Autumn Budget 2025



Summary

Action now to prevent alcohol harm will:

- Raise revenue
- Deliver on the Government's priorities for health, productivity, and safer streets
- Improve our wellbeing and prosperity

Reintroducing the duty escalator at RPI+3% would raise an additional £4.6billion by 2030-31¹

Key asks:

- Commit to uprating duty rates each year at 2-5% above inflation by reintroducing the alcohol duty escalator.
- Increase the public health effectiveness of alcohol duty by ending cider exceptionalism.
- Lower the strength threshold for the higher rates of duty from 8.5% to 6.5% ABV. This
 level is widely considered to be strong for beer or cider.
- Introduce Minimum Unit Pricing (MUP) in England with a rate escalator.

We welcome the opportunity to make a representation to the 2025 Autumn Budget. Alcohol Change UK is the leading UK charity working to reduce alcohol harm. We are not anti-alcohol. We are anti-alcohol harm. Our vision is a society free from alcohol harm, delivered through five key changes: improved knowledge, better policies and regulation, shifted cultural norms, improved drinking behaviours, and more and better support and treatment. We focus on evidence and compassion. We produce research, deliver the incredible Dry January® challenge as part of the year-round behaviour change programme: Try Dry®, provide leading edge training to public-facing professionals including on our award-winning Blue Light approach, provide independent information to the public, and share our expertise with Governments to help them to improve the nation's health and wealth.

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Bold alcohol policy is good for the economy

Action on alcohol delivers on the Government's priorities of boosting productivity and increasing revenue;

Boosting productivity

- A healthier population that is protected from crime is happier, wealthier and more productive. Alcohol harm is a *preventable* cause of disrupted sleep, sickness, poor dental health, chronic illness and premature death.²
- The cost of alcohol-related harm in the UK is estimated to be at least £33bn each year, including costs linked to health, crime, and lost productivity.³ The economic costs are likely to be higher than this. As the Cabinet Office has pointed out,⁴ most figures are likely to underestimate the cost of alcohol to society.
- The impact of alcohol on productivity includes unemployment, underemployment, absence from work and presenteeism while intoxicated or hungover, with an estimated cost to the economy of over £5 billion per year.⁵
- Research by the Behavioural Insights Team, commissioned by Alcohol Change UK, shows that those who drink alcohol report greater limitations in daily functioning, including among those drinking below the low risk drinking guidelines. Those drinking above 14 units per week took more days off work and had more days of reduced capacity compared to those who have never drunk alcohol. The research suggests that between 17.5 million and 21 million days of missed work each month could be linked to high levels of alcohol consumption. ⁶
- We recently commissioned IPPR to investigate the impact of alcohol on the workforce and workplaces in the UK. The new evidence highlights the economic case for action on alcohol harm, with alcohol consumption linked to sickness absence and reduced productivity caused by ill health at work. The researchers strongly recommend pricing policies as the most effective way to take action.⁷

Increasing revenue

- After years of real terms cuts, the uprating of non-draught alcohol duty from February 2025 was a step in the right direction to keep duty rates in line with inflation. If the Government continue to uprate duty with inflation each year, the OBR forecast that the country's total alcohol duty receipts will reach £15.7bn per year by 2029/2030.8
- Cuts and freezes to duty between 2012 2024 have been costly for our public finances. Tax freezes essentially operate as cuts – by reducing the value of tax receipts in real terms. In addition to the costs to public services, these tax cuts for the alcohol industry have reduced revenue.
- If the previous duty escalator had continued to 2014/2015 as planned, with duty rates uprated each year thereafter, this would have raised an additional £28.6bn between 2013 - 2030.9
- The public purse should be reimbursed for the harm that the alcohol industry creates.
 Only a fraction of this cost is covered by the industry, with tax revenue from alcohol raising only £12.6 billion last year.¹⁰ An alcohol duty escalator would start to close the unacceptable current gap between alcohol costs and alcohol duty receipts.
- IPPR have proposed re-introducing a duty escalator at RPI+3%.¹¹ Updated modelling from IPPR suggests that introducing this at the next Budget would raise an additional £4.6 billion by 2030-31 (see Table 1).¹²

