Reducing Alcohol-Related Harms and Costs in New Brunswick: A Policy Review

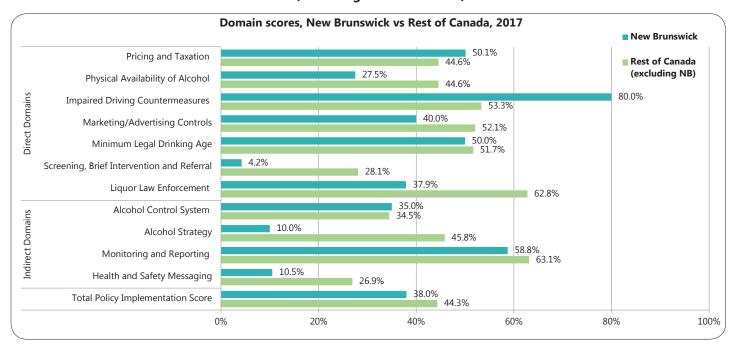


New Brunswick

Population (2016) 747,101 Per capita alcohol 7.7L pure ethanol** consumption age 15+* **Overall alcohol harm costs** \$326M (2014)Net revenue from alcohol \$247M (2014)*** Type of alcohol retail Mixed government/ private system system

he Provincial and Territorial Canadian Alcohol Policy Evaluation (CAPE) project is a rigorous assessment of whether evidencebased alcohol policies were implemented within each province and territory in 2017. A comprehensive alcohol policy framework was developed, containing gold standard best practices across 11 different policy domains. The first seven domains have evidence of effectiveness as means of directly reducing population level consumption of alcohol and/ or related harms. The last four domains are composed of evidence-based strategies that more indirectly facilitate implementation of the first seven domains. See Stockwell et al, 2019ⁿ for the full methodology and findings.

The scores presented in this summary reflect the degree to which New Brunswick has implemented these gold standard best practices captured in the alcohol policy framework. Overall, New Brunswick scored 38% in 2017, which is 6% below the average of 44% for the rest of Canada (excluding New Brunswick).

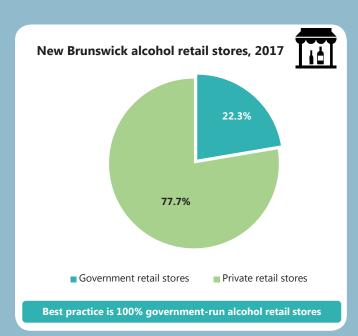


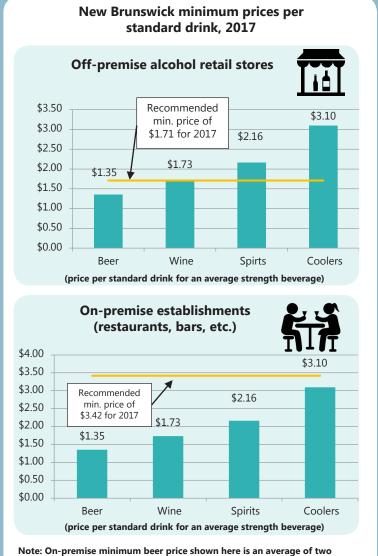
Promising practices in New Brunswick

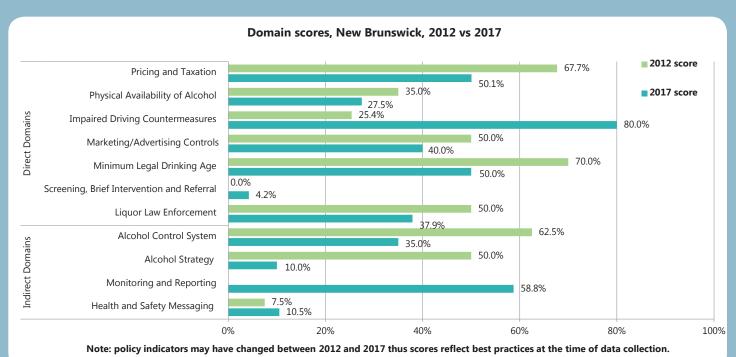
- New Brunswick sets a **minimum price** for all alcoholic beverages sold by on-premise establishments and off-premise stores and the provincial liquor board (e.g. ANBL) updates the off-premise minimum prices annually.
- Overall, beer prices have been keeping pace with inflation in New Brunswick, meaning beer has not become cheaper relative to other consumer goods.
- New Brunswick takes a comprehensive approach to alcohol monitoring by tracking alcohol consumption, alcoholrelated morbidity, mortality and some crime outcomes using data collected by various ministries and Statistics Canada.
- Administrative licence suspension (ALS) programs and interlock programs in New Brunswick both meet gold standard best practices. The ALS program includes an administrative licensing suspension of 7 days for the first .05% BAC offence and 15 days for the second; there is also discretionary vehicle impoundment for a first .05% BAC offence and mandatory impoundment starting with the third offence within a 5 year period. Participation in the interlock program for at least 3 years is mandatory for all second-time Criminal Code offenders who wish to continue driving and relicensing is based on program performance.

