1. SAMH

SAMH is Scotland's leading mental health charity and is dedicated to mental health and wellbeing for all. SAMH provides both direct services and an independent voice on all matters of relevance to people with mental health and related problems.

SAMH has over 80 services throughout Scotland which address a range of individual needs. Our services support people who have experience of mental health problems and other forms of social exclusion including homelessness and addictions.

SAMH promotes the development of legislation, policy and practice that is based on the real life experiences of people with mental health and related problems and respects their human rights.

2. GENERAL COMMENTS

SAMH greatly welcomes moves to change Scotland’s relationship with alcohol and supports much of what is proposed in this Bill. As a health promoting organisation, we would urge politicians of all parties to back plans for the minimum pricing of alcohol.

There are strong links between poverty, deprivation, widening inequalities and problem alcohol use but the picture is complex. It may involve factors such as housing, mental health problems and poor employment opportunities, which are further compounded by a lack of resources.

SAMH understands that the measures set out in this Bill are to be seen as part of a wider approach to tackling alcohol misuse; as set out in Changing Scotland’s Relationship with Alcohol: A Framework for Action. The regulatory measures proposed in this Bill could be very effective, but only if implemented as part of a broader approach which meaningfully addresses the underlying causes of, and deals with the negative impacts resulting from, alcohol misuse.

3. SPECIFIC COMMENTS

The advantages and disadvantages of establishing a minimum alcohol sales price based on a unit of alcohol

SAMH has been providing specialist services to people with Alcohol Related Brain Damage (ARBD) for a number of years and has considerable expertise in this field. Alcohol related brain damage (ARBD), also known as alcohol related brain injury (ARBI), is a term used to describe the physical injury to the brain sustained as a result of excessive or long-term alcohol consumption. Alcohol can have a profound impact on individuals, families, communities and
our society as a whole, yet few people acknowledge - or are even aware of - how much alcohol they consume and the links between alcohol and mental health.

The introduction of minimum pricing is clearly a divisive and highly emotive issue. We have considered our response to this consultation in light of the experiences of our staff and the people who use our services, as well as the available evidence from around the world pertaining to the correlation between price and alcohol consumption. SAMH believes that there is sufficiently compelling evidence to support the view that as alcohol becomes more affordable, consumption increases, and that as the price increases consumption goes down. Introducing minimum pricing for alcohol could therefore produce substantial social, economic and health benefits for Scotland.

SAMH supports the view that minimum pricing targets alcohol that is sold cheaply and that cheaper alcohol tends to be purchased more by harmful drinkers than moderate drinkers. Therefore, a minimum pricing policy could be seen as a targeted approach. Often the most damaging effects of alcohol are concentrated amongst our most deprived individuals and communities, where alcohol and drugs may be used to temporarily escape personal and social problems. It is also amongst these individuals and communities where mental health problems are to be found in the greatest severity and abundance. Retrospective postmortem studies have found that a substantial proportion (up to 56%) of people who completed suicide met the criteria for alcohol abuse or dependence.\(^1\)

The Scottish Government has stated that the estimated decrease in alcohol sales would be more than offset by a unit price increase, leading to overall increases in revenue from alcohol sales. While SAMH can appreciate this rationale, the benefits of minimum pricing would be greatly maximised if a proportion of the resulting monies were reinvested in alcohol related services and initiatives; which require considerable development and sustained investment.

**The level at which such a proposed minimum price should be set and the justification for that level**

Transparent evidence should underpin all policy and practice aimed at addressing alcohol misuse in Scotland. SAMH would expect minimum pricing to be set at the level at which the greatest health benefits would be felt by greatest number of people, evidenced by an independent analysis of similar initiatives elsewhere and with particular consideration to patterns of alcohol consumption in Scotland. This level should be set and subsequently varied by the Scottish Ministers subject to the control of the Scottish Parliament.

---

The rationale behind the use of minimum pricing as an effective tool to address all types of problem drinking

SAMH shares the approach outlined in the Framework for Action, which states: ‘alcohol misuse is a complex issue involving a multitude of factors, including socio-economic, cultural, educational, community-based, health-related, or linked to individual behaviours and choices. This means there is no “miracle cure” or “one size fits all” solution.’

Alcohol is seen as an important part of Scottish culture and most social events and occasions involve drinking alcohol. Drinking alcohol sensibly and in moderation can be enjoyable and has been shown to have some positive effects on health. However, people are often encouraged to take risks when it comes to alcohol; to drink more, to drink stronger drinks or to drink more often or faster.

Minimum pricing may go some way to reducing Scotland’s overall levels of alcohol consumption. However, redefining the cultural norm in Scotland will require a population approach which supports and encourages more responsible drinking, as well as increasing awareness and understanding, in order to empower and enable individuals to make more positive choices. Chronic alcohol misuse affects only a small percentage of the population when compared to the percentage which currently engages in harmful levels of alcohol consumption.

