



“ The rise in alcohol consumption in ... developing nations where health and economic systems are weakest, is of great concern to the WHO.”

—Dr. Mary Jansen, Director of WHO Substance Abuse Department, quoted in *The Globe*, 2000

## Alcohol Policy Goes Global

Alcohol problems have reached epidemic proportions in many developing countries and the time for action is now, say researchers. According to the World Health Organization's *Global Status Report on Alcohol*, alcohol is responsible for 3.5% of global death and disability, one third higher than tobacco-related illnesses and six times higher than morbidity and mortality associated with illegal drugs.

Rising rates of problem drinking and per capita alcohol consumption in Hungary, Russia, Moldova and Lithuania, for example, are leading to increases in chronic liver disease and cirrhosis, alcohol dependence, preventable injuries, violence and declining life expectancy, particularly among men. The authors of the WHO report blame weak controls on alcohol, aggressive marketing by international corporations, and trade agreements that liberalize access to markets in both industrialized and developing nations, sometimes at the expense of public health and safety.

On August 3-5, 2000 some 200 researchers and activists from around the world gathered at the *Global Alcohol Policy Advocacy Conference* in Syracuse to discuss the situation. The consensus: there is a need for an international network of organizations independent of the alcohol industry to advocate at the international and national levels for policies that reduce alcohol-related harm.

Among other things, the proposed new global network would disseminate information internationally on effective alcohol policies and policy advocacy, promote research on the social and health impacts of international trade agreements, and monitor the activities of the alcohol industry. For a longer discussion of the move towards a global alcohol policy, see the September 2000 issue of the *WHO Bulletin* [www.who.int/bulletin/pdf/2000/issue4/bu0534.pdf](http://www.who.int/bulletin/pdf/2000/issue4/bu0534.pdf). To download a copy of the *Global Status Report on Alcohol*, go to [whqlibdoc.who.int/hq/1999/WHO\\_HSC\\_SAB\\_99.11\\_pp1-112.pdf](http://whqlibdoc.who.int/hq/1999/WHO_HSC_SAB_99.11_pp1-112.pdf).

### Excerpt from the Consensus Statement Adopted at Global Alcohol Policy Advocacy Conference, 5 Aug 2000

Just as individuals are responsible for their actions regarding alcohol, larger entities must also act responsibly. Governments have a duty to safeguard the rights of citizens and especially children and young people, to protection from the harmful actions of others. We affirm these rights to be:

- **The right to safe environments.** All people have the right to a family, community and working life protected from injuries, violence and other negative consequences of alcohol consumption.
- **The right to know.** All people have the right to valid impartial information and education starting early in life on the consequences of alcohol consumption.
- **The right to protection of young people.** All children and adolescents have the right to grow up in an environment protected from the negative consequences of alcohol consumption and, to the extent possible, from the promotion of alcoholic beverages.
- **The right to health services.** All people with hazardous or harmful alcohol consumption and members of their families have the right to accessible treatment and care.
- **The right to abstain from drinking.** All people who do not wish to consume alcohol or who cannot do so for health and other reasons, have the right to be safeguarded from pressures to drink and to be supported in their non-drinking behaviour.

# Round Up

“ Got a question? comment? announcement? Pre-register for the new APOLNET Listserv, [www.apolnet.org](http://www.apolnet.org). ”

## CIHR announces addictions institute

On July 25, the Canadian Institutes of Health Research (CIHR) finally unveiled the 13 virtual institutes that will fund research on the biomedical, clinical, social, cultural, policy, service delivery and other factors that affect the health of Canadians. Among them were institutes focusing on Neurosciences, Mental Health and Addiction; Aboriginal Peoples' Health; Human Development and Child and Youth Health; and Population and Public Health. While the state of addictions funding in Canada is dismal — according to a background paper prepared by Eric Single, Louis Gliksman and Jacques LeCavalier, the US funded six times as much addiction research in Canada as the did the Canadian government in 1998-99 — some addictions researchers expressed disappointment at seeing addictions lumped with other large and more high profile areas of scientific inquiry. Whether the Institutes live up (or down) to expectations will depend on the guidance of the scientific directors and advisory board members to be in place by the new year. For updates, check the CIHR website at [www.cihr.ca](http://www.cihr.ca).

