# Canadian Alcohol Policy Evaluation (CAPE) 3.0

# Results from Prince Edward Island

The Canadian Alcohol Policy Evaluation (CAPE) provides rigorous assessments of how well each level of government in Canada is implementing policies proven to reduce harm from alcohol use. This is the third edition of the CAPE project; a project which has a track record of strengthening Canada's response to alcohol harm. Policy data for CAPE 3.0 were collected between June 1 and December 1, 2022.

# Why it Matters: Annual alcohol consumption, harms and costs in PE

## Alcohol consumption, 2020/2021

PE: 475 standard drinks per person aged 15+

Canada: 487 standard drinks per person aged 15+

Source: Statistics Canada. Table 10-10-0010-01 Sales of alcoholic beverages types by liquor authorities and other retail outlets, by value, volume, and absolute volume.

## Alcohol health harms, 2020

6,969 ER & hospital visits in PE 135 deaths in PE Source: Canadian Substance Use Costs and Harms. www.csuch.ca

## Alcohol deficit, 2020/2021

+ \$70M alcohol revenues

- \$131M alcohol harm costs
- = -\$61M total alcohol deficit

Which is equal to -\$0.96 per standard drink sold.

Sources:

- Statistics Canada. Table 10-10-0010-01 Sales of alcoholic beverages types by liquor authorities and other retail outlets, by value, volume, and absolute volume.
- Canadian Substance Use Costs and Harms.
- Statistics Canada. Table 10-10-0012-01 Net income of liquor authorities and government revenue from sale of alcoholic beverages (x 1,000).

## What can be done: an alcohol policy approach

Evidence-based alcohol policies are the most effective way to reduce harm from alcohol. The scores presented in this summary represent the degree to which best practice policies have been implemented.

#### CAPE 3.0 results: how does PE compare?

- BC: 36%
- AB: 34%
- SK: 36%
- MB: 44%
- ON: 40%
- QC: 42%
- NB: 35%
- NS: 38%
- PE: 37%
- NL: 41%
- YT: 33%
- NT: 32%
- NU: 34%

# PE's CAPE Scores: What's Possible?

If Prince Edward Island implemented all the best existing policies across Canada's provinces and territories, their score could change from 37% (F) to 80% (A-). If we graded PE against best existing policies across provinces and territories, their score would still only be 46% (F).

# CAPE policy domains: do they all have the same impact?

The 11 policy domains in this assessment form part of a comprehensive and synergistic approach to preventing and reducing di-fferent types of alcohol harms. Policies examined fall under provincial or territorial control, and each domain reflects the current evidence and is weighted based on its effectiveness and scope of reach. This results in a ranked order from one (i.e., highest overall impact) through 11 (see next page). However, all the domains are necessary to create a health-focused alcohol policy environment. To read more, see Project Methodology.

# What PE is doing well: Selected examples

# Policy domain 1: Pricing & Taxation

In addition to HST, PE charges a compounding alcohol-specific 'health tax' of 25% on all off-premise sales. PE has minimum prices in place for all alcohol sold and the highest off-premises minimum prices in Canada; off-premise minimum pricing is indexed to inflation, although not automatically.

# Policy domain 4: Impaired Driving Countermeasures

PE's graduated licensing program (GLP) has the recommended minimum start age of 16, the recommended stage 2 duration and passenger limits, and a prohibition on all GLP drivers testing positive for alcohol.

## Policy domain 5: Marketing and Advertising Controls

PE has restrictions on placement of alcohol advertising and restrictions on content that extend beyond the CRTC code requirements and apply to all advertisers and media. Non-licensees are prohibited from advertising alcohol; there are escalating penalties for violations and violations are publicly listed.

## Where PE needs work: Selected examples

## Policy domain 1: Pricing & Taxation

Minimum pricing is not tied to ethanol content for any alcohol sold in PE and there is no on-premise indexation. In general, alcohol prices in PE are not keeping up with inflation. On-premise alcohol is not taxed at a higher rate relative to other consumer goods at the retail level.

### PE Minimum Pricing in 2021/22

Note: Price per standard drink for a common container size and beverage strength, expressed in 2021 dollars.

#### Off-premise (<u>e.g.</u>, liquor stores)

Recommended minimum price: \$1.83

Actual prices:

- Beer: \$2.33
- Wine: \$2.14
- Spirits: \$1.59
- Coolers: \$2.06

On-premise (e.g. restaurants, bars)

#### Recommended minimum price: \$3.66

Actual prices:

- Beer: \$2.15
- Wine: \$3.50
- Spirits: \$3.50
- Coolers: \$2.50

## Policy domain 2: Physical Availability

The level of population-based off-premise outlet density in PE is over five times higher than recommended; there are no set density or placement limits for any premises. Hours of sale extend longer than recommended across all premises. PE permits alcohol home delivery, including by a third party.

