funding for other projects [NIHR128607 (ME); PD-SPH-2015 (ME); NIHR129885 (NF) NIHR131613 (RO)]. Frank de Vocht is partly funded by National Institute for Health Research Applied Research Collaboration West (NIHR ARC West) at University Hospitals Bristol NHS Foundation Trust. Linda Bauld held membership of the NIHR PHR Research Funding Board from 2015 to 2020, Frank de Vocht and Matt Egan are current members of the NIHR PHR Research Funding Board. Richard Purves has received payment from Alcohol Focus Scotland for research-related activities. Rachel O'Donnell and Richard Purves have both received payment from the University of Edinburgh for teaching-related activities. Niamh Fitzgerald and Rachel O'Donnell have provided expert testimony for the Irish Government, for

which payment was made to the University of Stirling. Niamh Fitzgerald, James Nicholls, Niamh Shortt, Colin Angus and Rachel O'Donnell are conducting an independent review of the liquor licensing system in Northern Ireland, funded by the Northern Ireland Department for Communities.

Published February 2024  
DOI: 10.3310/FSRT4135

## Plain language summary

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Public Health Research 2025; Vol. 13: No. 2  
DOI: 10.3310/FSRT4135

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# Plain language summary

Research finds that when alcohol is more easily available, because more places sell alcohol or have longer opening hours, people tend to drink more and harms tend to increase. In England and Scotland, 'Licensing Committees' in local governments have power over which venues are given a licence to sell alcohol legally. They make decisions based on local policy and on licensing goals set out in law. Licensing laws are slightly different in both nations, and health representatives are often involved in trying to influence local licensing decisions and policies, to reduce alcohol-related harms.

We aimed to find out what public health teams have done to influence alcohol licensing and whether their actions have affected alcohol-related harms. We recruited 39 public health teams (Scotland: 12; England: 27) and measured how active they were on licensing matters. We gathered detailed information (from interviews and papers) about their actions from 2012 to 2019, and asked them and others involved in licensing (including police, and local authority licensing teams and lawyers) about how their efforts might make a difference to harms. We gathered local data on alcohol-related health harms and crimes during 2009–19. We analysed whether any changes in these harms were related to the level of public health team activity, and explored differences between Scotland and England.

Public health teams across Scotland and England took varied approaches to engaging in alcohol licensing, and their work was often welcomed by others working in the licensing system. However, we found no clear relationship between the level of licensing-related activity that public health teams engaged in and the levels of alcohol-related health harms or crime. This may be because their actions make only a modest difference to licensing decisions, or because it may take longer than the study period for them to have a sizeable impact. Reducing alcohol-related harms through licensing may require strengthening national licensing laws and the powers of public health teams, including by addressing online sales and home deliveries.

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ISSN 2050-439X (Online)

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## This article

The research reported in this issue of the journal was funded by the PHR programme as award number NIHR135595. The contractual start date was in April 2017. The draft manuscript began editorial review in March 2022 and was accepted for publication in November 2022. The authors have been wholly responsible for all data collection, analysis and interpretation, and for writing up their work. The PHR editors and production house have tried to ensure the accuracy of the authors' manuscript and would like to thank the reviewers for their constructive comments on the draft document. However, they do not accept liability for damages or losses arising from material published in this article.

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