## StatsCan releases report on alcohol sales

On June 22, Statistics Canada released the latest annual edition of *Control and sale of alcoholic beverages in Canada*. Some highlights: per-capita sales of alcoholic beverages increased for the second straight year. Individual Canadians aged 15 and over bought an average of 102.6 litres of alcoholic beverages in 1998/99, compared with 99.2 litres the year before. This worked out to 6.1 litres of spirits, 11.2 litres of wine and 85.3 litres of beer per person aged 15 and over, compared to 7.1 litres of spirits, 11.3 litres of wine and 97.3 litres of beer in 1988/89. Volume sales of red wine and spirit-based coolers increased by 10% and 32.7%

respectively. Overall, Canadians spent \$12.4 billion on alcohol in 1998/99, up 5.6% over the previous year. For details see [www.statcan.ca:80/Daily/English/000622/d000622b.htm](http://www.statcan.ca:80/Daily/English/000622/d000622b.htm).

## Manitoba docs call for lower drinking age

In May, the College of Physicians and Surgeons of Manitoba released a report recommending that the province raise the legal drinking age from 18 to 21, and introduce a graduated licensing system similar to Ontario's. The proposal, a bid to reduce injury rates among young people, has been criticized by the hospitality industry. It remains to be seen whether consultations on provincial liquor legislation will yield any action on this front. Proposed changes to the province's impaired driving laws, however, appear to be meeting with less resistance and will likely receive a hearing at public consultations later this year. Meanwhile, MADD Canada continues to lobby for expanded graduated licensing systems that would see drivers under 21 maintain a zero Blood Alcohol Level at all times while behind the wheel. For details on MADD's model legislative framework, see *Rating the Provinces* on MADD Canada's website, [www.madd.ca/library/prov2000/index.htm](http://www.madd.ca/library/prov2000/index.htm).

## Feds, provinces tackle early childhood education

On September 11, the federal and provincial governments (with the exception of Quebec), issued a joint statement on early childhood education. They agreed to support children and their families, from the prenatal period to age six, by 1) promoting healthy pregnancy, birth and infancy, 2) improving parenting and family supports, 3) expanding early childhood development, learning and care, and 4) strengthening community supports. They also agreed to report annually on investment, progress and outcomes in

each of these four areas. The announcement builds on the findings of *Towards a Healthy Future: Second Report on the Health of Canadians* published in 1999. It was welcomed by activists fresh from commemorating the second *International Fetal Alcohol Syndrome Day* on September 9. *Towards a Healthy Future* and early childhood development materials are available on the Health Canada website [www.hc-sc.gc.ca](http://www.hc-sc.gc.ca). For background information on FAS, see [www.fas-saf.com](http://www.fas-saf.com). For information on the international day, contact Bonnie Buxton at FASWorld, 416-264-8000, email: [fasworldcanada@home.com](mailto:fasworldcanada@home.com).

## Feds target drinking and driving laws, drug policy

*Bill C-18, An Act to amend the Criminal Code (impaired driving causing death and other matters)* received Royal Assent on June 29. The bill increased the maximum penalty for impaired driving causing death to life in prison, and expanded police powers to test for impairment due to drugs in situations involving death or injury. The bill builds on the recommendations of the Standing Committee on Justice and Human Rights in the groundbreaking 1999 report, *Towards Eliminating Impaired Driving*. Meanwhile, a Senate Special Committee on Illegal Drugs has begun conducting research and holding public consultations on Canadian drug policy. While alcohol is not explicitly included in the review, it will likely come up in discussions as its social and economic costs exceed those associated with illegal drugs. Alcohol is also a key component of the *Canada Drug Strategy*. For more information, see the new *Federal Substance Abuse Policy and Impaired Driving Action Packs* on APOLNET, [www.apolnet.org/actpacks](http://www.apolnet.org/actpacks).

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## Workers, airlines commemorate International Zero Air Rage Day

July 6 is **International Zero Air Rage Day**. The campaign, launched by the International Transport Workers' Federation, raises awareness of the risks of disruptive passenger behaviour to air and worker safety. While the factors associated with the problem are varied, there have long been suspicions that overservice of alcohol at airport bars and lounges, and on airlines plays a role. In June, a Subcommittee of the Standing Senate Committee on Transport and Communications released a comprehensive report on air safety and security. Among other things, it recommended that the Canadian government: 1)"develop a concerted approach to the problem of disruptive passengers;" 2) amend the *Criminal Code* to facilitate the work of enforcement officers when dealing with disruptive passengers who are not Canadian citizens; 3) change the *Canadian Aviation Regulations* to allow carriers to deny boarding to those who pose potential threat to safety; and 4) push for an international treaty that will give authority and jurisdiction to the international air community to effectively deal with the problem. A month later, Transport Canada responded by agreeing to gather and analyze data on incidents relating to interference with crew members in order to develop better ways of preventing and managing incidents. It will continue to support the *crew member interference/unruly passenger zero tolerance public awareness campaign* launched last year. It will work to increase awareness of those in the justice system to the dangers created by unruly passenger behaviour and interference with crew members and support the distribution of the informational guide, *Unruly Passengers: The Police Response*, to air operators, crew members and police services with airport jurisdiction. It will amend the *Canadian Aviation Regulations* to a) allow air operators to bar passengers who may pose

