Canadian Alcohol Policy Evaluation (CAPE)

CAPE 3.0 Update and Community of Practice Launch Event January 19, 2022

Presenters: Fariha Alam, Amanda Farrell-Low, Norman Giesbrecht, Timothy Naimi, Tim Stockwell, Ashley Wettlaufer









WELCOME/BIENVENUE!

Part 1: Canadian Alcohol Policy Evaluation (CAPE) Overview and update [~30 mins]

Why is alcohol policy important?

What is CAPE?

How does CAPE work?

Recap of CAPE 2.0

Alcohol policy changes during COVID-19 pandemic

What's next for CAPE 3.0?

Questions and discussion [~15 mins]

Part 2: CAPE Community of Practice (CAPE CoP) [~15 mins]

Why launch an alcohol policy community of practice?

What will the CAPE CoP look like?

Membership Makeup and Audience Polls

Questions and discussion [~30 mins]





Meet your Presenters...

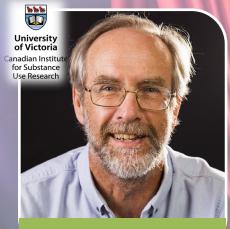




Norman Giesbrecht (CAMH)



Amanda Farrell-Low (CISUR)



Tim Stockwell (CISUR)



Ashley Wettlaufer (CAMH)



Fariha Alam (CISUR)



Tim Naimi (CISUR)



Canadian Institute for Substance Use Research





... And Our Presentation Creator

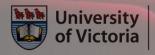


Kate Vallance (CISUR)

& Community of Practice Coordinator



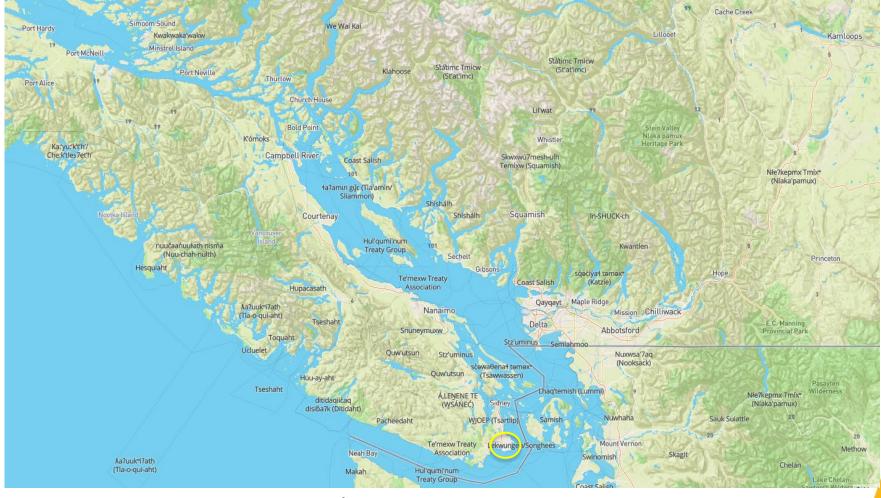
Nicole Vishnevsky (CISUR)







Centre de toxicomanie et de santé mentale



We acknowledge and respect the ləkwəŋən peoples on whose traditional territory the University of Victoria stands and the Songhees, Esquimalt and WSÁNEĆ peoples whose historical relationships with the land continue to this day.





Webinar Housekeeping

- Presentation today = 1.5 hours in two parts
- Please use the chat function for questions
- Optional: turn on live transcript if you prefer
- We will circulate presentation materials after (slide decks, recordings, summaries, French versions when possible)
- We will be recording presentations, but not Q&A sessions
- For persons with lived/living experience stipends: email capecopcoord@uvic.ca
- Questions? <u>www.alcoholpolicy.cisur.ca</u> or <u>capecopcoord@uvic.ca</u>







Aperçu de l'événement : en français

- Veuillez noter que l'événement sera en anglais.
- Les documents disponibles en français (après traduction) comprendront des:
 - diapositives de présentation
 - des résumés d'événements
 - Les sondages de rétroaction
 - les termes de référence de la communauté de pratique
- Les questions en français sont les bienvenues dans la boîte de discussion car elles seront traduites.







Why is Alcohol Policy Important?



Norman Giesbrecht (CAMH)



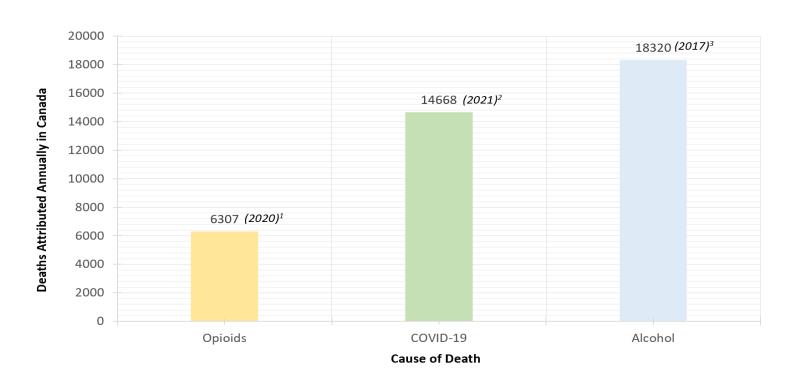
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A look into Deaths in Canada...

