

## Briefing: The impact of MUP on children and young people's own drinking and related behaviour

### Introduction

Minimum unit pricing (MUP) came into effect in Scotland on 1 May 2018. From that date every drink containing alcohol has a minimum price based on the amount of pure alcohol it contains. The minimum price for alcohol in Scotland is currently set at 50 pence per unit (ppu).

A number of research studies are being undertaken to assess the impact of MUP in Scotland. The MUP Evaluation Portfolio contains studies to assess compliance with and implementation of MUP, its impact on the alcohol market in Scotland, changes in alcohol consumption, and changes in health and social harms.

One of the requirements of the evaluation is to assess the impact of MUP on protecting children and young people from harm. This harm can come from young people's own alcohol consumption, or from exposure to others drinking.

While there is evidence from other countries that pricing policies reduce consumption and related harm at a population level, there is less evidence of the impact on children and young people. The Sheffield Alcohol Policy Modelling (SAPM) of the impact of MUP which was used to provide estimates of the effects of MUP at 50ppu in Scotland does not include estimates of impact on those under 18 years.\* It is

---

\* Angus C, Holmes J, Pryce R et al. Model-based appraisal of the comparative impact of Minimum Unit Pricing and taxation policies in Scotland. Sheffield: ScHARR, University of Sheffield; 2016.

therefore important to gain some understanding of the potential impact of MUP on young people's own drinking and related behaviour from additional research.

This briefing summarises the findings of a study on the impact of MUP on children and young people's own alcohol consumption and related behaviour, undertaken by Iconic Consulting. The briefing reflects on what these findings mean and then outlines what other evidence on the impact of MUP on children and young people will be available in time.

A study looking at the impact of MUP on children and young people's experience of harm from family members or carers drinking will be published later in 2020.

## What is this study about?

The aim of this qualitative work was to understand if and how the young people (13–17 years old) in the study had experienced MUP, and how their drinking and related behaviour changed or not in response to any price changes. The study was designed to capture and better understand the lived experiences of the young people who took part in the study. It did not aim to provide an assessment of the impact of MUP that is generalisable to all young people aged 13–17 years old across Scotland.

## What the researchers did

The researchers undertook individual, paired or small group interviews with 50 young people aged 13–17 years who reported that they had consumed alcohol before May 2018 when MUP was implemented and had drunk alcohol since then. The young

people were asked about their alcohol consumption and related behaviour, and any changes that they had observed or experienced since MUP in:

- the price or availability of the alcohol they drink
- how they get the alcohol they drink, what and how much they drink
- their experience of harm after drinking
- what influences their alcohol use.

The researchers also interviewed 21 staff working with young people, including those involved in the study. These interviews asked workers about their observations of young people's experiences of the topics above.

## What the researchers found

### Price and availability

Many of the products favoured by the participants were, on average, already being sold above 50ppu before MUP was introduced. The young people involved in the study reported that they had observed a change in the price of some alcohol products after May 2018 when MUP was introduced. The observation of a price rise for some products may reflect local price variation before MUP or young people's recollection. The young people were most aware of changes in price of the products they consumed, and where they themselves contributed to the cost of the alcohol they were drinking. Only some of the young people in the study had observed changes in the availability of certain products.

## How they got the alcohol they drink, what and how much they drink

There were no examples of changes in how young people in the study obtained their alcohol following the introduction of MUP, or where they obtained their alcohol from.

Examples of how some young people obtained alcohol included asking strangers, older friends or siblings to buy alcohol for them, from parents at family events or for the young people to drink with friends, and by using fake IDs to buy alcohol. The young people in the study did not consider money (or lack of) as a barrier to buying alcohol. None described stealing, and although some workers suspected some alcohol was obtained through theft, they did not think it was MUP related. They described a range of money sources (e.g. pocket money, gifts and college grants) and strategies for affording the alcohol they wanted (e.g. saving money by skipping school lunches and not buying train tickets).

There were some reports of changes in what young people drank, how often and how much (both increases and decreases). The reasons for these changes were mostly due to getting older, changes in tastes or tolerance, changes in the money available (more or less money) or in personal circumstances such as friendship groups or entering a training programme.

The young people who reported that their favoured drink had increased in price tended to carry on drinking it because they said the price rise was not much and they could still afford it. There were some examples of young people changing to a different alcoholic drink, but price was often not the main reason young people gave for this. A few young people with a limited budget reported that price increases had contributed to them drinking less.

## Experience of harms from drinking alcohol

The study did not find any reports of changes since the introduction of MUP in the extent or nature of alcohol-related harms experienced by the young people in this study.

The young people discussed a range of alcohol-related harms that they have experienced. This included antisocial behaviour, personal safety, sexual relationships, health, the ability to function in school, college or work, and drug use. The young people in this study felt that these alcohol-related harms were an acceptable consequence of their drinking choices. There was no evidence to indicate MUP had increased or reduced exposure to these harms.

Workers reported their concerns about alcohol-related harms among the young people they work with, including anger issues, young people using alcohol to deal with mental health issues, and alcohol affecting attendance at school. They did not believe these harms had changed as a result of MUP.

