

# Alcohol Policy for Community Safety, Vibrancy, Health and Well-Being

## A Practical Guide for Alberta Municipalities



December 2022

This guide was developed by Provincial Addiction Prevention, Alberta Health Services.

This edition was completed December 5, 2022.

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To cite this guide: Alberta Health Services. (2022). *Alcohol policy for community safety, vibrancy, health and well-being: A practical guide for Alberta municipalities*. Calgary, AB: Author.

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The Canadian Institute for Substance Use Research gave Alberta Health Services (AHS) permission to reproduce sections of *Helping Municipal Governments Reduce Alcohol-Related Harms: Limiting Alcohol Availability, Ensuring Safer Drinking Environments, Reducing Drinking and Driving, Limiting Alcohol Availability, Strengthening the Community, and Advocating to Other Levels of Government* for this guide.

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Finally, the [Nova Scotia Federation of Municipalities](#) (formerly the Union of Nova Scotia Municipalities) gave AHS permission to reproduce sections of *Progressive and Prosperous: Municipal Alcohol Policies for a Balanced and Vibrant Future, A Municipal Alcohol Policy Guide for Nova Scotia Municipalities* for this guide.

The story relayed about Lloydminster in the section "Real Communities, Real Issues, Real Solutions" originally appeared in the Winter 2017 edition of *Apple Magazine*, written by Valerie Berenyi. This story was adapted with permission from Alberta Health Services.

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# Acknowledgements

The AHS Provincial Addiction Prevention team would like to recognize and thank the Nova Scotia Health Authority, the Nova Scotia Federation of Municipalities and the Canadian Institute for Substance Use Research for generously sharing their work. Allowing us to reproduce sections of their resources minimizes duplication and helps ensure that their wisdom, expertise and guidance is further disseminated to those who can use it to make a positive difference in their communities.

Many municipalities and community drug coalitions participated in interviews and/or shared their stories to help make this guide a reflection of the great work occurring in Alberta.

- City of Airdrie
- City of Calgary
- City of Lloydminster
- Brooks and District Drug Task Force
- Hanna and District Youth Council
- Town of Hanna
- City of Brooks
- City of Edmonton
- City of Wetaskiwin
- Coalition for Action on High Risk Drinking
- Strathcona County Drug Strategy
- YLL My Home (Lloydminster & Area Drug Strategy)

The 2017–18 Alberta Municipal Alcohol Policy Project (AMAPP) Advisory Committee was instrumental in providing guidance to AMAPP as a whole and for reviewing this guide. The 2018–19 advisory provided ideas as the AHS team moved to the implementation of the guide and its support process during the January to June 2019 pilot.

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We would also like to thank Gwenth Dwyn, from Mental Health and Addiction Services, Nova Scotia Health Authority, for her consultation and review of this guide.

Thank you as well to the Alberta Urban Municipalities Association (AUMA), particularly policy analysts Jared Cathro and Kelly Santarossa, and the 2017/18 Safe and Healthy Communities Committee.

Thank you to our AHS colleagues for their support, consultation and guidance:

- Lauren Stahl, Healthy Public Policy Unit
- Joe Kennedy, Cathy Work, Community, Seniors, Addiction and Mental Health
- Panteha Khalili, Knowledge Exchange, Primary and Community Care
- Stephanie Phare, Ashlyn Sawyer, and Alice Ndayishimiye, Knowledge, Performance & Integrated Planning

Finally, thank you to the municipal staff, municipal elected officials, community members and AHS local staff from 8 municipalities who pilot tested the guide and AHS's support process from January to June 2019. Their policy exploration to reduce alcohol-related harms put this guide and support process into action.



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# Introduction



Our municipalities are the communities in which we live, learn, work and play. Alberta municipalities are both committed, and well-positioned, to create vibrant communities where Albertans can thrive. Evidence shows that through the development of preventative alcohol policies, municipalities can realize a host of benefits that go far beyond improved health and safety, such as reduced community disruption, reduced demand on security and police resources, and reduced costs to taxpayers. Municipalities across Canada are taking steps to improve the well-being of their citizens and communities through alcohol policy development. Alberta Health Services is committed to supporting Alberta municipalities in this important process.

This guide is one part of the Alberta Municipal Alcohol Policy Project (AMAPP), a project developed to address a key priority under the Alberta Alcohol Strategy: “Foster the development of context-specific alcohol policies.”<sup>1</sup>

The AMAPP project is multi-phased, with four goals:

1. Create awareness about the
  - a. effectiveness of **municipal alcohol policy** as a key tool to reduce alcohol-related harm
  - b. **alcohol policy** options that are under municipal jurisdiction in Alberta
2. Increase the number of, or effectiveness of existing, municipal alcohol policies in Alberta
3. Promote safer alcohol consumption in Alberta
4. Reduce alcohol-related harm in Alberta municipalities

## How to use this guide

This guide has a number of priority audiences, including

- municipal staff and leaders
- **community coalitions**
- Alberta Health Services (AHS) staff

**Indigenous** communities, as well as other cultural groups, are important collaborators in going forward with policy development. While this guide does touch on ways to include diverse perspectives, more work and collaboration is needed in order to respectfully involve different groups. Governance structures among Indigenous communities are unique and varied and have not been addressed in this guide. Users of this guide are encouraged to consider the unique needs and assets of their communities.

This guide offers

- the rationale for municipalities to address alcohol-related harms through policy
- tips on identifying alcohol policy champions
- ideas about how to create and sustain partnerships
- steps to consider in municipal alcohol policy development

Throughout this document, terms that are in the Glossary appear in **bold italics** the first time they are used.

Tools and resources of interest are highlighted in **blue italics** throughout this guide. The full URL for each resource can be found in the references and weblinks section on page 125.

- implementation options for six evidence-informed alcohol policy areas, including:
  1. Regulating alcohol availability
    - a. Density and distance between alcohol establishments
    - b. Hours of operation of **alcohol establishments**
  2. Controlling alcohol pricing
  3. Ensuring safer drinking environments and safer communities
  4. Limiting alcohol marketing, advertising and sponsorship
  5. Preventing and reducing drinking and driving
  6. Advocating for preventative alcohol policy at the provincial or federal level

Each policy area is based on evidence for effective alcohol policy,<sup>2,3,4,5,6</sup> as well as what Alberta municipal representatives have identified as important.<sup>7</sup> Each of the areas can stand on its own; however, they are interrelated. If developed and implemented together, they can create a robust, effective and all-encompassing municipal alcohol policy. This is one of the strongest tools to address alcohol-related harm.<sup>2</sup>

## Real Communities, Real Issues, Real Solutions

Policy stories from municipalities in Alberta and other provinces and territories in Canada are provided throughout this guide in a number of “Real Communities, Real Issues, Real Solutions” sections. These are intended to provide practical examples and inspiration for your municipality.

The diverse alcohol policy options and opportunities included have been provided to help you discover what is needed and wanted in your communities to collaboratively reduce alcohol-related harm and to **create greater community safety, vibrancy, health and well-being**.

### Did you know...

the first Municipal Alcohol Policies (MAPS) were developed in Ontario in the early 1990s. Since that time, they have been shown to be effective at reducing disorder and vandalism, reducing policing and community costs resulting from alcohol-related problems, and protecting the local governments/First Nations from liability issues.



# Setting the Stage



## Why municipal-level involvement in alcohol policy?

### Policies have an impact

Policies impact the way we move around and interact, the products we consume, and the way we live in our homes and communities. Policies made at the municipal level have the potential to impact human connection, access to services, transportation options, demand for public resources, public safety, and community vibrancy. In comparison to other strategies aimed at influencing human behaviour, namely, public education, policy tends to have a farther reaching impact across the population by acting on the conditions and context in which decisions are made. Alcohol policy is a powerful tool that can serve to promote a culture of moderation across the population, while offering protection for and including the voice of those who are more vulnerable to experiencing alcohol-related harms.

### Municipalities have a role

Municipal decision makers and influencers have a unique privilege to shape their communities, and can do so from an informed perspective by being connected at the grassroots level to community groups and citizens. Within Alberta, municipal governments are well-positioned to partner with community coalitions to address community issues and priorities. This is a strength in our province—coalitions have been in operation since as early as 2005, working closely with AHS staff to create innovative and unique solutions to address alcohol and other drug-related issues that are right for their communities.

Through developing municipal alcohol policies, municipalities can realize a host of benefits that include, but extend far beyond health.

### Why Municipal Alcohol Policy?<sup>8,9</sup>



- ✓ Reduced underage access to alcohol
- ✓ Reduced community disruption
- ✓ Fewer injuries and hospital visits
- ✓ Reduced impaired driving
- ✓ Enhanced safety and reduced demand on security and police resources
- ✓ Reduced costs to taxpayers
- ✓ Reduced legal risks for local governments

### Municipal leaders see a benefit

In municipal interviews conducted to inform the development of this guide, the majority (79%) of municipal staff and leaders in Alberta said they would find a municipal alcohol policy guide beneficial and indicated interest in using policy to address alcohol-related harm at the local level.<sup>7</sup> Municipalities are autonomous and diverse; the types of alcohol policies vary between municipalities as do reasons for developing and implementing them. Any solutions need to be tailored to each community.<sup>7</sup> Who better to understand the potential problems and to implement innovative solutions than those who live within that community?

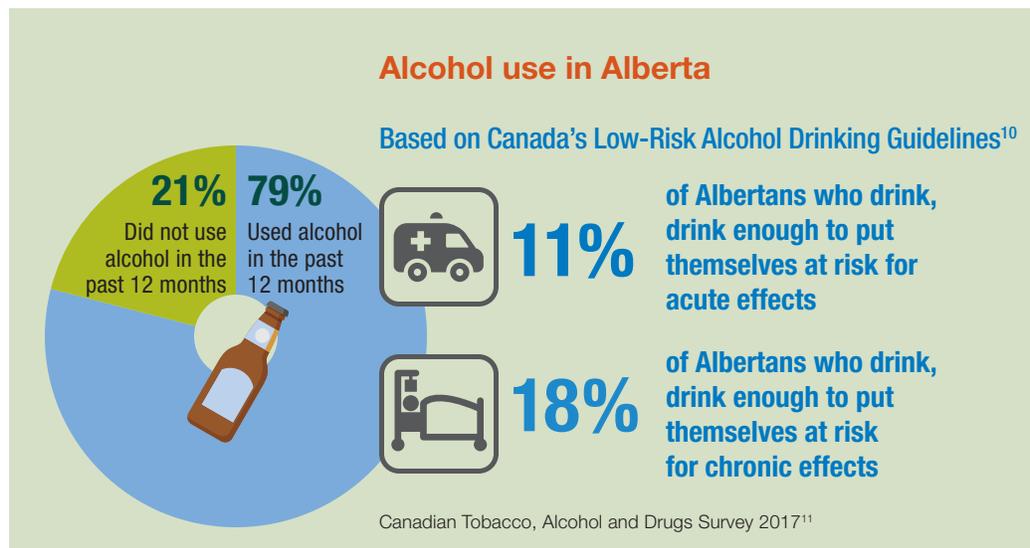
In the same interview process, municipal governments in Alberta have articulated that they care about creating safe, healthy and vibrant communities for their citizens.<sup>7</sup> As we will discuss over the next few pages, alcohol policy is a key ingredient to achieving this goal.

## Why address alcohol-related harms?

### Alcohol use is prevalent

Alcohol is the most widely used drug in Canada and many Canadians use it to celebrate, to relax and unwind, and to socialize. The majority (78%) of Canadians over the age of 15 drink, and while **moderate alcohol use** is the norm, 15% drink alcohol enough to be at risk for acute injury and 21% drink enough alcohol to put themselves at risk for chronic illnesses.<sup>8</sup> Alcohol is also a significant part of the fabric of society in Alberta. Albertans drink almost the same rate as Canadians (79% over the age of 15). A significant proportion of Albertans drink at rates that put them at risk for both acute injury (11%) and chronic illnesses (18%).<sup>11</sup>

To view Canada's Low-Risk Alcohol Drinking Guidelines, please see Appendix A<sup>10</sup>



## Alcohol use can be harmful

Acute effects of alcohol use include

- hospital admissions for alcohol poisoning
- preventable injuries and death
- physical and sexual assaults
- family and intimate partner violence
- traffic collisions from alcohol-impaired driving<sup>4</sup>

According to the most recent data available, alcohol was a factor in approximately 28% of violent crimes in Canada.<sup>12</sup>

In Alberta, there were 37,744 criminal convictions for impaired driving between April 2012 and March 2017, and 389 people were killed and 5,969 people injured in alcohol-related collisions from 2011 to 2015. In 2015 alone, 85 people were killed and 1,042 were injured.<sup>13</sup>

The long-term effects of alcohol use include a range of chronic illnesses, such as

- hemorrhagic stroke, liver cirrhosis and heart disease<sup>14</sup>
- a number of cancers<sup>15</sup>

Drinking alcohol was the third-highest risk factor for global disease burden in 2010, moving up from sixth in 1990.<sup>4</sup>

In Canada, there are more hospitalizations for alcohol than for heart attacks, and in Alberta in 2015–16 there were 327 hospitalizations per 100,000 people entirely caused by alcohol (approximately 13,907 total hospitalization instances) compared with 226 for heart attacks (approximately 9,612 total hospitalization instances).<sup>16</sup>

Ultimately, the health, social and economic alcohol-related burden described above can be felt at the municipal level. Communities coming together at the local level to address these harms can make a positive difference.

Alcohol use affects some population groups more than others. For some examples, please see Appendix B.

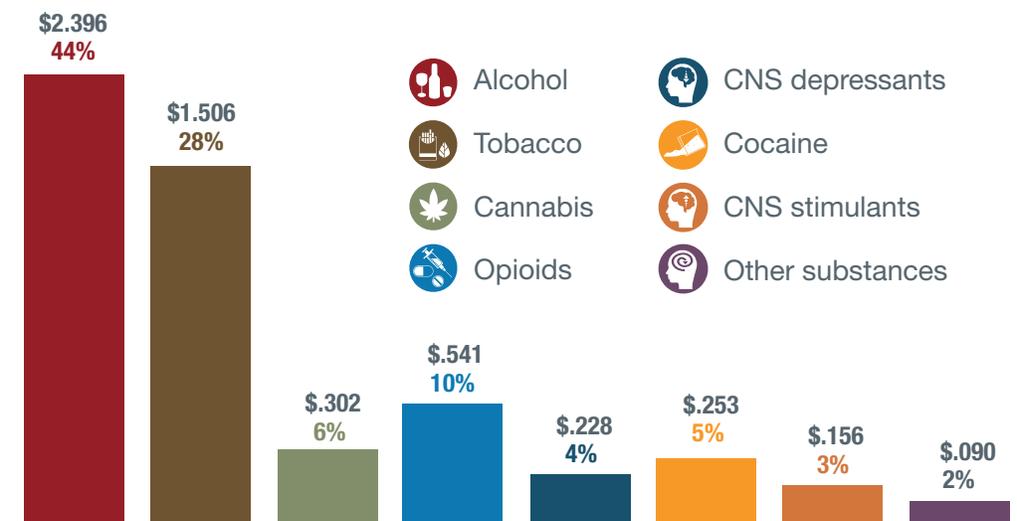
## Alcohol use is costly to the Alberta economy

It is recognized that the alcohol industry produces jobs and generates income.<sup>17</sup> However, the harms of alcohol use are more costly to the Alberta economy than the revenue generated by its sales.<sup>18</sup> The 2007 to 2014 Canadian Substance Use and Harms research outlines the cost to each province in Canada.<sup>19</sup>

In 2014:

- Substance use cost Alberta \$5.5 billion dollars, and Canada \$38 billion dollars from lost productivity, health care, criminal justice and other direct costs.
  - Health care costs – inpatient hospitalizations, day surgery treatment episodes, emergency department presentations, specialist treatment, costs of physician time, and prescription drug costs
  - Lost productivity costs – lost value of work due to premature mortality, short-term and long-term disability, absenteeism, and impaired job performance
  - Criminal justice costs – police work, courts and corrections, expenditures for criminal offences (impaired driving, homicides or assaults, and non-violent offences)
  - Other direct costs – research and prevention programs, attributable fire damage, motor vehicle damage, drug testing in the workplace, employee-assistance programs, and workers' compensation
- **Alcohol cost the Alberta economy \$2.396 billion.** This is more than the costs of tobacco, cannabis and opioid costs and harms combined.

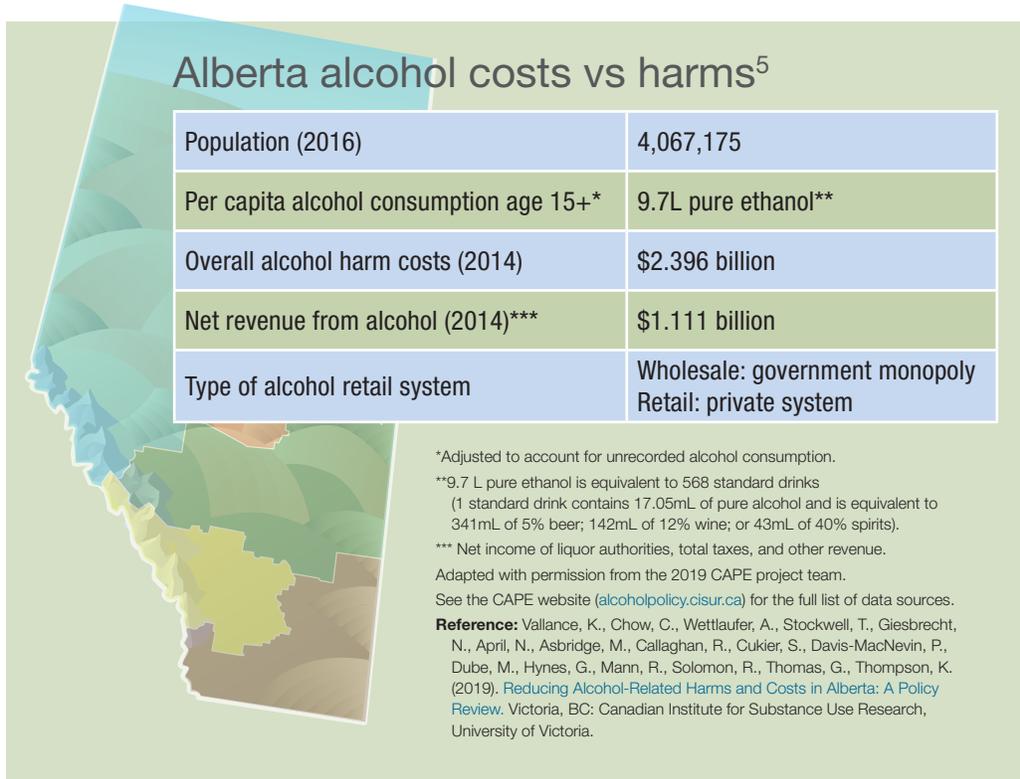
## The cost of substance use (in billions) in Alberta<sup>20</sup>



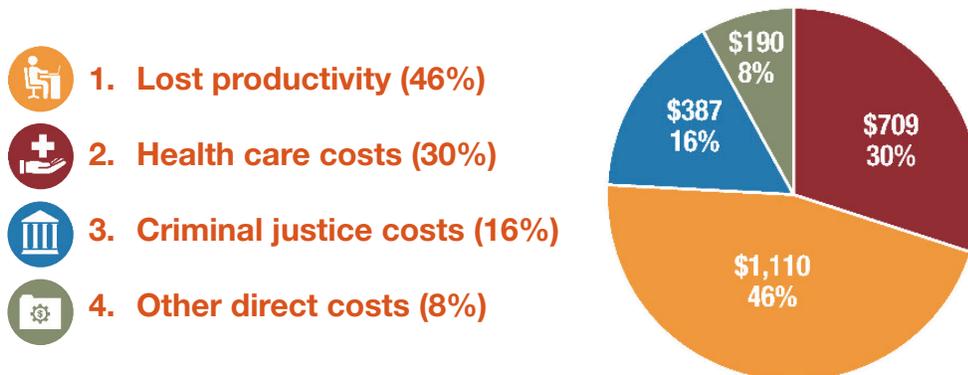
Adapted with permission.\*

\*Canadian Substance Use Costs and Harms Scientific Working Group. (2018). *Canadian substance use costs and harms in the provinces and territories (2007–2014)*. Prepared by the Canadian Institute for Substance Use Research and the Canadian Centre on Substance Use and Addiction. Ottawa, Ont.: Canadian Centre on Substance Use and Addiction.

**In Alberta the costs associated with alcohol use are higher than the revenue generated by its sales.**<sup>18</sup> The cost has continued to increase from 2007 to the present. Lost productivity (46%) and health care costs (30%) are the majority of the costs of alcohol use harms.<sup>19</sup>



### Cost breakdown of alcohol in Alberta (in millions)<sup>20</sup>

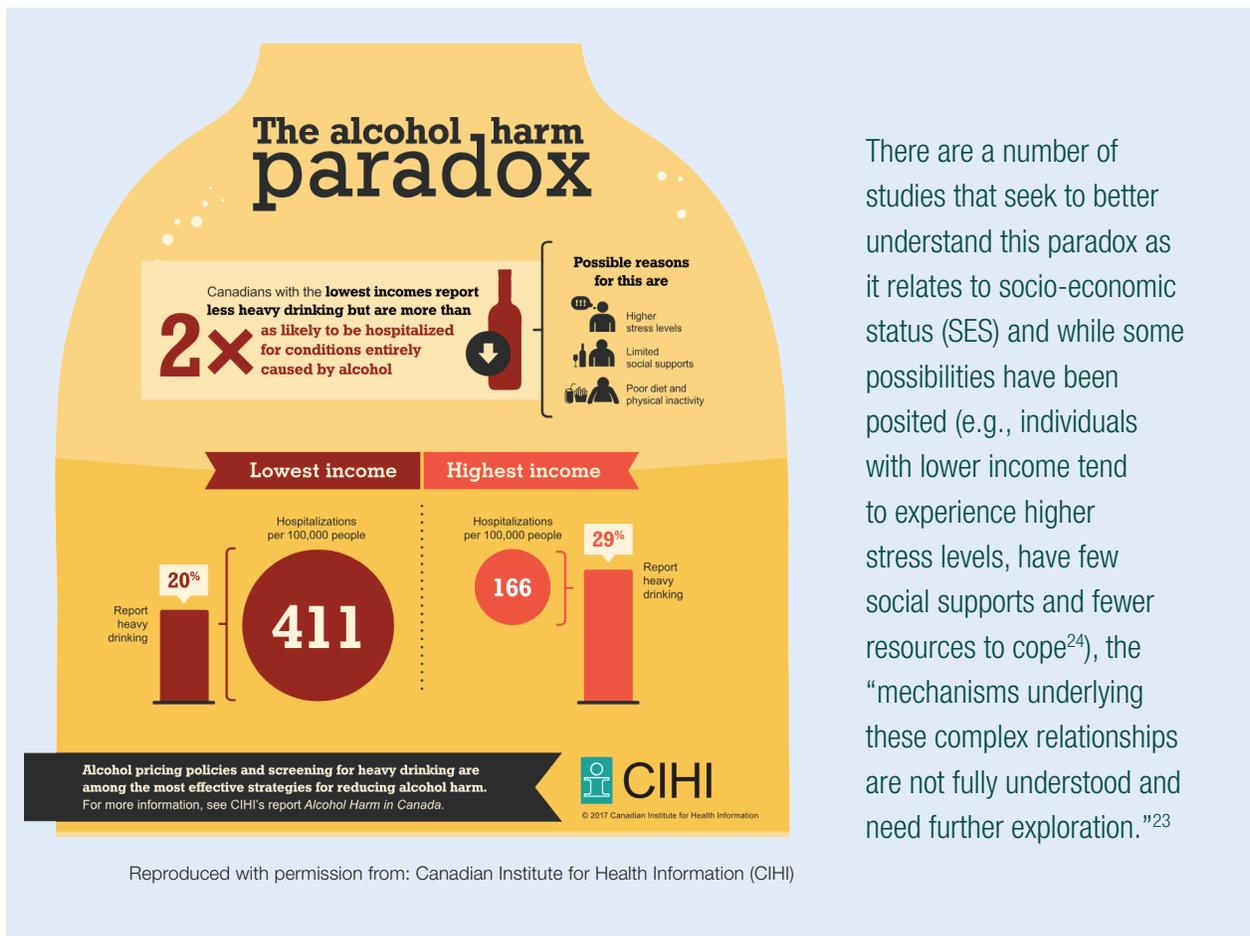


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\*Canadian Substance Use Costs and Harms Scientific Working Group. (2018). *Canadian substance use costs and harms in the provinces and territories (2007–2014)*. Prepared by the Canadian Institute for Substance Use Research and the Canadian Centre on Substance Use and Addiction. Ottawa, Ont.: Canadian Centre on Substance Use and Addiction.

## Alcohol use has inequitable impacts

Health inequities are systematic differences in health which are avoidable, therefore being unfair and unjust.<sup>22</sup> The burden of alcohol related harm weighs more heavily on certain groups, which is influenced by factors such as education, economic status, gender and ethnicity. Overall, despite having lower average levels of alcohol consumption, groups that are disadvantaged experience higher levels of harm associated with alcohol when compared to groups that are more advantaged.<sup>22</sup> As researchers put it, “The phenomenon of experiencing more alcohol-related problems despite consuming less alcohol has been referred to as the ‘Alcohol Harm Paradox.’”<sup>23</sup>



There are a number of studies that seek to better understand this paradox as it relates to socio-economic status (SES) and while some possibilities have been posited (e.g., individuals with lower income tend to experience higher stress levels, have few social supports and fewer resources to cope<sup>24</sup>), the “mechanisms underlying these complex relationships are not fully understood and need further exploration.”<sup>23</sup>

Reproduced with permission from: Canadian Institute for Health Information (CIHI)

Appropriate policy interventions can address or reduce health inequities.<sup>22</sup> Therefore, there is both an opportunity to use policy as a tool to reduce disparities, and ethical responsibility to embed **health equity** considerations in the assessment, planning, development and implementation of municipal alcohol policy.





# Partners in Municipal Alcohol Policy Development



## Priority stakeholders

Stakeholders integral for municipal alcohol policy development include

- community coalitions
- AHS staff
- local government (municipal staff and leaders<sup>2,25</sup>)

### Community coalitions

(with an interest in reducing harms related to substance use)

A coalition is a group of community members from different organizations who come together to pursue a common goal.<sup>26</sup> The AHS Provincial Addiction Prevention Unit works with a number of community coalitions in Alberta.

Community coalitions working across Alberta at the local level include a number of partners, such as teachers, parents, elected leaders, Indigenous representatives, social workers, citizens, representatives from particular cultural groups, police officers, doctors, youth and many more. To be successful, groups promoting change, whether they are a registered community coalition or another type of organized community group, must represent the community they wish to change.



For more information about forming a registered community coalition in Alberta, visit [Registering Your Coalition](#) at AHS.

To connect with the Provincial  
Addiction Prevention Team, email  
[Addiction.Prevention@ahs.ca](mailto:Addiction.Prevention@ahs.ca).

