

## **Alcohol Availability Advocacy Package**

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The Honorable Kathleen Wynne  
Premier of Ontario  
Legislative Building, Queen's Park  
Toronto, ON M7A 1A1  
Email: premier@ontario.ca

Dear Premier Wynne:

Re: Increasing Alcohol Availability in Ontario

The proposed measures for increasing alcohol availability to Ontarians in local supermarkets through the Liquor Modernization Project is of grave concern. As an organization, the Sudbury & District Board of Health believes that government decisions regarding alcohol should be made within the broader context of its known and measurable societal harms, negative economic impacts, and risks to the public's health and community safety. At the April 16, 2015, meeting, the Board passed motion 08-15:

*WHEREAS alcohol is the second leading cause of death, disease, and disability in Canada and causally linked to over 60 diseases and injuries; and*

*WHEREAS 84% of SDHU adults (78% Ontario-wide) and 43% of SDHU teens aged 12-18 reported consuming alcohol in the last 12 months; and 27% of SDHU current drinkers over 12 years reported episodes of heavy drinking (five or more drinks on one occasion at least once monthly); and*

*WHEREAS the Regulatory Modernization in Ontario's Beverage Alcohol Industry initiative (2014), through the Ministry of Finance and the Alcohol Gaming Commission of Ontario, has increased alcohol availability in Ontario through initiatives including VQA wine in Farmers' Markets, proposed LCBO Express Kiosks, support to industry, increased hours of sale and removal of special event and festival restrictions; and*

*WHEREAS the privatization of alcohol sales would set a precedent for further privatization across multiple venues throughout Ontario, such as the Government's currently proposed expansion of beverage alcohol in local supermarkets; and*

*WHEREAS alcohol is no ordinary commodity and decisions about its promotion and availability should be made within the broader context of alcohol's known negative societal, economic and health risks; and*

*WHEREAS local boards of health are required under the Ontario Public Health Standards to develop health promotion and protection strategies to mitigate against the risks of alcohol*

*consumption and boards are held accountable under the MOHLTC Accountability Agreements for reporting on local alcohol consumption rates;*

*THEREFORE BE IT RESOLVED THAT the Sudbury & District Board of Health endorse the correspondence from the Association of Local Public Health Agencies to Government Ministers and the Premier – while also informing the Premier of our serious concerns regarding the increased availability of alcohol through VQA wine in Farmers' Markets, proposed LCBO Express Kiosks, and the privatization of the sale of beverage alcohol through initiatives such as local supermarkets; and*

*FURTHER THAT the Sudbury & District Board of Health share these concerns and inform the community by means of an open letter; and*

*FURTHER THAT copies of this motion and subsequent correspondence to the community and Premier be forwarded to local Members of Provincial Parliament, Ministers of Health and Long-Term Care, Economic Development, Finance, Agriculture, Food and Rural Affairs; the Attorney General, Chief Medical Officer of Health, Assistant Deputy Ministers, Ontario Boards of Health, Constituent Municipalities, and the Ontario Public Health Association.*

The current health care costs, enforcement, and other social costs related to alcohol misuse are estimated to be over \$5 billion a year. However, in 2013-2014, the beverage alcohol sector only contributed approximately \$3 billion to the Ontario government.

When moving forward with modernization initiatives, we urge you and your government to consider the health and wellness of the population and the potentially devastating consequences of increased availability of alcohol. The proposed private models of delivery and sales must include significant management and control from the LCBO, including training and responsible sale practices. We encourage your government to include best practices such as training staff, setting limits to hours of sale, product marketing and advertising, and ensuring separate retail and cash register areas.

We strongly recommend the province undertake a detailed analysis of the health and social impacts, including direct and indirect costs related to the proposed changes to Ontario's beverage alcohol retailing system.

The Board of Health continues to welcome the opportunity to collaborate with you on these important health concerns.

