

Canadian Alcohol Policy Evaluation (CAPE) 3.0

Alcohol policy in Ontario: CAPE 3.0 Results

Presentation for Public Health Ontario (PHO) Rounds Webinar

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Health Canada | Santé Canada

Substance Use and Addictions Program
Programme sur l'usage et les dépendances aux substances



Public Health Agency of Canada Agence de la santé publique du Canada



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Presentation Outline



- CAPE Overview, Rationale and Policy Domains
- Ontario Results
- Ontario Results and Recommendations for select Policy Domains:



Pricing and Taxation



Physical Availability



Minimum Legal Age



Screening and Treatment Interventions

Presentation Objectives



By the end of this event, participants will be able to:

- 1. Describe Ontario's alcohol consumption, costs and harms.
- 2. Identify key alcohol policy domains proven to reduce harm from alcohol use.
- 3. Describe best practice policies within the domains of Pricing and Taxation, Physical Availability, Minimum Legal Age, and Screening and Treatment Interventions.
- 4. Identify areas of strength and opportunities for improving Ontario's alcohol policies.

What does CAPE offer?



- 1. Accessible, evidence-based, up-to-date information for policymakers, researchers, NGOs etc.
- 2. Systematic policy comparisons between Canadian jurisdictions and over time
- 3. Platform for informing the public about effective alcohol policies
- 4. Mechanism for keeping a public health approach to alcohol policy on government agendas
- 5. National Community of Practice with 450+ members facilitating learning events and knowledge exchange

Poll Question #1



How many <u>standard drinks</u> per person aged 15+ are consumed in Ontario each year?

- a) 253
- b) 648
- c) 457
- d) 215

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Why does CAPE matter?



Annual consumption, harms and costs in Ontario, 2020

Alcohol Consumption



 People in ON consumed the equivalent of
 457 standard drinks of alcohol per person aged 15+ (StatsCan, 2020/21)

Alcohol Health Harms





- Alcohol led to:
 - 6,202 deaths,
 - **38,043** years of productive life lost
 - 319,580 hospital admissions
- (CSUCH, 2020)

Alcohol Deficit





- Alcohol's net revenue: \$5.162 billion
- Alcohol's economic cost:-\$7.109 billion
- ON's alcohol deficit:
 - -\$1.947 billion
- (StatsCan, CSUCH, 2020/21)

Sources:

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

The Alcohol Deficit



Each province and territory runs a **deficit** from alcohol

The costs to government per standard drink sold in Ontario = -\$0.34

Province/Territory	ВС	AB	SK	MB	ON	QC†	NB	NS	PE	NL	YT††	NT	NU
Alcohol- Net Revenue* (StatsCan, 2020/21)	\$2,043	\$1,305	\$454	\$508	\$5,162	\$2,824	\$319	\$432	\$70	\$296	\$19	\$36	\$5.4
Alcohol- Harms Costs* (CSUCH, 2020)	\$2,811	\$3,110	\$766	\$807	\$7,109	\$3,244	\$411	\$652	\$131	\$351	\$46	\$109	\$124
Deficit*	-\$768	-\$1,805	-\$312	-\$299	-\$1,947	-\$420	-\$92	-\$219	-\$61	-\$54	-\$27	-\$73	-\$119
Loss per standard drink	-\$0.33	-\$0.95	-\$0.71	-\$0.57	-\$0.34	-\$0.12 [†]	-\$0.30	-\$0.54	-\$0.96	-\$0.22	-\$0.98	-\$2.58	-\$17.92

^{*} Value in Millions

Sources:

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

[†] Cost estimates do not include inpatient hospitalization, day surgery, emergency department and paramedic services costs for Quebec

^{††} Costs associated with lost productivity due to premature deaths in Yukon are not included

General Trends and Policy Directions across Canada since CAPE 2.0

Ontario to allow bars, restaurants to serve alcohol starting at 7 a.m. for World Cup

Le gouvernement manitobain veut à nouveau réduire les restrictions sur la vente d'alcool

B.C. aims to give restaurants a liquor discount, expedite patio approvals

Workers protest Sask. closing government liquor stores, minister calls it a 'business decision'

De l'alcool vendu jusqu'à 6h pour sept évènements à Montréal

Sask. govt. wants to allow municipalities, parks to

permit alcohol in outdoor spaces

How new alcohol guidelines could lead to policy changes on P.E.I.

