

The mission of OPHA is to provide leadership on issues affecting the public's health and to strengthen the impact of people who are active in public and community health throughout Ontario.

700 Lawrence Ave. W., Suite 310 Toronto, Ontario M6A 3B4

Tel: (416) 367-3313 1-800-267-6817 (Ont) Fax: (416) 367-2844 E-mail: info@opha.on.ca www.opha.on.ca

Honorary Patron

The Hon. David C. Onley Lieutenant Governor of Ontario

President

Carol Timmings E-mail: ctimmings@opha.on.ca

Executive Director

Connie Uetrecht E-mail: cuetrecht@opha.on.ca

Constituent Societies

ANDSOOHA – Public Health Nursing Management in Ontario

Association of Ontario Health Centres

Association of Public Health Epidemiologists in Ontario

Association of Supervisors of Public Health Inspectors of Ontario

Canadian Institute of Public Health Inspectors (Ontario Branch)

Community Health Nurses' Initiatives Group (RNAO)

Health Promotion Ontario: Public Health

Ontario Association of Public Health Dentistry

Ontario Public Health Libraries Association

Ontario Society of Nutrition Professionals in Public Health

Public Health Research, Education and Development (PHRED) Program

Charitable Registration Number 11924 8771 RR0001 March 25, 2004

To: Honourable Carolyn Bennett Minister of State for Public Health

Brooke Claxton Building Tunney's Pasture Ottawa, ON K1A 0K9

Dear Minister:

On behalf of the Alcohol Workgroup of the Ontario Public Health Association, I am responding to your request for input on key issues regarding the future of Public Health in Canada.

It is becoming more apparent in the research literature that alcohol contributes enormously to the burden of illness. According to the World Health Organization (2002), alcohol is the third leading risk factor for chronic disease in developed nations, accounting for 9.2% of the overall global burden behind blood pressure and tobacco, and ahead of diet, physical inactivity and illicit drug use. In Canada, nearly half of violent crimes such as a homicide, attempted murder and assault are committed while under the influence of alcohol (CCSA, 2002).

There is very clear evidence that one of the most effective measures for the prevention of alcohol-related problems is regulatory control through retail alcohol monopolies such as the Liquor Control Board of Ontario. (For a summary of effective prevention strategies, see Alcohol: No Ordinary Commodity - Research and Public Policy, a recent publication from the WHO to which Canadian scientists have contributed). Regulatory control has been eroding in several of the provinces over the past few years. We need more co-operation and information-sharing across Canada on such issues, a role that the Canada Public Health Agency could play.

In addition, we are concerned that international trade commitments could infringe on the ability of provincial/territorial governments to continue to regulate alcohol in a manner that safeguards public health and safety. Alcohol is a drug with

addictive properties and its use generates enormous expenditures for all levels of government in Canada. Indeed, an economic cost study published by Single et al. in 1996 conservatively estimated that alcohol misuse cost the Canadian economy \$7.5 billion per year. The same study pegged the cost of tobacco-related health care, enforcement and other costs at \$9.6 billion and those associated with illicit drugs at \$1.4 billion.

Alcohol must not be treated as an ordinary commodity such as wheat or vehicle parts. In the ongoing General Agreement on Trade in Services (GATS) negotiations, Canada must not rely on the flawed "governmental authority" exclusion as its only protection in trade negotiations. Likewise, Canadians need a guarantee that alcohol control is beyond the reach of the proposed FTAA. A Canada Public Health Agency could help the government of Canada to ensure that national and provincial government agencies retain the unfettered right under trade agreements to regulate domestic alcohol markets to ensure public health and safety.

Two other valuable roles for the Canada Public Health Agency that could contribute to the reduction of alcohol-related problems and their associated costs to our health and legal/justice systems are: monitoring policy and its impact on population health; and conducting health impact assessments of various governmental measures. In fact, the OPHA strongly recommends that every Cabinet submission require a public health impact assessment in order to ensure that general policies and programs do not inadvertently contribute to health care costs.

With this letter we are attaching several links to key supporting documents on the above issues. We thank you for the opportunity to participate in this important consultation process and look forward to supporting your work and the work of the agency in the future.

Sincerely,

David MacKinnon
OPHA Executive Director

Enclosures

c.c. Dr. Paul Garfinkel, President & CEO, Centre for Addiction and Mental Health

Andrew S Brandt, CEO, Liquor Control Board of Ontario Jean Major, COO, Acting CEO & Registrar, Alcohol and Gaming Commission of Ontario

John McKay, Parliamentary Secretary to Minister of Finance