





Evaluating the impact of Minimum Unit Pricing in Scotland on people who are drinking at harmful levels

Technical appendix

7 June 2022

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Study conducted on behalf of Public Health Scotland as part of the wider MESAS evaluation of Minimum Unit Alcohol Pricing.

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1. Background

This appendix provides additional methodological detail related to the work packages (WPs) described in the main report. Specifically, it provides additional detail on data collection, preparation and analysis procedures for the quantitative component of WP1, which necessitates repeating some material from the main report. It also provides additional results for this component, and supplementary methodological information for WP2.

2. Work package 1

2.1. Study design

WP1 used a difference-in-difference design for which we collected three waves of repeat cross-sectional data in two countries. The three waves of data covered the period before and after the introduction of MUP in Scotland on 1 May 2018, as described below:

- Wave 1: November 2017 April 2018 (pre-implementation);
- Wave 2: August 2018 February 2019 (3–9 months post-implementation);
- Wave 3: November 2019 March 2020 (18–22 months post-implementation).*

The three-wave difference-in-difference design allowed us to explore shorter- and longer-term effects of the introduction of MUP in Scotland and to compare any changes in our Scottish data with data from comparison sites in Northern England (hereafter England), where MUP did not apply. We used a repeat cross-sectional design rather than following a group of individuals over time because of the challenges of retaining respondents in a longitudinal study and of disentangling the effects of MUP from the effects of treatment on respondents.

2.2. Site selection

We collected data from 10 geographic areas. Six of these were NHS health board areas in Scotland, covering Glasgow, Edinburgh, Aberdeen, Dumfries and Galloway, the Highlands and Dundee. The remaining four were NHS Health Trust areas in England, covering Sheffield, Stockport, Newcastle and Liverpool. These areas

^{*} Data collected terminated in March 2020 due to COVID-19 restrictions.

provide geographic and socio-demographic diversity and insight into particular points of interest, including the Scottish border with England and remote or rural areas. They also enabled timely data collection by allowing our research team to draw on established relationships with key personnel working in potential research sites.

In total, 16 sites in Scotland and four sites in England participated, with between one and five sites in each geographic area. These included inpatient and communitybased alcohol and drug services (including detoxification services and a low threshold methadone programme), gastroenterology and liver services, and general practices. Members of the research team visited each service prior to and throughout each wave of data collection to explain the purpose and requirements of the study to staff and to seek their assistance in identifying and referring eligible people to the study.

2.3. Sampling

2.3.1. Target sample

At each wave, we aimed to recruit 200 people across the sites in Scotland and 80 people across the sites in England. The following three considerations informed these sample sizes: (i) pragmatic considerations given the available time and resources; (ii) the research design; and (iii) statistical power calculations.

Pragmatic considerations: the study faced important time constraints at wave 1 that limited the achievable sample size. Data collection was delayed until November 2017, when the alcohol industry's six-year legal challenge to MUP concluded. This meant the research team had only six months to arrange and complete wave 1 data collection before the introduction of the policy. The team anticipated particular challenges in England, as we had fewer established links with potential research sites to facilitate rapid data collection. We also anticipated challenges in smaller recruitment sites, where the number of new presentations to treatment limited the pace of data collection.

Research design considerations: within WP1, it is difficult to separate changes in the composition of the treatment population from changes in the behaviours of that population. This means the study did not aim to provide unequivocal estimates of the impact of MUP specific outcomes, akin to the output of a randomised control trial.

Instead, it sought to identify changes among people presenting to treatment that would be large enough to indicate potentially significant public health benefits or harmful outcomes from the policy that would not be detected by other studies within the evaluation programme. Such large effects would also be more likely to arise within the qualitative data presented in Chapter 4 of the main report and would therefore be easier to attribute to either MUP or other explanations.

Statistical power calculations: the above considerations informed the power calculations. We selected a sample size of 200 people per wave in Scotland. This would allow detection of a 20% reduction in consumption from a mean of 200 units per week (i.e. a large effect within a sample of achievable size), in line with estimated consumption levels in previous similar research. The research team and PHS, in consultation with advisory group members, decided not to include England within the power calculations given the study's principal focus on Scotland, the mixed methods approach to attributing changes to MUP and the anticipated difficulties in collecting wave 1 data in England. As such, the English sample size of 80 people per wave largely reflects the pragmatic considerations above and the resources available after accounting for data collection in Scotland.

We recruited from a range of services and aimed for a sample that was broadly similar to treatment populations described in previous research in terms of age and gender. However, we did not seek a representative sample in terms of the proportion of respondents attending different treatment types or by geographic region due to the difficulties of achieving this within the time and resources available.

We are not able to report a response rate for recruitment as it is not possible to determine how many people the study was mentioned to. This is because recruitment occurred across multiple sites, each with their own ways of working and recording client interactions, with additional variations in practices due to the multiple staff involved at each site.

2.3.2. Recruitment procedures

Recruitment procedures varied across services and over time to fit in with working practices at each site. The basic model was for service providers to mention the study to potentially eligible clients and if the person was interested, to refer them to the researcher for more information.

To be eligible, people needed to be over 18 years' old, able to understand and speak English and assessed by the service provider as probably alcohol dependent. Service providers typically used the Alcohol Use Disorders Identification Test (AUDIT) to assess probable dependence.¹ AUDIT is a widely used 10 item tool with good reliability and validity when used to screen for alcohol problems. The tool scores individuals responses to give a total ranging from 0 to 40 and we used a threshold of 16+ as an indicate of probable dependence. This threshold was taken from the Adult Psychiatric Morbidity Survey,² which provides National Statistics data for England. The survey considers AUDIT scores of 16 to 19 as indicative of 'harmful drinking and/or mild dependence' and scores of 20 or above as indicative of 'probable dependence'. The AUDIT was also part of the interview schedule and in a small number of cases (N=6) interviewers noted that participants did not meet the threshold of 16+. We did not anticipate this inconsistency when providing guidance to interviewers and we therefore removed these cases from the sample prior to analysis.

Treatment service staff excluded those judged unable to provide informed consent (e.g. due to cognitive impairment). We also asked service providers to focus on referring clients who had entered treatment within the last four weeks, as they were likely to have more recent experiences of alcohol purchasing and consumption. However, in practice, some services had more long-term than new clients and we included long-term clients who could recall their most recent typical drinking pattern (i.e. details of their typical alcohol purchasing and consumption prior to entering treatment). Other variations in referral procedures between sites and over time included some services arranging appointments for structured interviews with interested eligible clients and others suggesting 'good days' for the research team to be present in the service for recruitment (e.g. on clinic days).

Upon referral, the researcher at each site provided respondents with detailed written and verbal information about the study and gave them the opportunity to ask questions before deciding whether to take part. Interviews were then conducted in a suitable space within the service. This was usually a private interview room, but we conducted some bedside interviews with respondents in in-patient settings. In these instances, interviewers made additional efforts to ensure the respondent was comfortable being interviewed in that setting and gave informed, voluntary consent to do so.

Interviews involved completion of a researcher-administered structured interview. This took approximately 45 minutes to complete, although interview lengths varied substantially between about 30 minutes to over two hours. Respondents were offered a £10 voucher for one of two major high-street retailers in recognition of their time and expertise.

2.3.3. Recruitment challenges

The project faced a number of challenges during recruitment. At wave 1, there was a very narrow window for data collection due to the short lead time for the project and the need to secure ethics and governance approvals. This meant we could not commence data collection at our first recruitment sites until November 2017, six months before the planned implementation for MUP in May 2018. As separate governance approvals were required for each NHS area, meeting these requirements meant the delays in starting data collection carried on into 2018 for some recruitment sites. Governance approvals were already in place at later waves and this meant we largely met our wave 2 recruitment targets. However, the start of the COVID-19 pandemic meant we ended wave 3 recruitment in March 2020 and did not meet our recruitment targets in Scotland or England.

Recruitment procedures for research in treatment settings are also highly labour intensive. For example, we found that sites varied in the extent to which the nominated contact person was available to respond to our requests to commence data collection, necessitating multiple contact attempts at some services. Once contact was established, interviewers sought information about which days would be best to travel to the site for recruitment but, even with prior discussion, they often found few or no eligible respondents available when they attended the service. There were also some changes in staffing of services between waves, including in some instances the departure of 'project champions'. This necessitated the establishment of new relationships between the research team and service staff.

As stated above, we did not seek to achieve a representative sample and our previous experience in conducting research in treatment settings taught us that, within sites, sampling is often better characterised as 'convenience' rather than 'representative' or 'random'. Nonetheless, we intended to monitor location of recruitment, age and gender throughout data collection in order to achieve consistency in the demographic profile of the sample across waves. However, the challenges above meant this was only possible to a limited degree and resulted in differences in the composition across waves.

These factors all contributed to features of the achieved sample. Specifically, they contributed to the project not reaching its recruitment targets at waves 1 and 3, to the proportion of respondents recruited in each site changing across waves, and to an increase across waves in the proportion of respondents in Scotland recruited from inpatient settings, where recruitment is generally easier. We present the characteristics of the sample in the next section and then describe weighting procedures for addressing these

2.3.4. Achieved sample

Table 2.1 shows the final sample size numbers and proportion of respondents for each location, service type and setting after these exclusions. Table 2.2 presents the same information by sex, age and AUDIT score.

In comparison to our target of 200, in Scotland, we recruited 170 respondents at wave 1, 190 respondents at wave 2 and 123 respondents at wave 3. In England, where we had a target of 80 interviews per wave, we recruited 85 respondents at wave 1, 86 respondents at wave 2 and 52 respondents at wave 3. These figures do not include four wave 1 respondents and three wave 2 respondents in Scotland who we excluded from the sample as they did not meet the AUDIT threshold of 16+ or they provided insufficient data to be included in the analysis. They also do not include one wave 2 respondent in England who provided insufficient data.

In Scotland, we recruited the greatest proportion of respondents in Glasgow at all waves, followed by Edinburgh. However, the proportion recruited in Glasgow increased from 41.2% at wave 1 to 65.0% at wave 3 while remaining relatively stable in Edinburgh and decreasing in some other locations, notably Aberdeen and the Highlands. Despite these changes the demographic characteristics and AUDIT scores of the sample were largely similar across waves.

Country and area	S:W1	S:W2	S:W3	S:W1	S:W2	S:W3	E:W1	E:W2	E:W3	E:W1	E:W2	E:W3
	Ν	Ν	Ν	%	%	%	Ν	Ν	Ν	%	%	%
Scotland	170	190	123	100.0	100.0	100.0	-	-	-	-	-	-
Glasgow	70	92	80	41.2	48.4	65.0	-	-	-	-	-	-
Edinburgh (Lothian)	39	35	25	22.9	18.4	20.3	-	-	-	-	-	-
Aberdeen (Grampian)	30	30	6	17.6	15.8	4.9	-	-	-	-	-	-
Dumfries & Galloway	18	16	7	10.6	4.7	5.7	-	-	-	-	-	-
Highlands	11	8	1	6.5	8.4	0.8	-	-	-	-	-	-
Dundee (Tayside)	2	9	4	1.2	4.2	3.3	-	-	-	-	-	-
England	-	_	-	-	-	-	85	86	52	100.0	100.0	100.0
Sheffield	-	-	-	-	-	-	36	25	8	42.4	29.1	15.4
Stockport (Pennines)	-	-	-	-	-	-	20	16	5	23.5	18.6	9.6
Newcastle (Northumberland)	-	-	-	-	-	-	17	21	19	20.0	24.4	36.5
Liverpool	-	-	-	-	-	_	12	24	20	14.1	27.9	38.5
Service type and	S:W1	S:W2	S:W3	S:W1	S:W2	S:W3	E:W1	E:W2	E:W3	E:W1	E:W2	E:W3
setting	Ν	Ν	Ν	%	%	%	N	Ν	Ν	%	%	%
Alcohol and drug	126	154	107	74.1	81.1	87.0	81	77	47	95.3	89.5	89.5
Community or outpatient	98	74	43	57.6	38.9	35.0	81	77	47	95.3	89.5	89.5
Inpatient	28	80	64	16.5	42.1	52.0	0	0	0	0.0	0.0	0.0

Table 2.1: Sample size and distribution in each country and wave by geographic location of service and service type

Gastroenterology or liver	36	33	16	21.2	17.4	13.0	4	9	5	4.7	10.5	10.5
Community or outpatient	8	12	0	4.7	6.3	0.0	4	9	5	4.7	10.5	10.5
Inpatient	28	21	16	16.5	11.1	13.0	0	0	0	0.0	0.0	0.0
General practitioner	8	3	0	4.7	1.6	0.0	0	0	0	0.0	0.0	0.0

Key: S: Scotland; E: England; W: wave; N: number of cases.

Sex	S:W1 N	S:W2 N	S:W3 N	S:W1 %	S:W2 %	S:W3 %	E:W1 N	E:W2 N	E:W3 N	E:W1 %	E:W2 %	E:W3 %
Male	118	128	80	69.4	67.4	65.0	61	50	35	71.8	58.1	67.3
Female	52	62	43	30.6	32.6	35.0	24	36	17	28.2	41.9	32.7
Age group	S:W1 N	S:W2 N	S:W3 N	S:W1 %	S:W2 %	S:W3 %	E:W1 N	E:W2 N	E:W3 N	E:W1 %	E:W2 %	E:W3 %
29 or less	11	10	3	6.5	5.3	2.4	10	11	3	11.8	12.8	5.8
30–39 years	37	33	28	21.8	17.4	22.8	19	19	19	22.4	22.1	36.5
40–49 years	47	61	33	27.6	32.1	26.8	28	25	15	32.9	29.1	28.8
50–59 years	59	54	39	34.7	28.4	31.7	23	21	13	27.1	24.4	25.0
60+ years	16	32	20	9.4	16.8	16.3	5	10	2	5.9	11.6	3.8
AUDIT score	S:W1 N	S:W2 N	S:W3 N	S:W1 %	S:W2 %	S:W3 %	E:W1 N	E:W2 N	E:W3 N	E:W1 %	E:W2 %	E:W3 %
16–19	6	11	6	3.5	5.8	4.9	5	7	3	5.9	8.1	5.8
20–40	164	179	117	96.5	94.2	95.1	80	79	49	94.1	91.9	94.2

 Table 2.2: Sample size and distribution in each country and wave by demographic characteristics and AUDIT score

Key: S: Scotland; E: England; W: wave; N: number of cases.

In England, we recruited more evenly across the four locations, but this also varied across waves. For example, we recruited 42.4% of respondents in Sheffield at wave 1 and 15.4% at wave 3, while the proportion of respondents recruited in Liverpool increased from 14.1% at wave 1 to 38.5% at wave 3. The demographic characteristics of the sample also varied across waves. In particular, the proportion of respondents who were female increased from 28.1% at wave 1 to 41.9% at wave 2.

In both countries and at all three waves, we recruited a large majority of respondents from alcohol and drug services. A minority were recruited from gastroenterology or liver services and a small number (N=8) of the Scottish waves 1 and 2 sample were recruited from general practice (GP) settings. The proportion of respondents recruited from inpatient settings increased in Scotland across the three waves, while all respondents in England were recruited in community or outpatient settings.

2.4. Interview schedule

The structured interview schedule comprised eleven sections, which the following sections discuss in detail:

- 1. Sociodemographic information.
- 2. Current health status.
- 3. Past alcohol and drug use.
- 4. Treatment history.
- 5. Recent alcohol and drug use.
- 6. Anticipated or actual responses to alcohol price changes.
- 7. Impact of alcohol use on family, social and work life.
- 8. Experiences of crime.
- 9. Awareness of changes in alcohol prices and product availability.
- 10. How to minimise any harm arising from MUP.
- 11. Other factors relevant to drinking.

The questions included previously validated items or scales, alongside measures developed for this study. The wording of items and layout of the interview schedule drew particularly on a questionnaire used successfully in a previous study involving people entering substance use treatment.³

Interviewers used the same schedule for Scotland and England at waves 1. However, the wave 2 and 3 schedules differed between countries as we updated and adapted some aspects of the schedule to reflect the introduction of MUP in Scotland. These changes are noted in the sections below.

2.4.1. Sociodemographic information

Information collected included: age; gender; highest level of education; relationship status; whether the respondent had dependent children; who they currently live with; current housing type; recent housing problems; postcode (to classify respondents using quintiles of the area-based Index of Multiple Deprivation^{4,5}); occupation; sources of income; level of household income; respondents' subjective experience of how well they are managing financially; and their ethnic and national background. The updated wave 2 and 3 schedules added Universal Credit to the list of possible income sources.^{6,7}

2.4.2. Health status

The schedule assessed current health status using the EQ-5D-5L, a standardised instrument that measures quality of life in five domains: mobility, self-care, usual activities, pain/discomfort and anxiety/depression.^{8,9} For each domain, the EQ-5D-5L asks respondents to describe their health today by ticking one of five statements that reflect different levels of problem in that domain. A final question asks respondents to rate their health today on a visual analogue scale from 0–100.

2.4.3. Past alcohol and drug use

The schedule asked respondents to indicate which of a list of substances they had used in the past 12 months and the past 30 days, and to rank the top three substances of greatest concern to them. The substances included alcohol, tobacco, a list of illicit drugs, medications (e.g. benzodiazepines, antidepressants, painkillers) and an 'other' category. Where respondents indicated use of medications, the schedule asked them whether this medication was prescribed, non-prescribed or both.

The 10-item AUDIT examined the proportion of respondents in the harmful drinking or mild dependence category compared to the probable dependence category. The severity of dependence was assessed using the Severity of Alcohol Dependence Questionnaire (SADQ), a validated and widely-used 20-item tool that includes questions on alcohol-related withdrawal symptoms, craving, and typical daily consumption over the last 6 months.¹⁰ SADQ scores range from 0–60.

2.4.4. Treatment history

The schedule asked respondents to indicate which of seven different treatment types or supports they had accessed for their alcohol or other drug use (e.g. community detox, prescribed medication, peer support groups). For each treatment or support type accessed, respondents indicated whether they had ever accessed it, accessed it in the past 12 months, or were accessing it currently. For treatment or support accessed currently, the schedule asked respondents approximately when they had started doing so.

The schedule also asked respondents how old they were when they first experienced problems with alcohol and at what age they had first sought help for their problems.

2.4.5. Recent alcohol and drug use

A seven-day retrospective alcohol and drug consumption diary collected information on respondents' recent alcohol purchasing and consumption using the Time Line Follow Back method and drawing on recent examples of similar work.^{11,12}

The diary asked to think back to the last day on which they drank before entering treatment or, if they were recruited from an outpatient liver clinic or GP surgery, their last day of drinking starting from yesterday. For this 'index day', the diary asked respondents to recall up to six types of alcohol they had drunk (e.g. cider, whisky, wine). For each separate alcohol type, it then asked respondents how much they had drunk, the price paid and the brand (e.g. Smirnoff, Carlsberg Special Brew). Respondents sometimes reported the amount drunk with a precise measure (e.g. a 700ml bottle of vodka) and sometimes in 'natural measures' (e.g. six to eight cans of beer or half a bottle of wine). We used free text fields rather than pre-determined codes to collect information about respondents' alcohol consumption, both to help with interview flow and because we did not know in advance the common drink types, brands and sizes that respondents would report. The diary also asked respondents where they had bought or acquired each type of alcohol consumed on

each day, in what country (e.g. England, Scotland), whether or not they ordered the alcohol via the internet and whether or not they used a home-delivery service. It then asked respondents whether they had consumed any non-commercially produced alcohol (e.g. homebrew), non-beverage alcohol or other alcohol substitutes (e.g. aftershave), tobacco, antidepressants, benzodiazepines, painkillers, or illegal drugs. The diary then repeated this process for the six days preceding the Index day.