N.W.T. government unveils long-awaited 'alcohol strategy' with long list of action items

Province proposes private liquor sales at Manitoba retailers

Southwestern Ontario 7-Eleven to serve alcohol with in-store dining

CAPE Methodological Process



Developing the scoring rubric

Selection of Domains and Indicators

Development of domain weighting

Development of indicator scoring

External peer review

> Each jurisdiction contacted to appoint CAPE data validation contacts



Data collection (Phase I & II)

Data validation

Data scoring

Tabulation of scores

*CAPE scores = sum of indicator scores × domain weights

CAPE Alcohol Policy Domains





Pricing and Taxation





Physical Availability 🜟





Control System



Impaired Driving Countermeasures



Marketing and Advertising Controls



Minimum Legal Age





Health and Safety Messaging



Liquor Law Enforcement (not assessed at the Federal level)



Screening and Treatment Interventions





Alcohol Strategy



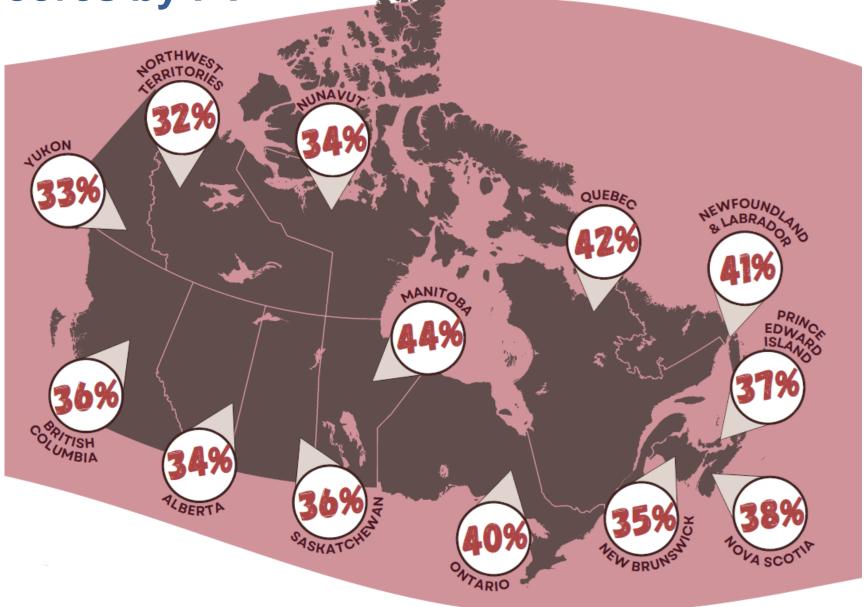
Monitoring and Reporting



Indicates the domains covered in greater detail in today's presentation

CAPE Scores by PT







Best Existing Policies Score

What score could be achieved by Ontario if they were to implement all the best

policies currently in place somewhere in Canada?

Best existing policies score = 80% A-

Best practice alcohol policies are achievable!



Policy Domain Scores for Ontario

11. Monitoring & Reporting

SCORE GRADE

71%









Overview

- Raising the price of alcohol is a highly effective strategy for reducing consumption, and alcohol-caused health and social harms.
- If prices do not keep pace with inflation, alcohol becomes cheaper relative to other goods, encouraging higher consumption.
- Taxation is a cost-effective method to raise prices, especially when tax rates are based on the amount of ethanol in a beverage
- Policies include minimum pricing, minimum unit pricing (MUP), indexation, alcohol sales taxes





Minimum Unit Pricing (MUP) Impacts

- Impacts of MUP have been studied in Canada, Australia and Scotland. Evidence shows that pricing reduces consumption and harm **most effectively** for heavier drinkers and those with low incomes^{1,2,3,4}
- Despite concerns that MUP would negatively affect low-income populations with high prevalence of addiction, especially those with unstable housing, qualitative research has demonstrated minimal to no negative impact on these populations⁵

