Limiting Alcohol Availability

Restricting consumer access to alcohol is one of the most effective means of reducing harms associated with heavy drinking. Municipal governments can do this (and thus enhance public health in their jurisdictions) in three ways.

1. Limit alcohol outlet density

Higher outlet density means higher rates of alcohol consumption and increased rates of violence and other harms.

Municipal governments can

☑ Strengthen local zoning regulations to supplement provincial government limits in order to
- avoid clustering of outlets and avert intense competition among them
- reduce or avoid congestion in and around outlets and lower the likelihood of altercations

☑ Evaluate every licence application and contest those that could adversely impact a neighbourhood
- review the Liquor Control and Licensing Branch (LCLB) document, *Role of Local Government and First Nations in the Provincial Liquor Licensing Process*
- provide resolutions to the LCLB regarding specific issues and concerns around particular applications

☑ Promote health by ensuring the community offers alternatives in entertainment, recreation and socializing
- assess local areas for amount and quality of venues that provide non-drinking forms of leisure activity

Some questions to consider

? Do our present zoning laws differentiate between types of liquor operations (e.g., retail stores, liquor-primary, food-primary)?

? Do we require applicants to submit a plan addressing business strategy, security provisions, noise management?

? Do our present regulations adequately limit the size of premises and numbers of patrons?

? How will the proximity of licensed stores or on-premise establishments bear on a particular area or neighbourhood? Has an impact study been conducted in regard to a new application?

Research shows that higher outlet density makes for elevated rates of excessive alcohol consumption and increased levels of violence and other harms. Particularly with the bunching of on-premise establishments – sometimes compounded by price wars among competitive business owners – the result can readily be that of more people causing or falling victim to accidents, fights, vandalism, etc. (Livingston et al., 2007; Campbell et al., 2009; Popova et al., 2009).

In BC, the Liquor Control and Licensing Branch (LCLB) enforces regulations aimed at limiting off-premise outlet clustering. For example, the minimum distance requirement between licensed private retail stores is 0.5 km (or 10 km for rural agency stores). A moratorium on new private stores was imposed in 2006 (following their rapid proliferation after being allowed in 2002). When it comes to on-premise outlets, the LCLB regulates the service industry though the issuing of two kinds of licences: liquor-primary licences (for bars, pubs and nightclubs) and food-primary licences (for cafes and restaurants).

> Some local governments in BC have strict zoning requirements that limit the concentration of liquor stores and other types of alcohol outlets. In many cases, local government zoning regulations are probably more important influences on outlet density than provincial restrictions, especially for bars and restaurants that serve alcohol.
>
> Source: Perry Kendall, *Report from the Provincial Health Officer*, 2008.

2. Confine hours of service

Extended late-night hours encourage heavier alcohol use and result in increased violence and harm in and around alcohol-serving establishments.

Municipal governments can

☑ Maintain or reinstate a 2 a.m. closure for on-premise licensed establishments

- review current regulations regarding hours of operation and take steps to implement desired changes using provisions made through the LCLB

☑ Consider requirement of earlier closure (e.g., 12 a.m.) on Sunday through Thursday

- conduct a needs assessment that includes consultation with stakeholders
- follow the appropriate process to make earlier closing official (if it is desirable)

☑ Take into account neighbourhood features and factors

- create a checklist of factors to evaluate neighbourhoods when judging feasibility of hours of operation

☑ Seek voluntary agreement on rotating staggered hours of closure

- talk with liquor-primary operators collectively about the advantages, obstacles and implementation of rotating staggered closing times so that not all are open late every night

Some questions to consider

? Do the economic and social benefits of later business hours outweigh the potential harm to patrons, neighbourhood residents, and the community at large?

? Would expansion of hours answer legitimate needs (e.g., limited opportunity to frequent an establishment owing to work schedule) so much as it would be conducive to unhealthy lifestyles and problems (e.g., personal, relational, professional) associated with those patterns?

? Are hours of business for a given applicant or already-approved establishment really appropriate to the immediate surroundings of that facility?

? Are food-primary establishments accorded extended night hours going to continue to function as food-primary? Or will they become illegitimate liquor-primary operations during those hours?

A number of strong studies link extended late-night hours with heavier alcohol use and, consequently, increased violence and harm in and around alcohol-serving establishments (Stockwell & Chikritzhs, 2009; Popova et al., 2009). Not only do patrons themselves and neighbourhood residents suffer as a result of the increase in excessive drinking, but extra burden is put on law enforcement, transportation services and primary healthcare resources (Hahn et al., 2010; Middleton et al., 2010).

In 2002, the Liquor Control and Licensing Act was amended to permit establishments to stay open until 4 a.m., subject to local government input and LCLB approval. In response, some localities approved late hours for alcohol-serving outlets. However, after experiencing an increase in alcohol-related problems, some municipalities requested that the LCLB roll back business hours. In 2007, provincial policy changed to allow for a roll-back, provided the local government has (i) asked the LCLB general manager for closure no earlier than 2 a.m., (ii) passed a valid bylaw requiring licensees to close at an earlier time, and (iii) provided affected licensees with an opportunity to make submissions in the bylaw approval process. As a result, some BC municipalities have passed such bylaws, and the LCLB has amended the licences accordingly (Kendall, 2008).

3. Limit alcohol-allowed public events

Questioning the need for alcohol service at certain events can help prevent alcohol-related incidents and increase public safety.

Municipal governments can

- ☑ Develop a civic alcohol policy

  - ▪ review past local experience of (and effectiveness in) managing alcohol-permitted events
  - ▪ examine provincial regulations pertaining to special occasion licences (public and private) and management policies produced by other municipalities
  - ▪ collect adequate expression of collective and individual community stakeholder opinion around allowance or not of drinking in connection with municipally-run facilities and events
  - ▪ craft a municipal alcohol policy that draws on the MAP model developed in Ontario
  - ▪ lay out a strategy for implementation, enforcement and refinement of the policy
  - ▪ be consistent in applying the values incorporated in the policy to particular applications

Some questions to consider

- ? Would drinking be unadvisable or obviously out of place in view of the anticipated attendees at an event (e.g., an event which focuses on family, or on children in particular)?
- ? Would drinking at a given event require more resources to manage it than event hosts can provide?
- ? Would permission to drink add significantly to the ambience of an event or jeopardize its overall appeal?
- ? Is drinking widely misperceived by local residents as a necessary, indispensable ingredient to success for a community event? Or is it largely recognized as a non-essential option which may add positive entertainment value for some? Which perspective will its inclusion reinforce?

While provincial bodies are responsible for issuing special occasion licences, regulations stipulate that local government and police approval is also required for all public special events.

Steps to Success
How is Our Community Doing?