Deaths Attributed Annually in Canada to Different Causes



 $^{^1\,}https://csuch.ca/publications/CSUCH-Canadian-Substance-Use-Costs-Harms-Report-2020-en.pdf$

³ https://health-infobase.canada.ca/covid-19/visual-data-gallery/





² https://health-infobase.canada.ca/substance-related-harms/opioids-stimulants/



Main Approaches to Preventing or Reducing Harm from Alcohol



Clinical interventions



Education and information



Cultural change



Implementing alcohol policies







Clinical Interventions



- May be effective
- Often costly
- Typically do not focus on the occasional high risk drinker
 - This population represents a large share of total harm from alcohol
- Do not address alcohol promotion or drinking culture at population level









- Of questionable effectiveness in changing behaviour
- Very costly if any chance of competing with alcohol marketing and advertising
- Potentially useful as a supplementary strategy, but alcohol industry often presents it as a main approach to prevention







Two Examples of Information on Alcohol

Drink responsibly for the good of Ontario.

Donate in store today

LCBO SPIRITOR SUSTAINABILITY

"Please drink responsibly"



Warning Labels









Cultural Change on Alcohol Attitudes and Behaviours

- No clear road map how to do this
- May take a generation or more
- However, strong alcohol policies can contribute to cultural change







Alcohol Policies



- Shown to be effect in reducing high-risk drinking and harms from alcohol
- Efficient and typically of low cost
- Relevant to all sectors of population and drinking behaviours
- Do not victimize specific persons or sectors
- Are supported by effective clinical programs and information campaigns







What is the Canadian Alcohol Policy Evaluation (CAPE) Project?



The CAPE project is a comparative, point-in-time review of alcohol policies in Canada using a health surveillance approach



Systematically assesses degree of implementation of a series of evidence-based alcohol policies across governments



1st review: 10 provinces (Giesbrecht et al., 2013)
2nd review: 10 provinces/3 territories & federal gov.
(Stockwell et al., 2019/Wettlaufer et al., 2019)





Why Conduct the CAPE Project?





~80% of Canadians drank 1+ alcoholic drink in past year



30-40% of drinkers (15+ years) report drinking above low-risk drinking guidelines after adjustment for under-reporting (Zhao et al., 2015)



In 2017, alcohol led to:

- 18,000 deaths,
- 115,000 years of productive life lost and
- 105,000 hospital admissions (CSUCH, 2020)



In 2018, the net <u>costs</u> of alcohol exceeded its revenues with all provinces and territories running a deficit (CSUCH 2020).







What is the Basis for the CAPE Project?

WHO SAFER & PAHO strategies for reducing alcohol harms

Decreasing alcohol's affordability

Decreasing convenience of access

Restricting advertising and promotions

Deterring impaired driving

Previous international policy scales and comparative reviews

Anderson et al., 2009

Babor et al. 2010

Brand et al. 2007

Naimi et al. 2011

Nelson et al. 2013

Burton et al. 2016

MADD Canada Impaired driving report cards & legislative reviews

Solomon et al., 2003 & 2018







CAPE 1.0 Publications





Camh Winiversity Centre for Addictions SUNIVERSITY OF TORONTO Research of SC BLOOMBERG PUNIVERSITY MACC







Pricing of alcohol in Canada: A comparison of provincial policies and harm-reduction opportunities

NORMAN GIESBRECHT¹, ASHLEY WETTLAUFER¹, GERALD THOMAS², FIM STOCKWELL², KARÁ THOMPSON³, NICOLE ÁPRIL⁴, MARK ASBRÍDGE⁵, SAMANTHA CUKIÉR⁶, ROBERT MANN¹, JANET McALLISTER⁷, ANDREW MÚRIE⁸, CHRIS PAULEY⁵, LAURIE PLAMONDON⁴ & KATE VALLANCE²

Drug and Alcohol Review (2015) DOI: 10.1111/dar.12338

International Journal of Alcohol and Drug Research

The Official Journal of the Kettil Bruun Society for Social and Epidemiological Research on Alcohol

doi: 10.7895/ijadr.v5i2.221

IJADR, 2016, 5(2), 33 - 45

ISSN: 1925-7066

Strategies to reduce alcohol-related harms and costs in Canada: A comparison of provincial policies

Norman Giesbrecht^{1,2}, Ashley Wettlaufer¹, Stephanie Simpson³, Nicole April⁴, Mark Asbridge⁵, Samantha Cukier⁶, Robert E. Mann^{1,2}, Janet McAllister⁷, Andrew Murie⁸, Chris Pauley⁹, Laurie Plamondon⁴, Timothy Stockwell⁹,

SUBSTANCE USE & MISUSE 2017, VOL. 52, NO. 10, 1364-1374 http://dx.doi.org/10.1080/10826084.2017.1281308



ORIGINAL ARTICLE

Comparing Alcohol Marketing and Alcohol Warning Message Policies Across Canada

Ashley Wettlaufer^a, Samantha N. Cukier^b, and Norman Giesbrecht^{a,c}

^aCentre for Addiction & Mental Health, Institute for Mental Health Policy Research, Toronto, Canada; ^bData Science, Dartmouth College, Hanover, New Hampshire, USA; 'Dalla Lana School of Public Health, University of Toronto, Toronto, Canada

Strategies to Reduce Alcohol-Related Harms and Costs in Canada:

A Comparison of Provincial Policies

Stratégies pour réduire les méfaits et les coûts liés à l'alcool au Canada:

Une comparaison des politiques provinciales

Reducing Alcohol-Related Harms and Costs in Alberta:

A Provincial Summary Report

Home > Canadian Public Policy > List of Issues > Vol. 40, No. 3

A Comparison of Measures and Policies to **Prevent Alcohol Problems among Youth across Canadian Provinces**

Stephanie Simpson①, Ashley Wettlaufer①, Norman Giesbrecht①, Mark Asbridge①, Robert Mann①, Andrew Murie①

Find links to these documents under the 'CAPE Project Resources' tab at:

www.alcoholpolicy.cisur.ca



CAPE 2.0 Methods

S

Centre for Addiction and Mental Health

Ashley Wettlaufer (CAMH)



Canadian Institute for Substance Use Research



What does the CAPE Project Offer?