### **Alberta Health Services (AHS) staff**

AHS Addiction and Mental Health staff are positioned both provincially and locally. At the provincial level, staff members provide consultation and funding to community coalitions registered with AHS to help them develop and implement projects that educate people about, and/or prevent and reduce the harm related to, alcohol and other drugs.

Locally, AHS staff work with both community coalitions and other community groups. While the support provided is tailored to each community, in general the following services are offered:

- access to evidence-based research to inform the development of community education activities or policy development opportunities
- access to information on best-practice approaches to prevent or reduce the harms of alcohol and other drugs, and support to apply these approaches in the community
- examples of how other communities have applied these best-practice approaches
- connection to the provincial AHS Addiction and Mental Health team and other professionals and agencies
- community development training
- assistance in facilitating community conversations for the purpose of information sharing/gathering, supporting the goals of community coalitions and other community groups, and relationship/community building
- key message development and help presenting the messaging in plain language
- support in strategic planning, plan implementation and evaluation

## Local government

There are two parts to local government: the leaders or council, and the local staff. The Government of Alberta explains that:

Every municipality in Alberta is governed by a council. A councillor's job is to work with other councillors to set direction and policy for their respective municipality. One member of council is officially called the chief elected official (CEO), but commonly known as the mayor (cities, towns or villages) or the reeve (municipal districts). In a village or municipal district, the mayor/reeve is appointed among the councillors. In a city or town, she or he is elected by all eligible voters in the municipality. The mayor/reeve is considered the spokesperson for the municipality. However, a common misconception is that this individual has more power in decision making than the rest of the council. This is not true. The mayor/reeve only has one vote, just like a councillor, and has responsibilities just like the rest of the councillors.

The staff consists of the people who follow through with and implement council's decisions and manage the day-to-day community functions, programs and services such as, but not limited to, issuing permits, caring for public gardens, and facilitating community engagement sessions.<sup>27</sup>

The municipal staff members most likely to have a vested interest in alcohol policy include

- development officers
- managers of municipal space
- city/land-use planners<sup>7</sup>
- staff members working in recreation departments<sup>28</sup>

For more information about the priority audiences, visit

- [Roles and Responsibilities of Municipal Officials](#) (Alberta Municipal Affairs)
- [The Alberta Urban Municipalities Association](#) (AUMA)
- [Rural Municipalities of Alberta](#) (RMA)
- [Information for Community Groups](#) (AHS)





Since a critical part of effective policy is the consistent and regular enforcement of municipal rules, regulations and bylaws, **it is essential to find partners who work in enforcement.**

The duties and roles within these groups differ. Community peace officers, for example, are able to uphold legislation and offer a significant enforcement and support, but do not have the same level of authority as police officers. Creating bylaws can create additional obligations for these partners, so make sure they are involved from the start.

## Other stakeholders

The experiences of other Canadian municipalities show that any successful plan to lower risk and reduce alcohol-related harms requires a collaborative effort with multiple stakeholders, including<sup>7,29</sup>

- alcohol establishment owners
- business owners
- charities
- cultural groups
- general community members from all age groups
- other health services staff (e.g., emergency services, public health)
- Indigenous peoples
- kindergarten to grade 12 school community representatives
- law enforcement (see sidebar)
  - bylaw officers
  - community peace officers
  - city police
  - RCMP
- **media** (see Appendix C)
- non-government organizations
- other municipalities
- post-secondary institution representatives
- workplace representatives

**In addition to the stakeholders listed above, please ensure you are including the perspective of populations who are under represented in your particular municipality, and intentionally seek out voices that are not often heard.**





# Steps in Municipal Alcohol Policy Development

A series of steps to approach Municipal Alcohol Policy Development will be discussed in this section. The steps are:

- Understand processes in policy development
- Identify champions among stakeholders
- Strengthen and sustain stakeholder partnerships
- Address health equity
- Assess community readiness
- Understand jurisdictional responsibilities
- Understand how bylaws are developed
- Voice concerns
- Develop and implement a comprehensive municipal alcohol policy



## Understand processes in policy development

Policy development takes time and energy and the process may vary across settings and municipalities.

The way that you work to inform, influence, or develop policies will depend on the responsibilities and limitations within your role. Policy change involves multiple players with potentially competing perspectives. It is important to build relationships with stakeholders to get a better sense of the appropriate approach for your municipality, and to identify the appropriate people to contribute in a way that matches their skill set, role, and capacity. As well, it is useful to become familiar with processes, strategies and stages in the development of policies overall. While municipalities will differ in how policies are developed, there are some considerations that will be applicable across communities. Many other excellent tools and resources exist to guide users through the general process of public policy development. This guide has highlighted three.



***At a glance: the eight steps to developing a healthy public policy (Public Health Ontario)<sup>30</sup>***

As the title suggests, this document briefly outlines a series of steps and accompanying recommendations for Healthy Public Policy Development.

<b>1 Describe the problem</b>	<b>2 Assess readiness for policy development</b>	<b>3 Develop goals, objectives, and policy options</b>	<b>4 Identify decision-makers and influencers</b>
Obtain a detailed understanding of the specific problem. This will be a foundation for developing clear goals, assessing options, and building support for the policy among decision-makers.	Determine whether to proceed. This decision should be based on whether your community is ready for a specific policy and your organization is ready to lead or support the process.	Define clear goals and objectives for the policy change and generate a list of policy options that you want decision makers to consider. Putting forward more than one option shows stakeholders that you are flexible and willing to negotiate. Assessing several options prepares you to explain why there are certain ones that you will not support.	Decide which decision-makers will be the focus of your support-building efforts. Choosing the wrong people can waste resources and may even jeopardize future strategies if you approach people at the wrong level, or wrong time.
<b>5 Build support for the policy</b>	<b>6 Draft and/or revise the policy</b>	<b>7 Implement the policy</b>	<b>8 Evaluate and monitor the policy</b>
Choose channels and vehicles through which to try to persuade decision-makers to proceed with policy development. Develop the messages that are put forth using these methods. This step can win or lose battles.	Define the specific logistical and legal details about a policy. The precise wording of a policy often dictates whether or not it is passed.	Ensure that all pre-requisites are in place for policy implementation and then implement the policy. Many policies have been retracted upon realizing that implementation is impractical, too costly, too controversial or that progress toward the ultimate goal cannot be demonstrated.	Early identification of problems and timely policy amendments may help avoid a policy being overturned when implementation presents challenges. A thorough evaluation will also help to demonstrate accountability to stakeholders and reduce implementation costs.

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For the full explanation of the steps, see Appendix D.

The workbook, [Supporting the Policy-Making Process](#) is a guide that walks the reader through these steps in more detail.

### General Strategies for Encouraging Policy Change<sup>31</sup>

This document offers some complimentary ideas about being prepared, nimble, and strategic as you work to influence healthy policy decisions. These strategies can be used regardless of the level of readiness of your community. (See Appendix E.)

1. Develop organizational knowledge and support
2. Understand the social, political & economic context
3. Watch closely for open policy windows
4. Frame the issue in a context that is meaningful and in terms of the immediate and long-term benefits of the policy
5. Take advantage of changes in leadership
6. Keep your message clear and simple by using three to five key messages
7. Show constituent support for an issue and illustrate benefits to the community
8. Build partnerships within communities
9. Engage “fence-sitter” decision-makers
10. Build partnerships with key stakeholders
11. Employ media advocacy and enlist earned media
12. Use a range of communication channels and tools
13. Raise the profile of innovators and celebrate successes

Reproduced with permission from PLACE Research Lab, School of Public Health, University of Alberta.<sup>31</sup>

### Public Policy Models and Their Usefulness in Public Health: The Stages Model<sup>32</sup>

This briefing note explains the Stages Model, one model that serves to explain the public policy development process. This publication explains each of the stages, the complexity of the process, and the applicability of this model to adopting healthy public policies.

#### Stages in Policymaking: A turbulent flow

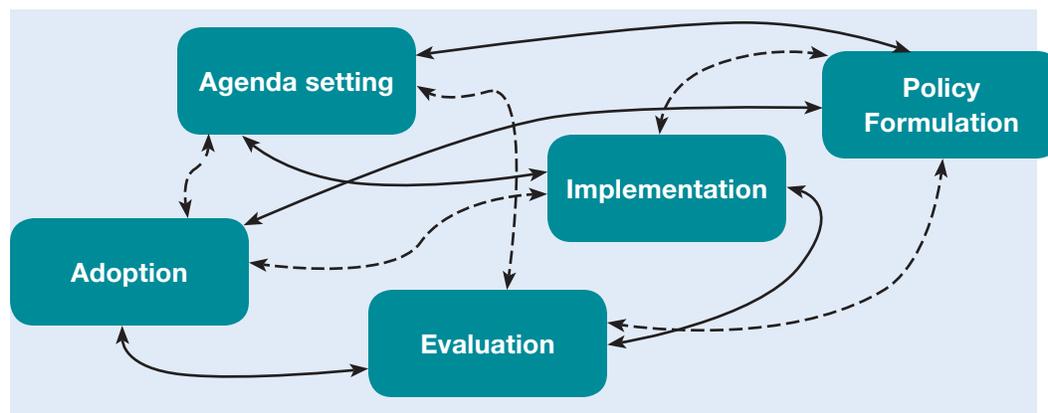


Image Source: Benoit, F. (2013). *Public Policy Models and Their Usefulness in Public Health: The Stages Model*. Montréal, Québec: National Collaborating Centre for Healthy Public Policy.

The resources outlined above are intended to compliment – not compete – with the steps outlined in this guide, and to offer additional considerations throughout your journey in policy exploration and development.

## Identify champions among stakeholders

Champions are individuals in the community who can influence opinions, attitudes, beliefs, motivations and/or the behaviour of others. They can collaborate with diverse groups and individuals interested in an issue to build a broad base of support for action. When the community is engaged in a dialogue, there is a good chance that natural champions will emerge. Community coalitions and other community groups might also want to research who will most benefit from the activities they would like to implement and approach these individuals directly.

For more information about identifying champions and other community engagement ideas, visit [Coalitions Work](#).

## Strengthen and sustain stakeholder partnerships

Similar interests and goals are often the beginning of a partnership. However, sustaining a partnership requires special attention. The following list of strategies and practices can help keep partnerships strong over time:

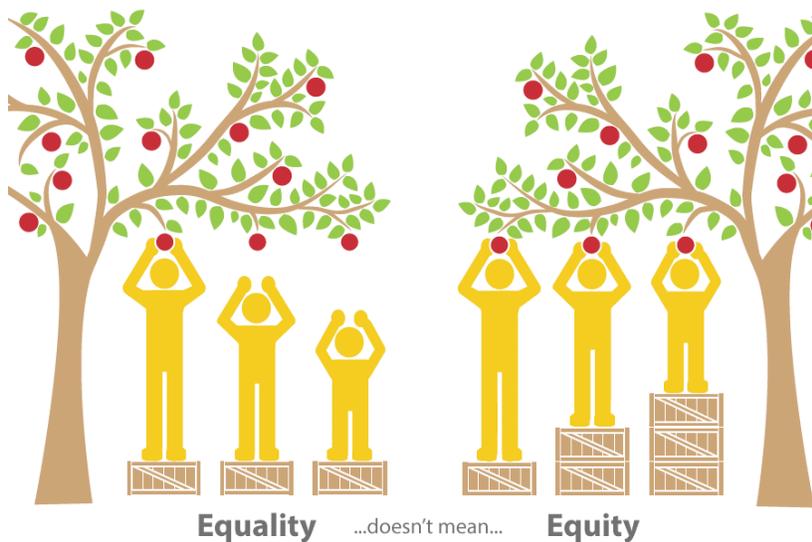
- **Develop a shared vision.** A clearly articulated vision will help remind partners that although their organizations' mandates may vary, they share a common goal.
- **Be transparent.** Relationships built on open communication and respect creates a healthy environment for partners to thrive in.
- **Agree on terms of partnership.**
- **Have a clear plan.** A comprehensive and coherent road map will serve as the backbone and ensure that activities are strategic and focused. Remember to recognize milestones. This is an excellent way to track performance and achievements.
- **Define roles and responsibilities for all partners.** This will eliminate duplication and ensure that all members clearly understand the part they play.
- **Build a broad base of awareness and understanding.** Effective public relations will help maintain excellent community support and recognition. It will also encourage community members to join and increase the amount of connections to the community.
- **Monitor and measure progress, accomplishments and short-term victories** to make sure partners are held accountable for their commitment and actions.
- **Strengthen relations through trust and respect.** This will give the group the ability to work together and adapt to emerging issues locally, provincially, nationally and internationally.<sup>33</sup>

For more details on building relationships and creating a long-term plan, visit [Alberta Healthy Communities Hub, Step 1: Create Connections](#).

## Address health equity

Drinking patterns and alcohol related harms differ among population groups (see Appendix B), according to factors such as genetics, age, sex, socio-economic status (SES) and the determinants of health.<sup>34</sup> Some population groups, such as youth, are impacted differently due to drinking patterns, age, and stage of brain development. For other population groups, such as people with lower socioeconomic status (SES), systemic deprivation contributes to a disparity in alcohol related harms.

Policy can be a powerful tool not only to reduce the harms associated with alcohol, but also to reduce the disparity between socioeconomic groups in terms of the degree to which these harms are experienced. Conversely, policies and initiatives – even those that are well intended – can also inadvertently make disparities worse.



Equality doesn't mean Equity.<sup>35</sup> Reproduced with permission from Saskatchewan Health Authority

Addressing health equity takes time and effort, and involves a comprehensive approach that should extend through the complete duration of program or policy development. Since alcohol-related harm varies across countries, provinces and municipalities, it is not possible to make specific alcohol-related policy recommendations that will work in every setting.<sup>22</sup> Addressing health equity is not a single step, but rather, an essential guiding principle in this work.

The ACPLF Healthy Communities Dashboard > Health Equity tab can be accessed to find local data on the relationship between social conditions and risk factors for cancer, including heavy drinking. <https://www.healthiertogether.ca/prevention-data/alberta-community-health-dashboard/community-cancer-prevention-screening-dashboard/>

Reducing inequities requires a combination of short and long term actions in collaboration with a number of agencies working to address consequences and root causes of inequities, and action to address both individuals and environments.<sup>36</sup> Those working to reduce inequities should consider **downstream, midstream, and upstream** interventions.<sup>37</sup>

- Downstream interventions address the immediate health needs of the populations who are vulnerable to poor health outcomes related to alcohol.
- Midstream interventions address the intermediary determinants or material circumstances, such as housing conditions, employment, and food security.
- Upstream interventions address the structural determinants such as social status, income, racism and exclusion.

While there are some common patterns regarding what social groups tend to be more vulnerable to experiencing alcohol-related harms than others, alcohol-related inequities vary between communities, calling for a careful assessment based on the needs of each municipality.

It is important to ask critical questions about current policy, as well as about the policy options being explored. This helps to understand who the policies benefit and who they leave out or leave at a disadvantage. Consider the populations who are more vulnerable to poor health outcomes, how a policy may unintentionally impact these populations, and what needs to happen to eliminate or reduce the impact on the vulnerable population groups. Questions prompting users to consider health equity have been integrated throughout this resource.

While working through the steps outlined in this guide, municipalities are encouraged to utilize a Health Equity Impact Assessment (HEIA) to ensure that proposed policies and decisions are fair and just, and not leaving any group at a greater disadvantage. Several HEIA tools exist, as well as other resources to help increase your confidence and capacity to apply a health equity lens.

- *Health Equity Impact Assessment | A user guide for embedding a health equity lens into AHS programming.*<sup>38</sup> The AHS Healthy Public Policy team has created a HEIA tool for Alberta Health Services Staff to use with communities. Contact your local AHS representative or reach out to the Provincial Addiction Prevention team for more information on local AHS staff that could support you in this process.
- [Alcohol Inequities: Guidance for Addressing Inequities in Alcohol-Related Harm \(World Health Organization\).](#)<sup>22</sup> This document has applied a health equity lens to the issue of alcohol. It is recommended that municipalities and decision makers refer to this report during the process. See Appendix F for two excerpts from this report.

## Assess community readiness

Any community group considering working in the area of municipal alcohol policy should take time to plan and consider what is realistic given their capacity, as well as the wider community's readiness. Does the wider community agree that there is an issue that can be improved by a policy change? If, for example, the coalition/group believes that the municipality could benefit from an alcohol-free community centre or reduced hours of service at local liquor stores, does the wider community agree?

Provide a forum for community members to consider the ideas of the coalition/group and provide feedback. The following are suggested ways to create engagement:

- Host discussions with other community members. For ideas, review *Let's Talk Dialogue* at the Canadian Institute for Substance Use Research or *Dinner and Dialogue* at Healthy Minds Healthy Campuses. These were originally developed to host conversations about cannabis but are now available in a generic format which can be used to discuss alcohol.
- Make a formal presentation to community members using evidence-based information about alcohol-related harms and costs, and locally relevant information whenever possible
- Organize a public awareness campaign to inform others about the issue
- Hold town-hall forums, focus groups and/or interviews

Knowing your community's level of readiness (innovator, majority or late adopter) can help you to employ effective strategies based on where they are at. For more details on assessing community readiness for policy change, refer to the *Policy Readiness Tool*.

The purpose of this resource is to facilitate the adoption of healthy public policy within communities or organizations. It can be used by policy developers, advocates, community organizations, community members, municipalities or anyone else interested in encouraging healthy public policy development.<sup>39</sup>

One example of an overarching community needs assessment can be found at *Alberta Healthy Communities Hub, Step 2: Assess Your Community*.

**Innovator** communities or organizations are described as adventurous and often serve as role models for other places. They are attracted by high-reward policies, bylaws or initiatives and have a greater tendency to take risks. Innovators have the ability to cope with elevated levels of uncertainty about the policy they are adopting. They are typically willing to tolerate initial problems that may accompany new policies and are able to identify solutions for these problems.

**Majority** communities or organizations are described as deliberate because they require time to determine whether to adopt a new initiative. This group seldom leads the pack when it comes to adopting new initiatives or policies and is of the philosophy that it is better to change as a group than to be one of the first to change. Considering this, they tend to adopt new initiatives or policies at about the same time as the average community or organization.

**Late Adopter** communities and organizations are described as traditional, skeptical of new ideas and eager to maintain the status quo. They usually wait until a policy or new initiative has been adopted by the majority of other communities and organizations – before implementing it themselves. They may need to be pressured into policy change, or may never adopt the new policy or initiative unless required to.

## Understand jurisdictional responsibilities

Local government recognizes the important voice that community brings and sees community involvement as integral to good government and a strong, inclusive government process.<sup>40</sup>

Local government is accountable to its residents. In every Alberta municipality, residents have opportunities to be involved in municipal decision-making. Local government recognizes the important voice that community brings and sees community involvement as integral to good government and a strong, inclusive government process.<sup>40</sup> The more community groups understand about where they can influence and how, the better positioned they are to facilitate successful change.

While much of the control of alcohol production, alcohol consumption and the minimization of alcohol-related harm fall primarily under provincial and federal jurisdictions, there is a responsibility at the municipal level too. The Municipal Government Act (MGA) provides municipalities with considerable scope to implement policies that help manage alcohol within their boundaries.<sup>40</sup> On this authority, municipalities can and should act to protect the health and safety of their citizens and communities. **Municipal governments can implement alcohol policy so long as it meets the minimum standards set by provincial and federal authorities.** To better understand what governs alcohol legislation and policy in Alberta, see Appendix G.

The opportunity to develop policies on municipally owned properties and at municipal events might provide an easier avenue for municipalities, as there are fewer steps to consider. A policy change might be accomplished through a recommendation or a guideline, as opposed to a bylaw. As outlined in this guide in the section “Understand How Bylaws Are Developed,” bylaws must go through three readings via municipal council in order to be implemented. Starting on municipally owned properties could also be seen as a stepping stone that can start a municipality on a course to the development and implementation of further alcohol policy.

The table on page 25 is an overview of jurisdictional responsibilities, including the areas where there is crossover. The table is first broken down by jurisdiction (Federal, Provincial and Municipal) and is then broken down further to indicate whether a policy potentially could, or currently does, exist in the specified policy area.

- In the Potential column, the ✓ symbol is used to indicate that the respective jurisdiction may implement policy in this area.
- In the Current column, the **FED**, **AB**, or **MUN** symbols are used to indicate that at least one policy does exist at that respective jurisdictional level. Note that the table does not communicate the number, strength or quality of the policies that are in place.

For more detail about jurisdictional responsibility, please see Appendix G.

## Jurisdictional responsibilities

### LEGEND

✓	A jurisdiction has potential to implement policy in this area.
<b>FED</b>	The Federal Government has a current policy in this area.
<b>AB</b>	The Alberta (Provincial) Government has a current policy in this area.
<b>MUN</b>	The Municipal Government has a current policy in this area in at least one Alberta municipality.

Approach	Policy Options	Jurisdiction Responsible					
		Federal		Provincial		Municipal	
		Potential	Current	Potential	Current	Potential	Current
Regulating alcohol availability	Bans on public drinking			✓	<b>AB</b>	✓	<b>MUN</b>
	Alcohol establishment density and location			✓	<b>AB</b>	✓	<b>MUN</b>
	Alcohol establishment hours of operation			✓	<b>AB</b>	✓	<b>MUN</b>
	Retail sales model			✓	<b>AB</b>		
	Minimum age limits	✓		✓	<b>AB</b>		
	Managing access at municipal events and/or on property			✓	<b>AB</b>	✓	<b>MUN</b>
Controlling alcohol pricing	Alcohol taxes	✓	<b>FED</b>	✓		✓	
	<b>Markup</b>			✓	<b>AB</b>		
	<b>Minimum pricing</b>			✓	<b>AB<sup>D</sup></b>	✓	
	Bans on price discounts and promotions			✓	<b>AB</b>	✓	<b>MUN</b>
	Business license fees and conditions			✓	<b>AB</b>	✓	<b>MUN</b>
	Minimum price at municipal events and/or on property					✓	<b>MUN</b>
Ensuring safer drinking environments and safer communities	Staff training and house policies relating to responsible beverage service			✓	<b>AB</b>	✓	<b>MUN</b>
	Staff and management training to manage aggression			✓	<b>AB</b>	✓	<b>MUN</b>
	Server and social host liability	✓		✓	<b>AB</b>	✓	<b>MUN</b>
	Addressing noise and nuisance					✓	<b>MUN</b>
	Enhanced enforcement of <b>on-premise</b> laws and legal requirements			✓	<b>AB</b>	✓	<b>MUN</b>
	Crime prevention through environmental design			✓	<b>AB</b>	✓	<b>MUN</b>
	Applying the above options at municipal events and/or on property					✓	<b>MUN</b>
Limiting marketing, advertising and sponsorship	Business license fees			✓		✓	
	Restrictions on exposure	✓	<b>FED</b>	✓	<b>AB</b>	✓	<b>MUN</b>
	Restrictions on content	✓	<b>FED</b>	✓	<b>AB</b>	✓	<b>MUN</b>
	Mass-media campaigns	✓		✓	<b>AB</b>	✓	<b>MUN</b>
Preventing and reducing drinking and driving	Restrictions on exposure and content at municipal events and/or on property					✓	<b>MUN</b>
	Sobriety checkpoints			✓	<b>AB</b>	✓	<b>MUN</b>
	Random breath testing	✓	<b>FED</b>	✓	<b>AB</b>	✓	<b>MUN</b>
	Lowered BAC levels	✓	<b>FED</b>	✓	<b>AB</b>		
	Lower BAC levels for young drivers			✓	<b>AB</b>		
	Graduated licences for young and new drivers			✓	<b>AB</b>		
	Traffic safety plans			✓	<b>AB</b>	✓	<b>MUN</b>
Ride services and/or public transit	✓		✓	<b>AB</b>	✓	<b>MUN</b>	

<sup>D</sup> The AGLC sets minimum prices for alcohol sold at on-premise locations (e.g., bars, restaurants). There is no provincial minimum price set for off-premise locations (e.g., liquor stores, off sales).

## Understand how bylaws are developed

Under Alberta's **Municipal Government Act** (MGA), council has the right to pass **bylaws** for a number of reasons, including protecting the safety, health and welfare of people and for the protection of people and property.<sup>40</sup> Residents (either individual residents or residents who have come together as a group, like a community coalition) can voice concerns to council first, and council may then direct municipal staff to do research on the topic. Municipal staff present council with a report on their findings and recommendations. Staff may also approach council with concerns passed to them from residents.<sup>26</sup> Once information is received, and based on what additional research (if any) indicates, council may decide to pass a bylaw.

Bylaws receive three readings at a council meeting and public engagement must occur, in most cases, before the second reading and/or before council votes on the resolution. This provides residents with the opportunity to state their opinions for or against a bylaw before the third reading, when the bylaw is passed or not.<sup>26</sup> For more details on bylaws, see [Basic Principles of Bylaws](#).

## Voice concerns

Here are a few ways for individuals or groups to voice concerns about alcohol use, alcohol harm and ideas about solutions:

- Attend a local, community or municipal council meeting to observe general proceedings
- Invite a councillor to a community gathering to talk about an issue
- Attend council meetings when an issue is under discussion or consideration
- Visit the municipal office to talk to municipal officials and staff about an issue
- Provide input when the municipality is making a decision (e.g., participating in an opinion survey, attending an open house)
- Make a presentation to the council, a committee or community members
- Volunteer to sit on a municipal committee that will provide a recommendation to council
- Write a letter to a municipal representative or the editor of local media
- Organize an informal petition
- Create a press release or public service announcement (see Appendix C)

Almost all Alberta municipalities have a website. Check there for information on community engagement opportunities in local areas. If your municipality doesn't have a website, calling the local government office can be a good starting place to understand the engagement opportunities available.

## Real Communities, Real Issues, Real Solutions

### Engaging your community in your approach

**The local community coalition yllMyHome identifies an issue, decides on an approach and engages their community and municipal government to collaborate on a community issue in the City of Lloydminster, Alberta/Saskatchewan (population 31,400).**

In June 2016, Lloydminster passed a tobacco licensing bylaw to help reduce smoking rates. The businesses selling tobacco products now have to pay up to \$1,100 per year in licensing fees—the highest in Canada—some of which goes to local tobacco-reduction efforts.

Now yllMyHome is tackling alcohol bylaws.

“We listened to over 2,000 stories about alcohol-related harm,” said the co-chair of yllMyHome. People talked about **binge drinking** leading to alcohol poisonings, loss of life to alcohol-related collisions, drinking to escape the current economic downturn and drinking to self-medicate. “There is a sense that drinking is everywhere,” the co-chair says. “Both youth and adults want to see fewer liquor stores and more alcohol-free activities.”

In August 2017, yllMyHome outlined a policy to Lloydminster city council calling for reduced liquor-store density and control over the distances between liquor stores and public areas. It also recommended embracing a bylaw reducing hours of operation, similar to the one passed by the City of Wetaskiwin (see page 33 to read more about this story).