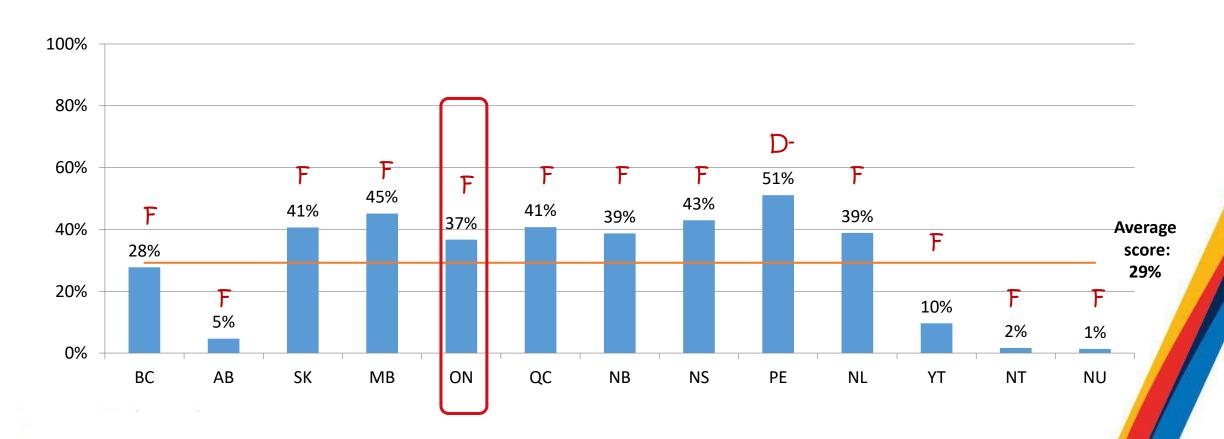
Sources:

- L. Wyper, G. M., Mackay, D. F., Fraser, C., Lewsey, J., Robinson, M., Beeston, C., & Giles, L. (2023). Evaluating the impact of alcohol minimum unit pricing on deaths and hospitalisations in Scotland: a controlled interrupted time series study. The Lancet, 401(10385), 1361-1370.
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- 3. Zhao, J., & Stockwell, T. (2017). The impacts of minimum alcohol pricing on alcohol attributable morbidity in regions of British Colombia, Canada with low, medium and high mean family income. Addiction, 112(11), 1942-1951.
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- 5. Dimova, E. D., Strachan, H., Johnsen, S., Emslie, C., Whiteford, M., Rush, R., ... & Elliott, L. (2023). Alcohol minimum unit pricing and people experiencing homelessness: A qualitative study of stakeholders' perspectives and experiences. Drug and Alcohol Review, 42(1), 81-93.





Domain scores by province and territory





Pricing and Taxation in Ontario



ON PREMISE

(restaurants, bars, etc)

\$3.66 ☐ Beer

\$3.66 ∑ Wine

\$3.66 \(\frac{\gamma}{2}\) Spirits

\$3.66 \(\text{Coolers} \)

\$2.00

\$1.92

\$1.97

\$1.43

RECOMMENDED*

OFF PREMISE

RECOMMENDED*

\$1.83 Beer

\$1.83 [↑] Wine

\$1.83 Y Spirits

\$1.83 Coolers

ACTUAL

\$1.06

\$1.54

\$1.63

\$1.30

(liquor stores)

Minimum pricing off-premise:

minimum prices lower than recommended; tied precisely to ethanol content for high strength beer only; automatically indexed to inflation (except beer); exceptions (e.g.,

discounting de-listed products, volume discounts)

Minimum pricing on-premise: minimum prices lower than recommended; not tied to ethanol content, not automatically indexed to inflation

General prices and inflation:	*price per standard drink for a common container size and beverage strength, expressed in 2021 dollars.				
alcohol not keeping pace with inflation (except on-premise beer and spirits)					

Alcohol taxes and markups: alcohol not taxed at a higher rate relative to other consumer goods for both on-premise and off-premise sales