### Policy domain 3: Control System

Less than 15% of off-premise retail outlets in PE are government owned and run. There are no policies that prohibit online sales or alcohol sales alongside other services. The alcohol regulator/retailer, PEILCC, reports to the Ministry of Finance and does not include health and safety in its mandate.

## Steps PE can take to improve their CAPE policy scores

The policy domains below are listed in order of impact based on their effectiveness and scope.

Note: Grade ranges: A+ = 90-100%; A = 85-89%; A- = 80-84%; B+ = 77-79%; B = 73-76%; B- = 70-72%; C+ = 67-69%; C = 63-66%; C- = 60-62%; D+ = 57-59%; D = 53-56%; D- = 50-52%; F = 0-49%.

## PE's CAPE 3.0 Score: 37% (F)

Policy domain 1: Pricing & Taxation

Score: 51% (D-)

#### Recommendations

All recommended policies should be developed and implemented without alcohol industry involvement, without incorporating exceptions, and enacted in legislation or regulation where possible.

- Maintain the current legislated beer, wine, and cooler minimum prices and increase spirit prices to at least \$2.04\* per standard drink (e.g. 17.05mL ethanol) for alcohol sold at off-premise retail outlets and increase legislated minimum prices to at least \$4.07\* per standard drink for alcohol sold at on-premise establishments, after taxes, and implement automatic indexation (\*2023 price). Tie minimum prices for all alcohol sold precisely (e.g. \$/L ethanol) to ethanol content.
- Update general alcohol prices annually to keep pace with PE-specific inflation and extend the existing Provincial Health Tax to also apply to alcohol purchased from on-premise establishments.
- Set off-premise minimum retail markups to be at least 100% of the landed cost for all beverage types and set on-premise markups at or above the off-premise retail price.

# Policy domain 2: Physical Availability

Score: 31% (F)

### Recommendations

All recommended policies should be developed and implemented without alcohol industry involvement, without incorporating exceptions, and enacted in legislation or regulation where possible.

- Reduce outlet density of all premises. Introduce density and placement limits for off-premise outlets and on-premise establishments.
- Reduce and legislate maximum trading hours allowed per week; restrict alcohol sales before 11am and after 8pm (off-premise retail outlets) and 1am (on-premise establishments). Prohibit on-premise alcohol takeout. Prohibit alcohol home delivery, including by a third party, from all premises.

## Policy domain 3: Control System

Score: 8% (F)

### Recommendations

All recommended policies should be developed and implemented without alcohol industry involvement, without incorporating exceptions, and enacted in legislation or regulation where possible.

- Appoint a health and/or safety-focused ministry to oversee alcohol regulation and distribution/retail. Require a government wholesaler or equivalent fee between the producer/manufacturer and retailer in all cases.
- Increase the current 12.1% proportion of government-owned and operated off-premise retail
  outlets and move towards a full government monopoly. Prohibit alcohol sales beyond traditional
  channels such as in convenience and grocery stores, in other establishments such as spas and
  sporting facilities, and via online sales; phase out ferment-on-premise outlets and home-brew kits.

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• Include protection of public health and safety as explicit mandate objectives for regulator and distributor/retailer; legislate earmarked funds for harm prevention, research, and treatment; require public health involvement in decision-making and legislative changes; require targeted health-focused public engagement.

# Policy domain 4: Impaired Driving Countermeasures

Score: 58% (D+)

#### Recommendations

All recommended policies should be developed and implemented without alcohol industry involvement, without incorporating exceptions, and enacted in legislation or regulation where possible.

- Strengthen graduated licensing program (GLP) with stage 1 minimum of 12 months and implement stage 2 night-time driving ban. Implement zero tolerance period for all new drivers with less than 5 years' experience and set penalties for all GLP or new driver violations.
- Impose increased penalties when presence of alcohol plus another drug is detected.
- Impose comprehensive mandatory ALS and AVI that escalate according to BAC level and repeat occurrences; record on drivers abstracts for at least 5 years.
- Impose mandatory escalating long term ALS for third and subsequent ≥0.08% BAC federal convictions and have interlock program enrollment incentives to discourage unlicensed/uninsured driving.

## Policy domain 5: Marketing & Advertising Controls

Score: 41% (F)

### Recommendations

All recommended policies should be developed and implemented without alcohol industry involvement, without incorporating exceptions, and enacted in legislation or regulation where possible.