Strengthening alcohol policies in New Brunswick			
	Policy Domain	Score	Selected recommendations
DOMAINS	Pricing and Taxation	50% D-	Ensure minimum prices are set at a rate per standard drink (e.g. 17.05mL pure alcohol) of at least \$1.75* per standard drink for off-premise retail stores and \$3.50* per standard drink for on-premise establishments, after taxes with no exceptions (*2019 prices). For example, product bundles or price incentives that encourage bulk purchases and undermine minimum price policies should be prohibited. Update alcohol prices annually to reflect New Brunswick-specific inflation rates to ensure alcohol does not become less expensive relative to other goods over time. On-premise minimum prices in New Brunswick have not been updated in 20 years and so have reduced potential as a harm reduction intervention.
	Physical Availability	28% F	Introduce legislated restrictions on outlet density in New Brunswick, particularly for on-premise establishments such as restaurants and bars. Limit the availability of alcohol by reducing trading hours; do not allow early morning alcohol sales (i.e. before 11:00am) regardless of whether full meal service is offered and prohibit the extension of hours of sale for alcohol during events of provincial, national or international significance.
	Impaired Driving Countermeasures	80% A-	Strengthen the graduated licensing program (GLP) for new drivers in New Brunswick by ensuring that stage 1 and 2 of the program are a minimum of 12 and 24 months respectively and there is zero tolerance for cannabis and illicit drugs for GLP drivers. Penalties should be increased or modified for all drivers when the presence of a drug is detected in addition to alcohol.
	Marketing and Advertising Controls	40% ₩	Ensure alcohol advertising content restrictions apply to all forms of advertising and advertisers including all off-premise retailers whether they are privately or government run. Implement mandatory pre-screening for all alcohol ads by an independent authority to confirm compliance with content restrictions prior to publication.
DIRECT DO	Minimum Legal Drinking Age	50% D-	Increase the minimum legal drinking age; give consideration to graduated drinking policies that grant phased-in legal access to alcohol by limiting the amount and type of alcohol that can be purchased in specific settings between the ages of 19 and 21. Prohibit the extension of social hosting laws that allow service of alcohol to minors beyond private residences e.g. on-premise establishments and licensed events.
	Screening, Brief Intervention/ Referral	4% F	Collaborate with health care professionals to develop screening, brief intervention and referral (SBIR) practice guidelines and tools to be implemented in a health care setting and online or consider adopting the SBIR resource developed by the College of Family Physicians. Online tools can increase accessibility, especially among younger populations or those not accessing health care in a clinical setting; implementation of SBIR tools should be tracked in order to inform future SBIR activities.
	Liquor Law Enforcement	38% F	Implement a risk-based licensing and enforcement program for on-premise establishments, off-premise retail stores, and special occasion permits to inform licensing conditions and enforcement schedules based on outlet and licence holder characteristics as well as incident data. Ensure liquor law violations are publicly reported. The responsible beverage service training should be made mandatory for all individuals involved in the sale or service of alcohol, regardless of licence type.
INDIRECT DOMAINS	Alcohol Control System	35% ₩	Reconsider the decision to permit the sale of alcohol in grocery stores. Instead, increase the proportion of government-owned and government-run off-premise retail stores in New Brunswick and ensure they report to a ministry with a mandate to protect health and/or safety. Phase out ferment on premise outlets, which encourage the bulk sale of inexpensive alcohol.
	Alcohol Strategy	10% F	Develop an alcohol-specific government endorsed strategy that includes a range of evidence-based public health policies and is developed independently from the alcohol industry. Ensure the strategy has dedicated funding, an identified leader with a public health and/or safety focus to facilitate implementation, and systems in place to monitor implementation and effectiveness; the strategy should be updated at least every five years.
	Monitoring and Reporting	59% D+	Ensure that the alcohol consumption and harm indicators that are tracked (e.g. alcohol consumption, alcohol-related morbidity, mortality and crime) are made publicly available at least annually through a centralized system in order to support effective monitoring of trends in consumption and harms. Have an identified leader with a health and safety focus responsible for monitoring alcohol harm; make specific funding and/or staff resources available to support these monitoring initiatives.
	Health and Safety Messaging	11% F	Implement legislated enhanced alcohol labels as a manufacturer requirement with health and safety messages, standard drink information, and national low-risk drinking guidelines; labels should have prominent rotating messages that are accompanied by pictorial images. Implement legislated health and safety messages to be displayed in all on-premise establishments and off-premise retail stores, which include a variety of health-focused messages; and have liquor control boards use a range of media platforms to communicate health and safety messaging.
	Total Policy Implementation Score		A comprehensive list of gold standard best practice alcohol policies is available in Appendix C of the full CAPE report.

