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



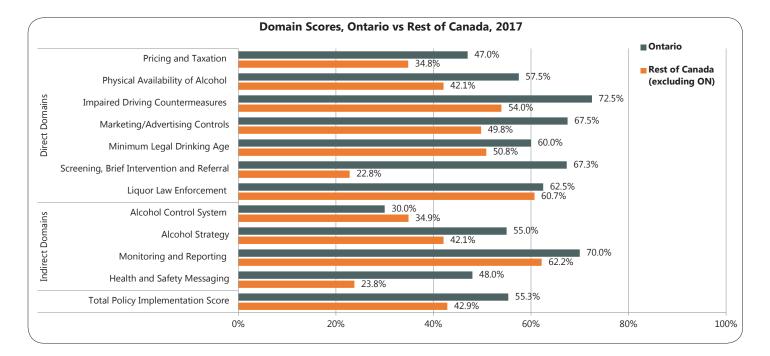
Ontario

Population (2016)	13,448,494
Per capita alcohol consumption age 15+*	8.4L pure ethanol**
Overall alcohol harm costs (2014)	\$5,344M
Net revenue from alcohol (2014)***	\$3,918M
Type of alcohol retail system	Mixed government/ private 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, 2019^a for the full methodology and findings.

The scores presented in this summary reflect the degree to which Ontario has implemented these gold standard best practices captured in the alcohol policy framework. **Overall, Ontario scored 55% in 2017, 12% above the average of 43% for the rest of Canada (excluding Ontario).**

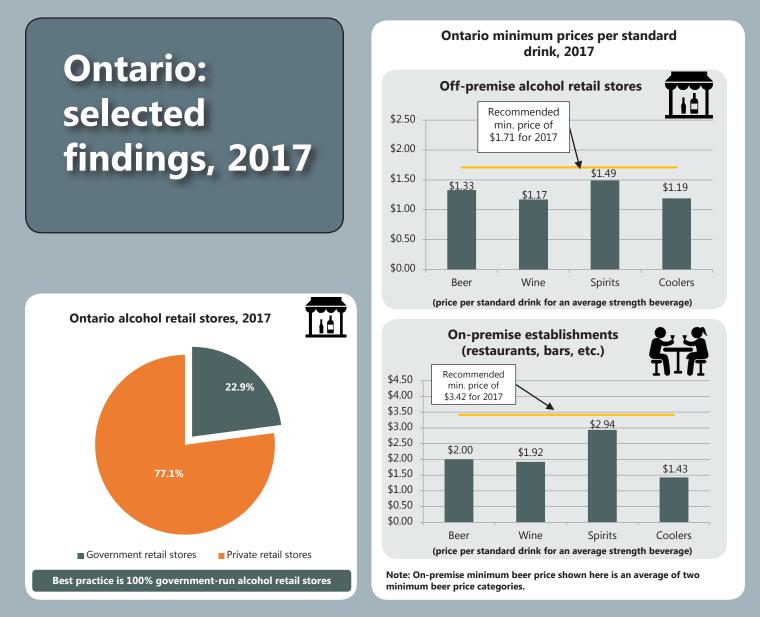


Promising practices in Ontario

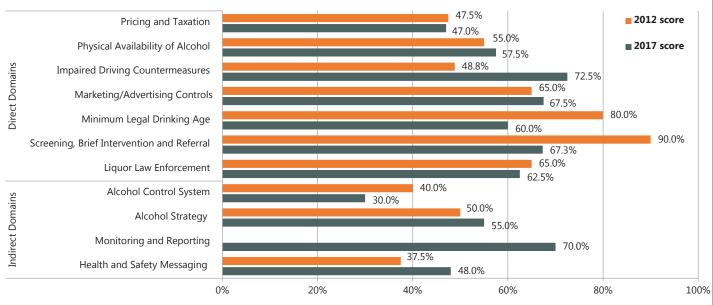
- Ontario is currently one of the few jurisdictions in Canada that has implemented annual legislated increases in minimum prices for alcohol sold from off-premise retail stores that correspond directly with Ontario-specific inflation rates. Unfortunately this policy has since been undermined by the introduction of "buck-a-beer" pricing.
- Ontario's **interlock program** for Criminal Code impaired driving offenders meets some of the gold standard best practices including a minimum 3 year interlock order for second time Criminal Code offenders and relicensing being conditional upon program performance.
- Ontario has a **strong risk-based licensing and enforcement program** for on-premise establishments like restaurants and bars that takes into account characteristics of the outlet as well as the licensee. The program also systematically incorporates liquor-related infractions in order to determine licence conditions and enforcement schedules.
- Ontario is one of few jurisdictions to have **mandatory health messaging** inscribed in legislation. Sandy's Law ensures that information on the risk of consuming alcohol during pregnancy is prominently displayed in all locations where alcohol is sold, including locations where customers make their own products for home consumption (e.g. ferment on premise locations).

