Author's response to reviews

Title: A minimum price per unit of alcohol: A focus group study to investigate public opinion concerning UK government proposals to introduce of new price controls to curb alcohol consumption

Authors:

Adam J Lonsdale (adam.lonsdale@brookes.ac.uk)
Sarah J Hardcastle (s.hardcastle@brighton.ac.uk)
Martin S Hagger (martin.hagger@curtin.edu.au)

Version: 3 Date: 3 April 2012

Author's response to reviews: see over
April 4, 2012

Simon Harold
Executive Editor
BMC-Series Journals
Biomed Central
Floor 6, 236 Gray's Inn Road
London, WC1X 8HL

Re-submission of manuscript to BMC Public Health

Please find attached a revised version of the manuscript entitled “A minimum price per unit of alcohol: A focus group study to investigate public opinion concerning UK government proposals to introduce of new price controls to curb alcohol consumption” for consideration for publication in BMC Public Health. The manuscript is co-authored with Drs. Adam Lonsdale and Sarah Hardcastle.

We have endeavoured to respond to all of the referees’ comments and outline them in red font alongside the original comments in the itemised list below.

We declare we have no competing interests and that the manuscript has not been submitted for publication or published in its current form elsewhere.

We look forward to hearing from you.

Yours sincerely,

Martin Hagger, PhD
Professor of Psychology
Response to Reviews

REFEREE 1: Nick Heather

REFEREE 1’S COMMENT: This paper reports the findings of focus groups among the general public concerning the introduction of a minimum unit price (MUP) for alcoholic beverages. As such it is very topical and of much interest to the alcohol research and policy community. It will be especially valuable in giving an impression of the opposition that would likely be generated by an attempt to introduce such a policy and also in describing specific misunderstandings that government would need to dispel if MUP were to become acceptable to the public, together with ways in which this might be done (although it seems there are a great many misunderstandings here which would pose a difficult problem for mass communication education). The design and methods of the study seem adequate and necessary improvements to the paper are few.

AUTHORS’ RESPONSE: We would like to express our gratitude to the reviewer for his positive feedback.

Minor essential revisions:

REFEREE 1’S COMMENT 1) In the Abstract and elsewhere it is stated that the first objection to MUP is ‘scepticism of minimum pricing as an effective means to reduce alcohol consumption’. Although it has been estimated by the Sheffield group that MUP would lead to a small overall decrease in per capita consumption, the focus group participants were surely right when they interpreted it as a targeted policy. To avoid misunderstanding among readers, I suggest ‘... to reduce harmful alcohol consumption’.

AUTHORS’ RESPONSE 1: Acknowledged. We have made changes in the manuscript to make it clear that ‘harmful alcohol consumption’ is what is generally referred to by participants in the focus groups.

REFEREE 1’S COMMENT 2) The Introduction could be updated to take into account developments since the paper was written. These are: (i) Andrew Lansley, the Health Secretary’s recent rejection of MUP (see, eg, Independent on Sunday, 18-12-11); (ii) the latest progress on the MUP bill in Scotland; (iii) the development of the Government’s policy on banning below cost alcohol sales.

AUTHORS’ RESPONSE 2: Good points. Actually, the landscape has changed even further recently since the recent alcohol policy document which reflects a U-turn by the UK government on minimum price. We have therefore re-written this section, updated references to the bill in the Scottish Executive, and the ban on “below cost” sales (something also pointed out by Referee 2).

REFEREE 1’S COMMENT 3) At several places the authors say that there has been little in-depth investigation of the attitudes and beliefs of the general public regarding
AUTHORS' RESPONSE 3: We have clarified this point and made unequivocal statements that there is no work on attitudes and beliefs toward minimum price.

REFEREE 1'S COMMENT 4) The title of the paper is strangely ungrammatical; presumably the 2nd 'of' should be deleted. There are other places where the paper has been carelessly prepared, eg. typographical errors, ungrammatical sentences and missing parts of references in the list.

AUTHORS' RESPONSE 4: Yes. Apologies for this. We have deleted the second 'of' in the title and have been diligent in proofreading the revised version of the manuscript to eliminate the careless errors and grammar. The reference list has been updated.
REFEREE 2’S COMMENT: This paper provides qualitative evidence on from UK focus groups on the public's attitudes and beliefs around proposed minimum unit pricing policies for alcohol. Although the paper offers a useful and new contribution to this area of policy debate, it require substantial revisions to ensure evidence is fairly represented, readers are able to judge the quality of the research and the paper is easier to read.

