



## SCOTTISH GOVERNMENT CONSULTATION

### Improving Scotland's Health: Minimum Unit Pricing of Alcohol

#### About Us

NHS Health Scotland is a national Health Board working with public, private and third sectors to reduce health inequalities and improve health.

Our corporate strategy, [A Fairer Healthier Scotland](#), sets out our vision of a Scotland in which all of our people and communities have a fairer share of the opportunities, resources and confidence to live longer, healthier lives.

Our mission is to reduce health inequalities and improve health. To do this we influence policy and practice, informed by evidence, and promote action across public services to deliver greater equality and improved health for all in Scotland.

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We are content for our response to be made available to the public and to be contacted in the future.

#### Key Messages:

- Evidence shows that the more affordable alcohol is, the more likely we are to buy and consume it.
- The University of Sheffield has estimated that in the first 20 years after implementation, a minimum unit price of 50 pence per unit could result in over 2,000 fewer deaths from alcohol-related causes and nearly 39,000 fewer hospital admissions in Scotland.
- We agree with the Scottish Government that a minimum price of 50 pence per unit represents a proportionate response to tackling harmful and hazardous alcohol consumption in Scotland.

## Response to the Scottish Government's invitation for comments on the proposed minimum price of 50 pence per unit

NHS Health Scotland welcomes the introduction of minimum unit alcohol pricing on 1<sup>st</sup> May 2018.

Evidence shows that the more affordable alcohol is, the more likely we are to buy and consume it<sup>1</sup>. In 2016, more than half (51%) of all alcohol sold in the off-trade in Scotland was sold at below 50 pence per unit<sup>2,3</sup>. In the same year, on average, enough alcohol was sold in Scotland for every adult to exceed the recommended low-risk drinking guidelines (no more than 14 units per week) by 44% (20.2 units per adult aged 16 years and over)<sup>3</sup>. Therefore, many people in Scotland are consuming alcohol at even greater levels.

Data from the Scottish Health Survey (2014/15 combined) shows that the heaviest 10% of drinkers consumed 46% of all self-reported alcohol consumption<sup>3</sup>. Amongst heavier drinkers, consumption levels are higher for those on lower incomes; for those who exceed the guideline, mean weekly consumption is highest in the lowest income group at 49.3 units per week, compared with 26.6 to 34.2 units per week in the other income groups<sup>3</sup>.

<sup>1</sup> Rabinovich L, Brutscher PB, de Vries H, Tiessen J, Clift J, Reding A. The affordability of alcoholic beverages in the European Union: understanding the link between alcohol affordability, consumption and harms. RAND Europe Technical Report; 2009 [https://www.rand.org/content/dam/rand/pubs/technical\\_reports/2009/RAND\\_TR689.pdf](https://www.rand.org/content/dam/rand/pubs/technical_reports/2009/RAND_TR689.pdf)

<sup>2</sup> Estimates of the volume of alcohol sold at different prices differ depending on the source of the data; this is discussed later in this response.

<sup>3</sup> Giles L, Robinson M. Monitoring and Evaluating Scotland's Alcohol Strategy: Monitoring Report 2017. Edinburgh: NHS Health Scotland; 2017 <http://www.healthscotland.scot/publications/mesas-monitoring-report-2017>





There is strong and consistent evidence to suggest that the heaviest drinkers are more likely to buy cheaper, stronger alcohol<sup>4,5,6</sup>.

Introducing a minimum unit price for alcohol aims to reduce alcohol consumption amongst those who are drinking alcohol that is cheap relative to its strength. Modelling done by the University of Sheffield has estimated that introducing a minimum unit price of 50 pence per unit could bring greater reductions in alcohol consumption amongst the heaviest drinkers, and particularly those who are living in poverty, when compared to moderate drinkers<sup>7</sup>. The impact on moderate drinkers, on the other hand, is estimated to be small.

As alcohol consumption varies across Scotland, so does the harm it causes to health. In 2015, rates of alcohol-related death were around 6 times higher and alcohol-related hospital admission nearly 9 times higher, in the most deprived areas of Scotland when compared to the least deprived<sup>3</sup>. The University of Sheffield has estimated that in the first 20 years after implementation, a minimum unit price of 50 pence per unit could result in over 2,000 fewer deaths from alcohol-related causes and nearly 39,000 fewer hospital admissions in Scotland. Again, the greatest reductions in harm to health are estimated to be amongst the heaviest drinkers, particularly those on low incomes<sup>7</sup>. In Canada, increases in the minimum price for alcohol (under a different system to that being implemented in Scotland) have been associated with reductions in alcohol consumption<sup>8</sup>, hospital admissions<sup>9</sup> and deaths<sup>10</sup>.

