

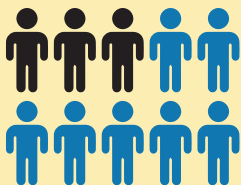
Reducing Alcohol Harms: A Primer for Municipalities

When building a healthy community, local governments are in a unique position to foster healthy environments and healthy behaviours. This document provides an overview of the health implications of alcohol use, supporting communities to continue to have informed conversations about reducing harms.



Risks to Community Safety and Well-being^{1,2}

Alcohol is the most used drug in the Middlesex-London region. Its use is under-reported across Canada, therefore rates of alcohol use are even higher than the data that is available.



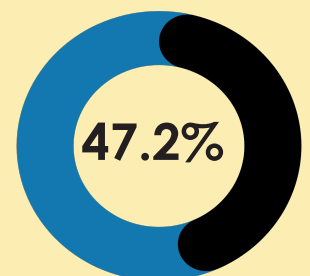
30% of Middlesex-London residents aged 12 and older are drinking alcohol above what is considered a low-risk level according to Canada's Guidance on Alcohol and Health (had 3 or more standard drinks in the past 7 days).

Alcohol causes injuries, violence, and health harms^{3,4}

Alcohol is linked to more than 200 health and injury conditions, including cancers, physical injuries, liver disease, and fetal alcohol spectrum disorder, putting strain on our already overburdened healthcare system. Those who don't drink can experience secondary harms through impaired driving, intimate partner violence, and public disturbances.

Alcohol exposure impacts youth^{5,6,7}

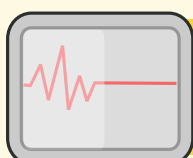
Having alcohol in areas frequented by youth normalizes and encourages use due to increased exposure and access to alcohol. Early alcohol initiation has clear harms for youth. Regulating alcohol availability is a tool to effectively address these risks and harms.



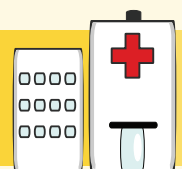
of youth (Gr 9-12) in Ontario reported alcohol use initiation before grade 9.

Middlesex-London: Deaths, Hospitalizations, and Emergency Department Visits Attributable to Alcohol⁸

(average year estimate)



154 deaths
(4.1%)



842 Hospitalizations
(2.4%)



6,968 emergency department visits
(3.8%)

Retail Density Impacts Consumption^{6,9}

On-premise:

Licensed establishment such as restaurants and bars.

Off-premise:

Retail outlets such as LCBO, the Beer Store, convenience stores, and grocery stores.

Research shows there is a relationship between **density** of on-premise establishments and off-premise outlets and **alcohol harms**.

More alcohol outlets result in more alcohol consumption and associated harms including injuries, illness, assaults, suicide, public disorder, and violent crime at the population level.

Currently, Middlesex-London meets best practice guidelines for **off-premise** alcohol outlet density levels (2 outlets or fewer per 10,000 capita age 15+).



Any increase in alcohol outlet density in Middlesex-London will exceed the recommended threshold.

Costs^{10,11}

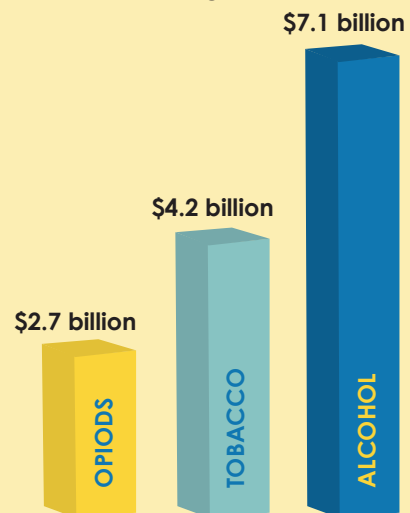


In 2020/21, alcohol cost Ontario taxpayers over **\$7 billion** in direct (e.g., healthcare and enforcement) and indirect (e.g., lost productivity) costs.

Despite perceptions that alcohol is a large revenue generator, in 2020/21 **alcohol generated just over \$5 billion in returns** for Ontario, creating a **nearly \$2 billion deficit for the province**.

