

What do people with experience of alcohol dependence think about alcohol pricing policy?

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Lauren McMillan¹, Audrey Buelo¹, Laura Fenton², Allison Ford¹ & John Holmes²

¹ University of Stirling

² University of Sheffield

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BACKGROUND

Alcohol pricing and tax policies are among the most effective and well-evidenced options for tackling alcohol-related harms¹. However, it is less clear how effective they are in reducing alcohol consumption among people with alcohol dependence. Some commentators argue that those with dependence will obtain alcohol whatever the cost and may adopt other harmful behaviours, such as using illicit drugs, shoplifting or reducing spending on essentials such as food or heating. A small body of evidence suggests people with dependence share these concerns and, in some cases, experience financial difficulties when policy changes make alcohol less affordable²⁻⁷. However, we still know relatively little about what people with alcohol dependence themselves think about the merits of pricing policies or other alcohol policy options.

This briefing note reports on findings from a study evaluating alcohol pricing policies in Great Britain⁸. These include Scotland's minimum unit pricing (MUP) policy - originally introduced in 2018 and subsequently increased in 2024 - and reforms and increases to alcohol taxes introduced across the UK in 2023. The research aimed to find out what people with experience of alcohol dependency think about alcohol pricing policies and their perceived impacts, as well as exploring the other policy options they would recommend.

OUR RESEARCH

We interviewed people with current or recent experience of alcohol dependence and who were in financial hardship. Participants were recruited from non-NHS alcohol services in England and Scotland, and included 14 men and 8 women, with ages ranging from 30 to 63 years old. We asked participants about their experiences of increasing alcohol prices, what they thought about MUP and recent changes to alcohol taxes in the UK, as well as their wider views on alcohol policy.



KEY FINDINGS

Views on alcohol pricing policies

In line with previous research³⁻⁵, we found the effects of policies that increase alcohol prices were exacerbated by people's existing financial issues and compounded by the recent cost-of-living crisis. These combined pressures meant participants reported experiencing high levels of financial stress and employed a range of strategies to be able to afford alcohol including switching to cheaper products, spending less on essentials, and borrowing money.

Participants nonetheless held nuanced views on pricing policies. Most did not view such policies as beneficial to people experiencing entrenched alcohol dependence because they did not feel the cost of alcohol was a motivating factor in seeking treatment or recovery. However, some still saw benefits from increasing alcohol prices for others in the general population. They also reflected on how they might have benefited themselves if pricing policies had been implemented before they became dependent on alcohol.

"I'm not being negative I'm just being real for me. I wouldn't even look at [the price]. I would pay whatever it cost, regardless, you know. But for some other people, yeh it's good because it'll maybe reduce their intake and stuff. But for me, being in that addiction, I wouldn't care less..."

- Scottish participant

"I think if you're in the right place with the fact that you can manage how much your intake is and how much your alcohol is, then [price] plays a massive factor and a lot of people including myself would say "Nah, something has got to give. I'd prefer to have a roof over my head than a drink in my hand." So yeah, get them early, if you'd have got me early and I'd have thought that process out, then it might have been a different story for me right now. I might not be here."

- English participant

A handful of participants, mostly from Scotland, said that they would be more supportive of pricing policies if a proportion of the money generated was invested in alcohol treatment and recovery services. Many participants viewed these services as a lifeline but highlighted that they are difficult to access due to confusing processes, limited availability and a lack of awareness among those who need them.

"I think the money should go into trying to better people's lives. Maybe detox services so people can go in and get detoxed off alcohol. Sort of advertising these places... Even a place like this, recovery communities. I was thirty-eight years of age and I'd never heard of these..."

- Scottish participant

A few participants in Scotland expressed positive views of MUP as they thought it would tackle 'gut-rot' high-strength ciders, which they believed to be more harmful to health.