Sincerely,

Medical Officer of Health and Chief Executive Officer

cc: Hon. Charles Sousa, Minister of Finance

Hon. Dr. Eric Hoskins, Minister of Health and Long-Term Care

Hon. Dipika Damerla, Associate Minister of Health and Long-Term Care

Hon. Brad Duguid, Minister of Economic Development

Hon. Jeff Leal, Minister of Agriculture, Food and Rural Affairs

Hon. Madeleine Meilleur, Attorney General

Dr. David Mowat, Chief Medical Officer of Health (Acting)

Dr. Bob Bell, Deputy Minister of Health and Long-Term Care

Martha Greenberg, Assistant Deputy Minister (A) of Health and Long-Term Care

Roselle Martino, Executive Director, Public Health, Ministry of Health and Long-Term Care

Sharon Lee Smith, Associate Deputy Minister of Policy and Transformation

Hon. Glenn Thibeault, MPP Sudbury

Hon. France G  linas, MPP Nickle Belt

Linda Stewart, Executive Director, Association of Local Public Health Agencies

Pegeen Walsh, Executive Director, Ontario Public Health Association

**(Letter to the Editor)**

**Beer in grocery stores: there's a cost to that convenient choice**

May 11, 2015

By Dr. XXX

At its meeting of April 16, 2015, the XXX passed a motion expressing its serious concerns about the proposed increased availability of alcohol across the province. A week later, Ontario took a significant step toward making alcohol more accessible to the general public. The province announced that beer will soon be sold on the shelves of grocery stores in Ontario. Wine will likely follow.

Public opinion seems to be in favour of this direction. However, there are real financial and health costs associated with making alcohol more accessible.

The idea that increasing alcohol availability will save money for taxpayers is not true. In 2013-14, alcohol revenue and taxes generated a total of \$3 billion dollars. However, the price tag for the social, health care, and law enforcement costs associated with alcohol misuse was over \$5 billion. In simple terms, making alcohol more accessible will only cost taxpayers more money.

It may be surprising to know that alcohol is the second leading cause of death, disease, and disability in Canada. Increasing availability increases consumption but it's not just heavy drinking that leads to poor health. Even one alcoholic beverage each day can lead to several different types of diseases including cancers of the breast, colon, liver, mouth and throat. Alcohol use can raise blood pressure which can lead to stroke and, in excess, alcohol is harmful to the heart. Socially, alcohol misuse is associated with community and family disruption, including violence and the devastating impacts of impaired driving.

There is a steep price to be paid for making alcohol more accessible. The concept of convenience will cost all of us more in the end. Our elected representatives must carefully weigh the pros and cons and act responsibly to protect the health and wellbeing of all Ontarians.

## MODERNIZATION OF BEVERAGE ALCOHOL REGULATIONS IN ONTARIO

**MOTION:** WHEREAS alcohol is the second leading cause of death, disease, and disability in Canada and causally linked to over 60 diseases and injuries; and

WHEREAS 84% of SDHU adults (78% Ontario-wide) and 43% of SDHU teens aged 12-18 reported consuming alcohol in the last 12 months; and 27% of SDHU current drinkers over 12 years reported episodes of heavy drinking (5 or more drinks on one occasion at least once monthly); and

WHEREAS the Regulatory Modernization in Ontario's Beverage Alcohol Industry initiative (2014), through the Ministry of Finance and the Alcohol Gaming Commission of Ontario, has increased alcohol availability in Ontario through initiatives including VQA wine in Farmers' Markets, proposed LCBO Express Kiosks, support to industry, increased hours of sale and removal of special event and festival restrictions; and

WHEREAS the privatization of alcohol sales would set a precedent for further privatization across multiple venues throughout Ontario, such as the Government's currently proposed expansion of beverage alcohol in local supermarkets; and

WHEREAS alcohol is no ordinary commodity and decisions about its promotion and availability should be made within the broader context of alcohol's known negative societal, economic and health risks; and

WHEREAS local boards of health are required under the Ontario Public Health Standards to develop health promotion and protection strategies to mitigate against the risks of alcohol consumption and boards are held accountable under the MOHLTC Accountability Agreements for reporting on local alcohol consumption rates;

THEREFORE BE IT RESOLVED THAT the Sudbury & District Board of Health endorse the correspondence from the Association of Local Public Health Agencies to Government Ministers and the Premier (as attached) – while also informing the Premier of our serious concerns regarding the increased availability of alcohol through VQA wine in Farmers' Markets, proposed LCBO Express Kiosks, and the privatization of the sale of beverage alcohol through initiatives such as local supermarkets; and

FURTHER THAT the Sudbury & District Board of Health share these concerns and inform the community by means of an open letter; and

FURTHER THAT copies of this motion and subsequent correspondence to the community and Premier be forwarded to local Members of Provincial Parliament, Ministers of Health and Long-Term Care, Economic Development, Finance, Agriculture, Food and Rural Affairs; the Attorney General, Chief Medical Officer of Health, Assistant Deputy Ministers, Ontario Boards of Health and the Ontario Public Health Association.