“Prior to our alcohol policy brief, there were not bylaws governing the location of liquor stores,” says the co-chair. Lloydminster’s new bylaw requires liquor stores to be more than 100 metres from parks, schools and community or recreation facilities. The co-chair indicates that yllMyHome will continue working with council to adopt policies that reduce alcohol-related harms, including reducing liquor store hours. “We have developed a positive relationship with both city council and administration, which has allowed us to work together on a common vision, creating a healthier Lloydminster.”<sup>41</sup>



Key steps taken by yllMyHome to get their position in front of Lloydminster city council

1. **Engage with community:** In order to create positive change in the community and support the implementation of healthy public policies, it is important to engage with community members to understand the issue from their perspective and to ask them for solutions. yllMyHome engaged all walks of life to understand the alcohol-related concerns from all perspectives.
2. **Research applied to practice:** yllMyHome invested a significant amount of time in reviewing research and investigating best practices to understand what healthy public policy could look like in the community.
3. **Connect with council and administration:** Talk to council and administration to understand
  - what their ideas are on the issue
  - any plans they have to address the issue
  - how community groups can best support them to adopt healthy public policies
4. **Make it easy:** yllMyHome used the steps above to inform the development of a policy brief that could support council in their decision-making. The policy brief laid out the information in a simple format that was easy to read and understand, including
  - what yllMyHome heard from the community
  - the current state of the identified issue (locally and in other jurisdictions)
  - the research to support policy change
  - established best practices on policies
  - policy recommendations that take a preventative and harm-reduction approach
  - other past initiatives yllMyHome has implemented to support community education, harm reduction and culture change

## Real Communities, Real Issues, Real Solutions

### **The Coalition for Action on High Risk Drinking, brings partners together to address an identified issue at the University of Alberta (student population 38,311).**

The Coalition for Action on High Risk Drinking at the University of Alberta (U of A) in Edmonton is mandated to serve as a coordinated resource to support the U of A in responding to issues related to high-risk drinking among students. The coalition's main goals are to collaborate and share information; provide consultation and advice to coalition partners and the university community; monitor trends in alcohol use, misuse and alcohol-related incidents on campus; and support interventions and policies designed to reduce harmful consequences of alcohol misuse at the U of A. To meet these goals, the coalition brings together a diverse group of stakeholders, including

- Alberta Gaming, Liquor & Cannabis (AGLC)
- AHS
- Faculty of Rehabilitation Medicine
- Gender Based Violence and Prevention Program
- Graduate Students' Association
- Injury Prevention Centre
- Office of the Dean of Students
- other Edmonton and area post-secondary institutions
- Protective Services
- Residence Services
- Risk Management
- Sexual Assault Centre
- Student Conduct and Accountability
- Students' Union

In 2016/17, the coalition focused on integrating prevention programming into existing campus-based, student-led training programs from some of the partner organizations listed above. The coalition used a program called [Dinner and Dialogue](#) to engage with these partners and facilitate the content they wanted to see integrated. The goal was to build the capacity of these leaders, who are already working with students. Two key topics discussed were alcohol and health, and the value of harm-reduction efforts. The coalition reached 425 students and student leaders in total.<sup>42</sup>



Photo by Z Harvey-Jansen; used with permission

## Develop and implement a comprehensive municipal alcohol policy

“Engaging in policy development is not a sprint. It’s more like a cross-country marathon, and everyone needs to pace themselves.” — Chair of Hanna and District Youth Club

### Consider the six policy areas

Each policy area listed below is based on established evidence for effective alcohol policy,<sup>2,3,4,5,6</sup> as well as what Alberta municipal representatives have identified as important.<sup>7</sup> Each policy area or stipulation within the area can stand on its own; however, they are interrelated and, if developed and implemented concurrently, will create a robust, effective and all-encompassing municipal alcohol policy—one of the strongest tools to address alcohol-related harm<sup>2</sup> (see the examples in the Real Communities, Real Issues, Real Solutions below). The six policy areas are not listed in any particular order. It is up to each municipality to assess priority actions and tailor policy recommendations to their community issues.

Policy areas:

1. Regulating alcohol availability
  - a. Density and distance between alcohol establishments
  - b. Hours of operation of alcohol establishments
2. Controlling alcohol pricing
3. Ensuring safer drinking environments and safer communities
4. Limiting alcohol marketing, advertising and sponsorship
5. Preventing and reducing drinking and driving
6. Advocating for preventative alcohol policy at the provincial and federal level

The second half of this guide, titled Options and Opportunities for Municipal Alcohol Policies, expands on each of the policy areas.

### Integrate a policy evaluation process

**A comprehensive municipal alcohol policy includes policy evaluation.** Any policy development process is incomplete without monitoring, evaluating and sharing the outcomes with relevant stakeholders and community groups. This ensures that adjustments can be made to improve effectiveness, that successes are celebrated and that unsuccessful efforts are not duplicated. While there are many monitoring and evaluation tools available, consider the National Collaborating Centre for Health Public Policy’s *A Framework for Analyzing Public Policies: Practical Guide*.

The Provincial Addiction Prevention Team worked with the Provincial Evaluation team as this guide was being developed and piloted in 8 municipalities.

Although policy evaluation and program evaluation have many similarities, there are some important differences:

- the level of analysis required for policy evaluation is at the system or community level
- the degree of control and clear boundaries may be more challenging with policy evaluation
- the ability to identify an equivalent comparison community may be more challenging with policy evaluation
- the scale and scope of data collection may be greater with policy evaluation
- policy evaluation may require increased emphasis on the use of surveillance and administrative data
- the type and number of stakeholders involved may differ<sup>43</sup>

**Remember to consider not only the overall effectiveness of policy change, but also the potential impact on health equity.**

Alcohol policy also has a role in the workplace and on post-secondary campuses. Concepts from this guide can be scaled and applied at the level of a campus, organization, or other setting, in addition to being used at the municipal level. As well AHS has specific resources to support work in these settings.

*It's Our Business: Addressing Addiction & Mental Health in the Workplace* is a manual for AHS Addiction and Mental Health staff and allied health professionals. It is intended to enhance and support AHS work with Alberta's employers.

*Prethink Your Drink: Reduce High-Risk Drinking on Campus* is a toolkit for student leaders, student groups and administration to help them promote safer alcohol use on post-secondary campuses across Alberta.



## Real Communities, Real Issues, Real Solutions

### Comprehensive alcohol policies

#### **A community coalition, Brooks and District Drug Task Force Society, presents alcohol policy options to the municipal government in the City of Brooks, Alberta (population 14,451).**

In 2016 the Brooks and District Drug Task Force Society learned that city residents wanted a reduction in the number of alcohol outlets in the city. In response, the coalition developed and presented an alcohol policy to the City of Brooks that included the following recommendations:

1. A moratorium on further liquor stores in the City of Brooks.
2. Reduced hours of alcohol sales at bars, restaurants and pubs, from 2:00 a.m. to 1:00 a.m.
3. A ban on “aggressive” advertising and promotion of alcohol (e.g., brand advertisement or promotion, illuminated panels visible from the street, billboards, window displays, decorative panels and backdrops).
4. For non-compliance of points 2 and 3 above, creating fines applied through municipal ticketing. Revenue from these fines would be allocated to support local non-profit organizations that work to reduce the harms of alcohol in the community.

While the Brooks alcohol policy did not pass, the coalition felt that it responded to the expressed needs of city residents.<sup>42</sup>

Key steps taken by the Brooks and District Drug Task Force Society:

1. Developing and disseminating an online community survey to determine peoples’ opinions on a number of questions related to the city, including those related to alcohol.
2. In response to concerns regarding drinking and the number of alcohol outlets, exploring policy options within the municipality to address these concerns. The coalition sought advice and support from AHS Provincial Addiction and Mental Health, and bylaw development recommendations from the City of Brooks’ corporate services manager.
3. Developing the policy.
4. Presenting the policy to city council.

## Real Communities, Real Issues, Real Solutions

**The City of Prince Albert, Saskatchewan (population 35,926), develops an all-encompassing municipal alcohol policy.**

The Prince Albert and area Community Alcohol Strategy (CAS) is a roadmap for the community to create healthy communities by changing unhealthy attitudes and behaviours regarding alcohol use. The strategy is the result of awareness in the community that alcohol was having a negative impact on citizen's lives, as well as the health care, social services and enforcement systems. Creating the strategy was a community effort. The [Prince Albert Community Alcohol Strategy website](#) provides details about the strategy, the community engagement process and the achievements of the strategy since 2016.



# Options and Opportunities for Municipal Alcohol Policies

Six options for Municipal Alcohol Policy are reviewed in detail in this section. For each policy area, the discussion includes:

- an explanation of why the policy area is important,
- the evidence that supports the effort,
- a “Questions to Consider” section to reflect on what can be asked and answered as you move through this work and
- a “Real Communities, Real Issues, Real Solutions” section.

The first five policy areas detail what can be done on municipally owned properties and/or at municipal events. However, since this guide encourages efforts to reduce risk and harm from alcohol in the whole community (not just on municipally owned property), policy options using, for example, tools such as zoning, land use and business-license bylaws are also included. The sixth policy area outlines opportunities to voice opinions, concerns and ideas to influence policies at the provincial and federal level.

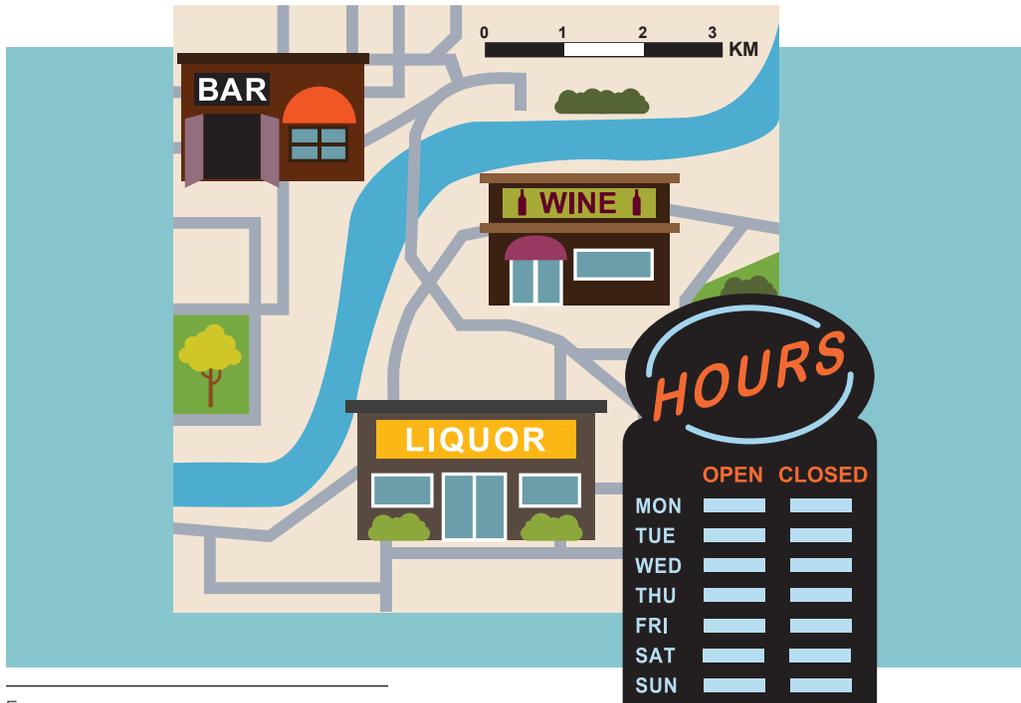




# 1. Regulating Alcohol Availability



**Land use bylaws** (LUB)<sup>F</sup> can be applied to regulate the location in which an alcohol establishment operates, and the hours in which it operates (sometimes hours of operation are also regulated via a business license bylaw). LUBs divide municipalities into designated districts and outline the types of land uses allowed in each area. Any municipality with a population of more than 3,500 is also required to have a long term land-use plan called a **municipal development plan**. The purpose of these plans and LUBs is to achieve orderly, economical and beneficial development, and to maintain and improve the quality of the physical environment for residents.<sup>44</sup> It is within a LUB that the density of alcohol outlets and the distance between outlets and certain settings/landmarks can be addressed. While an LUB pertains to the entire municipality, municipalities have more authority on municipally owned property or public events. As such, further regulations can be applied to regulate the physical availability through additional guidelines or policies.



<sup>F</sup> LUB are also sometimes called zoning bylaws.

## 1a. Why address density and distance between alcohol establishments?



Research strongly indicates that when alcohol is readily available, consumption is higher, leading to higher rates of alcohol-related problems such as assault, public disturbance and alcohol-related motor vehicle collisions. The converse is also true. When alcohol is less available, consumption is lower, resulting in lower rates of alcohol-related harm. Furthermore, evidence indicates that clustering alcohol establishments within high-density entertainment districts can cause problems with public order and violence.<sup>2</sup> Having alcohol establishments close to areas that are frequented by children and youth exposes them to high-risk environments, which normalizes and encourages them to consume alcohol. Where alcohol establishments are close to schools or homes, students may be exposed to public drunkenness, harassment of passersby and criminal activities.<sup>17</sup> According to experts in the field, regulating the availability of alcohol is an effective policy tool to address these harms.<sup>2,3,4,5,6,45</sup>

Requiring separation distances in LUBs might be challenging for smaller communities, that may have limited commercial districts and where a separation distance might make it impossible to set up an alcohol establishment at all.<sup>17</sup> Once again, it is important to begin with community engagement with all stakeholders to ensure which proposed policy options are a fit for the municipality.



## Policy options for regulating density and distance between alcohol establishments

- Strengthen local zoning regulations through LUBs to
  - avoid clustering alcohol establishments and to reduce congestion in and around alcohol establishments by
    - considering a ban on new alcohol establishments in certain high-density areas
    - establishing licensing review committees that involve residence participation, and raising public awareness about formal processes at the municipal and provincial level for public input when liquor licences are applied for
    - ensuring that the public knows that public participation in municipal decision making is required,<sup>40</sup> and that when an individual or business applies for a liquor license, that application must be posted for public feedback on the AGLC website for 21 days<sup>48</sup>
  - prohibit and/or challenge alcohol establishments from operating within a certain distance of an area frequented by children and youth (e.g., schools, daycares, community facilities)
- Establish clear (or communicate already-established) consequences and penalties for bylaw non-compliance (e.g., fines, community service)

In 1993, there were 208 liquor stores in Alberta; in 2018, that number had increased to 1,502. This is an increase from one liquor store for every 12,379 people in 1993 to one for every 2,760 people in 2018.<sup>46</sup>

## Policy options for alcohol availability at municipal facilities and/or municipal events<sup>17,29,47</sup>

- Promote health by ensuring that the community offers alcohol-free alternatives in entertainment, recreation and socializing
- Regulate, manage and evaluate conditions under which alcohol can be consumed in public places and on municipally owned or managed properties and facilities during public and private events, including festivals
  - Ensure that citizens know that drinking in public places is prohibited by provincial law and ensure strict enforcement
  - Provide alcohol-free spaces and events whenever possible
  - If alcohol is permitted, enclose licensed areas at events and ensure that the area is not accessible to minors
  - Establish clear consequences and penalties for non-compliance (e.g., fines, loss of hosting/renting privileges)

## Questions to consider<sup>47</sup>

- How many alcohol establishments are already in the community? Data such as this can strengthen zoning regulation changes. This information is readily available online; visit [Liquor Provider Search](#) on the AGLC's website.
- Do current LUBs differentiate between different types of alcohol establishments?
- How will the proximity of alcohol establishments affect a particular area or neighbourhood? Has an impact study been conducted in regard to new applications?
- Would drinking be unadvisable or obviously out of place considering the anticipated attendees at an event (e.g., one focusing on family or children)?
- Would drinking at an event require more resources to manage it than event hosts can provide?
- Would permission to drink fit with the purpose of the event, or jeopardize its overall appeal?
- Is drinking widely misperceived by local residents as a necessary ingredient to success for a community event?



Photo by Kari Jesswein; used with permission

## Real Communities, Real Issues, Real Solutions

### Entertainment area zoning bylaw

**The City of Edmonton, Alberta (population 932,546), limits the density of alcohol establishments and regulates distance between alcohol establishments.**

Edmonton's zoning bylaw<sup>49</sup> establishes restrictions for an entertainment area bounded by 82nd Avenue (Whyte Avenue). Zoning for this area does not specify a separation distance between venues, but applies a maximum occupancy and gross floor area to limit the number of bars, pubs and nightclubs,<sup>50</sup> and to prohibit the expansion of existing bars, pubs and nightclubs. This section of the bylaw was introduced to better manage this key entertainment district in Edmonton after the 2001 Canada Day riot that left business owners and the City of Edmonton with tens of thousands of dollars of damages and numerous arrests.<sup>51</sup> This bylaw, says a senior planner with the city, "is one of the many ways to manage the Whyte Avenue area and ensure that it can continue to function for economic and social purposes, but in a much safer manner, and to make sure that we don't end up with an area that becomes stigmatized because of negative activities that take place there."<sup>52</sup>

Edmonton also has a stipulation in their zoning bylaw<sup>49</sup> called "Major or Minor Alcohol Sales." This stipulates that liquor stores must be located further than 500 meters away from another liquor store. The 500-metre separation distance is measured from the closest point of the liquor store to the closest point of any other existing or approved liquor store. If two or more liquor stores are within 500 metres of each other as of the date of the enactment, they are considered legal non-conforming uses (i.e., grandfathered in).

## Real Communities, Real Issues, Real Solutions

### “Distance between” stipulation

#### **Alberta municipalities address the location of liquor stores in relation to child and youth facilities**

- **The City of Calgary** (population 1,239,220)  
Calgary’s LUB<sup>53</sup> stipulates a 150-metre separation distance between liquor stores and schools.
- **The Town of High River** (population 13,584)  
High River’s LUB<sup>54</sup> includes a section that states a liquor store may not be located closer than 150 metres to any public parks that include playgrounds and play areas or public/private schools. The bylaw also stipulates that while 150 metres is mandatory, the preference is for a 300-metre minimum separation distance.
- **The City of Edmonton** (population 932,546)  
Edmonton’s zoning bylaw<sup>49</sup> requires a 100-metre separation from parks and schools.

### Community conversations about alcohol access

#### **The Hanna and District Youth Club engages its community and municipal government to regulate alcohol access on municipally owned property in the Town of Hanna, Alberta (population 2,559).**

In 2011, the Hanna and District Youth Club, part of a local community coalition, engaged community members in dialogue on the topic of alcohol use in their town. The purpose was to ask community members to discuss questions such as:

- What does “a culture of moderation” mean for your community?
- Where do you see alcohol use in your community? Is there healthy use? Unhealthy use?
- How could your community encourage a culture of moderation among young adults and still support the law with youth and children?

The community at large was invited to participate, as well as community members of influence, or “champions,” including RCMP, school principals and coaches. Youth, parents and local AHS Addiction and Mental Health staff were also participants. At the event, one exercise asked the participants to list all the places that people could consume alcohol in Hanna. They listed 54 places. The coalition

## Real Communities, Real Issues, Real Solutions

chair believes that this was a pivotal “a-ha” moment. “We asked ourselves, can we not say ‘no alcohol’ somewhere in our town? Can we not give our youth and our families the message that you don’t have to have alcohol in order to have a good time? In my mind this was the real platform for change to happen. **I challenge any community to do this [activity]. It is quite an eye-opener.**”<sup>55</sup>

These dialogues provided an opportunity for participants to come up with creative ideas to reduce alcohol-related harm in Hanna. One idea, the creation of alcohol-free events and venues, was embraced by many. At the same time the dialogues were occurring, the municipality was in the process of constructing a new community health and wellness facility. The coalition chair indicated that this provided a natural opportunity. “When the building opened, it dovetailed nicely into an opportunity to introduce an alcohol policy.” The coalition, with the support of the community and community champions, requested that the town council consider making the new facility alcohol-free. Council was extremely supportive and the alcohol-free policy was implemented.

The town’s commitment, passion and involvement are what the coalition is most proud of. The coalition chair said, “The community was willing to sit down and without any judgement or any preconceived ideas have a frank discussion. The community owned the discussion and they own the decision.”

Key steps and positions critical for success:

- Have community-wide representation as part of the coalition and engage key influencers like law enforcement, coaches and principals. Make sure to include youth!
- Provide a forum so that people can talk frankly about what is happening in their community.
- Ask participants to set judgment aside and think about alcohol misuse as a community issue, not a moral issue.
- Include community champions who are willing and able to take issues and ideas to decision-makers.
- Listen to the community and build on its strengths.
- Use natural and opportunistic levers to take action and propose meaningful change.

**Where does drinking happen in \_\_\_\_\_?**  
name of municipality

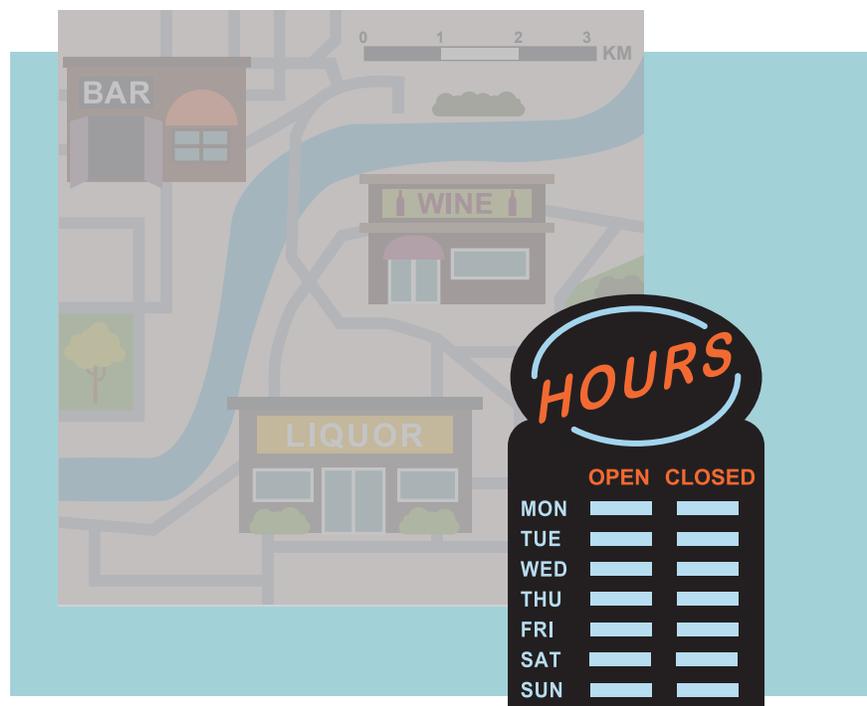


1. \_\_\_\_\_
2. \_\_\_\_\_
3. \_\_\_\_\_
4. \_\_\_\_\_



## 1b. Why address hours of operation?

Increased hours of operation at alcohol establishments has been shown to result in higher levels of community and individual harm (e.g., public intoxication, property damage, noise, assault and injury). Harms are often seen in businesses and residential neighbourhoods that are adjacent to areas with alcohol establishments. Limiting hours of operation reduces the overall access and availability of alcohol, which has been demonstrated to reduce alcohol-related harms.<sup>29</sup> The goal is to limit the availability of alcohol, specifically late at night, since a number of studies have linked extended late-night hours with heavier alcohol use and, consequently, increased violence and harm in and around alcohol establishments.<sup>47</sup> Not only do patrons themselves and neighbourhood residents suffer as a result, but extra burden is also put on law enforcement, transportation services and primary health-care resources.<sup>47</sup>



## Policy options to address hours of operation<sup>17,29,47</sup>

- In consultation with the AGLC<sup>F</sup>, pass bylaws (through LUBs or business-license bylaws) that restrict the hours of alcohol service
  - The following hours of operation are recommended:<sup>3</sup>
    - Off premise from 11:00 a.m. to 8:00 p.m.
    - On premise from 11:00 a.m. to 1:00 a.m.
    - Earlier closure on Sunday through Thursday (e.g., 12:00 a.m.)
- Establish a probationary period for newly licensed establishments imposing earlier closing times
- Establish clear (or communicate already-established) consequences and penalties for bylaw non-compliance (e.g., fines, community service)
- Seek voluntary agreements with alcohol establishments (particularly alcohol-primary establishments) to stagger their hours of closure
  - Talk with operators collectively about the advantages and obstacles of rotating staggered closing times so that not all are open late every night
  - Lengthen the time between last call and closing hours and prohibit new patrons from entering late-night establishments within one hour of closing time
- Take into account neighbourhood features and factors when assessing hours of operation (see policy area 3 – Ensuring Safer Drinking Environments and Safer Communities)
- Regulate, manage and evaluate the conditions under which alcohol can be consumed on municipally owned or managed properties and facilities during public and private events, including festivals
  - Limit hours of operation at events hosted on municipally owned or managed property and facilities (at least to the recommended hours detailed above)
  - Lengthen the time between last call and closing hours and prohibit new patrons from entering late-night establishments within one hour of closing time
  - Establish clear consequences and penalties for non-compliance (e.g., fines, loss of hosting/renting privileges)
  - Provide incentives for alcohol-free events
    - Lower booking fees
    - Priority dates

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<sup>F</sup> According to section 92(3) of the Gaming, Liquor and Cannabis Regulation, a municipality that chooses to restrict its hours of operation is required to advise the AGLC board and secure approval.

## Questions to consider

- Do the economic and social benefits of later business hours outweigh the potential harm to patrons, neighbourhood residents and the community at large?<sup>47</sup>
- Are hours of business for a given applicant or already-approved establishment appropriate to its immediate surroundings?<sup>47</sup>
- Are there particular areas (such as entertainment districts within the neighbourhood) that could benefit from reduced hours of service?<sup>47</sup>
- Are there additional enforcement costs in entertainment districts? What are the associated costs? How are these costs recouped by the municipality?<sup>50</sup>
- Is there late-night transit in the municipality? What is the cost of providing these services?<sup>50</sup>
- What are the costs of late-night municipal resources (e.g., garbage collection) associated with late-night hours of operation?<sup>50</sup>
- What impact would changes in hours of operation have on the members of the community where these decisions are being made, and, are those voices being welcomed at the decision-making table?

The Gaming, Liquor and Cannabis Regulation outlines the maximum hours of operation for all alcohol establishments in Alberta.<sup>56</sup>

- Class A, B or C alcohol establishments can be open between 10:00 a.m. and 2:00 a.m.
- Class D alcohol establishments with the following licences can be open from the following hours:
  - Retail liquor store licence, 10:00 a.m. to 2:00 a.m.
  - General merchandise liquor store licence, 10:00 a.m. to 2:00 a.m.
  - Off-sales licence, 10:00 a.m. to 2:50 a.m.
  - Manufacturer's off-sales licence, 10:00 a.m. to 2:00 a.m.
  - Delivery service licence, 10:00 a.m. to half an hour after the last purchase was made
- Special-event licences
  - Special-event licence, except public resale licence, 6:00 a.m. to 2:00 a.m.
  - Public resale licence, 10:00 a.m. to 2:00 a.m.