- 1. Accessible, evidence-based, up-to-date information for policymakers, NGOs etc.
- 2. Systematic policy comparisons between 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





Developing the CAPE Policy Domain Scoring Rubric



Domains and indicators selected based on review of the evidence and the first provincial review

Selection of Domains and Indicators

Development of domain weighting

Individual/team
 weighting exercises
 conducted to determine
 effectiveness and scope
 of domains

 Teams of coinvestigator topic experts updated the indicators to reflect current evidence

Development of indicator scoring

External Peer Review

 Rubric sent to international peer reviewers for feedback

Each jurisdiction contacted to appoint a CAPE data validation contact





Provincial, Territorial, Federal Domains



CAPE Alcohol Policy Domains

- 1. Pricing and Taxation
- (\$)

- OPEN
 - 2. Physical Availability
- 3. Impaired Driving Countermeasures





- 4. Marketing and Advertising Controls
 - 5. Minimum Legal Drinking Age





- 6. Screening, Brief Intervention and Referral
- 7. Liquor Law Enforcement (Provincial/Territorial ONLY)





- 8. Alcohol Control System
- 9. National Alcohol Strategy





- 10. National Monitoring and Reporting
 - 11. Health and Safety Messaging









Applying the CAPE Policy Domain Scoring Rubric

- Phase 1: Coordinators collect public data
- Phase 2: Coordinators collect data from key contacts

Data Collection - Phase 1 & 2

Data Validation

 Coordinators send datasets to key contacts for validation

- Co-investigators independently score the data
- Scoring discrepancies resolved by team consensus or by principal investigators

Data Scoring

Tabulation of Scores

 Coordinators tally domain and jurisdiction scores

CAPE scores = Sum of indicator scores × Domain weights CAPE scores calculated for each provincial, territorial and federal jurisdiction





CAPE 2.0 Project Team in Action!



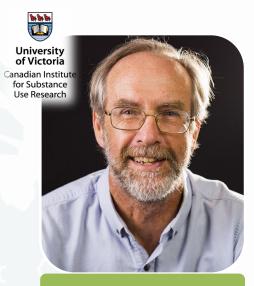








CAPE 2.0 Recap



Tim Stockwell (CISUR)



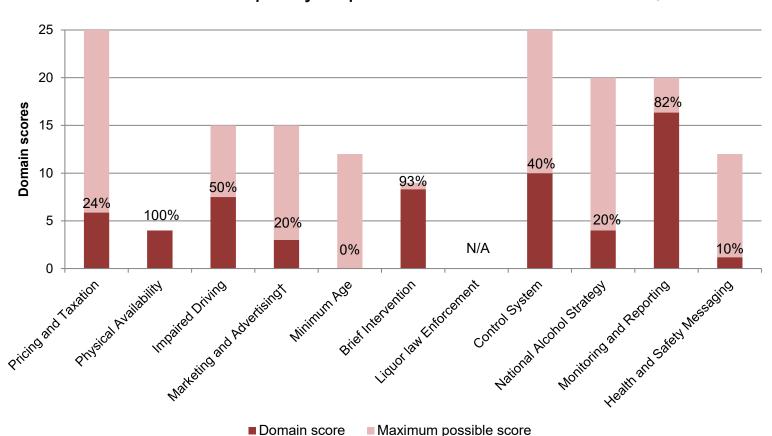
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CAPE 2.0 Federal Policy Domain Scores

Federal total policy implementation score: 38.4% F



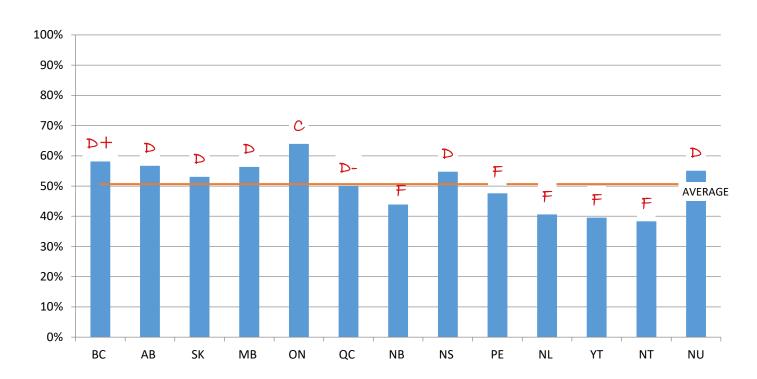






CAPE 2.0 Provincial/Territorial-Adjusted Total Policy Implementation Scores

Scores have been scaled up by comparing against best current practice in any P/T



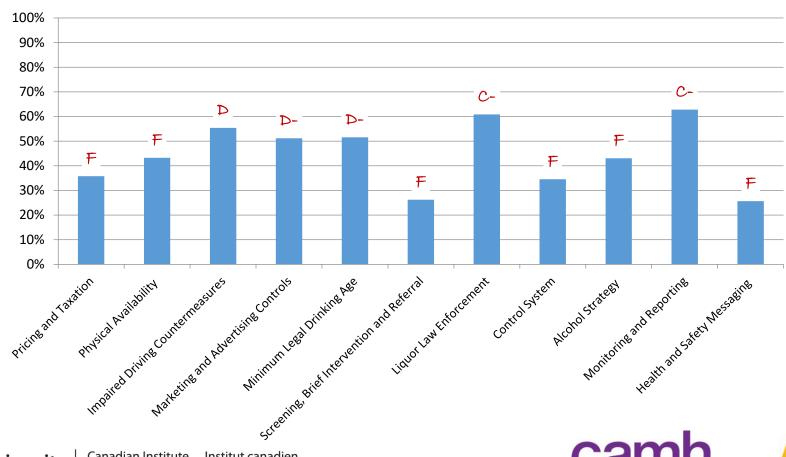






CAPE 2.0 Provincial/Territorial Policy Domain Scores

P/T total policy implementation score: 44% F





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CAPE 2.0 P/T Best Current Practices