- Implement restrictions on advertising quantity (e.g. ad bans and volume restrictions), and pricebased promotions/sponsorships for all media types.
- Appoint independent health-focused enforcement authority to conduct mandatory pre-screening of all alcohol ads, host responsive online complaint system, and enforce penalties applicable to government and private advertisers. Set commensurate penalties for any violations

# Policy domain 6: Minimum Legal Age

Score: 24% (F)

### Recommendations

All recommended policies should be developed and implemented without alcohol industry involvement, without incorporating exceptions, and enacted in legislation or regulation where possible.

- Increase minimum legal age to 21 for possession and purchase of alcohol; consider granting graduated access (i.e. restrictions based on alcohol strength or hours of sale).
- Prohibit policies permitting parents/guardians or other adults from providing alcohol to minors beyond the home.
- Require proof of age identification for anyone purchasing alcohol and 2-staged verification (i.e. when ordering and receiving order) for alcohol sales made remotely (e.g. online, via phone, etc.).

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# Policy domain 7: Health & Safety Messaging

Score: 9% (F)

### Recommendations

All recommended policies should be developed and implemented without alcohol industry involvement, without incorporating exceptions, and enacted in legislation or regulation where possible.

- Implement enhanced alcohol labelling as a manufacturer requirement and mandatory onsite health and safety messaging (e.g. signage, posters) in all premises. Labels, signage, and messaging should include a variety of evidence-based warning messages (e.g. cancer risk, standard drinks, national alcohol guidance, calories), be prominently displayed and accompanied by pictorials, rotate across all products, and support consumers in making informed decisions about product use.
- Deliver a variety of ministry-led alcohol health and safety campaigns (beyond holiday themes) at least annually.

## Policy domain 8: Liquor Law Enforcement

Score: 49% (F)

#### Recommendations

All recommended policies should be developed and implemented without alcohol industry involvement, without incorporating exceptions, and enacted in legislation or regulation where possible.

- Apply risk-based licensing and enforcement (RBLE) criteria to off-premise outlets and license holder characteristics to determine risk level for licensing conditions and enforcement schedules; strengthen on-premise RBLE by applying it to license holder characteristics and extending it to include all on-premise establishments and special occasion permits
- Conduct compliance checks for all premises at least annually with follow-up for failed compliance within 3 months.
- Implement mandatory, evidence-based alcohol sale and service training programs with a public health focus for all involved in the sale, service or delivery of alcohol at all premises and licensed events; require recertification at least every 2 years.

### Policy domain 9: Screening and Treatment Interventions

Note: Treatment indicators measure existence of services only, not quantity or quality

Score: 54% (D)

### Recommendations

All recommended policies should be developed and implemented without alcohol industry involvement, without incorporating exceptions, and enacted in legislation or regulation where possible.

- Formally adopt the most recent evidence-based national alcohol guidance with an official statement of support.
- Ensure availability of in-person or online SBIR services with health professionals.
- Provide publicly funded outpatient treatment services and permanent managed alcohol programs.

### Policy domain 10: Alcohol Strategy

Score: 15% (F)

#### Recommendations

All recommended policies should be developed and implemented without alcohol industry involvement, without incorporating exceptions, and enacted in legislation or regulation where possible.

Implement a standalone government-endorsed alcohol strategy that includes a wide range of
evidence-based public health policies (such as pricing and physical availability) and is developed
independently of the alcohol industry. Allocate dedicated government funding to the strategy with
an identified public health leader, an implementation timeline, reoccurring public-facing
implementation assessments and updates at least every 5 years.

## Policy domain 11: Monitoring & Reporting

Score: 68% (C+)

### Recommendations

All recommended policies should be developed and implemented without alcohol industry involvement, without incorporating exceptions, and enacted in legislation or regulation where possible.

- Implement systematic and comprehensive tracking of all alcohol-related indicators (e.g. add policy changes to existing indicators)
- Report annually on all indicators through centralized public database or reporting system (i.e., website).

## More CAPE products:

Provincial/Territorial

- Other P/T Results Summaries
- Policy Domain Results Summary
- Policy Scoring Rubric
- Methodology and Evidence
- Best Practice Policy Leaders

#### Federal

- Federal Results Summary
- Policy Domain Results
- Policy Scoring Rubric
- Methodology and Evidence
- Evidence-Based Recommendations for Labelling of Alcohol Products in Canada

To learn more about the Canadian Alcohol Policy Evaluation or to join our Community of Practice, visit alcoholpolicy.cisur.ca or email cisur@uvic.ca

### Suggested citation

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