Key Recommendations

- Base minimum prices for all alcohol sold on ethanol content (i.e. minimum unit pricing)
- Set minimum prices at the recommended level of:
 - \$2.04* per standard drink at off-premise retail outlets
 - \$4.07* per standard drink at on-premise establishments
- Index alcohol prices to inflation. Otherwise, like all prices, they will erode over time, encouraging more consumption
- Tax alcohol at a higher rate than other consumer goods

*2023 dollars

If ON implemented all the best existing pricing and taxation policies across Canada's provinces and territories, their score could increase from 37% to 88% (A)





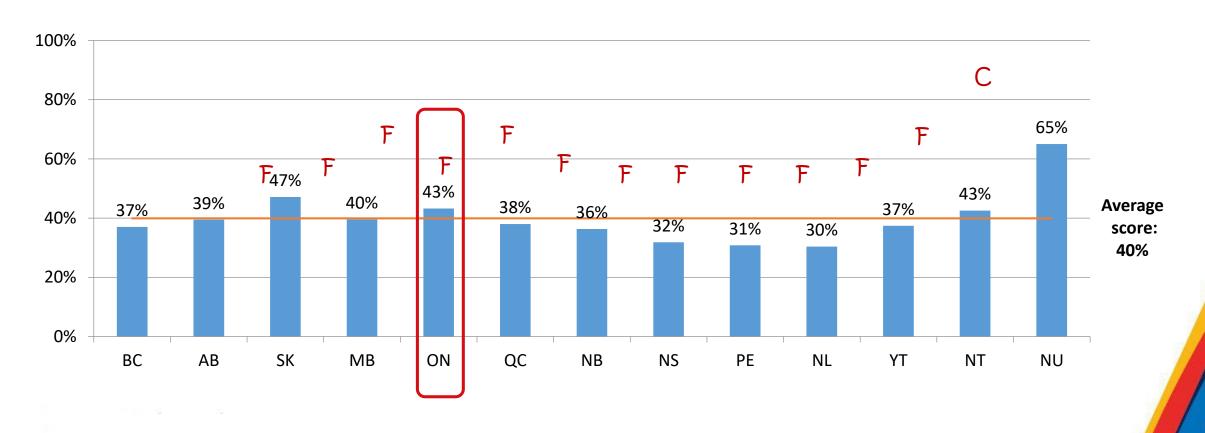
Overview

- Physical availability refers to:
 - the density of off-premise retail outlets (i.e. liquor stores) and on-premise licensed establishments (e.g., restaurants, bars) in relation to the size of the population
 - trading hours and days of these outlets and establishments
 - where alcohol outlets and establishments can be located
- Limiting the physical availability of alcohol with reduced outlet density and trading hours is a key population-level intervention that can decrease consumption and prevent alcohol harms.
- Take-out and home delivery increase the spatial and temporal availability of alcohol, particularly to minors, and has been associated with increased consumption and harms.





Domain scores by province and territory







- Density, placement and hours/days of sale (off-premise):

 population-based outlet density near recommended limits; legislated powers to
 set limits; sets a voluntary cap on grocery store licenses; hours of sale extend
 longer than recommended (i.e. before 11am, after 8pm); voluntary restrictions
 on outlet placement to which the LCBO outlets adhere
- Density, placement and hours of sale (on-premise):

 population-based outlet density meets recommended limits; hours of sale extend longer than recommended (i.e. before 11am, after 1am)
- Take-out and home delivery:

 home delivery permitted including by a third party;

 on-premise take-out permitted (food requirement poorly defined)





- Reduce existing density of off-premise outlets. Density limits: strengthen for off-premise outlets, introduce for on-premise establishments
- Introduce placement limits for all premises
- Reduce and legislate maximum trading hours allowed per week; restrict alcohol sales before 11am and after 8pm (off-premise) and 1am (on-premise)
- Prohibit on-premise alcohol take-out. Prohibit home delivery, including by third party.