## Real Communities, Real Issues, Real Solutions

### Alcohol-free events

#### **The Town of Stony Plain, Alberta (population 17,189), implements incentives for alcohol-free events.**

The Town of Stony Plain will rent town-owned recreational facilities to individuals, groups and organizations based on the following priorities:

1. Local minor groups (>51% under 18 years old)
2. Local adult groups
3. Non-local groups
4. Commercial/alcohol-related

Local minor and local adult groups will be subject to higher rental fees if the facility rental involves alcohol. The town levies fees for the use of town-owned facilities based on the operating cost per hour (local minor groups at 70%, local adult groups at 100%, non-local groups at 125% and commercial/alcohol-related at 125%).<sup>57</sup>

### Restriction on liquor store hours

#### **The City of Wetaskiwin, Alberta (population 12,655), restricts liquor store hours of operation.**

On January 1, 2010, after a unanimous vote, the City Council of Wetaskiwin introduced its Business Hours Bylaw (details of which are also outlined in their LUB). This bylaw sets the hours of operation for liquor retail stores and liquor off-sales establishments between 10:00 a.m. and 10:00 p.m., seven days per week, including statutory holidays. Liquor delivery services may only operate between the hours of 10:00 a.m. and 10:30 p.m., seven days per week, including statutory holidays.<sup>58</sup> This process began in 2009, when council learned from the RCMP that the majority of their late-night calls were incidents involving alcohol. Understanding that reducing alcohol availability leads to reduced consumption and ultimately reduces alcohol-related harm,<sup>2</sup> council decided to engage their citizens in a number of town hall meetings to discuss the idea of reduced hours of operation. With the majority of citizens, as well as organizations such as church groups, health services and RCMP, supporting the move, the bylaw was drafted and implemented.<sup>52</sup>

## Real Communities, Real Issues, Real Solutions

### **The Town of Wolfville, Nova Scotia (population 4,195— and more than 7,000 when Acadia University is in session), restricts bar hours of operation.**

The Town of Wolfville has reduced hours of operation for licensed establishments. They restricted the closing time to 1:00 a.m. rather than the provincial regulation of 2:00 a.m.<sup>17</sup> Wolfville has ongoing involvement with the Nova Scotia Municipal Alcohol Project.

The project provides leaders and citizens in Wolfville, and others across the province, with the opportunity to explore and share how alcohol affects their communities and to seek solutions.<sup>59</sup> For more information, visit the Nova Scotia Federation of Municipalities' [Municipal Alcohol Project](#).

While there are few examples of municipalities restricting hours of alcohol operation in Alberta and Canada, there are many jurisdictions that allow for extended hours of service.<sup>60,61</sup>

- During the 2017 Calgary Stampede, blanket approval was given to all bars, restaurants and lounges (Class A, B and C liquor licenses) in the City of Calgary to start alcohol service at 8:00 a.m. Businesses on the parade route were also permitted to apply to begin their service as early as 7:00 a.m. on parade day.<sup>62</sup>
- For the 2018 FIFA World Cup, a “blanket liquor licence extension” for bars that wanted to show early-morning games was announced.<sup>63</sup> This meant that liquor could be served starting as early as 4:00 a.m.<sup>64</sup>

Extended hours may increase harms associated with alcohol use, or normalize various levels of alcohol use for children in attendance.





## 2. Controlling Alcohol Pricing



At the provincial level, the AGLC sets minimum drink prices for alcohol purchased and consumed on premise at restaurants, bars, clubs and pubs. However, the AGLC does **not** set a minimum price for alcohol sold in liquor stores or through off sales (Class D establishments).

Private retail owners are able to set their own prices.<sup>65</sup> The AGLC adds a markup to the liquor it sells to all liquor licensees and collects the markup on behalf of the Government of Alberta. The markup goes to Alberta's General Revenue Fund. For example, according to the November 2018 AGLC markup schedule, the added markup on a bottle of spirits with greater than 60% alcohol by volume is \$18.33. For beer with less than or equal to 11.9% alcohol by volume, the added markup is \$1.25.<sup>66</sup> There is no stipulation in the Gaming Liquor and Cannabis Act (GLCA) or Regulation (GLCR) regarding a municipality's ability to impose a tax on alcohol or impose higher minimum prices at Class A, B or D licensed establishments.<sup>67</sup> As of autumn 2017, no municipality in Alberta had imposed additional tax or raised minimum drink prices in these establishments.<sup>7</sup> On municipal properties and at municipal events, however, municipalities can (and some already do) set their own minimum drink prices (as long as they are not less than what is set by the AGLC) and create incentives for events that limit or prohibit alcohol.<sup>7</sup> Municipalities can also engage with their local alcohol establishments and request voluntary price policy changes.



## Why address alcohol pricing?

Decreasing economic availability of alcohol can reduce alcohol consumption and in turn reduce alcohol-related harm (such as crime, alcohol-related deaths and hospitalizations due to intoxication).<sup>2</sup> Studies have shown that a 10% increase in alcohol prices can reduce consumption by 4.5% (for wine) and 10% (for beer).<sup>50</sup> **Negative effects associated with heavy alcohol consumption decrease in conjunction with increases in minimum alcohol prices.**<sup>50</sup>

In a study conducted in British Columbia to analyze the relationship between minimum alcohol pricing and crime, it was found that a 10% increase in average minimum alcohol prices was significantly associated with a decrease of alcohol-related traffic violations by 18.8% and a reduction of crimes against people by 9.4%.<sup>68</sup> Furthermore, the introduction of increased minimum alcohol prices was associated with an abrupt decrease in nighttime alcohol-related traffic offences by men.<sup>69</sup>

## Policy options to address alcohol pricing

- Seek voluntary agreement with alcohol establishments (particularly alcohol-primary establishments like bars and clubs)
  - Offer free non-alcoholic drinks for designated drivers
  - Offer lower-alcohol content beverages at lower costs
  - Set a higher minimum price for all alcoholic beverages
- Regulate, manage and evaluate conditions under which alcohol can be purchased on municipally owned or managed properties and facilities during public and private events, including festivals
  - Offer free non-alcoholic drinks
  - Offer lower-alcohol content beverages at lower costs
  - Set a higher minimum price for all alcoholic beverages

## Questions to consider

- Should alcoholic beverage prices be increased in on-premise facilities?<sup>50</sup>
- Off-premise alcohol establishments do not have a provincially set minimum price. Do you agree with this? Why or why not?
- Do you feel municipalities should have more clear control in influencing the price of alcohol? Why or why not?<sup>50</sup>

## Real Communities, Real Issues, Real Solutions

### Controlling pricing and service hours

**The City of Airdrie, Alberta (population 61,581), controls alcohol pricing and restricts hours of service on municipally owned property.** (For more on restricting hours of service see item 1b on page 44).

In addition to a number of other event planning requirements, the City of Airdrie has an alcohol management policy that addresses the hours in which alcohol can be served at the city's Bert Church Theatre. "The reason we created the policy was very purposeful," says a community services director. "When we opened the new space, we said, 'Okay, there will be expectations for event organizers to have alcohol. There will be expectations from the community that they can have a glass of wine before seeing a performing artist.' So we decided we needed a policy for when, where and how we would serve alcohol. And further, to detail the terms and conditions for educating and training our staff to mitigate any adverse impacts related to serving alcohol."<sup>52</sup> The policy that the city came up with includes a number of stipulations,<sup>70</sup> including:

- Non-alcoholic beverages must be available at all times and shall be provided at no charge or at a lower cost than alcoholic beverages.
- Alcoholic beverages will not be offered free of charge or given away under any circumstance.
- All licensed premises must have a liquor menu that indicates the quantity of liquor in each drink and the price, in accordance with the Alberta Gaming, Liquor and Cannabis Regulation.
- Alcoholic beverages will be limited to a single standard serving. Pitchers of beer or bottles of wine placed on tables are strictly prohibited.
- Purchases will be limited to two alcoholic beverages per patron at any one time through liquor tickets only.
- Alcohol sales may commence 60 minutes before the event begins and will not be available during performances within the auditorium. Alcohol sales will terminate at the end of the last intermission for auditorium performances or 30 minutes prior to the conclusion of other events.
- There will be no last call announcement for alcoholic beverages, though they can be consumed within the facility for one hour after the sale of alcoholic beverages has ceased.

The community services director believes that this policy is beneficial to the community because "anyone in the community can download the policy, review it and really think differently about the implications of having alcohol at an event."<sup>52</sup>

## Real Communities, Real Issues, Real Solutions

### Controlling alcohol pricing on-premise

#### **The City of Vancouver (population: city 631,486, Greater Vancouver 2,463,431)**

“Vancouver’s License Bylaw requires licensed liquor establishments to refrain from selling, or offering for sale, an alcoholic beverage at a retail price of less than \$3.00 per standard serving, inclusive of taxes, being: (i) 1 fl oz of spirits having an alcoholic content of 17% or more, served on its own or in a mixed beverage, (ii) 5 fl oz of wine having an alcoholic content of 1.5% or more, or (iii) 20 fl oz of beer, cider or a cooler, having an alcoholic content of 1.5% or more; (iv) calculate pro rata the minimum price of an alcoholic beverage containing a fraction of one standard serving.”<sup>60,71</sup>

#### **The City of Victoria (population 383,360)**

“Victoria’s Business License Bylaw prohibits licensed establishments from selling, or offering for sale, alcoholic beverages at a retail price of less than \$3.00 per Standard Serving, inclusive of taxes. The minimum price of an alcoholic beverage containing a fraction of one Standard Serving is to be calculated pro rata. A Standard Serving is: (a) 1 fl oz of spirits having an alcoholic content of 17% or more, served on its own or in a mixed beverage; (b) 5 fl oz of wine having an alcoholic content of 1.5% or more; (c) 12 fl oz of beer, cider, or a cooler, having an alcoholic content of 1.5% or more.”<sup>60</sup>

#### **The City of Toronto (population 2,929,886) implements municipal alcohol tax.**

The City of Toronto has its own municipal statute: the Toronto Municipal Act, 2006. This act allows Toronto to impose alcohol taxes. All other municipalities in Ontario are currently prohibited via Ontario’s Municipal Act, 2001.<sup>72</sup> The taxes Toronto imposes include a tax on the purchase of alcohol (i.e., liquor, beer or wine, as defined in the provincial Liquor License Act) at the point of sale. Toronto is currently reviewing the taxation of alcoholic beverages and products, including alcohol sold at its Liquor Control Board of Ontario stores.<sup>50</sup>





### 3. Ensuring Safer Drinking Environments and Safer Communities



A key factor in addressing alcohol-related harm involves the environment, the context or the conditions under which alcohol is being consumed (i.e., where, when, how and why alcohol is being served and who is serving it). Municipalities can apply stipulations to ensure that a number of precautions are taken inside and outside of alcohol establishments, or at events held on municipally owned property, to enhance safety.

Municipalities can also implement stipulations to address noise and nuisances that may detract from the enjoyment of the overall community.

In addition, education, prevention, early-intervention and harm-reduction programming to address alcohol concerns can be part of a comprehensive approach to reduce associated harms. Municipalities can use policy to collect fees to allocate towards supporting these types of programs in their communities.



## Why address safer drinking environments?

**Crime prevention through environmental design (CPTED)** was highlighted as critical for most municipalities when considering making spaces safer for the community.<sup>7</sup> As highlighted in the City of Grande Prairie's 2016 LUB, "crime generators are areas that may produce activities that facilitate crime. Establishments like liquor stores, are, of course, legitimate commercial activities and not problems in and of themselves; however, their location may cause conflict or unforeseen secondary activity, such as late-night loitering, and may become places for evening robberies."<sup>7</sup> As such, CPTED is an ideal solution since, as the Edmonton Police Service says, it "seeks to reduce both the opportunity and the number of targets for criminals; legitimate users of a space are actively encouraged, opportunities for observation are increased, and potential offenders are made to feel uncomfortable."<sup>73</sup>

Evidence shows that training staff to better manage patron aggression is moderately effective at reducing alcohol-related harm when properly enforced.<sup>2</sup> While not all studies of responsible beverage service have found a significant effect in reducing intoxication among patrons, when properly enforced (i.e., suspending the license of establishments that continue to serve intoxicated patrons) they are more likely to have a sustained effect.<sup>2</sup>

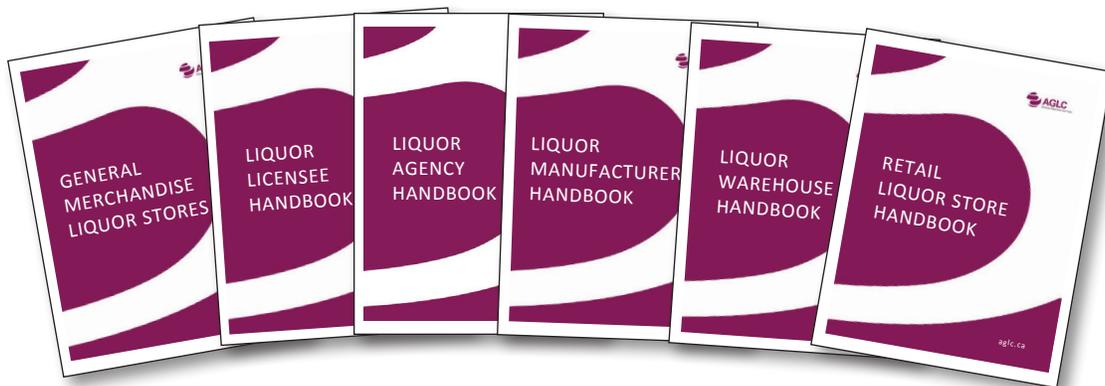
## Policy options to ensure safer drinking environments at alcohol establishments and at municipal facilities and/or events<sup>17,29,47</sup>

- The AGLC requires **ProServe** training for staff of Class A, B, most D<sup>G</sup>, duty-free licensed establishments and commercial public resale special event licenses. While the AGLC monitors this policy requirement, municipalities can
  - work with enforcement officials on monitoring and enforcing these policies.
  - advocate for ProServe to be mandatory for Class C establishments and for private special event licenses.
  - advocate for increased presence of provincial AGLC inspectors (i.e., enhance enforcement).
  - develop mutual agreements on a common code of practice and a commitment to shared public safety strategies among licensed establishments. Once in place, encourage mandatory participation for all licensed establishments. Enhance this by making it mandatory and backing it with enforcement.

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<sup>G</sup>It is not required for Class D Sacramental Wine Resale.

- The AGLC requires **ProTect** training for certain staff at Class A minors-prohibited licensed establishments. While the AGLC monitors this policy requirement, municipalities can
  - work with enforcement officials on monitoring and enforcing these policies.
  - advocate for ProTect to be mandatory for Class C establishments.
  - advocate for increased presence of provincial AGLC inspectors (i.e., enhance enforcement).
  - develop mutual agreements on a common code of practice and a commitment to shared public safety strategies among licensed establishments. Once in place, encourage all licensed establishments to participate. Enhance this by making it mandatory and backing it with enforcement.



**AGLC Handbooks provide licensees with policies and guidelines related to their license in order to assist them in complying with the requirements of their license.**

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## Why support education, prevention and early-intervention and harm-reduction programming?

Even though alcohol and other drug education programs have limited efficacy for behaviour change, there is evidence that they can raise awareness about the issues of alcohol-related harm. According to experts in the field, “an informed public can help build support for public policies on alcohol.”<sup>2</sup> Prevention programs that address resilience by focusing on enhancing protective factors and reducing risk factors in children and youth can also be beneficial.<sup>74</sup> Furthermore, some harm-reduction and early-intervention programs have shown some positive effects in changing drinking behaviours. For example, brief motivational interventions with high-risk youth have shown modest positive effects and brief interventions with high-risk drinkers and mutual-help/self-help groups have also shown moderate positive effects.<sup>2</sup>

## Policy options for safe enjoyable communities

- Establish and enforce public nuisance and noise bylaws to address disorderly behaviour and noise. This may include working with local landlords and venue operators to ensure adherence to public nuisance/noise bylaws.
- Within zones that allow alcohol establishments, use the principles of crime prevention through environmental design to regulate various aspects of use.
  - In outside areas, these include
    - lot area, frontage and yard setback requirements
    - screening, buffering and landscaping requirements
    - parking and signage requirements
    - ensuring exteriors have ample lighting, security cameras and clean clear sidewalk space
  - Within establishments, these include
    - ensuring interiors are well lit and well ventilated, with clear, accessible pathways and exits to avoid congestion
    - creating low-congestion areas
    - ensuring washrooms are adequately sized and clean
    - use of tempered glassware or plastic cups
- The above policy options can be applied to regulate, manage and evaluate the spaces under which alcohol is made available, and those that serve alcohol to patrons on municipally owned or managed properties and facilities during public and private events, including festivals.
- Implement fees through business license bylaws that can then be redirected to programs supporting education, prevention, early intervention and harm reduction.

## Questions to consider

- Has the municipality encouraged alcohol establishments to assume greater responsibility for providing safer drinking environments?<sup>47</sup>
- How has the municipality shown leadership in working with other stakeholders (e.g., law enforcement, health, the AGLC) to respond to alcohol-related episodes in the community?<sup>47</sup>
- Is there incident data available (from the police, educational institutions or emergency health services) to better understand alcohol-related harm patterns?
- Are license applicants required to submit a plan addressing business strategy, security provisions and noise management?
- Are there opportunities for balanced public conversations about the role of alcohol in the community (including disruption and harms)?<sup>29</sup>
- Does the municipality or community promote consistent messages about lower risk alcohol use (e.g., promote Canada's Low Risk Drinking Guidelines—see Appendix A)?<sup>29</sup>
- Are there opportunities to educate the public on supportive services in the municipality, including health, social services and community organizations?<sup>29</sup>

## Real Communities, Real Issues, Real Solutions

### Applying the principles of crime prevention through environmental design

#### **City of Brooks, Alberta (population 14,451)**

The City of Brooks' land use bylaw (LUB)<sup>75</sup> includes a stipulation that requires liquor licensees to adhere to a number of CPTED strategies, including lighting, landscaping, parking and visibility requirements. According to the manager of shared services, these types of strategies are not only good for the municipality but are also an easy sell to licensees who are interested in contributing to safe and vibrant communities. She says, "A liquor store that was recently approved provided designs that went above and beyond the regulations in the LUB in terms of CPTED. They are coming from a perspective where they don't want to be robbed; they don't want their store, which is also beside a grocery store, to be thought of as a shady, sketchy place. They want it to be safe, they want clear visibility, and they want to prevent crime at their location. They really have no issue with [CPTED strategies]."<sup>52</sup>

#### **County of Barrhead, Alberta (population 6,288)**

#### **Town of Sylvan Lake, Alberta (population 14,816)**

The County of Barrhead<sup>76</sup> and the Town of Sylvan Lake<sup>77</sup> both have a number of CPTED strategies and other safety stipulations within their land use bylaws.

#### **The City of Red Deer, Alberta (population 100,418), applies a noise and nuisance bylaw.**

The City of Red Deer addresses noise under its Community Standards Bylaw.<sup>78</sup> The stipulations include

- prohibiting noise that annoys or disturbs the peace of other people
- prohibiting property owners from allowing property they own or control to be used in ways where noise from the property annoys or disturbs the peace of other people
- determining what constitutes noise likely to annoy or disturb the peace of other people—consideration may be given to the type, volume and duration of the sound, the time of day and day of the week, and the nature and use of the surrounding area
- prohibiting alcohol establishments from allowing any noise to emanate from the premises that annoys or disturbs people outside the drinking establishment

Fines for a first offence are \$250, and that amount doubles for a second offence and triples for the third and subsequent offences. Habitual offenders may also be charged with mischief under the federal Criminal Code.

## Real Communities, Real Issues, Real Solutions

### The City of Lloydminster, Alberta/Saskatchewan (population 31,400), allocates fees to support harm reduction and education initiatives.

Lloydminster city council introduced a business license bylaw in 2017 that charges businesses that sell tobacco products an additional licensing fee of \$750. These fees do not become part of Lloydminster's general revenue, but rather are allocated to local agencies that support tobacco-reduction strategies. In April 2018, council introduced an updated version of the bylaw to include both alcohol and cannabis retailers. The licensing fee proposed was to be the same as the tobacco fee and the allocation of the funds was also planned to go toward local harm reduction and education initiatives.

The bylaw passed third reading to include cannabis retailers; however, the licensing fee for alcohol retailers was pulled before the bylaw passed as council wanted more time to reflect. The chair of yllMyHome (the local community coalition that works to reduce alcohol-related harm in the community) says that it is important to celebrate council's great work on the healthy public policies they have adopted and support them to re-visit the licensing fee for alcohol retailers down the road. "Sometimes you wait patiently for the opportunities and readiness of the community and the decision makers to create change for a healthier community," the chair says.<sup>79</sup>

### Alberta licensed establishments adhere to a common code of practice.

A number of Alberta bars and restaurant owners are part of a voluntary accreditation program called [Best Bar None](#). To be part of this program, establishment owners address a number of stipulations, including

- written policies (e.g., line-up management, calling taxis for patrons, respectful workplaces)
- operational forms and checklists (e.g., injury/accident recording, training logs)
- physical verification (e.g., maximum occupancy posted, liquor license posted)
- questionnaires (on assessment day)

This program could be enhanced further with enforcement.

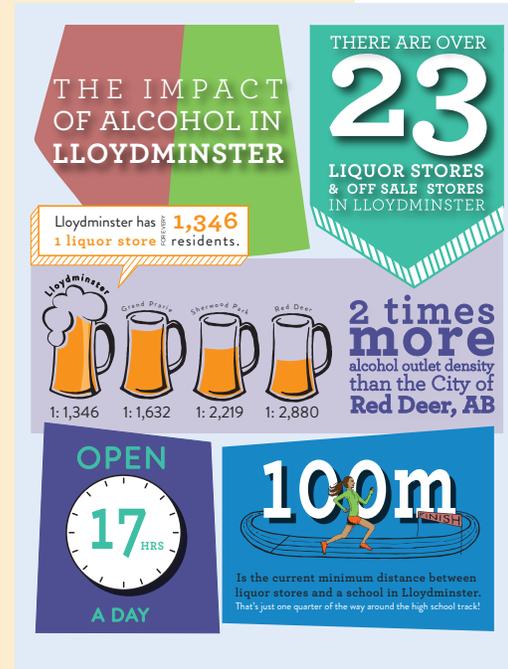


Image used with permission from yllMyHome.





## 4. Limiting Alcohol Marketing, Advertising and Sponsorship



Marketing works to create demand for a product. Advertising and sponsorship are marketing tools used to increase brand recognition, brand loyalty and sales. “Advertising” typically refers to messages in any medium that communicate information about a product, service or brand. “Sponsorship” refers to cash or in-kind fees paid in exchange for an association with the values and positive attributes of the event, facility or group being sponsored. Sponsorship provides favorable publicity for companies—customers like to do business with companies that seem like good corporate citizens and community supporters.<sup>47</sup> Sponsorship agreements will often include advertising rights and opportunities in the terms and conditions of their sponsorship to maximize the return on investment.



## Why address alcohol marketing, advertising and sponsorship?

Alcohol marketing, advertising and sponsorship increase alcohol consumption.<sup>47</sup> It normalizes, encourages and promotes alcohol use within communities. To increase sales, alcohol advertisements connect alcohol to an array of benefits and the achievement of positive life goals, such as increased happiness, social status, sexual success, personal achievement and wealth.<sup>29</sup> The negative impacts or risks of alcohol consumption are rarely shown.

Implementing policies to restrict and limit exposure to alcohol marketing, advertising and sponsorship has been shown to:

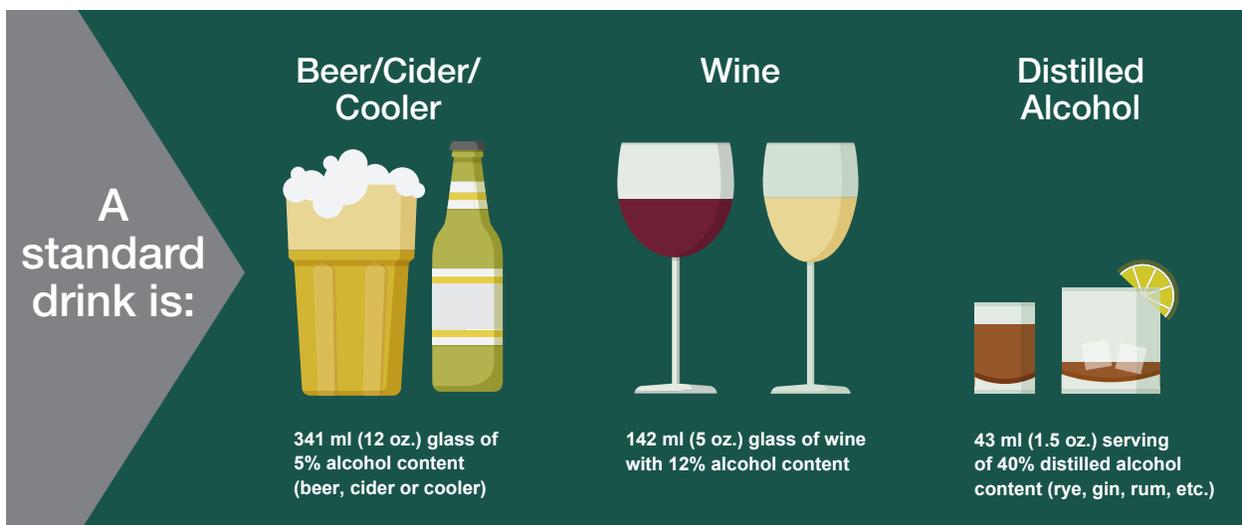
- slow the recruitment of new drinkers
- reduce heavy drinking
- protect children and youth<sup>29</sup>
- reduce harms<sup>29</sup>
- create a more balanced depiction of the role of alcohol in communities

While the Canadian Radio-Television Telecommunications Commission (CRTC) is the federal body responsible for setting alcohol advertisements regulations in the [Code for Broadcast Advertising of Alcoholic Beverages](#), these regulations are self-regulated and have not been updated since 1996.<sup>80</sup> Researchers have suggested that other levels of government “consider regulations that go above and beyond those specified by the CRTC” that are within their jurisdictional authority.<sup>3</sup>

**In Alberta, the AGLC is responsible for upholding the regulations set by CRTC.**

The regulations are outlined in their training in their licensee handbooks. For example, **advertising must not:**<sup>65</sup>

- be targeted at minors
- encourage non-drinkers to consume liquor
- promote irresponsible liquor consumption or service
- show heavy or prolonged liquor consumption
- give the impression liquor benefits a person’s health



## Policy options to address alcohol marketing, advertising and sponsorship<sup>17,29,47</sup>

- Control the location, size and type of signs that are displayed in front of alcohol establishments through signage bylaws, LUB, public transit bylaws, parks and/or recreation bylaws.
- Provide clear signage inside alcohol establishments (e.g., acceptable forms of age identification, safe transportation options, areas where alcohol is not allowed, information about Canada's Low Risk Alcohol Drinking Guidelines (LRDG)—see Appendix A).
- Support counter-advertising opportunities.
  - Promote a balanced outlook on drinking.
    - Avoid messages that give the impression that drinking is more common and popular than it actually is.
    - Resist coming across as averse to alcohol.
    - Avoid scare tactics.
    - Embrace facts and tell a story to create connection.
- Reach out to young people.
  - Engage youth by demonstrating care and concern for their health, but also an appreciation of their culture and respect for their ability to make healthy choices.
  - Recognize them as contributing participants in community life.
- Strengthen or implement bylaws (e.g., business license, land use, zoning, signage) requiring establishments serving or selling alcohol to require health information on signs and menus (e.g., Low Risk Drinking Guidelines, health risks, standard drink amounts).