risk to safety, and b) require training for crew members on how to prevent and manage unruly passenger incidents. Finally, it will work with Justice Canada to make interference with cabin crew a *Criminal Code* offence. So far, no alcohol-related recommendations have come forward, although a small group headed by CAMH Senior Scientist, Norman Giesbrecht, has begun looking into the matter. For more info on air rage, visit Transport Canada, [www.tc.gc.ca/releases/nat/00h053e.htm](http://www.tc.gc.ca/releases/nat/00h053e.htm) or CUPE's Airline Division, [airdiv.cupe.org/airrage.phtml](http://airdiv.cupe.org/airrage.phtml).

### SAQ opens first bulk liquor store

The Société des Alcools du Québec (SAQ) is making history. It opened North America's first discount warehouse liquor store in Hull this spring and has plans for others. According to the *Ottawa Citizen*, the store will sell spirits in bulk for around \$35 for a 1.75-litre (60 oz.) bottle, \$10 less than the cheapest brand available in either Ontario or Québec. Interestingly, the 21,000-square-foot space is smaller than the new 30,000 square-foot LCBO store five minutes away in Ottawa. The recent overhaul of retail liquor outlets in Central Canada and elsewhere is creating some concern for alcohol researchers who note that increased accessibility to alcohol — longer hours, larger outlets, lower-priced products, etc. — is associated with increases in health and social problems ranging from violence to injuries to alcohol addiction. Meanwhile, the Nova Scotia government is considering privatizing its liquor wholesale, distribution retail operations. Labour and health and safety groups have expressed concerns over the move. In June, the leaders of the opposition tabled a petition against privatization with nearly 10,000 signatures. Not to be deterred, supporters of the proposal such as the Tourism Industry Association of Nova Scotia (TIANS), are mounting their own campaigns. For updates on the privatization debate, visit [www.apolnet.org](http://www.apolnet.org).

## Research Corner

*Below is a collection of articles on alcohol and youth published in the last three months. For copies or to borrow a journal contact the CAMH-ARF Library, [isd@camh.net](mailto:isd@camh.net), 416-535-8501 ext. 6144.*

Appleby, Eric (Sep 2000). *Selling drink to underage adolescents and getting away with it. **Addiction** 95 (9) 1315-1316.*

Barrios LC et al (2000). *Suicide ideation among US College Students: associations with other injury risk behaviors. **Journal of American College Health**, 48:229-33.*

Bell, Nancy J et al (2000). *Attachment, Adolescent Competencies, and Substance Use: Developmental Considerations in the Study of Risk Behaviors. **Substance Use and Misuse** 35(9) 1177-1206.*

Clapp JD et al (2000). *Deconstructing contexts of binge drinking among college students. **American Journal of Drug and Alcohol Abuse** 26:139-154.*

Hingson, RW et al (Sep 2000). *Age of Drinking Onset and Unintentional Injury Involvement After Drinking, **JAMA** 284 (12) 1527-1533. Full text at [jama.ama-assn.org/issues/v284n12/abs/joc91121.html](http://jama.ama-assn.org/issues/v284n12/abs/joc91121.html).*

Lo, Celia C and Gerald Globetti (2000). *Gender Differences in Drinking Patterns among Hong Kong Chinese Youth: A Pilot Study. **Substance Use and Misuse** 35(9) 1297-1306.*

Pate, Russell R et al (Sep 2000). *Sports Participation and Health-Related Behaviors Among US Youth. **Archives Of Pediatrics & Adolescent Medicine** 154(9) 865-968. Full text at [archpedi.ama-assn.org/issues/v154n9/toc.html](http://archpedi.ama-assn.org/issues/v154n9/toc.html).*

Quinlan KP et al (2000). *Characteristics of child passenger deaths and injuries involving drinking drivers. **JAMA** 283(17) 2249-52.*