	2026-27	2027-28	2028-29	2029-30	2030-31
Additional					
revenue post-					
behaviour					
(£bn)	0.3	0.6	0.9	1.2	1.6

Table 1 - Estimated revenues from reintroduction of escalator at RPI +3 per cent

This estimate is based on IPPR modelling, which starts with the Office for Budget Responsibility's (OBR) forecasts of alcohol duty revenues as the baseline. The model adjusts the estimates for expected shifts in drinking habits, applying price elasticities for beer, wine and spirits.¹³

- The Institute of Alcohol Studies estimated that introducing an escalator of RPI+2% in 2025 would raise £3.4 billion over five years.¹⁴ The Alcohol Health Alliance have produced a helpful alcohol duty impact calculator which shows this would fund an annual salaries for 37,493 nurses.¹⁵
- Alcohol duty is paid directly by producers and not by pubs or consumers. The alcohol industry is incredibly lucrative, with an estimated UK revenue of £49 billion in 2025.¹⁶ A significant portion of the profits from these sales is held by a few multinational companies, some of which are led by billionaires who have built their wealth through alcohol production.¹⁷ As the Prime Minister has said, those with the "broadest shoulders should bear the heavier burden".¹⁸ Reintroducing the duty escalator would ensure that the industry pays its fair share to cover the costs caused by alcohol harm.
- Alcohol Change UK supports the recent changes to the duty system, as linking duty to strength is better for public health. However, the new system continues the outdated practice of 'cider exceptionalism', by which cider is taxed at lower levels than other drinks of the same strength. While this policy intended to support local cider producers, it actually incentivises large multinational alcohol companies to sell cheap, high-strength cider and reduces tax revenue.¹⁹

A healthier, thriving population

As Lord Darzi highlighted in his report, population-level interventions to protect health are vital to reduce health harms caused by alcohol.²⁰ Action on alcohol harm is essential to delivering the **10 year health plan's shift from sickness to prevention.**

- For prevention policy to move beyond rhetoric, we need better protection from products that cause health harms.²¹
- Three quarters of the UK population drink alcohol, and millions of us experience health issues caused by alcohol, from hangovers, lost sleep and anxiety to injuries and chronic illness. It isn't true that alcohol-related health harms are only experienced by people with alcohol dependence.²²
- Alcohol is a leading risk factor for death among those aged 15-49 in England.²³ And people living in deprived areas are many times more likely to have an alcohol-related hospital admission or die of an alcohol-related cause. The latest evidence suggests this will only get worse without action.²⁴ The time for action on preventing alcohol-related illness is now.
- Alcohol is a major risk factor in the three biggest killers cardiovascular disease, suicide, and cancer.²⁵ There is a higher prevalence of cancer and cardiovascular

- disease in the UK among those who drink alcohol, even when consumption is below the low-risk guidelines of 14 units per week.²⁶
- The state spends £1.9 billion every year dealing with preventable alcohol-related harm in ambulances and A&E.²⁷ An estimated 35% of ambulance journeys are alcoholrelated, and alcohol is thought to be a factor in up to 40% of emergency department attendances, rising to as high as 70% in peak hours.²⁸