Consider the trade-offs for promoting the low risk drinking guidelines and what points to emphasize. In some circumstances it may come across as promoting or condoning alcohol use, rather than encouraging moderation to reduce harms.

**To drink moderately and reduce long-term health risks for multiple chronic diseases, it is recommended that people follow these LRDG guidelines:**



0–2

**Women should have no more than 10 drinks per week, with no more than two drinks per day most days.**



0–3

**Men should have no more than 15 drinks per week, with no more than three drinks per day most days.**

- Regulate, manage and evaluate the conditions under which alcohol can be advertised or promoted on municipally owned or managed property and facilities during public and private events, including festivals.
  - Restrict or prohibit local alcohol advertising at the facilities and in promotional materials and at municipally owned or managed facilities, properties and events, particularly those that are oriented towards families, children and youth and places where children and youth frequent (e.g., school zones, bus shelters, buses, recreational areas, parks).
  - Restrictions could include
    - identifying or limiting the number of approved advertising locations (e.g., no alcohol advertising outside of licensed areas or in areas designated as alcohol-free zones)
    - limiting the overall amount of alcohol advertising
    - defining the maximum size of signage
    - reducing or restricting publicity that draws attention to drinking opportunities
  - Restrict or prohibit alcohol industry sponsorship of municipal facilities, properties, services and events (including third-party events held on municipal property), particularly those that are oriented towards families, children and youth or within close proximity to places where children, youth and families frequent.
    - Decline alcohol industry naming rights for municipal facilities, events or services.
    - Restrict or prohibit advertising associated with alcohol industry sponsorship (e.g., if the alcohol industry wished to sponsor a facility event or service, place restrictions on the amount of advertising associated with that sponsorship).

## Questions to consider<sup>47</sup>

- Does the municipality recognize the alcohol industry as contributing to the culture and economy of the community, but also the need to limit marketing in view of the potential for harm?
  - Does current messaging reflect this balance?
- What message does the municipality's current stance on alcohol advertising give its citizens?
- Does the municipality have a sense of shared public responsibility to discourage excessive consumption?

Municipalities do not have any jurisdiction over the *content* of alcohol-related signage. While there may be interest in restricting the signage of establishments to minimize alcohol advertising, caution should be exercised. Such an action could be viewed as anti-competition, and legal issues related to freedom of expression could be raised.<sup>17</sup> Content is regulated at the provincial and federal levels (see Appendix G for more information).



## Real Communities, Real Issues, Real Solutions

### Municipalities limit alcohol advertising

#### **City of Wetaskiwin, Alberta (population 12,655)**

The City of Wetaskiwin's Private Advertisement Policy provides direction to its administration in allowing organizations and businesses to advertise within the city's recreation facilities. Subject matter that pertains to alcohol is excluded.<sup>81</sup>

#### **City of Saskatoon, Saskatchewan (population 246,476)**

The City of Saskatoon's Transit Advertising Policy outlines the city's desire to promote healthy lifestyles for all citizens. With this goal in mind, the policy stipulates that advertisements promoting alcoholic beverages (and tobacco products) are not permitted on transit vehicles and other transit property.<sup>82</sup>

#### **The City of Hamilton, Ontario (population 536,917)**

Organizers of events on municipally owned properties in Hamilton are not permitted to "cause or allow promotional advertising of alcoholic beverages' names, brands or manufacturers at an event frequented by youth."<sup>83</sup>

#### **The City of Lacombe, Alberta (population 13,057)**

The City of Lacombe has a stipulation in its LUB to regulate exterior sponsorship signage at its community, culture and recreation facilities. The stipulation states that "a sponsorship sign shall be limited to the name, symbol and/or slogan of sponsor or product, and further that signs shall not display the name or image of any alcohol, drug or tobacco product."<sup>84</sup>

## Real Communities, Real Issues, Real Solutions

### Community coalitions implement counter-advertising campaigns in their municipalities

#### **Strathcona County Drug Strategy, Strathcona County, Alberta (population 98,044)**

The Strathcona County Drug Strategy used 2016/17 AHS coalition funding to expand an existing project in its municipality of approximately 100,000 people. The strategy engaged 19 out of the 34<sup>85</sup> liquor stores in the area, as well as two restaurants, to display their “Have a Game Plan” information posters. They also purchased a six-week advertisement on a local bus, reaching approximately 99,000 riders with the same information. One coalition member said: “Through our activities we have increased the knowledge of individuals to make better decisions about their own alcohol use and we have also contributed to a change in the conversation and the culture of alcohol use—toward one of moderation.”<sup>86</sup>



Image used with permission. Strathcona.ca

#### **Brooks and District Drug Task Force Society in the City of Brooks, Alberta (population 14,451)**

The Brooks and District Drug Task Force Society used some of its 2016/17 AHS coalition funding to implement an advertising campaign in its municipality during the holiday season. The advertising was aimed to educate people about moderate alcohol use and the length of time it takes the average adult to metabolize one standard drink of alcohol.<sup>86</sup>

## Real Communities, Real Issues, Real Solutions

**The City of Vancouver, British Columbia (population: city 631,486, Greater Vancouver 2,463,431), includes a stipulation in its license bylaw requiring alcohol establishments to post drink size and strength.**

The City of Vancouver's license bylaw includes a stipulation that requires alcohol establishments to "ensure that a list is available to customers that provides the standard drink size, or the size in fluid ounces or milliliters and the percentage of alcohol per volume, for all beer, wine and spirits sold, and that customers are made aware that such list is available."<sup>60,71</sup>

The Gaming Liquor and Cannabis Regulation (GLCR) has a "special requirement" stipulation for liquor licenses that indicates: "if a Class A, B or C liquor licensee is required under the board's policies to have a menu or price list for drinks that contain liquor, the menu or price list must specify the amount of liquor contained in the drinks." The AGLC outlines in its *Liquor Licensee Handbook* that "the amount of liquor in a drink (i.e., number of ounces or milliliters) and the price must be specified on a menu or price list."<sup>87</sup> While a good practice, these stipulations could be made stronger by also including information about the alcohol percentage, the LRDG, standard drink sizes and/or other health information.





## 5. Preventing and Reducing Drinking and Driving



Across Canada, driving with a **blood alcohol concentration** (BAC) of 0.08 or higher is illegal and offenders can face criminal charges. In Alberta, there are additional sanctions for drivers with a BAC equal to or greater than 0.05. For example, first offenders may face an immediate three-day license suspension and three-day vehicle seizure.

New drivers (graduated licensed drivers) found with any alcohol in their blood are faced with an immediate 30-day license suspension and seven-day vehicle seizure.<sup>88</sup> While strong policy stances at the federal and provincial levels are most critical for lowering drinking and driving rates, **local government can play an important role** in strengthening community protection and fostering collective responsibility to further reduce harm.<sup>47</sup> Policies aimed at drinking and driving go beyond setting and enforcing a BAC limit, and include developing strategies that aim to reduce the likelihood that individuals will drink and drive. Municipalities have an opportunity to make a big impact in this way.



In 2007 the Alberta Traffic Safety Plan was introduced. According to the Office of Traffic Safety, “The number of collisions, deaths and injuries on Alberta’s roads has declined considerably since the implementation of this plan by the Alberta government and its traffic safety partners; between 2007 and 2011, traffic fatalities dropped by nearly 32 per cent.”<sup>90</sup> Municipalities have a key partnership role in the [Alberta Traffic Safety Plan](#) via the [Community Mobilization Strategy](#) in coordination with regional safety consultants. For more information, read the [Alberta Traffic Safety Plan](#).

## Why address drinking and driving?

Impaired driving continues to require enforcement efforts in Alberta. Alberta Transportation indicates that on average in Alberta, one in five fatal collisions involves a driver that had been drinking prior to the collision, furthermore, the more serious the collision, the greater the chance that a driver has been drinking. The five-year period ending March 31, 2017, saw 37,744 criminal convictions for impaired driving in Alberta. Alcohol-related collisions caused 389 deaths and 5,969 injuries between 2011 and 2015. In 2015 alone, 85 people were killed and 1,042 were injured.<sup>89</sup> The costs to families and to society as a whole are significant and include the devastating loss to families and friends of those injured or killed.

## Policy options to prevent and reduce drinking and driving<sup>17,29,47</sup>

- Allocate resources for enforcement activities.
  - Increase patrols for impaired driving.
  - Increase the number and frequency of sobriety checkpoints.
- Ensure the public understands what can and will happen if they drink and drive.
  - Communicate the strong possibility of charges, the severity of penalties and the swiftness with which penalties are applied.
- Promote social norms against drinking and driving.
  - Promote mass media campaigns that encourage social responsibility (in terms of individual behaviour and reporting violations) and healthier shared norms.
  - Support schools in traffic safety education that includes interactive skill development in resisting pressures to drink and drive (or ride with an impaired driver) and in engaging parents.
- Encourage local bars, restaurants and pubs to participate in [Best Bar None](#) (which includes accreditation criteria regarding reducing impaired driving). Enhance this by making it mandatory.
- Limit alcohol availability, address alcohol pricing and improve safety of drinking environments (see sections 1, 2 and 3 above).

- Provide information for participants to prevent and decrease impaired driving, including
  - taxi numbers
  - local designated driving or Safe Ride Home programs
- Request that local bars, restaurants and pubs provide free non-alcohol beverages (including water) for all patrons and particularly for designated drivers.
- The above policy options can be applied to regulate, manage and evaluate the conditions under which alcohol is made available to patrons on municipally owned or managed properties and facilities during public and private events, including festivals.

## Questions to consider<sup>47</sup>

- How do local officials best communicate to the public the degree and effectiveness of enforcement while addressing the small number but serious impact of people who drink and drive?
- What partnerships and strategies exist (or could be explored) to discourage drinking and driving?
- How well does the municipality contrast the acceptability of moderate alcohol use and the unacceptability of impaired driving?
- Are the key messages about drinking and driving issues clearly conveyed by community leaders (e.g., even modest amounts of alcohol cause impairment, most people do not drive under the influence, everyone is affected by those that drink and drive, all people have the opportunity to help make a positive difference)?

## Real Communities, Real Issues, Real Solutions

There are a number of driver services in Alberta municipalities that provide a safe ride home for people who have been drinking. These services also make sure that the patron's vehicle is returned home as well. For more information, visit the [Alberta Motor Association website](#).

Campaign 911 is a national campaign started by Mothers Against Drunk Driving (MADD) Canada to address impaired driving. Municipalities can use and enhance this campaign, similar to what the City of Edmonton has done with their "Curb the Danger" program.

### Safe rides home

**The Brooks and District Drug Task Force Society, partners with a taxi service to facilitate safe transportation home for citizens in the City of Brooks, Alberta (population 14,451).**

Initially, using AHS coalition funding, the Brooks and District Drug Task Force Society partnered with a local taxi service and with three of the municipality's larger bars. Patrons who needed a safe ride home were given a \$10 taxi voucher from bar staff, which they could use with the partner taxi service. The coalition was able to sustain this initiative in the following years through community donations.<sup>86</sup>

### Denormalizing drinking and driving

**The City of Edmonton, Alberta (population 932,546), changes social norms concerning drinking and driving.**

In 2006, Edmonton implemented a pilot program called "Curb the Danger," which encourages citizens to report people suspected of driving while impaired. It works using the following steps:

- The public calls 911 if they see someone they suspect is driving while impaired
- This information is communicated to response members, who attempt to intercept the vehicle
- If the vehicle or driver cannot be intercepted or located, a letter is sent to the registered owner of the offending vehicle indicating the time and date it was reported to police

According to the City of Edmonton, "the Curb the Danger program is successful because of the efforts of many different people: the public who report the incident, the police communications personnel who take the 911 calls, and the response members who intercept the vehicles."<sup>91</sup>

### Check Stop enforcement

**The City of Calgary, Alberta (population 1,239,220), increases its sobriety checkpoints.**

The Calgary Police Services addresses impaired driving through regular street enforcement. It is one of the only municipalities in North America that has a [CHECKSTOP](#) program running 52 weeks of the year.<sup>92</sup> The Calgary Police Service has prioritized funding to ensure their program continues to run year round.<sup>93</sup>





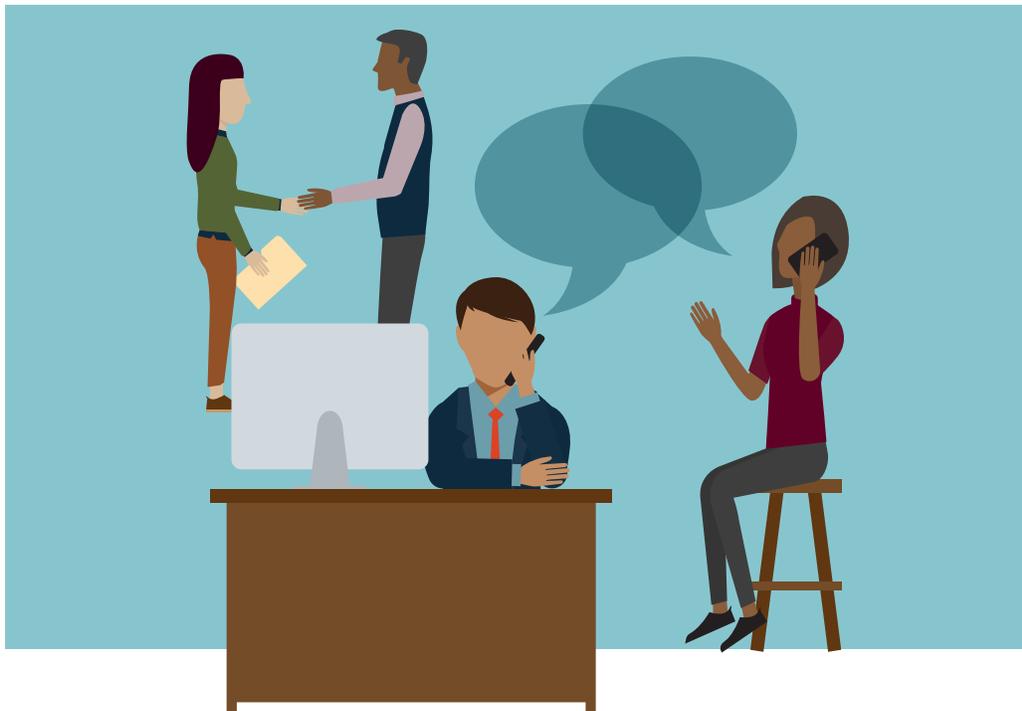
## 6. Advocating for Preventative Alcohol Policy at the Provincial or Federal Level



Provincial and federal governments have jurisdiction over critical aspects of alcohol policy. In addition to the value of implementing municipal level alcohol policies, municipal governments, along with local community coalitions and community groups, can voice their concerns and opinions to other jurisdictional levels about the changes they would like to see.

### Why advocate to other jurisdictions?

Various jurisdictional levels are continually making policy decisions (e.g., World Health Organization, Canadian federal government, Province of Alberta). Policies to reduce alcohol-related harms at the international, national, provincial and territorial level (or the lack of these policies) interact with the alcohol policy decisions of your municipality. For this reason, it is important that your community members, municipal staff and municipal leaders see this sixth policy area as an opportunity to provide ideas, direction and feedback to other jurisdictions to support your municipality's vision for community safety, vibrancy, health and well-being. You can speak to what policies you want to see strengthened at other jurisdictional levels, and express concern when you see that policies at another level result in more alcohol-related harms impacting your municipality.



## Canadian Alcohol Policy Evaluation (CAPE) – Alberta policy review<sup>3</sup>

The Canadian Alcohol Policy Evaluation reviews the quality of federal and provincial policies in place to reduce alcohol related harms. The first evaluation took place using 2012 information, and recently it was implemented again using 2017 information with “an updated and refined methodology incorporating new data sources”.<sup>21</sup> The 2019 release of the second review also provides a report on shifts in policies within provinces over the two time periods. The CAPE series of reports offer municipalities an in depth look at their 11 policy domains and potential opportunities available for municipal dialogue and advocacy with the provincial or federal level.

### Alberta received a total policy implementation grade of **F<sup>5,21</sup>** (49%) against the gold standard best practices framework

(see Appendix H & I). According to CAPE, all domains, both direct and indirect, have room for improvement. Currently Alberta’s retail system at the wholesale level is a government monopoly, and at the retail level is a private system.

### The five domains with the most room for improvement, and recommendations from CAPE for how to improve are:



#### 1. Pricing and taxation (direct domain) (score of 16%)

- “Ensure minimum prices are set at a rate per standard drink (e.g., 17.05 mL pure alcohol) of at least \$1.75\* per standard drink for off-premise retail stores and \$3.50\* per standard drink for on-premise establishments, after taxes with no exceptions (\*2019 price). For example, on-premise minimum prices should apply to all types of liquor licensees including for special events.
- Update all alcohol prices annually to reflect Alberta-specific inflation rates to ensure alcohol does not become less expensive relative to other goods over time. On-premise minimum prices have not been updated since implementation in 2008 and so have reduced potential as a harm reduction intervention.”



#### 2. Minimum legal drinking age (direct domain) (score of 40%)

- Increase the minimum legal drinking age in Alberta to at least 19 to be in line with other provinces and territories; give consideration to graduated drinking policies that grant phased-in legal access to alcohol by limiting the amount and type of alcohol that can be purchased in specific settings between the ages of 19 and 21.

**3. Physical availability** (direct domain) (score of 53%)

- Introduce legislated restrictions on outlet density in Alberta, particularly for on-premise establishments such as restaurants and bars.
- Limit the availability of alcohol by reducing trading hours; do not allow early morning alcohol sales (i.e., before 11:00 am) or late-night sales (i.e., after 8:00 pm for off-premise retail stores and 1:00 am for on-premise establishments) without exceptions such as during major events or sporting tournaments.”



**4. Alcohol control systems** (indirect domain) (score of 18%)

- Consider reinstating government-owned and government-run off-premise retail stores in Alberta and ensure they report to a ministry with a mandate to protect health and/or safety.
- Phase out sales beyond on- and off-premise outlets such as online sales and liquor delivery services.
- Ensure there are legislated earmarked funds to support prevention initiatives and health messaging.



**5. Health and safety messaging** (indirect domain) (score of 48%)

- Implement legislated enhanced alcohol labels as a manufacturer requirement with health and safety messages, standard drink information, and national low-risk drinking guidelines; labels should have prominent rotating messages that are accompanied by pictorial images.
- Ensure that legislated health and safety messages displayed in all on-premise establishments and off-premise retail stores include a variety of health-focused messages.



The five domains on page 82 & 83 are reproduced with permission from the 2019 CAPE Project Team: [Vallance et. al, 2019](#)<sup>5</sup>

See the CAPE website ([alcoholpolicy.cisur.ca](http://alcoholpolicy.cisur.ca)) for more information.

There is mounting evidence that making alcohol less affordable is one of the best policy options to reduce alcohol-related harm. Furthermore, there is evidence that alcohol-related expenditures, including health-care costs, enforcement costs, cost related to impaired driving, traffic collisions and workplace costs (e.g., lost productivity) outweigh the revenue generated from alcohol sales.<sup>94</sup>

## Opportunities to advocate provincially

Community coalitions, other community groups and municipal governments can appeal to **provincial** authorities<sup>47</sup> to

- make alcohol less affordable through minimum price policies and other price policies for both on- and off-premise alcohol establishments by
  - establishing minimum prices for alcoholic beverages based on volumetric pricing
  - regulating discounts on alcoholic beverages and retail sales (e.g., disallow heavy discounts on product lines that are not selling well)
  - taxing alcoholic beverages (including municipal taxes)
  - indexing alcohol prices to cost of living to ensure alcohol does not become cheaper compared to other goods over time
- maintain a moratorium on private liquor store licences or set a higher provincial standard for the distance between alcohol establishments and between alcohol establishments and businesses/settings that cater to children and youth
- restrict hours of alcohol service. We recommend the following hours of operation:<sup>3</sup>
  - Off premise from 11:00 a.m. to 8:00 p.m.
  - On premise from 11:00 a.m. to 1:00 a.m.
  - Consider required earlier closures (e.g., 12:00 a.m.) on Sunday through Thursday
- increase monitoring of licensed establishments to check for underage service and service to intoxicated patrons
- direct a portion of alcohol revenue to government ministries or organizations working to reduce alcohol-related harm
- increase marketing, advertising and sponsorship restrictions and enforce violations more diligently in accordance with the Canadian Radio-Television and Telecommunications Commission (CRTC)
- add health warnings and standard-drink information labels to alcohol containers
- restrict alcohol advertising space and airtime to a defined percentage of the total
- limit the involvement of alcohol industry representatives in decision-making around alcohol policy at all levels of government, including within municipalities
- raise the legal drinking age (evidence indicates that increasing the legal drinking age by even one year can decrease alcohol-related harm for young people<sup>2</sup>)

- Advocate for policies that not only promote moderation among people who drink, but also that promote inclusion and enjoyment for those who are non-users of alcohol. For example, how might policy decisions impact or isolate:
  - a child or youth under the age of 18
  - a person working to overcome an alcohol problem
  - a person who doesn't drink for religious reasons
  - a person who has experienced alcohol-related sexual assault
  - a person who has chosen not to consume alcohol during their pregnancy
  - a person who prefers not to drink due to personal preferences or priorities



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## Opportunities to advocate federally

Community coalitions, other community groups and municipal governments can appeal to **federal** authorities<sup>47</sup> to

- limit the amount and extent of alcohol advertising and sponsorship through more comprehensive legislation and enforcement
- ask for federally mandated health messaging and standard drinking information labels on alcohol containers

## Questions to consider<sup>47</sup>

- How rigorous are local efforts regarding alcohol harm prevention/reduction in the municipality? Does the municipality lead by example?
- What avenues are open for multiple expressions of concern and appeal to the provincial and federal governments? How effectively have these routes to communicate concerns and request action been used? (See Appendix C for tips on using the media as an ally.)

## Real Communities, Real Issues, Real Solutions

### Provincial opportunities in minimum and average pricing

#### **Canadian provinces and territories that have implemented minimum pricing per standard drink across all alcoholic beverages, indexing to inflation, and maintaining average prices at or above the consumer price index:**

- Quebec (beer only), Nova Scotia, Ontario and Manitoba review minimum prices on an annual basis and index prices to inflation. No province or territory prices alcohol above the consumer price index.<sup>61</sup>
- All provinces (except Quebec) have minimum prices for the sale and service of alcohol for on-premise alcohol establishments.<sup>61</sup>
  - For Alberta's on-premise minimum prices see the "minimum pricing" entry in the glossary.
- All provinces (except Alberta) have some type of minimum price set for the sale of alcohol in off-premise establishments.
  - In liquor stores and other off-premise sales establishments in Alberta, there is no type of minimum price. 90% of Alberta sales are off-premise.

### Provincial opportunities in limiting alcohol advertising

#### **Canadian provinces and territories that enforce and/or expand CRTC regulations of alcohol advertising content and formats:**

- New Brunswick includes restrictions on the frequency of alcohol advertisement in radio and television formats.<sup>61</sup>
- Prince Edward Island, Québec and Ontario also prohibit the representation of alcoholic beverages as being beneficial to a person's health or possessing nutritious or curative properties.<sup>61</sup>
- Prince Edward Island does not permit alcohol advertising on billboards or illuminated signs, but does provide exemptions for its liquor commission and agency stores.<sup>61</sup>
- Yukon and Nunavut also do not permit advertising alcohol in print, on radio and television, on billboards, or on electric or illuminated sign formats, unless approved by liquor control governing bodies.<sup>61</sup>

## Real Communities, Real Issues, Real Solutions

### Provincial opportunities in health warning labels

#### **Yukon addresses health warning labels in the Northern Territories Alcohol Study.**

The Yukon Liquor Corporation has been applying after-market warning labels on alcohol products in stores since 1991. Alcohol containers have included a label warning against the risk of drinking alcohol while pregnant in both English and French. In 2017, new evidence-based labels with a cancer health warning, standard-drink information and low-risk drinking guidelines were to be trialed in the Yukon as part of a federally funded pilot study (see image below). The study was to evaluate whether the labels contributed to consumers' ability to make more informed and safer drinking choices. Researchers said that "findings from the study will provide results that government and other public health practitioners can use to inform current and future alcohol harm reduction strategies."<sup>95</sup>

Unfortunately, shortly after the new labels were launched in late 2017, Yukon's government paused its participation in the study due to [significant pressure](#) from alcohol industry representatives and threats of litigation related to the inclusion of the cancer warning label. In February 2018, the project was invited by the Yukon government to continue, but with the cancer label removed. While national alcohol brand owners cited their concerns including trademark protection, health leaders also voiced their position. One leading expert stated that industry lobbyists "are trying to keep consumers in the dark about things that people want to know. I've always wondered... why is it consumers don't get that [alcohol and health] information? Well, here's the answer: governments are afraid to give it. They get blocked. At various levels, the lobbyists are very effective."<sup>96</sup> For more information, visit the [CISUR](#) website.



(Photo: Kate Vallance, CISUR. Used with permission.)



# Conclusion



Municipalities across Canada are taking steps to improve the health and well-being of their citizens through alcohol policy development. Alberta’s community coalitions, other community groups, and municipal staff and leaders can contribute to this movement by taking proactive comprehensive policy approaches to addressing alcohol-related harm in their municipalities. A collective voice can be powerful when advocating to other levels of government about broader changes that could support local efforts.

The diverse alcohol policy options and opportunities included in this guide can reduce alcohol-related harm and bolster community safety. They have been provided to help you discover what is needed and wanted in your communities to collaboratively reduce alcohol-related harm and to support you on your journey to create greater community safety, vibrancy, health and well-being.

*“There is no power for change greater than a community discovering what it cares about.”*

— Margaret J. Wheatley

# Abbreviations

<b>AAS</b>	Alberta Alcohol Strategy
<b>ACPLF</b>	Alberta Cancer Prevention Legacy Fund
<b>AGLC</b>	Alberta Gaming, Liquor & Cannabis
<b>AHS</b>	Alberta Health Services
<b>AMAPP</b>	Alberta Municipal Alcohol Policy Project
<b>AUMA</b>	Alberta Urban Municipalities Association
<b>BAC</b>	Blood alcohol concentration
<b>CPTED</b>	Crime prevention through environmental design
<b>CRTC</b>	Canadian Radio-Television and Telecommunications Commission
<b>GLCA</b>	Gaming, Liquor and Cannabis Act (Alberta)
<b>GLCR</b>	Gaming, Liquor and Cannabis Regulation (Alberta)
<b>HEIA</b>	Health equity impact assessment
<b>LRDG</b>	Canada's Low-Risk Alcohol Drinking Guidelines
<b>LUB</b>	Land use bylaw
<b>MDP</b>	Municipal Development Plan
<b>MGA</b>	Municipal Government Act
<b>SES</b>	Socio-economic status
<b>TBF</b>	Treasury Board and Finance

# Glossary

**Glossary words and terms are bolded and italicized the first time they are used in the body of the guide.**

## Advocacy

Advocacy is the act of appealing for public and political support for policy change. It is an important part of municipal alcohol policy because what is done at higher levels of government affects citizens.<sup>47</sup>

## Alberta Gaming, Liquor & Cannabis (AGLC)

The AGLC administers and enforces the Gaming, Liquor and Cannabis Act (GLCA) and Gaming, Liquor and Cannabis Regulation (GLCR). For details about the role and scope of the AGLC see Appendix G.