Policy Domain	Best Current Practice Score (%)		
Pricing & Taxation	82.4		
Physical Availability	95.0		
Impaired Driving Countermeasures	95.0		
Marketing & Advertising Controls	100.0		
Minimum Legal Drinking Age	60.0		
Screening, Brief Intervention and Referral	69.0		
Liquor Law Enforcement	97.5		
Control System	80.0		
Alcohol Strategy	100.0		
Monitoring & Reporting	90.0		
Health & Safety Messaging	75.0		
Overall Best Current Practice Score	86.8 <mark>(A)</mark>		







CAPE 2.0 Provincial/Territorial Summaries

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



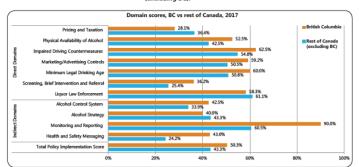
Policy Domain

British Columbia					
Population (2016)	4,648,494				
Per capita alcohol consumption age 15+*	9.9L pure ethanol**				
Overall alcohol harm costs (2014)	\$1,936M				
Net revenue from alcohol	\$1.621M				

Mixed government/

retail Mixed governmen private system The Provincial and Territorial Canadian Alcohol Policy Evaluation (CAPE) project is a rigorous assessment of whether evidence-based 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 of or hell methodology and findings.

The scores presented in this summary reflect the degree to which British Columbia has implemented these gold standard best practices captured in the alcohol policy framework. Overall, British Columbia scored 50% in 2017, which is 7% above the average of 43% for the rest of Canada (excluding BC).



Promising practices in British Columbia

- Minimum prices for most alcohol sold in British Columbia on-premise establishments (e.g. bars and restaurants) are currently set at a rate higher than the gold standard best practice; the only exception is the discounted rate available for draft beer and cider provided in servings greater than 50oz. British Columbia also sets sales taxes on alcohol that are 3% higher than the PST on other consumer goods.
- To support safer drinking contexts, British Columbia restricts the number of drinks served to individuals at one time to two standard drinks and permits re-corking of unfinished wine for take-away at on-premise establishments such as have and restaurants.
- There are strong impaired driving countermeasures in place in British Columbia with minimum durations for administrative licensing suspension (ALS) set as recommended at 3 days for the first offense and 7 days for the second offense with a license reinstatement fee.
- British Columbia has supportive minimum legal drinking age legislation that prohibits the purchase and sale of alcohol involving underage individuals with no existing exceptions allowing for legal consumption of alcohol in certain contexts such as a parent, spouse or guardian providing it in a private residence.

*Adjusted to account for unrecorded alcohol consumption. **Equivalent to 581 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.*

	Tolley D		50010	Science recommendations
	\$	Pricing and Taxation	28% F	Ensure minimum prices are set at a rate per standard drink (so. 3 170mf, pure alcohol) of at least \$1.75" per standard drink for off promise retail attores and \$3.50" per standard drink for on premise retailations and \$3.50" per standard drink for on premise retailations standard than the consequence of \$2.010 prices. For example, minimum prices should be legislated to apply to all off-premise retail stores including fements—on-premise tasks Volume discounts such as for pitchers of beer should be prohibited. Update all alcohol prices annually to reflect British Columbia-specific inflation rates to ensure alcohol does not become less expensive retails to other goods over time. On-premise minimum prices have not been updated since implementation in 2016 and so have reduced potential as a harm reduction intervention.
	OPEN	Physical Availability	53% D-	Introduce legislated restrictions on outlet density in British Columbia, 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 1100am) or late-rigid sales (i.e. after glym for off-premise retail stores and Lam for on-premise establishments) without exceptions and prohibits 24-hour room service sales of alcohol in hotels/motels.
		Impaired Driving Counter- measures	63% C-	Strengthen the graduated ficensing program (GLP) for new drivers in British Columbia by implementing a night-time driving base for stage 2 drivers and zero tolerance for cannables and litticit substances for GLP drivers for a minimum of 3 years after program completion. Penalties should be increased or modified for all drivers when the presence of a drug is detected in addition to alcohol and a minimum 3 year interfock order should be required for a second Criminal Code impaired driving offeres.
DIRECT DOMAINS	A	Marketing and Advertising Controls	59% D+	Erous a clothal advertising content restrictions cover placement, quantity, and content of ads and that there is an independent complaint system that handles complaints for advertisements from all of-premise relations where they are privately or government accessing for all alcohol ads by an independent authority to confirm complaince with content restrictions provide provide provides a confirm complaince with content restrictions provide provides that was only depending on the severity of the violation. Liquor regulators and retailers should make use of social media platforms to present evidence-based alcohol-related health and safety missaging.
DIR	(k)	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.
	\(\beta\)	Screening, Brief Inter- vention/ Referral	36% 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 Physician. Confine bod can increase accessible, specially 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.
	早	Liquor Law Enforcement	58% D+	Implement a risk-based licensing and enforcement program for on-premise establishments, off-premise retail stores, and special occasion permist to inform licensing conditions and enforcement schedules based on outlet and licence holder characteristics are well as incident data. Both on-premise establishments and off-premise retail stores should be inspected a minimum of once per year with more frequent checks based on sick Employ at least 1 Signor inspector per 300 outlets to ensure there are sufficient numbers to conduct frequent compliance checks and follow-up checks for violations.
	血	Alcohol Control System	43% F	Increase the proportion of government-owned and government-run off-premise retail stores in British Columbia. Probibit sales beyond on- and off-premise outlets such as online sales and liquor delivery services; phase out ferment on premise outlets which occurage the bulk also of inseperative acknobl. Ensure there are legislated earmarked funds to support prevention initiatives and health messaging.
DOMAINS	İİ	Alcohol Strategy	40% 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.
NDIRECTD	MÁ	Monitoring and Reporting	90% A+	Ensure that monitoring and tracking of alcohol consumption and harm indicators are sufficiently funded and made publicly available at least annually through a centralized system in order to support effective monitoring of trends in consumption and harms.
INI	÷	Health and Safety Messaging	43% F	Implement legislated enhanced alcohol labels as a manufacturer requirement with health and safety messages, standard dinki information, and national low-risk dinking guidelines; labels should have prominent rotating messages that are accompanied by pictorial images. Ensure that legislated health and safety messages displayed in all on-premise establishments and off-premise retail stores include a variety of health-flocused messages, and have liquor control boards use a range of media platforms to communicate health and safety messaging.
,	Total P Implementa		50% D-	A comprehensive list of gold standard best practice alcohol policies is available in Appendix C of the full CAPE report.

