

Building SAFER

Communities: Preventing & Reducing Alcohol Harm



Building SAFER Communities in Ireland (2024–2026) Information Pack For Participating Communities

SAFER is a WHO technical package which aims to assist governments, national & local policy makers to reduce the harmful use of alcohol & related health, social & economic consequences.



www.alcoholforum.org



EVERY 10 SECONDS

a person dies from

alcohol-related causes

**including cancers, heart
disease, traffic crashes
and violence.**

SAFER
A WORLD FREE FROM ALCOHOL RELATED HARMS



World Health
Organization

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Foreword

In 2018, the World Health Organization launched the SAFER package of high impact alcohol policy measures to guide local, regional and national level policy makers in making smart policy decisions about how best to protect health, promote well-being, reduce alcohol harm and build SAFER communities. This new initiative will translate and deliver that SAFER package of measures here in Ireland for the first time. The development of this project has been supported by our colleagues in the Irish Community Action on Alcohol Network, in the HSE, the Gardai and the Department of Health who will support the roll out of the SAFER package of measures across 12 communities over the next three years. We will evaluate how effective this package of measures is in the Irish context and we will use and share the learning to shape community action responses to reducing alcohol harm in Ireland and beyond. We are so grateful for the guidance and support in the development of this project to a range of individuals and organisations; in particular the alcohol team in the WHO European Region office and global alcohol policy expert, Professor Emeritus Thomas Babor.

Thanks are also due to the Drugs Policy Unit in the Department of Health which has committed €300,000 to this project over the next three years as part of their new €1.5 million drug prevention and education funding scheme. This scheme supports Priority 1 arising from the mid-term review of the National Drugs Strategy, Reducing Harm, Supporting Recovery which commits to strengthening the prevention of drug and alcohol use and associated harms among children and young people in Ireland.

Over the coming months, we will work with our partners in the seven participating Regional and Local Drug and Alcohol Task Forces to establish local steering groups in each of the twelve participating communities. Involvement from a range of local statutory and voluntary stakeholders, including health services, the Gardai and local government will be a critical success factor in the work, and we look forward to supporting and to working with everyone.

While three people in Ireland die every day as a direct result of alcohol harm and while Ireland continues to have one of the highest rates of Fetal Alcohol Spectrum disorders in the world; there is a real need for us all to prioritise and work collectively to promote SAFER communities. Ireland's acceptance and normalisation of heavy alcohol consumption comes at a very heavy price. Only by working together to build SAFER communities can we change the dial.

Paula Leonard

CEO, Alcohol Forum Ireland
October 2023

National Drug Prevention and Education Funding Scheme

In May 2023, The Minister for Public Health, Wellbeing and the National Drugs Strategy Hildegard Naughton TD announced the successful projects for a new €1.5 million drug prevention and education funding scheme. This scheme supports Priority 1 arising from the mid-term review of the National Drugs Strategy, Reducing Harm, Supporting Recovery which commits to strengthening the prevention of drug and alcohol use and associated harms among children and young people in Ireland.

- Applications were received from Drug and Alcohol Taskforces, HSE/Community Healthcare Organisations (CHOs), academic bodies, and civil society. Following an assessment process by a panel of national and international experts, five initiatives were deemed successful:
- DASH Mobile Night-Time Economy Project (Cork Sexual Health Centre)
- E-SHIELD UCC (University College Cork)
- Building SAFER Communities through Evidenced Based Environmental Prevention at a Community Level (Alcohol Forum Ireland)
- Know the Score Evaluation (Health Service Executive, Trinity College Dublin)
- Clondalkin Prevention LAB (Clondalkin Local Drug and Alcohol Task Force)

Funding of up to €100,000 a year for three years has been granted to each of the five initiatives providing prevention programmes in school, third-level education, youth work and community-based settings.

Alcohol in Ireland: Sur, Where's The Harm?

More than 1,000 people die from alcohol-related deaths in Ireland every year, that's three people per day. There are very few families or individuals who have not been impacted negatively by alcohol use. However, alcohol is often celebrated and is so normalized as part of our culture that often we do not acknowledge the levels of harm that we experience in our communities. This normalization, supported by excessive marketing and widespread availability, makes dealing with those negative consequences a real challenge. At a population level, there is evidence that people in Ireland are at significant risk of injury, disease, early death and a range of family, social and economic harm because of alcohol use.