Respondents were generally able to complete the TLFB for all seven days, although some who felt they had a stable daily pattern of purchasing and consumption provided information regarding a typical day, which we then used for all days in the TLFB week.

We recognised that some people might change their pattern of consumption immediately prior to treatment entry (e.g. by cutting back or, conversely, by drinking more heavily in anticipation of stopping). The diary therefore asked respondents to indicate on a five-point scale whether they drank more than, less than or about the same in the TLFB week as they usually would. Similarly, as we were concerned to know how confident respondents were in their recall, the main interview schedule asked them to rate their memory of what they consumed in the TLFB week on a 0–20 scale.

2.4.6. Anticipated or actual responses to alcohol price changes

In both countries at wave 1, interviewers showed respondents pictures of common alcohol products with their current prices and the required minimum price after the introduction of MUP (if this was higher than the current price). The pictures included cheaper products that would be affected by MUP and more expensive products with no required price change (see section 2.8.2 for further information). The interviewers helped respondents to find the most relevant visual aid based on their typical drinking behaviour and then asked open-ended questions about the effect respondents believed this type of price change would have on themselves and others, and why.

Interviewers also presented respondents with 12 statements about how they might respond to the price changes (or lack of change for those who drank products already priced above the MUP). The statements included: 'I would give up drinking'; 'I would drink less alcohol on each day'; 'I would drink about the same as before';

and 'I would reduce how much money I spend on other things to buy alcohol'. Respondents were asked to rate how likely the statements were to apply to them on a five-point scale from 'very unlikely' to 'very likely' or to indicate if the item was not applicable to them. We designed these statements based on the theory of change shown in Figure 2.3 of the main report and also from earlier research on how people with alcohol dependence respondent to alcohol being unaffordable.¹³

For wave 2 in Scotland, we updated the visual aids and replaced all questions in this section. The revised visual aids showed the actual pre- and post-MUP prices for products. Interviewers showed respondents the visual aids and then asked whether or not they had actually changed their behaviour as described in each of the 12 statements. If they had, respondents then indicated whether this change was related to MUP 'a lot', 'a little' or 'not at all', drawing on a question format used in earlier research.³

2.4.7. Impact of alcohol use on family, social and work life

We developed 14 items to investigate the potential broader effects of MUP beyond purchasing and consumption. These items assessed the impact of respondents' drinking over the past three months on their **relationships** (five items, e.g. how well the respondent gets along with their partner or spouse, other family and friends), **daily living** (five items, e.g. impact on finances, chores and eating) and **parenting** (four items, e.g. how the respondent has felt about parenting or getting their children to school). For each item, the schedule asked respondents to indicate whether their drinking had a negative, positive or no impact in that area, or to indicate that the item was not applicable to them. It also asked respondents whether they had used a food bank or other charity in the past three months.

2.4.8. Experiences of crime

The schedule explored respondents' experiences of being a perpetrator and victim of crime. It asked respondents whether they had been involved in perpetrating any of seven different types of crime in the last three months, with the list being adapted from the Public Health England Treatment Outcomes Profile assessment form. It also asked respondents whether they had been a victim in any of three types of crime: theft; burglary or robbery; assault or violence; and 'other'.

Public Health Scotland were particularly interested in the impact of alcohol on those other than the drinker. This includes domestic abuse and other conflict within the home. As these are sensitive topics and responses could potentially trigger mandatory reporting requirements, we opted to only ask about incidents already known to authorities. In practice, this meant asking whether respondents' drinking had led to police involvement because of domestic arguments in the past three months.

2.4.9. Awareness of changes in alcohol prices and product availability

We sought to understand respondents' potential and actual experiences of the implementation of MUP by asking whether or not they had noticed any alcohol products become unavailable of change in price in the past three months and, if so, which brands and packaging sizes. The schedule then asked respondents to indicate on a four-point scale whether these products had become cheaper or more expensive, and whether the changes they saw had occurred gradually or suddenly. The wave 2 schedule in Scotland changed the reference period from 'the past three months' to 'since the implementation of MUP' (i.e. since April 2018, immediately before implementation).

2.4.10. How to minimise any harm arising from MUP

The schedule explored what people who are dependent on alcohol think would help in preparing for a policy increasing the price of alcohol. It asked respondents at wave 1 in Scotland and all waves in England if they, or people they know, would need support and what support this would be. The schedule also asked about any support respondents were currently being offered. We changed the wording of these questions for waves 2 and 3 in Scotland to instead ask whether any support had actually been offered to cope with the rise in alcohol prices since May 2018, what this support was and what else might have been helpful.

2.4.11. Other factors relevant to drinking

To identify other factors aside from MUP that might contribute to changes in drinking, the schedule asked respondents whether there were any factors other than prices that had a major effect on their drinking in the past three months. This could include factors at a personal, community, regional or national level. At waves 2 and 3 in Scotland, the schedule also asked respondents whether they had done anything differently in response to price changes arising from MUP and for how long.

2.4.12. Visual aids

Interviewers used three types of visual aid to assist respondents with the structured interviews. First, they used pictures of five types of alcohol (i.e. beer, cider, spirits, wine, fortified wines), covering a range of brands and packaging sizes, to support completion of the TLFB and questions regarding anticipated and actual responses to MUP. The visual aids displayed each type of alcohol with typical prices pre-MUP and assumed prices post-MUP (see section 2.8.2 for visual aids used at wave 1). Second, interviewers also made available A4-sized 12-month calendars for 2017, 2018, 2019 and 2020 to help respondents locate key dates such as treatment entry. Third, interviewers provided a guide to alcohol units to help respondents more accurately estimate the number of units drunk when completing the AUDIT and SADQ (see section 2.8.3).

2.5. Data preparation

This section describes how we prepared the interview data used in analyses.

2.5.1. Sociodemographic information

For ease of presentation and to address small cell counts in some cases, we collapsed several sociodemographic variables into fewer categories:

- Age was coded into five groups: 29 or less, 30–39, 40–49, 50–59 and 60+ years.
- Highest level of education was coded into four groups: Level 1 or no qualifications; Level 2 or equivalent (Scottish Standards, GCSE, trade apprenticeship); Level 3 or equivalent (Scottish Highers, A level, vocational level 3); and Higher than Level 3 (including degrees). We further combined the Level 1 and 2 groups and the Level 3 and Higher groups to create a dichotomous variable for some analyses.
- Relationship status was coded into four groups: single; in a relationship (not living together); in a relationship (married or cohabiting); and separated, divorced, widowed or other.

- Who the respondent lives with was coded into five groups: live alone; with parents; with partner/spouse; with children; with friends, housemates or other non-family. The last four groups are not mutually exclusive.
- **Housing** was coded into five groups: private ownership; private rental; social housing; live in house of relative; partner or friend; and hostel, shelter or no usual residence. We further combined the last two groups for some analyses.
- Occupation was coded into five groups: employed; training or studying fulltime; looking for work or training; intending to look for work but prevented due to temporary sickness/injury; permanently unable to work due to permanent sickness/disability; and retired, looking after home/family or doing something else.
- **Sources of income** was coded into five groups: wage or salary; pension, benefit or universal credit; partner, family or child support; loans/pawning, betting, sex work, begging or criminal activity; and other.
- Household income per week was coded into five groups: <£100, £100–199, £200–299, £300–499, and £500+. We further combined those groups up to £299 and those groups £300 or above to create a dichotomous variable for us in some analyses.
- Ethnicity was coded into five groups: Scottish (white); English (white); other British (white); Scottish/English/other British (non-white); and non-British (white).

2.5.2. Timeline Follow-Back (TLFB) data

As described in section 2.4.5, the TLFB diary recorded drinking for a seven-day period, including information on each drink type consumed on each day. We used this information to calculate the number of units of alcohol consumed on each day and the average price paid per unit (1 UK units = 8g or 10ml or pure ethanol).

First, we converted all of the 'natural measure' information into numeric data (e.g. converting 'a glass of wine' into a specific volume of liquid and its alcohol content). The natural measures were often imprecise or missing information and we managed this by establishing consistent decision rules conversion:

• Where respondents provided data in ranges (e.g. 10–12 drinks, £10–£15), we used the mid-point of the range.

- Where respondents gave a maximum amount (e.g. cost no more than £5), we used this highest value, thus assuming higher prices than respondents may actually have paid.
- Where respondents did not provide container sizes in millilitres, we used the following assumptions based on standard UK serving sizes. For wine, we assumed a small glass was 125ml, a medium or unspecified glass was 175ml and a large glass was 250ml. For Prosecco we assumed a glass size of 125ml. Bottles of wine were assumed to be 750ml for normal size and 187ml for a mini bottle. For spirits, we assumed a single shot was 25ml and a double 50ml.
- We cross-checked data from respondents on the volume of spirits and beer containers against market research data and online shopping websites to ensure we included only plausible volumes. For example, some respondents reported spirit bottles sizes of 750ml, but we corrected these to 700ml after cross-checking against products available for sale.
- Where respondents provided information on the alcoholic content (i.e. alcohol by volume or ABV), we cross-checked these against available products and corrected them where necessary. We used the following standard ABV assumptions where the ABV was unknown: cider 5%, beer 4.5%, wine 12%, spritzer 5.5% and vodka 37.5%.

Second, we calculated the volume of alcohol consumed for each drink type on each day by multiplying together the number (or proportion) of drink containers consumed, the volume of the container in millilitres and the ABV of the products, and then divided this by ten to convert it into UK units. This allowed us to sum together the units consumed across all drink types to give the total number of units consumed per day and also across the seven-day TLFB period. For example where a respondent reported drinking half a bottle of wine with a 12% ABV, the calculation was 0.5 x 750 x 0.12 \div 10 = 4.5 units. Similarly, where a person reported drinking a litre bottle of whisky, the calculation was 1 x 1000 x 0.4 \div 10 = 40 units.

Third, we calculated the price per unit for each drink type reported each day by dividing the total price paid for the drink container by the volume of the container in millilitres multiplied by strength (ABV) of the product divided by 10. For example, if a

respondent paid £6 for a bottle of wine with a 12% ABV, this was calculated as $6 \div (750 \times 0.12 \div 10) = \pm 0.67$ per unit. Similarly, if a respondent paid £18 for a 1 litre bottle of whisky with a 40% ABV, this calculation was $18 \div (1000 \times 0.40 \div 10) = \pm 0.45$ per unit.

We also categorised self-rated memory of drinking during the TLFB week into four groups: 0–4, 5–9, 10–14, and 15–20 to allow easier understanding of the extent of weak and strong recall.

2.5.3. AUDIT and SADQ

We calculated total scores for AUDIT and SADQ responses by summing the scores on individual items.

For the AUDIT, there were N=2 (0.7%) wave 2 cases missing data for one item only. To enable total calculation of a total AUDIT score, we substituted missing items with the average score of all other AUDIT items for those respondents.

For the SADQ, several respondents were missing data for at least one item. For example, at wave 1, N=31 (12.2%) respondents were missing responses for one or more item, including 20 who were missing responses for four items and two who were missing responses for all items. The most commonly missing SADQ items were the last four, which require the respondent to imagine whether they would have specific physical symptoms when drinking after a period of abstinence (i.e. reinstatement of withdrawal symptoms). Many of those who did not answer these items indicated they could not imagine a period of abstinence or did not know what would happen. To enable total scores to be calculated, we substituted the average score across all other SADQ items for those missing five or fewer items.

We analysed AUDIT and SADQ scores as continuous variables but also categorised SADQ scores for severity of dependence according to conventional thresholds: mild (0–15), moderate (16–30) and severe (31+).

2.5.4. Other data

Postcode data were matched to external data files containing their associated decile for the most recent Index of Multiple Deprivation (IMD), which was 2016 for the Scottish IMD^{5,14} and 2019 for the separate English IMD.^{4,15} We then collapsed

declines into quintiles and also created a binary variable indicating whether or not the respondent lived in the most deprived quintile in their country. It should be noted that IMD quintiles are not directly comparable between Scotland and England due to differences in the method of calculation, deprivation gradients and absolute levels of deprivation.¹⁶ There were 23 cases in wave 1 and 35 cases in wave 2 with insufficient postcode information to determine IMD decile.

EQ-5D-5L: we determined whether people were currently experiencing poor health in any of the five EQ-5D-5L domains by dichotomising the ratings for each variable. Rating between from 1 to 3 were classed as 'no to moderate problems' and ratings from 4 to 5 were classed as 'severe problems'. We created a further dichotomous variable, 'poor health', to show whether respondents had severe problems in any of the five domains. We also used median and mean scores for the 0–100 visual analogue scale, which measured respondents' self-rated health today.

Anticipated response to MUP: we dichotomised relevant items into 'Likely' (i.e. 'likely' or 'very likely') and 'Not likely' (i.e. 'neither likely nor unlikely', 'unlikely', 'very unlikely', and 'not applicable').

Experience of crime: this required no data preparation.

Awareness of changing alcohol prices and product availability: the numeric variable did not require preparation. For the open text fields, we reviewed the written responses and reported on the most frequently mentioned drink types.

Harm minimisation: the numeric data required no preparation. For the open text fields, we reviewed and categorised the written responses and reported on the forms of support that respondents mentioned most frequently as being required or seen.

2.6. Analysis

2.6.1. Weighting procedures

As described in section 2.3.4, preliminary analysis of the number, proportion, age and sex of respondents recruited in each location. These showed substantial differences between the samples collected at each wave in both Scotland and England. As the differences could affect our overall findings, we developed a set of survey weights to adjust for the uneven sampling in the analyses reported here. We explored two approaches to weighting: iterative proportional fitting (or raking) and an approach based on logistic regression.¹⁷ For both methods, we calculated weights separately for England and Scotland based on the following variables: sex; age group; geographic region; and treatment setting (alcohol and drug services versus gastroenterology/liver or GP services). The wave 2 sample closely matched our original sampling plan, as it was not subject to the time pressures of wave 1 or the early termination of wave 3 due to the COVID-19 pandemic. We therefore used wave 2 data to provide target sample characteristics and calculated weights for wave 1 and wave 3.

For the iterative proportional fitting method, we used the **pewmethods** package in R 3.6.1 to iteratively calculate and adjust weights for each of the variables above until they converged on a best-fitting solution.¹⁸ For the logistic regression method, we pooled the wave 1 and 2 datasets and created a variable called 'sample', which was set equal to '0' for wave 2 and '1' for wave 1. This variable was then used as the dependent variable in a logistic regression, with each of the weighting characteristics (sex, age group, geographic region, and treatment setting) set as independent variables. The software then saved the resulting predicted probabilities. This procedure was repeated for wave 3 and we then calculated the weights for both waves as the inverse of the predicted probability for each case.

Table 2.3 and Table 2.4 show the effect of each weighting method on the proportions of the sample within recruitment sites, demographic categories, AUDIT score bands and subgroups of interest (see section 3.3.6.1 of main report). Both methods improve the comparability of the wave 1 and 3 samples to the target wave 2 sample, however, neither method is clearly superior. There was also a strong correlation between the weights calculated using the two methods for each sample (Scotland wave 1: r = 0.893, p<0.001; Scotland wave 3: r = 0.947, p<0.001; England wave 1: r = 0.965, p<0.001; England wave 3: r = 0.976, p<0.001), so we proceeded with the iterative proportional fitting method as the more commonly used approach.

As extreme weights can introduce instability into the analysis, we also explored the impact of 'trimming' the weights using the method outlined by Potter and Zheng.¹⁹ This involved calculating the median and interquartile range of the weights, and capping them at five times the value of the IQR. Eight out of 430 weights required trimming. We used trimmed weights for all analyses as these were more stable and

had only minimal impact on the findings of exploratory analyses when compared to the untrimmed weights. Table 2.5 and Table 2.6 present the final sample size, distribution and weighted distribution (after trimming of the weights presented in Table 2.3 and Table 2.4).

Country and area	S:W1	S:W1	S:W1	S:W2	S:W3	S:W3	S:W3	E:W1	E:W1	E:W1	E:W2	E:W3	E:W3	E:W3
	%	%w1	%W2	%	%	%w1	%W2	%	%W1	%W2	%	%	%w1	%W2
Glasgow	41.2	45.0	48.4	48.4	65.0	54.4	48.4	-	-	-	-	-	-	_
Edinburgh (Lothian)	22.9	20.6	18.4	18.4	20.3	19.3	18.4	-	-	-	-	_	-	_
Aberdeen (Grampian)	17.6	16.8	15.8	15.8	4.9	11.9	15.8	-	-	-	-	_	-	-
Dumfries & Galloway	10.6	9.4	8.4	4.2	5.7	7.6	8.4	-	-	-	-	_	-	-
Highlands	6.5	5.3	4.2	8.4	0.8	2.7	4.2	-	-	-	-	_	-	-
Dundee (Tayside)	1.2	2.9	4.7	4.7	3.3	4.0	4.7	-	_	-	-	_	-	_
Sheffield	-	_	-	-	-	-	-	42.4	35.8	29.1	29.1	15.4	23.5	29.1
Stockport (Pennines)	-	_	_	-	-	_	_	23.5	21.0	18.6	18.6	9.6	15.0	18.6
Newcastle (Northumberland)	-	-	_	-	-	-	-	20.0	20.5	24.4	24.4	36.5	28.4	24.4
Liverpool	-	_	-	-	-	_	_	14.1	22.8	27.9	27.9	38.5	33.1	27.9
Service type and setting	S:W1 %	S:W1 %w1	S:W1 %w2	S:W2 %	S:W3 %	S:W3 %w1	S:W3 %w2	E:W1 %	E:W1 %w1	E:W1 %w2	E:W2 %	E:W3 %	E:W3 %w1	E:W3 %w2
Alcohol and drug services	74.1	71.8	81.1	81.1	87.0	87.9	81.1	95.3	92.6	89.5	89.5	90.4	92.0	89.5
Community or outpatient	57.6	55.9	62.7	38.9	35.0	41.9	43.7	95.3	92.6	89.5	89.5	90.4	92.0	89.5
Inpatient	16.5	15.9	18.4	42.1	52.0	46.0	37.4	0.0	0.0	0.0	0.0	0.0	0.0	0.0
Gastroenterology or liver	21.2	23.1	15.8	17.4	13.0	12.1	18.9	4.7	7.4	10.5	10.5	9.6	8.0	10.5

Table 2.3: Effect of weighting approaches on distribution of sample by geographic location and service type

General practitioner	4.7	5.1	3.1	1.6	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0
Inpatient	16.5	18.1	12.8	11.1	13.0	12.1	18.9	0.0	0.0	0.0	0.0	0.0	0.0	0.0
Community or outpatient	4.7	5.0	3.0	6.3	0.0	0.0	0.0	4.7	7.4	10.5	10.5	9.6	8.0	10.5

Key: S: Scotland; E: England; W: wave; N: number of cases; %_{W1}: weighted percentage of cases using logistic regression approach; %_{W2}: weighted percentage of cases using iterative proportional fitting approach.