1. **Contexte** – L'alcool contribue de façon importante aux maladies chroniques, aux blessures et traumatismes, aux problèmes sociaux et de sécurité. Nous savons que l'abus d'alcool est la 2e cause principale de décès, de maladies et d'invalidités au Canada et il y a un lien de cause à effet avec plus de 60 maladies dont le cancer et les blessures. À l'échelle locale, à Sudbury et dans le district, 84 % des adultes (de 19 ans et plus) et 43 % des adolescents (de 12 à 18 ans) ont consommé de l'alcool au cours des douze derniers mois. Ceci est beaucoup plus élevé que les moyennes provinciales qui sont de 78 % et 37 % respectivement.
2. **Impacts de ces changements** – Les changements proposés à la façon dont l'alcool est distribué, vendu et disponible en Ontario, visent à augmenter les revenus par le biais de taxes sur l'alcool et augmenter les choix offerts aux consommateurs. Nous savons, à partir des preuves existantes et des expériences d'autres provinces, qu'augmenter la disponibilité de l'alcool et privatiser la vente d'alcool augmenteront la consommation d'alcool, ce qui en retour entraînera plus de dangers, de blessures et de problèmes sociaux dans les communautés.
3. **Coûts/revenus** – Ces changements ont été recommandés par le Conseil consultatif de la première ministre pour la gestion des biens provinciaux qui examine comment « générer de meilleurs retours et de meilleurs revenus pour les Ontariennes et les Ontariens ». À l'heure actuelle, la province reçoit 3 milliards de dollars sous forme de dividendes et taxes venant des ventes d'alcool, mais les coûts pour les contribuables sont évalués à 5,3 milliards de dollars. Ceci est donc une baisse importante des revenus pour un seul produit chaque année.
  - ☐ Les coûts touchent tous les niveaux, y compris les soins de santé directs, le maintien de l'ordre public, le système judiciaire, le système social, le manque de productivité et les décès prématurés.
  - ☐ Au Canada, ceci représente un coût d'environ 473 \$ par année pour chaque canadien/ne en raison de l'alcool.
4. **Normalisation** – Les plus récents changements proposés viennent normaliser l'alcool encore plus dans nos communautés. Nous savons que l'alcool n'est pas un produit ordinaire et qu'en augmentant la disponibilité de l'alcool, plus précisément dans des établissements à caractère familial comme les marchés de producteurs agricoles, dans l'allée 10 de nos supermarchés et en accordant plus de permis de circonstance lors des activités et festivals, que nous

normalisons la vente et l'utilisation de ce produit. Toutes ces mesures permettent à l'alcool de devenir plus visible dans la communauté, ce qui rend nos enfants plus susceptibles de considérer que ce produit est normal.

5. **Choix des consommateurs** – Les assertions du gouvernement que ces changements augmenteront les choix des consommateurs supposent que le consommateur est bien informé des conséquences et risques associés avec ces changements. Dans ce cas, le rôle de la santé publique est de s'assurer que nos communautés et les résidents qui y travaillent, apprennent, jouent et paient des taxes, aient les renseignements nécessaires pour faire des choix avisés.
6. **MSSLD, entente de responsabilisation et NSPO** – En santé publique, nous sommes obligés de travailler avec le public pour protéger et promouvoir sa santé. Présentement, nous insistons sur les DCAFR afin de diminuer le risque associé avec l'abus d'alcool. De plus, nous travaillons avec nos partenaires et cliniciens communautaires pour mieux sensibiliser et éduquer le public sur les risques que présente la consommation excessive d'alcool. Nous soutenons nos partenaires communautaires avec diverses activités portant sur l'abus d'alcool. Notre objectif est d'avoir une utilisation sécuritaire et modérée de l'alcool chez les adultes dans notre communauté



