Reducing Alcohol Harms:
A Primer for Municipalities in Grey-Bruce

When building a healthy community, local governments, including municipalities, play a key role in fostering, promoting, and modelling healthy environments and healthy behaviours. The following document provides an overview of alcohol use and related health impacts to help support communities in having informed discussions about reducing harms.

Risks to Community Safety and Well-being [1,2]

Alcohol is the most-used substance in Ontario and Grey Bruce. While high rates of use are noted in data, it should be stated that data for alcohol consumption is self-reported, meaning rates are typically under-reported and likely higher than what current data reflects.

39.1% of Grey-Bruce residents aged 12 and older are exceeding what is considered a low-risk level of alcohol consumption, according to Canada's Guidance on Alcohol and Health (had 3 or more standard drinks in the past 7 days).

Injuries, Violence & 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. Even individuals who do not consume alcohol can experience secondary effects as a result of impaired driving, intimate partner violence, and public disturbances.

Alcohol is the leading preventable cause of disability, social problems, and death. This includes cancers, liver disease, cardiovascular disease, unintentional injuries, and violence.

Youth [4,5,6,7]

According to the Ontario Student Drug Use and Health Survey, 35.6% of students between grades 7 and 12 in Ontario reported using alcohol in the 12 months before the survey.

Increased alcohol availability in areas frequented by youth can normalize and encourage alcohol use. Early initiation of alcohol consumption has harms for youth including alteration to brain development. Regulating alcohol availability can help address these harms.

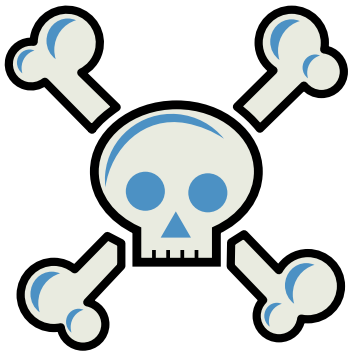
Deaths, Hospitalizations, & Emergency Department Visits from health conditions attributable to Alcohol (age 15 and older, Grey-Bruce) [8]

3501

E.D VISITS

357

HOSPITALIZATIONS



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DEATHS

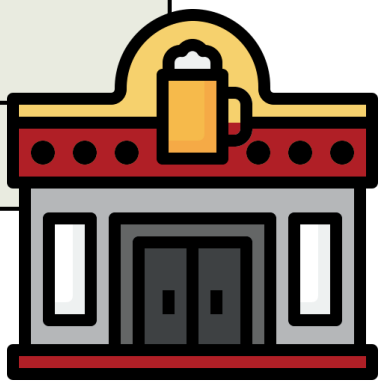
The most recent five years of data available were used to calculate the average annual total number of deaths, hospitalizations and emergency department visits.

Ontario Health and Ontario Agency for Health Protection and Promotion (Public Health Ontario). Burden of Health Conditions Attributable to Smoking and Alcohol by Public Health Unit in Ontario. Toronto: King's Printer for Ontario; 2023.

Alcohol Outlet Density [6,9,10]

On-premise: licensed establishments, such as restaurants & bars.
Off-premise: Retail outlets, such as the LCBO, The Beer Store, convenience outlets, and grocery stores.

Alcohol Outlets	**In Grey Bruce** (Effective Aug 2024) (per 10,000)	**Best Practice** (per 10,000 people 15 and older)
On-premise	19.8	15
Off-premise	3.9	2



Research shows there is a relationship between the density of on and off-premise alcohol outlets and alcohol harms. Higher alcohol outlet density can result in more alcohol consumption, and increased rates of alcohol-related emergency department visits.

Grey Bruce currently **exceeds the recommended threshold**, and any further increase in alcohol outlet density may result in additional consumption and harm.

Costs [11,12]

In 2020/2021, alcohol cost Ontarians more than $7 billion directly (e.g. healthcare and enforcement) and indirectly (e.g., lost productivity).