One in two people in Ireland drink at hazardous or harmful levels. An estimated 578,000 people have an alcohol use disorder (AUD), with 40% engaging in heavy episodic drinking monthly. Alcohol is the most commonly used substance among young people. Between 2002-2019, monthly heavy episodic drinking decreased from 74% to 56% among those aged 15-24, yet hazardous drinking was found to be commonplace for many (64%) and one in three young drinkers meet threshold for having an AUD.

Alcohol Forum Ireland

Alcohol Forum Ireland (AFI) is an independent national charity that provides support, information and services to individuals, families and communities impacted by alcohol and other drug harm, while also working at the wider levels to change Ireland's problematic relationship with alcohol.

We believe real change will only happen by working with communities to address the causes of alcohol harm in Ireland. Our approach is shaped by evidence and is informed by the expressed needs of the people and communities we work with across Ireland.

We are a movement-building organisation and our work is rooted in the principles of participation, collaboration and solidarity. We work with a diverse range of organisations across Ireland and are also part of the international movement to protect and advance the rights of individuals, families and communities to lives free from alcohol harm and the corrosive impact of alcohol industry strategies and products. We achieve change through mobilising, influencing, and building solidarity. Find out more on www.alcoholforum.org



Work at a National Level

Community Action on Alcohol

AFI is the lead and support organisation for Community Action on Alcohol working with local and regional Drug and Alcohol Task Forces. At a national level, the organisation is engaged in policy, advocacy and representational work to progress our strategic vision of building safer communities, preventing and reducing alcohol harm and ensuring that the voices of those who bear the burden of harm are key to the work.

Policy and Advocacy

AFI is part of national, European & global networks working to build safer communities free from alcohol harm. The provision of evidence-based supports and services alone will not outweigh the impact of cultural traditions, sophisticated marketing and the widespread availability of cheap alcohol in our communities. Over the past five years, AFI has become an important voice and stakeholder in alcohol policy, prevention and advocacy to prevent and reduce alcohol harm.

In 2022, through our work on community action on alcohol, we were, with Movendi International, founder members of the World Assembly on Community Action on Alcohol. We are active members of the Alcohol Health Alliance (UK) and the European Alcohol Policy Alliance. In Ireland, we provide community and lived experience perspectives on a range of policy making forums. Project representatives have appeared before Oireachtas Committees, provided political briefings, made submissions and campaigned on a range of issues.

The Irish Community Action on Alcohol Network (I-CAAN)

Community Action on Alcohol is a public health and evidence-based approach to reducing alcohol harms which harnesses the skills of a broad range of stakeholders. It requires community leadership and locally based action and is underpinned by community development principles. The environmental prevention model of community action on alcohol emerging across Ireland over the past number of years is guided by evidence and grounded in communities. The work is supported by Regional and Local Drug and Alcohol Task Forces and Alcohol Forum Ireland.



The national Community Action on Alcohol Programme aims to deliver on Action 1.1.1 of the National Drugs Strategy (2017), 'Reducing Harm, Supporting Recovery' which commits to 'promoting the use of evidence-based approaches to mobilising community action on alcohol'. The Programme evolved from a Pilot Project which was initiated as a three-way partnership between AFI, the Drugs Policy Unit of the Dept of Health and the HSE in 2015. A comprehensive national consultation which supported the development of 'Reducing Harm, Supporting Recovery' informed the need for the continued development and expansion of evidence-based community action on alcohol in Ireland. The importance of empowering communities to become actively engaged in addressing and reducing alcohol harm was recognized in both the National Substance Misuse Strategy (2012) and the Healthy Ireland Framework (2013).

i-mark: Supporting Independence from Alcohol Industry Influence

In March 2022, AFI and ICAAN launched the 'i-Mark initiative: Supporting communities free from alcohol industry influence'. The initiative was developed in direct response to concern at grass roots level about the growing and corrosive impact the practices and products of the alcohol industry were having on the health and well-being of communities across Ireland. The i-Mark was designed to make the complex and largely hidden strategies of the alcohol industry visible to ordinary people and to take the conversation out of the pages of journals and conference auditoriums down to community level.