Strengthening alcohol policies in British Columbia



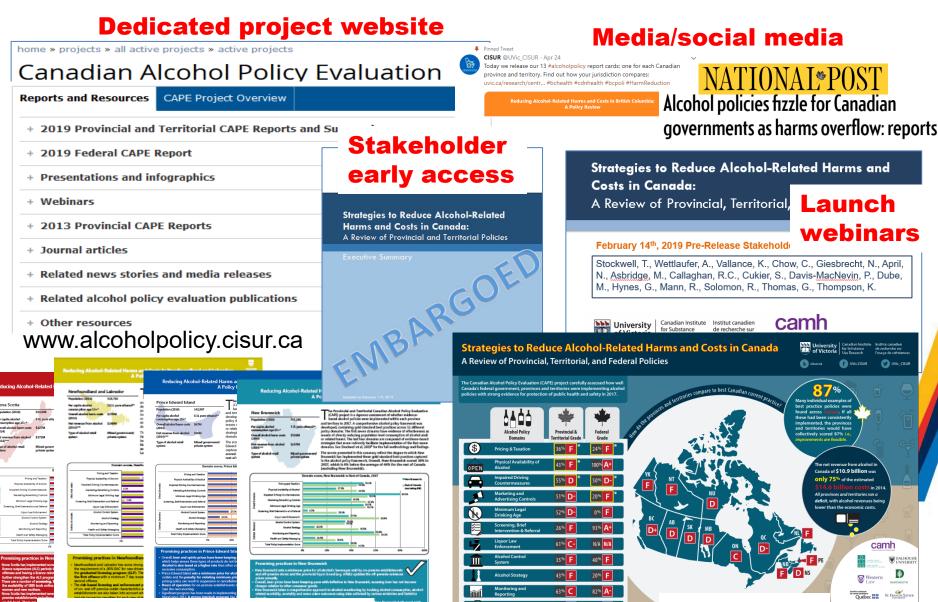
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CAPE 2.0 Knowledge Products



Infographic



3 P/T summary reports

CAPE 2.0 Reports and Publications





Original Paper 6 Full Access

Strategies for engaging policy stakeholders to translate research knowledge into practice more effectively: Lessons learned from the Canadian Alcohol Policy Evaluation project

Kate Vallance, Tim Stockwell, Ashley Wettlaufer, Norman Giesbrecht X, Clifton Chow, Kiffer G. Card, Amanda Farrell-Low.

First published: 27 May 2021 | https://doi.org/10.1111/dar.13313



Alcohol retail privatisation in Canadian provinces between 2012 and 2017. Is decision making oriented to harm reduction?

Norman Giesbrecht Ashley Wettlaufer, Tim Stockwell, Kate Vallance, Clifton Chow, Nicole April, Mark Asbridge, Russell Callaghan, Samantha Cukier, Geoff Hynes, Robert E. Mann, ... See all authors 🗸

First published: 14 December 2020 | https://doi.org/10.1111/dar.13229 | Citations: 2



First p

The Canadian Alcohol Policy Evaluation project: Findings from a review of provincial and territorial alcohol policies

Kate Vallance, Tim Stockwell, Ashley Wettlaufer, Clifton Chow, Norman Giesbrecht X, Nicole April, Mark Asbridge, Russell Callaghan, Samantha Cukier, Geoff Hynes, Robert Mann, ... See all authors v



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Strategies to Reduce Alcohol-Related Harms and Costs in Canada:

A Review of Federal Policies



l'usage de substances















Strategies to Reduce Alcohol-Related Harms and Costs in Canada:

A Review of Provincial and Territorial Policies

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



British Columbia

Net revenue from alcohol

Population (2016) 4,648,494 Per capita alcohol 9.9L pure ethanol** consumption age 15+* Overall alcohol harm costs \$1,936M

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

> e to which British practices captured mbia scored 50% the rest of Canada

ology and findings.