Sex	S:W1 %	S:W1 %w1	S:W1 %w2	S:W2 %	S:W3 %	S:W3 %w1	S:W3 %w2	E:W1 %	E:W1 %w1	E:W1 %w2	E:W2 %	E:W3 %	E:W3 %w1	E:W3 %w2
Male	69.4	69.0	67.4	67.4	65.0	68.3	67.4	71.8	64.1	58.1	58.1	67.3	61.8	58.1
Female	30.6	31.0	32.6	32.6	35.0	31.7	32.6	28.2	35.9	41.9	41.9	32.7	38.2	41.9
Age group	S:W1 %	S:W1 %w1	S:W1 %w2	S:W2 %	S:W3 %	S:W3 % _{W1}	S:W3 %w2	E:W1 %	E:W1 %w1	E:W1 %w2	E:W2 %	E:W3 %	E:W3 %w1	E:W3 %w2
29 or less	6.5	5.7	5.4	5.3	2.4	2.1	3.1	11.8	11.8	13.0	12.8	5.8	5.1	5.2
30–39 years	21.8	20.1	17.2	17.4	22.8	19.9	19.6	22.4	21.2	21.9	22.1	36.5	31.3	29.7
40–49 years	27.6	29.9	32.1	32.1	26.8	31.2	32.1	32.9	31.2	29.1	29.1	28.8	27.2	29.1
50–59 years	34.7	34.9	35.2	28.4	31.7	29.5	27.6	27.1	29.0	29.4	24.4	25.0	31.3	30.7
60+ years	9.4	9.3	10.1	16.8	16.3	17.3	17.7	5.9	6.8	6.6	11.6	3.8	5.0	5.3
AUDIT score	S:W1 %	S:W1 %w1	S:W1 %w2	S:W2 %	S:W3 %	S:W3 %w1	S:W3 %w2	E:W1 %	E:W1 %w1	E:W1 %w2	E:W2 %	E:W3 %	E:W3 %w1	E:W3 %w2
16–19	3.5	3.4	2.9	5.8	4.9	5.2	6.6	5.9	7.4	8.3	8.1	5.8	5.9	6.6
20–40	96.5	96.6	97.1	94.2	95.1	94.8	93.4	94.1	92.6	91.7	91.9	94.2	94.1	93.4
Subgroups of interest	S:W1 %	S:W1 %w1	S:W1 %w2	S:W2 %	S:W3 %	S:W3 % _{W1}	S:W3 % _{W2}	E:W1 %	E:W1 %w1	E:W1 %w2	E:W2 %	E:W3 %	E:W3 % _{W1}	E:W3 %w2
Drank cheap alcohol	59.0	58.1	61.5	5.8	16.9	14.4	13.8	57.8	54.5	54.1	44.2	37.0	30.7	32.0
Illicit substances	34.1	35.3	38.7	27.9	30.9	27.9	25.0	29.4	27.1	26.0	29.1	38.5	31.5	27.9
Poor health	49.1	48.8	47.4	52.6	55.7	53.0	52.1	47.1	47.5	48.0	48.8	54.9	51.5	53.6
Economically vulnerable	41.2	39.8	37.6	34.7	41.5	38.1	35.7	30.6	27.6	25.4	33.7	38.5	33.2	32.9

 Table 2.4: Effect of weighting approaches on distribution of sample by sex, age and AUDIT score

Dependent children	25.9	26.6	27.4	24.2	35.8	35.7	33.6	41.2	40.2	40.8	41.9	48.1	46.1	46.4
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Key: S: Scotland; E: England; W: wave; N: number of cases; %_{W1}: weighted percentage of cases using logistic regression approach; %_{W2}: weighted percentage of cases using iterative proportional fitting approach.

Table 2.5: Sample size,	distribution and weighted	distribution in each	country and wave b	by geographic locatio	n of service
and service type.					

Country and area	S:W1	S:W2	S:W3	S:W1	S:W2	S:W3	S:W1	S:W3	E:W1	E:W2	E:W3	E:W1	E:W2	E:W3	E:W1	E:W3
	Ν	Ν	Ν	%	%	%	‰w	‰w	Ν	Ν	Ν	%	%	%	%w	%w
Scotland	170	190	123	100.0	100.0	100.0	100.0	100.0	_	_	_	-	_	-	_	-
Glasgow	70	92	80	41.2	48.4	65.0	49.3	50.6	_	_	_	_	-	-	-	-
Edinburgh (Lothian)	39	35	25	22.9	18.4	20.3	18.9	19.1	_	_	_	_	-	-	-	-
Aberdeen (Grampian)	30	30	6	17.6	15.8	4.9	16.2	14.4	_	_	_	_	_	-	_	_
Dumfries & Galloway	18	16	7	10.6	4.7	5.7	2.7	4.8	_	_	_	_	_	-	_	_
Highlands	11	8	1	6.5	8.4	0.8	8.6	8.6	_	_	_	_	-	-	_	_
Dundee (Tayside)	2	9	4	1.2	4.2	3.3	4.3	2.5	_	_	_	_	_	-	_	_
England	_	_	_	-	_	-	_	_	85	86	52	100.0	100.0	100.0	100.0	100.0
Sheffield	_	_	_	_	_	-	-	_	36	25	8	42.4	29.1	15.4	29.1	28.8
Stockport (Pennines)	_	_	_	_	_	-	-	_	20	16	5	23.5	18.6	9.6	18.6	18.6
Newcastle (Northumberland)	-	_	-	_	-	-	_	-	17	21	19	20.0	24.4	36.5	24.4	24.5
Liverpool	_	_	_	_	_	-	-	_	12	24	20	14.1	27.9	38.5	27.9	28.0
Service type and	S:W1	S:W2	S:W3	S:W1	S:W2	S:W	S:W1	S:W3	E:W1	E:W2	E:W3	E:W1	E:W2	E:W3	E:W1	E:W3
setting	Ν	Ν	Ν	%	%	3%	%w	%w	Ν	Ν	Ν	%	%	%	%w	%w
Alcohol and drug	126	154	107	74.1	81.1	87.0	82.6	80.6	81	77	47	95.3	89.5	89.5	89.5	89.5
Community or outpatient	98	74	43	57.6	38.9	35.0	63.9	41.6	81	77	47	95.3	89.5	89.5	89.5	89.5
Inpatient	28	80	64	16.5	42.1	52.0	18.7	39.1	0	0	0	0.0	0.0	0.0	0.0	0.0

Gastroenterology or liver	36	33	16	21.2	17.4	13.0	14.2	19.4	4	9	5	4.7	10.5	10.5	10.5	10.5
Community or outpatient	8	12	0	4.7	6.3	0.0	3.1	0.0	4	9	5	4.7	10.5	10.5	10.5	10.5
Inpatient	28	21	16	16.5	11.1	13.0	11.1	19.4	0	0	0	0.0	0.0	0.0	0.0	0.0
General practitioner	8	3	0	4.7	1.6	0.0	3.2	0.0	0	0	0	0.0	0.0	0.0	0.0	0.0

Key: S: Scotland; E: England; W: wave; N: number of cases; %w: weighted percentage of cases. Shading indicates target sample for weighting.

Table 2.6: Sample size,	distribution and weig	hted distribution	in each country	and wave by	demographic c	haracteristics
and AUDIT score						

Sex	S:W1 N	S:W2 N	S:W3 N	S:W1 %	S:W2 %	S:W3 %	S:W1 %w	S:W3 %w	E:W1 N	E:W2 N	E:W3 N	E:W1 %	E:W2 %	E:W3 %	E:W1 %w	E:W3 %w
Male	118	128	80	69.4	67.4	65.0	66.7	66.4	61	50	35	71.8	58.1	67.3	58.1	58.4
Female	52	62	43	30.6	32.6	35.0	33.3	33.6	24	36	17	28.2	41.9	32.7	41.9	41.6
Age group	S:W1 N	S:W2 N	S:W3 N	S:W1 %	S:W2 %	S:W3 %	S:W1 %w	S:W3 %w	E:W1 N	E:W2 N	E:W3 N	E:W1 %	E:W2 %	E:W3 %	E:W1 %w	E:W3 %w
29 or less	11	10	3	6.5	5.3	2.4	5.5	3.1	10	11	3	11.8	12.8	5.8	13.0	5.2
30-39 years	37	33	28	21.8	17.4	22.8	17.0	20.0	19	19	19	22.4	22.1	36.5	21.9	29.8
40-49 years	47	61	33	27.6	32.1	26.8	31.3	31.9	28	25	15	32.9	29.1	28.8	29.1	29.2
50-59 years	59	54	39	34.7	28.4	31.7	35.9	26.9	23	21	13	27.1	24.4	25.0	29.4	30.5
60+ years	16	32	20	9.4	16.8	16.3	10.3	18.0	5	10	2	5.9	11.6	3.8	6.6	5.3
AUDIT score	S:W1 N	S:W2 N	S:W3 N	S:W1 %	S:W2 %	S:W3 %	S:W1 %w	S:W3 %w	E:W1 N	E:W2 N	E:W3 N	E:W1 %	E:W2 %	E:W3 %	E:W1 %w	E:W3 %w
16-19	6	11	6	3.5	5.8	4.9	3.0	6.7	5	7	3	5.9	8.1	5.8	8.3	6.6
20-40	164	179	117	96.5	94.2	95.1	97.0	93.3	80	79	49	94.1	91.9	94.2	91.7	93.4

Key: S: Scotland; E: England; W: wave; N: number of cases; ‰: weighted percentage of cases. Shading indicates target sample for weighting.

2.6.2. Statistical techniques

We used difference-in-difference analyses to evaluate the impact of MUP on the prevalence of the five subgroups of interest within the population and on the key outcome measures. The difference-in-difference analysis used regression models to compare the average change over time in the variable of interest in Scotland with the average change over time in the same variable in England and provide an estimate of the statistical significance of this change. The specific regression model varied between analyses. We used logistic regression for binary variables (e.g. drank cheap alcohol in the TLFB week), ordinal regression for ordered variables (e.g. mild, moderate or severe dependence scores on the SADQ) and linear regression for continuous variables (e.g. self-reported health on a scale of 0–100). We estimated separate models for changes between wave 1 and wave 2 and between wave 1 and wave 3. In all models, the dependent variable was the subgroup or outcome variable of interest and the independent variables were wave, country and the interaction of wave and country. The latter is the parameter of interest, reported as β in the results tables, and is interpreted as follows for each model type:

- Logistic regressions: the β is the ratio of odds ratios for change in the dependent variable in each country (i.e. the odds ratio for Scotland divided by the odds ratio for England). A β greater than one indicates a larger increase in the odds of the outcome in Scotland than England (or an increase in the odds in Scotland and a decrease in England). A β less than one indicates a smaller increase in the odds of the outcome in Scotland than England (or a decrease in the odds of the outcome in Scotland than England (or a decrease in the odds of the outcome in Scotland than England (or a decrease in the odds in Scotland and an increase in England).
- Ordinal regressions: the β is interpreted similarly to logistic regressions but indicates the ratio of odds ratios for moving from one category of the dependent variable to the text.
- Linear regressions: the β is the modelled difference between the change in the dependent variable in Scotland and in England. A positive β indicates a larger increase in Scotland than England (or a smaller decrease). A negative β indicates a larger decrease in Scotland than England (or a smaller decrease). A negative increase). Many of the linear regressions use a logged dependent variable as the unlogged variable is not normally distributed. This means the β cannot be calculated from the means provided in the results tables in section 2.7.
To account for the large number of outcome variables, we made a Bonferroni adjustment to the p-value threshold used to assess statistical significance.²⁰ Specifically, we divided the conventional threshold of p=0.05 by the number of tests run (i.e. 108) to yield a revised significance threshold of p=0.0004630.

In addition to the difference-in-difference analyses, we also used descriptive analyses to explore the impact of MUP on key outcomes within population subgroups. We did not use formal statistical testing in these analyses as the sample sizes within subgroups are not large enough. We also used descriptive analyses to examine the following additional set of outcomes, exploring change across waves where appropriate: anticipated and actual responses to MUP, experiences of crime, product price and availability, and minimising harm arising from MUP.

2.6.3. Data reporting

As with the main report, the tables below suppress values if they are based on between 1 and 5 cases and replace them with a star (\star). This is to minimise the likelihood of a respondent being identified from their data.

2.7. Additional results

The tables below present full statistical results for all difference-in-difference analyses reported in section 3.4 of the main report. They then present additional descriptive subgroup analyses that are described in section 3.4.4 of the main report.

Subgroup of interest	S:W1 %	S:W2 %	S:W3 %	E:W1 %	E:W2 %	E:W3 %	Exp β W1–2	SE W1–2	P-value W1–2	Exp β W1–3	SE W1–3	P-value W1–3
Drank cheap alcoholª	60.6	6.3	14.4	54.1	45.2	32.2	0.06	0.47	<0.0004*	0.27	0.49	0.008
Illicit substances	37.3	27.9	25.7	26.0	29.1	28.0	0.56	0.41	0.153	0.52	0.47	0.173
Poor health ^b	47.0	52.9	52.9	48.0	48.8	53.8	1.23	0.37	0.584	1.00	0.43	0.993
Economically vulnerable	38.4	34.7	36.8	25.4	33.7	33.0	0.57	0.40	0.164	0.64	0.46	0.334
Dependent children	25.8	24.2	34.3	40.8	41.9	46.6	0.88	0.40	0.748	1.19	0.44	0.697
Sample size (N)	170	190	123	85	86	52	_	_	_	_	_	_

Table 2.7: Difference-in-difference analysis of the impact of MUP on the proportion of respondents within subgroups of interest

Key: S: Scotland; E: England; W: wave; β: coefficient of intervention effect parameter in difference-in difference model; SE: standard error; P-value: p-value for statistical significance of Beta parameter.

^a Number of cases missing due to missing price or volume data from TLFB: Scotland: W1=4, W2=14, W3=5; England: W1=2, W2=2, W3=6. ^b Number of cases missing due to missing EQ-5D-5L data: Scotland: W1=1, W2=1, W3=0; England: W1=0, W2=1, W3=0.

* The Bonferroni correction for multiple testing means our significance threshold is p<0.0004630 rather than the standard p<0.05.

Table 2.8: Difference-in-difference analysi	is of the impact of MU	P on alcohol consumption	, expenditure and dependence
outcomes			

Alcohol consumption	S:W1	S:W2	S: W3	E:W1	E:W2	E:W3	Exp β ^c W1–2	SE W1-2	P-value W1–2	Exp β ^c W1–3	SE W1–3	P-value W1–3
Mean units consumed ^a	187.5	168.0	192.0	167.9	147.4	179.9	0.06	0.07	0.423	-0.01	0.08	0.950
SD of units consumed	132.1	121.5	142.1	107.0	112.8	134.1	_	-	_	-	-	_
Alcohol expenditure	S:W1	S:W2	S: W3	E:W1	E:W2	E:W3	Exp β ^c W1–2	SE W1–2	P-value W1–2	Exp β ^c W1–3	SE W1–3	P-value W1–3
1st drink <£0.50pu (%)	56.2	12.1	19.5	53.3	43.0	33.0	-0.17	0.41	<.0004*	-0.42	0.46	0.061
Mean total spending (£)	82.6	95.2	106.9	77.3	68.7	89.9	0.15	0.07	0.032	0.07	0.08	0.376
SD of total spending	59.4	60.6	76.8	49.0	51.4	64.7	_	-	_	-	-	_
Mean ppu (£)ª	0.49	0.60	0.59	0.5	0.59	0.55	0.09	0.04	0.011	0.07	0.04	0.054
SD of ppu	0.25	0.18	0.19	0.2	0.33	0.21	_	-	_	_	-	-
% of all drinks <£0.50pu	59.2	5.8	13.9	53.2	44.2	29.8	0.06	0.47	<.0004*	0.27	0.49	0.008

Alcohol dependence ^b	S:W1	S:W2	S: W3	E:W1	E:W2	E:W3	Exp β ^c W1–2	SE W1–2	P-value W1–2	Exp β ^c W1–3	SE W1–3	P-value W1–3
Mean SADQ score	39.4	36.1	37.3	29.5	30.1	37.3	-3.96	2.94	0.178	-2.74	3.36	0.415
SD of SADQ score	14.0	16.8	18.2	15.5	16.0	14.3	_	-	-	-	-	_
Mild (SADQ 0-15, %)	10.8	16.0	17.6	21.4	24.4	16.4	0.59	0.37	0.108	0.59	0.42	0.164
Mod. (SADQ 16- 30, %)	15.3	22.5	14.1	33.0	27.9	32.6	-	-	_	-	-	-
Severe (SADQ 31- 60, %)	74.0	61.5	68.3	44.8	47.7	51.1	_	-	_	-	-	_

Key: S: Scotland; E: England; W: wave; β: coefficient of intervention effect parameter in difference-in difference model; SE: standard error; P-value: p-value for statistical significance of Beta parameter. ppu: price per unit, pu: per unit.

^a Linear regression used for this outcome and both variables are logged; ^b Ordinal regression used for mild, moderate and severe dependence groups; ^c Betas for means are unexponentiated.

* The Bonferroni correction for multiple testing means our significance threshold is p<0.0004630 rather than the standard p<0.05.

Drink types consumed ^a	S:W1 %	S:W2 %	S:W3 %	E:W1 %	E:W2 %	E:W3 %	Exp β W1–2	SE W1–2	P-value W1–2	Exp β W1–3	SE W1–3	P-value W1–3
Cider <7.5% ABV	20.8	21.1	10.6	17.1	19.8	6.2	0.85	0.47	0.736	1.42	0.73	0.633
Cider ≥7.5% ABV	25.0	9.5	6.7	19.4	12.8	8.0	0.52	0.52	0.204	0.60	0.71	0.470
Beer <7.5% ABV	38.7	30.0	38.3	41.2	39.5	31.6	0.73	0.38	0.412	1.49	0.44	0.366
Beer ≥7.5% ABV	7.9	3.7	2.2	7.9	3.5	4.2	1.05	0.86	0.952	0.50	1.05	0.513
Vodka	33.0	34.7	35.6	32.0	26.7	33.3	1.39	0.40	0.411	1.06	0.06	0.896
Wine	14.9	22.1	28.4	26.4	37.2	26.1	0.98	0.43	0.967	2.30	0.50	0.094
Whisky	14.5	7.9	4.2	11.1	2.3	9.0	2.65	0.87	0.262	0.33	0.78	0.151
Tonic Wine	5.3	7.9	7.1	0.0	1.2	0.0	0.00	4.4E ³	0.997	1.20	7E ³	1.000
Other	6.7	10.0	13.6	16.6	15.1	5.2	1.74	0.57	0.336	7.99	0.80	0.009
Place of	S:W1	S:W2	S:W3	E:W1	E:W2	E:W3	Εχρ β	SE	P-value	Εχρ β	SE	P-value
purchase ^b	%	%	%	%	%	%	W1–2	W1–2	W1–2	W1–3	W1-3	W1–3
Local shop/seller	45.7	46.8	49.4	30.9	33.7	32.8	_	-	-	_	-	_
Supermarket	23.6	34.2	39.7	28.1	39.5	29.8	-	-	-	-	-	_
Off-license chain	8.7	3.2	2.7	8.8	5.8	13.2	-	-	-	_	-	-

 Table 2.9: Difference-in-difference analysis of the impact of MUP on drink types consumed and place of purchase

Other off-trade	2.8	0.5	1.8	4.5	2.3	9.9	-	-	-	-	_	-
On-trade	5.3	4.2	2.5	11.2	7.0	5.8	-	-	-	-	-	-
Social supply ^c	1.0	1.1	2.5	1.2	0.0	0.6		-	-	-	-	-

Key: S: Scotland; E: England; W: wave; β: coefficient of intervention effect parameter in difference-in difference model; SE: Standard error; P-value: p-value for statistical significance of Beta parameter.

^a Whether drink type consumed at any point in TLFB week. ^b First drink of TLFB week. ^c Alcohol provided by family, friends or others.