Substance use-attributable costs, Ontario, 2020

In comparison to all other substances, the societal burden of alcohol is the greatest.



Provincial Alcohol Retail Landscape

2015	2019	2020	2024
Expansion of alcohol sales to grocery stores, with approx. 450 participating stores.	Expansion of LCBO convenience outlet stores.	Expansion of alcohol delivery.	Expansion of alcohol sales to grocery, convenience and big box stores (with no cap on number of outlets).

Reducing harms related to physical availability of alcohol

Currently there are no plans for provincial restrictions on retail outlet density, regulations to limit clustering of alcohol outlets, or proximity restrictions (e.g., distance between alcohol outlets and schools or healthcare facilities).

What Can Local Governments Do?

Local governments are uniquely situated to create healthy environments and foster healthy behaviours. Through healthy public policies and partnerships, they can support the local economic and social benefits of alcohol, while reducing negative impacts.



Modify land use planning^{5,6,12,13}

A greater density of alcohol outlets (on and off-premise) can increase community-level harms such as injury, poor mental health, and acute and chronic diseases.

Possible Actions:

- Explore zoning options related to alcohol retail locations and density.
 - Consider minimum separation distances between alcohol outlets (on and off-premise) and sensitive land use areas, such as schools, treatment centers, and parks.

Less alcohol available



Decreased consumption



Decreased alcohol-related harms

Work with other levels of government^{13,14}

Municipalities know their communities best and see community-level impact from policies at all levels. Municipalities can advocate to the provincial and federal governments for evidence-based policies that work to reduce alcohol harms.

Possible Actions:

- Advocate to keep municipal control over alcohol policy that impacts the wellbeing and safety of the local community, such as keeping the public notice requirement for liquor license applications and allowing municipalities to have more input on alcohol retail outlet density and location decisions.
- Advocate for a provincial alcohol strategy, where a public health approach to access, pricing, marketing, and labelling are implemented across the province.
- Advocate for other measures to reduce potential harm, such as increased fines and license fees and progressive enforcement of regulations.



Regulate alcohol at public spaces & events^{5,6,13}

Permitting alcohol use on public property can create a sense of normalization and increase consumption, resulting in public safety risks and increased risk of health and social harms. Event organizers can reduce alcohol-related harms by managing the availability of alcohol and strategically designing environments where alcohol is served.



Possible Actions:

- Avoid any changes to alcohol consumption in public areas (e.g., parks), particularly given the rapid increase of alcohol outlets planned for Ontario.
- Regulate, manage, and evaluate alcohol consumption on municipally owned and managed properties during public and private events, through up-to-date municipal alcohol policies. Contact the MLHU to discuss the Quality Measurement Tool for Municipal Alcohol Policies (MAPs) and accompanying gold standard template. These tools help to measure how effective a MAP is compared to best practice.
- Restrict or prohibit alcohol imagery, marketing, and sponsorship locally (e.g., on public transit, in arenas, at outdoor special events, etc.).
- Promote health by providing alcohol-free spaces, restrict or prohibit alcohol imagery and incentives for alcohol-free events (e.g., lower booking fees, priority dates, etc.).

Monitor for alcohol harms¹⁴

Understanding the local impacts of alcohol use is crucial to supporting healthy public policy decisions.



Possible Actions:

- Collaborate with public health to monitor local alcohol availability and alcohol-related harms. This can include measuring alcohol-related emergency calls and monitoring changes in outlet density.

Contact

health@mlhu.on.ca for:

- Support with local policy development, including bylaws and Municipal Alcohol Policy review.
- Opportunities to collaborate on strategies to reduce alcohol harms in our community.
- Information on the health impacts of alcohol use.