- ❑ We have implemented a reasonable restriction on density of local alcohol outlets
- ❑ We regularly enforce general requirements for businesses in areas such as zoning, parking, noise bylaws, building permits and bylaws, business licensing, health and food safety, fire safety
- ❑ We have specific criteria for approval of new or amended applications for liquor licences that consider location, proximity to other public facilities, person capacity and hours of liquor service, traffic, noise, parking, population density and trends, relevant social-economic considerations, and impact on community
- ❑ We gather views of local residents and businesses in a fair and equitable manner, ensuring that accurate and adequate information is available to all stakeholders, and we make decisions in a transparent way
- ❑ We file resolutions reflecting the outcome of our community review with the LCLB general manager concerning every application in our community
- ❑ We consider provincial regulations, demand on services and neighbourhood needs when considering hours of business with an eye to cutting down on rather than increasing consumption-related harms
- ❑ We have developed a policy with specific criteria related to appropriateness and management capacity that must be met before approval for alcohol service can be given for a particular event

Resource links:

Liquor Control and Licensing Branch (LCLB). Available at: www.hsd.gov.bc.ca/lclb/branch/index.htm

What everyone should know about BC's liquor laws. Available at: www.hsd.gov.bc.ca/lclb/LLinBC/basics.htm

Role of Local Government and First Nations in the Provincial Liquor Licensing Process. Available at: www.hsd.gov.bc.ca/lclb/docs-forms/PSSG-LocalGovt-Fst-Nation.pdf

Municipal Alcohol Policy Guide. Order form available at: http://orfa.com/orfaoldweb/MAP/MAP%20Guide.pdf

Reference material:

Babor, T., Caetano, R., Casswell, S., Edwards, G., Giesbrecht, N., Graham, K. et al. (2010). *Alcohol: No ordinary commodity. Research and public policy* (2nd ed.) (pp.127-146). New York: Oxford.

Campbell, C. A., Hahn, R.A., Elder, R., Brewer, R., Chattopadhyay, S., Fielding, J. et al. (2009). The effectiveness of limiting alcohol outlet density as a means of reducing excessive alcohol consumption and alcohol-related harms. *American Journal of Preventive Medicine*, 37(6), 556-569.

Hahn, R.A., Kuzara, J.L., Elder, R., Brewer, R., Chattopadhyay, S., Fielding, J. et al. (2010). Effectiveness of policies restricting hours of alcohol sales in preventing excessive alcohol consumption and related harms. *American Journal of Preventive Medicine*, 39(6), 590-604.

Kendall, P.R.W. (2008). *Public health approach to alcohol policy: An updated report from the Provincial Health Officer.* Government of British Columbia, Ministry of Healthy Living and Sport. Available at: www.health.gov.bc.ca/library/publications/year/2008/alcoholpolicyreview.pdf

Livingston, M., Chikritzhs, T. & Room, R. (2007). Harm Reduction Digest 38: Changing the density of alcohol outlets to reduce alcohol-related problems. *Drug and Alcohol Review*, 26(5), 557-566.

Middleton, J.C., Hahn, R.A., Kuzara, J.L., Elder, R., Brewer, R., Chattopadhyay, S. et al. (2010). Effectiveness of policies maintaining or restricting days of alcohol sales on excessive alcohol consumption and related harms. *American Journal of Preventive Medicine*, 39(6), 575-589.

Popova, S., Giesbrecht, N., Bekmuradov, D. & Patra, J. (2009). Hours and days of sale and density of alcohol outlets: Impacts of alcohol consumption and damage: a systematic review. *Alcohol and Alcoholism*, 44(5), 500-516.

Stockwell, T. & Chikritzhs, T. (2009). Do relaxed trading hours for bars and clubs mean more relaxed drinking? A review of international research on the impact of changes to permitted hours of drinking. *Crime Prevention and Community Safety*, 11(3), 153-170.

University of Victoria | Centre for Addictions Research of BC

Ensuring Safer Drinking Environments

Some of the key factors in addressing alcohol-related harm involve "context" or the conditions in which alcohol is being consumed (i.e., where, when, how and why alcohol is being served). In two important ways, municipal governments can help improve the safety conditions of public drinking environments.

1. Regulate public special-occasion events

Without careful management of public festivities that include drinking, these celebrations can lead to various harms associated with excessive consumption. Provincial regulations should be augmented by local initiatives in an effort to better protect people in attendance from getting sick, having an accident, experiencing violence or causing trouble for others.

Municipal governments can

- ☑ Get familiar with BC regulations pertaining to special occasion licences (public and private)
    - ▪ learn the rules regarding liquor distribution
    - ▪ understand the *Serving It Right* program
- ☑ Craft a special events policy regarding alcohol
    - ▪ list community venues and events where alcohol can (or cannot) be served
    - ▪ outline management practices that must be followed prior to and during an event
    - ▪ specify prevention strategies to be employed in conjunction with an alcohol-serving event
    - ▪ describe enforcement procedures and penalties for non-compliance
    - ▪ provide details regarding signage required to accent safety measures
- ☑ Develop a plan for strengthening community support for the local policy and for evaluating its ongoing effectiveness
- ☑ Ensure hosts of special occasions are aware of their policy and licensing obligations
    - ▪ develop and distribute a policy handbook
- ☑ Improve quality control at alcohol-serving events
    - ▪ require that an authorized municipal representative be present at a special event to monitor compliance, administer enforcement and report results

> Penticton learned a lot from Wakefest 2007, where event-goers went on a free-for-all at local nightclubs, leading to 150 people being arrested and more than 200 people receiving liquor-related tickets. Penticton's municipal government made a series of in-depth changes to their alcohol policy in preparation for hosting Wakefest in 2008. These changes included putting $50,000 toward additional policing during the event, scheduling the event at the end of June instead of during busy summer months, and shutting down festivities at 7:00 pm each day instead of at 10:00 pm.
>
> Source: *Vancouver Province.* March 13, 2008.

Some questions to consider

?   Has the event host fulfilled all commitments for necessary arrangements beforehand?

?   Are any additional precautionary measures appropriate for a given event?

?   Is there enough event management staff to preside over all alcohol-related proceedings? Are they adequately prepared to deal with alcohol-related issues?

?   Are stipulated harm prevention strategies in place?

The most rigorous model for implementing special events regulations can be found in the Municipal Alcohol Policy (MAP) program developed in Ontario. A guide has been drawn up to facilitate its adoption by communities. It can be ordered from ORFA (Ontario Recreational Facilities Association), a partner with CAMH (Centre for Addiction and Mental Health) in constructing and publishing that tool. The most recent report from BC's Provincial Health Officer recommends that the MAP thrust be considered for application in BC (Kendall, 2008, pp. 39, 47).

2. Improve on-premise venues

The risk of harm to patrons increases in alcohol-serving establishments that lack safety regulations and feature few prevention measures. Reducing harm, therefore, may require improving the conditions of alcohol-serving outlets such as bars, pubs, nightclubs and restaurants.