## Alberta municipalities

In Alberta, there are several different types of municipalities, including cities, towns, villages, hamlets, summer villages, specialized municipalities, municipal districts (also known as counties), improvement districts, Métis settlements and special areas.<sup>97</sup>

## Alcohol establishment

For the purpose of this guide, “alcohol establishment” refers to the physical locations in which alcohol is served/purchased. These establishments are grouped into specific classifications by AGLC, including:

- **Class A**, which includes venues where minors are allowed, where liquor is sold and consumed but food is the primary source of business (e.g., restaurants), and venues where minors are prohibited, where liquor is the primary source of business (e.g., pubs, bars)
- **Class B**, for the sale and consumption of liquor in locations where people pay an entrance or user fee or buy a ticket (e.g., recreational facilities, tourist facilities, race tracks, sports stadiums, theatres)
- **Class C**, for liquor service within a facility that is not open to the public (e.g., members-only clubhouses)
- **Class D**, for the sale of liquor consumed off-site (e.g., retail liquor stores, off-sales)
- **Public special event licences**, for one-time events open to the public for community or commercial purposes (e.g., beer gardens)
- **Private special event licences**, for events open to members and invited guests only (e.g., weddings), and also includes annual licences for organizations having recurring events (e.g., scheduled meetings)<sup>98</sup>

The general term “alcohol establishments” will be used in this guide, unless the context is specific to a type of license, in which case the specific license type (e.g., A, B, C, D) and/or the colloquial term (e.g., bar, lounge, restaurant, pub, liquor store) will be used instead. There are other classifications and licences; however, they are not listed here as they are not discussed in this guide.

### **Alcohol policy**

According to the World Health Organization, alcohol policy is “a set of measures in a jurisdiction or society aimed at minimizing the health and social harms from alcohol consumption.”<sup>15</sup> “Successful alcohol policies outline comprehensive policy responses covering areas such as: availability, marketing, pricing, drink-driving (impaired driving), prevention interventions and treatment in health-care systems.”<sup>6</sup>

### **Blood alcohol concentration (BAC)**

Blood alcohol concentration refers to the amount of alcohol present in a person’s blood. For example, a BAC of 0.05% means 0.05 g (or 50 milligrams) of alcohol in 100 milliliters of blood.

### **Binge drinking**

Binge drinking means five or more standard alcoholic drinks consumed on one occasion for males and four or more drinks for females. Binge drinking also refers to a pattern of drinking that is heavy (exceeding the four-drinks [female] or five drinks [male] per occasion) and occurring monthly or weekly rather than daily and typically serves the sole purpose of getting drunk. Binge drinking has harmful social and health consequences, such as increased risk for injuries and chronic health problems. Early binge drinking increases the chances that youth will become dependent on alcohol, be victims of violence and injury, or cause injury to others.<sup>99</sup>

### **Bylaw**

According to Alberta Municipal Affairs, “a bylaw is a law made by a local authority in accordance with the powers conferred by or delegated to it under a statute.” For Alberta municipalities, this is the Municipal Government Act (MGA). A municipal council “may pass a bylaw to govern the affairs within the council (the procedural bylaw) and bylaws that govern within the municipality. Common bylaws include vehicle parking and stopping regulations, animal control, licensing, noise, business regulation, and management of public recreation areas. A municipal bylaw is no different than any other law of the land, and can be enforced with penalties, challenged in court and must comply with higher levels of law. Municipal bylaws are often enforceable through the public justice system, and offenders can be charged with a criminal offence for breach of a bylaw.”<sup>100</sup>

## Community

For the purposes of this guide, “community” can refer to an entire town, city or village. But it can also refer to a smaller geographical area within a municipality. A community can also be a group of people who have something in common, beyond where they live. They may share a common identity or a sense of belonging. Being part of a community can involve having common interests or shared purpose or goals.

### Community coalitions<sup>26</sup>

A coalition is a group of community members from different organizations (e.g., teachers, parents, elected leaders, social workers, police officers, doctors, youth) who come together to pursue a common goal at the local level. Coalitions can effectively address community health and wellness issues. Coalitions can

- define a community’s strengths and weaknesses, and use these indicators to plan a strategy
- identify gaps and work together to fill them
- share similar concerns but from a variety of perspectives, better representing the whole community
- improve communication delivery through their members
- be more visible to decision-makers, the media and the community than individuals
- conserve resources by eliminating duplication of efforts<sup>26</sup>

There are more than 50 community coalitions of this nature registered with AHS. These coalitions work to identify, prevent and/or reduce alcohol and other drug-related harm at the local level across Alberta. Since 2005, AHS has provided funding opportunities and annual meetings where coalitions meet to collaborate and learn.

### Crime prevention through environmental design (CPTED)

According to the International CPTED Association, crime prevention through environmental design (CPTED) is “a multi-disciplinary approach to deterring criminal behaviour through environmental design. CPTED strategies rely on the ability to influence offender decisions that precede criminal acts by affecting the built, social and administrative environment.”<sup>101</sup>

### Downstream

This is one type of intervention to consider when working to improve health equity. Downstream interventions address the immediate health needs of populations who are vulnerable to poor health outcomes.<sup>37</sup>

## **Gaming, Liquor and Cannabis Act (GLCA) and Gaming, Liquor and Cannabis Regulation (GLCR)**

In Alberta, alcohol is managed and regulated according to the Gaming, Liquor and Cannabis Act (GLCA) and the Gaming, Liquor and Cannabis Regulation (GLCR).

### **Health equity**

Equity is the absence of avoidable or unfair differences among groups of people, whether those groups are defined socially, economically, demographically, geographically or by other means of stratification. “Health equity” or “equity in health” is the principle that everyone should have a fair opportunity to attain their full health potential and that no one should be disadvantaged from achieving this potential.<sup>36</sup> Health inequities are defined as systematic differences in health that can be avoided by appropriate policy interventions and that are therefore unfair and unjust.<sup>22</sup>

### **Indigenous Peoples**

Indigenous people are the descendants of the original inhabitants of Canada. The Canadian Constitution recognizes three groups of Indigenous peoples: First Nations, Métis, and Inuit.<sup>102,103</sup>

### **Land use bylaw**

According to the Alberta Urban Municipalities Association (AUMA), “all Alberta municipalities are required to prepare a land use bylaw (LUB) to allow for the issuance of development permits for the use or development of land. The LUB divides the municipality into districts and provides for permitted and discretionary uses in each district. The rationale for defining the different districts revolves around three main principles:

- Similar uses prefer to locate near each for reasons of efficiency, similar servicing standards and common design needs. Land use districting reinforces these benefits.
- Some land uses pose considerable risk to health and safety. Districting establishes effective distances from such uses and allows conditions to be attached to permits to reduce the risk.
- Districting allows appropriate aesthetic standards such as the height of buildings, distance between buildings and size of the lot to be established for each district.

Land use is typically divided into at least the following districts: residential, commercial, industrial, institutional and park/open space.”<sup>44</sup>

### **Markup**

The AGLC adds a markup to the liquor it sells to liquor licensees and collects the revenue on behalf of the Government of Alberta. This markup goes to Alberta’s General Revenue Fund. For example, according to the most recent AGLC markup schedule, the added markup on a bottle of spirits with more than 60% alcohol by volume is \$18.66. For beer with less than or equal to 11.9% alcohol by volume, the added markup is \$1.25.<sup>66</sup>

## Media

“Media” refers to the communication channels through which news, entertainment, education and promotional messages are disseminated. Examples include newspapers, television, internet, radio, billboards and direct mail. Today, individual people can also be media, as they can reach a large audience through social networking like Facebook and Twitter, as well as tools like blogs, videos and podcasts. Earned media means working deliberately to have an issue covered by the news media (in contrast to paying for media coverage). Examples of earned media include media releases, news and magazine articles, staged demonstrations or events, and writing letters to the editor.<sup>31</sup>

## Media advocacy

Media advocacy is a type of health communication. It involves the strategic use of media (usually the news media) to shape public opinion, mobilize community activists and influence decision-makers to create a change in policy.<sup>31</sup> It can be a tool for those working upstream on primary prevention policy that transforms environments.<sup>104</sup>

## Midstream

“Midstream” refers to one of the types of interventions to consider when working to improve health equity. Midstream interventions address intermediary determinants or material circumstances, such as housing conditions, employment and food security.<sup>37</sup>

## Minimum pricing

Minimum pricing for the sale of alcohol in Canada is often set by the government through regulation. It is the price below which alcohol cannot be sold to consumers. Minimum pricing can be applied to alcohol sold from off-premise outlets (e.g., liquor stores) or on-premise outlets (e.g., restaurants, bars, nightclubs, arenas).<sup>105</sup> How provinces set minimum pricing vary. Examples include:

- Indexing alcohol prices to inflation to ensure alcohol does not become cheaper compared to other goods over time<sup>106,107</sup>
- Basing prices on alcohol content, creating price incentives for lower-strength products and price disincentives for higher-strength products for all beverage types, regardless of retailer<sup>106,107</sup>
- Disallowing heavy discounts on product lines that are not selling well<sup>106,107</sup>

In Alberta, the AGLC sets minimum drink prices for alcohol purchased and consumed on premise at restaurants, bars, clubs and pubs. The AGLC does not set a minimum price for alcohol sold in liquor stores or through off sales (Class D establishments). Alcohol establishments in Alberta, including all Class A, B and C licensees (except canteen or adult residence) and commercial public special event licensees, may not sell, or offer to sell, liquor lower than the following prices (not including GST<sup>108</sup>):

- Spirits and liqueurs: \$2.75 / 28.5 ml (1 oz) or less
- Wine: \$0.35 / 28.5 ml (1 oz)
- Draught beer: \$0.16 / 28.5 ml (1 oz)
- Bottled/canned beer, cider or coolers: \$2.75 /341 ml bottle or 355 ml can

### **Moderate alcohol use**

Moderate alcohol use in this guide is defined by Canada's Low-Risk Alcohol Drinking Guidelines (see Appendix A).

### **Municipal alcohol policy**

Many municipalities in Canada address alcohol-related harm on municipally owned properties through policies called municipal or civic alcohol policies.<sup>47,50</sup> For the purpose of this guide, municipal alcohol policy takes this action beyond municipally owned properties. "Municipal alcohol policy" is thus defined as any alcohol-related policy (or combination of policies and bylaws) that municipalities have the jurisdiction to create, implement and regulate on or off of municipally owned property that aims to reduce the harmful use of alcohol, adverse alcohol-related health outcomes and social harms.

### **Municipal development plan**

According to the Alberta Urban Municipalities Association:

All municipalities with a population of 3,500 persons or more must adopt a municipal development plan (MDP). Municipalities with a population of less than 3,500 persons may adopt an MDP. An MDP must address the future use of land, the manner and proposals for future development, and the provision of required transportation systems and municipal services and facilities in the entire municipality. An MDP must also contain policies respecting development constraints, development in relation to sour gas facilities, the allocation of municipal and school reserves, and the protection of agricultural operations. Finally, an MDP may address proposals for the financing and programming of municipal infrastructure, the coordination of municipal programs relating to the development of the municipality, environmental matters, financial resources, economic development, and any other matter relating to the physical, social or economic development of the municipality.<sup>44</sup>

### **Municipal government**

According to the Alberta Urban Municipalities Association, "Municipal governments are one of three orders of government—along with provincial and federal governments—that work to serve the needs of citizens. Although each order has different roles and authorities, [they] all share responsibility to serve the people of Alberta and to work together to ensure a sustainable future for [their] communities. In Alberta, municipal governments are governed by the Municipal Government Act (MGA)."<sup>109</sup>

## Municipal Government Act (MGA)

The Municipal Government Act (MGA) is the law under which all Alberta municipalities are empowered to shape their communities. The MGA contains specific guidelines for how municipalities operate, but since no two communities are exactly alike, it is also flexible, empowering municipalities to make decisions based on local needs.<sup>40</sup> According to the Alberta Urban Municipalities Association and the MGA “the purposes of municipalities are to provide good government; provide service, facilities or other things that, in the opinion of council, are necessary or desirable for all or a part of the municipality; and to develop safe and viable communities.”<sup>44</sup>

## Off premise/On premise

Off-premise alcohol is purchased and must be consumed outside of the alcohol establishment (e.g., liquor stores and off-sales). On-premise alcohol is purchased and must be consumed at the alcohol establishment (e.g., pubs, clubs, restaurants, bars).

## ProServe

**ProServe** is Alberta’s responsible liquor sales and service program for Class A, B, D, E, duty-free and commercial public resale special event licences. It is designed to make sure that the service and sale of liquor is done according to the law and in a way that keeps customers, guests and others safe from alcohol-related harms.<sup>110</sup>

## ProTect

**ProTect** was developed to increase the safety of patrons and staff in licensed premises. Training will help security staff improve their observation and communication skills to better prepare them to prevent, defuse and manage customer disturbances before violence escalates. ProTect certification is mandatory for full-time and part-time industry staff working in a Class A minors-prohibited premises and at a commercial public resale special event in the following positions: individuals who manage or supervise security staff, security staff (directly employed or contracted by the licensee), and owners and managers of a company contracted to provide security.<sup>111</sup>

## Public place

According to the GLCA, “public place includes a place or building that is open to the public, and a vehicle in a public place.” Outside of licensed premises or a class of place prescribed in GLCR where liquor may be used or consumed (i.e., bars, restaurants), alcohol consumption is prohibited in public places, except in a particular instance. People may consume liquor with food in a public park in a picnic area if a sign is posted by the owner/operator that states/outlines the following:

- that a person may consume liquor with food in the designated picnic area
- the designated area (i.e., the physical space)
- the hours when liquor may be consumed with food

Further, even within a designated picnic area, a person must stop consuming liquor in a designated picnic area if a peace officer on reasonable and probable grounds believes that the person is intoxicated and/or is not consuming food while consuming liquor.<sup>67</sup>

### **Risky drinking**

“Risky drinking” is defined as exceeding the daily or weekly limits outlined in Canada’s Low-Risk Alcohol Drinking Guidelines (see Appendix A).

### **Social determinants of health**

The social determinants of health influence the health of populations. They include, among others, income and social status, social support networks, education, employment, social environments, physical environments, healthy child development, gender and culture.<sup>34</sup> For more information, visit the Government of Canada’s [Social determinants of health and health inequalities](#) website.

### **Socio-economic status**

Socio-economic status is an economic and sociological combined total measure of an individual’s work experience and an individual or family’s economic and social position in relation to others, based on their income, education and occupation.

### **Treasury Board and Finance (TBF)**

Treasury Board and Finance (TBF) is responsible for economic analysis, budget planning and providing a coordinated and disciplined approach to the management of government spending in Alberta. The TBF’s core businesses are budgeting development and reporting, economics and fiscal policy, government accounting standards, financial management policies, financial sector regulations and policy, treasury management, tax policy and tax and revenue administration.<sup>112</sup>

### **Upstream**

“Upstream” refers to one of the types of interventions to consider when working to improve health equity. Having a secure and predictable job, affordable housing, food on the table, and a neighbourhood where one feels a sense of belonging and safety all have powerful impacts on health from childhood onward. These broad factors are called the social determinants of health (see above), and this way of thinking about what determines health is called “upstream.”<sup>37</sup> When we understand these factors and the impact they have on our overall health, we can influence our physical and social environments and make changes to support health where we live, work and play.<sup>107</sup>

## APPENDIX A

# CANADA'S LOW-RISK ALCOHOL DRINKING GUIDELINES

Drinking is a personal choice.  
If you choose to drink, these guidelines can help you decide when, where, why and how.

For these guidelines, "a drink" means:



**Beer**  
341 ml (12 oz.)  
5% alcohol content



**Cider/  
Cooler**  
341 ml (12 oz.)  
5% alcohol content



**Wine**  
142 ml (5 oz.)  
12% alcohol content



**Distilled Alcohol**  
(rye, gin, rum, etc.)  
43 ml (1.5 oz.)  
40% alcohol content

### ▶ YOUR LIMITS

Reduce your long-term health risks by drinking no more than:

- 10 drinks a week for women, with no more than 2 drinks a day most days
- 15 drinks a week for men, with no more than 3 drinks a day most days

Plan non-drinking days every week to avoid developing a habit.

### ▶ SPECIAL OCCASIONS

Reduce your risk of injury and harm by drinking no more than 3 drinks (for women) or 4 drinks (for men) on any single occasion.

Plan to drink in a safe environment. Stay within the weekly limits outlined above in **Your limits**.

### ▶ SAFER DRINKING TIPS

- Set limits for yourself and stick to them.
- Drink slowly. Have no more than 2 drinks in any 3 hours.
- For every drink of alcohol, have one non-alcoholic drink.
- Eat before and while you are drinking.
- Always consider your age, body weight and health problems that might suggest lower limits.
- While drinking may provide health benefits for certain groups of people, do not start to drink or increase your drinking for health benefits.

### ▶ WHEN ZERO'S THE LIMIT

- Do not drink when you are: driving a vehicle or using machinery and tools
- taking medicine or other drugs that interact with alcohol
- Doing any kind of dangerous physical activity
- living with mental or physical health problems
- living with alcohol dependence
- pregnant or planning to be pregnant
- responsible for the safety of others
- making important decisions

### ▶ PREGNANT? ZERO IS SAFEST

If you are pregnant or planning to become pregnant, or about to breastfeed, the safest choice is to drink no alcohol at all.

### ▶ DELAY YOUR DRINKING

Alcohol can harm the way the body and brain develop. Teens should speak with their parents about drinking. If they choose to drink, they should do so under parental guidance; never more than 1–2 drinks at a time, and never more than 1–2 times per week. They should plan ahead, follow local alcohol laws and consider the **Safer drinking tips** listed in this brochure.

Youth in their late teens to age 24 years should never exceed the daily and weekly limits outlined in **Your limits**.

**Low-risk drinking helps to promote a culture of moderation.**

**Low-risk drinking supports healthy lifestyles.**



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The Canadian Centre on Substance Use and Addiction changes lives by bringing people and knowledge together to reduce the harm of alcohol and other drugs on society. We partner with public, private and non-governmental organizations to improve the health and safety of Canadians.

CCSA wishes to thank the partners who supported development of Canada's Low-Risk Alcohol Drinking Guidelines. For a complete list of the organizations supporting the guidelines, please visit [www.ccsa.ca/Eng/Priorities/Alcohol/Canada-Low-Risk-Alcohol-Drinking-Guidelines/Pages/default.aspx](http://www.ccsa.ca/Eng/Priorities/Alcohol/Canada-Low-Risk-Alcohol-Drinking-Guidelines/Pages/default.aspx)

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Tel: 613-235-4048 | Fax: 613-235-8101  
ISBN 978-1-77178-010-0

Developed on behalf of the  
National Alcohol Strategy Advisory Committee

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Cette publication est également disponible en français.

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## APPENDIX B

# Alcohol and Special Populations

Certain groups are at greater risk for alcohol-related harm than others. Some of these groups include youth, young adults, women, Indigenous peoples and people with lower SES.

Alcohol consumption by youth is a concern because

- the younger a person starts drinking, the greater the risk for alcohol-related problems in adulthood<sup>4</sup>
- excessive drinking may affect their memory and decision-making<sup>4</sup>
- they are strongly influenced by the behaviour of their friends and family, and if these influencers approve of alcohol, youth are more likely to drink themselves<sup>4</sup>
- in Alberta 31% of youth in grade 7 through 12 reported having a drink of alcohol that was more than just a sip, and 17% had five drinks (binge drinking) or more of alcohol on one occasion<sup>114</sup>

Alcohol consumption by young adults is a concern because

- they are the heaviest drinkers in Alberta, with 29% of current drinkers indicating heavy drinking<sup>115</sup>
- heavy drinking among young adults is often the result of intending to drink heavily<sup>4</sup>

Alcohol consumption by women is a concern because

- **risky drinking** is currently on the rise among women in Canada<sup>4</sup>
- they are more vulnerable to sexual assault or other violence when drinking beyond their capacity<sup>4</sup>

Alcohol consumption by Indigenous peoples is a concern because

- while overall drinking is lower for Indigenous adults living in First Nation communities than the overall Canadian population (35% vs 77%). of those who did drink in the past year, 60% drank heavily
- furthermore, while overall drinking is lower for First Nation youth living in First Nations communities than the overall Canadian population, of those who did drink in the past year 50% drank heavily<sup>4</sup>
- the use and abuse of alcohol and other drugs was ranked by First Nations on reserve as the top challenge for community wellness<sup>4</sup>

## APPENDIX C

# Working With Media and Media Advocacy

### **Use media to enhance advocacy efforts**

Media advocacy is a type of health communication. It involves the strategic use of mass media (usually the news media) to shape and influence public opinion, mobilize community activists and influence decision-makers to encourage and create policy change.<sup>39,116,117</sup>

### **Why engage in media advocacy?**

Media attention can offer a valuable source of free and highly credible advertising. Exposure in the media can be the single most important public relations tool. Media visibility offers credible access to the greatest number of people.

### **When should contact with media be made?**

- During the announcement of a new initiative, or when significant achievements have been made
- When you have information that can be tied to community news
- When an issue has reached crisis proportions
- When media opportunity might make the difference between the adoption or rejection of a law you support or disagree with

### **What does media advocacy involve?**

- Taking time to build relationships
  - Be upfront and trustworthy
  - Make yourself available
  - Ask clearly for what you want
  - Ensure you are informed and accurate about the issue at hand
- Setting a clear agenda for what you want to accomplish
- Shaping the debate to change the way people talk about public health problems
- Getting attention through things like the news media, public service announcements, press releases and paid advertisements

### How is a media campaign set up?

- Ensure your whole organization, department or community group is aware of the plan
- Identify objectives ensuring that the campaign will achieve what is missing or needed
- Select a priority audience to ensure that the message will be received—different populations respond to different kinds of messages
- A clear plan helps to maximize often-limited funds and time
- Be flexible—news and attention to news can change in an instance, so sometimes shifting with the tide can be the best way forward
- Keep at it indefinitely—this work is a marathon, not a race

The above sections were adapted from the [Community Tool Box](#), a valuable resource that goes into the above sections in detail and provides checklists and examples to support media advocacy efforts.

In the words of one group of researchers, “Successful policy advocates pay attention to the news because the news media largely determine what issues we collectively think about, how we think about them, and what kinds of alternatives are considered viable; the news media set the agenda and terms of debate for policy makers and the public. The public and policy makers do not consider issues seriously unless they are visible, and they are not visible unless the media have brought them to light. Public health advocates cannot afford to have their issues go unnoticed or to be caught unprepared when the events of the day catapult their issues into public discussion. Media advocacy helps advocates be prepared to create news and react to news on their issues.”<sup>116</sup>

# APPENDIX D

## At a glance: the eight steps to developing a healthy public policy

<p><b>1</b> <b>Describe the problem</b></p> <p>Obtain a detailed understanding of the specific problem. This will be a foundation for developing clear goals, assessing options, and building support for the policy among decision-makers.</p> <p>Consider measurable objectives at all four levels (individual, network, organization, and society) and ensure they are specific, measurable, attainable, realistic, time-bound (SMART) and a strategic priority.</p> <p>Understand the problem:  <b>Causes</b> – what is the origin or cause of the problem? What has contributed to its development?  <b>Impact</b> – what is the extent and cost of the problem in your community? What would happen if it was NOT dealt with?  <b>Perception</b> – who else thinks it is a problem? Who thinks it is not?  <b>Possible solutions</b> – what has been done to try to resolve the problem, in your community and others? What are the potential policy and non-policy solutions? What are the costs and benefits of various solutions?          Search for information to find answers:  <b>Types of data</b> – quantitative opinion, community health status survey, community stories, evaluation and research findings, cost benefit, "best practices" syntheses and guidelines, organizational mandates, historical approaches.  <b>Sources</b> – journals, magazines, books; consultants, private sector; resource centres; government departments; local health units; non-governmental organizations and strategies, polling companies, researchers, community spokespersons.</p>	<p><b>2</b> <b>Assess readiness for policy development</b></p> <p>Determine whether to proceed. This decision should be based on whether your community is ready for a specific policy and your organization is ready to lead or support the process.</p> <p>Assess readiness:  <b>Community</b> – who will be supportive or unsupportive? Why? What is public opinion? What reasons to oppose this policy will be put forward? Are there educational and awareness programs in your community that focus on your problem? How successful have they been? Has the problem been a recent focus in the media?  <b>Organizational</b> – is the policy and development process a fit with your mandate? How much time/resources do you have to support it? Who can support the process?          Shape your answers into a Force Field Analysis – a snapshot of the forces that will 'drive' or 'restrain' the process. The snapshot may be different for different policy options.          You may use other strategies before beginning policy development (e.g., focus on data collection, education, and persuasion or find additional resources). If you start when public opinion is negative or resources are inadequate you may fail and reduce your credibility. "Lead" may not be the best role for you. If the community is ready but you are not you can support policy development in other ways.</p>	<p><b>3</b> <b>Develop goals, objectives, and policy options</b></p> <p>Define clear goals and objectives for the policy change and generate a list of policy options that you want decision-makers to consider. Putting forward more than one option shows stakeholders that you are flexible and willing to negotiate. Assessing several options prepares you to explain why there are certain ones that you will not support.</p> <p><b>Develop one or two goals</b> – these are broad statements summarizing the ultimate direction or desired achievement of your policy.</p> <p><b>Develop your objectives</b> – these are brief statements specifying the desired impact or effects of a policy. Objectives should be SMART - specific, measurable, acceptable, realistic and time-bound.</p> <p><b>Generate a list of policy options to address the issue</b> – these are choices regarding the types of policies that can be put in place to address health issues.</p> <p><b>Assess all policy options to determine fit with goals and objectives</b> – choose a shortlist from the ones that fit after considering community and organizational readiness for each option. This shortlist comprises the options that will be presented to decision-makers.</p>	<p><b>4</b> <b>Identify decision-makers and influencers</b></p> <p>Decide which decision-makers will be the focus of your support-building efforts. Choosing the wrong people can waste resources and may even jeopardize future strategies if you approach people at the wrong level, or wrong time.</p> <p>Ask your stakeholders who would be best to approach and how to approach them. Don't assume that you already know the best person. Consider starting with someone lower on the hierarchy rather than heading straight for the top. Start with more sympathetic and supportive individuals rather than pouring your energy into the "toughest nut."</p> <p>Find out as much as you can about how these individuals make decisions. For example, consider whether they are most driven by:</p> <ul style="list-style-type: none"> <li>• Media coverage</li> <li>• Their own beliefs and values</li> <li>• The needs of their clients or constituency</li> <li>• Other influential people or groups</li> </ul> <p>Brainstorm a list of influential individuals and groups and organize them according to the order in which you think they should be approached.</p>
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Public Health Ontario wishes to acknowledge and thank THCU staff and many partners who contributed to earlier versions of this document. THCU (originally known as The Health Communication Unit, started in 1993 at the University of Toronto) moved to Public Health Ontario's Health Promotion, Chronic Disease and Injury Prevention Department in 2011.