New Brunswick: selected findings, 2017



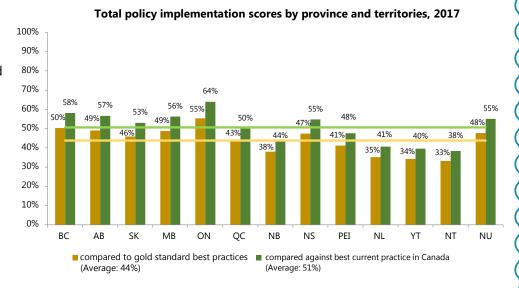




minimum beer price categories.

How does New Brunswick stack up against other provinces and territories?

Even though the provinces and territories scored poorly overall in relation to gold standard best practices, many examples of strong alcohol policy components were found across Canada. In fact, if a province or territory chose to implement all of these best current practices that were identified they would have scored 87% (Grade A). Based on these best current practices identified across all jurisdictions, the scores were scaled up to show how the provinces and territories measure up against best current practices in Canada (green bars).



Next steps for reducing alcohol-related harms and costs in New Brunswick

• In light of the substantial and increasing harm from alcohol use, give greater priority to funding and implementing effective alcohol policies such as those outlined in this summary and in the full report.



- Position liquor boards within ministries directly concerned with health and safety rather than with finance and economic development.
- Reconsider the treatment of alcohol as an ordinary commodity and instead limit low prices and extensive promotion and marketing, as this leads to greater consumption and related harm.
- Learn from other provinces' and territories' experiences with successful implementation of effective alcohol policies (see Best Practice Leaders identified on P11 of the full report.)
- Government should take action in concert with NGOs and other stakeholders to implement a combination of population level policies prioritising the first seven policy areas identified in this summary.
- Greater investment in public education about the risks of alcohol, including the comparative risks of alcohol
 and other substances, is needed to create a more supportive climate for enacting effective policies. This can be
 achieved with initiatives such as mandatory warning labels on all alcohol containers and clear and consistent public
 health messaging on a range of health topics.
- Carefully document policy changes and regularly monitor and evaluate alcohol-related public health and safety outcomes to better inform future policy development.

Suggested citation: Thompson, K. Asbridge, M., Davis-MacNevin, P., Wettlaufer, A., Vallance, K., Chow, C., Stockwell, T., Giesbrecht, N., April, N., Callaghan, R., Cukier, S., Dube, M., Hynes, G., Mann, R., Solomon, R., Thomas, G., (2019). Reducing Alcohol-Related Harms and Costs in New Brunswick: A Policy Review. Victoria, BC: Canadian Institute for Substance Use Research, University of Victoria.

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¤ To learn more about the Canadian Alcohol Policy Evaluation Project, read other jurisdictional summaries and download the full federal and jurisdictional reports, visit <u>alcoholpolicy.cisur.ca</u> or email <u>cisur@uvic.ca</u>.



