If ON implemented all the best existing physical availability policies across Canada's provinces and territories, their score could increase from 43% to 82% (A-)





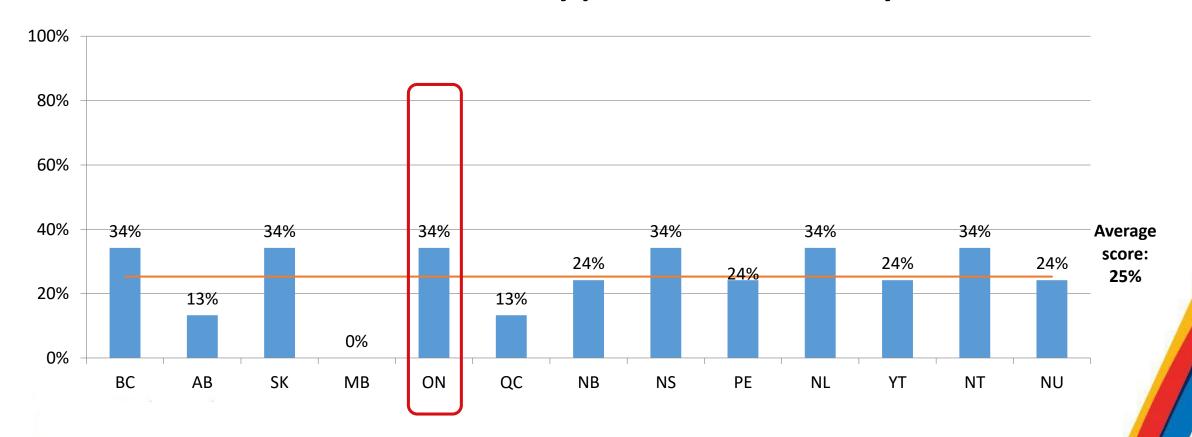
- Minimum legal age (MLA) laws offer health and safety benefits at the population level, as they act to delay the onset of problem alcohol use, and may also produce positive impacts across the life course
- MLA laws make it more difficult for young people to access alcohol. They communicate
 a message about community norms, beliefs, and behaviours around alcohol, which
 helps to shape consumption patterns and reduce underage drinking.
- MLA laws effectiveness can be strengthened with proof-of-age laws that require anyone purchasing alcohol to present government-issued identification





Minimum Legal Age

Domain scores by province and territory







Key Recommendations

- Increase minimum legal age for possession and purchase of alcohol; consider granting graduated access (i.e. restrictions based on alcohol strength or hours of sale).
- Require proof of age identification for anyone purchasing alcohol and 2staged verification (i.e. when ordering and receiving order) for alcohol sales made remotely (e.g. online, via phone, etc.).





Overview

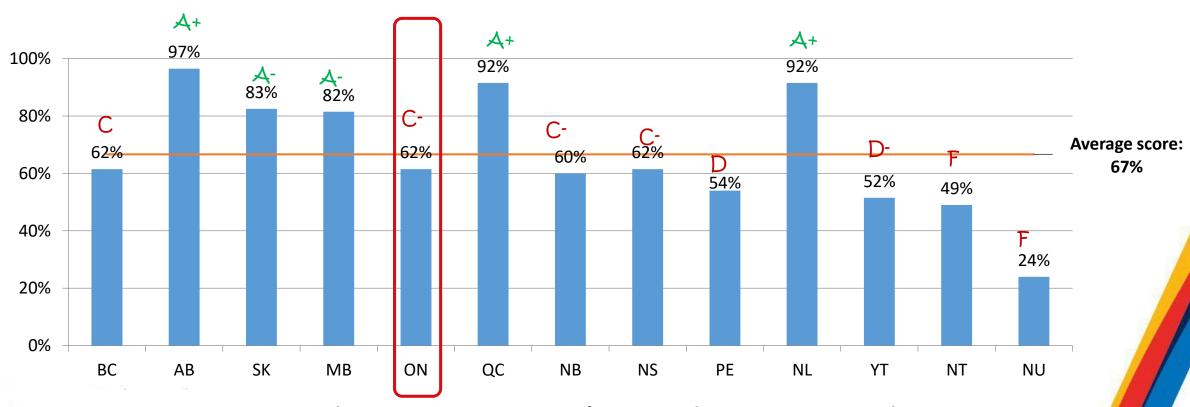
- Evidence-based, government-endorsed information and guidance on alcohol can provide an important upstream framework for a range of prevention, education, and health promotion initiatives in both clinical and non-clinical settings
- Screening, brief intervention and referral (SBIR) in health care settings and use of online self-guided SBIR resources are effective in reducing alcohol consumption, particularly among those with early stage or less severe alcohol dependence
- Inpatient and outpatient treatment services, including withdrawal management, and harm reduction interventions (e.g. managed alcohol programs), have demonstrated effectiveness in reducing the harms associated with alcohol use





