

# Conservative Policy Renewal Programme

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.

We welcome the opportunity to provide a response to the Conservative Party's survey to help shape the future of Conservative Party policy.

## What is the most important issue or opportunity you would like to see the Conservatives focus on, and why?

Alcohol impacts our health and wellbeing in many different ways, from causing headaches, sleepless nights, and feeling “off” the next day, to an increased risk of more serious long-term health conditions like increased blood pressure, cholesterol and cancer. Alcohol is a causal factor in more than 200 different diseases and injuries.<sup>1</sup>

The “Alcohol harm across the drinking spectrum” research report, commissioned by Alcohol Change UK and carried out by the Behavioural Insights Team shows links between alcohol consumption and a wide range of health issues, even when people are drinking within the Chief Medical Officers’ recommended ‘low risk’ drinking guidelines.<sup>2</sup>

Alcohol use is one of the most important preventable risk factors for cancer.<sup>3</sup> Alcohol has been classified as a Group 1 carcinogen, and even small amounts of alcohol increase the risk of developing cancer.<sup>4</sup> In the UK, 4% of cancer cases were linked to alcohol consumption, equating to 16,800 cases.<sup>5</sup> Alcohol is causally linked with seven cancers, including mouth, throat, oesophagus, liver, and colon.<sup>6</sup>

Alcohol both causes and contributes to mental health issues, and alcohol dependence often co-occurs with other mental and physical health conditions. Alcohol use worsens mental health problems such as depression, self-harm, and suicide.<sup>7</sup> Those with an alcohol dependency are 2.5 times more likely to die by suicide than the general population, and nearly half of all patients under the care of mental health services who die by suicide have a history of alcohol use.<sup>8</sup>

In 2023/24, there were a total of 1,018,986 alcohol-related hospital admissions in England, at a rate of 1,824 per 100,000 persons.<sup>9</sup> Males were three times more likely to be hospitalised because of alcohol-related conditions, with 2,837 and 935 admission episodes for males and females per 100,000 people, respectively.<sup>10</sup>

In the UK, alcohol-specific deaths have continuously increased in the last four years. In 2023, there were 10,473 deaths from alcohol-specific causes registered.<sup>11</sup> This is an increase of 4.2% since 2022 and 38% since 2019, the last pre-pandemic year. There are thousands more deaths from conditions that alcohol contributes to, where other risk factors are also involved, such as cardiovascular disease and stroke. In 2023 in England alone, there were 22,644 deaths from alcohol-related conditions.<sup>12</sup>

In England in 2023, the rate of potential years of life lost for males was more than double the number for females, at a rate of 1,246 and 533 per 100,000 population respectively, and this gap has been consistent since 2016.<sup>13</sup> The rate of working years of life lost for males is more than double the number for females, at a rate of 492 and 199 per 100,000 population respectively, and this gap has been consistent since 2016.<sup>14</sup>

## **Alcohol-related health inequalities**

Alcohol can cause problems across the social scale. Alcohol harm is disproportionately greater among more marginalised social groups, despite these groups tending to drink less than those in higher income groups.<sup>15</sup> This 'alcohol harm paradox' does not have a single causal explanation. Scientists are still investigating the reasons for this inequality in harm. However, we do know that wider factors intersect with and compound the impacts of alcohol on health. Wider factors include poverty, insecure employment, poor housing, increased stress, discrimination, barriers to treatment and healthcare, and more co-occurring risk behaviours such as smoking and poor nutrition,<sup>16 17 18</sup> as well as more polarised drinking patterns, meaning higher rates of non-drinkers and people drinking at harmful levels.<sup>19</sup>

For example, in England in 2022, 69% of people living in the most deprived areas drank alcohol, compared to 85% of people living in the least deprived areas. However, in

England in 2023, people in the most deprived areas were more than 3 times more likely to die solely due to alcohol compared to people in the least deprived areas.<sup>20</sup>

## Future recommendations

The alcohol industry naturally seeks to increase consumption through its use of marketing, pricing strategies, and making products widely available. This is why the three most effective and cost-effective ways to reduce alcohol harm are to increase its price, restrict its marketing, and reduce its availability.<sup>21</sup> We have included our submission to the most recent Spending Review, which has more information and evidence to support these policies.

Additionally, we need changes to the current system for treatment services, to improve support for everyone who needs it. Right now, people are going without support due to last-minute funding, and a reduction in real terms investment. The human impact of this is felt in communities and families across the country. We have included our response to the government's 10 year plan which has more information and evidence to support the need for these changes.

Alcohol Change UK looks forward to working with the Conservative Party to lend our expertise in the development of policies to reduce alcohol harm and improve the lives of people across the UK.

## References

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- <sup>8</sup> Darvishi, N. et al. (2015). [Alcohol-Related Risk of Suicidal Ideation, Suicide Attempt, and Completed Suicide: A Meta-Analysis](#). *PLOS ONE*, 10(5).
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- <sup>10</sup> Office for Health Improvement & Disparities (n.d.). [Local Alcohol Profiles for England: Hospital admissions due to alcohol](#). [Accessed 09 July 2025]
- <sup>11</sup> Office for National Statistics (2025). [Alcohol-specific deaths in the UK](#).
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- <sup>13</sup> Office for Health Improvement & Disparities (2025). [Alcohol profile: short statistical commentary, February 2025](#). [Accessed 09 July 2025]
- <sup>14</sup> Office for Health Improvement & Disparities (2025). [Alcohol profile: short statistical commentary, February 2025](#). [Accessed 09 July 2025]
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- <sup>17</sup> Institute of Alcohol Studies (2020). [\*Alcohol and health inequalities\*](#).
- <sup>18</sup> Liverpool John Moores University (2015). [\*Understanding the alcohol harm paradox\*](#).
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- <sup>21</sup> World Health Organization (2024). [\*Tackling NCDs: best buys and other recommended interventions for the prevention and control of noncommunicable diseases, 2nd ed.\*](#)