Municipal governments can

☑ Make sure design standards are rigorous enough to reduce the likelihood of alcohol-related harm

- interiors are well-lit, well-ventilated, with clear accessible pathways and exits to avoid congestion
- washrooms are adequately sized and clean
- comfortable seating arranged on multiple levels to facilitate monitoring by staff and customers
- tempered glassware
- exteriors have ample lighting, security cameras, and clean clear sidewalk space that provides enough room for relaxed line-ups

☑ Collaborate with alcohol-serving establishments

- develop mutual agreements on a common code of practice and a commitment to shared public safety strategies among outlets
- encourage outlets to provide high quality entertainment, suitable food options, alternative beverages (low-strength beer, soft drinks and water) at lower cost, free non-alcoholic drinks for designated drivers, and safe-ride assistance
- encourage and support on-premise establishments in implementing the *Safer Bars* program, which can help staff diffuse volatile situations and avert violence
- seek agreement on how increased visible police presence might help to enhance security at certain time slots or in special situations

☑ Collaborate with provincial inspectors and local police

- develop a plan to help inspectors and local police ensure that service standards and other requirements (e.g., not allowing overcrowding) are met in an ongoing manner
- consider using police-sanctioned "pseudo-patrons" to check adherence to prohibitions concerning minors

- work together with police, emergency personnel and LCLB inspectors to establish joint action in collection, sharing and follow-up of information regarding place of "last drink" when addressing alcohol-related risks and damages (e.g., driving while impaired or violent incidents)

Some questions to consider

? What has our municipality done to encourage licensed establishments to mutually assume greater responsibility for providing safer drinking environments?

? How has our municipality shown leadership in working with other stakeholders (e.g., police, health, LCLB) to respond to alcohol-related episodes in the community?

A substantial measure to lower the likelihood of harm in alcohol-serving outlets is the provincial imposition of the responsible beverage service program *Serving it Right*. The primary focus of the program is to discourage sales and service to minors, and to those either approaching or already at a stage of intoxication. It also aims to guide staff further in fulfilling duty of care to impaired patrons. Besides a training component for staff, the program provides direction for management, since managerial support is crucial for continuing staff compliance with service standards. Even more decisive is external monitoring and enforcement (Stockwell, 2010; Babor et al., 2010).

The LCLB administers the program through the agency of *go2* (the human resources association for BC tourism) and conducts regular inspections of existing licensed premises, with a published process for dealing with alleged contraventions (of service and other obligations) and exercising enforcement penalties. This arrangement allows local police and municipal governments to register concerns about non-compliance with regional inspectors and be part of a meeting speaking to that complaint (if one is held at a stage before a more formal enforcement hearing).

> Grande Prairie's Safe City Nights Program is based on the idea that increasing police presence on certain occasions saves money and lives in the long run. A pilot program in 2004, Safe City Nights was so successful that it is now a permanent tool used to reduce inappropriate behaviours in and around Grande Prairie's late-night bars and night clubs.
>
> Source: City of Grande Prairie. *2005 State of the City Address.*

Steps to Success
How is Our Community Doing?

☐ We have a well-designed special events policy that is adhered to for all events at which alcohol is served

☐ Our design standards for facilities serving alcohol incorporate all features recognized as generally conducive to a safer drinking experience

☐ We do regular enforcement checks to monitor compliance with service standards

☐ Service staff regularly participate in on-premise violence prevention training

☐ We have developed voluntary agreements among licensees to publicly commit to specific measures that contribute to a safer experience in their premises

☐ A partnership of relevant public services exists, with the goal of working together to prevent and respond to incidents of harm arising from drinking in licensed establishments

Resource links:

Liquor Control and Licensing Branch (LCLB). Available at: www.hsd.gov.bc.ca/lclb/branch/index.htm

What everyone should know about BC's liquor laws. Available at: www.hsd.gov.bc.ca/lclb/LLinBC/basics.htm

Role of Local Government and First Nations in the Provincial Liquor Licensing Process. Available at: www.hsd.gov.bc.ca/lclb/docs-forms/PSSG-LocalGovt-Fst-Nation.pdf

Special occasion licence. Information available at: www.hsd.gov.bc.ca/lclb/apply/special/index.htm

Municipal Alcohol Policy Guide. Order form available at: http://orfa.com/orfaoldweb/MAP/MAP%20Guide.pdf

Serving it Right. Information available at: www.hsd.gov.bc.ca/lclb/LLinBC/serving_it_right.htm. Program site: www.servingitright.com

Safer Bars. Information available at: www.camh.net/Publications/CAMH_Publications/safer_bars_program.html

Reference material:

Babor, T., Caetano, R., Casswell, S., Edwards, G., Giesbrecht, N., Graham, K. et al. (2010). *Alcohol: No ordinary commodity. Research and public policy* (2nd ed.) (pp. 147-163). New York: Oxford.

BC Partners for Mental Health and Addictions Information (2009). *Tips for a Safe Night Out*. Available at: www.heretohelp.bc.ca/sites/default/files/images/safenightout.pdf

Graham, K. & Homel, R. (2008). *Raising the Bar: Preventing Aggression in and Around Bars, Pubs and Clubs* (pp. 197-205). UK: Willan Publishing.

Graham, K., Osgood, D.W., Zibrowski, E., Purcell, J., Gliksman, L., Leonard, K. et al. (2004). The effect of the Safer Bars program on physical aggression in bars: Results of a randomized control trial. *Drug and Alcohol Review*, 23(1), 31-41.

Kendall, P.R.W. (2008). *Public health approach to alcohol policy: An updated report from the Provincial Health Officer*. Government of British Columbia, Ministry of Healthy Living and Sport. Available at: www.health.gov.bc.ca/library/publications/year/2008/alcoholpolicyreview.pdf

Stockwell, T. (2010). *Operator and regulatory best practices in the reduction of violence in and around licensed premises: A review of Australian and Canadian research*. Centre for Addictions Research of BC, University of Victoria. Available at: www.carbc.ca/Portals/0/PropertyAgent/2111/Files/29/Alcohol&Violence1004.pdf

University of Victoria | Centre for Addictions Research of BC

Reducing Drinking and Driving

While strong, broad policy stances at the federal and provincial levels are most critical for lowering drinking and driving rates, local governments can play an important two-fold role in strengthening community protection and fostering collective responsibility to further reduce harm.

1. Enhance enforcement

Civic officials can make a significant contribution to the success of legislative attempts to restrain people from driving while affected by alcohol.

Municipal governments can

☑ Set priorities in resource allotment for enforcement activities
- increase patrols for impaired driving
- increase the number and frequency of sobriety checkpoints

☑ Ensure the public is clear about what can and will happen if they drink and drive
- communicate the strong possibility of being apprehended, the severity of penalties, and the swiftness with which penalties are applied

☑ Limit alcohol availability and improve safety of drinking environments (see resources 1 & 2 for more details)

Some questions to consider

? What message does the public get about how seriously countermeasures for drinking and driving are taken by community leaders?

? What message does area law enforcement get from City Hall about the level of support for their role in applying regulations that help to protect citizens from serious or fatal injury?

? How do local officials best communicate to the public the degree and effectiveness of enforcement while indicating the relative minority of people who drink and drive?

Although substantial progress has been made on the drinking and driving front over an extended period of time, statistics show a levelling off in rates of decline, and even some indication of a slight reversal (Kendall, 2008; Purssell et al., 2009). Driver impairment remains a significant contributor to injurious and fatal car crashes, as well as to harmful boat- and snowmobile-related accidents.

Various alcohol-impaired driving initiatives fall under provincial jurisdiction. These include a minimum legal drinking age, graduated licensing, sobriety checkpoints, administrative suspension or revocation for those close to the legal BAC limit, and an ignition interlock program.