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<p><b>5</b> <b>Build support for the policy</b></p> <p><i>Choose channels and vehicles through which to try to persuade decision-makers to proceed with policy development. Develop the messages that are put forth using these methods. This step can win or lose battles.</i></p> <p>Choose a mixture of approaches to build support for your policy (e.g., quiet negotiation, sharing information, public briefs, letter-writing, etc.).</p> <p>Focus messages on:</p> <ul style="list-style-type: none"> <li>• The links between the policy and a compelling issue</li> <li>• Simple descriptions of solutions</li> <li>• Signs in the community that change is warranted and desired (e.g., public opinion, media coverage)</li> </ul> <p>Prepare to counter arguments such as:</p> <ul style="list-style-type: none"> <li>• Too costly</li> <li>• Increased regulations restrict individual freedoms</li> <li>• There is a non-policy solution</li> </ul> <p>Developing a coalition is a key part of this step. Form alliances with stakeholders who believe in and champion your cause. These individuals and organizations can bring diverse skills to support your policy and communicate your key messages in multiple ways through their channels. Frequently adapt messages as public opinion, media and decision-maker landscapes change.</p> <p>Be strategic in every vehicle, messenger and word choice (i.e., don't choose too many channels or vehicles).</p>	<p><b>6</b> <b>Draft and/or revise the policy</b></p> <p><i>Define the specific logistical and legal details about a policy. The precise wording of a policy often dictates whether or not it is passed.</i></p> <p>Include all of the following in your policy:</p> <ul style="list-style-type: none"> <li>• The purpose of the policy (goals and objectives)</li> <li>• A description of the regulations and sanctions</li> <li>• Procedures for non-compliance</li> <li>• A plan for promoting and disseminating the policy</li> <li>• A plan for monitoring and evaluating the policy</li> </ul> <p>Gather other policy examples to assist with the writing process.</p> <p>Prepare to revise as many times as necessary. "Seeing it in writing" will often re-ignite opposing forces.</p> <p>Consult stakeholders throughout the writing and revision process. People responsible for funding, implementing, and otherwise acting upon the policy should be included. Community consultations are often a part of this process.</p> <p>Consult with a legal professional about the policy.</p> <p>Review every policy draft to ensure that the policy goals and objectives are met.</p>	<p><b>7</b> <b>Implement the policy</b></p> <p><i>Ensure that all pre-requisites are in place for policy implementation and then implement the policy. Many policies have been retracted upon realizing that implementation is impractical, too costly, too controversial or that progress toward the ultimate goal cannot be demonstrated.</i></p> <p>Ensure the following conditions are met before embarking on policy implementation:</p> <ul style="list-style-type: none"> <li>• The policy meets stated goals and objectives</li> <li>• Objectives are measurable</li> <li>• Approval of key decision-makers and stakeholders has been obtained</li> <li>• An accurate estimate of the resources needed to implement your policy has been developed</li> <li>• The timeline is realistic and appropriate (based on stakeholders' input and evidence from your readiness assessment)</li> <li>• The policy specifies who is responsible for what</li> </ul> <p>Consult with people responsible for funding, implementing, and otherwise acting on the policy as implementation is considered.</p> <p>Ensure that the policy implementation plan includes:</p> <ul style="list-style-type: none"> <li>• Clear communication</li> <li>• An enforcement plan</li> <li>• Signage</li> </ul>	<p><b>8</b> <b>Evaluate and monitor the policy</b></p> <p><i>Early identification of problems and timely policy amendments may help avoid a policy being overturned when implementation presents challenges. A thorough evaluation will also help to demonstrate accountability to stakeholders and reduce implementation costs.</i></p> <p>Develop a few evaluation questions, such as:</p> <ul style="list-style-type: none"> <li>• Is the situation better than it was before the policy was implemented?</li> <li>• If the policy was not as effective as anticipated, why not?</li> <li>• Are people who were involved in the policy process happy with the results?</li> <li>• Do the people affected have a favourable view of the policy? If not, what can be done to address their concerns?</li> <li>• Are there foreseeable developments that may affect the policy?</li> </ul> <p>Try to ensure that you are collecting both quantitative and qualitative data (this should be done through the policy cycle).</p> <p>Use indicators to help answer these questions. For example:</p> <ul style="list-style-type: none"> <li>• Behaviours or health status of community members</li> <li>• Number of violations</li> <li>• Mass media coverage of the policy</li> <li>• Resources allocated to implementing the policy</li> </ul> <p>Consider how you will communicate your evaluation findings to your stakeholders.</p>
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## APPENDIX E



# General Strategies for Encouraging Policy Change

Below is a list of general strategies for working with communities or organizations (at any level of policy readiness) to encourage healthy policy change.

### 1. Develop Organizational Knowledge and Support

- It is important to develop internal knowledge about the proposed policy (e.g., benefits of the proposed policy and potential sources of opposition) and gain buy-in from colleagues who represent your organization publicly prior to moving an issue forward externally.
- Efforts to engage external community members and decision-makers can be unintentionally undermined if public messaging from internal organizational representatives and supporters is not consistent.

### 2. Understand the Social, Political & Economic Context

- Develop a broad understanding of the community or organization that you are working with.
  - » Find answers to questions like: What key issues are impacting the community or organization? Who makes up the executive committee and what are their priorities?
- Be aware of the social, political and economic issues that are most pressing to the constituents within your target group.
  - » Local newspapers, council sessions, committee meetings and annual reports from local community agencies can provide valuable insight into the perceived needs and priorities of the community.
- Understand the context in which your target community or organization operates.
  - » This will help you identify stakeholders that share a common interest in an issue and possible champions for moving the proposed policy forward.
  - » It will also assist you in identifying potential sensitivities and anticipating possible barriers to policy action.

### 3. Watch Closely for Open Policy Windows

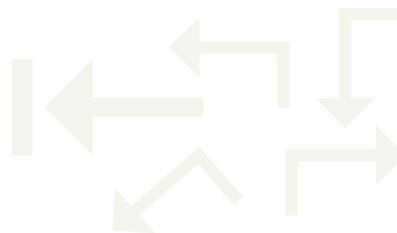
- Determine when the timing is right to move an issue forward. To build support for your issue, be prepared to act on open 'policy windows' and critical events that reflect favourably upon your issue.
  - » A policy window is a unique opportunity to take action on an issue and build support for policy change. They occur infrequently and do not stay open for long periods of time. For this reason, advocates and policy developers must learn to recognize and take advantage of open policy windows.<sup>1</sup>

#### **Potential reasons why policy windows open:**

Administrative changes, change in decision-maker ideology, a shift in public opinion, the emergence of a new problem or the onset of a crisis or focusing event.

#### **Potential reasons why policy windows close:**

A feasible solution to the problem is found, a shift in priorities or attention takes place, a change in personnel, or a failure to find a feasible solution in an adequate amount of time.<sup>1</sup>



1. Kingdon, J.W. (1984). *Agendas, Alternatives, and Public Policies*. New York, NY: Harper Collins.

#### 4. Frame the Issue in a Context that is Meaningful and in Terms of the Immediate and Long-Term Benefits of the Policy

- Frame the proposed policy in a way that reflects your understanding of the community or organization and its priorities. Framing involves carefully defining your goals and strategically tailoring your message to your target audience.<sup>2</sup>
  - » For example, if you are trying to pass a smokefree parks bylaw and your community or organization is in the process of developing an environmental action plan, highlight how your proposed policy will support the policy directions of the environmental action plan (e.g., decrease in litter from cigarette butts).
- Position the policy based on its future health benefits, but also illustrate to decision-makers the immediate pay-offs that may result from policy adoption.
  - » For example, a smoke-free bylaw in city parks not only protects the health of children, but also decreases park maintenance and contributes to urban beautification.

#### 5. Take Advantage of Changes in Leadership

- An election campaign is an ideal time to develop relationships with candidates and generate support for proposed policies. Do your best to connect with every candidate, even those who may not be on the radar for elected office. After the election, keep successful candidates accountable for their pre-election promises.

For evidence to support your policy advocacy strategy, see **Alberta Policy Coalition for Chronic Disease Prevention's<sup>3</sup> Evidence** web page (available at: <http://abpolicycoalitionforprevention.ca/evidence/>)

#### 6. Keep your Message Clear and Simple by Using Three to Five Key Messages

- Use plain language, simple examples and anecdotes to create messages that people can relate to.
- Remember that "one size fits all" is not always the best way to go about your advocacy campaign, so tailor your messages to fit the different priorities, interests and backgrounds of the groups and individuals that you are seeking to engage.

#### 7. Show Constituent Support for an Issue and Illustrate Benefits to the Community

- Highlight how the proposed policy will make the community a better place for constituents to live. Include the community in this process and encourage members to get involved.
- Elected officials pay close attention to the needs of their constituents and whether or not there is a high level of support for a proposed policy within their riding. For this reason, it is important to use a variety of tactics to illustrate public support for the proposed policy or related issue. Examples include opinion polls, surveys, letter and phone call campaigns, letters to the editor, writing news articles and blog posts, and the use of media and social media.

#### 8. Build Partnerships with Communities

- Building community partnerships can take time. Begin by developing relationships with a variety of community stakeholders (e.g., community members, organizations and decision-makers).
- Provide community members with opportunities to get involved in the process of generating support for the policy.

For additional resources on community building, see **The Citizen's Handbook**, an online resource created by the Vancouver Citizen's Committee (available at: <http://www.citizenshandbook.org/>), or visit **Tamarack Institute for Community Engagement** (available at: [www.tamarackcommunity.ca](http://www.tamarackcommunity.ca))

3. Center for Disease Control and Prevention. (n.d.). Chapter Nine: Media Advocacy. In *Designing and Implementing an Effective Tobacco Counter-Marketing Campaign*. Retrieved from [https://www.cdc.gov/tobacco/stateandcommunity/counter-marketing/pdfs/tobacco\\_cm\\_manual.pdf](https://www.cdc.gov/tobacco/stateandcommunity/counter-marketing/pdfs/tobacco_cm_manual.pdf).

4. Previously known as the Alberta Policy Coalition for Cancer Prevention, the name changed to Alberta Policy Coalition for Chronic Disease Prevention on October 1, 2011.

## 9. Engage “Fence-Sitter” Decision-Makers

- The term “fence-sitter” refers to those decision-makers who flip-flop in their support for an issue or who have not solidified their opinion in regards to a proposed policy. It is important to engage fence-sitters by continually providing them with updates and new information to keep them in the loop and to move them in a positive direction in terms of their support for an issue. Remember to do this in a respectful way.

## 10. Build Partnerships with Key Stakeholders

- Collaborate with diverse groups and individuals interested in the issue to build a broad base of support for the policy.
  - » Intersectoral collaboration is a strategy that works well with Innovator and Majority communities and organizations.
  - » Intersectoral collaboration refers to the process of working with individuals and organizations from a variety of sectors (e.g., health, education, non-profit, for-profit and government) to reach a goal.

To learn more about intersectoral collaboration, see. **Crossing Sectors - Experiences in Intersectoral Action, Public Policy and Health** (available at: <http://www.phac-aspc.gc.ca/publicat/2007/cro-sec/index-eng.php>)



For a list of recommended policy resources, please visit <http://policyreadinesstool.com/prt-resources>

## 11. Employ Media Advocacy and Enlist Earned Media

- If used correctly, the media can be a powerful tool for encouraging policy change.
- Media advocacy is the strategic use of the mass media, coupled with other advocacy strategies, to influence public debate and encourage policy change.<sup>4,5</sup> To make your media advocacy more effective, try to connect the proposed policy to issues and events that are relevant to your target group.
- Earned media involves working deliberately to have your issue covered by the news media, in contrast to paying for media coverage. Examples of earned media include media releases, writing news and magazine articles, organizing staged demonstrations or events, and writing letters to the editor.

## 12. Use a Range of Communication Channels and Tools

- In-person meetings, phone-calls, emails, letters, the development of websites, mass media and social media can all be used to engage decision-makers and the public.
- When using these different communication channels and tools, it is important to tailor them to the adopter type that you are working with.
  - » For example, while social media might be a good tool for Innovators, it may not be an effective way to connect with Late Adopters who tend to be more traditional.

## 13. Raise the Profile of Innovators and Celebrate Successes

- It is important to demonstrate positive policy outcomes, such as health benefits or economic return on investments, that have resulted for others that have successfully implemented the policy. This helps to illustrate to potential policy adopters what is possible in their own community or organization.

5. The Advocacy Institute. (1998). *Blowing Away the Smoke: A Series of Advanced Media Advocacy Advisories for Tobacco Control Advocates*. Revised series September 1998. Washington, DC: The Advocacy Institute;

6. Wallack L, and Dorfman, L. (1996). *Media Advocacy: A Strategy for Advancing Policy and Promoting Health*. *Health Education Quarterly*, 23 (3), 293-317.

## APPENDIX F

# Guidance for Addressing Inequities in Alcohol-related Harm

While written for European audiences, the World Health Organization (WHO) report *Alcohol Inequities: Guidance for Addressing Inequities in Alcohol-Related Harm* is an informative document that has applied a health equity lens to the issue of alcohol. It is recommended that municipalities and decision makers refer to this report during the process. Two excerpts from the Report – Key Policy Recommendations and a checklist with important health equity questions to consider have been included below.

### **Key policy recommendations**

- A comprehensive approach to reducing inequities in alcohol-related harm requires action that includes mix of long- and short-term impacts, addressing the consequences and the root causes of inequities, and acting on both individuals and environments.
- Increasing the price of alcohol is the most promising policy intervention to reduce social inequities in alcohol-related harm.
- Local measures to reduce the availability of alcohol can reduce the excess burden of alcohol-related harm in high-risk communities. This includes restricting times, locations and quantities of alcohol purchases. Zoning and licensing measures can be more fully utilized to ensure that disadvantaged areas are not exposed to a higher density of alcohol outlets.
- Income, employment and education are all factors that protect against alcohol-related harm – social protection policies can protect against the adverse impact of economic shocks and unemployment.
- Differential access to and treatment within the health system contribute to inequities in alcohol-related harm. Actions to address this include:
  - reducing financial, geographical and cultural barriers to accessing primary care and alcohol treatment services for groups experiencing disproportionate alcohol-related harm;
  - ensuring that people from groups vulnerable to alcohol-related harm are identified and offered brief advice interventions in primary care settings;
  - boosting social support and post-discharge care for people engaging in harmful alcohol consumption who are also experiencing other social disadvantages.
- Consequences of harmful alcohol use are more severe for those already experiencing social exclusion. Harm reduction measures, such as safe places to sober up and community patrols can reduce inequitable consequences.

### Checklist: are you on track?

1. Do you routinely measure alcohol consumption and alcohol-related harm by socioeconomic group (e.g. gender, ethnicity, education level)?
2. Have you identified which groups experience most harm (health and/or social) from alcohol, and are they clearly prioritized in your strategies and plans?
3. Do you routinely assess the equity impact of alcohol control policies and plans before they are implemented?
4. Can the most marginalized groups in society meaningfully participate in decision-making processes about alcohol control policies?
5. Do you have robust policies in place with the following specific goals?
  - a. To increase the price of alcohol.
  - b. To reduce availability of alcohol, especially in disadvantaged areas.
  - c. To improve access to primary care, alcohol services, and social support.
  - d. To reduce the harmful consequences of alcohol in vulnerable groups (places to sober up, community patrols, and so on).
6. Do you have effective policies in place to address the root social determinants of inequities in alcohol-related harm? Such measures should include:
  - a. social protection, especially for families with children and the unemployed;
  - b. high-quality early childhood education and parenting support;
  - c. active labour force programmes for unemployed people, including skills development;
  - d. policies to reduce social exclusion;
  - e. policies to reduce household overcrowding;
  - f. improving psychosocial working conditions for low-income workers.
7. Do you evaluate the impact of all alcohol control interventions on different social groups?
8. Have you set targets for reducing alcohol-related harm in different social groups?
9. Is there clear accountability and leadership for reducing inequities in alcohol-related harm?

## APPENDIX G

# Jurisdictional Responsibility and Legislative Authorities

The information provided below is based on a review of the [Alberta Municipal Government Act \(MGA\)](#), Alberta's **Gaming, Liquor and Cannabis Act** (GLCA) and **Gaming, Liquor and Cannabis Regulation** (GLCR), the AGLC handbooks and consultation with AGLC and AUMA staff. This is not an exhaustive overview and it is not a substitute for legal advice. Information is accurate as of June 2019.

### Municipal

Although the AGLC is the provincial body that governs, regulates and enforces liquor activities in Alberta, Alberta municipalities have the right and ability to establish, implement and enforce policies that further restrict some of the provincial legislation outlined by AGLC. For example, and as discussed in more detail in the body of the guide, municipalities

- can choose to collect fees for liquor licences beyond what is required provincially as long as these fees are not punitive
- can implement policy that restricts liquor advertising and/or liquor industry sponsorship on municipally owned property and in municipally owned materials
- can further restrict the provincially set hours of operation for liquor-serving venues
- cannot raise or decrease the age limit for liquor purchases

Municipalities do not have the authority to relax provincial standards and must adhere to Municipal Affairs and to the MGA.

The following sections of the MGA provide broad authority for municipal action on the policy options detailed in this guide; they are included below in full.

#### **Part 1 Purposes, Powers and Capacity of Municipalities: Municipal purposes**

3. The purposes of a municipality are to
  - a. provide good government,
    - a.1) foster the well-being of the environment,
  - b. provide services, facilities or other things that, in the opinion of council, are necessary or desirable for all or a part of the municipality,
  - c. develop and maintain safe and viable communities, and
  - d. work collaboratively with neighbouring municipalities to plan, deliver and fund inter-municipal services.

## **Part 2 Bylaws Division: General jurisdiction to pass bylaws**

7. A council may pass bylaws for municipal purposes respecting the following matters:
  - a. the safety, health and welfare of people and the protection of people and property;
  - b. people, activities and things in, on or near a public place or place that is open to the public;
  - c. nuisances, including unsightly property;
  - d. transport and transportation systems;
  - e. businesses, business activities and persons engaged in business;
  - f. services provided by or on behalf of the municipality;
  - g. public utilities;
  - h. wild and domestic animals and activities in relation to them;
  - i. the enforcement of bylaws made under this or any other enactment, including any or all of the following:
    - i. the creation of offences;
    - ii. for each offence, imposing a fine not exceeding \$10 000 or imprisonment for not more than one year, or both;
    - iii. providing for the imposition of a penalty for an offence that is in addition to a fine or imprisonment so long as the penalty relates to a fee, cost, rate, toll or charge that is associated with the conduct that gives rise to the offence;
    - iv. providing that a specified penalty prescribed under section 44 of the Provincial Offences Procedure Act is reduced by a specified amount if the penalty is paid within a specified time;
    - v. providing for imprisonment for not more than one year for non-payment a fine/penalty;
    - vi. providing that a person who contravenes a bylaw may pay an amount established by bylaw and if the amount is paid, the person will not be prosecuted for the contravention;
    - vii. providing for inspections to determine if bylaws are being complied with;
    - viii. remedying contraventions of bylaws.

### **Powers under bylaws**

8. Without restricting section 7, a council may in a bylaw passed under this Division
  - a. regulate or prohibit;
  - b. deal with any development, activity, industry, business or thing in different ways, divide each of them into classes and deal with each class in different ways;
  - c. provide for a system of licences, permits or approvals, including any or all of the following:
    - i. establishing fees for licences, permits and approvals, including fees for licences, permits and approvals that may be in the nature of a reasonable tax for the activity authorized or for the purpose of raising revenue;
    - ii. establishing fees for licences, permits and approvals that are higher for persons or businesses who do not reside or maintain a place of business in the municipality;
    - iii. prohibiting any development, activity, industry, business or thing until a licence, permit or approval has been granted;
    - iv. providing that terms and conditions may be imposed on any licence, permit or approval, the nature of the terms and conditions and who may impose them;
    - v. setting out the conditions that must be met before a licence, permit or approval is granted or renewed, the nature of the conditions and who may impose them;
    - vi. providing for the duration of licences, permits and approvals and their suspension or cancellation for failure to comply with a term or condition or the bylaw or for any other reason specified in the bylaw;
  - c1) establish and specify the fees, rates, fares, tariffs or charges that may be charged for the hire of taxis or limousines;
  - d. provide for an appeal, the body that is to decide the appeal and related matters.

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This broad and purposive approach has supported successful public policy at the municipal level (e.g., smoke-free public places bylaws, responsible pet ownership bylaws). The above authority allows for a municipality to implement a comprehensive alcohol policy as recommended.

In addition to the above, the following sections of the MGA may be useful. See the MGA for full details:

- Division 5 Land Use (639 LUB, 640 LUB and 642 Permitted and Discretionary Uses)
- Division 2 Scope of Bylaws (12 – a and b)
- Granting rights over property (61 – 1 and 2)

In any area where provincial legislation already exists, municipalities can adopt more comprehensive policy, as long as the provincial standards are met and all provincial laws are in compliance. If there is a conflict or inconsistency between a bylaw a provincial law, “the bylaw is of no effect to the extent of the conflict or inconsistency.”<sup>40</sup>

## Provincial

- Alberta's Treasury Board and Finance (TBF) has [responsibilities](#)<sup>52</sup> relating to the AGLC.
  - The minister of the TBF is responsible for
    - recommending the appointment/re-appointment of AGLC chair and board members
    - reviewing AGLC business plans and mandate
    - advising the AGLC of government expectations
  - The deputy minister of the TBF is responsible for
    - co-chairing a policy coordination committee with the CEO of the AGLC
    - connecting with government stakeholders as appropriate
- The AGLC board develops policy, conducts hearings and makes licensing and registration decisions. It ensures the powers and duties of the AGLC are carried out. The AGLC controls the importation, manufacture, sale, possession, storage, distribution and use of liquor in Alberta. It also
  - establishes and enforces liquor policies
  - licences businesses in which liquor is sold or consumed
  - pays liquor suppliers for their products after the product is sold to liquor licensees
  - collects the provincial liquor markup, as well as any federal liquor taxes and levies<sup>118</sup>

For more information, consult the GLCA and the GLCR, as well as the handbooks developed by the AGLC, including the *Liquor Licensee Handbook*, the *Retail Liquor Stores Handbook*, the *General Merchandise Liquor Stores Handbook* and the *Liquor Agency Handbook*. Details of which can be found under the section "Legislation and Handbooks" on the AGLC website.

- The AGLC is the legal importer of record for liquor in Alberta. Manufacturers and suppliers sell their liquor products to businesses (licensees) through the AGLC. Private licensees then sell liquor products to consumers.
- The AGLC sets and collects provincial markup and collects and distributes the federal excise and customs duties.
- All alcohol advertising must adhere to the Canadian Code of Advertising Standards; however, this is mostly regulated at the provincial level and therefore must also follow the stipulations set in the GLCA, the GLCR and the handbooks developed by the AGLC.

## Federal

- The federal government collects excise and customs duties on liquor. Customs duties and excise duties both apply to imported liquor products, while only excise duties apply to domestic liquor products.
- The Canadian Radio-Television and Telecommunications Corporation is an administrative tribunal that regulates and supervises broadcasting and telecommunications in the public interest. Through the Code for Broadcast Advertising of Alcoholic Beverages, it regulates alcohol advertising on radio and television.
- Another way that advertising is regulated in Canada is through the Canadian Code of Advertising Standards. Administered by Advertising Standards Canada, the national self-regulatory body for the advertising industry, this code sets the criteria for acceptable advertising in Canada, and was created by the advertising industry in 1963 to promote the professional practice of advertising. The code does not have different standards for regulated products like alcohol. Advertising Standards Canada does, however, offer a preclearance service to those wishing to advertise alcoholic beverages, to ensure compliance with the CRTC Code for Broadcast Advertising of Alcoholic Beverages.<sup>29</sup>

APPENDIX H

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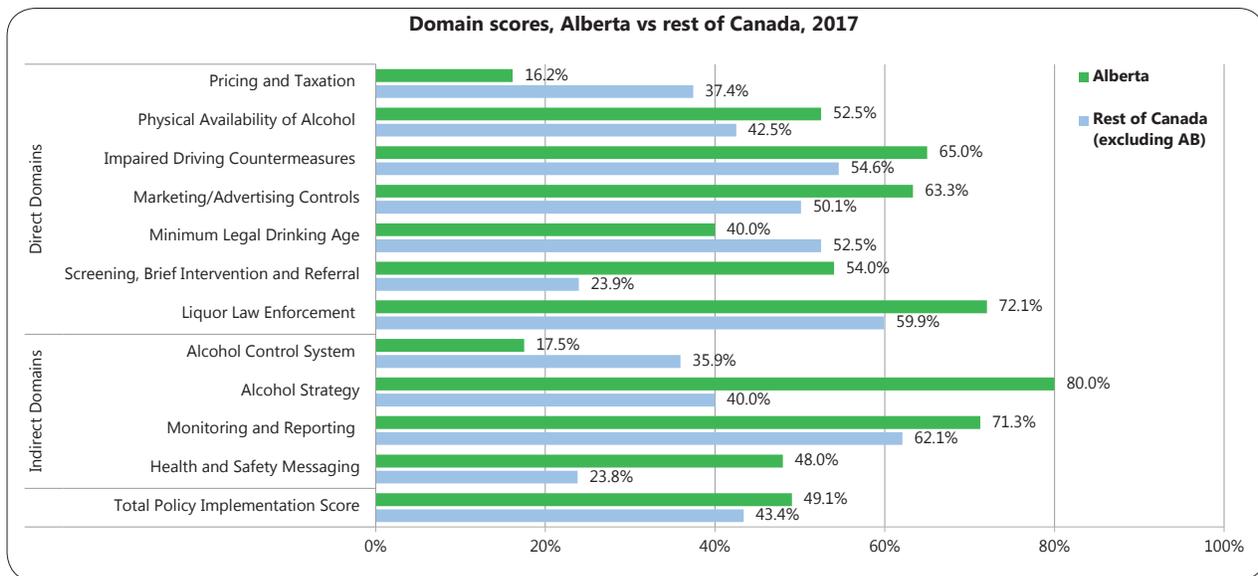
Reducing Alcohol-Related Harms and Costs in Alberta: A Policy Review

Alberta

Population (2016)	4,067,175
Per capita alcohol consumption age 15+*	9.7L pure ethanol**
Overall alcohol harm costs (2014)	\$2,396M
Net revenue from alcohol (2014)***	\$1,111M
Type of alcohol retail system	Wholesale: government monopoly; Retail: private system

The Provincial and Territorial Canadian Alcohol Policy Evaluation (CAPE) project is a rigorous assessment of whether evidence-based alcohol policies were implemented within each province and territory in 2017. A comprehensive alcohol policy framework was developed, containing gold standard best practices across 11 different policy domains. The first seven domains have evidence of effectiveness as means of *directly* reducing population level consumption of alcohol and/or related harms. The last four domains are composed of evidence-based strategies that more *indirectly* facilitate implementation of the first seven domains. See Stockwell et al, 2019<sup>9</sup> for the full methodology and findings.