Support for other alcohol policies

When asked what other government policies would be helpful for people with alcohol dependence, participants supported a variety of measures, including:

1

Greater restrictions on alcohol advertising

Participants told us that seeing alcohol advertising was a trigger for cravings for those in recovery. They also noted that advertisements increased around certain times of year that were already challenging for participants.

“I mean at Christmas... it was everywhere... they had all these Christmas offers. You’re like, oh I’m trying to forget about drink... don’t push it through my throat.”

- Scottish participant

2

Strengthening restrictions around alcohol availability

In addition to general concerns about the widespread availability of alcohol, participants describe how home delivery services made alcohol more easily accessible. Nearly half of our sample had used home delivery services from supermarkets or ‘Dial-a-booze’ lines to purchase alcohol during periods of heavy use. They said it exacerbated their dependence by allowing them to buy alcohol no matter their level of inebriation.

*“Then I started getting it delivered [supermarket delivery and also Dial A Booze] which was just ideal. You know I didn’t even need to leave my house, and I remember thinking again that’s the worst thing that could have happened, because **alcoholics don’t need to leave their house, they can sit in their house and drink themselves to death.**”*

- Scottish participant



3

Reducing the visibility of alcohol in shops and supermarkets

This was a particular concern for people in England which has looser rules than Scotland on where alcohol can be displayed in shops. Participants described alcohol as highly visible and that prominent placement (e.g. at shop entrances or around people queuing at check-outs) made alcohol difficult to avoid. People with active dependence found this high visibility was a persistent trigger for cravings.

*“You can't go shopping without seeing it, it's there in your face. I mean the shop I go into, where I live, as soon as I walk in through the door... **the first thing that hits you is the alcohol.** Now if they put it out of the way, then you know tucked it away in one corner, then people might not notice it as much...”*

- English participant

4

More education and awareness on the harms of alcohol

Many participants discussed how they were not aware of the harms of alcohol when they started drinking. As a result, they would like to see more education offered in schools and more government campaigns to shift cultural norms around the acceptability of alcohol.

*“They could put a lot more... awareness of it about, because you don't really see [information about alcohol-related harm] anywhere, do you? **I don't walk around the streets and see pictures of what drinking too much beer can do to you.** Or even on labels, they don't put it on labels do they, like they do with cigarettes?”*

- English participant



POLICY IMPLICATIONS

Our findings suggest that people with alcohol dependence have nuanced views on alcohol pricing policies. Many saw only limited direct benefits from policies such as MUP, at least without the enhanced provision of alcohol treatment and recovery services. However, some could see benefits of increasing alcohol prices for people in the general population and reflected on how it might have helped them if pricing policies had been implemented before they became dependent on alcohol. Participants also identified a range of policies around alcohol availability, marketing and health promotion campaigns that they would also support.

The views of people with alcohol dependence suggest policymakers should consider the following points for alcohol policy:

- 1 Consider financial impacts alongside pricing policy**
When introducing alcohol pricing policies, including MUP, policymakers should consider how to avoid exacerbating financial pressures faced by people with alcohol dependence.
- 2 Invest tax revenues in treatment and recovery**
Alcohol pricing policies should be introduced alongside improved support for people experiencing alcohol problems and governments should consider investing any additional tax revenues from these policies into treatment and recovery services.
- 3 Strengthen restrictions on alcohol advertising**
Strengthen restrictions on alcohol advertising and wider marketing activity (e.g. through statutory codes or comprehensive bans).
- 4 Regulate alcohol home delivery services**
Introduce tighter regulations for alcohol home delivery services, including safeguards to limit high-frequency purchasing or delivery to people who are already intoxicated.
- 5 Reduce retail visibility of alcohol**
Reduce the visibility and prominence of alcohol in retail settings (e.g. by restricting alcohol to designated or structurally separated areas of shops).
- 6 Improve public awareness and health education**
Improve public awareness and education on alcohol-related harms (e.g. through mass media campaigns and mandatory health warning labels).

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Contact & Further Information

For further information about this research, please contact:

Lauren McMillan, University of Stirling — lauren.mcmillan@stir.ac.uk

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