Other substances	S:W1	S:W2	S:W3	E:W1	E:W2	E:W3	Ехр β	SE	P-value	Εχρ β	SE	P-value
	%	%	%	%	%	%	W1–2	W1–2	W1–2	W1–3	W1–3	W1–3
Prescribed substances ^a	63.7	62.1	55.1	72.3	60.5	66.2	1.59	0.39	0.237	0.93	0.45	0.877
Illicitly obtained prescribed substances	14.9	13.2	9.8	2.5	10.5	2.9	0.19	0.84	0.046	0.53	1.15	0.580
Other illicit substances	30.9	22.1	24.1	25.4	26.7	26.8	0.59	0.42	0.214	0.66	0.48	0.386
Tobacco	30.9	36.3	26.3	40.7	44.2	34.7	1.05	0.37	0.792	1.25	0.44	0.951

Table 2.10: Difference-in-difference analysis of the impact of MUP on use of other substances.

Key: S: Scotland; E: England; W: wave; β: coefficient of intervention effect parameter in difference-in difference model; SE: standard error; P-value: p-value for statistical significance of Beta parameter.

^aPrescribed substances include benzodiazepines, antidepressants or painkillers.

Health domain ^a	S:W1	S:W2	S:W3	E:W1	E:W2	E:W3	Exp β ^d	SE	P-value	Exp β ^d	SE	P-value
							W1–2	W1–2	W1–2	W1–3	W1–3	W1–3
Mobility (%)	18.9	16.8	12.5	12.3	8.1	7.9	1.38	0.58	0.584	1.01	0.71	0.989
Self-care (%)	7.4	6.3	10.5	3.8	2.3	0.9	1.41	1.00	0.735	6.61	1.67	0.259
Usual activities (%)	16.6	16.9	17.2	14.8	11.6	12.5	0.30	0.54	0.576	1.27	0.61	0.696
Pain/discomfort (%)	18.9	22.6	22.1	24.3	23.3	17.7	1.33	0.44	0.517	1.83	0.54	0.260
Anxiety/depression (%)	28.2	36.3	35.8	36.7	37.2	46.0	1.42	0.39	0.368	0.97	0.44	0.938
Self-rating of	S:W1	S:W2	S:W3	E:W1	E:W2	E:W3	Exp β^d	SE	P-value	Exp β^d	SE	P-value
health (0–100) ^b							W1–2	W1–2	W1–2	W1–3	W1–3	W1–3
Mean rating ^c	50.3	49.4	48.2	54.7	56.1	56.1	-2.31	4.20	0.582	-3.45	4.71	0.465
SD of rating	21.7	22.8	21.7	23.2	23.3	22.1	_	_	_	_	_	_

Table 2.11: Difference-in-difference analysis of the impact of MUP on self-reported health status (measured by EQ-5D-5L).

Key: S: Scotland; E: England; W: wave; β: coefficient of intervention effect parameter in difference-in difference model; SE: standard error; P-value: p-value for statistical significance of Beta parameter.

^aEQ-5D-5L – score of 4 (severe problems) or 5 (extreme problems); ^bEQ-5D-5L Visual Analogue Scale; ^cLinear regression used for outcome; ^d Betas for linear regressions are unexponentiated.

Experiences of deprivation	S:W1 %	S:W2 %	S:W3 %	E:W1 %	E:W2 %	E:W3 %	Exp β W1–2	SE W1–2	P-value W1–2	Exp β W1–3	SE W1–3	P-value W1–3
Low household income ^a	82.3	75.8	68.2	64.4	57.0	51.6	0.92	0.41	0.834	0.78	0.45	0.585
Benefits are main income	75.7	66.8	62.6	44.9	55.8	55.4	0.42	0.39	0.024	0.35	0.44	0.017
Lowest IMD quintile ^b	37.3	33.2	31.8	46.5	46.5	45.1	0.84	0.38	0.633	0.83	0.43	0.673
Struggling financially ^c	32.1	35.3	38.4	31.4	38.4	29.8	0.85	0.39	0.672	1.42	0.46	0.439
Acute housing problems	9.1	10.5	14.8	9.9	18.6	20.2	0.56	0.58	0.318	0.75	0.62	0.643
Foodbank or charity use	22.7	17.9	22.3	13.1	19.8	25.8	0.46	0.50	0.113	0.42	0.53	0.108

Table 2.12: Difference-in-difference analysis of the impact of MUP on respondents' experiences of deprivation

Key: S: Scotland; E: England; W: wave; β: coefficient of intervention effect parameter in difference-in difference model; SE: standard error; P-value: p-value for statistical significance of Beta parameter.

^a Household income less than £300 per week; ^b Live in most deprived Index of Multiple Deprivation quintile for Scotland or England; ^c Finding it quite or very difficult to manage financially.

Negative impact of drinking on	S:W1	S:W2	S:W3	E:W1	E:W2	E:W3	Εχρ β	SE	P-value	Εχρ β	SE	P-value
	%	%	%	%	%	%	W1–2	W1–2	W1-2	W1–3	W1–3	W1–3
Feelings about parenting	17.3	16.8	22.0	13.8	19.8	24.6	0.63	0.50	0.348	0.66	0.54	0.439
Getting children to school / appointments	3.4	9.5	10.3	4.4	7.0	1.8	1.82	0.84	0.474	8.15	1.28	0.100
Children having treats	5.6	8.9	9.7	6.7	9.3	1.8	1.15	0.71	0.839	7.01	1.21	0.109
Children having to act more grown up	9.9	11.1	13.1	5.2	8.1	5.4	0.70	0.72	0.616	1.33	0.87	0.744

Table 2.13: Difference-in-difference analysis of the impact of MUP on respondents' perceptions of their parenting.

Key: S: Scotland; E: England; W: wave; β: coefficient of intervention effect parameter in difference-in difference model; SE: Standard error; P-value: p-value for statistical significance of Beta parameter.

Involvement in crime	S:W1 %	S:W2 %	S:W3 %	E:W1 %	E:W2 %	E:W3 %	β W1–2	SE W1–2	P-value W1–2	β W1–3	SE W1–3	P-value W1–3
Illegal activity	14.3	13.2	8.9	10.4	12.8	18.1	-0.4	0.6	0.509	-1.2	0.6	0.064
Shoplifting	2.3	6.8	7.8	2.8	7.2	9.5	1.16	0.98	0.878	1.00	1.02	1.000
Selling drugs	6.0	1.6	1.6	2.1	1.2	0.0	0.44	1.43	0.560	8.7E ⁶	5.6E ³	0.998
Theft vehicle	0.6	0.0	0.0	2.7	1.2	0.0	0.00	2.9E ³	0.996	4.66	6.6E ³	1.000
Other theft/robbery	0.0	0.5	1.1	0.8	1.2	0.8	5.5E ⁶	3.1E ³	0.996	1.7E ⁷	3.1E ³	0.996
Fraud or forgery	0.7	0.0	0.0	0.8	0.0	0.0	1.22	5.3E ³	1.000	1.22	6.6E ³	1.000
Handling stolen goods	2.9	2.1	1.5	3.5	3.6	0.6	0.70	1.08	0.739	3.23	2.12	0.580
Assault or violence	4.7	5.3	4.2	5.4	6.0	9.8	1.01	0.83	0.989	0.47	0.89	0.387
Victim of crime	15.4	10.0	12.9	15.1	16.3	13.2	-0.6	0.5	0.230	-0.1	0.6	0.917
Assault or violence	11.7	6.8	6.2	8.9	13.3	8.4	0.36	0.62	0.097	0.53	0.77	0.411
Theft, burglary, robbery	3.9	5.3	8.0	8.1	8.4	4.8	1.31	0.76	0.722	3.74	0.92	0.152
Any other crime	1.8	0.0	3.1	1.3	0.0	0.0	0.69	5.3E ³	1.000	3.5E ⁷	5.6E ³	0.998
Police called to domestic argument	18.0	5.8	12.7	11.7	4.8	2.9	0.73	0.72	0.659	2.91	0.95	0.263

Table 2.14: Difference-in-difference analysis of the impact of MUP on respondents' involvement in crime

Key: S: Scotland; E: England; W: wave; β: coefficient of intervention effect parameter in difference-in difference model; SE: Standard error; P-value: p-value for statistical significance of Beta parameter.

Sample size	Scotland wave 1	Scotland wave 2	Scotland wave 3	England wave 1	England wave 2	England wave 3
Drank cheap alcohol	98	11	20	48	38	17
Illicit substances	58	53	38	25	25	20
Poor health	83	100	68	40	42	28
Economically vulnerable	70	66	51	26	29	20
Dependent children	44	46	44	35	36	25
Total sample size	170	190	123	85	86	52

Table 2.15: Number of respondents in each non-mutually exclusive subgroup

Alcohol consumption ^a : mean units consumed	Scotland wave 1	Scotland wave 2	Scotland wave 3	England wave 1	England wave 2	England wave 3
Whole sample	187.5	168.0	192.0	167.9	147.4	179.9
Drank cheap alcohol	217.6	226.9	233.2	198.5	197.2	256.9
Illicit substances	194.9	206.6	270.8	235.0	173.9	217.5
Poor health	190.1	180.4	210.5	186.1	167.8	206.1
Economically vulnerable	204.4	215.5	245.0	163.3	151.4	195.7
Dependent children	180.8	204.4	196.9	166.7	152.0	181.8

Table 2.16: Descriptive statistics for alcohol consumption, expenditure anddependence by subgroup^a

Alcohol consumption ^a : SD of units consumed	Scotland wave 1	Scotland wave 2	Scotland wave 3	England wave 1	England wave 2	England wave 3
Whole sample	132.1	121.5	142.1	107.0	112.8	134.1
Drank cheap alcohol	138.1	162.6	143.1	115.0	123.4	163.0
Illicit substances	128.4	170.8	174.0	147.6	135.8	192.2
Poor health	149.3	110.0	156.6	91.7	128.1	157.7
Economically vulnerable	158.6	158.6	158.3	87.6	122.6	160.7
Dependent children	160.6	182.8	123.7	114.4	121.7	122.8

Alcohol consumptionª: any cider ≥7.5% ABV	Scotland wave 1	Scotland wave 2	Scotland wave 3	England wave 1	England wave 2	England wave 3
Whole sample	25.0	9.5	6.7	19.4	12.8	8.0
Drank cheap alcohol	39.4	27.3	9.3	33.8	29.0	26.8
Illicit substances	36.0	17.0	15.5	31.4	24.0	15.4

Poor health	22.2	9.0	5.1	13.7	19.1	15.4
Economically vulnerable	31.4	10.6	15.3	40.2	27.6	18.9
Dependent children	34.6	10.9	1.7	21.9	11.1	11.6

Alcohol expenditure: 1st drink <£0.50pu (%)	Scotland wave 1	Scotland wave 2	Scotland wave 3	England wave 1	England wave 2	England wave 3
Whole sample	56.2	12.1	19.5	53.3	43.0	33.0
Drank cheap alcohol	84.9	90.9	96.7	85.0	89.2	90.5
Illicit substances	62.8	20.4	25.3	71.9	48.0	45.5
Poor health	59.6	10.0	13.1	65.1	42.5	47.1
Economically vulnerable	61.4	13.3	25.0	79.9	55.2	55.7
Dependent children	56.3	18.6	28.9	63.8	41.7	56.6

Key: ^a All figures should be interpreted with caution due to small case numbers (see Table 2.15 for sample sizes).

Table 2.17: Descriptive statistics for alcohol consumption, expenditure anddependence by subgroup (continued)^a

Mean total spending (£) ^a	Scotland wave 1	Scotland wave 2	Scotland wave 3	England wave 1	England wave 2	England wave 3
Whole sample	82.6	95.2	106.9	77.3	68.7	89.9
Drank cheap alcohol	79.3	93.2	99.9	70.6	65.5	83.2
Illicit substances	90.2	109.1	146.0	86.2	68.6	85.2
Poor health	86.7	107.1	117.3	83.9	72.5	91.1
Economically vulnerable	77.8	113.7	126.4	59.5	58.3	80.0
Dependent children	79.9	102.4	103.5	74.1	73.2	88.0

SD of total spending	Scotland wave 1	Scotland wave 2	Scotland wave 3	England wave 1	England wave 2	England wave 3	
Whole sample	59.4	60.6	76.8	49.0	51.4	64.7	
Drank cheap alcohol	58.8	68.2	71.6	37.0	46.2	56.2	
Illicit substances	63.2	68.7	98.0	48.9	56.4	88.6	
Poor health	68.4	66.8	81.4	43.9	55.0	66.1	
Economically vulnerable	61.4	66.2	86.3	33.9	42.1	60.8	
Dependent children	73.1	72.1	63.4	56.9	59.1	59.2	

Mean ppu (£)	Scotland wave 1	Scotland wave 2	Scotland wave 3	England wave 1	England wave 2	England wave 3
Whole sample	0.49	0.60	0.59	0.5	0.59	0.55
Drank cheap alcohol	0.36	0.44	0.42	0.37	0.34	0.34
Illicit substances	0.50	0.58	0.54	0.42	0.46	0.48
Poor health	0.51	0.60	0.59	0.48	0.54	0.49
Economically vulnerable	0.44	0.59	0.52	0.40	0.50	0.46

Dependent children	0.48	0.59	0.56	0.51	0.60	0.51	
SD of ppu (£)	Scotland wave 1	Scotland wave 2	Scotland wave 3	England wave 1	England wave 2	England wave 3	
Whole sample	0.25	0.18	0.19	0.2	0.33	0.21	
Drank cheap alcohol	0.11	0.04	0.07	0.10	0.10	0.10	
Illicit substances	0.29	0.13	0.11	0.14	0.25	0.18	
Poor health	0.28	0.16	0.13	0.18	0.29	0.17	
Economically vulnerable	0.20	0.18	0.09	0.14	0.32	0.26	
Dependent children	0.32	0.17	0.15	0.24	0.33	0.26	

Key: ^a All figures should be interpreted with caution due to small case numbers (see Table 2.15 for sample sizes).

Alcohol dependence: Mean SADQ score	Scotland wave 1	Scotland wave 2	Scotland wave 3	England wave 1	England wave 2	England wave 3
Whole sample	39.4	36.1	37.3	29.5	30.1	37.3
Drank cheap alcohol	40.3	40.8	40.6	33.6	35.3	32.8
Illicit substances	43.2	44.4	48.6	38.3	39.2	35.9
Poor health	40.6	39.6	43.1	37.1	34.7	37.0
Economically vulnerable	41.5	46.3	45.6	33.9	68.3	36.0
Dependent children	39.8	40.9	39.4	27.9	31.3	33.6

Table 2.18: Descriptive statistics for alcohol consumption, expenditure anddependence by subgroup (continued)^a

Alcohol dependence: SD of SADQ score	Scotland wave 1	Scotland wave 2	Scotland wave 3	England wave 1	England wave 2	England wave 3
Whole sample	14.0	16.8	18.2	15.5	16.0	14.3
Drank cheap alcohol	14.9	16.1	20.5	14.7	14.8	13.6
Illicit substances	14.6	13.0	9.4	11.3	13.1	14.2
Poor health	14.3	16.1	15.7	13.4	17.5	12.1
Economically vulnerable	13.8	13.3	13.4	12.9	16.1	8.3
Dependent children	15.8	15.3	17.8	16.0	15.4	14.6

Alcohol dependence: Mild (SADQ 0–15, %)	Scotland wave 1	Scotland wave 2	Scotland wave 3	England wave 1	England wave 2	England wave 3
Whole sample	10.8	16.0	17.6	21.4%	24.4	16.4
Drank cheap alcohol	9.2	9.1	24.0	17.5	10.5	15.5
Illicit substances	8.4	3.9	0.0	0.0	0.0	6.0
Poor health	9.0	11.2	9.4	9.7	21.4	1.6
Economically vulnerable	6.3	4.7	5.3	10.5	10.3	5.1
Dependent children	14.7	10.9	10.9	28.9	19.4	7.4

Alcohol dependence: Mod. (SADQ 16–30, %)	Scotland wave 1	Scotland wave 2	Scotland wave 3	England wave 1	England wave 2	England wave 3
Whole sample	15.3	22.5	14.1	33.	27.9	32.6
Drank cheap alcohol	13.3	18.2	7.7	19.9	29.0	13.9

Illicit substances	10.7	11.5	4.5	25.7	28.0	32.9
Poor health	14.2	18.4	8.0	20.5	19.1	29.9
Economically vulnerable	11.2	9.4	3.7	26.0	20.7	13.5
Dependent children	10.2	17.4	19.0	29.6	33.3	32.3

Alcohol dependence: Severe (SADQ 31-60, %)	Scotland wave 1	Scotland wave 2	Scotland wave 3	England wave 1	England wave 2	England wave 3	
Whole sample	74.0	61.5	68.3	44.8	47.7	51.1	
Drank cheap alcohol	77.6	72.7	68.3	62.6	60.5	70.6	
Illicit substances	80.9	84.6	95.5	74.3	72.0	61.1	
Poor health	76.8	70.4	82.7	69.9	59.5	68.4	
Economically vulnerable	82.5	85.9	91.0	63.5	69.0	81.5	
Dependent children	75.1	71.7	70.1	41.5	47.2	60.3	

Key: ^a All figures should be interpreted with caution due to small case numbers (see Table 2.15 for sample sizes).

Prescribed benzodiazepines, antidepressants or painkillers (%)	Scotland wave 1	Scotland wave 2	Scotland wave 3	England wave 1	England wave 2	England wave 3
Whole sample	63.7	62.1	55.1	72.3	60.5	66.2
Drank cheap alcohol	59.8	72.7	49.0	76.9	57.9	57.3
Illicit substances	44.3	43.4	32.6	72.3	48.0	60.0
Poor health	76.3	69.0	62.8	81.9	64.3	63.3
Economically vulnerable	63.5	62.1	54.0	81.1	51.7	67.8
Dependent children	58.1	56.5	53.4	66.2	63.9	50.1
Illicitly obtained benzodiazepines, antidepressants or painkillers (%)	Scotland wave 1	Scotland wave 2	Scotland wave 3	England wave 1	England wave 2	England wave 3
Whole sample	14.9	13.2	9.8	2.5	10.5	2.9
Drank cheap alcohol	17.7	9.1	12.7	1.5	13.2	4.0
Illicit substances	40.0	47.2	37.9	9.5	36.0	10.2
Poor health	12.1	15.0	10.8	2.9	16.7	5.5
Economically vulnerable	22.0	25.8	18.9	5.4	24.1	5.1
Dependent children	19.3	21.7	19.0	0.0	11.1	3.6
All other illicit substances (%)	Scotland wave 1	Scotland wave 2	Scotland wave 3	England wave 1	England wave 2	England wave 3
Whole sample	30.9	22.1	24.1	25.4	26.7	26.8
Drank cheap alcohol	33.9	45.5	23.4	33.5	31.6	29.0
Illicit substances	82.9	79.3	93.8	97.7	92.0	95.8
Poor health	28.8	20.0	28.7	32.5	38.1	43.9
Economically vulnerable	29.1	34.9	42.1	51.0	51.7	45.7
Dependent children	45.0	26.1	28.4	24.3	30.6	28.9
Cannabis (%)	Scotland wave 1	Scotland wave 2	Scotland wave 3	England wave 1	England wave 2	England wave 3
Whole sample	21.6	18.9	15.2	11.4	15.1	16.6
Drank cheap alcohol	25.1	45.5	14.9	17.8	13.2	20.3
Illicit substances	57.9	67.9	59.2	44.0	52.0	59.4
Poor health	21.6	19.0	18.6	17.9	21.4	27.0

Table 2.19: Descriptive statistics for other substance use by subgroup^a

Economically vulnerable	24.8	30.3	30.9	26.6	27.6	27.3
Dependent children	31.8	15.2	17.7	9.4	19.4	15.1
Amphetamines (%)	Scotland wave 1	Scotland wave 2	Scotland wave 3	England wave 1	England wave 2	England wave 3
Whole sample	2.5	1.6	2.4	2.8	0.0	7.0
Drank cheap alcohol	3.0	0.0	4.6	5.3	0.0	8.7
Illicit substances	6.7	5.7	9.2	10.9	0.0	24.9
Poor health	2.5	2.0	3.4	5.9	0.0	13.5
Economically vulnerable	6.5	3.0	3.1	8.5	0.0	15.7
Dependent children	7.2	2.2	1.9	1.6	0.0	9.4

Key: ^a All figures should be interpreted with caution due to small case numbers (see Table 2.15 for sample sizes).

