



Llywodraeth Cymru
Welsh Government

RESEARCH

Assessing the impact of minimum pricing for alcohol on the wider population of drinkers: interim findings (summary)

This report provides an important interim assessment of the impact of Minimum Pricing for Alcohol on the wider population of drinkers in Wales.

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Research aims and methodology

This report presents results from the third wave of a longitudinal study assessing the impact of Minimum Pricing for Alcohol (MPA) on the wider population of drinkers in Wales. The research was conducted by researchers from the University of South Wales in collaboration with researchers from Glyndwr University and Figure 8 Consultancy.

This report presents findings from research conducted two years post-implementation of the legislation. The findings provide an important interim assessment of the impact of MPA on the wider population of drinkers in Wales.

This interim report is based on data collected two years post-implementation of MPA using two research methods.

1. A cross-sectional, anonymous, online questionnaire survey of adult drinkers living in Wales
2. Qualitative interviews with adult drinkers living in Wales who had either taken part in the baseline interviews that formed part of our longitudinal interview study or had been recruited as replacements for interviewees who had dropped out of the longitudinal study.

Main themes investigated in the study included:

- awareness of and attitudes towards the implementation of MPA
- preparing and planning for the implementation of MPA
- changes in price and availability
- impact of MPA on drinking patterns
- changes in other drinking-related behaviours
- changes in household expenditure and alcohol purchasing patterns
- changes in the use of other substances
- impact of MPA on drinkers' personal lives

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- the impact of MPA on other drinkers

168 drinkers completed the post-implementation cross-sectional questionnaire survey, which is a slightly larger sample than the baseline sample (n=179). The survey respondents were recruited through our networks of contacts and through sharing a link to the survey on social media.

Interviews were conducted with 44 drinkers recruited through the National Survey for Wales, two universities, third sector organisations and the online survey. All interviewees were given a £10 shopping voucher for their participation and all agreed to take part in subsequent interviews over the five-year longitudinal study period.

The research focused on current drinkers aged 18 or over who were resident in Wales. Both the longitudinal interview sample and the cross-sectional survey sample included drinkers from across different parts of Wales who varied in terms of their socio-demographic characteristics, drinking patterns, perceived quality of life, illegal drug use, household income and expenditure. However, minority ethnic groups were not well represented in either sample while women and university students were over-represented in the survey sample and hostel residents were over-represented in the interview sample.

Background and context

MPA involves setting a minimum price below which alcohol cannot legally be sold or supplied.

In Wales, the Public Health (Minimum Price for Alcohol)(Wales) Act 2018, enabled the introduction of minimum pricing for alcohol on public health grounds, an area within the National Assembly for Wales' legislative competence.

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The Act places a duty on Welsh Ministers to lay before the National Assembly and then publish a report on the operation and effect of the legislation at the end of a five-year review period. The results of that report will play an important role in determining whether regulations are made to provide for the continuation of MPA beyond its current six-year lifespan.

To inform the report on the operation and effect, Welsh Government has commissioned an evaluation of the legislation over a five-year period. This report forms part of that evaluation and is based on data collected two years post-implementation of MPA. It is the second of three 'post-implementation' reports that will examine alcohol consumption patterns and related behaviours among moderate, hazardous and harmful drinkers within the general population of Wales.

Main findings

Awareness of and attitudes towards the implementation of MPA

While most participants were aware of MPA a substantial minority were not, suggesting that either publicity about MPA was not as extensive as it could have been or that some people had simply not noticed it.

Those who were not aware included dependent drinkers who had not participated in the study previously and those whose drink of choice was not affected by MPA or who did not drink enough to be affected by the policy.

Those who were aware of MPA described learning about it through a variety of sources including television (news reports), radio, social media and other online sources.

Participants who could recall the content of publicity about MPA were mixed in their recollections with some relaying the reasons for the policy while others remembered more general information advising them that the prices would be increasing.

The samples were mixed in terms of their attitudes towards MPA with interviewees being far less positive about the legislation. Favourable attitudes were driven by the belief that MPA would help to reduce alcohol-related harm. Less favourable attitudes were focused on the unfair impact on dependent drinkers and the way in which it could be circumvented through cross-border shopping.

The competing effect of COVID-19 and routine variations in alcohol prices were flagged as confounding factors that impacted on the visibility and effectiveness of MPA.

Changes in price and availability

Participants were fairly evenly split in terms of whether or not they had observed any price changes since the introduction of MPA.

Those who had not noticed anything indicated that this was because their drink of choice was not affected by MPA or because they did not purchase alcohol often enough to notice any changes. When changes were noticed this was most commonly in relation to the price of strong ciders although some changes were also noted in the price of strong lagers, spirits and wine.