We would recommend that awareness and understanding extends beyond just alcohol awareness, and encompasses mental health and how mental health and alcohol interact. A SAMH service user, with ARBD, commented that they were undeterred from drinking alcohol excessively despite being aware of the risks to their physical health but added that, had they been aware of the potential impact on their mental health, they would have taken steps to address their levels of consumption.

SAMH staff, working with people who would be considered harmful drinkers, intimated that while minimum pricing may reduce overall consumption, it would be insufficient to reduce the alcohol intake of harmful drinkers to within guideline levels - although it was recognised that any reduction would be positive. It is also the case that minimum pricing may have little effect on the more moderate, but still at-risk drinkers. Regulatory responses to different alcohol products therefore require to be continually reviewed and measures should also target those products which are favored by harmful drinkers.

The Framework for Action outlined a package of measures which, if taken together, would greatly reduce alcohol related harm. This included a commitment that Towards a Mentally Flourishing Scotland would recognise the relationship between alcohol and mental health and that where appropriate this relationship would be a key feature of related actions and commitments. Towards a Mentally Flourishing Scotland does comment that targeted groups for action could include people with alcohol problems, and that actions could include a focus on making linkages to other key public
health and health improvement agendas, including alcohol. SAMH would like to see these commitments taken forward.

**The advantages and disadvantages of introducing a social responsibility levy on pubs and clubs in Scotland**

We support, in principle, the introduction of a social responsibility levy, though seek further clarification on how this would be implemented and how the resulting funds would be allocated.

As stated above, there is a need for investment to support significant improvements in both prevention and treatment services, as well as broader initiatives to transform Scotland's relationship with alcohol. Applying a social responsibility levy to those commercial premises which benefit from the sale of alcohol could help to secure funding for this purpose.

It is our understanding that the uses to which a social responsibility levy should be put would not be set out nationally but that local authorities would be expected to identify where the use of additional money could best contribute to the achievement of the licensing objectives. It is unclear how local authority spending in this area could be tracked or how funds could be assured to be specifically targeted towards the achievement of the licensing objectives; this is especially so given the removal of ringfencing and the new relationship which exists between local authorities and the Scottish Government.

At this stage, SAMH supports the provisions in the Bill for an enabling power but seeks further clarification on when a levy would be applied and how the resulting funds would be allocated.

**The justification for empowering licensing boards to raise the legal alcohol purchase age in their area to 21**

SAMH would support empowering licensing boards to raise the legal age to purchase alcohol from off-sales to 21. We have taken this decision as the brain is still developing during adolescence and is therefore more sensitive to alcohol. SAMH appreciates that some young people may feel this measure to be unfair and fully recognises that most young people drink responsibly, however alcohol can impact disproportionately harshly on young people and this can be a particular problem for some communities.

Raising the legal purchasing age could act as a deterrent for drinkers under 18 and, as alcohol is cheaper and more widely accessible in off-sales than on-sales, this measure may also help to reduce the amount of alcohol purchased by young people overall. It is also true that on-sales premises offer a more controlled and safer drinking environment, where behaviour can be better moderated.

We would expect licensing boards to carefully consider evoking this power but feel that the potential health risks would justify the use of this power where
particular problem areas were identified. It is also the case that alcohol is too widely available and SAMH would like to see fewer alcohol licences being granted in order to address this situation.

**The role of promotional offers and promotional material in encouraging people to purchase more alcohol than they intended**

Promotional offers and promotional materials are commonplace throughout Scotland and play a big part in Scotland’s drinking culture. SAMH fully supports moves to restrict alcohol promotions and to emphasise that alcohol is not an ordinary commodity.

Alcohol is currently portrayed as a glamorous product and we are bombarded by media messages that promote it’s use while minimising the serious consequences of alcohol problems.

Discount promotions in particular encourage and enable people to buy more alcohol than they would normally. Bringing off-sales into line with on-sales so far as promotion of alcohol is concerned would send a clear and consistent message, and also address the shift to drinking at home and purchasing alcohol from supermarkets as opposed to on-sales.

**Any other aspects of the Bill**

Decline in the relative cost of alcohol, increased availability, and changing cultural attitudes may go some way in explaining increased alcohol consumption in recent years. But in addition, in Scotland, major inequalities due to the effects of post-industrial decline and global capitalism produce social and economic problems which are compounded by the high use of alcohol.

There can be no one response to alcohol; consumption of alcohol varies over time and between different population groups. A key point is that while regulatory measures will help to reduce alcohol related harm, they will do nothing to address the underlying causes of alcohol consumption unless taken as part of an overarching and comprehensive strategy.

SAMH fully supports the Scottish Government’s efforts to change Scotland’s relationship with alcohol. We believe that changing this relationship will be beneficial for the mental health and wellbeing of all.

Aidan Collins  
Policy Officer  
SAMH  
20 January 2010