Heroin (%)	Scotland wave 1	Scotland wave 2	Scotland wave 3	England wave 1	England wave 2	England wave 3
Whole sample	6.7	5.8	4.7	4.5	8.1	7.3
Drank cheap alcohol	11.3	18.2	0.0	4.9	2.6	11.7
Illicit substances	17.9	20.8	18.2	17.3	28.0	26.2
Poor health	6.6	8.0	5.6	9.4	11.9	9.0
Economically vulnerable	13.9	13.6	11.1	12.7	20.7	16.7
Dependent children	9.5	4.3	6.9	9.6	11.1	7.5
Cocaine (%)	Scotland wave 1	Scotland wave 2	Scotland wave 3	England wave 1	England wave 2	England wave 3
Whole sample	11.8	4.2	8.9	12.6	14.0	19.1
Drank cheap alcohol	12.1	0.0	13.8	14.3	21.1	17.6
Illicit substances	31.6	15.1	32.3	48.4	48.0	68.1
Poor health	13.7	3.0	8.5	10.0	21.4	30.5
Economically vulnerable	12.1	6.1	13.2	18.9	31.0	34.3
Dependent children	19.2	6.5	12.4	11.5	16.7	28.9
Methadone (%)	Scotland wave 1	Scotland wave 2	Scotland wave 3	England wave 1	England wave 2	England wave 3
Whole sample	11.0	9.5	8.4	4.0	10.5	8.8
Drank cheap alcohol	17.2	18.2	19.1	7.5	7.9	11.5
Illicit substances	26.8	26.4	18.7	10.1	36.0	31.4
Poor health	12.2	12.0	6.6	8.3	16.7	15.3
Economically vulnerable	19.5	18.2	20.1	5.4	27.6	15.9
Dependent children	16.8	10.9	10.6	6.4	13.9	8.1
Other illicit substances (%)	Scotland wave 1	Scotland wave 2	Scotland wave 3	England wave 1	England wave 2	England wave 3
Whole sample	1.2	0.0	0.0	4.6	0.0	0.0
Drank cheap alcohol	1.3	0.0	0.0	2.6	0.0	0.0
Illicit substances	3.2	0.0	0.0	17.9	0.0	0.0

Table 2.20: Descriptive statistics for other substance use by subgroup (continued)^a

Poor health	0.0	0.0	0.0	1.4	0.0	0.0
Economically vulnerable	0.0	0.0	0.0	5.5	0.0	0.0
Dependent children	0.0	0.0	0.0	3.4	0.0	0.0
Tobacco (%)	Scotland wave 1	Scotland wave 2	Scotland wave 3	England wave 1	England wave 2	England wave 3
Whole sample	55.9	56.3	67.4	55.4	54.7	61.8
Drank cheap alcohol	72.4	90.9	91.1	64.3	63.2	77.9
Illicit substances	88.0	86.8	93.5	87.1	92.0	95.8
Poor health	68.0	64.0	81.8	61.8	59.5	82.1
Economically vulnerable	74.3	78.8	86.5	81.9	75.9	88.2
Dependent children	74.2	58.7	66.1	62.4	69.4	66.0

Key: ^a All figures should be interpreted with caution due to small case numbers (see Table 2.15 for sample sizes).

Health domain ^b : mobility (%)	Scotland wave 1	Scotland wave 2	Scotland wave 3	England wave 1	England wave 2	England wave 3
Whole sample	18.9	16.8	12.5	12.3	8.1	7.9
Drank cheap alcohol	19.2	27.3	13.5	17.0	13.2	14.2
Illicit substances	16.1	17.0	10.5	8.2	8.0	15.1
Poor health	40.4	32.0	23.8	25.5	16.7	14.6
Economically vulnerable	19.3	10.6	6.0	11.2	10.3	10.4
Dependent children	21.1	23.9	8.9	5.1	0.0	9.0
Health domain ^b : self- care (%)	Scotland wave 1	Scotland wave 2	Scotland wave 3	England wave 1	England wave 2	England wave 3
Whole sample	7.4	6.3	10.5	3.8	2.3	0.9
Drank cheap alcohol	8.9	0.0	8.5	4.6	2.6	2.8
Illicit substances	6.4	3.8	8.7	4.9	0.0	3.0
Poor health	15.9	12.0	20.0	8.0	4.8	1.6
Economically vulnerable	13.3	6.1	3.1	0.0	0.0	2.6
Dependent children	7.2	8.7	3.8	3.1	0.0	1.8
Health domain ^b : usual activities (%)	Scotland wave 1	Scotland wave 2	Scotland wave 3	England wave 1	England wave 2	England wave 3
Whole sample	16.6	16.9	17.2	14.8	11.6	12.5
Drank cheap alcohol	18.3	9.1	8.5	17.7	10.5	5.5
Illicit substances	13.0	23.1	8.7	10.4	16.0	24.6
Poor health	35.5	32.0	32.6	30.7	23.8	23.2
Economically vulnerable	15.0	19.7	10.2	13.7	6.9	18.4
Dependent children	21.5	15.2	3.8	9.7	5.6	20.2
Health domain ^b : pain or discomfort (%)	Scotland wave 1	Scotland wave 2	Scotland wave 3	England wave 1	England wave 2	England wave 3
Whole sample	18.9	22.6	22.1	24.3	23.3	17.7
Drank cheap alcohol	17.7	27.3	13.5	32.9	21.1	17.4
Illicit substances	13.0	26.4	11.0	23.3	32.0	29.8
Poor health	40.4	43.0	42.1	50.7	47.6	32.8

Table 2.21: Descriptive statistics for health status by subgroup^a

Economically vulnerable	20.0	24.2	23.5	10.8	27.6	15.9
Dependent children	12.1	28.3	10.9	24.8	25.0	22.1

Key: ^a All figures should be interpreted with caution due to small case numbers (see Table 2.15 for sample sizes). ^b EQ-5D-5L – Score of 4 (severe problems) or 5 (extreme problems). ^c EQ-5D-5L Visual Analogue Scale.

Anxiety or depression (%)	Scotland wave 1	Scotland wave 2	Scotland wave 3	England wave 1	England wave 2	England wave 3
Whole sample	28.2	36.3	35.8	36.7	37.2	46.0
Drank cheap alcohol	27.5	36.4	35.7	44.9	39.5	56.2
Illicit substances	26.2	35.9	47.2	59.4	56.0	77.1
Poor health	60.0	69.0	68.1	76.4	76.2	85.5
Economically vulnerable	25.7	48.5	48.9	55.3	62.1	76.9
Dependent children	43.6	45.7	33.8	29.7	41.7	49.3
Self-rating of health (0–100) ^c : Mean rating	Scotland wave 1	Scotland wave 2	Scotland wave 3	England wave 1	England wave 2	England wave 3
Whole sample	50.3	49.4	48.2	54.7	56.1	56.1
Drank cheap alcohol	46.9	53.6	41.9	52.9	51.6	57.7
Illicit substances	45.2	47.8	48.4	52.5	44.8	43.0
Poor health	40.4	39.7	41.1	41.0	44.6	46.5
Economically vulnerable	45.7	45.8	45.3	53.2	44.1	48.7
Dependent children	48.7	48.5	49.6	58.0	58.6	57.5
Self-rating of health (0–100) ^c : SD of rating	Scotland wave 1	Scotland wave 2	Scotland wave 3	England wave 1	England wave 2	England wave 3
Whole sample	21.7	22.8	21.7	23.2	23.3	22.1
Drank cheap alcohol	21.4	22.1	21.8	20.9	22.4	20.4
Illicit substances	20.9	22.5	20.5	22.9	21.3	20.4
Poor health	18.6	20.8	21.8	21.9	23.1	22.3
Economically vulnerable	18.9	21.1	22.3	23.3	23.2	21.5
Dependent children	22.1	25.1	20.3	25.6	23.3	24.1

Table 2.22: Descriptive statistics for health status by subgroup (continued)^a

Key: ^a All figures should be interpreted with caution due to small case numbers (see Table 2.15 for sample sizes). ^b EQ-5D-5L – score of 4 (severe problems) or 5 (extreme problems). ^c EQ-5D-5L Visual Analogue Scale.

Low household income ^b (%)	Scotland wave 1	Scotland wave 2	Scotland wave 3	England wave 1	England wave 2	England wave 3
Whole sample	82.3	75.8	68.2	64.4	57.0	51.6
Drank cheap alcohol	85.3	90.9	76.4	72.9	73.7	62.2
Illicit substances	92.2	92.5	95.2	94.5	72.0	71.7
Poor health	81.6	80.0	85.6	74.4	71.4	69.5
Economically vulnerable	98.9	98.5	98.4	100.0	89.7	100.0
Dependent children	85.1	73.9	68.5	51.6	63.9	58.2
Benefits are main income (%)	Scotland wave 1	Scotland wave 2	Scotland wave 3	England wave 1	England wave 2	England wave 3
Whole sample	75.7	66.8	62.6	44.9	55.8	55.4
Drank cheap alcohol	79.1	72.7	80.4	55.0	71.1	64.0
Illicit substances	82.2	88.7	85.8	63.8	92.0	79.5
Poor health	80.6	77.0	75.6	52.0	78.6	85.1
Economically vulnerable	93.6	97.0	91.6	83.3	93.1	100.0
Dependent children	77.6	69.6	70.0	36.7	61.1	73.0
Live in most deprived quintile (%)	Scotland wave 1	Scotland wave 2	Scotland wave 3	England wave 1	England wave 2	England wave 3
Whole sample	37.3	33.2	31.8	46.5	46.5	45.1
Drank cheap alcohol	40.5	36.4	57.6	43.1	57.9	31.0
Illicit substances	49.1	41.5	49.7	41.4	60.0	35.8
Poor health	38.6	28.0	39.3	44.4	45.2	37.7
Economically vulnerable	39.9	33.3	34.2	49.4	48.3	28.9
Dependent children	42.5	32.6	33.9	45.2	58.3	30.9
Struggling financially ^c (%)	Scotland wave 1	Scotland wave 2	Scotland wave 3	England wave 1	England wave 2	England wave 3
Whole sample	32.1	35.3	38.4	31.4	38.4	29.8
Drank cheap alcohol	40.2	36.4	29.9	39.4	39.5	39.3

Table 2.23: Descriptive statistics for deprivation outcomes by subgroup^a

Illicit substances	43.3	49.1	56.2	59.1	64.0	59.0
Poor health	37.8	41.0	44.6	44.4	57.1	46.8
Economically vulnerable	71.9	84.8	77.6	91.6	82.8	73.5
Dependent children	43.9	47.8	34.6	34.0	41.7	26.6

Key: ^a All figures should be interpreted with caution due to small case numbers (see Table 2.15 for sample sizes). ^b Household income less than £300 per week; ^c Finding it quite or very difficult to manage financially.

Acute housing problems (%)	Scotland wave 1	Scotland wave 2	Scotland wave 3	England wave 1	England wave 2	England wave 3
Whole sample	9.1	10.5	14.8	9.9	18.6	20.2
Drank cheap alcohol	11.7	36.4	32.4	10.8	23.7	42.4
Illicit substances	12.4	18.9	27.5	21.7	36.0	52.8
Poor health	5.3	11.0	15.3	10.1	26.2	30.5
Economically vulnerable	22.1	25.8	30.4	33.1	48.3	52.3
Dependent children	12.9	13.0	15.6	11.5	19.4	25.8
Foodbank or charity use (%)	Scotland wave 1	Scotland wave 2	Scotland wave 3	England wave 1	England wave 2	England wave 3
Whole sample	22.7	17.9	22.3	13.1	19.8	25.8
Drank cheap alcohol	26.4	45.5	29.1	18.6	23.7	37.1
Illicit substances	29.4	32.1	41.2	37.0	52.0	47.9
Poor health	20.9	20.0	28.9	20.2	28.6	29.7
Economically vulnerable	57.8	48.5	50.5	51.7	55.2	67.2
Dependent children	32.7	26.1	22.8	16.6	16.7	29.3

Table 2.24: Descriptive statistics for deprivation outcomes by subgroup (continued)^a

Key: ^a All figures should be interpreted with caution due to small case numbers (see Table 2.15 for sample sizes). ^b Household income less than £300 per week. ^c Finding it quite or very difficult to manage financially.

2.8. Data collection instruments

The following sections include examples of the structured questionnaire and visual aids used to collect data in WP1.

2.8.1. Structured interview questionnaire for Scotland (wave 1) and England (all

waves)

	Time interview commenced	1 1	1-1	1	1 am/	mm	
	Time interview commenced	II	_1.1		_ ann	pm	
	Time interview finished	II	_ :		_ am/	pm	
Country	(Please circle one) Scotland / E	ngland					
Service name	12						
Interviewer init	ials						
Have you pr	eviously completed this question	nnaire?					-2
Completed	luring Baseline wave 1 (Nov 201)	- April	2018)	V	No No		
Don't Know	(circle)	- April	conoj				
Completed	huring wave 2 (Aug 2048 Eab 2)	1401		Ve	No	Der	-14
Completed o	luring wave 2 (Aug 2016 - Feb 20	119)		re	S NO	DOI	1.1
Know (circl	e)						
Know (circl	e) eted during THIS wave (i.e. wa	ve 3, co	mmer	ncing	Octo	ober	 2019), t
Know (circl f previously comple person is ineligible).	e) eted during THIS wave (i.e. wa	ve 3, co	mmer	ncing	Octo	ober	 2019), t
Know (circl of previously comple person is ineligible).	e) eted during THIS wave (i.e. wa num unit price study	ve 3, co	mmer	ncing	Octo	ober	
Know (circl of previously comple person is ineligible). Alcohol minim Service user ques	eted during THIS wave (i.e. wa num unit price study stionnaire	ve 3, co	mmer	ncing	Octo	ober	
Know (circl of previously comple person is ineligible). Alcohol minim Service user ques	eted during THIS wave (i.e. wa num unit price study stionnaire	ve 3, co	mmer	ncing	Octo	ober	
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Know (circl of previously comple person is ineligible). Alcohol minim Service user ques Interview checklist Prior to interview • Written partic	eted during THIS wave (i.e. wa num unit price study stionnaire	ve 3, co	mmer	ncing	Octo	ober	
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FOII	owing	Interview	
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Reimbursement offered

Unique identifier generated

Request to contact for qualitative interview

Request for record linkage

Participant ID code: |_____ |__ |__ |__ |__ |__ | (e.g. ED RC 14 02 18 PB 06)

Region | Agency | date consent form received |Initials of staff receiving consent|# of consent form that day

IRAS reference Questionnaire version Date 226391 4.0 ENGLAND WAVE 3 04 September 2019

Section A: About you	
A1. What is your age? (Age at last birthda	y in years) []
A2. What is your gender? (Please tick one)
Male	I prefer to self-describe as
Female	□ I prefer not to say
Non binary/third gender	
A3. What is the highest level of education	you have completed or are undertaking?
No qualifications	
Qualifications at level 1 and be	elow
□ Scottish Standards, GCSE/O equivalents	Levels, Trade Apprenticeships, NVQ level 2 and
Scottish Highers, A level, voca	ational level 3 and equivalents
Other higher education below	degree level
Degree or equivalent or above	8
Don't know	
□ Other (please specify)	<u>~</u>
A4. How would you describe your relations	ship status? (Please tick one)
□ Single	Separated
In a relationship, not living together	er 🗆 Divorced
In a relationship, living together	Widowed
Married	
Other	<u>n</u>
I prefer not to say	
□ I prefer not to say	

🗆 Yes	🗆 No	I prefer not to say
A6. Who do you currently live with? you lived before admission]	[If you are in inpatient ca	re/rehab, please indicate with whom
□ I live alone		
OR(Please tick all that apply)		
□ Parent(s)		□ Friend/s
□ Partner/spouse		 Housemates (who are not friends)
Child(ren) How many aged	5 or less? 6-12 years? 13-17 years?	□ Other
□ Other family member/s _		
A7. What kind of housing do you cur indicate where you lived before adm	rently live in? [If you are ission] (<i>Please tick one</i>)	in inpatient care/rehab, please
House/flat that I own/am buy	ying 🗆 Frie	end's place
House/flat that I rent private	ly □ Ca	ravan
Social housing	🗆 Ho	stel
Parents' / family's place	🗆 Sh	elter/refuge
Partner's place	🗆 No	usual residence/homeless
Other (please specify)		
A8. In the past 3 months have you e tick one)	xperienced acute housir	ng problems/homelessness*? (Pleas
or stay at a night shelter or hostel, or s	leep on different friends' floor/	sofas each night.
49-a What is your postcode?		

A9-c. If you have no usual resi	dence please, provide the					
name of suburb/local area whe	re you spend most nights	the last 3 months? (Diagon tick				
one)	s applies to what you were doing in	the last 5 months? (Please lick				
In paid employment of the second s	or self-employment (or away tempora	arily)				
Please specify	O Full time (35+ hours a week)					
traction:	O Part time (regular hours). Hou	O Part time (regular hours). Hours per week?				
	O Part time (irregular, casual). H	lours per week?				
On a Government sci	heme for employment training					
Looking for paid work	or a Government training scheme					
Intending to look for v	work but prevented by temporary sic	kness or injury				
Permanently unable f	to work because of long term sickne	ss or disability				
Retired from paid work	rk					
Going to school or co	llege full-time (including on vacation)				
Looking after the hon	ne or family					
Doing unpaid work for	r a business that you own, or that a	relative owns				
Waiting to take up pa	id work already obtained					
Doing something else Answer should represent the times for more than one categ	e (please specify) majority of the last 3 months, not just the mo pory, select that which best represents the co	ost recent selection. If there are equal urrent situation.				
A11-a. What were your sources	of income in the last 3 months? (Pla	ease tick all)				
A11-b. What was your main sou	rce of income in the last month? (P)	lease circle one)				
Wage or salary	Partner	Sex work				
Pension (specify)	 Family (e.g. parents, siblings) 	Begging				
		— • • • • • • •				
Benefit: NOT UC (spec	Loans or pawning items	Criminal activity				
Benefit: NOT UC (spec Child support (from other parent)	 Loans or pawning items Betting 	Criminal activity				

Other main source of income (please specify)

I prefer not to say

*If UC, can you remember approx. when you started on UC? □ No □ Yes: month ____ year____

Are your payments now made:
Monthly
Fortnightly
Other interval (specify)

Has switching to UC made a difference to you? Yes / No

What is the main difference it has made to you?

A12. Please look at this table and tell me which group best represents your total (legal) household income before deductions for income tax, National Insurance, etc (*Please tick income band*)

INCOME BAND	WEEKLY	MONTHLY	ANNUAL
	Up to £99	Up to £432	Up to £5,199
	£100 up to £199	£433 up to £866	£5,200 up to £10,399
	£200 up to £299	£867 up to £1,299	£10,400 up to £15,599
	£300 up to £399	£1,300 up to £1,732	£15,600 up to £20,799
	£400 up to £499	£1,733 up to £2,166	£20,800 up to £25,999
	£500 up to £699	£2,167 up to £3,032	£26,000 up to £36,399
	£700 up to £999	£3,033 up to £4,332	£36,400 up to £51,999
	£1000 or more	£4,333 or more	£52,000 or more
	I prefer not to say		

A13. How well would you say you yourself are managing financially these days? Would you say you are ...

