



Reducing Alcohol-Related Harms and Costs in Newfoundland and Labrador:

A Provincial Summary Report

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Overview

The overall objective of this project is to encourage greater uptake of evidence-informed prevention and policy initiatives that reduce alcohol-related harms in Canada. This project documents current alcohol policy initiatives across Canada and draws comparisons across the provinces. The project serves to highlight policy strengths across each of these jurisdictions, provide recommendations on how to improve weaker policy areas and disseminate this up-to-date information to major stakeholders and policymakers in each jurisdiction.

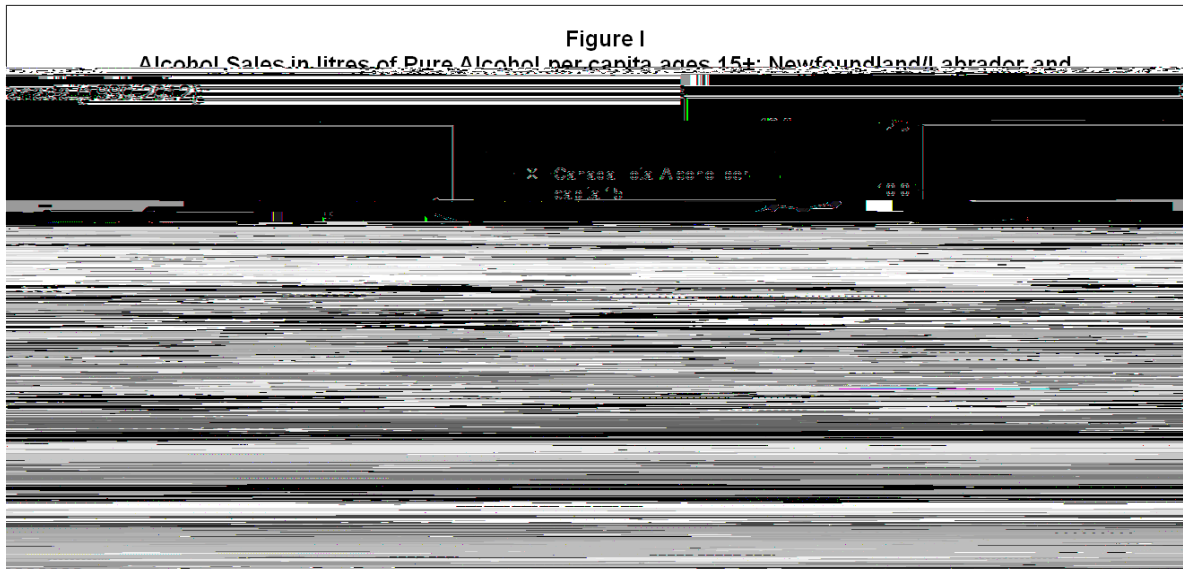
In March of 2013, the main report entitled: *Strategies to Reduce Alcohol-Related Harms and Costs in Canada: A Comparison of Provincial Policies* (Giesbrecht et al., 2013), which documents the findings of this project, was released at an event hosted by the Centre for Addiction and Mental Health. The full report is available at:

http://www.camh.ca/en/research/news_and_publications/reports_and_books/Pages/default.aspx

This provincial summary report serves to provide more detailed results and tailored recommendations for the province of Newfoundland and Labrador. This project seeks to disseminate this information to policy-makers, decision-makers and knowledge users in order to stimulate policy change. The project hopes to inform provincial liquor boards and alcohol regulators on the additional roles they can play in helping to reduce alcohol related harms and costs.

Methods

This project builds on the model implemented by MADD Canada and is based on well established and rigorous systematic reviews on the effectiveness of alcohol prevention measures as well as other studies which take a comparative approach to assessing alcohol policies (Anderson et al., 2009; Babor et al., 2010; Brand et al., 2007; Karlsson & Österberg, 2011). The policy dimensions central to this project were selected based on a review of the literature and best practices and overlap with those identified by the World Health Organization and the Canadian



Recent Developments in Alcohol Policy in Newfoundland and Labrador (since November 2012)

In terms of developments in alcohol policy and practices that have taken place, been announced, or been brought to the team’s attention in Newfoundland since the end of the data collection period of the main report in fall 2012, one matter has been brought to the team’s attention:

Newfoundland and Labrador will be participating in a third cycle of the National Treatment Indicators report for addictions led by the CCSA

Newfoundland and Labrador Specific Results:

In terms of total weighted scores across the country, Newfoundland was the third to lowest-ranked province (although it is important to keep in mind that the national average score was less than 50% of a perfect score; there is much unrealized potential for improvement in every province). Newfoundland demonstrated areas of strength around its management of limitations on the quantity of alcohol advertisements, its intentions to introduce SBIR for the general population as a priority in their provincial strategy, and its tracking of challenges and refusals in on-premise establishments. Figure II shows a comparison between Newfoundland and Labrador’s scores on each of the policy dimensions compared to the national average score for each policy dimension.