The BAC limit itself is defined by federal legislation, which also has the authority to enact random breath testing. This measure, if introduced, would be very worthy of municipal backing to enable routine implementation.

Visibly consistent enforcement of laws aimed at discouraging drinking and driving (including penalty for alcohol-impaired performance) can influence people to align with healthier behaviour. Local governments can encourage compliance with these regulations by raising the profile of such efforts, reinforcing the fact that the odds of offenders being detected are far from negligible, and that punitive consequences will be imposed promptly.

2. Shape public attitudes

Local authorities can lead their communities toward fuller endorsement of healthier stances regarding impaired driving.

Municipal governments can

- ☑ Plan and promote safe transportation to and from drinking establishments
    - assess how public transit might better serve on-premise locations and make necessary adjustments
    - encourage licensees to supply ride services, promote designated-driver practices, publicize bus and taxi options, and persuade patrons to call family/friends for assistance when needed
    - support and solicit sponsorship for seasonal services such as Nez Rouge (Operation Red Nose)
- ☑ Promote social norms against drinking and driving
    - promote mass media campaigns that encourage social responsibility (in terms of individual behaviour and reporting violations) and healthier shared norms
    - maintain restrictions on alcohol advertising and sponsorships (see resource 4 in this set)
    - encourage local businesses to reinforce to their employees the danger and unacceptability of driving after drinking
    - support schools in supplying traffic safety education that includes interactive skill development in resisting pressures to drink and drive (or ride with an impaired driver) and in engaging parents
    - develop and implement strategies for strengthening community (see resource 5 in this set)
- ☑ Collaborate with local health and social service providers to encourage screening and brief intervention for risky alcohol use and improve further care for people with alcohol-related problems
    - include brief intervention specifically related to impaired driving and remedial skill support to prevent recidivism among those apprehended for driving while impaired

Some questions to consider

- ? What avenues and actions can we explore to feature and increase uptake of safer ride alternatives?
- ? What partnerships have we formed and what strategies are we implementing to discourage drinking and driving?
- ? How well are we contrasting the acceptability of moderate social drinking and the unacceptability of impaired driving?
- ? Are we clearly conveying key messages about drinking and driving issues, (e.g., that even modest amounts of alcohol impair, that most of us don't drive under the influence, that we are all affected by those who do drink and drive, that we all have the opportunity to help make a positive difference)?
- ? How well are we appealing to constructive capacity in individuals and within the community rather than simply playing on fear?

Alternative transport promotion and provision is a challenge. Extra incentives (e.g., free non-alcoholic beverages) need to be offered to designated drivers to help prompt abstaining rather than relative moderation. Increased presence of security personnel may be required to encourage more people to use public transit.

Achieving public buy-in on active shared vigilance against impaired driving is a major undertaking that requires patient effort on the part of a local government and fellow stakeholders. Public support for protective measures is there and can be made firmer.

Mass media campaigns conducted with clear focus and strong exposure, whether drawing attention to legal initiatives to deter impaired driving or raising the consciousness of its personal and social costs and inviting participation in actions that will discourage it, can foster further approval of countermeasures. Social norms marketing should seek to undermine inflated impressions of common acceptance for drinking and driving by highlighting the substantial proportion of the public that does not condone it. In order to correct perception and encourage alignment with the actual norm, initiatives need to be sustained, conspicuous, credible (substantiated by solid survey), concise, positive in accent and consistent.

Communities that engage in multi-component strategies that combine enhanced enforcement and educational media advocacy can expect to see a reduction in occurrence of impaired driving and its harmful consequences.

OPERATION LOOKOUT® is a poster campaign that encourages the public to take action against drinking and driving by reporting impaired drivers. Developed by Against Drunk Driving in conjunction with Peel Regional Police, OPERATION LOOKOUT® is one of the major anti-drinking and driving programs in North America. Currently, there are 28 licensed OPERATION LOOKOUT® communities across Ontario.

Steps to Success
How is Our Community Doing?

- ❑ We engage in various efforts to enhance the experience of "community," recognizing its value in reducing the occurrence and toll of impaired driving

- ❑ We allocate adequate resources to enable regular and sufficient traffic enforcement to discourage people from presuming there is little possibility of being apprehended for drinking and driving

- ❑ We make sure infractions against alcohol regulations are promptly processed

- ❑ We have optimized our transportation systems and promote safe alternatives to and from licensed premises

- ❑ We have civic leaders whose public discourse and personal conduct reflects rejection of impaired driving

- ❑ We collaborate with a wide variety of stakeholders in encouraging public opinion and collective action in opposing driving after drinking

- ❑ We help our constituency realize that we all have a part to play in addressing this threat to our health and safety

Resource links:

Arrive Alive, Drink Sober (Ontario Community Council on Impaired Driving). Available at: www.arrivealive.org

Office of the Superintendent of Motor Vehicles. Available at: www.pssg.gov.bc.ca/osmv/impaired-driving/index.htm

Drinking and driving (ICBC). Available at: www.icbc.com/road-safety/safer-drivers/drinking-driving

Mothers Against Drunk Driving. Available at: www.madd.ca

Reference material:

Babor, T., Caetano, R., Casswell, S., Edwards, G., Giesbrecht, N., Graham, K. et al. (2010). *Alcohol: No ordinary commodity. Research and public policy* (2nd ed.) (pp. 165-183). New York: Oxford.

Elder, R.W., Shults, R.A., Sleet, D.A., Nichols, J.L., Thompson, R.S., Rajab, W. et al. (2004). Effectiveness of mass media campaigns for reducing drinking and driving and alcohol-involved crashes: A systematic review. *American Journal of Preventive Medicine*, 27(1), 57-65.

Global Road Safety Partnership (2007). *Drinking and Driving: A road safety manual for decision-makers and practitioners.* Geneva: Global Road Safety Partnership. Available at: www.grsproadsafety.org/themes/default/pdfs/Drinking%20Driving%20Manual.pdf

Grube, J.W. & Stewart, K. (2004). Preventing impaired driving using alcohol policy. *Traffic Injury Prevention*, 5(3), 199-207.

Howat, P., Sleet, D., Elder, R. & Maycock, B. (2004). Preventing alcohol-related traffic injury: A health promotion approach. *Traffic Injury Prevention*, 5(3), 208-219.

Ogden, E.J.D. & Moskowitz, H. (2004). Effects of alcohol and other drugs on driver performance. *Traffic Injury Prevention*, 5(3), 185-198.

Perkins, H.W., Linkenbach, J.W., Lewis, M.A. & Neighbors, C. (2010). Effectiveness of social norms media marketing in reducing drinking and driving: A statewide campaign. *Addictive Behaviors*, 35(10), 866-874.

Purssell, R., Solomon, R. & Chamberlain, E. (2009). Random breath testing: A needed and effective measure to prevent impaired driving fatalities. *BC Medical Journal*, 51(10), 446-447.

Shults, R.A., Elder, R.W., Nichols, J.L., Sleet, D.A., Compton, R., Chattopadyay, S.K. et al. (2009). Effectiveness of multicomponent programs with community mobilization for reducing alcohol-impaired driving. *American Journal of Preventive Medicine*, 37(4), 360-371.