References

1. Stockwell, T., & Zhao, J. (2023). Estimates of compliance with Canada's guidelines for low and moderate risk alcohol consumption: The importance of adjustment for underreporting in self-report surveys. *Canadian Journal of Public Health*, 114(6), 967-972. <https://doi.org/10.17269/s41997-023-00781-6>
2. Public Health Ontario. (2023). Alcohol Use Snapshot. www.publichealthontario.ca/en/Data-and-Analysis/Substance-Use/Alcohol-Use
3. World Health Organization. (2018). Global Health Status Report on Alcohol and Health. <https://iris.who.int/bitstream/handle/10665/274603/9789241565639-eng.pdf?sequence=1>
4. Canadian Centre on Substance Use and Addiction. (2023). Canada's Guidance on Alcohol and Health. http://www.ccsa.ca/sites/default/files/2023-01/CCSA_Canadas_Guidance_on_Alcohol_and_Health_Final_Report_en.pdf
5. Alberta Health Services. (2022). Alcohol Policy for Community Safety, Vibrancy, Health and Well-Being. A Practical Guide for Alberta Municipalities. www.albertahealthservices.ca/assets/info/amh/if-amh-alcohol-policy-for-community-safety.pdf
6. Canadian Institute for Substance Use Research (2023). Canadian Alcohol Policy Evaluation (CAPE) 3.0: Methodology and Evidence (Federal and Provincial/Territorial). www.uvic.ca/research/centres/cisur/assets/docs/cape/cape3/methodology-en.pdf
7. Centre for Addiction and Mental Health. (2024). Ontario Student Drug Use and Health Survey. https://www.camh.ca/-/media/research-files/osduhs-drug-use-report_2023.pdf
8. Ontario Health and Ontario Agency for Health Protection and Promotion (Public Health Ontario). (2023) Burden of Health Conditions Attributable to Smoking and Alcohol by Public Health Unit in Ontario - Appendix A. https://www.publichealthontario.ca/-/media/Documents/B/2023/burden-health-smoking-alcohol-appendix-a-etimates.pdf?rev=5d7b233ef2d546e89a6688a4322603e4&sc_lang=en
9. Ontario Health. (2023). Prevention System Quality Index 2023: Supplemental Tables (S17). https://www.ontariohealth.ca/sites/ontariohealth/files/PSQI_2023_Supplementary_Tables.xlsx
10. Canadian Centre on Substance Use and Addiction. (2023). Canadian Substance Use Costs and Harms. <https://csuch.ca/documents/infographics/english/CSUCH-Canadian-Substance-Use-Costs-Harms-Ontario-Infographic-2023-en.pdf>
11. Naimi, T., Stockwell, T., Giesbrecht, N., Wetlaufer, A., Vallance, K., Farrell-Low, A., Farkouh, E., Ma, J., Priore, B., Vishnevsky, N., Price, T., Asbridge, M., Gagnon, M., Hynes, G., Shelley, J., Sher, A., Shield, K., Solomon, R., Thomas, G., & Thompson, K. (2023). Canadian Alcohol Policy Evaluation 3.0: Results from Ontario. Victoria, BC: Canadian Institute for Substance Use Research, University of Victoria. www.uvic.ca/research/centres/cisur/assets/docs/cape/cape3/on-results-en.pdf
12. Babar, T. F., Casswell, S., Graham, K., Huckle, T., Livingston, M., Osterberg, E., Rehm, J., Room, R., Rossow, I. and Sornpaisarn, B. (2023). Alcohol: No Ordinary Commodity. Third Edition <https://fdslive.oup.com/www.oup.com/academic/pdf/openaccess/9780192844484.pdf> <https://fdslive.oup.com/www.oup.com/academic/pdf/openaccess/9780192844484.pdf>
13. Liem, S. (2018). Alcohol Policy Review: Opportunities for Municipalities. <https://opha.on.ca/wp-content/uploads/2021/06/Alcohol-Policy-Review-Full-Report-Final-corrected.pdf>
14. Moore, K. (2024). Balancing Act: An All of Society Approach to Substance Use and Harms. 2023 Annual Report of the Chief Medical Officer of Health of Ontario to the Legislative Assembly of Ontario. <http://www.ontario.ca/files/2024-04/moh-cmoh-annual-report-2023-en-2024-04-02.pdf>

Adapted with permission from Interior Health (2022) for the original concept and design. Interior Health (2022). Local Government Alcohol Toolkit: Health Evidence and Recommendations. <https://www.interiorhealth.ca/sites/default/files/PDFs/local-government-alcohol-toolkit.pdf>



Health@mlhu.on.ca



519-663-5317