AUTHOR’S RESPONSE: We would like to thank the reviewer for the time spent on the manuscript, we have attempted to make the revisions required in this manuscript and find that the end result is substantially improved.

Major Compulsory Revisions

REFEREE 2’S COMMENT 1. One major concern with the paper is the way sources of evidence are used. In several places, claims are referenced to inappropriate or out of date sources or previous evidence is not appropriately or accurately described. Examples include:

AUTHORS’ RESPONSE 1: We have reviewed all of the sources to which we refer in the manuscript and have made the specific changes to each instance outlined by the reviewer below. We have also checked the other sources for any further errors.

- p.6 Below cost selling definition was agreed many months ago (duty+VAT)

AUTHORS’ RESPONSE: Yes, this was a remnant from a previous draft and we have now corrected it and specified an alternative reference.

- p.7-8 "A minimum price would not lead to increases in the household expenditure of moderate drinkers" They key evidence for this is the work referenced by Meier et al. which clearly shows moderate drinkers' spending would increase albeit by less than that of harmful drinkers.

AUTHORS’ RESPONSE: This has been changed to be consistent with the Sheffield data and the appropriate reference cited.

- p.8 Ref: 32 - health practitioners including doctors have repeatedly endorsed minimum pricing (and the authors reference several instances of this) so a survey of medical students is not acceptable to support claims health practitioners are unconvinced.

AUTHORS’ RESPONSE: We feel that our statement here was pretty clear – we do not imply here that health practitioners are unconvinced, merely that there are some who remain unconvinced, so we don’t think this mention was outlandish – we have provided a balanced view of the advocacy by the greater medical community
elsewhere, as the Referee points out. We have altered the wording slightly to make it clear that this does not generalise to the main medical community.

- p.25 Ref 33 - is presented in a discussion of UK public opinion without noting this is an Australian study.

AUTHORS’ RESPONSE: We don’t think it really matters that the Tobin et al. research is an Australian study, we feel that the contexts and drinking problems are sufficiently similar in the UK and Australia for these opinions to generalize. We have, however, made it clear that this is Australian research.

- p.27 Ref 20 does not contain evidence of disproportionate effects on those from disadvantaged backgrounds - it merely notes concerns exist around this. In fact there is inconsistent evidence on this (see studies by IFS and Ludbrook).

AUTHORS’ RESPONSE: We agree that we have somewhat misrepresented this reference, so we have removed this in the revised manuscript.

- p30 Ref 44 refers to alcoholism whereas the discussion is about general consumption.

AUTHORS’ RESPONSE: We have replaced this reference with two alternatives including systematic review that focused on the effects of interventions on alcohol harm in the general population rather than in problem drinkers.

These are the most obvious examples and I have not checked all sources to confirm claims made in the text. A broader point about sources of evidence is that much of the evidence is taken from secondary sources (e.g. meeting reports, committee reports) rather than primary research. As noted above, the key evidence base for minimum pricing is the modelling work of Meier et al. and many of the secondary sources are drawing on this.

AUTHORS’ RESPONSE: Acknowledged. As this is an area in which the evidence is fairly sparse, it is not surprising that other sources make heavy use of the key research in this area, namely, the Sheffield data. However, we have also included additional primary research that has come to light including updates of the Sheffield data (commissioned by the Scottish Executive) and a recent study (the only one of which we are aware) examining the effects of minimum price on alcohol consumption from Canada.

REFEREE 2’S COMMENT 2. I have serious concerns regarding the methodology of the focus groups. At three separate points in the text introducing the study the authors say they assumed the public would generally hold negative views towards minimum pricing. They then state in the methodology “the analysis was conducted with no prior assumption regarding participants’ perceptions of...minimum pricing”. Given the concerns I will outline below regarding balance in presentation of the findings and the methodology which involved the researchers explaining the policy to participants, this raises important questions around the integrity of the project. Given these prior assumption have been made clear, I would insist that the researchers clearly detail how these assumptions may have affected the results, whether they
influenced how the policy was explained to participants and give much greater detail in explaining the information about the policy which was provided to participants. I would also note that such prior assumption are inconsistent with the claimed "inductive approach" to analysis.

