

Minimum unit pricing for alcohol targets men's drinking habits more effectively than women's

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Alcohol pricing policies—such as duty increases and minimum unit pricing—appear to be more effective at reducing consumption and harm

for men than women, according to a new study.

The research found that each of the three policies modeled—a 10% duty increase, and minimum unit prices (MUP) of £0.50 and £0.70 per UK unit—would lead to larger estimated reductions in consumption and hospital admission rates among men than [women](#). The authors also showed how this is driven by [gender differences](#) in alcohol consumption, purchasing patterns and harm among adult drinkers in England.

The study was led by the University of Glasgow MRC/CSO Social & Public Health Sciences Unit with academics at the University of Sheffield and published today in *Addiction*.

The paper is the first to estimate whether alcohol [pricing](#) policies such as alcohol duties and minimum unit pricing have different effects on women and men's alcohol drinking and health.

Effective alcohol policies are important for tackling health problems associated with [alcohol consumption](#). Scotland was the first country in the world to implement minimum unit pricing for all alcohol sales (setting a price below which a unit of alcohol cannot be sold), introducing the policy in May 2018, with plans to review it in April 2024.

The study found a £0.70 MUP would have larger effects than a £0.50 MUP, and a 10% tax increase would have the smallest effect. All policies are estimated to reduce high-risk drinkers' consumption by far more than moderate drinkers," but within each consumption group, the reduction in men's drinking is estimated to be larger than reductions in women's drinking.

At full effect—that is, once consumption changes have worked their way through to health outcomes—a £0.50 MUP is expected to lead to a

sevenfold larger reduction in consumption and a three times larger reduction in hospital admissions for men compared to women.

In response to all policies and across all drinker groups, women's spending would increase more than men's. For example, in response to the two MUP policies, male heavy drinkers in deprived areas are estimated to modestly reduce how much they spend on alcohol whilst substantially cutting down their consumption ; however, female heavy drinkers in deprived areas are estimated to cut down less but instead spend a lot more on alcohol.

Reductions in hospital admissions are estimated to be substantially larger among men than women, reflecting the greater consumption reductions. For women, only a MUP of £.70 is estimated to produce large reductions in admissions, but even for women who drink heavily the effect on harm is much smaller than for men.

Petra Meier, lead author of the study and Professor of Public Health at the University of Glasgow, said: "We know that on average, men drink and spend about twice as much on alcohol than women, and have just over twice the rates of hospital admissions. Although men and women face similar risks from drinking at moderate levels, women actually face substantially greater risk of health harm when drinking heavily. Before our study we had no evidence on whether some of the most discussed policy options, alcohol duty and minimum pricing policies, work differently for men and women.

"Our modeling suggests that men's drinking and risk of alcohol-related hospital admissions would decrease substantially more than women's for both duty increases and minimum unit pricing policies.

"This is important to know because policy makers want to avoid deepening existing health inequalities. If policy makers know that

pricing policies are likely to have greater effects on men than women then they can decide if this is desirable.

"For example in the UK, one might argue that policies are well targeted because rates of alcohol-related harm are much higher in men than women. On the other hand, the smaller effects on [consumption](#) and implications for household budgets when female heavy drinkers increase their spending on alcohol may be seen as a concern. Knowing about differential impacts also allows [policy makers](#) to consider what other policies should form part of a comprehensive alcohol strategy."

The study used the Sheffield Alcohol Policy Model to study the impact of three alcohol price policies on adults over 18 in England: a 10% duty increase and minimum unit prices (MUP) of £0.50 and £0.70 per UK unit.

The study, "Alcohol [policy](#) and gender: a modeling study estimating gender-specific effects of [alcohol](#) pricing policies" is published in *Addiction*.

More information: Petra S. Meier et al. Alcohol policy and gender: a modelling study estimating gender-specific effects of alcohol pricing policies, *Addiction* (2021). [DOI: 10.1111/add.15464](https://doi.org/10.1111/add.15464)

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