- Living comfortably
- Doing alright
- Just about getting by
- Finding it quite difficult
- Finding it very difficult

A14. Which of the following best describes your ethnic and national background? (Please tick)
	Scottish	English	Other British	Other (write in)
White				
Asian				
African				
Caribbean or Black		2		
Mixed (write in)				
Other (write in)	3			

OR I prefer not to say

Researcher: OK, thanks for providing that information about yourself. Now I'm going to ask some questions about how you have been feeling in different areas of your life. Section B: How are you? Under each heading, please tick the ONE box that best describes your health TODAY B1. Mobility I have no problems in walking about I have slight problems in walking about I have moderate problems in walking about I have severe problems in walking about I am unable to walk about B2. Self-care I have no problems washing or dressing myself I have slight problems washing or dressing myself I have moderate problems washing or dressing myself I have severe problems washing or dressing myself I am unable to wash or dress myself B3. Usual activities (e.g. work, study, housework, family or leisure activities) I have no problems doing my usual activities I have slight problems doing my usual activities I have moderate problems doing my usual activities I have severe problems doing my usual activities I am unable to do my usual activities B4. Pain / discomfort I have no pain or discomfort I have slight pain or discomfort I have moderate pain or discomfort I have severe pain or discomfort I have extreme pain or discomfort B5. Anxiety / depression I am not anxious or depressed I am slightly anxious or depressed I am moderately anxious or depressed I am severely anxious or depressed I am extremely anxious or depressed B6. We would like to know how good or bad your health is TODAY



Researcher: The next few questions are about your alcohol and drug use in general, and then about what types of treatment you may have had. After that, I'll ask you in more detail about what your drinking was like before you came into this service [or if recruited from a liver clinic or GP surgery "I'll ask you in more detail about your drinking"]

Section C: Which substances have you used?

C1-a. In the past 12 months, which of the following substances have you used? (Please tick all that apply)

C1-b. In the 30 days before entering treatment, which of these did you use? [or if recruited from a liver clinic or GP surgery "In the last 30 days, which of these did you use?"] (*Please tick all that apply*)

C1-c. Which substance is causing you greatest concern? (Please number top 3 in order)

Substance	Used past 12 months (Please tick)	Used past 30 days (only if used past 12 months)	Greatest concern (Please number from 1 up to 3)
Alcohol			
Tobacco			
Cannabis			
Amphetamine		8	
Heroin			
Methadone			
Benzodiazepines e.g. Valium, Xanax		10	
If used benzos in past 30 days, please tick whether: Please list types of benzos used (if		 Prescribed only Non-prescribed only (i.e. illicit) Both 	
Antidepressants e.g. Prozac, Cipramil, Efexor If used antidepressants in past 30 days, please tick whether: Please list types of antid's used (if known):		o Prescribed only o Non-prescribed only (i.e. illicit) o Both	
Painkillers e.g. Morphine, Gabapentin and <u>excluding</u> those available "over the counter" If used non-OTC painkillers in past 30 days, please tick whether: Please list types of painkillers used (if known):		o Prescribed only o Non-prescribed only (i.e. illicit) o Both	
"Legal highs" e.g. Spice Please list types of 'legal highs' (if known):			
Any other drugs not listed above 1 (please specify):			
Any other drugs not listed above 2 (please specify):			

C2. AUDIT: Thinking about the past 12 months (please refer to units guide for questions 2 & 3)

	0	1	2	3	4
 How often do you have a drink containing alcohol? 	Never	Monthly or less	2-4 times a month	2-3 times a week	4 or more times a week
How many units of alcohol do you have on a typical day when you are drinking?	1 or 2	3 or 4	5 or 8	7 to 9	10 or more
 How often have you had: 6 or more units if female, or 8 or more units if male on a single occasion in the last year? 	Never	Less than monthly	Monthly	Weekly	Daily or almost daily
4. How often during the last year have you found that you were not able to stop drinking once you had started?	Never	Less than monthly	Monthly	Weekly	Daily or almost daily
 How often during the last year have you failed to do what was normally expected from you because of drinking? 	Never	Less than monthly	Monthly	Weekly	Daily or almost daily
6. How often during the last year have you needed a first drink in the morning to get yourself going after a heavy drinking session?	Never	Less than monthly	Monthly	Weekly	Daily or almost daily
How often during the last year have you had a feeling of guilt or remorse after drinking?	Never	Less than monthly	Monthly	Weekly	Daily or almost daily
8. How often during the last year have you been unable to remember what happened the night before because you had been drinking?	Never	Less than monthly	Monthly	Weekly	Daily or almost daily
	0	2			4
Have you or someone else been injured as a result of your drinking?	No	Yes, but last	not in the year	Yes, duri ye	ng the las ear
 Has a relative or friend or a doctor or another health worker been concerned about your drinking or suggested you cut down? 	relative or friend or a another health worker neemed about your drinking sted you out down?		Yes, duri ye	ring the last year	

Researcher: You may wish to preface the structured questions about drinking by briefly establishing the person's typical drinking patterns. Record any notes here

C3. SADQ: Please recall a typical period of heavy drinking in the last 6 months

When was this? Month:_____Year___

During that period of heavy drinking:

	0	1	2	3
The day after drinking alcohol:	Almost never	Sometimes	Often	Nearly always
 I woke up feeling sweaty 				10
2. My hands shook first thing in the morning				55 - C
My whole body shook violently first thing in the morning if I didn't have a drink				55 52
I woke up absolutely drenched in sweat				8.8 52
I dread waking up in the morning				63
I was frightened of meeting people first thing in the morning				25 27
I felt at the edge of despair when I awoke				20. 102
I felt very frightened when I awoke				
 I liked to have an alcoholic drink in the morning 				2 2
 I always gulped my first few alcoholic drinks down as quickly as possible 			1	3
11.I drank more alcohol to get rid of the shakes			/	60
 12.1 had a very strong craving for a drink when I awoke 			8	
l drank more than:	Almost never	Sometimes	Often	Nearly always
 A quarter of a bottle of spirits in a day (OR 1 bottle of wine OR 8 units of beers) 			2	
 Half a bottle of spirits per day (OR 1.5 bottles of wine OR 15 units of beer) 				16- 10-
 One bottle of spirits per day (OR 3 bottles of wine OR 30 units of beer) 				
 Two bottles of spirits per day (OR 8 bottles of wine OR 60 units of beer) 				84
 Imagine the following situation: You have been completely off drink for a You then drink very heavily for two days How would you feel the morning after those two days 	few weeks	; 1g?		
	Not at all	Slightly	Moderately	Quite a
17. I would start to sweat				31
18. My hands would shake				31
19. My body would shake				34
20. I would be creating for a drink				

Researcher: Additional notes as needed

Section D: Treatment and support

D1. Which treatments/supports have you accessed for your alcohol or other drug use:

- Please tick all that apply in the table below
- Ever
 - In the past 12 months?
 - Are you accessing now?

D2. When did you start your current treatment? (Note, if recruited from liver clinic or GP surgery, may not currently be in treatment for substance use)

- Enter date if known, otherwise approximate time since started treatment (e.g. 3 weeks ago) and use calendar to best approximate date
- If more than one current treatment, circle treatment type from which recruited to study

Treatment	Ever accessed	Accessed past 12 months (only if ever accessed)	Accessing now (only if accessed past 12 months)	Approx. when started current treatment
Community detox		či. –	:	
Inpatient detox		S		-
Prescribed medication What was this medication? (or if not sure, what was this medication for) 1. 2. 3.			,	
Support via GP		с; ,	p	9
Residential Rehabilitation		6	¢	1
Any other professional drug and alcohol support (specify) 1. 2. 3.				
Peer alcohol and drug support groups (outside treatment setting)				

D3. About how old were you when you first started having problems with alcohol?

Age in years: _____

D4. (If have ever had treatment) About how old were you when you first sought help for this?

Age in years: _____

Resea	rcher: OK, so now I'd like to ask you some questions about your recent alcohol and drug use. Some of the questions are quite detailed.
Sectio	n E: Recent alcohol use
≻ Fo E1. To	r those recruited from an outpatient liver clinic or GP surgery I like you to think about the last 7 days, starting from yesterday"
	Date yesterday (this is the INDEX day) / / / / /
	Day of week yesterday (circle one) Mon / Tues / Weds / Thurs /Fri / Sat / Sun
≻ Fo inp E2. °F(you en	r those recruited from an alcohol/drug treatment service (inpatient or outpatient) or an atient liver clinic or these questions I'd like you to think back to the last week in which you had a drink <u>before</u> itered this service"
Resea	rcher
1)	Use calendar and open questions to clarify as far as possible with respondent a treatment start day/week (e.g. "About how long have you been here?", "Can you remember the day of the week you started?")
2)	Use calendar and open questions to clarify as far as possible with respondent the last day prior to treatment entry on which drinking occurred and from which the Time Line Follow Back could be anchored (e.g. "OK, if we say you entered treatment about here, now we need to work out when was the last day before then you were drinking" – Prompt "Do you know what day of the week that was?", etc)

Date	of last	drink	prior	to	treatn	nent	(this	is the	INDEX day)	
1 1	1/1	- T.	1/1	2	1		1			

Day of week of last drink prior to treatment entry (circle one) Mon / Tues / Weds / Thurs /Fri / Sat / Sun

Researcher:

OK, so now I'm going to ask you some questions about your drinking during that week, starting from the [day above] and going backwards in time (use calendar to show 7 day TLFB period) This will include what type of alcohol you drank, how much, what brand, where you got it from, and how much you paid for it.

For these questions, a day is not strictly from one midnight to the next. When we say a 'day' we mean from the time you feel you started a particular day until the time you feel you ended it. So say you got up at 10 am on Tuesday and stayed up until 3am the next morning, we will count all of that as 'Tuesday'. Does that make sense?

E3. Overall, in that week [indicate TLFB week on calendar], would you say that you (circle one and then answer related question below):

1 Drank a lot less than I would usually drink	2 Drank a little less than I would usually drink	3 Drank about the same amount as I would usually drink	4 Drank a little more than I would usually drink	5 Drank a lot more than I would usually drink
Briefly, can you tel	I me why this		Briefly, can you te	II me why this
week was <u>less</u> tha	n usual?		week was <u>more</u> th	an usual?

E4-a. So firstly, thinking about [INDEX DAY 0] and thinking about one type of drink at a time, can you tell me what you drank...

E4-b. And now, thinking about the day before that [INDEX DAY -1], thinking about one type of drink at a time, can you tell me what you drank... Etc, through to [INDEX DAY -6]

Please record response for E4-a and E4-b using separate Time Line Follow Back booklet

E5. Overall, how would you rate <u>your own memory</u> of what you drank and how much you paid for it in the week we just talked about? (Where 0 is 'poor' and 20 is 'good, 'so 10 would be 'OK') (Please circle)

0	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20
Poo	or 🛛	S.	98 - 98	8 - 8	S	96 - SP	2	84 - 3	8 8	5 - 2	8 3	St - 1	98 - 93 S	ε - 2	8 3	23 - 32	- 34	8 - 3	G	ood

Researcher notes relevant to completion of TLFB (attach extra sheet if required):

Researcher	:
Thanks for the next few que you, if any. The of alcohol and the second	nat – now I have an understanding of your drinking and how much that costs. In the stions we are going to explore what impact a rise in the price of alcohol would have on To help in thinking about this, I am going to show you some pictures of common types and their prices
Show respon	ndent visual aids – focussing on one or more that are most relevant to respondent.
Visual aid(s)	primarily used (tick all aids used in answering questions below)
	🗆 Beer 🔲 Cider 🗆 Spirits 🗆 Wine 🗆 Fortifieds
OR:	None of the visual aids were relevant to recent consumption or MUP Reason not relevant (e.g. price paid well above MUP, consume non-beverage alcohol)
Section F:	What would happen if the price of alcohol changed?
F1-a. Imagin	e these products were now priced like this (show visual aid).

Thinking about before you came into treatment, what effect do you think price changes like these would have had on you? [or if recruited from a liver clinic or GP surgery, 'what effect do you think price changes like these would have on you"] (List up to 3)

1. 2. 3.

F1-b. Why?

F2-a. What effect do you think price changes like these would have on other people who you know, particularly people who are dependent on alcohol? (List up to 3)

1. 2. 3.

F2-b. Why?

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F3. Here we have a list of some of the effects alcohol price changes like these <u>might</u> have on people who drink. For each statement, rate <u>how likely each one would be for you</u> (where 1 = very unlikely and 5 = very likely)

1.000	and a	1	2	3	4	5	This question
1 444	Julu	Very unlikely	Unlikely	Neither likely nor unlikely	Likely	Very likely	does not apply to me
8.	Give up drinking						
b.	Drink less alcohol on each day						
C.	Drink alcohol on fewer days						1
d.	Drink about the same as before						
e.	Buy cheaper alcohol				(
f.	Steal alcohol						
g.	Try to get illicit (black market) alcohol						
h.	Try to get non-beverage alcohol (e.g. white spirit, aftershave, methylated spirits)					2	
i. Hov 1. 2. 2	Get more money to buy alcohol v would you do this?						
j. Wh 1. 2. 3	Change to /increase other substance use ich substances?						
k. Wh	Reduce how much I spend on other things to buy alcohol at would you spend less on? 1. 2. 3.						
l. W tr	Seek treatment here would you seek eatment? 1 2 3						

Researcher: OK, the next group of questions are about whether or not you think drinking has had any impact on different aspects of your daily life in the past 3 months. Not all of the questions will be relevant to everyone, for example, some people live alone rather than with others. Where a question is not relevant to you we will just tick 'not applicable to me'

Section G: Potential and actual impact upon family, social, and work life

G1. What impact, if any, has your drinking had on the following areas of your life in the past 3 months?

	- Negative impact	No impact	+ Positive impact	Not applicable to me
How well you get along with	8.5	187 - 18	90 - 10 - 10 - 10 - 10 - 10 - 10 - 10 -	
Your partner/spouse				
People in your household (besides partner/spouse)				
Family members who don't live with you				
Friends with whom you usually/often drink				
Friends with whom you <i>don't</i> usually/often drink				
Daily living				
Managing household finances, paying bills, etc		8	(
Doing household chores (e.g. cooking, cleaning)				
Eating well				
Sleeping well		<u>(</u>		
Getting to work/keeping appointments				
Parenting		322	3	00
How you have felt about your parenting				
Getting child/ren getting to nursery/school/other appointments				
Child/ren having treats				
Child/ren having to act more grown up than their age			1	8

Researcher note: Did the respondent answer the above table with reference to a recent positive change in alcohol use and associated effects (i.e. a <u>reduction</u> in drinking rather than stable or increased drinking)?

No	Yes
----	-----

G2. In the past 3 months have you needed to use a food bank or other charitable donations?

|--|

Additional comment re use of donations if wish:

Section H: Experien	ce of crime	
H1. In the 3 months p the past 3 months"], h <i>that apply</i>)	nior to entering treatment (nave you been involved in a	or if recruited from a liver clinic or GP surgery "In any of the following illegal activities? (<i>Please tick all</i>
Shoplifting	r;	
🗆 Selling dru	igs	
Theft from	or of a vehicle	
Other theft	t, burglary, or robbery	
Fraud or fo	orgery	
🗌 Handling s	tolen goods	
Committing	g assault or violence	
OR		
🗌 I have not	been involved in any illega	l activities
Theft, burg	glary, or robbery	
□ Theft, burg	jiary, or robbery	
Asything a	violence	
	have a status of any literal	
	been a victim of any lilegal	activities
H3. In the 3 months p the past 3 months'], h	rior to entering treatment [nas your drinking led to poli	or if recruited from a liver clinic or GP surgery "In ice involvement because of domestic arguments?
□ No	🗆 Yes	Prefer not to say
Section I: Have y available?	you noticed any change i	n the price of alcohol or the products
I - Before minimum (the very cheap alcol Yes/No	unit pricing was introduc hol, such as white ciders,	ed in May 2018, did you regularly drink some of , own-brand spirits or multi-packs of beer?

ou used to	be able to buy, but which	are no longer in stock)
-		
1-a. Thinki months, ha to be able t	ing about the alcohol prod ave you noticed any prod to buy, but which are no lo	ucts you or people you know typically drink, in the last 3 ucts not available in the shops? (that is, products you used onger in stock)
	No (go to Q. I2a)	
	res	
l1-b. lf produc	yes, which products have ts below, including brand	you noticed disappearing from shops? (Name <u>up to</u> three and product size)
l1-c. Tł (Circle one)	he disappearance of whic)	h <u>one</u> of these products has had the biggest impact on you?
1.	Brand	Product size
2.	Brand	Product size
2. 3. 2. Thinking /ears, have	Brand Brand Or tick here if person s about alcohol products y e you noticed any significa	Product size Product size says product disappearance has had no impact on them rou or people you know typically drink, over the last couple ant changes in the price of alcohol in the shops?
2. 1 3. 1 2. Thinking years, have 2-a. Thinki months, ha	Brand Brand Or tick here if person s about alcohol products y e you noticed any significa ing about the alcohol prod we you noticed any signifi	Product size
2. 1 3. 1 2. Thinking years, have	Brand Brand Or tick here if person s about alcohol products y e you noticed any signification ing about the alcohol prod ve you noticed any signifi	Product size Product size Product size Product size Product size Product disappearance has had no impact on them ou or people you know typically drink, over the last couple ant changes in the price of alcohol in the shops?
2. 1 3. 2. Thinking years, have	Brand Brand Or tick here if person s about alcohol products y e you noticed any signification ing about the alcohol prod ve you noticed any signifi No (go to Q. J1) Yes	Product size Product size Product size Product size Product size Product disappearance has had no impact on them ou or people you know typically drink, over the last couple ant changes in the price of alcohol in the shops?
2. 1 3. 1 2. Thinking years, have 2-a. Thinki months, ha 2-b. lf below,	Brand Brand Or tick here if person s about alcohol products y e you noticed any signification ing about the alcohol prod ve you noticed any signification No (go to Q. J1) Yes yes, for which products h including brand and prod	Product size
2. 1 3. 1 2. Thinking years, have 2-a. Thinki months, ha 2-a. Thinki months, ha 2-a. Thinki 12-b. If <i>below</i> , 12-c. W one)	Brand Brand Or tick here if person s about alcohol products y e you noticed any signification ing about the alcohol prod ve you noticed any signification No (go to Q. J1) Yes yes, for which products h <i>including brand and prod</i> /hich <u>one</u> of these price ch	Product size Product size Product size Product size Product size Product on them ou or people you know typically drink, over the last couple ant changes in the price of alcohol in the shops?
2. 1 3. 1 2. Thinking years, have 12-a. Thinki months, ha 12-b. If <i>below</i> , 12-c. W one) 1.	Brand Brand Or tick here if person s g about alcohol products y e you noticed any signification ing about the alcohol prod we you noticed any signification we you noticed any signification No (go to Q. J1) Yes yes, for which products h <i>including brand and prod</i> /hich <u>one</u> of these price ch Brand	Product size
2. 1 3. 1 2. Thinking years, have 2-a. Thinking 12-a. Thinking 12-b. If below, 12-c. W one) 1. 2.	Brand Brand Or tick here if person s about alcohol products y e you noticed any signification ing about the alcohol prod ve you noticed any signification we you noticed any signification ve you noticed any significati	Product size

widen eneaper	A little cheaper	A little more expensive	Much more expensive
e. Would you say the ch	anges in price you ha	ave noticed have be	en:
\Box Gradual \rightarrow What	at did you notice?		
\Box Sudden \rightarrow What	t did you notice?	0	
Don't know/not	sure	283	
ection J: Harm minin	nisation		
-a. If the government we fer to visual aid], would y	re to introduce a new you (or other people)	policy to increase t vou know) need help	he price of alcohol like this o or support to prepare for t
🗌 No (go to Q. J2)	a)		
🗆 Yes			
-s Are you sware of any	support now being o	ffered to people spe	cifically to help them press
-a. Are you aware of any ran increase in the price	support <u>now being o</u> of alcohol?	<u>ffered</u> to people spe	cifically to help them prepa
-a. Are you aware of any r an increase in the price □ No (go to Q. K1	of alcohol?	<u>ffered</u> to people spe	cifically to help them prepa
-a. Are you aware of any r an increase in the price □ No (go to Q. K1 □ Yes	of alcohol?	<u>iffered</u> to people spe	cifically to help them prepa
-a. Are you aware of any an increase in the price D No (go to Q. K1 D Yes J2-b. If yes, what supp	of alcohol?) ort is now being offer	<u>ffered</u> to people spe red and by whom?	cifically to help them prepa
-a. Are you aware of any an increase in the price D No (go to Q. K1 D Yes J2-b. If yes, what supp	of alcohol?	ffered to people spe	cifically to help them prepa
-a. Are you aware of any an increase in the price D No (go to Q. K1 D Yes J2-b. If yes, what supp	of alcohol?) ort is now being offer	ffered to people spe red and by whom?	cifically to help them prepa
-a. Are you aware of any r an increase in the price D No (go to Q. K1 Yes J2-b. If yes, what supp	of alcohol?	ffered to people spe red and by whom?	cifically to help them prepa