Shults, R.A., Elder, R.W., Sleet, D.A., Nichols, J.L., Alao, M.O., Carande-Kulis, V.G. et al. (2001). Reviews of evidence regarding interventions to reduce alcohol-impaired driving. *American Journal of Preventive Medicine*, 21(4S), 66-88.

University of Victoria | Centre for Addictions Research of BC

Limiting Alcohol Advertising

Promotion of alcohol through advertising and sponsorships leads to increased consumption and added toll on public well-being. Communities can take action to mitigate this adverse impact.

1. Pursue local regulation

Municipal governments can

- ☑ Limit local advertising
    - impose constraints on the number of approved advertising locations
    - limit overall amount of advertising
    - define maximum size of signage
    - define appropriate content
- ☑ Approve and apply restrictions on civic events
    - limit sponsorship by alcohol industry interests
    - reduce publicity that draws attention to drinking opportunities
- ☑ Discourage "cheaper alcohol" sales
    - encourage drinking establishments to avoid offering drink deals (e.g., discounts on certain days/times, lower prices for larger-sized servings)

Some questions to consider

? Do we recognize the alcohol industry as contributing to the culture and economy of the community, but also recognize the need to limit marketing in view of the potential for harm?

? What impression does our current stance on advertising give the public? That alcoholic beverages are widely and readily available, hugely popular, a central feature of social interaction and a care-free commodity? Or that alcohol is a legitimate contributor to festivity (though not indispensible for it) but also a drug that must be managed with care?

? Do we enforce Liquor Control and Licensing Branch (LCLB) requirements on local advertising, supplemented by demands reflecting our concern to give drinking a modest, not major, profile?

? Do we have a shared sense of public responsibility to discourage excessive consumption?

Marketing has a strong impact on alcohol consumption. Greater exposure to alcohol promotion (including advertising) increases the likelihood of initiation and heavier drinking, among youth in particular (Anderson et al., 2009; Hastings et al., 2005; Collins et al., 2007). Studies show that the provision of cheaper alcohol attracts consumers and leads to faster, heavier drinking and, consequently, elevated harms. An appeal to retail outlets to reject such marketing (and perhaps also align with other safety-supporting measures) should indicate how such a stance can enhance the profile of their operation as one where patrons drink sensibly and are unlikely to engage in behaviour that disrupts or harms others.

2. Support counter-advertising

Municipal governments can

- ☑ Promote a balanced outlook on drinking
  - avoid messaging that gives the impression drinking is more common and popular than it actually is
  - resist coming across as averse to alcohol (demonizing it can unwittingly make it more attractive)
  - avoid being so information-heavy as to seem humourless, dull and boring
  - reject a simplistic stance on questions that suggests arbitrariness and artificiality
  - avoid scare tactics (playing on fear can desensitize the audience, hinder reflection and reduce efficacy)

- ☑ Reach out to young people
  - develop communication products that engage youth by demonstrating care and concern for their health, appreciation of their culture and respect for their capacity to make good choices
  - recognize them as contributing participants in community life

- ☑ Use a variety of communication tools including traditional and new media

Some questions to consider

- ? Have we been able to strike a balance in our messaging around alcohol, reflecting both an appreciation for social benefits and concerns about harms?

- ? Have we addressed common expectancies, motivations and situational prompters for drinking, and shown awareness of issues around them? Have we proposed realistic alternatives?

- ? Have we offered considerations favouring non-use and protective behavioural strategies that serve to reduce risk and experience of harm?

- ? Do we consciously try to undermine a common but artificial and unhelpful dissociation between what is really true and what is truly fun in connection with drinking?

Locally financed counter-promotion will always be at a real disadvantage to marketing conducted by the alcohol industry in view of the enormous disparity in available funding. The industry's affluence has allowed it to do sophisticated research and analysis on factors that deliver appeal and influence behaviour.

Various streams of messaging that run in the opposite direction to the huge waves of promotion endorsing use of alcohol will not off-set the full force of those tidal currents. But persistent strategic communication that aims at being an engaging reality check can at least serve as a meaningful counterpoint. Initiatives to encourage critical reflection on commercial "selling" tactics can be useful too (as opposed to thinly disguised militant vendettas that simply condemn rather than illuminate and motivate).

3. Appeal for healthier alcohol advertising practices in the wider context

This can be done by seeking more consistent application of existing general codes and by supporting adoption of more robust regulations.

Municipal governments can

- ☑ Report problems to Advertising Standards Canada (ASC)
  - file complaints about advertising examples that fall short of CRTC and BC code standards, particularly those that make drinking attractive to underaged youth, suggest enhanced status by drinking the product or imply alcohol is necessary to enjoy an event

☑ Request new national standards related to

- volume or quantity of advertisements allowed

- places and types of media in which advertising can be carried out

- time slots in which it is permitted on television (in order to cut down on youth exposure)

- content that is permissible in promoting the product

- health messages that need to be included

- internet marketing of alcohol under the auspices of Canadian-based operations

> France's Évin Law, introduced in 1991, prohibits alcohol advertising in all media apart from specified exemptions (which exceptions do not include television, cinemas and sponsorships of cultural and sports events). Print, radio and billboard promotion is permitted under certain conditions and confined to information about the product (e.g., origin, concentration of alcohol, means of production). Instead of appealing images of drinkers and drinking environments, a health warning about the danger of misuse is attached.

Some questions to consider

? Do we encourage consumers to question alcohol sales pitches?

? Have we expressed dissatisfaction with the pervasiveness of alcohol advertising, given the harmful consequences of such massive exposure?

? Have we protested the largely one-sided nature of alcohol advertising by producers, which gives little recognition of harmful outcomes for various inappropriate patterns of use (not only those associated with severe dependence)?

Media advertising is subject to federal stipulations, with provincial regulations also applying to various forms of alcohol promotion. There is opportunity at both federal and provincial levels for public complaint to be registered over perceived non-compliance with official standards, though there are limitations in access to information about the extent of such complaints and enforcement response to them (Kendall, 2008). At the national level, alcohol advertising generates a sizable portion of complaints, and though most may not be upheld, they often prompt sponsors to withdraw offending ads (NASWG, 2007).

National regulations in Canada do not address the issue of amount of alcohol advertising allowable, but there is precedent in other jurisdictions for more encompassing restrictions, and precedent in the tobacco domain to indicate the value of more rigorous measures on marketing.

Steps to Success
How is Our Community Doing?

❑ We have strong regulations limiting public alcohol advertising around our community

❑ We have a policy restricting alcohol-interest sponsorship of local civic events

❑ We have a consensus among our on-premise suppliers not to offer price specials on alcoholic drinks

❑ We collaborate with a variety of stakeholders in promoting messaging that engages the public about the risks associated with alcohol use and encourages collective and individual responsibility in avoiding harm

❑ We provide leadership in protesting the problematic promotion of alcohol and seeking healthier marketing practices

Resource links

Liquor advertising (LCLB). Information available at: www.hsd.gov.bc.ca/lclb/LLinBC/advertising.htm

Code for Broadcast Advertising of Alcoholic Beverages. www.crtc.gc.ca/eng/GENERAL/CODES/ALCOHOL.HTM

Advertising Standards Canada. Available at: www.adstandards.com

ASC Alcoholic Beverage Advertising Clearance Guide. Available at: www.adstandards.com/en/Clearance/AlcoholicBeverages/ASCAlcoholicBeverageAdvertisingClearanceGuide.pdf

Reference material

Agostinelli, G. & Grube, J.W. (2002). Alcohol counter-advertising and the media. *Alcohol Research and Health*, 26(1), 15-21.