Willner, Paul et al (Sep 2000). *Alcohol sales to underage adolescents: an unobtrusive observational field study and evaluation of a police intervention. **Addiction** 95 (9) 1373-1388.*

# News & Views

## Media Campaigns

This summer the LCBO is stepping up efforts to keep alcohol out of the hands of minors through a new poster campaign targeting "third-party purchases." Bearing the message *Buying for a minor is a major offence*, the poster highlights the legal consequences of supplying alcohol to a minor, including up to a year in jail and \$200,000 in fines. English and French posters are being displayed in all 602 LCBO stores. They are also available free of charge to health and safety groups, police and others. To order copies, call 416-864-6820 or email at [kruzele@lcbo.com](mailto:kruzele@lcbo.com).

## New Resources

If you are new to the substance abuse field or simply want to find out almost all there is know about the impact of alcohol and health, check out the *10th Special Report to the U.S. Congress on Alcohol and Health*. Released by the National Institute on Alcohol Abuse and Alcoholism (NIAAA), the report includes contributions from Canadian researchers, Susan Bondy, Jurgen Rehm and Mary Jane Ashley, and covers a breathtaking array of topics from epidemiology, to economic costs, to policy, to prevention, to treatment. For a copy go to [silk.nih.gov/silk/niaaa1/publication/10report/intro.pdf](http://silk.nih.gov/silk/niaaa1/publication/10report/intro.pdf). Those who find printing 492 pages a little daunting may order copies for US\$5 plus a 25% foreign order surcharge. The 9<sup>th</sup> Report is free. See [silk.nih.gov/silk/niaaa1/publication/publication.htm](http://silk.nih.gov/silk/niaaa1/publication/publication.htm).

Looking for quick summaries of recent CAMH surveys? The *CAMH Population Studies E-bulletin*, launched in June, may be just the ticket. Recent bulletins have focused on rave attendance, students' recall of drug education classes and geographical variations in student drug use. To subscribe to this free resource email [Maureen\\_Kothare@camh.net](mailto:Maureen_Kothare@camh.net).

In September, the Southwest Region Health Information Partnership published *A Health Profile of Youth in Southwestern Ontario*. The comprehensive report includes statistics on alcohol and other drug use, and deaths and hospitalizations due to traffic crashes, violence, crime, suicide and poisonings across the region. For a copy see [www.srhip.on.ca/SRHIP/products/adolescent.pdf](http://www.srhip.on.ca/SRHIP/products/adolescent.pdf).

## APN News: Thank-you, John Bates!

John Bates has devoted over 20 years of his life to the fight against impaired driving – the last five as a member of APN. Through his work with PRIDE, MADD Canada, Council On Drug Abuse, and countless other organizations, John campaigned successfully for many significant policies including: 1) the introduction of photo drivers' licences; 2) more responsible alcohol sales and service at licensed establishments and events, including the end of happy hour (the sales promotion, not the state of mind!); 3) Ontario's Graduated Licensing Program and 4) ignition interlocks to keep repeat offenders off the roads. His outstanding service to the community has been recognized by CAMH, MADD Canada, the Ontario government and the Governor General. John has decided to step down from the APN Coordinating Committee to spend more time with his family. *On behalf of all APN members, THANK YOU, John, and best wishes for a very happy, healthy and long retirement!*

## About Us

*Alcohol Policy Update (APU)* is a free quarterly fax-newsletter of the Alcohol Policy Network (APN), a project of the Ontario Public Health Association. Our mission is to facilitate the development of policies that prevent problems associated with alcohol use and enhance the health, safety and well-being of individuals and communities across Ontario.

APN fulfills its mission by offering a range of products and services including information and referral, regional workshops and seminars, publications and a comprehensive website called APOLNET.

APN does not take public positions on issues although its members and its host, the Ontario Public Health Association (OPHA), may do so.

Information appearing in this newsletter in no way constitutes an endorsement by OPHA or its members. Submissions are welcome. Printing is subject to space availability.

APU is distributed via fax to over 600 subscribers active in substance abuse prevention, injury prevention and public health. It is also available on APOLNET, [www.apolnet.org](http://www.apolnet.org).

For more info on this newsletter or APN's other products and services, please contact Paula Neves, Project Manager, [apn@opha.on.ca](mailto:apn@opha.on.ca), or Jennifer Hance, Web Administrator, [apolnet@opha.on.ca](mailto:apolnet@opha.on.ca).

Alcohol Policy Network

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I have the following comments/suggestions:

Excellent	Very Good	Good	Fair	Poor
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