Find links to these documents under the 'CAPE Project Resources' tab at: www.alcoholpolicy.cisur.ca

CAPE 2.0 – Knowledge Dissemination



150+ provincial/territorial stakeholders attended pre-release webinar 250+ stakeholders/community attendees joined public launch webinar event

CAPE reports/resources downloaded 900+ times within first 3 months of release

390+ media articles published about the CAPE results (readership ~7.6M)

Health/regulation/retail stakeholders across 9 provinces/territories requested jurisdiction-specific results webinars (30 completed in total)

Project completion letters and reports sent to 45 existing stakeholder contacts (provincial/territorial deputy ministers) & 75 new government contacts







Alcohol Policy Changes During COVID-19 in Canada



Fariha Alam (CISUR)



Canadian Institute for Substance Use Research



(De)regulatory Trends Across Canada



Ontario to reduce wholesale alcohol prices for bars and restaurants

The Quebec government has agreed on new alcohol laws that will lighten various restaurant, bar and hotel liquor rules.

Ontario liquor laws amended to give consumers more delivery options, help boat operators with licences

News

Liquor delivery to homes now possible in NWT

by Ethan Butterfield October 21, 2021

"Doug Ford is going to make beer cheaper in Ontario," said Kenney. "I'm going to do everything I can to do the same thing in Alberta."

VANCOUVER ISLAND | News

B.C. makes off-sales liquor delivery authorization permanent for restaurants, bars

Loblaw expands beer and wine services following Ontario regulation changes

DOUG FORD WILL FURTHER **EXPAND THE SALE OF BEER AND** WINE INTO CORNER STORES, **GROCERY STORES. AND BOX STORES**

VANCOUVER ISLAND News

B.C. permanently extends liquor store hours

Liquor store industry group concerned by Edmonton 7-Eleven selling alcohol

Ford government extends hours at LCBO, Bee Store, licensed grocers starting Sunday

N.S. Restaurant Leaders Applaud \$1.2-Million Break On Booze

N.B. Liberals promise to modernize liquor

laws, expand where alcohol can be sold

Beer and wine sales begin Thursday on some southern BC Ferries routes

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MONTREAL | News

Quebec restaurants can now sell alcohol through delivery apps after last-minute vote

British Columbia

Restaurants, bars now permanently allowed to buy alcohol at wholesale prices





Summary of Key Alcohol Policy Changes Implemented during Pandemic (March 2020-Present)

				-		
Provinces/Territories	Pricing and Taxation	Physical Availability of Alcohol		Alcohol Control System		Marketing and Advertising
		Hours On- Premises	Hours Off- Premises	Home Delivery/Takeaway from On-Premises Establishments	Ferment on Premise	
British Columbia			Р	Р		
Ontario			Р	Р		
Saskatchewan				Р		
Alberta				Р		
New Brunswick				Р		
Nova Scotia						
Yukon						
Nunavut						
Northwest Territories						
Quebec				Р		
Prince Edward Island				Р		
Manitoba				Р		
Newfoundland and Labrador				Р		
Legend	Policies Relaxed		Policies Relaxed Permanently		Stricter Policies Implemented	

Special thanks to the CCSA Working Group for compiling COVID-19 alcohol policy data across Canada, which can be accessed by contacting policy@ccsa.ca.



Canadian Institute for Substance Use Research Institut canadien de recherche sur l'usage de substances



Examples of Policy Changes to Pricing



S .	Taxation	\$
*	Taxation	P

Province	Policy Changes
British Columbia	In June 2020, restaurants, bars and tourism operators with liquor licensees permitted to purchase beer, wine and spirits at wholesale prices*
Ontario	Reduced wholesale prices on alcohol purchased from LCBO on January 1, 2022 Basic beer tax rate frozen until March 2023 Reduced minimum price of spirits consumed onsite to align with reduced pricing for takeout and deliveries
Nova Scotia	Extends 10% wholesale discount on wine and spirits to include bottled and canned beer, ready-to-drink liquor products and cider in March 2021
Newfoundland and Labrador	Implements wholesale pricing discount for craft breweries, wineries, distilleries and cideries producing 1000 Hectolitres or less









Province	Policy Changes	
British Columbia	Permanently extends liquor store hours	
	 Stores allowed to operate between 7AM- 11PM daily 	
Ontario	 Permanently extends liquor store hours 	
	 Stores allowed to operate between 7AM- 11PM daily 	
Quebec	 Temporarily extends liquor store hours 	
	 Stores allowed to operate between 7AM- 11PM daily 	
Alberta	 On December 2021, 7-Eleven in 	
	Edmonton first to sell alcohol and allow for consumption onsite	
All Provinces + Northwest Territories	 Reduced hours of operation and on-site capacity for on-premises retailers (bars, restaurants) 	







Examples of Policy Changes to Control System



Province	Policy Changes	
All Provinces and Northwest Territories	Home delivery and takeout of alcohol from restaurants and bars with the purchase of food (policy permanent except in Northwest Territories & Nova Scotia)	
Prince Edward Island	Home delivery permitted permanently from agency liquor stores, micro-breweries, wineries, distilleries, ferment-on-premise establishments and restaurants with a package sales license	
Ontario	Policy to allow for curbside pickup of beer, wine, and cider from licensed grocery stores	
Newfoundland and Labrador	Permits ferment on premise operations to bottle beverages for customers that started batches of beer or wine prior to March 2020	

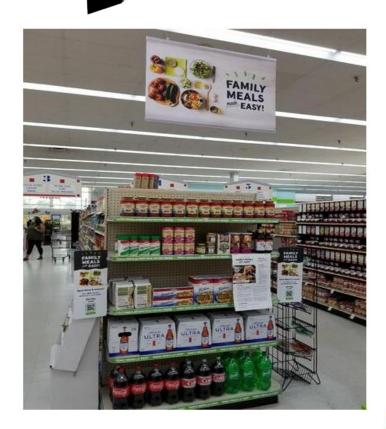




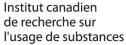


Examples of Policy Change to Marketing & Advertising









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CAPE 3.0 Update & Next Steps



Tim Naimi (CISUR)



Canadian Institute for Substance Use Research Institut canadien de recherche sur l'usage de substances





CAPE 3.0 Update and Next Steps

- CAPE 3.0 very similar to CAPE 2.0
- But unlike the movies...Numbered versions of CAPE just get better and better!!











