



CAPE 3.0: Results from Quebec

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.

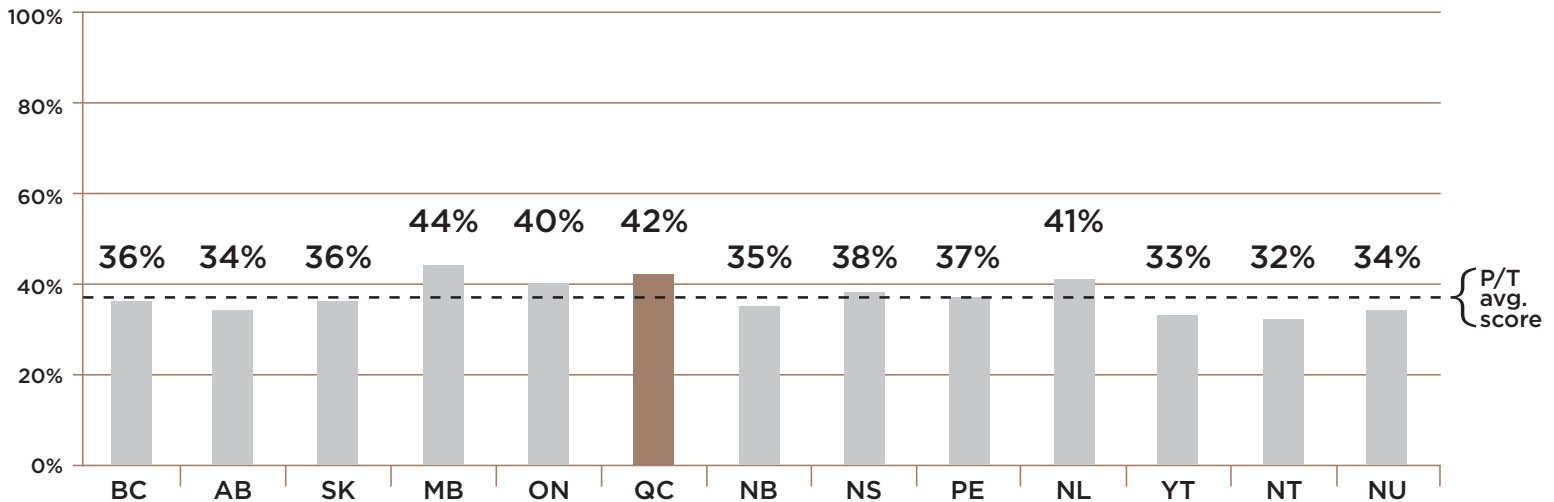
WHY IT MATTERS: ANNUAL ALCOHOL CONSUMPTION, HARMS AND COSTS IN QC



WHAT CAN BE DONE: AN ALCOHOL POLICY APPROACH

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

CAPE 3.0 Results: How Does QC Compare?



QC's CAPE Scores: What's Possible?

If Quebec implemented all the best existing policies across Canada's provinces and territories, their score could change from **42% (F)** to **80% (A-)**.

If we graded QC against best existing policies across provinces and territories, their score would still only be **53% (D)**.

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 different 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 QC IS DOING WELL: SELECTED EXAMPLES



Alcohol-specific tax rates in QC are amongst the highest in Canada. Off-premise minimum pricing for malt-based beverages (e.g. beer and some coolers) has automatic indexation.

1. Pricing & Taxation



QC's alcohol regulator, the RACJ, reports to the Ministry of Public Security and although the mandate does not specifically mention public health and safety, it does focus on protection of the public interest, public security and public peace.

3. Control System



QC has escalating administrative licensing suspensions and escalating interlock programs as a condition of relicensing for federal impaired driving convictions with a blood alcohol content (BAC) of 0.08% or higher.

4. Impaired Driving Countermeasures

WHERE QC NEEDS WORK: SELECTED EXAMPLES

QC Minimum Pricing (2021/22)*



There is no minimum pricing set for alcohol sold on-premise in QC and off-premise minimum alcohol pricing only applies to malt-based beverages (e.g. beer and some coolers) sold in grocery stores.

1. Pricing & Taxation

OFF PREMISE (liquor stores)		ON PREMISE (restaurants, bars, etc)	
ACTUAL	RECOMMENDED*	ACTUAL	RECOMMENDED*
\$1.49**	\$1.83 🍺 Beer	None	\$3.66 🍺 Beer
None	\$1.83 🍷 Wine	None	\$3.66 🍷 Wine
None	\$1.83 🍸 Spirits	None	\$3.66 🍸 Spirits
\$1.02***	\$1.83 🍹 Coolers	None	\$3.66 🍹 Coolers

*price per standard drink for a common container size and beverage strength, expressed in 2021 dollars. **Products sold in grocery stores only. ***Malt-based coolers sold in grocery stores only.



Level of population based off-premise outlet density in QC is six times higher than recommended. There are no set restrictions on outlet placement and density limits do not apply to all premises. QC permits alcohol home delivery, including by a third party (e.g. Uber Eats).

2. Physical Availability



Less than 5% of off-premise retail outlets in QC are government owned and run. There are no policies prohibiting online sales or alcohol sales alongside other goods and services. The alcohol retailer, SAQ, reports to the Ministry of Finance and does not include health and safety in its mandate.