Section K: Other factors

K1. In the last 3 months, has there been anything other than the price of alcohol which has had a major effect on your drinking? This could be anything, but might include:

- changes in your own life (e.g. to your income/benefits or your housing)
- the influence of people around you (e.g. attitudes to heavy drinking)
- changes affecting your local community, this region, or even the whole country

Index Dayex	tra sheet	(circle day of week)	Mon Tues Weds T	hurs Fri	Sat Sun	35 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	an official second
What did you drink?		Where did you get this? (tick o	ne)	If bought, what was the price?	Did you buy, or otherwise get, this in:	Was this ordered via internet?	Was this delivered to you?
Drink type 1 Type of drink (e.g. whisk How much drunk? (e.g. Brand (if known)	ry) 1∕≤ 750ml bottle)	 Licensed seller – off trade: Supermarket Off-license chain Local shop/seller Other Licensed seller – on trade Unlicensed seller (i.e. 	 Traded for: Property Drugs Sex Other trade Given by: Family member Friend Acquaintance 	Price:	□ Scotland □ England □ Other	□ Yes □ No □ N/A If yes, which website did you use?	□ Yes □ No □ N/A
		black market) Stolen Other source	 Other person 				
Drink type 2 Type of drink (e.g. whisk How much drunk? (e.g.	sy) 1∕₂ 750ml bottle)	 Licensed seller – off trade: Supermarket Off-license chain Local shop Other 	 Traded for: Property Drugs Sex Other trade 	Price:	□ Scotland □ England □ Other	□ Yes □ No □ N/A If yes, which website did you use?	□ Yes □ No □ N/A
Brand <i>(if known)</i>		 Licensed seller – on trade Unlicensed seller (i.e. black market) Stolen Other source 	 Given by: Family member Friend Acquaintance Other person 				

Index Day	extra sheet	(circle day of wee	k) Mon Tues Weds T	hurs Fri	Sat Sun		1027
What did you drir	nk?	Where did you get this? (tic)	k one)	If bought, what was the price?	Did you buy, or otherwise get, this in:	Was this ordered via internet?	Was this delivered to you?
Drink type 3 Type of drink (e.g	g. whisky)	 Licensed seller – off trade: Supermarket Off-license chain Local shop 	 Traded for: Property Drugs Sex Other trade 	Price:	 Scotland England Other 	□ Yes □ No □ N/A If yes, which website did	□ Yes □ No □ N/A
How much drunk Brand <i>(if known)</i>	? (e.g. ½ 750ml bottle)	 Other Licensed seller – on trade Unlicensed seller (i.e. black market) Stolen 	 Given by: Family member Friend Acquaintance Other person 			you use?	
		Other source					

To double check we've included everything; did you drink any other commercially produced alcohol on this day?

And again to check we've included everything; did you drink any non-commercially produced alcohol on this day? (e.g. homebrew)

And again to check we've included everything; did you drink any alcohol substitutes such as aftershave or other chemical products on this day?

If yes to any of these, add to table above. If person reports >3 types, use additional TLFB forms to record (additional TLFB forms used? D No D Yes)

Was there anything notable about this day which affected your how much you drank or what you drank? _

Tobacco	Cannabis	Amphetamine	Heroin	Methadone	'Legal highs'
Benzodiazepines	Antidepressants	Painkillers	Other 1.	Other 2.	Other 3.

Index Day minus 1:	والمتعارض والمتعاد والمتعاد المتعادية المتعادين	(circle day of week)	Mon Tues	Weds Thurs	Fri Sat Su	un
What did you drink?	Where did you get this? (tick	one)	If bought, what was the price?	Did you buy, or otherwise get, this in:	Was this ordered via internet?	Was this delivered to you?
<u>Drink type 1</u> Type of drink (e.g. whisky) How much drunk? (e.g. ½ 750ml bottle)	 Licensed seller – off trade: Supermarket Off-license chain Local shop/seller Other Licensed seller – on trade 	 Traded for: Property Drugs Sex Other trade Given by: Family member 	Price:	□ Scotland □ England □ Other	□ Yes □ No □ N/A If yes, which website did you use?	□ Yes □ No □ N/A
Brand (if known)	 Unlicensed seller (i.e. black market) Stolen Other source 	 Friend Acquaintance Other person 	3			
<u>Drink type 2</u> Type of drink (e.g. whisky) How much drunk? (e.g. ½ 750ml bottle)	 Licensed seller – off trade: Supermarket Off-license chain Local shop Other Licensed seller – on trade 	 Traded for: Property Drugs Sex Other trade Given by: Family member 	Price:	□ Scotland □ England □ Other	□ Yes □ No □ N/A If yes, which website did you use?	□ Yes □ No □ N/A
Brand (if known)	 Unlicensed seller (i.e. black market) Stolen Other source 	 Friend Acquaintance Other person 	5			

Index Day minus 1:		(circle day of week)	Mon Tues	Weds Thurs	Fri Sat Su	IN
What did you drink?	Where did you get this? (tick	one)	If bought, what was the price?	Did you buy, or otherwise get, this in:	Was this ordered via internet?	Was this delivered to you?
<u>Drink type 3</u> Type of drink (e.g. whisky) How much drunk? (e.g. ½ 750ml bottle) Brand (if known)	 Licensed seller – off trade: Supermarket Off-license chain Local shop Other Licensed seller – on trade Unlicensed seller (i.e. black market) Stolen Other source 	 Traded for: Property Drugs Sex Other trade Given by: Family member Friend Acquaintance Other person 	Price:	□ Scotland □ England □ Other	□ Yes □ No □ N/A If yes, which website did you use?	□ Yes □ No □ N/A

To double check we've included everything; did you drink any other commercially produced alcohol on this day?

And again to check we've included everything; did you drink any non-commercially produced alcohol on this day? (e.g. homebrew)

And again to check we've included everything; did you drink any <u>alcohol substitutes</u> such as aftershave or other chemical products on this day? If yes to any of these, add to table above. If person reports >3 types, use additional TLFB forms to record (additional TLFB forms used? □ No □ Yes)

Was there anything notable about this day which affected your how much you drank or what you drank? _____

Tobacco	Cannabis	Amphetamine	Heroin	Methadone	'Legal highs'
Benzodiazepines	Antidepressants	Painkillers	Other 1.	Other 2.	Other 3.

Index Day minus 2:		(circle day of week)	Mon Tues V	Veds Thurs F	ri Sat Su	un
What did you drink?	Where did you get this? (tick	one)	If bought, what was the price?	Did you buy, or otherwise get, this in:	Was this ordered via internet?	Was this delivered to you?
<u>Drink type 1</u> Type of drink (e.g. whisky) How much drunk? (e.g. ½ 750ml bottle)	 Licensed seller – off trade: Supermarket Off-license chain Local shop/seller Other Licensed seller – on trade 	 Traded for: Property Drugs Sex Other trade Given by: Family member 	Price:	□ Scotland □ England □ Other	 Yes No N/A If yes, which website did you use? 	□ Yes □ No □ N/A
Brand (if known)	 Unlicensed seller (i.e. black market) Stolen Other source 	 Friend Acquaintance Other person 			-	
<u>Drink type 2</u> Type of drink (e.g. whisky) How much drunk? (e.g. ½ 750ml bottle)	 Licensed seller – off trade: Supermarket Off-license chain Local shop Other 	 Traded for: Property Drugs Sex Other trade 	Price:	 Scotland England Other 	□ Yes □ No □ N/A If yes, which website did	□ Yes □ No □ N/A
Brand (if known)	 Licensed seller – on trade Unlicensed seller (i.e. black market) Stolen Other source 	 Given by: Family member Friend Acquaintance Other person 			-	

Index Day minus 2:		(circle day of week)	Mon Tues \	Weds Thurs 1	Fri Sat Su	un
What did you drink?	Where did you get this? (tick	one)	If bought, what was the price?	Did you buy, or otherwise get, this in:	Was this ordered via internet?	Was this delivered to you?
<u>Drink type 3</u> Type of drink (e.g. whisky) How much drunk? (e.g. ½ 750ml bottle) Brand (if known)	 Licensed seller – off trade: Supermarket Off-license chain Local shop Other Licensed seller – on trade Unlicensed seller (i.e. black market) Stolen Other source 	 Traded for: Property Drugs Sex Other trade Given by: Family Friend Acquaintance Other person 	Price	□ Scotland □ England □ Other	Yes No N/A If yes, which website did you use?	□ Yes □ No □ N/A

To double check we've included everything; did you drink any other commercially produced alcohol on this day?

- And again to check we've included everything; did you drink any non-commercially produced alcohol on this day? (e.g. homebrew)
- And again to check we've included everything; did you drink any <u>alcohol substitutes</u> such as aftershave or other chemical products on this day? If yes to any of these, add to table above. If person reports >3 types, use additional TLFB forms to record (additional TLFB forms used? □ No □ Yes)

Was there anything notable about this day which affected your how much you drank or what you drank? _

Did you take any other substances on this day? (Index Day minus 2)

Tobacco	Cannabis	Amphetamine	Heroin	Methadone	'Legal highs'
Benzodiazepines	Antidepressants	Painkillers	Other 1.	Other 2.	Other 3.

Index Day minus 3:	- 12 Martin	(circle day of week)	Mon Tues	Weds Thurs	Fri Sat Si	un
What did you drink?	Where did you get this? (tick	one)	If bought, what was the price?	Did you buy, or otherwise get, this in:	Was this ordered via internet?	Was this delivered to you?
<u>Drink type 1</u> Type of drink (e.g. whisky) How much drunk? (e.g. ½ 750ml bottle)	 Licensed seller – off trade: Supermarket Off-license chain Local shop/seller Other 	 Traded for: Property Drugs Sex Other trade 	Price:	 Scotland England Other 	□ Yes □ No □ N/A If yes, which website did you use?	□ Yes □ No □ N/A
Brand (if known)	 Licensed seller – on trade Unlicensed seller (i.e. black market) Stolen Other source 	 Given by: Family member Friend Acquaintance Other person 			2 <u></u> 2	
<u>Drink type 2</u> Type of drink (e.g. whisky) How much drunk? (e.g. ½ 750ml bottle) Brand (if known)	 Licensed seller – off trade: Supermarket Off-license chain Local shop Other Licensed seller – on trade Unlicensed seller (i.e. black market) Stolen Other source 	 Traded for: Property Drugs Sex Other trade Given by: Family member Friend Acquaintance Other person 	Price:	 Scotland England Other 	□ Yes □ No □ N/A If yes, which website did you use?	□ Yes □ No □ N/A

Index Day minus 3:		(circle day of week)	Mon Tues	Weds Thurs	Fri Sat Si	un
What did you drink?	Where did you get this? (tick	one)	If bought, what was the price?	Did you buy, or otherwise get, this in:	Was this ordered via internet?	Was this delivered to you?
Drink type 3	Licensed seller – off	Traded for:	Price:	 Scotland England 	D Yes	D Yes
lype of drink (e.g. whisky)	trade: o Supermarket o Off-license chain o Local shop	 Property Drugs Sex Other trade 			If yes, which website did	d N/A
How much drunk? (e.g. ½ 750ml bottle)	• Other 	Given by:			you use?	
Brand (if known)	 Licensed seller – on trade Unlicensed seller (i.e. black market) Stolen Other source 	 Family member Friend Acquaintance Other person 				

To double check we've included everything; did you drink any other commercially produced alcohol on this day?

And again to check we've included everything; did you drink any non-commercially produced alcohol on this day? (e.g. homebrew)

And again to check we've included everything; did you drink any <u>alcohol substitutes</u> such as aftershave or other chemical products on this day?

If yes to any of these, add to table above. If person reports >3 types, use additional TLFB forms to record (additional TLFB forms used? 🗅 No 👘 🗅 Yes)

Was there anything notable about this day which affected your how much you drank or what you drank? _

Did you take any other substances on this day? (Index Day minus 3) 🛛 🗌 No 🗌

Yes (Circle all that apply)

Tobacco	Cannabis	Amphetamine	Heroin	Methadone	'Legal highs'	
Benzodiazepines	Antidepressants	Painkillers	Other 1.	Other 2.	Other 3.	

Index day minus 4:		(circle day of week)	Mon Tues V	Veds Thurs	ri Sat Sun	1
What did you drink?	Where did you get this? (tick	one)	If bought, what was the price?	Did you buy, or otherwise get, this in:	Was this ordered via internet?	Was this delivered to you?
Drink type 1 Type of drink (e.g. whisky) How much drunk? (e.g. ½ 750ml bottle)	 Licensed seller – off trade: Supermarket Off-license chain Local shop/seller Other 	 Traded for: Property Drugs Sex Other trade 	Price:	□ Scotland □ England □ Other	□ Yes □ No □ N/A If yes, which website did you use?	□ Yes □ No □ N/A
Brand (if known)	 Licensed seller – on trade Unlicensed seller (i.e. black market) Stolen Other source 	 Given by: Family member Friend Acquaintance Other person 			<u> </u>	
<u>Drink type 2</u> Type of drink (e.g. <i>whisky</i>) How much drunk? (e.g. ½ 750ml bottle)	 Licensed seller – off trade: Supermarket Off-license chain Local shop Other 	 Traded for: Property Drugs Sex Other trade 	Price:	□ Scotland □ England □ Other	 Yes No N/A If yes, which website did you use? 	□ Yes □ No □ N/A
Brand (if known)	 Licensed seller – on trade Unlicensed seller (i.e. black market) Stolen Other source 	 Given by: Family member Friend Acquaintance Other person 				

Index day minus 4:		(circle day of week)	Mon Tues V	Veds Thurs F	ri Sat Sun	
What did you drink?	Where did you get this? (tick	one)	If bought, what was the price?	Did you buy, or otherwise get, this in:	Was this ordered via internet?	Was this delivered to you?
Drink type 3 Type of drink (e.a. whisky)	Licensed seller – off trade:	Traded for: <i>Property</i>	Price:	Scotland England Other	□ Yes □ No □ N/A	□ Yes □ No □ N/A
How much drunk? (e.g. ½ 750ml bottle)	 Supermarket Off-license chain Local shop Other 	o Drugs o Sex o Other trade			If yes, which website did you use?	
Brand (if known)	 Licensed seller – on trade Unlicensed seller (i.e. black market) Stolen Other source 	 Given by: Family member Friend Acquaintance Other person 				

To double check we've included everything; did you drink any other commercially produced alcohol on this day?

And again to check we've included everything; did you drink any non-commercially produced alcohol on this day? (e.g. homebrew)

And again to check we've included everything; did you drink any alcohol substitutes such as aftershave or other chemical products on this day?

If yes to any of these, add to table above. If person reports >3 types, use additional TLFB forms to record (additional TLFB forms used? D NO D Yes)

Was there anything notable about this day which affected your how much you drank or what you drank? ____

Did you take any other substances on this day? (Index Day minus 4)	🗆 No	Yes (Circle all that apply)
--	------	-----------------------------

Tobacco	Cannabis	Amphetamine	Heroin	Methadone	'Legal highs'
Benzodiazepines	Antidepressants	Painkillers	Other 1.	Other 2.	Other 3.

Index Day minus 5:		(circle day of week)	Mon Tues V	Veds Thurs F	ri Sat Sun	l _e
What did you drink?	Where did you get this? (tick	: one)	If bought, what was the price?	Did you buy, or otherwise get, this in:	Was this ordered via internet?	Was this delivered to you?
<u>Drink type 1</u> Type of drink (e.g. whisky) How much drunk? (e.g. ½ 750ml bottle)	 Licensed seller – off trade: Supermarket Off-license chain Local shop/seller Other 	 Traded for: Property Drugs Sex Other trade 	Price:	 Scotland England Other 	 Yes No N/A If yes, which website did you use? 	□ Yes □ No □ N/A
Brand (if known)	 Licensed seller – on trade Unlicensed seller (i.e. black market) Stolen Other source 	 Given by. Family member Friend Acquaintance Other person 				
<u>Drink type 2</u> Type of drink (e.g. <i>whisky</i>) How much drunk? (e.g. ½ 750ml bottle)	 Licensed seller – off trade: Supermarket Off-license chain Local shop Other 	 Traded for: Property Drugs Sex Other trade 	Price:	 Scotland England Other 	□ Yes □ No □ N/A If yes, which website did you use?	□ Yes □ No □ N/A
Brand (if known)	 Licensed seller – on trade Unlicensed seller (i.e. black market) Stolen Other source 	 Given by: Family member Friend Acquaintance Other person 			<u>200</u>	

Index Day minus 5:	والمحاجبة والمتحاط والمحاج والمحاج والمحاج	(circle day of week) I	Mon Tues V	Veds Thurs F	ri Sat Sur	L
What did you drink?	Where did you get this? (tick	one)	If bought, what was the price?	Did you buy, or otherwise get, this in:	Was this ordered via internet?	Was this delivered to you?
Drink type 3 Type of drink (e.g. whisky) How much drunk? (e.g. ½ 750ml bottle)	 Licensed seller – off trade: Supermarket Off-license chain Local shop Other 	 Traded for: Property Drugs Sex Other trade 	Price:	 Scotland England Other 	 Yes No N/A If yes, which website did you use? 	□ Yes □ No □ N/A
Brand (if known)	 Licensed seller – on trade Unlicensed seller (i.e. black market) Stolen Other source 	 Given by: Family member Friend Acquaintance Other person 				

□ To double check we've included everything; did you drink any other commercially produced alcohol on this day?

a And again to check we've included everything; did you drink any non-commercially produced alcohol on this day? (e.g. homebrew)

And again to check we've included everything; did you drink any alcohol substitutes such as aftershave or other chemical products on this day?

If yes to any of these, add to table above. If person reports >3 types, use additional TLFB forms to record (additional TLFB forms used? DNO DYS)

Was there anything notable about this day which affected your how much you drank or what you drank? _

Did you take any other substances on this day? (Index Day minus 5)

Tobacco	Cannabis	Amphetamine	Heroin	Methadone	'Legal highs'
Benzodiazepines	Antidepressants	Painkillers	Other 1.	Other 2.	Other 3.

