



Alcohol Policy

UPDATE

“ Alcohol policy is not widely understood and often considered to be the domain only of those who "pick up the pieces" once the damage [is done]. ”

— *Public Opinion of Ontario Adults on Alcohol Policy Issues*, CAMH, June 2001. For free copy call 800-661-1111.

Alcohol Policy Revisited - Part 1

What is alcohol policy?

The mission of the Alcohol Policy Network is to facilitate the development of policies that prevent problems associated with alcohol, and promote the health and safety of individuals and communities across Ontario. Among other things, we believe that individuals have the right to be involved in decisions that affect their health and the health of their communities. That is we try to keep you up-to-date regarding developments in the alcohol field.

Alcohol policy sounds complex and perhaps even a little bureaucratic. We define it simply as *"what governments and institutions do, or don't do, about alcohol and the conditions and problems associated with its misuse."*

This definition recognizes that policy is not only in the purview of public institutions such as parliament, cabinet and government, but also of places where we live, work, study and play. It acknowledges that doing nothing, or keeping the status quo is policy. Finally, it recognizes that alcohol-related problems arise out of a complex relationship between the individual, the drug (alcohol) and the cultural, political, social, economic and physical environment.

We know, for example, that alcohol-related problems are not confined to a relatively small number of "alcoholics." Non-drinkers can be victims of a drinking driver, for example. And light and moderate drinkers who occasionally misuse alcohol —while *individually* responsible for fewer harms than their harder-drinking counterparts — greatly outnumber heavy drinkers within the general population and are therefore *collectively* responsible for a larger share of alcohol's burden on society.

To be effective, alcohol policy must include measures to educate the public about the consequences of alcohol misuse. It must include enforcement and harm reduction strategies to strongly discourage people from putting their own or others' health and safety at risk. More importantly, it must include regulatory and other environmental supports that promote the health of the population as a whole. Supports proven effective include: alcohol taxes; limits and conditions on days, hours, and places of alcohol sale and service; drinking and driving countermeasures; minimum legal drinking age; restrictions on alcohol advertising and promotion; and efforts to improve access to employment, health care, education, housing, recreation and political decision-making.

While some of these measures work better than others, it is the "policy mix" that is important. As the authors of the landmark publication *Alcohol Policy and the Public Good* (1995) observe: "As alcohol problems arise in many different situations and affect diversities of people, there is no one policy panacea: inevitably, the needed policies will be a mix rather than a master stroke."

In Ontario, we have a system of alcohol controls that dates back many years. Upcoming issues of *Alcohol Policy Update* will highlight some of these in an effort to orient those new to the substance abuse, injury prevention, enforcement and health fields. In the meantime check out the Alcohol Policy 101 Action Pack on APN's website, www.apolnet.org. Or call us if you are interested in hosting an orientation to the field, 101 workshop or a regional seminar on alcohol/drug policy development in educational, workplace or community settings.

Corner

Below are a few recent articles on alcohol policy and prevention issues. For copies or to borrow a journal, contact the CAMH-ARF Library, isd@camh.net, 416-535-8501 ext. 6144. For alcohol-related news items, see the APOLNET Listserv bi-weekly digest, www.apolnet.org.

Abramson, J. L., et al. *Moderate Alcohol Consumption and Risk of Heart Failure Among Older Persons*. *JAMA* 285(15):1921-2040, April 18, 2001. jama.ama-assn.org/issues/v285n15/abs/joc01975.html

DiClemente, Ralph J. et al. *Parental Monitoring: Association With Adolescents' Risk Behaviors*. *Pediatrics* 107: 1363-1368, 2001.

Hawthorne, G. *Drug education: myth and reality*. *Drug and Alcohol Review* 20 (1): 111 - 119, March 2001.

Klatsky, A.L. *Should Patients With Heart Disease Drink Alcohol?* *JAMA* 285(15): 1921-2040, Apr 18, 2001.

Kuperman, Samuel et al. *Risk domains associated with an adolescent alcohol dependence diagnosis*. *Addiction* 96(4): 629 - 636, April 2001.

Labonte, R., G. Laverack *Capacity building in health promotion, Part 1: for whom? And for what purpose? Part 2: whose use? And with what measurement?* *Critical Public Health* 11(2):111 - 138, June 2001.

Labouvie, Erich; Iana Pinsky. *Substance use and driving: the coexistence of risky and safe behaviors*. *Addiction* 96 (3): 473 - 484, March 2001.

Ludwig Kraus; Rita Augustin. *Measuring alcohol consumption and alcohol-related problems: comparison of responses from self-administered questionnaires and telephone interviews*. *Addiction* 96 (3): 459 - 471, March 2001.