CAPE 3.0 Project Team



CISUR

Tim Naimi, Co-Investigator

Tim Stockwell, Co-Investigator

Marilou Gagnon, Co-Investigator

Adam Sherk, Co-Investigator

Russell Callaghan, Co-Investigator

Kate Vallance, Research Associate

Amanda Farrell-Low, Communications officer

Fariha Alam, Research Associate

Nicole Vishnevsky, Research Assistant

CAMH

Norman Giesbrecht, Co-Investigator

Kevin Shield, Co-Investigator

Robert Mann, Co-Investigator

Ashley Wettlaufer, Methods Specialist

Alcohol Policy Experts at Institutions Across Canada

Mark Asbridge, Co-Investigator
Dalhousie University,

Jacob Shelley, Co-Investigator, University of Western Ontario

Robert Solomon, Co-Investigator, University of Western Ontario

Kara Thompson, Co-Investigator
St. Francis Xavier University

...as well as additional knowledge use collaborators and partners!



Canadian Institute for Substance Use Research Institut canadien de recherche sur l'usage de substances





CAPE 3.0 Policies/New Directions

- Currently revising 250+ indicators to develop updated CAPE 'rubric' (i.e., scoring system) –
- COVID-related policy changes:
 - New ways to get alcohol: home delivery, curbside pickup, take-away alcohol from bars and restaurants
- Hot topics, new evidence, or both:
 - Minimum pricing, labelling (cancer, calories, std. drinks)
- Policy processes in an era of deregulation:
 - public health input, industry influence







Policy Data Collection, CAPE 3.0

- Same process as CAPE 2.0
- The long winding road ...put meat on the rubric's bone!
- Review of relevant statutes
- Some data acquisition, validation with key govt. stakeholders (e.g., practice-related indicators)







CAPE 3.0 Knowledge Products

- Your input matters! Stakeholder feedback for CAPE 3.0 English: https://bit.ly/CAPEinput French: https://bit.ly/ÉPCA
- Federal-, provincial/territorial-specific 4-page summaries
- **New Ideas:**
 - Summaries by policy domain (e.g., pricing, impaired driving), or individual indicators (e.g., home delivery, minimum prices)
 - Federal, provincial/territorial policy data packages
 - Webinars, topics based on interest from YOU!





CAPE 3.0 Funding & Support





Camh Centre for Addiction and Mental Health

CISUR and CAMH

Social Sciences and **Humanities Research** Council (SSCHR) **Connection Grant** $SSHRC \equiv CRSH$



Agency of Canada

Agence de la santé publique du Canada **Public Health Agency of** Canada (PHAC)



In-kind funding from coinvestigator institutions and the Health Ethics, Law and Policy (HELP) Lab



In-kind support and incredible enthusiasm from knowledge users & government stakeholders

The views and opinions expressed in this presentation are those of the authors alone and do not necessarily represent those of our funders







NEW Communications Strategy: CAPE Community of Practice!

- "The <u>CAPE Community of Practice</u> aims to establish a national alcohol policy community which builds and sustains long-term connections, collaborations, and professional development between stakeholders from a variety of government and non-government sectors with the shared goal of promoting healthy public policy."
- Sign up! https://bit.ly/CoPSignup
- Rejoindre! https://bit.ly/rejoindreCdeP
- Independent of industry influence, involvement
- We want more folks
- We want broader representation, e.g.,: govt. regulators, govt. finance, Indigenous orgs., orgs. representing those with lived experience, Francophone individuals









CAPE LAUNCH PART 1

Questions and Discussion



Please complete our very brief CAPE event feedback form:

https://bit.ly/CAPEevents

Veuillez remplir notre très bref formulaire de commentaires sur l'événement :



PART 2 – CAPE Community of Practice



Amanda Farrell-Low (CISUR)



Canadian Institute for Substance Use Research Institut canadien de recherche sur l'usage de substances





Why start an alcohol community of practice?

- CAPE 1.0 & 2.0 put us in touch with many working in alcohol policy across Canada
- Work often siloed
- Why not create a space for people across jurisdictions and areas of expertise to collaborate, learn from each other, and strengthen alcohol policy?







Our Process of Developing the Community of Practice

- Based on other CISUR models (Managed Alcohol Program Study CoP, Collaborative Community Laboratory on Substance Use and Harm Reduction (Co/Lab) CoP)
- Quite a few internal iterations before now
- What would be useful for advancing policy change or strengthening policy?
- Envision a space for collaboration and learning that is driven by the membership, but supported by the CAPE CoP team and coordinating committee
- Free of industry involvement

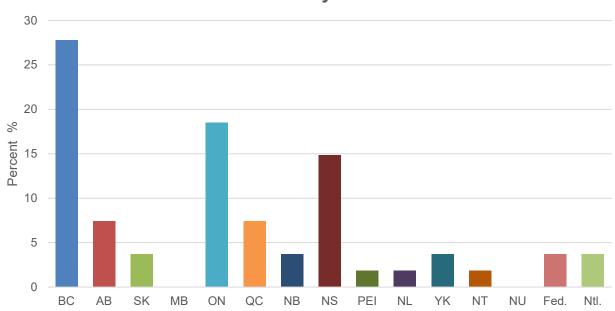






Which Jurisdictions do Community of Practice Members Represent?