Regional work in the Southern Border Counties

AFI has offices in Cavan, Donegal and Sligo and provides a range of front-line services to all individuals, families and communities affected by alcohol and other drug use in the southern border counties of Donegal, Sligo, Leitrim, Monaghan and Cavan, including

- Specialised Family Support for families impacted by alcohol and other drug misuse
- Monaghan and Cavan Youth Substance Support (MACYSS)
- Alcohol Related Brain Injury Rehabilitation and Recovery support service
- Training

Community Action on Alcohol

– A Global, European and national policy priority

Since 2015, the Alcohol Forum has been the lead organisation in Ireland supporting and encouraging communities to take action to prevent and reduce alcohol-related harm through community leadership, integrated local planning and a range of evidence-based actions. Since 2017, Alcohol Forum Ireland has supported the Irish Community Action on Alcohol Network as a mechanism to support learning, networking, sharing of good practice and collective working. ICAAN currently comprises representatives from 14 Regional and Local Drug and Alcohol Task Force areas.

The global strategy to reduce the harmful use of alcohol, which was endorsed by the Sixty-third World Health Assembly in May 2010 (resolution WHA63.13) and remains the only global policy framework for reducing deaths and disabilities due to alcohol consumption in their entirety – from mental health conditions and noncommunicable diseases (NCDs) to injuries and alcohol-attributable infectious diseases. Community action on alcohol was included in the Global Strategy in 2010 and is one of ten priority area of action:

- leadership, awareness and commitment
- health services' response
- drink-driving policies and counter-measures
- availability of alcohol
- marketing of alcoholic beverages
- pricing policies
- community action on alcohol
- reducing the negative consequences of drinking and alcohol intoxication
- reducing the public health impact of illicit alcohol and informally produced alcohol
- monitoring and surveillance.

[World Health Organisation – Global Alcohol Action Plan 2020–2030](#)

In 2022, the WHO Regional Office adopted and published the European Framework for Action on Alcohol, further strengthened the policy commitment to community action, identifying it as one of six thematic areas for action.

[World Health Organisation – European framework for action of alcohol 2022–2025](#)

Introducing SAFER

The World Health Organization (WHO), in collaboration with international partners, launched the SAFER initiative in 2018 alongside the United Nations third high-level meeting on prevention and control of noncommunicable diseases (NCDs). The objective of the initiative is to provide support for Member States in reducing the harmful use of alcohol by strengthening the ongoing implementation of the Global strategy to reduce the harmful use of alcohol¹ and other WHO and United Nations instruments – including WHO’s Global action plan for the prevention and control of NCDs² and the United Nations’ Sustainable Development Goals (SDGs) target 3.5 (i.e. Strengthen the prevention and treatment of substance abuse, including narcotic drug abuse and harmful use of alcohol).³

The technical package for the SAFER initiative focuses on five key alcohol policy interventions that are based on accumulated evidence of their impact on population health and their cost-effectiveness (see Table). Further, the SAFER initiative recognizes the need to protect public health-oriented policy-making from interference by the alcohol industry, as well as the importance of a strong and sustainable monitoring system to ensure accountability and track progress in the implementation of the SAFER interventions. SAFER is an acronym for the 5 most cost-effective interventions to reduce alcohol related harm:

Building SAFER Communities: Preventing & Reducing Alcohol Harm



Strengthen restrictions on alcohol availability

Enacting and enforcing restrictions on commercial or public availability of alcohol through laws, policies, and programmes are important ways to reduce harmful use of alcohol. Such strategies provide essential measures to prevent easy access to alcohol by young people and other vulnerable and high-risk groups.



Advance and enforce drink driving counter measures

Road users who are impaired by alcohol have a significantly higher risk of being involved in a crash. Enacting and enforcing strong drink-driving laws and low blood alcohol concentration limits via sobriety checkpoints and random breath testing will help to turn the tide.



Facilitate access to screening, brief interventions and treatment

Health professionals have an important role in helping people to reduce or stop their drinking to reduce health risks, and health services have to provide effective interventions for those in need of help and their families.



Enforce bans or comprehensive restrictions on alcohol advertising, sponsorship, and promotion

Bans and comprehensive restrictions on alcohol advertising, sponsorship and promotion are impactful and cost-effective measures. Enacting and enforcing bans or comprehensive restrictions on exposure to them in the digital world will bring public health benefits and help protect children, adolescents and abstainers from the pressure to start consuming alcohol.



Raise prices on alcohol through excise taxes and pricing policies

Alcohol taxation and pricing policies are among the most effective and cost-effective alcohol control measures. An increase in excise taxes on alcoholic beverages is a proven measure to reduce harmful use of alcohol and it provides governments revenue to offset the economic costs of harmful use of alcohol.

This SAFER technical package is aimed at government officials with responsibility for developing policy and action plans to reduce the harm done by alcohol. Given that alcohol-related harm extends beyond public health, and that preventing and reducing such harm requires multicomponent action that involves many stakeholders, the WHO designed SAFER as a set of measures which can be used in sectors other than health.