Screening and Treatment Interventions

Domain scores by province and territory



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



Screening and Treatment Interventions in Ontario

- Population-level guidance, screening tools and services: no province-wide SBIR services by healthcare professionals available; no province-wide SBIR training for healthcare professionals available; no active government SBIR tools available online; informal endorsement of alcohol guidance
- Treatment and harm reduction services:

 publicly funded alcohol withdrawal management/detox services;

 inpatient and outpatient services beyond 12-step model;

 publicly-funded permanent managed alcohol programs

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





Screening and Treatment Interventions

Key Recommendations

- Formally adopt the most recent evidence-based national alcohol guidance with an official statement of support.
- Provide health professionals with screening, brief intervention, and referral (SBIR)
 training; ensure availability of in-person or online SBIR services with health professionals;
 develop and/or host online self-guided SBIR resources.

If ON implemented all the best existing screening and treatment policies across Canada's provinces and territories, their score could increase from 62% to 97% (A+)

What Ontario is Doing Well



- Off-premise minimum pricing: automatically indexed to inflation (except beer), high strength beer tied precisely to ethanol content
- Outlet density: near recommended limits (off-premise), meets limits (onpremise); cap on grocery store licenses
- > Sandy's law requires mandatory signage for FASD
- Many policies meet or are close to recommendations for:
 - Penalties for liquor control and license act violations (Liquor Law Enforcement)
 - Alcohol Sale and Service Training Programs (Liquor Law Enforcement)
 - Monitoring and Reporting

Poll Question #2



What percentage of the <u>off-premise retail</u> network in Ontario is government owned and operated?

- a) 22.9%
- b) 28.8%
- c) 11.7%
- d) 12.1%

Poll Question #2



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Other Recommendations for Ontario





Control System

- Appoint health and/or safety-focused ministry to oversee alcohol distribution/retail. Include protection of public health and safety as explicit mandate objectives for regulator and distributor/retailer.
- Increase the current 22.9% proportion of government-owned and operated off-premise retail outlets. Prohibit alcohol sales in convenience and grocery stores (e.g. 7-Eleven), in establishments offering other services (e.g. spas), and online.



Health and Safety Messaging

- Implement enhanced alcohol labelling as a manufacturer requirement; mandatory onsite health and safety messaging (e.g. signage, posters)
- Health ministry deliver variety of alcohol health and safety campaigns at least annually



Alcohol Strategy

• Implement a standalone government-endorsed alcohol strategy that includes a range of evidence-based public health policies (e.g., pricing, physical availability)





• Perform annual public reporting through a centralized database (i.e. website) of all alcohol-related indicators; with tailored KT activities at least 2 yearly



Questions



Project website: www.alcoholpolicy.cisur.ca

CAPE Resources



- CAPE 3.0 knowledge products include:
 - Results summaries for each jurisdiction
 - Infographics (each jurisdiction, each CAPE policy domain)
 - Policy Scoring Rubrics
 - Policy Domain Results Summary (Provincial/Territorial)
 - Best Practice Policy Leaders (Provincial/Territorial)
 - Project Methodology and Evidence Review
- Visit CAPE website www.alcoholpolicy.cisur.ca to access resources from 2022-24 events on topics such as pricing and taxation, strategies/action plans, and alcohol warning labels
- Request a tailored CAPE presentation via our <u>online form</u>

CAPE Community of Practice



National alcohol policy community for knowledge-sharing, connections, collaborations and professional development

Offerings

email listserv, research presentations, roundtables, networking sessions, alcohol warning labels (AWL) working group, alcohol strategies working group, resources, media and publications roundup, and updates about CAPE project.

Not yet a member of the CAPE CoP?

Visit the CAPE website to sign up www.alcoholpolicy.cisur.ca

Want to know more? email capecopcoord@uvic.ca