CoP Members by Jurisdiction



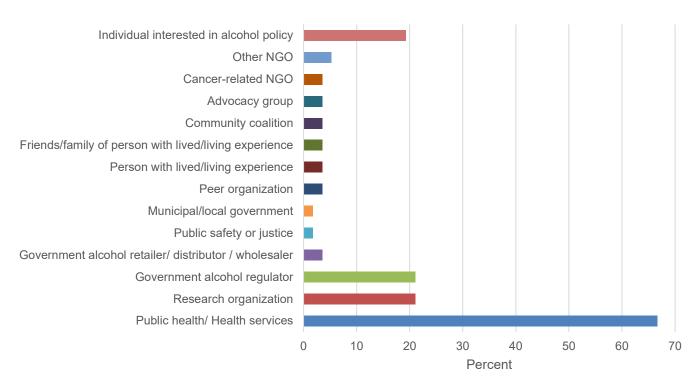






What Organizations do Community of Practice Members Represent?

CoP Members by Affiliation









What Policy Topics are Areas of Interest?

```
programs
                                            privatization
                                                        availability
                       minimum alcohol-use global
       marketing
                          sales Strategy Protecting
                     safety polysubstance harms impaired
                                                       using Warning
           young intertwining information evidence
                                                   context
                                                            age public
                                advancing work education
                  market
                       controls
                                 drinking measures
                                                        peer-led
          inequities Managed
                               Improving
                                           settings self-determined
                    Provincial
                                                            based cancer
                               Interventions
                                             best
            social
labelling issues
                                                     nudging
                                                     increased
   Advertising
                                                                decrease
         women access
                            retail self driving youth regulation industry spaces
                    ahead
pricing
                                                 spaces
                                       Evidence-based ensure POliCY
                 consumption
                            Indigenous
                                       related indirect
                taxation harm
       children
                                     conversations normative health
         Population policies any
                                                   Equity treatment
                            ease accessibilité
reduction SBIR
  Evidence-informed
                                      community safely
                      making
                                                          Labeling
                               know
                    iMUP
                                                     Affordability
                           influence
                                     implementation
                practices
                                            convenience
                                                                           Word It Out
```

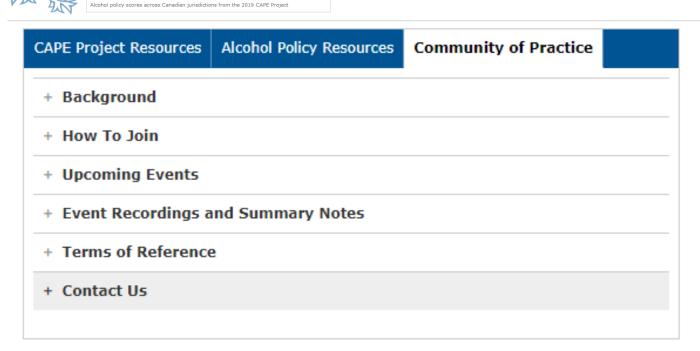








Tour of Resources









Our Vision with Member Input

- Range of events, both CoP only and open to public
- Range of topics and formats (researcher led and stakeholder led)
- 1-2 months between events
- Structure: presentation, discussion, takeaway action items







Our Vision with Member Input

- Materials available for people who can't attend event, in French as much as possible
- Moderated listserv for asking questions, sharing resources and news
- Possible password-protected site for more sensitive documents (is this of interest?)









CAPE LAUNCH PART 2 Community of Practice

Questions and Discussion



Please complete our very brief CAPE event feedback form:

https://bit.ly/CAPEevents

Veuillez remplir notre très bref formulaire de commentaires sur l'événement :



Before you go...

CAPE CoP Website

www.alcoholpolicy.cisur.ca

CAPE 3.0 Input Survey English: https://bit.ly/CAPEinput

French: https://bit.ly/ÉPCA

CAPE CoP Sign-Up Link

English:

https://bit.ly/CoPSignup

French:

https://bit.ly/rejoindreCdeP

CAPE CoP Event Evaluation

English:

https://bit.ly/CAPEevents

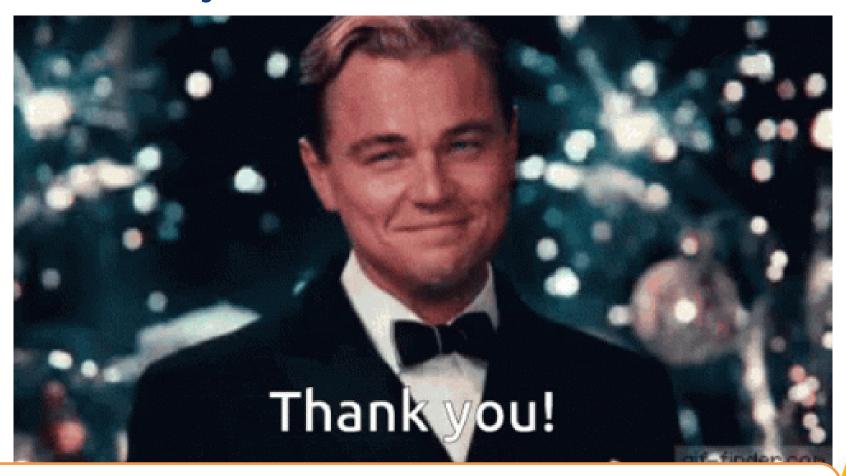
French:







Thank you for Attending our CAPE 3.0 Community of Practice Launch Event!



Please complete our very brief CAPE event feedback form:

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Veuillez remplir notre très bref formulaire de commentaires sur l'événement :