## What influenced alcohol use among the young people?

The young people and workers in the study highlighted a range of factors that influenced young people's alcohol use. The most important factors were the influence of friends, parents and carers. Other important influences included alcohol as part of their identity, mental health, and situations such as house parties or feeling bored. Positive occasions (e.g. celebrations, having fun with friends) and negative life circumstances (e.g. challenging family situations, bereavement) were also important influences.

The introduction of MUP was not seen as an important factor in the drinking choices of the young people in the study, or by the workers.

## What this study means

The main MUP-related finding of this study is that overall the young people who participated, while unaware of MUP, were aware of price changes in the alcohol they drank. This was especially true where they bought the alcohol themselves or contributed to the cost, but on the whole they did not report changing what or how much they drank in response to price alone. Most of the products the young people reported drinking experienced little or no price change as a result of MUP. Price was only one factor that influenced what and how much young people drank. The young people did describe changing their alcohol consumption in response to things like getting older, changes in tastes or tolerance, changes in the money available or in personal circumstances such as friendship groups or entering a training programme. The study provides much broader findings about young people's alcohol consumption and related behaviour not related to MUP.

The strength of the study is that it collected qualitative information from young people themselves about their alcohol consumption and related behaviour and whether and how MUP has influenced this. The study deliberately sampled young people aged 13–17 years who reported that they had consumed alcohol before and after MUP was introduced to ensure that young people were able to talk about their lived experience of drinking alcohol and how any increase in the price of the alcohol they drank changes this. The study involved young people of varying age, gender, socio-economic status and geographic location. It also targeted some groups which previous research has shown are more likely to be consuming alcohol, such as those with experience of being in care, those who have a history of offending or substance use and LGBTQI young people. The researchers did this to make sure they reached young people experiencing different circumstances that could contribute to our understanding of the potential impact of MUP.

However, the qualitative nature of this study, together with the targeting of young people who drink, including from groups that the literature suggests have a higher prevalence of alcohol consumption, means that the findings are not representative of, or generalisable to, young people aged 13–17 years in Scotland. The study design excludes those young people who do not drink, either because they do not start or because they stop drinking. The Scottish Schools Adolescent Lifestyle and Substance Use Survey (SALSUS) provides useful context on drinking prevalence among young people (13 and 15 year olds) in Scotland. The survey consistently finds that a minority of 13 and 15 year olds report drinking in the last seven days, and a minority of 13 year olds report that they have ever had an alcoholic drink. The SALSUS finds that, despite a recent increase in reporting of ever having had an alcoholic drink and having drunk alcohol in the last seven days, trends in alcohol consumption among young people have been in decline overall. There is no survey data on drinking in 16 and 17 year olds to reflect the ages of the older young people included in this study. This age group is covered in the much wider 16–24 age group in the Scottish Health Survey, with 85% in this group reported as drinkers in 2018.

## **What do we already know about the impact of MUP on children and young people?**

This is the first study in the evaluation looking at the impact of MUP on children and young people.

## **What other evidence on the impact of MUP on children and young people is still to come?**

A number of other studies will provide evidence on the impact of MUP on children and young people. In the NHS Health Scotland funded portfolio of studies:

- We will monitor routine sources of data on alcohol consumption of children and young people. This will include any further reports from SALSUS, which covers 13 and 15 year olds. The evaluation will monitor these surveys and what they report about alcohol use, but we think it will be difficult to use these data to detect if there has been a difference after MUP has been implemented because of challenges with the methods used, given current declining trends in alcohol consumption in young people, infrequent data points, lack of robust control group and uncertainty about the future of the SALSUS survey.
- We will also monitor the Scottish Health Survey, which reports on alcohol consumption in the 16–24 year age group. It is not possible to determine consumption for 16 and 17 year olds only.
- The children and young people: Harm from others study will provide qualitative evidence from practitioners working with family members in addiction services. This study will report later in 2020.
- The harmful drinking study will include discussion of the impact of MUP on family life in the interviews with drinkers and with those who have a harmful drinker in their family. This study will report in 2021.
- The health harms study will include data on alcohol hospitalisations and deaths for those under 15 years and between 16–24 years, although numbers are likely to be small so it will be difficult to detect change. This study will report in 2023.

A separately funded study, led by the University of Aberdeen, will look at the impact of MUP on expenditure on food and nutritional quality. The sample for this study includes families with children.

Full details of NHS Health Scotland's evaluation plan can be found here:

[www.healthscotland.scot/health-topics/alcohol/evaluation-of-minimum-unit-pricing](http://www.healthscotland.scot/health-topics/alcohol/evaluation-of-minimum-unit-pricing)

## Conclusions

The study on the impact of MUP on children and young people's own drinking and related behaviour found that, on the whole, MUP was not perceived to impact on participants' alcohol consumption or related behaviour of participants either positively or negatively. The participants in the study were largely price aware but price is only one factor that influences children and young people's alcohol consumption.

Furthermore, many of the products favoured by participants were not affected by MUP. The study provides important contextual understanding about these young people's experiences of and relationship with alcohol, and of how MUP impacts on their drinking experiences. Within this context, it is clear that MUP is only one factor within the complex lives and choices of the young people in this study who experience a range of challenging life circumstances.