

Thanks

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Healthway Health Promotion Research Grant



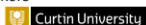
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Alcohol, price and health

- Price increases have been shown to be effective in reducing alcohol consumption (Wagenaar et al., 2009)
- Focus on increased duty & uniform rises in cost
- Disparity between prices at high and low end of the alcohol market
 - Heavily discounted/low-cost alcohol sales prevalent
 - Discounting trends in the retail industry (e.g., BOGOF, happy hours, 2-4-1 etc.)
 - Changes in drinking patterns (e.g., binge drinking, pre-loading)
 - Patients with alcohol-related harms purchased more of their weekly consumption very cheaply compared to wider drinkers

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Alcohol, price and health

- Pricing policy based on 'strength' has been proposed – price based on 'units' of alcohol
- A minimum price of 50 pence per unit in the UK would reduce consumption by 6.9% (Brennan et al., 2008)
- Estimated savings of £9.7 billion in costs associated with excessive alcohol consumption
- Minimum price of \$1 per standard drink mooted (ANPHA, 2013)
- 40% of wine sales at <1\$ per standard drink
- Support from medical community (Donaldson, 2009) and advocacy groups (NICE, 2010)
- Proposal of 45 pence per unit tabled in Scottish Executive
- Introduced in Canada and some indications of reductions in alcohol consumption (Stockwell et al., 2012)
- Little evidence on public perceptions of minimum price
- Public perceptions of minimum unit pricing are likely to influence its acceptability (Katikireddi et al., 2014)

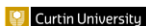
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Public Perceptions

- Research consistently shows public support for treatment and information rather than price change (Greenfield et al., 2004)
- Public may be opposed to minimum price
- No formal investigation to date on public attitudes and beliefs toward the policy
- Aims
 - Investigate knowledge, attitudes and beliefs with respect to minimum price
 - Under what conditions are people more likely to endorse minimum price?

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Previous research

Participants expressed negative views of minimum price

- Scepticism
- Disliked it – 'unfair to sensible drinkers'
- Might exacerbate existing social problems (e.g., crime and drug abuse)
- Misconceptions surrounding the policy

Minimum price might be necessary to tackle excess alcohol consumption

- Prospect of improved public health particularly in the young
- Reducing social disorder, increasing safety

Suggested ideas that would make 'minimum price' more acceptable

- Introduce as broader package
- Revenue generated should fund other interventions

Sources: Hagger, Lonsdale, Baggott, Penney, & Bowen (2011). *Alcohol Insight 82*, ARUK. Lonsdale, Hardcastle, & Hagger (2012). *BMC Public Health*.

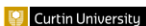
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Method

- Research Design: Qualitative investigation using focus groups
- Participants: 11 focus groups from ten target groups:
 - Young drinkers
 - Blue-collar workers
 - University students
 - Unemployed
 - White-collar workers
 - Older adults
 - Female only
- Procedure: Semi-structured 'interview' schedule with a facilitator (90-mins typical length)
 - Explanation of policy
 - Generate discussion of pertinent issues
 - Opinions on minimum price and implementation
 - All participants encouraged to contribute

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Method

- Data analysis: Qualitative analysis using inductive thematic content analysis of transcribed interview data
 - NVIVO software used to categorise and organise data
 - Main emergent themes and sub-themes identified
 - Multiple readings using an iterative approach until 'theme saturation' achieved
 - Theory *building* rather than theory *testing*
 - Advantageous in areas where little knowledge known/available

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Results

Major Theme	Subtheme
Attitudes toward policy	<i>Increased crime</i>
	<i>Increased drug use as an alternative</i>
	<i>Increased financial strain</i>
	<i>Concerns regarding market reaction</i>
	<i>Other factors cause excess alcohol consumption</i>
Beliefs about effectiveness	<i>Unfair, affects those from a lower SES</i>
	<i>People will find a way to procure alcohol</i>
	<i>A bigger increase is needed</i>
Strategies to increase acceptability	<i>Education and information</i>
	<i>Transparency and positive use of the revenue</i>

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Summary of themes

Participants expressed negative views of minimum price

"The policy might lead to crime increase because they're going to get the money [for alcohol]"

"They'll go to drugs if they cannot buy alcohol"

"If you want to do something you'll find a way...they may decide to not spend money on the kids clothes or schooling and spend it on alcohol"

"They're [alcohol producers] just going to simply market their product at higher cost"

"I don't think this [minimum price] is the answer... I think it's a cultural thing"

"I think it's unfair...it targets the lower earners"

Beliefs about effectiveness

"I don't think so, it'll have a negligible impact, people will just switch what they're drinking to something a bit more premium"

"I think across the board increases"

Suggested ideas that would make 'minimum price' more acceptable

"Alone it [minimum pricing] won't work, but in conjunction with advertising the negative side effects of harmful alcohol consumption it'll work"

"As long as there's transparency over where it's [the money raised] is going"

Source: Keatley, Hardcastle, Carragher, Chikritzhs, Daube, Lonsdale & Hagger (in submission) *ANZJPH*.

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Implications

- Considerable misunderstanding of policy
- General skepticism over effectiveness
- Linked to beliefs about taxation
- Beliefs about effectiveness and 'population level' change need to be marketed
- Some 'moderate' perceptions, particularly if the revenue is ringfenced
- Education may help pave the way for a minimum price policy among the general public

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