AUTHORS’ RESPONSE 2: We have added detail on the information and script given to participants about the policy and the fact that the policy was put across in a ‘positive’ light, consistent with the views of the researchers. We have added in a few sentences to explain our stance on the data analysis, given that researchers always have prior views and assumptions: “Consistent with an inductive approach, there was an attempt to be ‘open’ to the data in terms of emerging themes. However, it is recognised that themes developed are not developed through a ‘tabula rasa’ [1]. It is, therefore, acknowledged that the interpretation of data will be influenced by the researcher’s prior knowledge and views (in this case, by the knowledge and awareness of the researcher of the effectiveness of pricing policy in curbing alcohol consumption) but, at the same time, there is an attempt to be open to new findings that may, for example, conflict with existing research or the researchers’ perspectives”.

REFEREE 2’S COMMENT 3. The paper is unnecessarily long in my view, particularly given much of the material is repetitive and could be better structured. My suggestions to address this are: The recommended responses which follow each set of results overlap considerably and do not need to be given separately. A discussion section after all of the results would allow the authors to condense this into a much briefer and more coherent set of general recommendations.

AUTHORS’ RESPONSE 3: The paper has been substantially shortened, especially the results section where the repetitive statements and intros to themes and sub-themes has been removed, shortened or changed. The discussion has also been separated from the results section to avoid repetition.

The background section is overly long and contains repeated information (e.g. stating the effectiveness of price policies on p5 and restating on p7) without properly describing the anticipated effects of minimum pricing which become relevant later (e.g. differential impact on different types of drinkers). A concise summary of the relevant evidence on burden of harm, price and minimum pricing, the current policy position and the arguments against would suffice.

AUTHORS’ RESPONSE: The introduction section has been modified considerably on the basis of this and other Referees’ comments and we have attempted to remove excessive repetition, unless it is required for summarising or emphasis.

The writing style generally has a repetitive tendency with phrases like "people’s attitudes and beliefs concerning proposed introduction of a minimum price per unit of alcohol in the UK" or the prior assumption about people’s attitudes being used repeatedly rather than being shortened or taken as read on later use. In the results, sections, subsections and sub-sub-sections are introduced using similar statements about the findings.
AUTHORS’ RESPONSE: The written style of the results section has been changed to avoid such repetitive tendencies especially in the introductions to sections and sub-sections.

REFEREE 2’S COMMENT 4. My reading of the results left me unconvinced the authors give sufficient balance in summarising their findings. The abstract states “there was little evidence to suggest that people would support the introduction of a MUP policy” and the results state “There was an overall opposition to the policy”. However, two sections are presented showing qualified support and quotes are presented showing unqualified support. Also, other respondents believe the policy will have an effect but not that it will be seen at the population level. I appreciate the authors communicate this in their discussions and also offer more context to the quotes which partially explain their interpretations; however, I feel the summaries of the evidence do not communicate these more nuanced aspects of the evidence.

AUTHORS’ RESPONSE 4: The results section has also been substantially revised. There is further narrative around the quotes to stick closely to what the interviewees are saying (and thereby respecting and honouring their views both for and against the policy) and thereby offering more balance in relation to relative support of the policy.

REFEREE 2’S COMMENT 5. Setting aside concerns about prior assumptions of negative attitudes. I would still have liked to see much more information on how minimum pricing was described to participants. For example, was it explained to participants whether prices in the on-trade would be largely unaffected? Were participants given any insight into the evidence around who spends what on alcohol? Were participants only shown lowest prices for each beverage or were they shown a range of example prices? All of this should then be reflected on in the limitations of the research.

AUTHORS’ RESPONSE 5: More information on how minimum pricing was described to participants has been included in the Method section. The following limitations has been added to the limitations and future research section: “Future qualitative research exploring public opinion should also provide further details to participants such as evidence and statistics about who spends what on alcohol, evidence that prices in the on-trade would be largely unaffected, and a range of example prices for each beverage”.

Minor Essential Revisions

1. p.4: Does £2.7bn refer to per annum?

AUTHORS’ RESPONSE: Yes, this has been clarified.

2. p5 para 1: Tax does not necessarily raise the price of all alcohol - retailers have the option to pass through as they choose. More accurate to say it applies to all alcohol.