Martine Stead; Anne Marie Mackintosh; Douglas Eadie; Gerard Hastings. *Preventing Adolescent Drug Use: the development, design and implementation of the first year of 'NE Choices'*. *Drugs: Education, Prevention & Policy* 8(2): 151 - 175, May 2001.

McAvoy, Brian R; Robert J. Donovan et al. *General Practitioners, Prevention and Alcohol - a powerful cocktail? Facilitators and inhibitors of practising preventive medicine in general and early intervention for alcohol in particular*. *Drugs: Education, Prevention & Policy* 8(2): 103 - 117, May 2001.

Miles, Helen; Adam Winstock; John Strang. *Identifying young people who drink too much: the clinical utility of the five-item Alcohol Use Disorders Identification Test (AUDIT)*. *Drug and Alcohol Review* 20 (1): 9-18, March 2001.

Mukamal, KJ, M. Maclure, J. E. Muller, J. B. Sherwood, M. A. Mittleman. *Prior Alcohol Consumption and Mortality Following Acute Myocardial Infarction*. *JAMA* 285(15): 1921-2040, April 18, 2001. jama.ama-assn.org/issues/v285n15/abs/joc02101.html

Munro, Geoffrey; Richard Midford, 'Zero tolerance' and drug education in Australian schools. *Drug and Alcohol Review* 20 (1): 105 - 109, March 2001.

Ogborne, Alan C.; Reginald G. Smart. *Public opinion on the health benefits of moderate drinking: results from a Canadian National Population Health Survey*. *Addiction* 96(4): 641 - 649, April 2001.

Palfai, T., Wood. *Positive Alcohol Expectancies and Drinking Behavior: The Influence of Expectancy Strength and Memory Accessibility*. *Psychology of Addictive Behaviors* 15(1): 60-67, 2001

Peeler, C.M., Far, J., Miller, J., Brigham, T.A., *Analysis of the Effects of a Program to Reduce Heavy Drinking Among College Students*. *Journal of Alcohol and Drug Education* 45(2):39-54, 2000

Poulin, Christiane, Linda Graham. *The association between substance use, unplanned sexual intercourse and other sexual behaviours among adolescent students*. *Addiction* 96(4): 607 - 621, April 2001.

Roger Farmer; Nan Greenwood. *General Practitioners' Management of Problem Drinkers - attitudes, knowledge and practice*. *Drugs: Education, Prevention & Policy* 8(2): 119 - 129, May 2001.

Springett, Jane. *Appropriate approaches to the evaluation of health promotion*. *Critical Public Health* 11(2):139 - 151, June 2001.

Stephenson, J. *Alcohol and Heart Health*. *JAMA* 285(14): 1799-1920, April 11, 2001. jama.ama-assn.org/issues/v285n14/full/jwm10003-4.html

Stockwell, Tim. *Harm reduction, drinking patterns and the NHMRC Drinking Guidelines*. *Drug and Alcohol Review* 20 (1): 121 - 129, March 2001.

Sutherland, I, JP Shepherd. *Social dimensions of adolescent substance use*. *Addiction* 96 (3): 445 - 458, March 2001.

Thompson, Kimberly M. and Fumie Yokota. *Depiction of Alcohol, Tobacco, and Other Substances in G-Rated Animated Feature Films*. *Pediatrics* 107: 1369-1374, 2001.

Wagenaar, Alexandar. *Lowered legal blood alcohol limits for young drivers. Effects on drinking, driving, and driving-after-drinking behaviors in 30 states*. *AmJPH* 91 (5): 801-5, May 2001.

Round Up

Europe goes on the offensive against alcohol

In May, a coalition of research and addictions agencies announced the launch of Phase 4 of a World Health Organization (WHO) collaborative project to identify and manage alcohol-related problems. Among other things, this project will fund the customization of screening and brief intervention materials and procedures for use in primary health care settings across England. It will also fund the development of a coordinated multimedia communications strategy to help professionals and the general public to better understand high-risk drinking. For details, please go to www.alcohol-phaseivproject.co.uk.

Mean-while, at a meeting in Luxembourg on June 5, the 15 member nations of the European Union allocated some US\$242 million towards a 6-year public health program. According to the *British Medical Journal*, the money will be used to establish a data system on determinants of health, including alcohol and other drug use, deal with international health threats, and identify effective health promotion and prevention policies. EU Council members agreed to develop a comprehensive community strategy to reduce alcohol-related harm that would complement national policies. They also supported many of the recommendations of the *Declaration on Young People and Alcohol*, adopted in Stockholm in February. The Declaration reaffirms the five principles of the *European Charter on Alcohol* as well as the goals of the *European Alcohol Action Plan, 2000-5* by setting specific targets to reduce underage drinking over the next five years. These targets underline the need to significantly reduce the number of young drinkers; delay the onset of drinking; establish stronger controls on alcohol availability, promotion and sponsorship; expand alcohol-free environments; introduce mandatory server training and strengthen the enforcement of drink-driving laws and prohibitions on sales to minors and the intoxicated. For links to these documents, please visit the Hot Issues section of APOLNET, www.apolnet.org.