12 SAFER Communities In Ireland

Through a consultative process in 2022 involving all Regional and Local Drug and Alcohol Task Forces who comprise the membership of ICAAN, seven Task Forces expressed an interest in becoming part of the Building SAFER Communities: Preventing & Reducing Alcohol Harm project.

Across those seven participating Task Forces, twelve towns / areas were identified where the SAFER interventions will be delivered over the three years 2024- 2026. The areas identified are; Balbriggan, Ballymun, Canal Communities (Dublin), Celbridge, Cork, Drogheda, Leixlip, Letterkenny, Listowel, Monaghan, Sligo and Swords



SAFER Population Table:

Town	County	Population	Local lead organisation
Balbriggan	Dublin	24322	North Dublin Regional Drug and Alcohol Task Force
Ballymun	Dublin	18288**	Ballymun LDATF
Canal Communities	Dublin	16188***	Canal Communities Local Drug and Alcohol Task Force
Celbridge	Kildare	20601	South Western Regional Drug and Alcohol Task Force
Cork City	Cork	222526	Cork City Partnership & Cork Local Drug and Alcohol Task Force
Drogheda	Louth	44135	North East Regional Drug and Alcohol Task Force
Leixlip	Kildare	16733	South Western Regional Drug and Alcohol Task Force
Letterkenny	Donegal	22549	North West Regional Drug and Alcohol Task Force
Listowel	Kerry	4794	Southern Regional Drug and Alcohol Task Force
Monaghan (town)	Monaghan	7894	MaCYSS project AFI & North East Regional Drug and Alcohol Task Force
Sligo (town)	Sligo	20608	North West Regional Drug and Alcohol Task Force
Swords	Dublin	40776	North Dublin Regional Drug and Alcohol Task Force
Total		462,752	

* Population Data supplied by CSO from Census 2022 https://data.cso.ie/table/F1015_19th/07/23

** District Electoral Divisions (DED) A, B, C & D. DED E & F not included in SAFER.

*** Figure from CSO Census 2016

Project Implementation Plan

The Building SAFER Communities: Preventing & Reducing Alcohol Harm project will translate the SAFER package of high impact policy measures to practical multi component interventions for delivery at community level. A project team and local steering groups will oversee project delivery in 12 implementation sites. Buy in from and participation on these steering groups by a range of local stakeholders including HSE, Gardai, Tusla, community and voluntary organisations will be key to the success of the project across the implementation sites.

Objectives

1. To consolidate and build on the existing work, knowledge and capacity of Local and Regional DATF's to implement a community action on alcohol programme comprising multi component evidence-based measures modelled on SAFER⁴
2. To provide ongoing support, co-ordination and training to local steering groups and stakeholders in the implementation sites to ensure project implementation
3. To engage an independent academic partner/s to undertake an evidence review, baseline studies, a process evaluation on the implementation and an outcome evaluation which measures changes in the implementation sites
4. To develop a standardised and evidence-based model for community action on alcohol for Ireland and submit evidence to the xchange prevention registry⁵.

[Xchange prevention registry | www.emcdda.europa.eu](http://www.emcdda.europa.eu) last accessed 14.07.23

The proposed project will have four key work streams with achievable milestones and clear tasks designated to the different project partners.

Key Outputs

1. 15 key actions, under 5 SAFER headings, across 12 communities with a population of 462,752
2. Key outcome measures for environmental prevention at a community level identified.
3. Translation of SAFER policy recommendations into practice and adaptation to the local contexts complete.
4. Environmental prevention resources developed for Ireland including Responsible Server of Alcohol Training Manual, Community Guide to Alcohol Licensing Law (2nd ed), Building SAFER Communities Toolkit and website.
5. Robust independent evaluation and evaluation reports completed and a number (min 3) of research papers submitted for publication.
6. Evidence from this environmental prevention model in community settings submitted to the xChange prevention registry.

Key Outcomes

1. A decrease in the levels of exposure to unhealthy and risky behavioural opportunities achieved in the 12 implementation sites. Outcome measures identified in Year 1, changes measured in Year 3
2. Changes in attitudes and beliefs among key stakeholders and community members achieved; measured through evaluation (eg, parental attitudes, community support for public health measures)
3. Standardised model for community action on alcohol in Ireland developed and robustly evaluated, ensuring the programme can be scaled up
4. The translation and application of a SAFER at a community level will have been tested for the first time in a European context and a toolkit produced.

