

Home Office alcohol strategy consultation:

Joint response from the MRC and ESRC

1. This is a response by the Medical Research Council (MRC) and the Economic and Social Research Council (ESRC) to the Home Office consultation on the Government's alcohol strategy. We address two of the specific questions then mention briefly other research issues relevant to the Government's Alcohol Strategy.
2. Both the MRC and the ESRC have made important contributions to the research evidence for policy. For example, a study by the National Prevention Research Initiative (NPRI)¹-at the University of Stirling has shed light on the effect that alcohol marketing has in encouraging children to drink² which has had major impacts for UK policy³. NPRI is also funding the Alcohol Policy Interventions in Scotland and England study (APISE) also at the University of Stirling. Furthermore, under the MRC-led Addiction and Substance Misuse Research Initiative⁴, the MRC and the ESRC have provided a £1m grant to a team developing the 'Sheffield Alcohol Policy Model' (SAPM). Both APISE and SAPM are mentioned below in terms of their relevance to the Government's Alcohol Strategy.

Response to Consultation Questions

Health as a new alcohol licensing objective

3. Current evidence supports the view that controlling the spatial and temporal availability of alcohol is key to reducing consumption and related harms. Therefore, the Government's intention of enabling local authorities to extend the use of Cumulative Impact Policies to take alcohol-related harm into account is appropriate.
4. The Sheffield model (SAPM), due for completion during 2013, will incorporate econometric analysis developed with the Institute for Fiscal Studies and permit new analyses of policies relating to alcohol availability such as reductions in outlet clustering and restrictions on the number of different types of outlet in a given area. Therefore, this research could help inform licensing decisions and we would be happy to discuss this further with the Home Office.

¹ The National Prevention research Initiative is led by the MRC and made up of government departments, research councils (including ESRC) and major medical charities working together.

² Anderson et al Alcohol and Alcoholism (2009) 44 (3): 229-243. doi: 10.1093/alcalc/agn115 First published online: January 14, 2009.

³ Cited in reports from the British Medical Association (2009) and from the House of Commons Health Committee (HC 151-I January 2010).

⁴ <http://www.mrc.ac.uk/Ourresearch/ResearchInitiatives/Addictionresearch/Addictionresearchclusters/index.htm>.

The Introduction of Minimum Unit Pricing

5. There is compelling evidence from research that the introduction of Minimum Unit Pricing is likely to be effective in reducing alcohol-related harms⁵. Research has shown that as the minimum price threshold increases (between 30p and 50p), alcohol-related health harms would decrease⁶. Importantly, the findings from this research show that the majority of the reductions in health-related harms are predicted to be a decrease in hospital admissions and deaths due to alcohol-related chronic diseases. Furthermore, this research predicts that alcohol-related crimes decrease across the spectrum of violent crime, criminal damage and acquisitive crimes as the minimum price threshold increases.
6. Over the winter of 2012 and 2013, APISE will collect comprehensive baseline consumption data from 3500 adult English and Scottish drinkers, including perceptions of the affordability of alcohol and that purchased on special offers. This could be relevant to Minimum Unit Pricing and discount bans. The cohort of drinkers will be followed up a year later. This data could provide a comparison of policies between Scotland and England where there is potential for different approaches and timescales for implementation.

Other issues relevant to the Government's Alcohol Strategy

7. The MRC and the ESRC held a workshop in October 2012 to scope research opportunities in alcohol misuse. It was attended by opinion leaders and key stakeholders across the full range of research and policy. We are reviewing how to develop these into tractable research opportunities, including:
 - How patterns of drinking link to harms, quantifying longer term health and social outcomes.
 - Better understanding of the 'harm to others' from alcohol misuse, including family members and unborn children.
 - Further research on impacts of advertising, especially through social media on drinking behaviour in younger people.

Summary

8. It is crucial that innovative research continues to be supported to underpin, inform and assess policy. The research programmes funded by the MRC and the ESRC provide exemplars of how this is being achieved.

MRC and ESRC
(5 February 2013)

⁵ Alexander C. Wagenaar, Amy L. Tobler, and Kelli A. Komro. Effects of Alcohol Tax and Price Policies on Morbidity and Mortality: A Systematic Review. *American Journal of Public Health*: November 2010, Vol. 100, No. 11, pp. 2270-2278. doi: 10.2105/AJPH.2009.186007

⁶ <http://guidance.nice.org.uk/PHG/21/EconomicModellingReport/pdf/English>.

About the Research Councils

This is a joint submission from the Medical Research Council (MRC) and the Economic and Social Research Council (ESRC).

Over the past century, the MRC has been at the forefront of scientific discovery to improve human health. Founded in 1913 to tackle tuberculosis, the MRC now invests taxpayers' money in some of the best medical research in the world across every area of health. Today, MRC-funded scientists tackle some of the greatest health problems facing humanity in the 21st century, from the rising tide of chronic diseases associated with ageing to the threats posed by rapidly mutating micro-organisms. www.mrc.ac.uk

The ESRC is the UK's largest organisation for funding research on economic and social issues. It supports independent high quality research which has an impact on business, the public sector and the third sector. The ESRC's total budget for 2012/13 is £205 million. At any one time the ESRC supports over 4,000 researchers and postgraduate students in academic institutions and independent research institutes.