<sup>4</sup> Holmes J, Meng Y, Meier P, Brennan A, Angus C, Campbell-Burton A, Guo Y, Hill-McManus D, Purshouse R. Effects of minimum unit pricing for alcohol on different income and socioeconomic groups: a modelling study. *Lancet* 2014; 383: 1655–64

<sup>5</sup> R. Griffith, M O'Connell and K. Smith, 'Proposed minimum unit price for alcohol would lead to large price rises', IFS Briefing note BN222, <https://www.ifs.org.uk/publications/10253>

<sup>6</sup> Ludbrook A, Petrie D, McKenzie L, Farrar S. Tackling Alcohol Misuse: Purchasing Patterns Affected by Minimum Pricing for Alcohol. *Appl Health Econ Health Policy* 2012; 10 (1): 51–63

<sup>7</sup> Angus C, Holmes J, Pryce R, Meier P, Brennan A. (2016) Model-based appraisal of the comparative impact of Minimum Unit Pricing and taxation policies in Scotland. An adaptation of the Sheffield Alcohol Policy Model version 3. SoHARR, University of Sheffield.

<sup>8</sup> Stockwell T, Auld C, Zhao J, Martin G. Does minimum pricing reduce alcohol consumption? The experience of a Canadian province *Addiction*, 2011; 107, 912–920



These effects have been found to be largest in areas with populations on low incomes.

The modelling done by the University of Sheffield<sup>11</sup> has shown that a minimum unit price greater than 50 pence per unit could lead to even greater reductions in alcohol consumption and associated harm to health. However, the balance between price and the possible unintended consequences of implementing a minimum unit price, effectively increasing the price of alcohol, should also be considered. Some of the potential unintended consequences that have been suggested include increased cross-border purchasing, an increase in the illicit trade and production of alcohol, substitution for potentially more harmful or illegal substances, increased acquisitive crime, such as burglary and robbery, and a presumed negative impact on some parts of Scotland's alcohol industry. Therefore, the most effective minimum unit price is one that sees a reduction in harmful and hazardous alcohol consumption but minimises the risk of unintended, negative effects.

Different sources estimate different proportions of alcohol sold at below 50 pence per unit. A recent report by the Institute for Fiscal Studies<sup>12</sup> (IFS) estimates that around 68% of alcohol units sold in the off-trade in Scotland are sold at below 50 pence per unit, with an average price of 47 pence per unit. Work done by NHS Health Scotland<sup>13</sup> estimates that around 51%, 17 percentage points less than the IFS study, is sold at below 50 pence per unit, with an average price of 53 pence per unit. The IFS estimates that, assuming an increase to the expected 50 pence per unit floor, those units currently

<sup>9</sup> Stockwell T, Zhao J, Martin G, Auld C, Macdonald S, Vallance K, Treno A, Ponicki W, Tu A, Buxton J. Minimum Alcohol Prices and Outlet Densities in British Columbia, Canada: Estimated Impacts on Alcohol-Attributable Hospital Admissions. *American Journal of Public Health*, 2013; 103:11, 2014-2020

<sup>10</sup> Zhao J, Stockwell T, Martin G, Macdonald S, Vallance K, Treno A, Ponicki W, Tu A, Buxton J. The relationship between minimum alcohol prices, outlet densities and alcohol-attributable deaths in British Columbia, 2002-09. *Addiction* 2013; 108, 1059-1069

<sup>11</sup> Angus C, Holmes J, Pryce R, Meier P, Brennan A. (2016) Model-based appraisal of the comparative impact of Minimum Unit Pricing and taxation policies in Scotland. An adaptation of the Sheffield Alcohol Policy Model version 3. SchARR, University of Sheffield.

<sup>12</sup> R. Griffith, M O'Connell and K. Smith, 'Proposed minimum unit price for alcohol would lead to large price rises', IFS Briefing note BN222, <https://www.ifs.org.uk/publications/10253>

<sup>13</sup> Giles L, Robinson M. Monitoring and Evaluating Scotland's Alcohol Strategy: Monitoring Report 2017. Edinburgh: NHS Health Scotland; 2017 <http://www.healthscotland.scot/publications/mesas-monitoring-report-2017>



priced at below 50 pence per unit would rise by an average of 35%. These two estimates are produced using data from different sources and with different methodologies; each will have its own strengths and limitations<sup>12,13</sup>. Regardless of the source, the data shows that a considerable amount of alcohol is sold at below 50 pence per unit in Scotland and in greater quantities than in England and Wales. In Scotland in 2016, 3.4 litres of pure alcohol per adult was sold through the off-trade at below 50 pence per unit, compared to 2.7 litres per adult in England & Wales<sup>13</sup>. Much of this is accounted for by the sale of low-priced spirits: 2.3 times more vodka was sold below 50 pence per unit in Scotland than in England and Wales<sup>13</sup>.

Scotland also experiences greater levels of alcohol-related harm. In 2015, alcohol-related death rates were 50% higher in Scottish women and 67% higher in Scottish men than the equivalent rates seen in England and Wales<sup>13</sup>. We would therefore agree with the Scottish Government that a minimum price of 50 pence per unit represents a proportionate response to tackling harmful and hazardous alcohol consumption in Scotland. Recognising that the proportion of alcohol sold below 50 pence per unit in Scotland has fallen since the legislation was first passed in 2012 and the impact that inflation will have on affordability, a process of reviewing the level at which the minimum unit price is set should be considered, to ensure it remains effective but proportionate.

NHS Health Scotland has been tasked by the Scottish Government with leading the independent evaluation of the impact of minimum unit pricing. This evaluation will provide empirical evidence on any positive or negative impacts of minimum unit pricing on a number of health, social and economic outcomes following its implementation in Scotland.