Anderson, P. (2009). Is it time to ban alcohol advertising? *Clinical Medicine*, 9(2), 121-124.

Anderson, P., de Bruijn, A., Angus, K., Gordon, R. & Hastings, G. (2009). Impact of alcohol advertising and media exposure on adolescent alcohol use: a systematic review of longitudinal studies. *Alcohol and Alcoholism*, 44(3), 229-243.

Babor, T., Caetano, R., Casswell, S., Edwards, G., Giesbrecht, N., Graham, K. et al. (2010). *Alcohol: No ordinary commodity. Research and public policy* (2nd ed.) (pp.185-197). New York: Oxford.

Caswell, S. (2004). Alcohol brands in young peoples' everyday lives: new developments in marketing. *Alcohol and Alcoholism*, 39(6), 471-476.

Chen, M-J., Grube, J.W., Bersamin, M., Waiters, E. & Keefe, D.B. (2005). Alcohol advertising: What makes it attractive to youth? *Journal of Health Communication*, 10(6), 553-565.

Collins, R.L., Ellickson, P.L., McCaffrey, D. & Hambarsoomians, K. (2007). Early adolescent exposure to alcohol advertising and its relationship to underage drinking. *Journal of Adolescent Health*, 40(6), 527-534.

Hastings, G., Anderson, S., Cooke, E. & Gordon, R. (2005). Alcohol advertising and marketing and young people's drinking: a review of the research. *Journal of Public Health Policy*, 26(3), 296-311.

Kendall, P.R.W. (2008). *Public health approach to alcohol policy: An updated report from the Provincial Health Officer*. Government of British Columbia, Ministry of Healthy Living and Sport. Available at: www.health.gov.bc.ca/library/publications/year/2008/alcoholpolicyreview.pdf

National Alcohol Strategy Working Group (2007). *Reducing alcohol-related harm in Canada: Toward a culture of moderation. Recommendations for a National Alcohol Strategy*. Available at: www.ccsa.ca/2007%20CCSA%20Documents/ccsa-023876-2007.pdf

Nova Scotia Department of Health Promotion and Protection (2009). Literature review – Effects of alcohol advertising on alcohol consumption among youth. Available at: www.gov.ns.ca/ohp/publications/Alcohol_Advertising_Literature_Review.pdf

Perkins, H.W., Linkenbach, J.W., Lewis, M.A. & Neighbors, C. (2010). Effectiveness of social norms media marketing in reducing drinking and driving: A statewide campaign. *Addictive Behaviors*, 35(10), 866-874.

Victorian Alcohol and Drug Association (VAADA) (2010). Alcohol advertising, marketing and promotion. Available at: www.vaada.org.au/resources/items/314236-upload-00001.pdf

Strengthening the Community

Communities with a sense of connectedness—including a common concern about alcohol-related harm—tend to be stronger and healthier. Local governments can strengthen their communities by promoting both responsible attitudes toward alcohol and moderate drinking practices, and by encouraging more effective care for those requiring support for problems related to alcohol.

1. Enhance connectedness

Since supportive interpersonal connections are critical to individual and collective health, efforts should be made to engage people in helping to extend and build community relationships.

Municipal governments can

☑ Assess and respond to factors in the community that contribute to harmful drinking patterns
- environmental factors (e.g., poor economic conditions, easy availability of alcohol)
- social factors (e.g., shortage of healthy networks, associations, cultural communities)

☑ Identify and support protective factors in the community that serve to counter risk of harmful drinking
- school programs, job placement assistance and professional clubs
- social service bodies, religious communities, neighbourhood organizations and projects
- recreational associations and cultural groups
- facilities and exterior venues, regular and special occasions for civic participation

☑ Create and implement a strategy aimed at strengthening a sense of community
- include a wide representation of stakeholders in the planning and mobilizing process
- identify shared values and a collective vision
- adopt initiatives that serve common objectives and distribute responsibility
- mark achievements and recognize participant contributions

Some questions to consider

? How can we best deal with factors in our community linked to dangerous drinking?

? What components currently promote safer drinking patterns? How can we promote these?

? What resources in our community can be used to enhance connectedness? How can we most effectively build our social capital? What external resources are available?

? What can we do to ensure productive community dialogue about alcohol-related concerns?

The presence of real connectedness in constructive and supportive relationships helps people feel they matter, belong, can receive assistance and can contribute. Affirming individual identity and acceptance within healthy social networks without requiring conformity to rigid norms is a strong deterrent to unhealthy use of alcohol and other substances. Efforts to foster community spirit, raise the level of inclusivity, and nurture mutual regard, respect and responsibility for oneself and others will reduce drinking-related harms.

2. Raise consciousness

While education efforts on their own have generally failed to produce change among individuals and across communities, they can (when engaging reflection and action) be useful alongside other initiatives.

Municipal governments can

☑ Promote a balanced understanding of the role of alcohol in society

- acknowledge the positive role of alcohol (e.g., it makes people feel more relaxed and social, is a popular commodity and significant economic driver)
- draw attention to the fact that alcohol can cause significant personal damage when used as self-medication (to cope with negative emotions or physical pain), or consumed in large amounts (causing falls, accidents and violence) or in excess over a long period of time (causing chronic illness)
- educate people about how alcohol can damage social relationships if used to alleviate public pressures, conform to exaggerated norms, escape external difficulties, or used as an excuse for vandalism, violence and victimizing others (physical assault, psychological abuse, relational harm, economic deprivation)
- spread the message that alcohol use can result in substantial added healthcare costs, law and order enforcement expense and employment performance-related losses

☑ Increase awareness of the moderate practices and attitudes of the majority

- launch a social norms marketing campaign exposing the facts that (1) most drinkers do not get drunk or approve of reckless drinking behaviours, and (2) most consumers not only avoid drinking and driving but also support rigorous enforcement measures

☑ Promote low-risk drinking guidelines and strategies

- distribute materials recommending limits for any day and per week, listing situations where no alcohol is the best option, and providing tips on how to avoid intoxication

Some questions to consider

? Do we have a clear understanding of the benefits and risks of using alcohol?

? Do we recognize that despite its benefits, alcohol is the drug that contributes to far more calculated costs than all illegal psychoactive substances combined? And are we aware that half of all alcohol-related costs stem from occasional excessive drinking by people who are mostly moderate drinkers?

? Do we realize that direct revenues from alcohol sales are lower than societal costs related to drinking, and that while moderate alcohol use may have some health benefits for middle-aged people, drinking contributes significantly to the development of serious chronic illness?

? Are we aware that alcohol impairment is a major cause of immediate injury?