“ Got a question? comment? announcement? Get connected!
Join the APOLNET Listserv, www.apolnet.org/subscribe.html.”

Toronto Council approves ground-breaking Cancer Prevention Report

At its May-June meeting, Toronto City Council endorsed the Toronto Cancer Prevention Coalition's groundbreaking *Action Plan for Cancer Prevention in the City of Toronto*. The report recognizes alcohol as a risk factor for cancer, along with tobacco, an unhealthy diet, physical inactivity, ultraviolet radiation and occupational and environmental carcinogens. Among other things, it recommends that the city: 1) support restrictions on alcohol availability by advocating for a) rigorous government controls on alcohol sales, service, advertising and promotion, b) prices and taxes that support low-risk drinking, and c) mandatory server training for all licensees; 2) support the dissemination of accurate and up-to-date information on the links between alcohol and cancer by a) explicitly recognizing alcohol as a risk factor in its cancer prevention activities and b) endorsing and educating Toronto residents about the Low-Risk Drinking Guidelines; and 3) support targeted education by a) encouraging the Toronto School Board to build into its health programs strategies that delay the onset of drinking and promote low-risk drinking practices, and b) working collaboratively to develop and disseminate clinical practice guidelines to health professionals and encourage risk reduction practices among their patients/clients. The Medical Officer of Health has been asked to convene a roundtable of city departments, Cancer Coalition members and other stakeholders to develop an implementation plan and report back to Council by the end of the year. For links to the full report visit the Hot Issues section of APOLNET.

Feds launch FAS awareness campaign; consult on warning labels

On May 3, the federal government launched a national awareness campaign on the dangers of alcohol use during pregnancy. The campaign features a poster and a pamphlet bearing the stark message **Alcohol Policy Update**

"Pregnant? No alcohol" and encouraging those who want more information on fetal alcohol syndrome to talk to a health practitioner or contact Health Canada. PDF versions of both resources are available online at www.fas-saf.com. A complementary campaign for First Nations and Inuit people is being developed. To order campaign materials or for more information call 613-954-5995. On the policy front, the government appears to be taking seriously a House of Commons motion calling on the Minister of Health to impose mandatory warning labels on alcohol containers. The motion by Winnipeg North Centre MP, Judy Wasylycia-Leis, was adopted April 23 with nearly unanimous support from all members of the House. Health Canada sources indicate that quiet consultations have begun with provincial health ministries and addictions agencies, alcohol industry representatives and health and children's organizations, among others, to gauge the views of various stakeholders and the degree of support for policy change. For more information, please contact Cathy Airth, 613-957-8337 or Dennis Lein, dennis_lein@hc-sc.gc.ca. To exchange views and information on alcohol warning labels, subscribe to the APOLNET listserv. Meanwhile, the Food Directorate continues to hold public consultations on new mandatory nutrition labels, as well as the wording of generic health claims for food products. Beverages with an alcohol content equal to or greater than 0.5% are exempted from carrying nutritional labels. However, the health claim on high blood pressure does acknowledge "excessive alcohol consumption" as a risk factor — a move welcomed by those in the health field calling for a similar acknowledgement in claims related to cancer and coronary heart disease. Interestingly, focus testing on the proposed health claims found that readers equated excessive alcohol consumption with alcoholism, rather than with drinking above the 0-2-9-14 Low-Risk Drinking Guidelines. These were endorsed by the Canadian

Hypertension Society and others in the *Canadian Medical Association Journal* May 1999 Supplement on Hypertension. To view the alcohol recommendations go to www.cma.ca. For details on the nutrition labels consultation ending September 14, visit www.hc-sc.gc.ca/food-aliment.

