CAPE 3.0: Results from Quebec

The Canadian Alcohol Policy Evaluation (CAPE) provides rigorous assessments of how well each level of government in Canada is implementing policies proven to reduce harm from alcohol use. This is the third edition of the CAPE project; a project which has a track record of strengthening Canada's response to alcohol harm. Policy data for CAPE 3.0 were collected between June 1 and December 1, 2022.

Why it Matters: Annual alcohol consumption, harms and costs in QC

Alcohol consumption

CAPE 3.0 results: how does QC compare?

- x BC: 36%
- x AB: 34%
- x SK: 36%
- x MB: 44%
- x ON: 40%
- x QC: 42%
- x NB: 35%
- x NS: 38%
- x PE: 37%
- x NL: 41%
- x YT: 33%
- x NT: 32%
- x NU: 34%

QC's CAPE Scores: What's Possible?

If Quebec implemented all the best existing policies across Canada's province and territories, their score would change from 42% (F) to 80% (A). If we graded QC against best existing policies across provinces and territories, their score would still only be 63% (D).

CAPE policy domains: do they all have the same impact?

The 11 policy domains in this assessment form part of a comprehensive and synergistic approach to preventing and reducing different types of alcohol harms. Policies examined fall under provincial or territorial control, and each domain reflects the current evidence and is weighted based on its e-ffectiveness and scope of reach. This results in a ranked order from one (i.e., highest overall impact) through 11 (see next page). However, all the domains are necessary to create a healthier alcohol policy environment. To read more, see Project Methodology.

What QC is doing well: Selected examples

Policy domain 1: Pricing & Taxation

Alcohol-specific tax rates in QC are amongst the highest in Canada and its minimum pricing for malt-based beverages (e.g. beer and some coolers) has automatic indexation.

Policy domain 3: Control System

QC's alcohol regulator, the RACJ, reports to the Ministry of Public Security and although the mandate does not specifically mention public health and safety, it does focus on protection of the public interest, public security and public peace.

Policy domain 4: Impaired Driving Countermeasures

QC has escalating administrative licensing suspensions and escalating interlock programs as a condition of relicensing for federal impaired driving convictions with a blood alcohol content (BAC) of 0.08% or higher.

Policy domain 4: Impaired Driving Countermeasures
Score: 46% (F)

Recommendations

All recommended policies should be developed and implemented without alcohol industry involvement, without incorporating exceptions, and enacted in legislation or regulation where possible.

- x Strengthen graduated licensing program (GLP) with stage 1 minimum of 12 months and implement stage 2 nighttime driving ban and passenger limit. Extend zero tolerance period to all new drivers with less than 5 years' experience and set penalties for all GLP or new driver violations.
- x Enact accessible container laws. Impose increased penalties when presence of alcohol plus another drug is detected.
- x Impose comprehensive mandatory ALS and AVI that escalate according to BAC level and repeat occurrences; record on driver's abstracts for at least 5 years.
- x Impose mandatory escalating long term ALS for third and subsequent federal impaired driving convictions and require interlock program completion as relicensing condition (and based on performance criteria) for all first federal impaired driving convictions.

Policy domain 5: Marketing & Advertising Controls
Score: 55% (D)

Recommendations

All recommended policies should be developed and implemented without alcohol industry involvement, without incorporating exceptions, and enacted in legislation or regulation where possible.

- x Implement restrictions on advertising quantity (e.g. ad bans and volume restrictions) that apply to all advertisers (e.g. government retailers, licensees/third parties) and all media types.
- x Enhance enforcement by extending mandatory pre-screening to all alcohol advertisers (not only manufacturers) and publicly listing violations online with advertiser name and nature of violation.

Policy domain 6: Minimum Legal Age
Score: 13% (F)

Recommendations

All recommended policies should be developed and implemented without alcohol industry involvement, win   i-0.8 (a (a)7.67 (a)7.6 (t)-6 s)-4.3 (p(m)-9.4(n)-0.7 (f)7.9 (o)-9.6 (l)-3.3 (-0.7 (d)-0.8 (i)re)-3 (t)-65 ( )107 (o)-

x   Implement enhanced alcohol labelling as a manufacturer requirement and mandatory onsite health and safety messaging (e.g. signage, posters) in all premises. Labels, signage, and messaging should include a variety of evidence-based warning messages (e.g. cancer risk, standard drinks, national alcohol guidance, calories), be prominently displayed and accompanied by pictorials, rotate across all products, and support consumers in making informed decisions about product use.

Policy domain 8: Liquor Law Enforcement

Score 37% (F)

Recommendations

All recommended policies should be developed and implemented without alcohol industry involvement, without incorporating exceptions, and enacted in legislation or regulation where possible.

x   Apply risk-based licensing and enforcement (RBLE) criteria to off-premise outlet and license holder characteristics to determine risk level for licensing conditions and enforcement schedules; strengthen on-premise RBLE by applying it to license holder characteristics and extending it to include all on-premise establishments and special occasion permits. Conduct compliance checks for all premises at least annually with follow-up for failed compliance within 3 months.

x   Implement mandatory, evidence-based alcohol sale and service training programs with a public health focus for all involved in the sale, service or delivery of alcohol at all premises and licensed events; require recertification at least every 2 years.

Policy domain 9: Screening and Treatment Interventions

Note: Treatment indicators measure existence of services only, not quantity or quality

Score 92% (A+)

Recommendations

All recommended policies should be developed and implemented without alcohol industry involvement, without incorporating exceptions, and enacted in legislation or regulation where possible.

x   Formally adopt the most recent evidence-based national alcohol guidance with an official statement of support.

x   Provide permanent public funding for managed alcohol programs.

Policy domain 10: Alcohol Strategy

Score 66% (C)

Recommendations

All recommended policies should be developed and implemented without alcohol industry involvement, without incorporating exceptions, and enacted in legislation or regulation where possible.

x   Implement a standalone government-endorsed alcohol strategy that includes a wide range of evidence-based public health policies (such as pricing and physical availability) and is developed independently of the alcohol industry, to build on the existing Interdepartmental Action Plan.

x   Allocate dedicated government funding to the strategy with an identified public health leader, an implementation timeline, reoccurring public-facing implementation assessments and updates at least every 5 years.

Policy domain 11: Monitoring & Reporting
Score: 75% (B)

Recommendations

All recommended policies should be developed and implemented without alcohol industry involvement, without incorporating exceptions, and enacted in legislation or regulation where possible.

x   Strengthen systematic and comprehensiioi shr (t)-3 (ekh)2.62 (g)2.6 (e)-3 (x(s)-1.4 f all (an)2.2 (l)7.9 ((s)-1.

Acknowledgments

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