Workstreams

- **Workstream 1)** Project management and co-ordination
- **Workstream 2)** Resource development & training delivery
- **Workstream 3)** Delivery of interventions in the implementation sites
- **Workstream 4)** Research and Evaluation

The Scientific Evidence Base

In the alcohol research literature, availability theory contends that elevated levels of physical and social availability of alcohol increase both rates of consumption and consequent alcohol problems; contributing to the norms of both adult and underage consumption⁶. The latest revision of Alcohol No Ordinary Commodity (ANOC) provides a review of the scientific evidence of strategies and interventions designed to prevent or minimize alcohol-related harm⁷. ANOC provides a table of 69 interventions considered to be Best Practices, Good Practices or Ineffective Practices. The most effective strategies are those that decrease affordability and restrict the physical availability of alcohol. Restrictions on marketing are also effective. Drink-driving counter-measures, brief interventions with at-risk drinkers and treatment of dependent drinkers are effective in preventing harm in high-risk contexts and among groups of hazardous drinkers. In developing the SAFER package, the UN & WHO drew on the evidence presented in ANOC and this evidence base has informed the selection of interventions for this project.

This project has translated the high impact SAFER interventions and policy measures to practical interventions for delivery at the community level. The European Union Prevention Curriculum (EUPC) identifies the efficacy of community based multi component interventions as 'good'⁸. The SAFER project incorporates environmental interventions combined with some behavioural (screening and brief intervention) interventions and will ensure these are delivered in a coordinated and complementary manner.

Project Delivery at Local Level – Key Actions

The following key actions modelled on SAFER will be delivered across 12 sites.



Strengthening Restrictions on alcohol availability

1. Community and agency education on the relationship between availability, outlet density and harm
2. Undertaking alcohol outlet density studies which measure changes to number and type of alcohol licenses in the community over time⁹
3. Increasing capacity of local community and Gardai to engage in licensing (provision of licensing training and resources)
4. Promoting Garda uptake of the Certificate in Alcohol Licensing Law¹⁰
5. Strengthening restrictions on youth access to alcohol through increased monitoring and enforcement of laws relating to legal purchase age (age checks, test purchaser)
6. Delivery of Responsible Server training to strengthen restrictions on youth access to alcohol and serving to intoxicated persons¹¹



Advancing and Enforcing Drink Driving measures

7. Working with Gardai to ensure increased surveillance and enforcement of drink driving laws
8. Documenting & promoting community awareness of drink driving offences and of alcohol related fatal and non-fatal accidents



Facilitating Access to Screening, Brief Intervention, Referral and Treatment

In the local implementation sites the HSE will work with other stakeholders to lead on:

9. Delivery of SAOR training
10. Promotion of MECC among GP's / health services
11. Promotion of existing referral and treatment services



Enforcing Bans and comprehensive restrictions on alcohol advertising, promotion and sponsorship

12. Supporting increased community engagement in identifying & reporting breaches of the provisions of the Public Health Alcohol Act
13. Increasing awareness of parents, young people, other relevant stakeholders of the impact of alcohol marketing on young people



Raising Alcohol prices

14. Supporting communities to understand and support Minimum Unit Pricing (MUP)
15. Increasing awareness of the evidence of the positive impact of MUP

Evaluating, Monitoring and Reporting

A project team has been formed comprising both national and local stakeholders and the project lead will facilitate ongoing communication between all relevant stakeholders and the independent monitoring and evaluation team. In addition, leading global alcohol policy expert, Professor Tom Babor will advise on all elements of research and evaluation as the project develops. A year seminar has been planned with will allow for knowledge dissemination and for exchange of best practices between implementation sites as the project develops.

The research element of the project will be tendered (in Y1) to an academic partner with expertise in alcohol related research and programme development / implementation. Three Irish Universities and a number of academics outside of Ireland have been consulted in the development of the proposed research design and there is positive interest in the project. The methodology will involve a number of distinct parts. A number of articles based on the qualitative and quantitative data collected as part of the evaluation research will be submitted for peer review in year 3. The aim is to generate robust evidence for submission to the xchange prevention registry.

Process evaluation

A process evaluation will assess the communities' readiness for change and the enablers and barriers to successful implementation of the WHO's SAFER technical package. To ensure all aspects of implementation are examined the implementation science framework of Burke et al (2009) will be used to guide the work. To capture these enablers of implementation a series of methods will be used. Key stakeholders will be interviewed, a documentary analysis of meeting minutes etc will be analysed to assess implementation, finally non-participant observation at key meetings will be conducted to objectively assess the enablers and any barriers to implementation.