The scores presented in this summary reflect the degree to which Alberta has implemented these gold standard best practices captured in the alcohol policy framework. **Overall, Alberta scored 49% in 2017, which is 6% above the 43% average for the rest of Canada (excluding Alberta.)**



Promising practices in Alberta

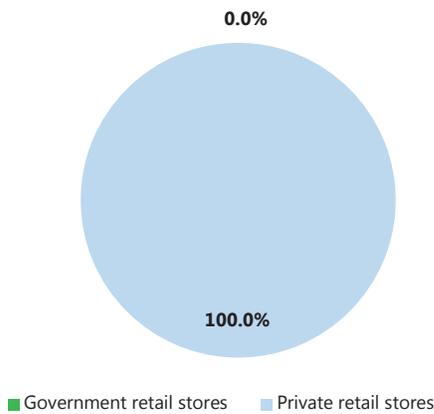
- There are some promising pricing restrictions in place in Alberta such as **restrictions on price-based advertising** (e.g. prohibitions against advertising free liquor, multi-drink specials, or all-you-can-drink specials). Discounted gift cards for on-premise liquor purchase are not allowed and coupons are only permitted if the price per drink does not fall below the minimum.
- To support safer drinking contexts, Alberta **restricts the number of alcoholic beverages** sold or served to a patron after 1am to two drinks and permits **re-corking of unfinished wine** for take-away at on-premise establishments such as bars and restaurants.
- Alberta has strong **interlock regulations** for *Criminal Code* impaired driving offenders, which requires completion of the interlock program prior to relicensing and a minimum 3-year interlock order for second offenses.
- The government liquor commission's social media platforms take a balanced approach to disseminating **health and safety messaging** and promotional messaging; The AGLC funds programs such as *Best Bar None* and resources such as *DrinkSense* which are dedicated to social responsibility and health and safety messaging.

\*Adjusted to account for unrecorded alcohol consumption. \*\*Equivalent to 568 standard drinks (1 standard drink contains 17.05mL of pure alcohol and is equivalent to 341mL of 5% beer; 142mL of 12% wine; or 43mL of 40% spirits). \*\*\* Net income of liquor authorities, total taxes, and other revenue. See CAPE report for full list of data sources.

Strengthening alcohol policies in Alberta			
Policy Domain	Score	Selected recommendations	
DIRECT DOMAINS	 Pricing and Taxation	16% F	Ensure minimum prices are set at a rate per standard drink (e.g. 17.05mL pure alcohol) of at least <b>\$1.75* per standard drink for off-premise retail stores and \$3.50* per standard drink for on-premise establishments</b> , after taxes with no exceptions (*2019 price). For example, on-premise minimum prices should apply to all types of liquor licensees including for special events. <b>Update all alcohol prices annually</b> to reflect Alberta-specific inflation rates to ensure alcohol does not become less expensive relative to other goods over time. On-premise minimum prices have not been updated since implementation in 2008 and so have reduced potential as a harm reduction intervention.
	 Physical Availability	53% D-	Introduce <b>legislated restrictions on outlet density</b> in Alberta, particularly for on-premise establishments such as restaurants and bars. <b>Limit the availability of alcohol by reducing trading hours</b> ; do not allow early morning alcohol sales (i.e. before 11:00am) or late-night sales (i.e. after 8pm for off-premise retail stores and 1am for on-premise establishments) without exceptions such as during major events or sporting tournaments.
	 Impaired Driving Counter-measures	65% C-	Strengthen the graduated licensing program (GLP) for new drivers in Alberta by implementing a <b>minimum GLP start age of 16</b> and ensuring there is <b>zero tolerance for cannabis and illicit substances</b> for GLP drivers for a minimum of 3 years after program completion. <b>Penalties should be increased or modified</b> for all drivers when the presence of a drug is detected in addition to alcohol and administrative license suspensions (ALS) should be recorded on driver's abstracts for at least 3 years and require a license reinstatement fee.
	 Marketing and Advertising Controls	63% C	Ensure alcohol advertising <b>content restrictions cover placement and quantity of ads</b> , and extend to media beyond radio and television such as digital, print and signage. Implement an <b>independent complaint system</b> with penalties that vary by severity of the violation. Require <b>mandatory pre-screening for all alcohol ads</b> by an independent authority to confirm compliance with content restrictions prior to publication.
	 Minimum Legal Drinking Age	40% F	Increase the <b>minimum legal drinking age in Alberta to at least 19</b> to be in line with other provinces and territories; give consideration to <b>graduated drinking policies</b> that grant phased-in legal access to alcohol by limiting the amount and type of alcohol that can be purchased in specific settings between the ages of 19 and 21.
	 Screening, Brief Intervention/Referral	54% D-	Collaborate with health care professionals to develop <b>screening, brief intervention and referral (SBIR) practice guidelines and tools to be implemented in a health care setting and online</b> or consider adopting the SBIR resource developed by the College of Family Physicians. <b>Implementation of SBIR tools should be tracked</b> in order to inform future SBIR activities.
INDIRECT DOMAINS	 Liquor Law Enforcement	72% B-	Implement a <b>risk-based licensing and enforcement (RBLE) program</b> for off-premise retail stores and special occasion permits to inform licensing conditions and enforcement schedules based on outlet and licence holder characteristics as well as incident data; ensure RBLE criteria for on-premise establishments include outlet characteristics. Employ at least <b>1 liquor inspector per 300 outlets</b> to ensure there are sufficient numbers to conduct frequent compliance checks and follow-up checks for violations; ensure <b>liquor law violations are tracked and publicly reported</b> .
	 Alcohol Control System	18% F	Consider <b>reinstating government-owned and government-run off-premise retail stores</b> in Alberta and ensure they report to a <b>ministry with a mandate to protect health and/or safety</b> . <b>Phase out sales beyond on- and off-premise outlets</b> such as online sales and liquor delivery services. Ensure there are <b>legislated earmarked funds to support prevention initiatives and health messaging</b> .
	 Alcohol Strategy	80% A-	Ensure Alberta's existing <b>alcohol-specific strategy is updated</b> , government endorsed and includes a range of evidence-based public health policies and is <b>revised independently from the alcohol industry</b> . <b>Allocate dedicated funding to the strategy</b> , have an identified leader with a public health and/or safety focus to facilitate implementation, and systems in place to monitor implementation and effectiveness. The strategy should be kept current with <b>updates at least every five years</b> .
	 Monitoring and Reporting	71% B-	Ensure that the alcohol consumption and harm indicators that are tracked (e.g. alcohol consumption, alcohol-related morbidity, mortality and crime) are <b>made publicly available at least annually through a centralized system</b> in order to support effective monitoring of trends in consumption and harms. Have an <b>identified leader with a health and safety focus</b> responsible for monitoring alcohol harm; make specific funding and/or staff resources available to support these monitoring initiatives.
	 Health and Safety Messaging	48% F	<b>Implement legislated enhanced alcohol labels as a manufacturer requirement</b> with health and safety messages, standard drink information, and national low-risk drinking guidelines; labels should have prominent rotating messages that are accompanied by pictorial images. Ensure that legislated health and safety messages displayed in all on-premise establishments and off-premise retail stores include a <b>variety of health-focused messages</b> .
<b>Total Policy Implementation Score</b>		49% F	<b>A comprehensive list of gold standard best practice alcohol policies is available in Appendix C of the full CAPE report<sup>2</sup>.</b>

# Alberta: selected findings, 2017

Alberta alcohol retail stores, 2017



Best practice is 100% government-run alcohol retail stores

Alberta minimum prices  
per standard drink, 2017

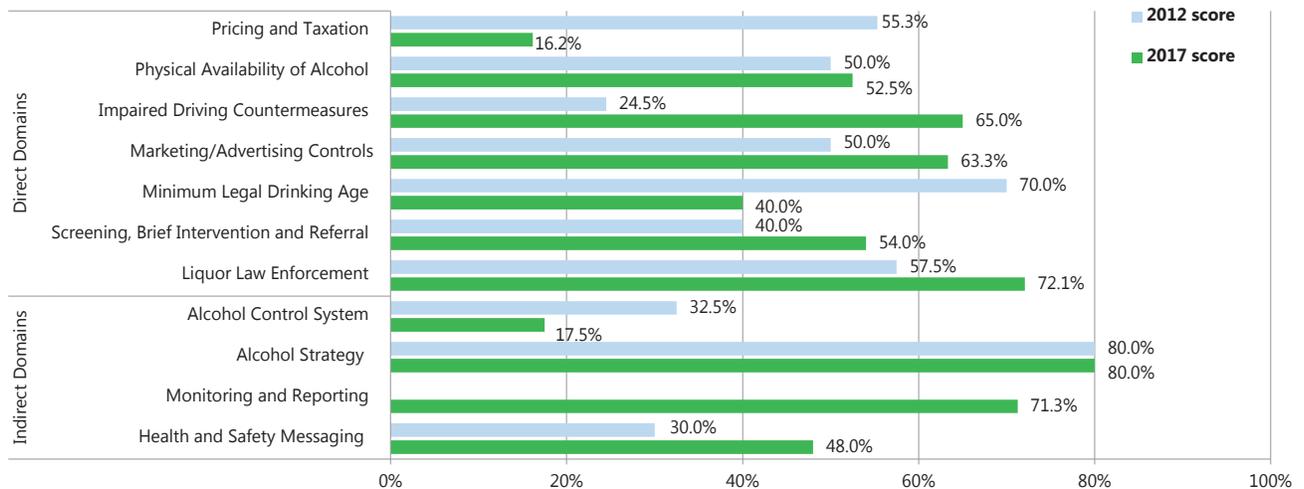


On-premise establishments  
(restaurants, bars, etc.)



Note: No off-premise minimum pricing. On-premise minimum beer price shown here is an average of two minimum beer prices.

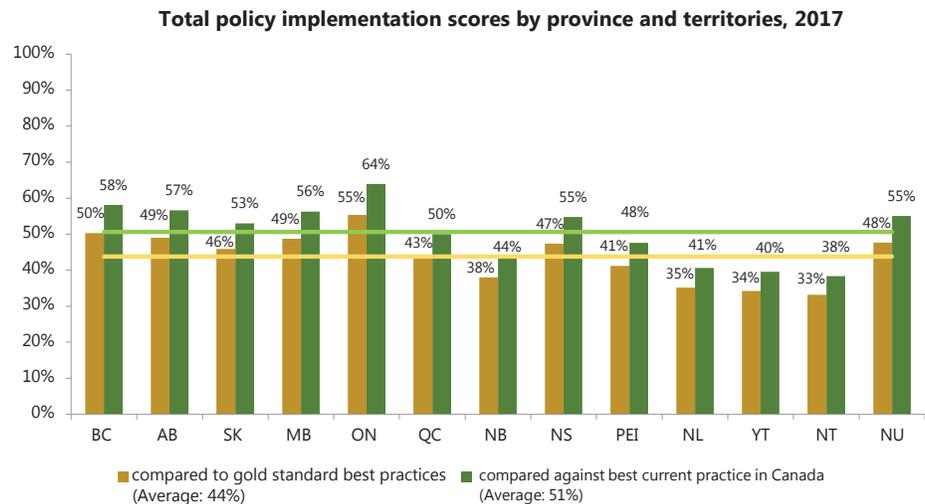
Domain scores, Alberta, 2012 vs 2017



Note: policy indicators may have changed between 2012 and 2017 thus scores reflect best practices at the time of data collection.

## How does Alberta stack up against other provinces and territories?

Even though the provinces and territories scored poorly overall in relation to gold standard best practices, many examples of strong alcohol policy components were found across Canada. **In fact, if a province or territory chose to implement all of these best current practices that were identified they would have scored 87% (Grade A).** Based on these best current practices identified across all jurisdictions, the scores were scaled up to show how the provinces and territories measure up against best current practices in Canada (green bars).



### Next steps for reducing alcohol-related harms and costs in Alberta

- In light of the substantial and increasing harm from alcohol use, the Alberta government should give greater priority to funding and implementing effective alcohol policies such as those outlined in this summary and in the full report<sup>24</sup>.
- Position liquor boards within ministries directly concerned with health and safety rather than with finance and economic development.
- Consideration should be given to re-establishing at least partial government ownership of liquor retail outlets.
- Learn from other provinces' and territories' experiences with successful implementation of effective alcohol policies (see Best Practice Leaders identified on P11 of the full report<sup>25</sup>).
- Government should take action in concert with NGOs and other stakeholders to implement a combination of population level policies prioritising the first seven policy areas identified in this summary.
- Inform the public about the risks of alcohol, including the comparative risks of alcohol and other substances, to create a more supportive climate for enacting effective policies. This can be achieved with initiatives such as mandatory warning labels on all alcohol containers and clear and consistent public health messaging on a range of health topics.
- Carefully document policy changes and regularly monitor and evaluate alcohol-related public health and safety outcomes to better inform future policy development.



**Suggested citation:** Vallance, K., Chow, C., Wettlaufer, A., Stockwell, T., Giesbrecht, N., April, N., Asbridge, M., Callaghan, R., Cukier, S., Davis-MacNevin, P., Dube, M., Hynes, G., Mann, R., Solomon, R., Thomas, G., Thompson, K. (2019). Reducing Alcohol-Related Harms and Costs in Alberta: A Policy Review. Victoria, BC: Canadian Institute for Substance Use Research, University of Victoria.

**Acknowledgements:** Thank you to all of the provincial and territorial stakeholders who provided valuable feedback for this project as well as assisting with data collection and validation activities. We gratefully acknowledge MADD Canada for permitting us to use materials from their 2017 legislative review. Thanks also to our three external expert reviewers, Robyn Burton, Toben Nelson and Tanya Chikritzhs and to all of the extended members of the project team. This study was funded by Health Canada's Substance Use and Addictions Program. The views expressed herein do not necessarily represent the views of Health Canada or the other organizations acknowledged.

<sup>24</sup> To learn more about the Canadian Alcohol Policy Evaluation Project, read other jurisdictional summaries and download the full federal and jurisdictional reports, visit [alcoholpolicy.cisur.ca](http://alcoholpolicy.cisur.ca) or email [cisur@uvic.ca](mailto:cisur@uvic.ca).

## APPENDIX I

### CAPE Gold Standard Best Practice Alcohol Policy Framework

Reproduced with permission from the 2019 CAPE Project Team<sup>5</sup>



# Strategies to Reduce Alcohol-Related Harms and Costs in Canada: A Review of Provincial and Territorial Policies

## 1. PRICING AND TAXATION

**1. Indexed Minimum Unit Pricing (iMUP) for alcohol sold from off-premise outlets:** There are minimum prices for all beverage types sold in liquor stores and these are set according to a formula that ties the minimum price directly to the volume of alcohol in a drink, are set at a minimum of \$1.71/standard drink, are automatically indexed annually to provincial/territorial inflation rates, and are not undermined by pricing loopholes that would allow products to be sold at cheaper rates. Implementing all of these components of iMUP effectively sets a minimum unit price for alcohol that increases with the cost of living and represents the ideal policy.

**2. iMUP for alcohol sold from on-premise outlets:** There are minimum prices for all beverage types sold through licensed establishments and these are set according to a formula that ties the minimum price directly to the volume of alcohol contained in a beverage, are set at a minimum of \$3.42/ standard drink, are automatically indexed annually to provincial/territorial inflation rates, and are not undermined by pricing loopholes that would allow products to be sold at cheaper rates. Implementing all of these components of iMUP effectively sets a minimum unit price for alcohol that increases with the cost of living and represents the ideal policy.

**3. General pricing indicators:** Overall average price levels for alcohol sold by both on- and off-premise establishments are sufficiently high and have kept pace with inflation over the past 5 years. Actual prices of common high and low strength products sold from off-premise outlets are set to reflect alcohol content and are at minimum \$1.71/ standard drink and are taxed at a higher rate than other goods.

## 2. PHYSICAL AVAILABILITY

**1. Regulations pertaining to outlet placement and safety:** Jurisdictions have legislated powers in place that allow the province, territory or municipality to limit the density of outlets by way of restrictions on outlet placement and/or the number of outlets (absolute number or per capita limit) as well as established policies to enhance safety in and around these outlets.

**2. Practice indicator: outlet density (off-premise):** Jurisdictions have an off-premise outlet density that is less than 2.0 outlets per 10,000 capita 15 years and older.

**3. Practice indicator: outlet density (on-premise):** Jurisdictions have an on-premise outlet density that is less than 15 outlets per 10,000 capita 15 years and older.

**4. Hours of operation:** Jurisdictions have hours of operation set by regulation, without exception, that limit and standardize access to alcohol. Hours of operation for off-premise outlets do not open before 11am and do not stay open after 8pm and for on-premise outlets do not open before 11am and do not stay open after 1am the following day.

**5. Regulations pertaining to on-premise availability:** Jurisdictions have regulations for the provision of alcohol in on-premise establishments which prohibit tastings and sampling, permit recorking of unfinished wine and place limits on the number of drinks served per customer at one time.

### 3. IMPAIRED DRIVING COUNTERMEASURES

**1. Graduated Licensing Program (new drivers):** There are graduated licensing programs (GLP) as well as all the recommended components of those programs, such as a minimum age of at least 16 years to enter into the GLP; a minimum of two stages lasting 12 months and 24 months respectively; and that new drivers be subject to a night time driving ban.

**2. Zero tolerance policies for new drivers:** There are zero tolerance limits for GLP drivers that include prohibition on being positive for alcohol or any illicit drugs and the .00% BAC limits for alcohol are extended beyond the GLP for a minimum of three years.

**3. Licence suspensions and revocations:** There are sanctions that are significant enough to serve as a deterrent against impaired driving such as laws that include Short-Term roadside .05% BAC Administrative Licensing Suspension (ALS) Programs with a minimum 3-day ALS and mandatory or discretionary vehicle impoundment for first occurrence as well as the ALS being recorded on the driver abstract or record for at least three years. There is a licence reinstatement fee, minimum 3-year look-back period for repeat occurrences and a minimum 7-day ALS for a second occurrence.

**4. Modified or increased penalties when presence of a drug is detected in addition to alcohol:** Penalties are increased or modified accordingly when a drug is detected in addition to alcohol.

**5. Interlock Programs for Federal Impaired Driving Offenders:** There is an established alcohol interlock program in conjunction with licence suspensions as part of a comprehensive approach to dealing with impaired driving offenders. Jurisdictions require successful completion of provincial or territorial interlock program prior to relicensing for all alcohol-related *Criminal Code* offences and those convicted of impaired driving causing death or bodily harm are not eligible for a reduced “hard” suspension.

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## 4. MARKETING AND ADVERTISING CONTROLS

**1. Alcohol marketing and advertising regulations: There are content restrictions beyond those imposed by the Canadian Radio-Television and Communications (CRTC) Commission,** with restrictions specifically to protect priority populations in addition to youth, such as women, girls and minority groups. There are also restrictions on: the physical location of ads (e.g. ads cannot be placed near schools, substance use treatment centres, community centres, etc.); quantity of ads (ad bans or volume restrictions, e.g. limit on the proportion of commercial space or air time used for alcohol advertising); advertising of price<sup>13</sup> (e.g. policies restricting the advertisement of “cheap” drink specials or 2 for 1 deals); and restrictions on sponsorship that prevent exposure to youth and direct targeting of youth or young adults. Alcohol marketing and advertising regulations also cover additional media types including: web/mobile phones, print media, signage and promotional items. Regulations apply across all advertisers including: government-owned or private off-premise outlets, ferment on premise (FOP) outlets, all manufacturers, on-premise licensees and special occasion permit (SOP) holders.

**2. Enforcement of advertising and marketing regulations:** There is a specific authority responsible for enforcement of alcohol marketing and advertising regulations that is independent from the alcohol industry and alcohol sales. There is a pre-screening system independent from the alcohol industry in place to ensure advertising and marketing adheres to regulations with an independent complaint system to address violations effectively (the alcohol industry cannot be responsible for monitoring ads for compliance with regulations, nor can they be part of the complaint system or system for delivering penalties for violations; these would represent conflicts of interest). Penalties exist that are commensurate with violations and escalate with the frequency and severity of the violation.

**3. Practice Indicator - Focus of the liquor board’s social media presence:** Liquor boards have a high proportion of social media posts dedicated to health and safety messaging as opposed to a sole focus on alcohol-promotion posts.

## 5. MINIMUM LEGAL DRINKING AGE

**1a. Level of legal drinking age:** The minimum legal drinking age is set at 21 years of age.

**1b-c. Legislation supporting the MLDA:** Supportive legislation prohibits the sale of alcohol to those below the minimum legal drinking age, but also the purchase of alcohol by these individuals. Social hosting laws<sup>14</sup> do not extend beyond the private residence.

<sup>13</sup> Restrictions on advertising below minimum price were not assessed in this policy domain. These policies were evaluated under the Pricing and Taxation policy domain.

<sup>14</sup> Social hosting laws permit the consumption of alcohol by an individual who is under the minimum legal drinking age provided the alcohol is provided by a spouse, parent or guardian.

## 6. SCREENING, BRIEF INTERVENTION AND REFERRAL

**1. SBIR practice guidelines:** Authoritative SBIR practice guidelines exist at the jurisdiction level and/or the College of Family Physicians of Canada SBIR tool has been endorsed by a credible provincial or territory professional association (e.g. MD, nurses, psychologists).

**2. Access to SBIR tools or services:** Provincially- or territorially-funded services or programs, either online or in the health care setting, exist for people to assess their drinking habits, receive brief advice about their drinking, and obtain referral information for further support if needed.

**3. Implementation of SBIR:** Adults 18 years and older are routinely asked about their alcohol use by their doctor or other clinical staff at the place they regularly seek care. Jurisdictions track or support tracking of SBIR implementation.

## 7. LIQUOR LAW ENFORCEMENT

**1. Status of Risk-based Licensing and Enforcement (RBLE) Programs:** Jurisdictions have implemented risk-based licensing and enforcement programs, which aim to identify establishments that pose increased risks to public safety in order to inform licence conditions and enforcement activities. RBLE programs need to be in place for both on-premise establishments and off-premise outlets. The jurisdiction must also implement a police inspection program for on-premise establishments and a Mystery Shopper program (to enforce minimum legal drinking age) for off-premise outlets.

**2. Quality of RBLE programs:** RBLE programs include consideration of risks posed by the type of outlet, the past record of the licence holder and data on past reported incidents for both on- and off-premise outlets to determine licence conditions and inform enforcement activities. RBLE programs cover all liquor outlets and special occasion permits, with frequent (at least annual) compliance and follow-up (within 3 months) checks for liquor law violations for both on- and off-premise and at least one alcohol inspector per 300 outlets for both types of outlets. Mystery Shopper programs and police inspection programs are in place for off-premise and on-premise licenses respectively.

**3. Penalties:** Jurisdictions have penalties in place for service to minors and intoxicated persons and penalties are commensurate with the violation, escalate with the frequency and severity of the violation, are tracked and publicly reported.

**4. Training Programs Policy Status:** Jurisdictions' responsible beverage programs are mandatory for all licensed venues (including Special Occasion Permits) and outlets. They must also be required for all levels of staff including volunteers and have a recertification period of no longer than two years.

## 8. ALCOHOL CONTROL SYSTEM

**1. Type of off-premise retailing system:** All off-premise liquor outlets are publicly owned and managed with no private stores.

**2. Alcohol sales beyond on-premise and off-premise outlets:** Liquor regulations do not permit any sales beyond traditional on and off-premise channels, such as online sales, liquor delivery services, ferment on premise outlets, or ferment at home kits.

**3. Relative emphasis on product promotion vs health and safety:** There is legislated earmarked funds to support harm prevention initiatives and/or promote health and safety messaging. Protection of public health and/or safety must be explicitly stated as an objective of the alcohol control system (both for the retailer and the regulator).

**4. Ministry overseeing alcohol retail and control:** The alcohol retailer and regulator are both overseen by a ministry that primarily focuses on health and/or public safety. In addition, there is full separation between the government retailer (i.e. alcohol distributor) and regulator (i.e. policy, licensing and control).

## 9. ALCOHOL STRATEGY

**1. Main focus of the provincial or territorial strategy:** Jurisdictions have an alcohol-specific strategy document.

**2. Range of evidence-based policy recommendations within the strategy:** The strategy includes a wide range of population level evidence-based alcohol control interventions and policies including: pricing; physical availability; impaired driving countermeasures; marketing and advertising controls; minimum legal drinking age; screening, brief intervention and referral programs; and enforcement.

**3. Implementation of the provincial or territorial strategy:** There is dedicated funding to support the strategy that includes at least one alcohol specific policy recommendation<sup>15</sup> and there is an identified leader to facilitate implementation of the strategy. The strategy was developed free from alcohol industry input, has been updated no more than five years ago and includes rigorous mechanisms in place to monitor the implementation and effectiveness of the alcohol strategy<sup>16</sup>.

## 10. MONITORING AND REPORTING

**1. Comprehensiveness of reporting mechanisms:** Funding or support is provided by jurisdictions to conduct systematic tracking of key alcohol-related indicators at the provincial or territorial levels including: per capita alcohol consumption, alcohol-related hospitalisations, deaths and crimes.

<sup>15</sup> Note: Strategies that did not include alcohol specific recommendations were not assessed on implementation and received a score of zero for this indicator.

<sup>16</sup> Note: It was beyond the scope of this project to assess implementation of each provincial or territorial strategy, we therefore assessed the rigor with which each jurisdiction monitors the implementation of their respective strategies.

**2. Accessibility of reporting:** Reporting on alcohol consumption, alcohol-related hospitalisations, deaths and crime is made available to the public at least every two to three years through a centralized system.

**3. Leadership and support:** Jurisdictions have an identified leader responsible for monitoring alcohol harm and key indicators and specific funding or staff resources to support alcohol monitoring are available.

## 11. HEALTH AND SAFETY MESSAGING

**1. The status of enhanced alcohol labelling:** Mandatory (i.e. legislated) enhanced alcohol labels that include health and safety warning messages, standard drink information, and low-risk drinking guidelines are required at point of manufacture.

**2. The quality of enhanced label components:** Enhanced label components are prominently placed on the packaging, include a variety of clear and concise health and safety-oriented messages that are regularly rotated and are accompanied by graphics.

**3. The status of alcohol health and safety messaging (off-premise):** There are mandatory (i.e. legislated) health and safety messaging requirements for off-premise retail outlets.

**4. The status of alcohol health and safety messaging (on-premise):** There are mandatory (i.e. legislated) health and safety messaging requirements for all on-premise licensed establishments.

**5. The quality of the off-premise alcohol and safety messaging:** The health and safety messaging in off-premise locations includes a variety of alcohol-related health and safety topics (e.g. drinking while pregnant or planning to become pregnant and risk of FASD; impaired driving and acute injury risks; impacts and risks of underage drinking; lower-risk drinking information; and risk of chronic disease or long term health impacts), has clearly stated health messages and is accompanied by relevant graphics.

**6. The quality of the on-premise alcohol health and safety messaging:** The health and safety messaging in on-premise locations includes a variety of alcohol-related health and safety topics (e.g. drinking while pregnant or planning to become pregnant and risk of FASD; impaired driving and acute injury risks; impacts and risks of underage drinking; lower-risk drinking information; and risk of chronic disease or long term health impacts), has clearly stated health messages and is accompanied by relevant graphics.

**7. Media platforms for health and safety messaging used by liquor control boards:** A diverse range of suitable media platforms are used for communicating health and safety messaging by liquor control boards including posters, pamphlets, billboards, online content (websites), print advertising, TV/radio advertisements and social media (Twitter, Facebook, Instagram etc.).

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