*Adjusted to account for unrecorded alcohol consumption. **Equivalent to 491 standard drinks (1 standard drink contains 17.05mL of pure alcohol and is equivalent to 341mL of 5% beer; 142mL of 12% wine; or 43mL of 40% spirits). *** Net income of liquor authorities, total taxes, and other revenue. See CAPE report for full list of data sources."

Strengthening alcohol policies in Ontario			
	Policy Domain	Score	Selected recommendations
DIRECT DOMAINS	Pricing and Taxation	47% F	 Reverse the decision to reduce the minimum price of beer to \$1.00 per standard drink. Instead, ensure minimum prices for all beverage types 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). Update all alcohol prices annually to reflect Ontario-specific inflation rates to ensure alcohol does not become less expensive relative to other consumer goods over time. Minimum prices in on-premise establishments have not been updated since their inception in 2007 and prices for alcohol sold in retail stores have lagged behind inflation for over 5 years. Alcohol sales taxes should be set at a higher rate than other consumer goods.
	OPEN Physical Availability	58% D+	Do not proceed with announced plans to sell beer and wine in corner stores and a greater number of grocery outlets and ensure that new legislation does not continue to increase the availability of alcohol; hours of sale should not be expanded even on a temporary basis. Implement legislation to limit the density of drinking establishments and retail stores with restrictions on the number or location of outlets and establish policies to enhance safety in and around outlets.
	Impaired Driving Counter- measures	73% B-	Strengthen the existing graduated licensing program (GLP) by ensuring the first stage is at least 12 months , even for those who have participated in driver education courses and implement a nighttime driving ban for all GLP drivers . Strengthen the short-term administrative license suspension (ALS) program by including mandatory impoundments for drivers with a .05% BAC level and ensuring that the ALS program has a licence reinstatement fee .
	Marketing and Advertising Controls	68% C+	Ensure that provincial marketing restrictions apply to all advertisers, including government owned retail stores (e.g. LCBO outlets) and private retailers (e.g. The Beer Store). Implement mandatory prescreening of all alcohol advertisements and ensure this process, and enforcement of alcohol ads more generally, is overseen by an independent authority with a mandate to protect public health and/or safety (e.g. Alcohol and Gaming Commission of Ontario).
	Minimum Legal Drinking Age	60% C-	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.
	Screening, Brief Inter- vention/ Referral	67% C+	Consider implementing online screening, brief intervention, and referral tools , as a matter of policy, in order to increase accessibility to such services, especially among younger populations or those not accessing health care in a clinical setting. Collaborate with health care providers in order to increase the proportion of physicians or other clinical staff who routinely ask adults 18+ about their alcohol use.
	Liquor Law Enforcement	63% C	Ensure that the risk-based licensing and enforcement program is applied to all retail outlets so that licensing conditions and enforcement schedules are informed by licence holder and outlet characteristics as well as compliance history. Employ at least 1 liquor inspector per 300 outlets to ensure there are sufficient numbers to conduct frequent compliance and follow-up checks for violations.
INDIRECT DOMAINS	Alcohol Control System	30% F	Maintain the present network of government-owned and government-run LCBO retail stores and ensure they report to a ministry with a mandate to protect health and safety. Ensure that new legislation does not continue to privatize the alcohol market by expanding the sale of alcohol to other types of private retailers and businesses (e.g. convenience stores, more grocery stores and big box stores).
	Alcohol Strategy	55% D	In light of the on-going expansion of alcohol availability in Ontario, development and implementation of an alcohol-specific government-endorsed strategy should be given high priority. The strategy should be developed independently from the alcohol industry and include a range of evidence-based public health policies, in order to reduce alcohol consumption and related harms.
	Monitoring and Reporting	70% B-	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; private industry should not be exempt from public reporting. 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	48% 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. Expand legislated health and safety messages for Fetal Alcohol Spectrum Disorder (e.g. Sandy's Law) to include a variety of health-focused messages such as alcohol's risk for injuries, chronic disease, and low-risk drinking guideline information.
Total Policy Implementation Score		55% D	A comprehensive list of gold standard best practice alcohol policies is available in Appendix C of the full CAPE report ^a .



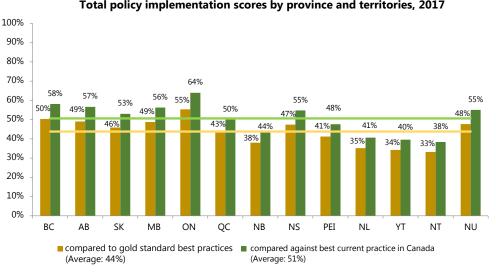




Note: policy indicators may have changed between 2012 and 2017 thus scores reflect best practices at the time of data collection.

How does Ontario 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).



Total policy implementation scores by province and territories, 2017

Next steps for reducing alcohol-related harms and costs in Ontario

- 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 report¹¹. 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 to be sold in a range of outlet types and by private retailers 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^a).
- 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.
- Inform the public about the risks of alcohol, including the comparative risks of alcohol and other substances, 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.

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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 alcoholpolicy.cisur.ca or email cisur@uvic.ca.