AGCO takes over regulation of private alcohol delivery services

On July 3, the Alcohol and Gaming Commission of Ontario (AGCO) assumed responsibility for regulating private alcohol delivery services across the province. This little known program has been operated by the LCBO for some forty years, ostensibly to prevent drinking and driving and meet the needs of shut-ins and others unable to purchase alcohol directly. Operators received an authorization from the LCBO to deliver alcohol within a designated region. Under new regulations published in the *Ontario Gazette* on January 20, 2001, operators will now be required to apply for a Liquor Delivery Service Licence, renewable every two years. Before making a purchase from a liquor or beer store, the licensee must have an order. Alcohol must be delivered on the day it is purchased and up to an hour after the store closes. Purchasers must sign a receipt. No liquor may be delivered to, or accepted by, individuals under 19, or to institutions such as addictions treatment facilities, hospitals, etc. Operators must charge a minimum delivery fee ranging from \$4 to \$6 depending on the region. Advertising may indicate that the operator is licensed to deliver alcohol from a government store to a residence, the type of alcohol available for delivery, as well as contact information and delivery fees. More specific ads must be pre-approved by the AGCO. The legal and health and safety ramifications of this program will be discussed on the APOLNET listserv in August. Visit the APN website for background material. Or contact the AGCO, 416-326-0404, www.agco.on.ca.

News & Views

Missing a few issues of *Alcohol Policy Update*? Past features examined alcohol-related air rage, workplace alcohol liability and global alcohol policy. Visit APOLNET, the Alcohol Policy Network's Online Service, www.apolnet.org, to download your copy.

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.

For more information on this newsletter or APN's other products and services, please contact Paula Neves, Project Manager, apn@opha.on.ca, or Ana Almeida, Web Development and Training Consultant, apolnet@opha.on.ca.

Upcoming Events

The 44th International ICAA Conference on the Prevention and Treatment of Dependencies will take place in Heidleberg, Germany, **September 2-6, 2001**. The theme of this year's meeting is "Science Meets Practice." For details, please visit the website of the International Council on Alcohol and Addictions, www.icaa.ch. The 14th Annual National Prevention Network Conference (US) will take place **September 9-12, 2001** in Charlotte, North Carolina. For program and registration information, visit www.ccfcd.com/npn. Those looking for an event closer to home may want to check out the *Kids Health Conference* organized by the Ontario Physical and Health Education Association (OPHEA) at the Geneva Park Conference Centre in Orillia, **October 11-13, 2001**. OPHEA manages the ACTION Program, supports the provincial healthy, active living curriculum and recently received funding to establish a new School-based Curriculum Resource Centre. For details, email info@ophea.net. More info on these and other events and campaigns is also available on APOLNET's new interactive calendar.

Campaigns

On July 23, MADD Canada and the LCBO unveiled another hard-hitting series of public service announcements in their ongoing joint campaign to inform men aged 25-34 that drinking and driving is a choice, not an accident. The 30-second English TV spot, dubbed "First Steps," will be broadcast over 10 weeks between now and the December holiday season. The bilingual radio PSAs, called "You should have been there/T'aurais dû être là," will run in 18 English and seven francophone Ontario markets over the August and September long-weekends. For copies of the PSAs or other campaign materials, please contact Elizabeth Kruzel, 416-864-6820, elizabeth.kruzel@lcbo.com.

New Resources

In June, the Centre for Addiction and Mental Health released a comprehensive set of lesson plans for grades 9-10 in keeping with the learning expectations of the new Ontario curriculum. *Educating Students about Drug Use and Abuse, Grade 9-10*, is available in English and French and in Catholic and Public School versions. To download a free copy, go to sano.camh.net/curriculum. Meanwhile in April, the LRDG Committee distributed a comprehensive *Low-Risk Drinking Guidelines Campaign Kit* to over 250 contacts across Ontario. Among other things, the free kit contains a list of 35 Frequently Asked Questions, Ideas for Promoting the Guidelines, background research, campaign materials and tips for working with the media. To download your copy, visit the LRDG Action Pack on APOLNET, or the soon-to-be launched website, www.lrdg.net. Finally, check out two recently released "best practices," one on alcohol interlock programs, published by Traffic Injury Research Foundation, the other on the prevention of fetal alcohol syndrome, published by Health Canada. For links to both publications, other policy-related exemplary practices, and CAMH's forthcoming review of what works in alcohol/drug abuse prevention, visit the new *Resources/Best Practices* section of APOLNET.

APN News: Ana's back!

APN is pleased to welcome back freelance consultant, **Ana Almeida**. Ana was a full-time staff member of APN for five years and most recently held the position of Event and Membership Manager at the Recycling Council of Ontario. Among other things, she will be responsible for moderating the APOLNET listserv, updating the APN website, piloting the new Key Contacts and Educational Materials Databases and helping to organize regional orientation and training events. Ana can be reached at 416-367-3313 ext 23.

Alcohol Policy Network

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I would rate this issue of *Alcohol Policy Update* as ...

Excellent	Very Good	Good	Fair	Poor
1	2	3	4	5