



# The Association of Directors of Public Health Consultation Response

## Alcohol - minimum unit pricing - continuation and future pricing: consultation

### Objectives and Scope

The Scottish Government are consulting on whether Minimum Unit Pricing (MUP) should be continued as part of the range of policy measures in place to address alcohol related harm, and, in the event of its continuation, the level the minimum unit price should be set going forward.

### About ADPH

ADPH is the representative body for Directors of Public Health (DsPH), and is a collaborative organisation, working in partnership with others to strengthen the voice for public health, with a heritage which dates back over 160 years. ADPH works closely with a range of Government departments, including UKHSA and OHID as well as the four CMOs, NHS, devolved administrations, local authorities (LAs) and national organisations across all sectors to minimise the use of resources as well as maximise our voice.

ADPH aims to improve and protect the health of the population by:

- Representing the views of DsPH on public health policy.
- Advising on public health policy and legislation at a local, regional, national and international level.
- Providing a support network for DsPH to share ideas and good practice.
- Identifying and providing professional development opportunities for DsPH.

## Response to questions

Q1: Do you think Minimum Unit Pricing (MUP) should continue? [Multiple choice]

- Yes
- No

Yes

Q2: If MUP continues, do you agree with the proposed Minimum Unit Price of 65 pence? [Multiple choice]

- Yes
- No

Yes

Q3: We invite comments on:

- the Scottish Ministers' proposal to continue MUP, and
- the proposed MUP of 65 pence

Please comment below

### **MUP should be continued**

Alcohol misuse is the biggest risk factor for death, ill-health, and disability among 15–49-year-olds, and the fifth biggest risk factor across all ages.<sup>1 2</sup> In 2021, there were 9,641 deaths from alcohol-specific causes in the UK, a 27.4% increase from 2019. Scotland had the highest rates of alcohol-specific deaths in 2020.

Covid-19 and lockdown measures have shifted drinking habits to inside the home.<sup>3</sup> Since 1987, alcohol has become 72% more affordable in the UK. Therefore, MUP should continue in Scotland to reduce alcohol consumption as well as alcohol related harm and health inequalities.

ADPH supports the evidence review of alcohol policy which concludes that reducing the affordability of alcohol through taxation and MUP is the most effective and cost-efficient way of reducing alcohol harm, which is also recommended by WHO.<sup>4</sup> Emerging evaluation findings from Scotland and Wales also show that MUP is effectively targeting the heaviest drinkers. Public Health Scotland published an independent report in 2023 showing that MUP has had a positive impact on health outcomes, including addressing alcohol-related health inequalities.<sup>5</sup>

The effect of MUP on alcohol use and alcohol-related harm in Scotland is evident. In the first year the 50p MUP was implemented in Scotland, alcohol sales fell to their lowest level since records began in 1994. In 2018, Scotland experienced its lowest alcohol consumption rate in 25 years.<sup>6</sup> There has been a 7.6% reduction in weekly alcohol purchases by households, mostly from heavier drinking households.<sup>7</sup> MUP has also been associated with a 13.4% drop in alcohol-specific deaths and a 4% reduction in alcohol-specific hospitalisations, predominantly seen amongst most socioeconomically deprived groups.<sup>8</sup>

MUP would have an imperceptible impact on the cost of alcohol consumption for lower risk drinkers and would not lead to changes in pub prices. This policy can also help tackle health inequality, as a modelling study conducted by Sheffield University indicates that 82% of the reduction in deaths would be amongst

routine and manual workers.<sup>9</sup>

### **The Proposed MUP of 65 pence**

ADPH supports an increase in the MUP of alcohol in Scotland to 65 pence.

Affordability is a key factor in alcohol consumption, and measures to control alcohol prices can reduce alcohol intake and therefore related harm. Consumption is negatively correlated with price, and research suggests a 1% increase in alcohol prices yield a 0.5% decrease in consumption.<sup>10</sup> As a price-based policy which has used a fixed cash price since its initial introduction, the impact of a 50 pence MUP will decrease over time as the real time value of its level decreases due to inflation. This has been multiplied due to unprecedented levels of inflation over the past two years, as well as the Covid-19 pandemic. Increasing the level of MUP is necessary to ensure it remains an effective price-based policy, staying in line with inflation, reducing its affordability, and thus limiting alcohol related harms.

Additionally, when compared to a MUP of 60 pence per unit (ppu), modelling carried out by the University of Sheffield Alcohol Research Group has shown a 65ppu MUP could avert an additional 60 deaths in the first year of implementation and 774 fewer hospital admissions. The number of hazardous drinkers is estimated to fall by 15,742 and the number of harmful drinkers fall by 11,403, compared to 60ppu.<sup>11</sup>

## References

- <sup>1</sup> NHS Digital, Statistics on Alcohol, England 2021. 2022. <https://digital.nhs.uk/data-and-information/publications/statistical/statistics-on-alcohol/2021/part-3> [Accessed December 2022].
- <sup>2</sup> Public Health England, The public health burden of alcohol and the effectiveness and cost-effectiveness of alcohol control policies. 2016. [https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment\\_data/file/733108/alcohol\\_public\\_health\\_burden\\_evidence\\_review\\_update\\_2018.pdf](https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/733108/alcohol_public_health_burden_evidence_review_update_2018.pdf) [Accessed December 2022].
- <sup>3</sup> Institute of Alcohol Studies, Consumption. 2022. <https://www.ias.org.uk/factsheet/consumption/> [Accessed December 2022].
- <sup>4</sup> Public Health England, The public health burden of alcohol: evidence review. 2016. <https://www.gov.uk/government/publications/the-public-health-burden-of-alcohol-evidence-review> [Accessed January 2023].
- <sup>5</sup> Public Health Scotland, Evaluating the impact of minimum unit pricing for alcohol in Scotland: A synthesis of the evidence. 2023. <https://publichealthscotland.scot/publications/evaluating-the-impact-of-minimum-unit-pricing-for-alcohol-in-scotland-a-synthesis-of-the-evidence/> [Accessed August 2023].
- <sup>6</sup> Giles L, & Robinson M, Monitoring and Evaluating Scotland's Alcohol Strategy (MESAS). 2019. <https://www.healthscotland.scot/media/2587/mesas-monitoring-report-2019.pdf> [Accessed January 2023].
- <sup>7</sup> Alcohol Focus Scotland, Evaluation and other evidence on the impact of Minimum Unit Pricing. 2020. <https://www.alcohol-focus-scotland.org.uk/media/440012/mup-evaluation-evidence-may-2020.pdf> [Accessed January 2023].
- <sup>8</sup> Wyper G, Mackay D, Fraser C et al. Evaluating the impact of alcohol minimum unit pricing on deaths and hospitalisations in Scotland: a controlled interrupted time series study. 2023. [Accessed May 2023]
- <sup>9</sup> Holmes J, et al, Effects of minimum unit pricing for alcohol on different income and socioeconomic groups: a modelling study, *The Lancet*, 2014, 383 (9929), 1655-1664.
- <sup>10</sup> World Health Organisation, No place for cheap alcohol: the potential value of minimum pricing for protecting lives, 2022. <https://iris.who.int/bitstream/handle/10665/356597/9789289058094-eng.pdf?sequence=1> [Accessed October 2023]
- <sup>11</sup> Scottish Government, Alcohol - minimum unit pricing - continuation and future pricing: interim business and regulatory impact assessment, 2023. <https://www.gov.scot/publications/interim-business-regulatory-impact-assessment-minimum-unit-pricing-mup-continuation-future-pricing/> [Accessed October 2023]