The following is a detailed review of the results for Newfoundland and Labrador and includes specific policy recommendations for the province. It should be noted that the policy dimensions listed below are listed in order of their level of effectiveness and population reach i.e. the policies are listed in the order in which they are likely to have the most impact on reducing alcohol related harms and costs.

1. Pricing

Recommendations

input regarding the placement of both on-premise and off-premise outlets, which could be used as a tool to support public health input in alcohol policy decisions. Moreover, Newfoundland and Labrador allows for alcohol sales in the early morning (before 11:00 a.m.) and late at night (past 8:00 PM for off-premise establishments and past 1:00 a.m. for on-premise sales). There is leeway granted for extended hours of alcohol sales from on-premise establishments, which may be authorized during events of municipal, provincial, national or international significance such as sporting events or the East Coast Music Awards.

Recommendations: Newfoundland and Labrador is encouraged to set upper thresholds on a per capita basis for outlet density in order to reduce the number of points of access to alcohol. This may be more challenging for on-premise outlets, but not impossible if municipalities are given power to determine a ceiling on the number of licenses to grant. If Newfoundland and Labrador possessed stronger government retail systems, they could more easily set density limits. Strong citizen input is encouraged on all decisions around opening more outlets, including the expansion of government outlets. Newfoundland and Labrador is also encouraged to regulate hours of operation of both on-premise and off-premise outlets and limit the availability of alcohol in the early hours of the morning or very late at night.

Recommendations: The legal drinking age is 19 in Newfoundland and Labrador. While there is some evidence from Canada (Whitehead et al., 1975) more robust evidence comes from the United States (Wagenaar and Toomey, 2002) that supports the implementation of a higher legal drinking age (such as 21) to help reduce alcohol-related harms, drinking and driving incidents, and to delay the onset of drinking (Babor et al., 2010).

7. Screening, Brief Intervention, and Referral

Promising Practices: Newfoundland and Labrador has identified SBIR for the general population as a priority in their provincial strategy or action plan.

Recommendations: At present, Newfoundland and Labrador has no Screening, Brief Intervention and Referrals initiative in place. It has been shown to be effective in reducing consumption among high-risk drinkers, so, as a first step, Newfoundland and Labrador is encouraged to include SBIR protocols in their provincial policy or plan, and to make SBIR available to the general population as well as specific populations. The province is encouraged to support implementation of SBIR by providing organizations with financial support. Instituting a fee for service code for physicians to use for SBIR is one possibility. Having a position paper by a medical or other credible provincial association or developing provincial guidelines could also support the implementation of SBIR. Provinces are encouraged to make use of the SBIR web-based resource released in November 2012 by the Canadian Centre on Substance Abuse (CCSA), the College of Family Physicians of Canada (CFPC).

8. Server Training and Challenge and Refusal

Promising Practices: Newfoundland and Labrador has a server training program, although it is not mandatory. Newfoundland and Labrador has a policy against serving intoxicated patrons for on-premise and off-premise outlets, as well as an off-premise challenge and refusal program that is evaluated through a secret shopper program. Newfoundland and Labrador also has tracking of challenge and refusals in on-premise establishments.

Areas for improvement: While there is a server training program in Newfoundland and Labrador, it is not a condition of licensing. Server training and challenge and refusals programs in Newfoundland and Labrador do not appear to be based on evaluated training interventions shown to reduce over-service or service to individuals below the legal drinking age.

Recommendations: For on-premise sales, Newfoundland and Labrador is encouraged to implement province wide mandatory server training for staff at all licensed events and venues. It is recommended that the province implement programs that have been shown through evaluation to reduce over-service or service to minors and implement tracking of challenges and refusals. For off-premise sales, Newfoundland and Labrador is encouraged to strengthen its program by having ongoing training of staff and comprehensive challenge criteria that include minors, intoxicated individuals or people suspected of attempting to purchase alcohol for either of these groups. It is recommended that Newfoundland and Labrador continue to track the number and type of challenges and refusals as it is, and continue to evaluate the scope and effectiveness of the program through ‘secret shopper’ interventions.

9. Provincial Alcohol Strategy

Areas for Improvement: Newfoundland and Labrador's current provincial health strategy does not include a coordinated alcohol component, including priorities aimed at reducing the public health impact of illicit alcohol and informally produced alcohol.

Recommendations: Newfoundland and Labrador should have a standalone alcohol strategy; the presence of such clearly signals that socially-responsible alcohol use and sales are important health and social issues worthy of government and NGO attention. Furthermore, Newfoundland and Labrador is encouraged to develop an alcohol strategy that includes population level alcohol