Initial needs assessment

This will include an online community survey across implementation sites, to be completed in year 1 and repeated in year 3.

Evidence review

In year one, an evidence review will provide the evidence base for development a set of outcome indicators for community action on alcohol in Ireland. The SAFER interventions are designed to change a wide variety of outcomes so, depending on the initial needs assessment and evidence review, many different outcomes may be considered. Outcome measures at the community population level may include objective measures such as local alcohol related crime figures, local hospital emergency department figures etc. such measures can then be compared with measures prior to the implementation of the initiative.

Outcome evaluation

In Year 3, will focus on an outcome evaluation to determine if the programme is having an effect on the target population.

Local and National Steering Groups

Establishing SAFER Communities Steering Groups

At the local level in each of the 12 SAFER Communities, the lead Task Force will support the formation of a local inter agency steering group to oversee the project over the next three years. To deliver effectively on the SAFER actions, membership of this group should comprise of, but not be limited to representation from each of the following :

- Local / Regional Drug & Alcohol Task Force
- Local government
- An Garda Siochana
- Justice / probation
- HSE
- Tusla
- Local community & voluntary sector organisations
- Youth organisations
- People with lived experience of alcohol harm (eg people in Recovery, family members etc.)

Establishing High Level Project Steering Group

A high level project steering group will be established and convened by the end of 2023, which will meet approximately four times per year across the three years of the project. At least one of these meetings will be in person (likely in Dublin) and there will be one 'sharing the learning' seminar for each year of the project.

This steering group will include representatives of the following:

- Alcohol Forum Ireland
- An Garda Siochana
- HSE National Alcohol Programme
- A representative of each of the seven participating Task Forces
- Professor Emeritus Thomas Babor (external academic expert)

The WHO European Regional Office will also advise on and disseminate learning from the project and may, on occasion be in attendance at meetings of the project steering group (but will not be members)

References

1. Global strategy to reduce the harmful use of alcohol. Geneva: World Health Organization; 2010 (https://www.who.int/substance_abuse/publications/global_strategy_reduce_harmful_use_alcohol/en/, accessed 15 August 2019).
2. Global action plan for the prevention and control of noncommunicable diseases 2013–2020. Geneva: World Health Organization; 2013 (<https://www.who.int/nmh/publications/ncd-action-plan/en/>, accessed 15 August 2019).
3. Sustainable Development Goal 3: Ensure healthy lives and promote well-being for all at all ages. Target 3.5: Strengthen the prevention and treatment of substance abuse, including narcotic drug abuse and harmful use of alcohol. Adopted at the United Nations Sustainable Development Summit, New York, 25–27 September 2015. New York (NY): United Nations; 2015 (<https://sustainabledevelopment.un.org/sdg3>, accessed 15 August 2019).
4. SAFER – alcohol control initiative (who.int) last accessed 14.07.23
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6. Edwards G, Anderson P, Babor TF, Casswell S, Ferrence R, Giesbrecht N, Godfrey C, Holder HD, Lemmens P, Mäkelä K, Midanik LT, Norström T, Österberg E, Romelsjö A, Room R, Simpura J, Skog O: Alcohol Policy and the Public Good. 1994, New York, Oxford University Press
7. Thomas F. Babor, Sally Casswell, Kathryn Graham, Taisia Huckle, Michael Livingston, Esa Österberg, Jürgen Rehm, Robin Room, Ingeborg Rossow, and Bundit Sornpaisarn. Alcohol: No Ordinary Commodity, Third Edition. 2022, Oxford University Press
8. European Prevention Curriculum (europa.eu), p. 57
9. It is not currently possible to measure alcohol outlet density as it relates to consumption patterns, violence or ambulance call outs in Ireland due to the limited number of small area data sets available. ICAAN will continue to advocate for improved small area data sets and this project will explore what local level information can be collected from Gardai relating to ‘hot spots’ for late night alcohol related assaults, anti-social behaviour etc.
10. AFI & ATU Donegal have developed a Specialised Cert in Alcohol Licensing Law, now promoting 3rd iteration
11. Actions 5 & 6 are interventions included in the STAD model of environmental intervention, included in the xchange best practice portal as ‘possibly beneficial’ STAD – (STockholm prevents Alcohol and Drug problems): an environmental strategy in nightlife environments focussing on the improvement of the compliance of alcohol legislation regarding overserving and age limits. | www.emcdda.europa.eu