? Are we using a variety of vehicles to convey our messages, and are we tailoring them to reach different target audiences?

Educational efforts should aim to impart a holistic perspective that respects abstinence (and encourages it among youth) and features both low-risk drinking advice for all age brackets and harm reduction strategies. Initiatives aiming to undermine typical overestimations of how many people actually drink excessively or support relaxed stances on alcohol policies should not be relied on alone to bring about cultural shift (Perkins et al., 2010).

3. Improve services

Health promotion that addresses the social ecological context will give greater breadth and depth to prevention initiatives. It will also reduce the burden on healthcare services, which in turn can be provided in a stronger, more economic and more humane manner.

Municipal governments can

- ☑ Implement a workplace alcohol policy for civic officials and staff
  - set rules for alcohol consumption in the workplace or during working hours
  - spell out disciplinary response processes to situations where alcohol use has contributed to employment problems (e.g., absenteeism, reduced performance, inappropriate behaviour, conflicts)
  - provide awareness campaigns, brief intervention and referral to assistance programs to support return to normal responsibility
  - conduct periodic audits to assess work conditions that contribute to alcohol-associated difficulties, and how such prompts may be mitigated
- ☑ Encourage local business and industries to adopt comparable policies
- ☑ Build partnerships with local health and social service providers
  - promote widespread screening and brief interventions for risky drinking in primary healthcare contexts, educational institutions, recreational and cultural settings, and social services
  - work together on adequate supply of more intensive counselling, including cognitive-behavioural skills training for those who need it, via outpatient healthcare services and in-house employee assistance programs
  - join forces to support individuals struggling with chronic alcohol problems and related harms (homelessness, job loss) by providing more integrated services and low-barrier housing arrangements that feature a harm reduction approach

Some questions to consider

- ? Are we promoting a workplace climate where people can both expect and receive support in addressing personal difficulty with alcohol?
- ? Are we helping to equip personnel in various professions/roles to conduct brief interventions?
- ? Are we open to comprehensive assistance in helping individuals with chronic alcohol problems, as opposed to the narrower "quick fix" focus on detoxification, physical recovery and relapse prevention counselling? What are we doing to help with job acquisition and housing retention?

Evidence indicates there is a substantial cost benefit to be gained with early detection and support, which often precludes the need for more intensive, extensive and expensive professionally-attended services.

Municipalities can collaborate with their regional health authorities about adequate availability of treatment programs and facilities, including alternatives to conventional options.

Other ways of responding to those with severe problems merit careful consideration. Housing provisions that include regulated supply of alcohol have seen decreased rates of consumption, reduced experience of crisis and access of emergency services, less encounter with enforcement personnel, improved personal management of hygiene and enhanced health, with welcome economic gain to the public accompanying these developments (Podymow et al., 2006; Larimer et al., 2009).

Steps to Success
How is Our Community Doing?

- ❑ We regularly assess and target different social-ecological factors in our municipality that are conducive to inappropriate and unsafe use of alcohol

- ❑ We promote those aspects of our community life that discourage unhealthy alcohol use

- ❑ We have developed a strategic plan to deal with concerns and exploit assets in a comprehensive fashion involving widespread community ownership and participation

- ❑ We assess all communication to ensure a balanced message on alcohol that recognizes benefits, acknowledges harms and positively encourages individual and collective responsibility for reducing damage

- ❑ We seek to ensure that local services supply a continuum of stepped care ranging from brief intervention to extended assistance that incorporates stable housing and support for employment

Resource links:

Helping Communities (CARBC). Available at: www.carbc.ca/HelpingCommunities.aspx

Alcohol Publications (CARBC). Available at: www.carbc.ca/Home/Publications.aspx

Ensuring Solutions to Alcohol Problems. Available at: www.ensuringsolutions.org

Don't mix it! A guide for employers on alcohol at work. Available at: www.hse.gov.uk/pubns/indg240.htm

Alcohol and work: what everyone should know. Available at: www.alcoholandwork.adf.org.au

Reference material:

Babor, T., Caetano, R., Casswell, S., Edwards, G., Giesbrecht, N., Graham, K. et al. (2010). *Alcohol: No ordinary commodity. Research and public policy* (2nd ed.). New York: Oxford.

Kendall, P.R.W. (2008). *Public health approach to alcohol policy: An updated report from the Provincial Health Officer*. Government of British Columbia, Ministry of Healthy Living and Sport. Available at: www.health.gov.bc.ca/library/publications/year/2008/alcoholpolicyreview.pdf

Larimer, M.E., Malone, D.K., Garner, M.D., Atkins, D.C., Burlingham, B., Lonczak, H.S. et al. (2009). Health care and public service use and costs before and after provision of housing for chronically homeless persons with severe alcohol problems. *Journal of the American Medical Association,* 301(13), 1349–1357.

Perkins, H.W., Linkenbach, J.W., Lewis, M.A. & Neighbors, C. (2010). Effectiveness of social norms media marketing in reducing drinking and driving: A statewide campaign. *Addictive Behaviors,* 35(10), 866-874.

Podymow, T., Turnbull, J., Coyle, D., Yetisir, E. & Wells, G. (2006). Shelter-based managed alcohol administration to chronically homeless people addicted to alcohol. *Canadian Medical Association Journal*, 174(1), 45-49.

University of Victoria | Centre for Addictions Research of BC

Advocating to Other Levels of Government

Other levels of government have jurisdiction over certain policy responses to harmful alcohol use. But local governments can contribute by voicing the concerns and opinions of their collective and individual constituents, especially when it comes to policy stances that greatly affect them.

1. Appeal to provincial government

Pricing is perhaps the best attested factor for widespread impact on levels of alcohol consumption and related harms. Making alcohol less affordable would achieve substantial reductions on both counts, even among heavier drinkers, with net fiscal benefit to the larger public and greater safety for all. Local government can appeal for changes to pricing policy and also encourage provincial authorities to improve public safety and well-being in other ways.

Municipal governments can ask the provincial government to

- ☑ Make alcohol less affordable
  - ▪ assign a socially relevant minimum price per standard drink (annually updated to correspond to the rate of inflation)
  - ▪ adjust pricing mark-ups (within different beverage classes) to create marketing and purchasing incentives for lower-strength products and disincentives for higher-strength products
  - ▪ direct a portion of any increased revenues from such measures to fund other effective initiatives responding to alcohol-related concerns
- ☑ Enhance certification requirements for management and staff of licensed venues
  - ▪ make the *Safer Bars* violence prevention training program a mandatory element of certification, along with *Serving it Right*
  - ▪ require recertification in *Serving it Right* at five year intervals
- ☑ Maintain the moratorium on private liquor store licences, with no reliance on them to succeed government-operated stores
- ☑ Impose mandatory liability insurance on licensees
- ☑ Increase monitoring of licensed establishments
  - ▪ allocate funding for more frequent inspection of drinking venues to further deter the serving of patrons who are underage or nearing intoxication

Some questions to consider

- ? What avenues are open for multiple expressions of concern and appeal to the provincial government? How effectively have we used these different routes to communicate concerns and request action?
- ? What indications can we give the provincial government of our commitment to do our part in supporting such initiatives? How well have we scored in regard to positive stances the province has already taken?
- ? How rigorous are our own efforts to reduce alcohol-related harms?