A common misconception is that alcohol produces revenue for the province of Ontario. Alcohol generated just over $5 billion in revenue, which, when factoring in societal costs and harm, results in a **$1.9 billion deficit** per year in Ontario – a loss of $0.34 per standard drink sold.

Substance use-attributable costs, Ontario 2020

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

Provincial Alcohol Retail Landscape

2015	2019	2020	2024
Expansion of alcohol sales to grocery stores, with approx. 450 participating locations.	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 outlets and schools or healthcare facilities).

What can local governments do?

Regulate alcohol in public spaces & events [5,6,13]

Allowing alcohol use in public spaces can create a sense of normalization, which may increase alcohol-related harms through risks to public safety and increased consumption.

- Avoid making changes that allow for the consumption of alcohol in public spaces.
- Maintain, update, and evaluate your Municipal Alcohol Policy to manage alcohol consumption on municipally owned properties.
  - Contact GBPH for assistance with developing or updating a Municipal Alcohol Policy.
- Regulate and restrict alcohol marketing, advertising, and sponsorship on a local level. Prohibit advertising in public spaces, at special events, etc.
- Provide incentives for community event organizers looking to promote alcohol-free events (e.g., lower booking fees, priority dates, etc.)

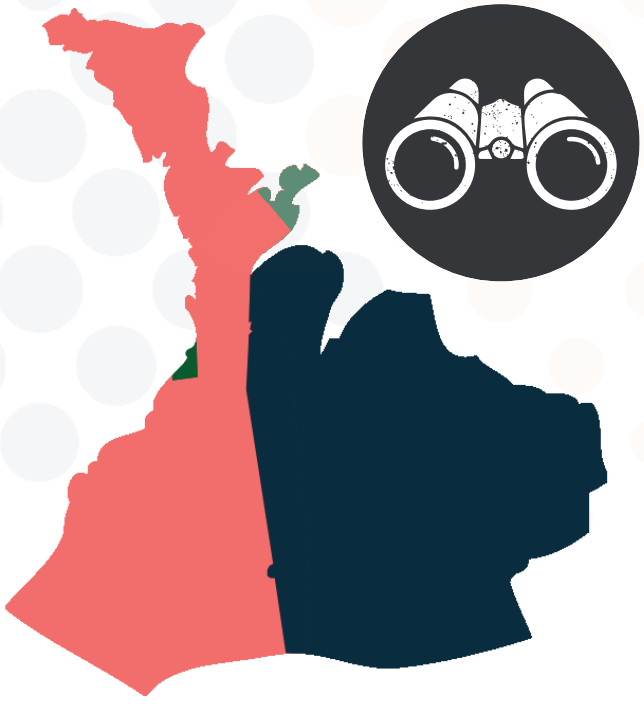
Work with other levels of government [13,15]
Municipalities know their communities best and see the local impact of policies at all levels. Municipalities can advocate to higher levels of government to endorse evidence-based policies to reduce alcohol-related harms.

How?

- Advocate for more control at the municipal level such as through the ability to have input on retail outlet density and keeping the public notice requirement for liquor license applications.
- Advocate for a Provincial Alcohol Strategy that prioritizes health and safety and considers strategies to address pricing, marketing, access, and alcohol labeling.
- Advocate for additional measures to reduce harm, including increased fines and license fees.

Modify land use planning [5,6,13,14]
Community-level harms, such as injury, acute and chronic disease and poor mental health, can increase as the density of alcohol outlets increases.

- Zoning options related to alcohol retail density and location can help to address increased alcohol availability.
  - Consider minimum distances from areas, such as schools, parks, treatment facilities, and hospitals.



Monitor alcohol harm locally [15]
Understanding what's going on at a local level is vital to making healthy public policy decisions that support your community.

- Collaborate with GBPH to monitor alcohol availability and alcohol-related harms at a local level.
  - This may include monitoring changes in local outlet density and collecting data on alcohol-related emergency calls
- Collaborate with local police and other service providers to monitor the trends in alcohol use and risky behaviours (such as impaired driving, rates of intimate partner violence & public disturbances, etc.)

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