Index Day minus 6:		(circle day of week) M	Mon Tues	Weds Thurs	Fri Sat Su	In
What did you drink?	Where did you get this? (tick	one)	If bought, what was the price?	Did you buy, or otherwise get, this in:	Was this ordered via internet?	Was this delivered to vou?
<u>Drink type 1</u> Type of drink (e.g. <i>whisky</i>) How much drunk? (e.g. ½ 750ml bottle)	 Licensed seller – off trade: Supermarket Off-license chain Local shop/seller Other 	 Traded for: Property Drugs Sex Other trade 	Price:	 Scotland England Other 	□ Yes □ No □ N/A If yes, which website did you use?	□ Yes □ No □ N/A
Brand (if known)	 Licensed seller – on trade Unlicensed seller (i.e. black market) Stolen Other source 	 Given by: Family member Friend Acquaintance Other person 				
<u>Drink type 2</u> Type of drink (e.g. <i>whisky)</i> How much drunk? (e.g. ½ 750ml bottle)	 Licensed seller – off trade: Supermarket Off-license chain Local shop Other 	 Traded for: Property Drugs Sex Other trade 	Price:	 Scotland England Other 	□ Yes □ No □ N/A If yes, which website did you use?	□ Yes □ No □ N/A
Brand (if known)	 Licensed seller – on trade Unlicensed seller (i.e. black market) Stolen Other source 	 Given by: Family member Friend Acquaintance Other person 			S	

Index Day minus 6:		(circle day of week)	Mon Tues	Weds Thurs	Fri Sat Si	un
What did you drink?	Where did you get this? (tick	one)	If bought, what was the price?	Did you buy, or otherwise get, this in:	Was this ordered via internet?	Was this delivered to you?
Drink type 3	Licensed seller – off	Traded for:	Price:	 Scotland England 	□ Yes □ No	□ Yes □ No
How much drunk? (e.g. 16 750ml bottle)	 Supermarket Off-license chain Local shop Other 	 Property Drugs Sex Other trade 		- Other	□ N/A If yes, which website did	□ N/A
now much drunk? (e.g. 72 7 John Dotae)	 Licensed seller – on 	□ Given by: ○ Family				
Brand (if known)	trade Unlicensed seller (i.e. black market) Stolen Other source	member o Friend o Acquaintance o Other person				

D To double check we've included everything; did you drink any other commercially produced alcohol on this day?

And again to check we've included everything; did you drink any non-commercially produced alcohol on this day? (e.g. homebrew)

- And again to check we've included everything; did you drink any alcohol substitutes such as aftershave or other chemical products on this day?

If yes to any of these, add to table above. If person reports >3 types, use additional TLFB forms to record (additional TLFB forms used? D NO D Yes)

Was there anything notable about this day which affected your how much you drank or what you drank? _

Did you take any other substances on this day? (Index Day minus 6)	
--	--

□ No □ Yes (Circle all that apply)

Tobacco	Cannabis	Amphetamine	Heroin	Methadone	'Legal highs'
Benzodiazepines	Antidepressants	Painkillers	Other 1.	Other 2.	Other 3.

2.8.2. Visual aid for pre-MUP and estimated post-MUP prices for Scotland and England at wave 1














2.8.3. Visual aid providing guidance on alcohol units

3. Work package 2

The WP2 appendix includes a summary of all recruitment activity and the separate interview schedules for data collection with drinkers and family members or carers.

3.1 Recruitment summary for work package 2

- **Key: A** = Awareness session attended
 - **Pil** = Pilot interview conducted

T = Peer Research training completed

Pre = Pre-implementation MUP interview completed

- **Post** = Post-implementation MUP interview completed
- **Prof** = Professional one-to-one interview or group interview completed

Area	Internal ID Code	A	т	Pil	Pre	Post	Prof	Interview descriptor or further explanation	Commentary
Argyll & Bute – Helensburgh	AB01	1							Did not feel far enough into recovery
J	AB02	~	-						Withdrew
	AB03	~							No further contact
	AB04	1							No further contact
	AB05	~							No further contact
	AB06	1	1	01				Partial pilot interview – not included in analysis	Withdrew
	AB07	1	1	02				Partial pilot interview – not included in analysis	Relapse
	AB08	~							Relapse
	AB09	1	~						Extremely busy day job (No further contact)
Argyll & Bute -	AB10	~	1		-				No further contact
Lochgilphead	AB11	1			-				No further contact
& Oban	AB12	×	1						Withdrew
	AB13	~	~	03				Partial pilot interview – not included in analysis	Withdrew due to medical issues
	AB14	×							Withdrew at end of awareness session
·	AB15	✓	77		17	1			No further contact
Argyll & Bute – Isle of Bute	AB16	1							No further engagement following awareness
	AB17	~							Withdrew at end of awareness session
	AB18	~							Withdrew at end of awareness session
Dundee	DU01	×							Awareness session only completed
	DU02	1							Awareness session only completed

Forth Valley	FV01	 ✓ 	04	Male, Urban, Former Drinker, Post-MUP	Interview Only
	EV/02			Interview Feb 2019	Intension Only
	FV02	× .	05	interview Feb 2019	Interview Only
	FV03	×	G01:R1	Male, Rural, Former Drug User/Drinker and Family Member, Post-MUP interview Mar 2019	Group Interview Only
	FV04	×	G01:R2	Male, Urban, Recent Drinker, Post-MUP interview Mar 2019	Group Interview Only
	FV05	×	G01:R3	Female, Urban, Former Drinker and Current Family Member, Post-MUP interview Mar 2019	Group Interview Only
	FV06	×	G01:R4	Female, Rural, Current Family Member, Post- MUP interview Mar 2019	Group Interview Only
	FV07	×	G01:R5	Female, Urban, Current Family Member, Post- MUP interview Mar 2019	Group Interview Only
	FV08	×	G02:R1	Female, Urban, Current Family Member, Post- MUP interview May 2019	Group Interview Only
	FV09	×	G02:R2	Female, Urban, Current Family Member, Post- MUP interview May 2019	Group Interview Only
	FV10	× .	G02:R3	Female, Urban, Current Family Member, Post- MUP interview May 2019	Group Interview Only
	FV11	×	G02:R4	Female, Urban, Current Family Member, Post- MUP interview May 2019	Group Interview Only
	FV12	×	G02:R5	Female, Urban, Current Family Member, Post- MUP interview May 2019	Group Interview Only
	FV13	× .	G02:R6	Didn't contribute to group interview so not included in analysis	Group Interview Only
	FV14	×	G02:R7	Didn't contribute to group interview so not included in analysis	Group Interview Only
Greater Glasgow & Clyde -	GG01	~	G03:R1	Female, Urban, Current Family Member, Post- MUP interview May 2019	Group interview Only [follow-up interview cancelled]
Renfrew	GG02	~	G03:R2	Male, Urban, Current Family Member, Post-MUP interview May 2019	Group interview Only [follow-up interview cancelled]
	GG03	~	G03:R3	Female, Urban, Current Family Member, Post- MUP interview May 2019	Group interview Only [follow-up interview cancelled]
	GG04	~	G03:R4	Female, Urban, Current Family Member, Post- MUP interview May 2019	Group interview Only [follow-up interview cancelled]

	GG05	~				G03:F	Male, Urban, Current Family Member, Post-MUP interview May 2019	Group interview Only [follow-up interview cancelled]
	GG06					G04:F	R1 Female, Urban, Current Family Member, Post- MUP interview May 2019	Group interview Only [follow-up interview cancelled]
	GG07	×				G04:F	R2 Female, Urban, Current Family Member, Post- MUP interview May 2019	Group interview Only [follow-up interview cancelled]
	GG08	~				G04:F	R3 Female, Urban, Current Family Member, Post- MUP interview May 2019	Group interview Only [follow-up interview cancelled]
Lothians	LN01	~	~	06			Male, Urban, Former Drinker, Pre-MUP interview Nov 2017	Active throughout
				07			Male, Urban, Former Drinker, Pre-MUP interview Nov 2017	Withdrawn – 'too much going on'
	LN02	~	1		08		Female, Urban, Current Drinker, Pre-MUP interview Mar 2018	
					09		No recording available of interview – not included in analysis	
	LN03	✓	1					Relapse
	LNOA	1	1	10			Male, Urban, Former Drug User/Drinker, Pre- MUP interview Nov 2017	Relapse
	LIN04				11		Male, Urban, Current Family Member and Former Drinker, Pre-MUP interview Mar 2018	
	LN05	1	1					Withdrew – 'too busy'
	LN06	~	1	12			Male, Urban, Former Drug User/Drinker, Pre- MUP interview Nov 2017	Relapse
	LN07	1	×					Withdrawn
	LN08	1						No further contact
	LN09	1	1	13			Partial pilot interview – not included in analysis	Moved away
	LN10	1						Too busy at time to complete training
Scottish				14			Male, Rural, Former Drinker, Pre-MUP interview	
Borders – Gala	SB01	~	~		15		No recording available of interview – not included in analysis	Active Throughout
		3				16	Male, Rural, Current Drinker, Post-MUP interview	

						G05:R4, G06:R4, G07:R5	Female, Rural, Former Drug User/Drinker and Current Family Member, Post-MUP group interview Sep 2019	
S	SB02	~	4	17			Female, Rural, Former Drug User/Drinker and Current Family Member, Pre-MUP interview	Deceased
S	SB03	1		ii fi	1	1 1 1		Withdrew
S	SB04	1	1			-		Withdrew
S	SB05	~	~					Had <u>12 month</u> period abroad so wasn't able to commit
S	SB06	1	~					Moved away -left area
S	SB07	~	~					Moved into full time
S	SB08	1	~					No further contact
S	SB09	~	~					Withdrew – stated to soon into recovery
S	SB10	~	~					Withdrew – too many demands of day job and caring responsibilities
S	SB11	~						Significant Accident – subsequently unable to manage demands of day job and research
S	SB12	~				G05:R1	Male, Rural, Current Drug User/Drinker, Post- MUP group interview Mar 2019	
S	SB13	~				G05:R2	Male, Rural, Current Drinker, Post-MUP group interview Mar 2019	Group Interview Only
S	SB14	~				G05:R3	Female, Rural, Current Drug User/Drinker, Post- MUP group interview Mar 2019	Group Interview Only
S	SB15	~				G06:R1	Male, Rural, Former Drinker/Drug User, Post- MUP group interview Aug 2019	
S	SB16	~				G06:R2	Male, Rural, Former Drinker, Post-MUP group interview Aug 2019	
S	SB17	~				G06:R3	Female, Rural, Former Drinker, Post-MUP group interview Aug 2019	
S	SB18					G07:R1	Female, Rural, Current Drinker, Post-MUP group interview Sep 2019	
S	SB19					G07:R2	Female, Rural, Former Drinker, Post-MUP group interview Sep 2019	
S	SB20					G07:R3	Female, Rural, Former Drinker, Post-MUP group interview Sep 2019	

SB21	G07:R4	Male, Rural, Former Drinker, Post-MUP group interview Sep 2019	
SB22	G07:R5	Male, Rural, Former Drinker, Post-MUP group interview Sep 2019	
SB23	G07:R6	Female, Rural, Recent Drinker, Post-MUP group interview Sep 2019	

TOTALS	N=69	N=22	N=10*	N=4†	N=1	N=33 (Interviews with current/former drinkers N=15; interviews with family members of a current/former drinker N=15 ¹ ; interviews with family members who were also themselves a current or former drinker N=3 [§])	
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* Includes three pilot interviews that were only partially completed and therefore not included in the final data analysis. Also includes one family member who also identified themselves as a former drinker.

^{*} Includes one family member who also identified themselves as a former drinker

* Includes two group interviews in Renfrew, Glasgow (G03 and G04), one group interview in Stirling (G02).

* Includes 2 family members in the group interview in Stenhousemuir (G01) and one family member who participated in three group interviews in the Borders (G05, G06 and G07).

3.2 Post-implementation interview topic guide for drinkers for work package 2

WP2 Interview Schedule - Glyndwr Ethics Approval [08-08-17]				
Document:	Draft Topic guide for participant action research interviews – PEERS			
Version:	Third draft (post-MUP implementation)			
Date:	10-09-18			
Participant Identification Number for this study:				
[Six item code - so first two from: AB - Argyll and Bute, ED - Edinburgh, SB - Borders, followed by Researcher initials, Followed by 01, 02 - e.g. ABAP01]				

PREPARATION CHECKLIST (things to make sure you take with you to the interview)			
Digital recorder			
Participant Information Sheet, Consent Form, Laminated Visual Aids			
Choice of voucher and Voucher acceptance form			

INTERVIEWER CHECKLIST

Prior to interview □ • Written participant information given to participant (or read out and confirmed) □ • Verbal summary of participant information provided to participant □ • Consent form complete □ Following interview □ • Reimbursement (voucher) offered and Voucher Acceptance Form completed (if voucher accepted) □

SECTION 1						
Warm Up	Can you tell me how you found out about the proj	Can you tell me how you found out about the project and came to be here today?				
History of drink and drug use	Can you tell me about your history of drink and dr	Can you tell me about your history of drink and drug use?				
×	 Listen, check and prompt for: Alcohol, Tobacco, Illegal drugs, Prescriber Use within last month, Use within last year, Changes in use – when, contributing factor 	d medications and Legal Highs (Spice etc) ors, consequences				
Recent Alcohol Use	Looking at your recent use (so, the last week of active drinking), can you tell me about the details of how often, ty of drinks, cost, where bought etc?					
	Listen, check and prompt for: • When was last week of drinking • Drink type and brand • Homebrew, Meths etc • Price • How much drunk Thinking about this same week, did you use any of Listen, check and prompt for:	 Daily pattern of drinking Where bought (Pub, Offy, Mate, Van) Where bought (Scotland or England) Delivery or internet use Is this typical or not? What else was going on? 				
	Tobacco, Illegal drugs, Prescribed medica	ations and Legal Highs (Spice etc)				

SECTION 2									
What have been the changes, if	Thinking about the alcohol that you buy								
any in the price, type and location of alcohol, you buy since the law changed (1 st May 2018)?	Listen, check and prompt for: Changes in type of drink purchased Changes in brands purchased 	 Changes in where alcohol is purchased or how people get hold of it 							
Have you noticed any change in	Thinking about the alcohol more generally available								
the products available?	Listen, check and prompt for:	Have any drinks disappeared from shelves?							
	Have you noticed any changes in price, size of tin/bottle etc?	 Have these changes been: small or large, sudden or gradual? 							
Changes in your drinking?	How has the change in law affected overall how much or how often you drink?								
	Listen, check and prompt for:	Amount drunk in any given day							
	Days of drinking	Use of alternatives							
Wider Impact	What impact, if any, has your drinking had on other ar	reas of your lives?							
	Listen, check and prompt for:	Ability to parent							
	Partner	Food bank, loans etc							
	Other family	Involvement in crime/illegal activities							
	 Family life – money, housework, holidays etc 								
Harm Minimisation	How well prepared and/or supported do you think you	and others have been through this change?							
Anything Else	Is there anything else you think we should hear, or kn drinking and other aspects of your life? How much is pricing a factor, compared to other thing	ow, about how minimum unit pricing will affect your gs, in whether and how much you choose to drink?							

SECTION 3					
About You – Demographics	 Age? Gender? Current relationship? Who you live with? Where you live (housing type)? Education – level of last undertaken? Job/occupation/time spent – and sense of income? 				
About You – Treatment History	Have you ever been involved with alcohol and drug treatment and support services? If so, which have you accessed?				
	Listen, check and prompt for: Now, last 12 months and ever Detox; community or inpatient Community Prescribing 	 GP Rehab Other professionals Peer or self help 			

3.3 **Post-implementation interview topic guide for family and carers for work package 2**

0WP2 Interview Schedule - Glyndwr Ethics Approval [08-08-17]				
Document:	Draft Topic guide for participant action research interviews - FAMILY AND CARERS			
Version:	Third draft (post-MUP implementation)			
Date:	10-09-2018			
Participant Identification Number for this study:				
[Six item code - so first two from: AB - Argyll and Bute, ED - Edinburgh, SB - Borders, followed by Researcher initials, Followed by 01, 02 - e.g. ABAP01]				

PREPARATION CHECKLIST (things to make sure you take with you to the interview)			
•	Digital recorder		
•	Participant Information Sheet, Consent Form, Laminated Visual Aids		
•	Choice of voucher and Voucher acceptance form		

INTERVIEWER CHECKLIST

 Prior to interview

 • Written participant information given to participant (or read out and confirmed)

 • Verbal summary of participant information provided to participant

 • Consent form complete

 • Consent form complete

 Following interview

 • Reimbursement (voucher) offered and Voucher Acceptance Form completed (if voucher accepted)

SECTION 1			
Warm Up	Can you tell me how you found out about the project and came to be here today? Who is the drinker/drinkers you are relating to for this interview?		
History of drink and drug use	Can you tell me about X's history of drink and drug use?		
	 Listen, check and prompt for: Alcohol, Tobacco, Illegal drugs, Prescribed medications and Legal Highs (Spice etc) Use within last month, Use within last year, Changes in use – when, contributing factors, consequences 		
Recent Alcohol Use	Looking at their recent use (so, the last week of active drinking), can you tell me about the details of how often, type of drinks, cost, where bought etc?		
	Listen, check and prompt for: • When was last week of drinking • Drink type and brand • Homebrew, Meths etc • Price • How much drunk	 Daily pattern of drinking Where bought (Pub, Offy, Mate, Van) Where bought (Scotland or England) Delivery or internet use Is this typical or not? What else was going on? 	
	Thinking about this same week, did they use an	ny other drugs?	
	Listen, check and prompt for:Tobacco, Illegal drugs, Prescribed medi	cations and Legal Highs (Spice etc)	

SECTION 2					
What have been the changes, if any in the price, type and location of alcohol purchased since the law changed (1 st May 2018)?	 I am going to show you a range of pictures of drinks, and how their prices have changed with the new law. How have these changes in price affected their drinking? How have these changes in price affected other people's drinking? 				
	Listen, check and prompt for:Changes in type of drink purchasedChanges in brands purchased	 Changes in where alcohol is purchased or how people get hold of it Use of alternatives – drugs, meds, meths etc 			
Wider Impact	What impact, if any, has their drinking had on you? On other areas of their lives?				
	 Listen, check and prompt for: Partner Other family Family life – money, housework, holidays etc 	 Ability to parent Food bank, loans etc Involvement in crime/illegal activities 			
Have you noticed any change in	Thinking about the alcohol more generally available:				
the products available?	 Listen, check and prompt for: Have you noticed any changes in price, size of tin/bottle etc? 	 Have any drinks disappeared? Have these changes been: small or large, sudden or gradual? 			
Harm Minimisation	How well prepared and/or supported do you think people have been through this change?				
Anything ElseIs there anything else you think we should hear, or know, about how minimum unit pricing will affect dri drinking and other aspects of their lives? How much is pricing a factor, compared to other things, in whether and how much people choose to dri		about how minimum unit pricing will affect drinkers, their whether and how much people choose to drink?			

SECTION 3						
About You – Demographics of the family member/carer	 Age? Gender? Current relationship? Who you live? Where you live (housing type)? Education – level of last undertaken? Job/occupation/time spent – and sense of income? 					
Treatment History	 Have X or you ever been involved with alcohol and drug treatment If so, which have you accessed? <i>Listen, check and prompt for:</i> Now, last 12 months and ever Detox; community or inpatient Community Prescribing 	 and support services? GP Rehab Other professionals Peer or self help 				

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