1. **Context** - Alcohol is a significant contributor to chronic diseases, injuries, and social and safety problems. We know that alcohol misuse is the 2<sup>nd</sup> leading cause of death, disease and disability in Canada and causally linked to over 60 diseases, including cancer and injuries. Locally in the Sudbury & District 84% of adults (19 years of age and over) and 43% of teens (12 to 18 years of age) have consumed alcohol in the last 12 months. These are significantly higher than the provincial averages which are 78% and 37% respectively.
2. **Effects of these changes** - The proposed changes to the way alcohol is distributed, sold and available in Ontario have been made to increase revenue through alcohol taxation, and to increase consumer convenience and choice. But we know from the available evidence and experience from other provinces that increasing alcohol availability and privatization of alcohol sales leads to an increase in alcohol consumption, which in turn leads to an increase in harms, injuries and societal issues in our communities.
3. **Costs/revenue** – These changes have been recommended by the Premiers Advisory Council on Government Assets which has been advising the Premier on “how to generate better returns and revenues for Ontarians”. Currently, the province receives \$3 billion in dividends and taxation from alcohol sales, but the cost to taxpayers is estimated to be \$5.3 billion. This is a significant yearly loss due to a single substance.
  - These costs are incurred at every level, including direct health care, law enforcement, our judiciary system, our social system, lost productivity, and premature deaths.
  - In Canada this amounts to an estimated \$473 per year in cost to each and every Canadian due to alcohol.
4. **Normalization** – The most recent proposed modernizations further normalize alcohol in our communities. We know that alcohol is no ordinary commodity and by increasing alcohol availability, in venues that are family centered such as our local Farmers’ Markets, aisle 10 at your local supermarkets and expanding the Special Occasion Permits for our community events and festivals, we normalize the sale and use of the product. All of these measures allow alcohol to become more visible in the community, exposing our children to a perception of alcohol being a normal and ordinary commodity.
5. **Consumer choice** – The Government’s assertions that these changes will increase consumer choice is one that assumes that the consumer is well informed of the consequences and risks associated with these changes. Public Health’s role is to ensure that our communities, and the residents that work, learn, play, and pay taxes here have the information they need to make an informed choice. As a community advocate for healthy and safe communities, (I) or the SDHU encourages Ontarians to inform themselves of the negative health, safety, and social effects of the proposed changes.
6. **Action** – there continues to be an opportunity for concerned citizens to advocate to their local MPP. These proposed changes are included in the Ontario Budget 2015; currently the budget is at committee stage, allowing for opportunities for advocacy.

(Lettre aux rédacteurs)

Bière dans les épiceries : la commodité entraîne des coûts

Le 11 mai 2015

Par la Dre x - médecin-hygiéniste/directrice générale

À sa réunion du 16 avril 2015, le Conseil de santé de x a adopté une motion pour exprimer ses inquiétudes graves concernant l'augmentation de la disponibilité proposée de l'alcool en Ontario. Une semaine plus tard, l'Ontario a pris une décision importante pour rendre l'alcool plus accessible au public. La province a annoncé que la bière sera vendue bientôt dans les épiceries en Ontario. Le vin sera aussi disponible éventuellement.

L'opinion publique semble en faveur de cette décision. Cependant, il y a de vrais coûts financiers et de santé lorsqu'on veut rendre l'alcool plus accessible.

L'idée qu'une augmentation de la disponibilité de l'alcool va permettre de faire économiser de l'argent aux contribuables n'est pas vraie. En 2013-2014, les revenus d'alcool et de taxes ont atteint un total de 3 milliards de dollars. Cependant, les coûts au niveau social, dans les soins de santé, et le maintien de l'ordre public pour ce qui est de l'abus d'alcool étaient de plus de 5 milliards de dollars. En fait, rendre l'alcool plus accessible va coûter plus cher aux contribuables.

Il peut être surprenant d'apprendre que l'alcool est la deuxième cause principale de décès, de maladie et d'invalidité au Canada. Une plus grande disponibilité augmente la consommation et ce n'est pas seulement la consommation excessive qui cause des problèmes de santé. Même une seule boisson alcoolique par jour peut causer plusieurs différents types de maladies y compris les cancers du sein, du côlon, du foie, de la bouche et de la gorge. La consommation d'alcool peut augmenter la tension artérielle, ce qui peut causer aussi un accident vasculaire cérébral et dans les cas où l'on consomme beaucoup trop, l'alcool est dangereux pour le cœur. Au niveau social, l'abus d'alcool entraîne des problèmes dans la communauté et la famille, dont la violence et les effets dévastateurs de la conduite en état d'ébriété.

Il y a un gros prix à payer pour rendre l'alcool plus accessible. Le concept de commodité va tous nous coûter plus à la fin. Nos représentants élus doivent évaluer avec soin les avantages et les inconvénients et agir de façon responsable pour protéger la santé et le bien être de toute la population ontarienne.