

Violent Crime

Just under half of all violent offences are committed under the influence of alcohol. Around half of all alcohol related violent crime takes place in hot-spot locations in the City Centre and in town centres around the County and Rutland.

Violent crime (both domestic and non-domestic) is higher during the summer months and lower during the winter months. Violent crime peaks during the early hours (midnight to 3am) of Saturday and Sunday morning (about the same level for both days). For domestic violent crime the peak is much less pronounced (i.e. there are also evening peaks throughout the week) and is spread over a longer period of time.

A higher volume of violent crime is non-domestic, though domestic crime is believed to be under-reported to a greater extent than non-domestic. The highest volume category of violent crime committed under the influence of alcohol is Actual Bodily Harm (ABH) followed by harassment.

The vast majority (95%) of violent offences result in no injury or a minor injury. Serious/fatal injuries are most likely following a domestic violent offence where the perpetrator was under the influence of alcohol.

Introduction of the Licensing Act

Nationally and locally, the introduction of the Licensing Act in November 2005 shows no evidence of any rise in the number of offences recorded by the police.

Anti-social behaviour

A local survey carried out at the end of 2006 shows that around a quarter (26%) of people in Leicestershire think that people being drunk or rowdy is a problem in their local area. This is down by around two-fifths from 43% in 2003. Those who perceived there to be a high-level of generally anti-social behaviour, almost halved over this three-year period from 31% of residents in 2003 to just 17% of residents in 2006.

Drink Driving and Road Traffic Accidents

Just over 4% of all road traffic accidents in LLR are alcohol related. There has been a significant reduction in the number of all road traffic accidents, and those which were alcohol related since 2002. There is no seasonal trend to alcohol related road traffic accidents.

The casualty rate per accident is similar for alcohol related and non-alcohol related accidents. However, alcohol-related accidents are more likely to result in serious or fatal injuries.

Around two-thirds of alcohol related road traffic accidents involve male drivers between the age of 18 and 35.

Fatal Fires

In around a third of all fatal fires the person was under the influence of alcohol at the time of the fire. This may have contributed to the cause of the fire or an individual's ability to raise the alarm, fight the fire or escape once a fire has started.

Alcohol Related Harm

A statistical profile for Leicester, Leicestershire & Rutland: Executive Summary

Executive Summary

Most people, around 80% of the adult population, are either non-drinkers or low-risk drinkers. This summary is largely concerned with the remaining 20% of the adult population who are considered alcohol misusers.

Alcohol Misusers

National estimates applied to the local population indicate that in Leicester, Leicestershire & Rutland (LLR) there are around 750 severely dependent drinkers, over 3,000 moderately dependent drinkers, 31,500 harmful drinkers; and, 125,000 hazardous drinkers. This suggests that there are around 160,000 people in LLR who would benefit from some kind of intervention or treatment.

Men and women

A higher proportion of men drink alcohol compared to women. Nationally, the proportion of men and women drinking above daily benchmarks has stayed the same since 1998. For men this pattern is reflected locally (in the East Midlands) but there has been an increase in consumption for women in the region. Married or co-habiting people drink more often, whilst single people drink more heavily.

Black and Minority Ethnic groups

Apart from Irish respondents, both men and women in minority ethnic groups were less likely than the general population to drink. In Leicester, half of those from ethnic minorities said that they had never drunk alcohol in their lives, compared with only 5% of White British people.

Consumption in some ethnic minority populations is higher than others. Alcohol consumption is increasing in second and subsequent generation black and minority ethnic (BME) groups. Local data suggests that Black and Indian Sikhs are drinking more, whereas Indian Hindus, Pakistanis and Bengalis are not showing any signs of increased consumption. The pattern of higher consumption amongst men than women in the general population is also reflected in BME groups.

Lesbian, Gay, Bisexual and Transgender

Young gay men and their heterosexual counterparts begin drinking at a similar age and drink similar amounts but drink intake declines amongst heterosexual men around age 30 whereas in the gay and bisexual communities alcohol intake remains high throughout their lives. A local survey found that alcohol, smoking and illegal drug consumption among lesbian gay and bisexual people in Leicester are all above the national average.

Homelessness, rough sleepers and street drinkers

The precise nature of the relationship between alcohol consumption and homelessness is unclear. Dependence can lead to homelessness and alcohol problems may develop as a result of being homeless. Up to half of rough sleepers are alcohol reliant and around a third have a combination of mental health and substance misuse problems. Some groups have exceptionally high alcohol consumption—average weekly alcohol intake based on a survey of street drinkers in Leicester was 206 units a week (compared to the recommended intake of 22 units a week, or the upper limit for hazardous drinkers of 40-50 units).

Young People

Generally speaking, older people drink more regularly, whilst younger people drink more heavily. National data shows that the proportion of young people who drink alcohol increases from around 3% of 11 year olds to 46% of 15 year olds. Historically boys were more likely to drink than girls but that was reversed, for the first time, in 2005 (due to falling prevalence for boys, rather than an increased prevalence for girls). Alcohol consumption in 2005 was roughly double that of fifteen years ago. However, most of this increase took place in the 1990s and consumption has remained fairly consistent since 1998.

There is a correlation between young people drinking alcohol and committing crime—generally criminal damage, violent crime and public order offences. Young people obtain alcohol from the home or from off licences, especially supermarkets, rather than from pubs or clubs. Alcohol plays an extremely big role as a gateway to drug use amongst young people. With the exception of cannabis, most other drug use/experimentation involves alcohol consumption. Alcohol is also the main gateway to blood borne diseases and sexual transmitted infections (STIs).

Adult Offenders

Around half of offenders offending is linked wholly or in part to their misuse of alcohol. This relates to over two thousand offenders currently under the supervision of the Leicestershire & Rutland Probation Area (this includes Leicester). Alcohol is more of an influence in the offending behaviour of men than of women. There is little difference in the influence of alcohol on offending behaviour across different age groups but there are large differences in the role of alcohol across ethnic groups. A much higher proportion of offending behaviour is linked to alcohol amongst white offenders than for any other group.

Mortality

Alcohol misuse can be directly linked to deaths from certain types of disease. In 2004, just over four thousand people died in England and Wales from alcoholic liver disease—up by over a third since 1999. In LLR there were just under 500 alcohol related deaths over the five year period of 2001 to 2005. Of these, around two-thirds (300) were the result of alcoholic liver disease. In LLR deaths from alcoholic liver disease amongst men outnumber those amongst women by around two-to-one. (North West Leicestershire is the exception to this where more women than men die from this condition.)

Deaths from chronic liver disease and cirrhosis begins amongst the 30s age group and peaks in the late 40s and 50s.

Hospital admissions

Hospital admission rates for alcohol-specific causes are higher amongst residents of Leicester than in the County or Rutland. Admission rates have increased by around 2.5 times for men and 3 times for women over the last five years. The majority of admissions are for mental and behavioural disorders due to alcohol (77% of male admissions and 65% of female admissions).

Access to Treatment

Of the nine regions of England, the East Midlands had the fourth highest level of hazardous/harmful alcohol use but the lowest number of alcohol treatment agencies. A clear disparity exists between the size of the alcohol problem and the existence of local services to be able to effectively deal with it.