Some drinkers noted the absence of offers and discounts in Wales that were still available in England, and some responded to this price differential by travelling to England to buy alcohol at cheaper prices.

Few participants noted any change in the availability of alcohol products.

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However, those who did notice, spotted changes in the size and strength of various products, particularly cider and strong lager. There was also some indication that certain products were now only available in the smaller convenience stores.

Impact of MPA on drinking patterns

The majority of drinkers in this study continued drinking at the same frequency and quantity as they had before MPA had been implemented. The main reasons for this were because their drink of choice was not affected by MPA or because they did not drink enough for the price change to impact on them. Some dependent drinkers remained unaffected by price changes due to the fact that they stole rather than paid for alcohol.

Among the few who reported changes in their consumption of alcohol, increases and decreases were reported and sometimes both were reported at different points in time.

MPA was identified as a factor in causing changes in only a small number of cases. When MPA did play a role, it was largely a supporting role that reinforced decisions caused by other factors, most commonly health or COVID-19-related factors.

However, there were a small number of cases where MPA was a clear instigator for change including one dependent drinker who chose to enter a detox programme because she could no longer afford alcohol.

Changes in other drinking-related behaviours

The vast majority of drinkers reported little change in either the type or brand of alcohol that they consumed.

Those who did make changes were mainly high-risk drinkers who described switching from strong white cider to spirits either alone or in combination with wine and strong lagers. This was because these drinks offered better value for money. In other words, as predicted in previous reports, dependent drinkers bought (or in some cases stole) the products that gave them the best 'bang for their buck'.

Changes in brand were also reported with some evidence of a shift away from own brands to premium brands as the price differential decreased.

Changes in the location of consumption were more commonly reported (although still in only a minority of cases) but these changes were attributed to COVID-19 and the lockdown restrictions rather than to MPA.

Changes in household expenditure and alcohol purchasing patterns

Most drinkers reported little change in their spending on alcohol in the period since MPA had been implemented. When changes were reported these were more commonly decreases than increases and these were mainly due to factors other than MPA (for example, the pandemic, a change of circumstance and a rise in the cost of living).

When MPA was noted as a factor in any decrease this was among dependent drinkers who described reducing their alcohol use because they could not afford to continue at the same level.

Increases in expenditure on alcohol were also attributed to MPA. Some dependent drinkers had not cut down their consumption and were therefore paying more due to the increase in price. Some moderate drinkers also reported spending more but this was not because of MPA but because they were going out more to socialise in the wake of the pandemic or because they were drinking

more than they had previously.

Many drinkers were able to absorb any price increases into their existing budgets. However, not all drinkers were in this position, and some (particularly dependent drinkers) had to employ, as predicted in previous reports, various coping strategies to continue drinking. This included shoplifting, shifting their household budgets to free up money for alcohol, cross-border shopping, online shopping and in one case home brewing.

Few drinkers made changes in where and how they purchased alcohol. Those who did, described using more deliveries than before March 2020 and this was attributed to the pandemic rather than MPA. Some dependent drinkers reported shifting to convenience stores as their drink of choice (for example, strong lagers) could no longer be bought in regular supermarkets.

Changes in the use of other substances

As predicted in previous reports, few drinkers reported any changes in their use of other substances since March 2020. Indeed, most drinkers had not used illegal drugs before and had not started to do so in the past two years.

When changes were reported these were more commonly increases than decreases and included increases in the use of crack, benzodiazepines and synthetic cannabinoids, which were understood to offer better value for money than alcohol. As predicted, those who reported using illegal drugs after March 2020, had histories of using illegal substances although not all of them had used that specific type of drug before.

A small number of drinkers reported changes in their use of over-the-counter medication, which included increases (due to physical and mental stress) and decreases (due to reduced opportunities of catching any illness) that were more likely to be attributed to the pandemic than MPA.

Increases in the consumption of food and non-alcoholic beverages were also linked to the pandemic and, in particular, working from home, which provided greater opportunities to eat and drink tea and coffee.

There was also some evidence of an increase in consumption of low-alcohol beverages, which were noted to be better tasting and more widely available than previously.

Contrary to predictions, there was only limited evidence of drinkers substituting food for alcohol as a result of MPA, and the use of non-beverage alcohol was reported by just one drinker who witnessed a friend squeezing alcohol from sanitising wipes.

Impact of MPA on drinkers' personal lives

For the majority of drinkers, MPA had little or no effect on their personal lives.