The purchase price of alcohol for consumers relative to their overall income has shrunk considerably over time, while consumption and alcohol-associated costs for British Columbians (among other Canadians and constituencies around the globe) have gone up. Municipal governments can communicate their desire for the province to implement pricing policies aimed at reducing immoderate use, recognizing that periodic heavy drinking by people who usually drink moderately causes a sizable portion of alcohol-related harm (Kendall, 2008; Thomas et al., 2009; Segal & Stockwell, 2009; NASWG, 2007; Stockwell, Zhao & Thomas, 2009; Wagenaar et al., 2009; Elder et al., 2010; Babor et al., 2010).

Actions taken in the other areas enumerated above would contribute to safer drinking environments (Kendall, 2008; Stockwell, 2010; Stockwell et al., 2009; Babor et al., 2010). Advocacy for such measures should demonstrate familiarity with the issues and specific advantages of proposals rather than just broad sentiment in their favour.

> In the fall of 2010, the Union of BC Municipalities (UBCM) unanimously endorsed a resolution calling for a provincial pricing strategy that would give greater incentive for the production, promotion and consumption of lower strength alcoholic beverages within the different classes of drinks. This active civic consensus came in response to a proposal from the BC Coalition for Action on Alcohol Reform, picking up on recommendations issued in 2008 by BC's Provincial Health Officer and further in 2009 by University of Victoria's Centre for Addictions Research of BC (CARBC). Source: Vancouver Sun, October 6, 2010.

2. Appeal to federal government

Municipal governments can ask the federal government to

- ☑ Introduce random compulsory breath testing nationwide
- ☑ Carry out various strategies in the national alcohol strategy
  - ▪ promote low-risk drinking guidelines
  - ▪ introduce standard drink labelling on beverage containers
  - ▪ provide adequate funding for extension of the alcohol and other drug monitoring initiative
  - ▪ support community health prevention initiatives around alcohol concerns
  - ▪ enhance public consciousness of alcohol's contribution to chronic disease
- ☑ Limit the amount and extent of alcohol advertising through more comprehensive legislation and enforcement

Some questions to consider

? What vehicles are there for multiple expressions of concern and appeal to the federal government? How effectively have we used these channels to communicate concerns and request action?

? What indications can we give the federal government to show both our commitment to current initiatives and contribution to practical implementation?

? What leadership have we shown to address alcohol-related issues under our own jurisdiction?

Random breath testing, when conducted in a visibly consistent fashion (as in Europe, New Zealand and especially Australia), is recognized internationally as one of the most effective strategies to reduce harms from impaired driving, a front on which Canada's progress has been somewhat stalled (Babor et al., 2010; Elder et al., 2002; Purssell et al., 2009; Solomon et al., 2009).

Actions in some of the other areas mentioned above are complementary to other efforts and can contribute to the cultivation of a climate of more careful consumption that would cut down considerably on casualties and costs (Kendall, 2008; NASWG, 2007; Babor et al., 2010).

Steps to Success

How is Our Community Doing?

- ❑ We have identified alcohol-related issues in our community and understand the jurisdictional responsibilities of the various levels of government

- ❑ We have addressed those concerns lying within our jurisdiction

- ❑ We have demonstrated support for sound initiatives taken by other levels of government

- ❑ We are committed to being a constructive critic and partner in the implementation of strong alcohol policies and have made positive proposals to other levels of government

Resource links:

Union of BC Municipalities. Available at: www.ubcm.ca

Alcohol Policy Network, Ontario Public Health Association. Available at: www.apolnet.ca

MADD (Mothers Against Drunk Driving) Canada. Available at: www.madd.ca

Reference material:

Babor, T., Caetano, R., Casswell, S., Edwards, G., Giesbrecht, N., Graham, K. et al. (2010). *Alcohol: No ordinary commodity. Research and public policy* (2nd ed.). New York: Oxford.

Elder, R.W., Lawrence, B., Ferguson, A., Naimi, T.S., Brewer, R.D., Chattopadhyay, S.K. et al. (2010). The effectiveness of tax policy interventions for reducing excessive alcohol consumption and related harms. *American Journal of Preventive Medicine*, 38(2), 217-229.

Elder, R.W., Shults, R.A., Sleet, D.A., Nichols, J.L., Zaza, S., Thompson, R.S. (2002). Effectiveness of sobriety checkpoints for reducing alcohol-involved crashes. *Traffic Injury Prevention*, 3(4), 266-274.

Kendall, P.R.W. (2008). *Public health approach to alcohol policy: An updated report from the Provincial Health Officer*. Government of British Columbia, Ministry of Healthy Living and Sport. Available at: www.health.gov.bc.ca/library/publications/year/2008/alcoholpolicyreview.pdf

National Alcohol Strategy Working Group (2007). *Reducing alcohol-related harm in Canada: Toward a culture of moderation. Recommendations for a National Alcohol Strategy*. Available at: www.ccsa.ca/2007%20CCSA%20Documents/ccsa-023876-2007.pdf

Purssell, R., Solomon, R. & Chamberlain, E. (2009). Random breath testing: A needed and effective measure to prevent impaired driving fatalities. *BC Medical Journal*, 51(10), 446-447.

Segal, D.S. & Stockwell, T. (2009). Low alcohol alternatives: A promising strategy for reducing alcohol related harm. *International Journal of Drug Policy*, 20(2), 183-187.

Solomon, R., Chamberlain, E. & Chiodo, S. (2009). Random breath testing (RBT): A review of the evidence. Available at: www.madd.ca/english/research/Random%20breath%20testing%20in%20perspective%20-July%202009.pdf

Stockwell, T. (2010). *Operator and regulatory best practices in the reduction of violence in and around licensed premises: A review of Australian and Canadian research*. Centre for Addictions Research of BC, University of Victoria. Available at: www.carbc.ca/Portals/0/PropertyAgent/2111/Files/29/Alcohol&Violence1004.pdf

Stockwell, T., Zhao, J., Macdonald, S., Pakula, B., Gruenewald, P. & Holder, H. (2009). Changes in per capita alcohol sales during the partial privatization of British Columbia's retail alcohol monopoly 2003-2008: a multi-level local area analysis. *Addiction*, 104(11), 1827-1836.

Stockwell, T., Zhao, J. & Thomas, G. (2009). Should alcohol policies aim to reduce total alcohol consumption? New analyses of Canadian drinking patterns. *Addiction Research and Theory*, 17(2), 135-151.

Thomas, G., Stockwell, T. & Reist, D. (2009). *Alcohol pricing, public health and the HST: Proposed incentives for BC drinkers to make healthy choices.* Centre for Addictions Research of BC, University of Victoria. http://carbc.ca/Portals/0/PropertyAgent/2111/Files/9/AlcPricingHST.pdf.

Wagenaar, A.C., Salois, M.J. & Komro, K.A. (2009). Effects of beverage alcohol price and tax levels on drinking: a meta-analysis of 1003 estimates from 112 studies. *Addiction*, 104(2), 179-190.

University of Victoria | Centre for Addictions Research of BC