AUTHORS’ RESPONSE: Good point, we have now modified this statement: “…one of the disadvantages of taxation is that it applies uniformly to all alcoholic beverages which tends to maintain the disparity between the cost of alcohol at the high- and low-ends of the market.”
3. p.6 para 1 Scotland bill has now been published

AUTHORS’ RESPONSE: We have modified this section accordingly and also augmented it in light of recent proposals to introduce a minimum price by the UK government [2-4].

4. p7 and other places - avoid use of hazardous drinkers to describe all those drinking over limits. Hazardous drinkers has been used in guidelines to refer to a specific group lying between moderate and harmful consumption.

AUTHORS’ RESPONSE: A paragraph has been added to highlight the drinking behaviour of participants and to highlight and define the number of ‘hazardous’ (using the FAST test) drinkers from the various working groups and backgrounds.

5. p10 para 2: How do the authors define hazardous drinkers?

AUTHORS’ RESPONSE: We have included a definition to denote hazardous drinking in the first paragraph of the methods: “According to Hodgson et al. [5], a score of 3 or more on the Fast Alcohol Screening Test (FAST) indicates hazardous drinking”.

6. At several points the authors suggest the price of alcohol for moderate drinkers is unchanged. This is not the case. All drinkers face the same price changes and all drinker types buy below MUP alcohol. However, it is the proportion and overall quantity of alcohol which is MUP for each drinker group which determines the impact. As a result the authors should say that the impact on moderate drinkers will be smaller but not that the cost is largely unchanged or that moderate drinkers are not affected.

AUTHORS’ RESPONSE: Yes, this was a point the Referee raised earlier with respect to reference to the NICE public health guidance. We have made changes in the manuscript to ensure that it is clear that all groups are affected by minimum price, but the effects are greater for heavy drinkers.

Discretionary revisions:

1. The participants comments read very much like the arguments made by the alcohol industry and the manufacturers in particular. It would be nice to have some reflections on this and how the industry appears to be winning the public debate. Many letters to newspapers from the industry are available on line to source such a discussion.

AUTHORS’ RESPONSE: After carefully consideration we have opted not to engage in this debate for two main reasons. First, it would require considerable space to portray a balanced and representative view, and the current manuscript is already very long considering the number of quotes and themes extracted from the data. Second, we think that this debate is not directly germane to the current arguments and, in all probability, would detract from the direction and continuity of the arguments in the current manuscript.
REFEREE 3: Nikos Chatzisarantis

REFEREE 3’S ORIGINAL COMMENT: This manuscript presents a study that examines attitudes towards a policy that increases price of alcoholic beverages. I think that the manuscript is well written and it provides insights into beliefs and attitudes towards this policy. However, from my point of view, I am unsure whether participants are able to assess or evaluate success of such policies given that effects of these policies on drinking are statistical in nature. For example, participants used smoking as an example to justify failure of similar policies in reducing smoking. However, as the authors stated, such policies were successful in reducing smoking rates. Of course, understanding attitudes is important but I would like the authors to be clearer as to how people’s viewpoints can be used to develop interventions. For example, the fact that participants are opposed to such policies may not mean that “price increasing” policies are going to fail. All in all, I think that the authors need to clarify (by providing examples) how observed beliefs and attitude may inform campaigns and interventions aiming to reduce alcohol intake.

AUTHOR’S RESPONSE: We agree with the reviewer’s view that participants may be unaware of the effectiveness of a minimum price policy in to reduce alcohol consumption at the population level. But we feel that this is actually an important illustration in the current research – that people in the general population do not have sufficient knowledge or facts regarding the effects of such policies, which may, therefore, affect their attitudes and beliefs toward the policy and, in particular its effectiveness. We have, however, taken care to make it clear that the introduction of a minimum price policy will be effective in reducing alcohol consumption, as clearly evidenced by modelling data from Sheffield. We have also made it clear that we did not expect the negative attitudes of people towards the policy to have an impact on the effectiveness of the policy. But their beliefs will affect whether or not they support the government and vote for politicians who introduce such policies. It will also affect whether people are generally supportive of policies to curb alcohol in the future. The focus here is on acceptability rather than effectiveness.
References


2. UK Home Office: Alcohol. [http://www.homeoffice.gov.uk/drugs/alcohol/]