Shaping healthy neighbourhoods

- The 10 year health plan set out an ambition to shape healthier neighbourhoods.
 Tackling the sale of cheap, strong alcohol will make our local areas safer and healthier places to live.
- Raising the price of alcohol is an easy-to-implement and cost-effective primary prevention tool.²⁹ The two most effective and cost-effective ways that the UK could raise the price of alcohol are by **increasing alcohol duty** and introducing a **minimum unit price (MUP)** for alcohol.
- Alcohol in UK shops is three times more affordable than it was in 1988.³⁰ In England, it costs just £5.25 to buy 18.8 units of alcohol, almost five units more than the UK Chief Medical Officers recommend consuming in a week.³¹ Alcohol sold in the off-trade, such as shops and supermarkets, has become much more affordable, more quickly, than alcohol in pubs over the last 30 years.³² The majority of alcohol in Britain is consumed outside of hospitality settings, so the cost of alcohol in the off-trade is an important factor for prevention policy.³³
- When alcohol is more affordable, more is consumed and harm is higher; when alcohol
 becomes less affordable, less is consumed, and harm reduces.³⁴ This means fewer
 deaths, injuries, and sickness caused by alcohol, from poor mental health, dental
 problems and long-term chronic illnesses to fatalities caused by drink-driving.³⁵
- Alcohol sold in the off-trade, such as shops and supermarkets, is linked to more harm than alcohol sold in the on-trade, such as pubs and bars.³⁶ ³⁷ Cuts and freezes to alcohol duty disproportionately benefit the off-trade, rather than the on-trade. Pricing policies can improve public health without affecting hospitality businesses.³⁸ Although the public messaging about duty freezes often focuses on supporting local pubs, freezes to alcohol duty are not a priority for the hospitality industry.³⁹ We continue to support draught relief for the on-trade, as we did at the last Budget.
- Cuts and freezes to alcohol duty are bad for our health. Modelling by researchers at the University of Sheffield estimated that alcohol tax cuts between 2012-2019 led to an additional 1,969 deaths and 61,386 hospital admissions in England alone. They also estimated that these policy changes widened health inequalities.⁴⁰
- Linking duty to strength, as the recent reforms have done, is better for public health.
 Analysis shows that the structural reforms to duty have the greatest impact on the heaviest consuming households, without increasing economic inequalities.⁴¹
- However, even after these reforms to the duty system, alcohol duty is still **lower than** it has been for most of the last 40 years. 42 In addition, the strength at which the higher tax rates begin (8.5%) is far too high. This should be lowered to 6.5%, as 6% is widely considered a strong beer or cider. A pint of 6.5% cider or beer contains 3.7 units. Drinking four of these would take someone over the UK Chief Medical Officers' weekly guidelines for lower risk alcohol consumption. Consequently, drinks at this ABV should be treated as higher strength from a public health perspective.
- As outlined above, the new duty system also continues the outdated practice of 'cider exceptionalism', by which cider is taxed at lower levels than other drinks of the same

strength. **Bringing cider rates in line with beer** would enable the new system to function much better as a public health tool.⁴³ For the public health objectives of the recent duty changes to be met, the policy must target cheap, strong drinks, as these have been shown to be particularly harmful.⁴⁴

- Alcohol producers are sensitive to duty threshold and reformulate their products in line with these. Both the 8.5%ABV and 3.4%ABV thresholds have seen producers reducing ABV or stopping production of higher strength products.⁴⁵ Analysis of the impact of the new duty system on strength and price suggests that shifting the 8.5%ABV threshold lower could better encourage reformulation of stronger products.⁴⁶
- MUP complements duty reform by preventing the sale of extremely cheap, high strength products.
- Local pubs and independent shops often struggle to compete with supermarkets selling alcohol very cheaply. MUP actively supports hospitality by increasing the prices of certain types of supermarket and corner shop alcohol while leaving pub and restaurant prices untouched. MUP helps level the playing field by preventing large retailers from selling alcohol at pocket-money prices. There is support for the measure in the hospitality industry. The Scottish Licensed Trade Association was supportive of the level increasing from 50p per unit to 65p per unit.⁴⁷ A nationally representative survey of UK publicans found 41% in favour and 22% against.⁴⁸
- Modelling research from Sheffield University has found that introducing MUP across the UK would cut alcohol-related deaths and illnesses.⁴⁹ Over 20 years, this would reduce the cost of alcohol to the NHS in England by £1.3 billion.⁵⁰
- MUP has been well tested and proven to reduce alcohol harm elsewhere in the UK.
 With MUP in place in Wales and Scotland, and on the cards in Northern Ireland, it is time for England to catch up.

