Dear Committee colleagues,

## Letter of support from ADPH North East for the continuation and uprating of MUP in Scotland

We are writing to outline our support for the proposed continuation of Minimum Unit Price in Scotland and the planned uprating to at least 65p per unit. As partners based in the North East of England – the region which suffers from the worst alcohol harms in England – we have watched the positive impact of MUP in Scotland with huge interest and admiration. At a time when alcohol deaths in England and especially here in the North East are at an all-time high, we need similarly proactive and enlightened public health policies to reduce alcohol harm and protect the most vulnerable in our communities.

We are hugely supportive of Scottish Ministers' proposal to continue and uprate MUP and agree with the level of at least 65 pence per unit. The evidence is clear that the policy has achieved its aim of reducing alcohol-related harm by both reducing population consumption and by targeting the consumption of people drinking at higher levels. It has also contributed to reducing alcohol-related health inequalities. Any negative unintended consequences have not been prevalent or typical.

At a time when life-expectancy is reducing in some areas – particularly more deprived communities, including those in the North East - we urgently need policies which address the key drivers of non-communicable diseases, like cancer and cardio-vascular disease. MUP has been shown to be such a policy and whilst it should be part of a wider package of measures to reduce alcohol consumption and harm, it must remain an essential cornerstone of the strategy in Scotland.

An MUP of 65p would make good inflation and increase the benefits of the policy. Compared to increasing to 60p per unit, an increase to 65p per unit would reduce consumption by an estimated 2.7%, leading to an estimated 60 fewer deaths and 774 fewer hospital admissions in the first year alone.<sup>i</sup> There would also be a reduction in NHS hospital costs of £5m in the first 5 years, rising to £16.4m over 20 years. The most deprived groups would benefit the most from an increased MUP, experiencing the largest reductions in health harms.<sup>ii</sup>

An uprating of MUP to a value of at least 65p would therefore ensure that the full benefits of the policy were maintained over time – though we would also support linking the MUP level to inflation or affordability – which could potentially be monitored by an independent agency – in order to ensure maximum longer-term impact.

The positive health impact of the policy, compared to what would have happened without MUP, can be seen both in annual death statistics before the pandemic struck, and when comparing the rise in alcohol deaths in Scotland to England, since. In the first full year after MUP was implemented, there was a 10% reduction in alcohol-specific deaths and a small reduction in hospital admissions from liver disease.<sup>iii iv</sup> Changing drinking habits during the pandemic, combined with reduced access to services, led to a tragic rise in alcohol-specific deaths in Scotland between 2019 and 2021. However, this was substantially lower than the rise experienced in England and particularly the rise in the North East, which suffers from the highest rates of alcohol-specific deaths in England and which experienced the greatest increase in the rate of alcohol-specific deaths between 2019 and 2021.<sup>v</sup>

With alcohol harms at record levels, it is scandalous that in this region, it is still possible to buy 3 litre bottles of super-strength cider with more than a week's worth of units for around £5. The evidence from Scotland is clear – MUP works by targeting the cheapest, most harmful alcohol and we hope that the Scottish Government will see fit to continue and uprate MUP, as part of its enlightened evidence-based approach to public health.

Yours sincerely,

Alice Wiseman

On behalf of the Association of Directors of Public Health North East

<sup>&</sup>lt;sup>i</sup> Note that 60p and 65p in 2023 prices are 50p and 55p respectively in 2019 prices, as set out in Angus, C. et al. (2023). <u>New modelling of alcohol pricing policies, alcohol consumption and harm in Scotland: An adaptation of the Sheffield Tobacco and Alcohol Policy Model - Final Report.</u> University of Sheffield.

<sup>&</sup>lt;sup>ii</sup> Note that 60p and 65p in 2023 prices are 50p and 55p respectively in 2019 prices, as set out in Angus, C. et al. (2023). <u>New modelling of alcohol pricing policies, alcohol consumption and harm in Scotland: An adaptation of the Sheffield Tobacco and Alcohol Policy Model - Final Report.</u> University of Sheffield.

<sup>&</sup>lt;sup>III</sup> National Records of Scotland (2020). *Alcohol-specific deaths (new National Statistics definition) registered in Scotland, 1979 to 2019.* 

<sup>&</sup>lt;sup>iv</sup> Public Health Scotland (2020). <u>Alcohol related hospital statistics</u>

<sup>&</sup>lt;sup>v</sup> Office for National Statistics (2023). <u>Alcohol-specific deaths in the UK: registered in 2021.</u>