When changes in relationships were reported, these were usually for the worse rather than for the better. The problems were particularly acute among dependent drinkers who described getting into more arguments due to a reluctance to share their supplies with other drinkers and strained relationships as a result of constant demands to borrow money.

As predicted, some dependent drinkers reported increases in acquisitive crime to pay for their continued use of alcohol. Most commonly this involved shoplifting or paying someone less than the minimum price to shoplift on their behalf.

There was also an increase in theft among street drinkers who were victimised when intoxicated. Being intoxicated was reported as being more likely among those who had switched from cider to spirits.

Some drinkers reported improvements in their health following MPA as the

increase in price had encouraged them to stop drinking or cut down their intake. Others, however, reported problems that were linked with the shift to spirits and to the general stress of coping with the price increase.

Most drinkers had not sought support for their substance-related problems since MPA had been implemented. The few that had done so had histories of treatment prior to March 2020. A small number of drinkers described MPA as the catalyst for seeking professional support.

The impact of MPA on other drinkers

Few participants noticed any impact on the lives of drinkers that they knew. When change was noted it was largely among dependent drinkers who observed changes in other dependent drinkers. This included switching from cider to stronger lagers and spirits and an increase in the use of some illegal drugs. The extent to which MPA was responsible for these shifts in behaviour was not always clear.

Some dependent drinkers also witnessed an increase in offending, although there was also evidence of some decreases too.

Finally, there was some limited evidence of dependent drinkers shifting their household budgets away from food to free up money to pay for alcohol and one case of fatal alcohol withdrawal that was perceived to have been caused by MPA.

Conclusions

This study is the second to gather feedback on the impact of minimum pricing for alcohol on drinking patterns and related behaviours in Wales. It is the first,

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however, to examine the impact of MPA at a time when the country is free from COVID-19 related restrictions. This study is therefore a significant one in the assessment of the impact of MPA on drinkers in the general population of Wales. There are several important conclusions to draw from this interim evaluation.

First, is that two years post-implementation, MPA has had little impact on the drinking patterns of the drinkers in this study. Indeed, changes in the frequency and quantity of alcohol consumption were reported by only a small minority of drinkers. Decreases in consumption were more commonly reported than increases and there were examples of MPA being cited as a key factor in some of those decreases. However, it was more common for MPA to play a supporting role that reinforced decisions to change that had been caused by other factors.

Second is that awareness and understanding of MPA was limited among the dependent drinkers who had not been involved previously in the evaluation. Thought might therefore be given to developing some additional publicity material that directly targets dependent drinkers, particularly those who are not in treatment, to ensure that opportunities for harm reduction are not missed.

Third is the finding that some drinkers reported circumventing the legislation by travelling across the border to England to purchase alcohol at cheaper prices. As noted previously, if the impact of MPA is to be fully realised in communities close to the border, then alcohol policy in neighbouring countries needs to be consistent with those objectives. The call for England to introduce MPA would again appear to be a logical one in this context.

Finally, consistent with other research emanating from Scotland, this study found that the widely anticipated negative consequences of MPA were not commonly reported among the drinkers in this study. However, that is not to say that they were entirely absent. Indeed, some of the dependent drinkers in our sample reported experiencing and witnessing some serious health and social consequences, which were attributed directly to MPA. The shift from cider to

spirits and the increase in acquisitive crime are clear examples.

These findings add weight to the call for a harm reduction campaign to be developed and for relevant information and advice to be distributed to this vulnerable group of drinkers. They also add weight to the call for easier access to alcohol treatment (detoxification in particular) and to other appropriate services including drink-free accommodation and mental health support.

Next steps

This report is the third of four reports planned for the assessment of impact of MPA on the wider population of drinkers. The fourth and final report will focus on data collected 42 months post-implementation of the legislation. This follow-up report will draw upon the data presented in this report in order to assess and monitor changes in alcohol consumption patterns and related behaviours, including alcohol-purchasing patterns, over time.

In the final wave of the research, the plan is to conduct repeat interviews with our interview sample (replacing, again, any drop-outs with similar types of drinker) and to repeat the cross-sectional survey with drinkers across Wales.

Moving forward, it is also important to recognise that any assessment of the impact of MPA on patterns of alcohol consumption in Wales may need to take into account the confounding and competing effects of drinkers' responses to the ongoing global COVID-19 pandemic as well as to other confounding factors such as the cost-of-living crisis.

The portfolio of research emerging from the assessment of MPA on the wider population of drinkers is important. It will help to inform and guide the shape and scope of MPA in Wales and, potentially, other countries around the world.

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Views expressed in this report are those of the researchers and not necessarily those of the Welsh Government.

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