

Commending Public Health Scotland's evaluation of minimum unit pricing

We are concerned that the complaint from a member of the Scottish Parliament to the UK Statistics Authority regarding the findings of Public Health Scotland's evaluation of a minimum unit price for alcohol,¹ whether intentionally or not, gives the impression of seeking to undermine the policy.

This high-quality evaluation studied a population-level intervention in a changing set of circumstances and a charged political environment. The 5-year legal challenge by parts of the alcohol industry indicates the commercial and political interests at play in alcohol policy in the UK and internationally. The key finding of the report estimated a 13.4% fall in alcohol-specific mortality in Scotland due to minimum unit pricing.² Comparing trends in Scotland and England, including during the COVID-19 pandemic when alcohol deaths were increasing in many countries,^{3, 4} is an entirely appropriate approach. This summary of research on minimum unit pricing is comprehensive, including interviews with individuals who fear the policy will be detrimental to them personally or financially. The Public Health Scotland approach of emphasising population-level findings is the right one for assessing population-level interventions, such as minimum unit pricing. The alternatives proposed by the Scottish Conservatives are neither feasible nor appropriate.

The concentration of the decrease in mortality in the lowest income groups is particularly welcome, as a narrowing of health inequalities was one of the key intentions of the policy and it has been achieved. Policy makers can be confident that there are several hundred people with low income in Scotland who would have died as a result of alcohol, who are alive today as a result of minimum unit pricing.

IF, MMc, and IG are members of the Independent Commission on Alcohol Harm. All other authors declare no competing interests.

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