3. Control System

STEPS QC CAN TAKE TO IMPROVE THEIR CAPE POLICY SCORES



The policy domains below are listed in order of impact based on their effectiveness and scope (see page 2 for details). This table is also available in plain-text format.

Policy Domain		Score ⁴	Recommendations (All recommended policies should be developed and implemented without alcohol industry involvement, without incorporating exceptions, and enacted in legislation or regulation where possible.)
1.	Pricing & Taxation 	41% F	<ul style="list-style-type: none"> Implement legislated minimum prices across all beverage categories, not just malt-based, that are tied precisely (e.g. \$/L ethanol) to ethanol content. Increase minimum prices to a rate per standard drink (e.g. 17.05mL ethanol) of at least \$2.04* for alcohol sold at off-premise retail outlets and \$4.07* for alcohol sold at on-premise establishments, after taxes, and implement automatic indexation (*2023 price). Update general alcohol prices annually to ensure that all keep pace with QC-specific inflation, maintain on-premise and increase off-premise sales taxes and set standardized indexed minimum markups for alcohol sold at off-premise retail outlets.
2.	Physical Availability 	38% F	<ul style="list-style-type: none"> Reduce existing density of all premises, and especially off-premise outlets. Strengthen off-premise density limits to apply to all license types (e.g. not just agency stores) and introduce on-premise density limits. Implement placement limits for all premises. Reduce and legislate maximum trading hours allowed per week; restrict alcohol sales before 11:00am and after 8pm (off-premise retail outlets) and 1am (on-premise establishments). Prohibit on-premise alcohol takeout. Prohibit alcohol home delivery from all premises.
3.	Control System 	46% F	<ul style="list-style-type: none"> Appoint a health and/or safety-focused ministry to oversee alcohol retail/distribution. Require a government wholesaler or equivalent fee between the producer/manufacturer and the retailer in all cases. Increase the current 4.8% 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 depanneurs 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. Include protection of public health and safety as explicit objectives in the distributor/retailer mandate; require public health involvement in alcohol policy decision-making and legislative changes; require targeted health-focused public engagement.
4.	Impaired Driving Counter-measures 	46% F	<ul style="list-style-type: none"> Strengthen graduated licensing program (GLP) with stage 1 minimum of 12 months and implement stage 2 night-time driving ban and passenger limit. Extend zero tolerance period to all new drivers with less than 5 years' experience and set penalties for all GLP or new driver violations. Enact accessible container laws. 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 driver's abstracts for at least 5 years. Impose mandatory escalating long term ALS for third and subsequent federal impaired driving convictions and require interlock program completion as relicensing condition (and based on performance criteria) for all first federal impaired driving convictions.
5.	Marketing & Advertising Controls 	55% D	<ul style="list-style-type: none"> Implement restrictions on advertising quantity (e.g. ad bans and volume restrictions) that apply to all advertisers (e.g. government retailers, non-licensees/third parties) and all media types. Enhance enforcement by extending mandatory pre-screening to all alcohol advertisers (not only manufacturers) and publicly listing violations online with advertiser name and nature of violation.
6.	Minimum Legal Age 	13% F	<ul style="list-style-type: none"> Increase minimum legal age to 21 for possession and purchase of alcohol, or at least to 19 to be in line with other Canadian jurisdictions; consider granting graduated access (i.e. restrictions based on alcohol strength or hours of sale). Require proof of age identification for anyone who appears under 25 years old, and 2-staged verification (i.e. when ordering and receiving an order) for alcohol sales made remotely (e.g. online, via phone, etc.).
7.	Health & Safety Messaging 	17% F	<ul style="list-style-type: none"> 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.
8.	Liquor Law Enforcement 	37% F	<ul style="list-style-type: none"> Apply risk-based licensing and enforcement (RBLE) criteria to off-premise outlet 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.
9.	Screening & Treatment ⁵ Interventions 	92% A+	<ul style="list-style-type: none"> Formally adopt the most recent evidence-based national alcohol guidance with an official statement of support. Provide permanent public funding for managed alcohol programs. <p>(⁵Treatment indicators measure existence of services only, not quantity or quality.)</p>
10.	Alcohol Strategy 	66% C	<ul style="list-style-type: none"> 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, to build on the existing Interdepartmental Action Plan. 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.
11.	Monitoring & Reporting 	75% B	<ul style="list-style-type: none"> Strengthen systematic and comprehensive tracking of all alcohol-related indicators (e.g. add partially attributable hospitalizations to existing indicators). Report annually on all indicators through centralized public database or reporting system (i.e. website).

? For more details on policy indicators, see the **POLICY DOMAIN RESULTS SUMMARY**.

WANT TO KNOW MORE ABOUT CAPE?

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.

Notes: 1. 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.
2. Canadian Substance Use Costs and Harms. ^CSUCH Cost estimates do not include inpatient hospitalization, day surgery, emergency department and paramedic services costs for Quebec.
3. Statistics Canada. Table 10-10-0012-01 Net income of liquor authorities and government revenue from sale of alcoholic beverages (x 1,000).
4. 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%.

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