Safer streets

Action on alcohol is essential to creating safer local communities, with the cost of alcohol-related crime and disorder estimated at £14.58 billion.⁵¹

- In England and Wales in 2023/24, 12% of people said that there is a very or fairly big problem in their area with people being drunk or rowdy in public places, and 9.7% of people reported experiencing or witnessing alcohol-related antisocial behaviour in their local area.⁵²
- People in lower socioeconomic status groups are more likely to experience frequent alcohol-related antisocial behaviour. Around half of those who experience alcoholrelated ASB, deal with this every week or more often.⁵³
- Alcohol is not the cause of abuse, but its role in intensifying and complicating abusive situations cannot be ignored. In England and Wales in 2022/23 victim-survivors of partner abuse reported that the offender was under the influence of alcohol in 13% of incidents.⁵⁴ Evidence shows that alcohol can play a role in coercive control through the weaponizing of victim-survivor's alcohol problems, control of their substance use or as an excuse for the abuse.⁵⁵ Alcohol can also also be used as a perceived for those experiencing violence. Studies have found significant levels of alcohol use amongst both perpetrators and victim-survivors of domestic abuse, and similarly high levels of abuse perpetration and/or victimisation among people receiving help for alcohol problems.⁵⁶
- The proposals recently set out by the licensing taskforce will undermine work in national and local government to make our streets safer and will do nothing to prevent the harm caused by rapid alcohol delivery and strong alcohol sold at pocket money

prices in supermarkets. We will be submitting evidence to the Department for Business and Trade and Home Office consultation. In order to meaningfully prevent alcohol harm, we need cross-Government collaboration.

 Raising the price of alcohol is associated with lower levels of crime, including sexual violence.⁵⁷

The UK public supports action

- Over half (52%) of respondents to a Savanta poll in 2024 said increasing alcohol duty until it covers the cost of alcohol-related harm would have a positive impact on the NHS.
- Almost half (47%) of respondents to a 2023 YouGov poll thought that freezing alcohol
 duty in the 2023 Autumn Statement was the wrong priority for the present time.⁵⁸ Over
 a third (38%) of people in Britain in 2023 supported using tax to increase the price of
 alcohol.⁵⁹
- A 2021 YouGov survey found that 51% of the public support introducing MUP, with the majority supporting the measure irrespective of their voting intention. While 44% of Conservative voters were in favour (as opposed to 29% against), the support increased to 56% amongst Labour voters, and 62% for Liberal Democrat voters. 60 Additionally, attitudes towards MUP in Scotland became more positive after implementation. 61 Research in Wales in 2020 found that just over half of respondents (54%) were in favour of the proposal to introduce minimum pricing for alcohol, with 25% against. 62
- Alcohol Change UK recently commissioned a large-scale MRP poll, which shows that the public prioritise health and the NHS over cheap alcohol. We would be happy to share embargoed findings with you.

Policy recommendations

- 1. Commit to uprating duty rates each year above inflation by reintroducing the effective alcohol duty escalator as a long-term measure, until duty receipts match the costs of alcohol harm. Evidence suggests that, for example, introducing a 3% above inflation duty escalator at this would raise an additional £4.6billion by 2030-31.⁶³ The escalator was an innovative and effective policy of the previous Labour Government. It will create certainty for both the Treasury and the industry. By linking it to the cost of harm, it creates a robust financial incentive for the alcohol industry to take real action to reduce alcohol harm, including reformulating products to lower their strength.
- 2. End 'cider exceptionalism', by bringing the duty rates for cider in line with other products of the same ABV. This loophole costs the Government tens of millions of pounds in lost revenue every year and encourages the production of cheap, strong cider.⁶⁴ Bringing cider rates in line with beer would raise revenue and enable the new system to function much better as a public health tool, as well as saving 75,000 lives over 20 years. ⁶⁵
- 3. Lower the strength threshold for the higher rates of duty from 8.5% to 6.5% ABV. This level is widely considered to be strong for beer or cider. Further reforming the duty system in this way would increase duty revenue, and incentivise alcohol

- producers to produce lower strength products, which cause less harm. Reducing the strength of alcohol products would reduce alcohol-related illness and save lives.⁶⁶
- 4. Introduce Minimum Unit Pricing (MUP) in England with a rate escalator. MUP directly tackles the sale of the cheapest, strongest alcohol and has been shown to reduce illness and mortality.

Evidence to support your decisionmaking

Alcohol Change UK has projects underway on;

- Alcohol-free and low alcohol products and pregnancy, and also among young people
- Constituency-level data on attitudes to alcohol harm and alcohol policies

We are happy to share more information on these – please contact Dr Laura Harvey, Policy and Research Manager laura.harvey@alcoholchange.org.uk.

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