



# Reducing Alcohol-Related Harms and Costs in Nova Scotia: A Provincial Summary Report

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June, 2013

**Suggested citation:**

Asbridge, M. & Pauley, C. (2013). Reducing Alcohol-Related Harms and Costs in Nova Scotia: A Provincial Summary Report. Halifax: Department of Community Health and Epidemiology, Dalhousie University.

ISBN: 978-0-7703-0041-8

## Reducing Alcohol-Related Harms and Costs in Nova Scotia: A Provincial Summary Report

### 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 weak 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* (Gesbrecht 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](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 Nova Scotia. This project seeks to disseminate this information to policy-makers, decision-makers and knowledge users in order to stimulate policy change. The project also 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

## Figure I

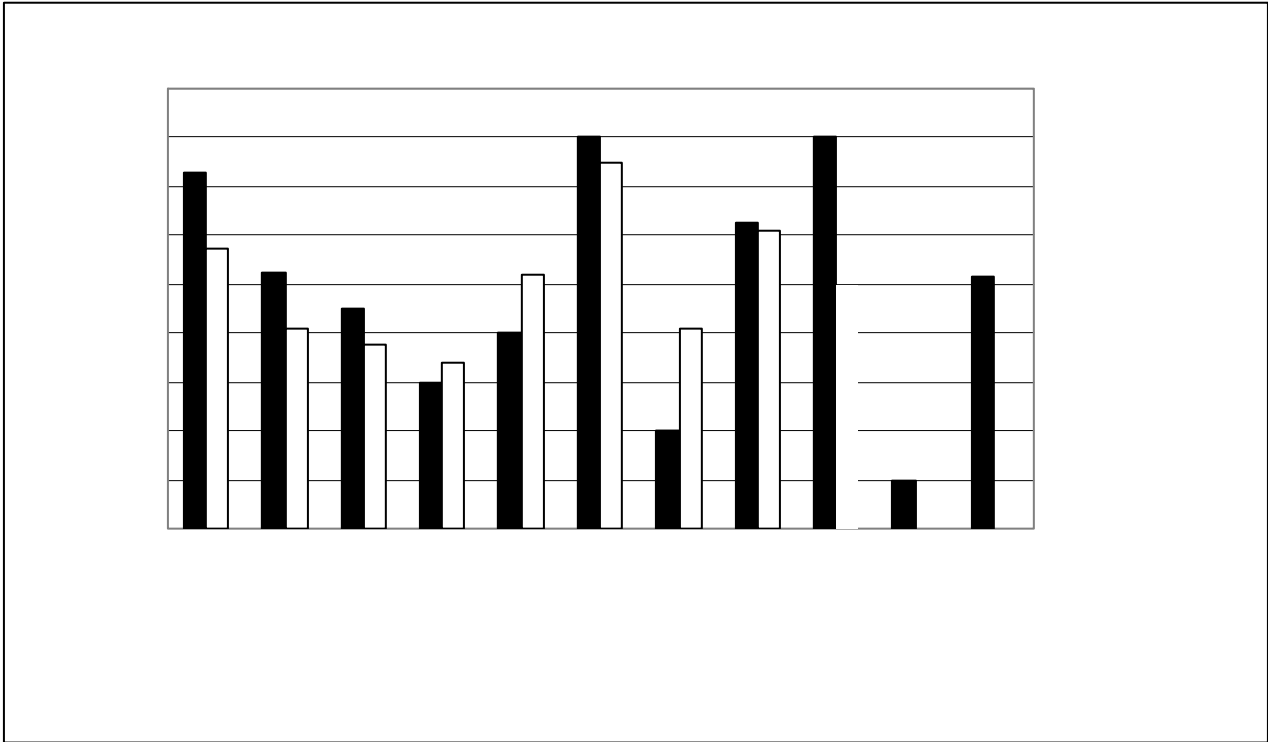
Recent Developments in Alcohol Policy in Nova Scotia (since Nov 1<sup>st</sup> 2012).  
The following is a summary of some of the developments in alcohol policy and practices that have taken place, been announced, or been brought

Ministries of Health and presidents of Canadian universities. The report can be found at:  
[http://studentaffairs.acadiau.ca/tl\\_files/sites/studentaffairs/documents/Acadia%20%20Strang%20Report.pdf](http://studentaffairs.acadiau.ca/tl_files/sites/studentaffairs/documents/Acadia%20%20Strang%20Report.pdf) Acadia University's response, the actions taken thus far, can be found at:

[http://studentaffairs.acadiau.ca/tl\\_files/sites/studentaffairs/documents/Acadia%20Strang%20Response%20August%2030%202012.pdf](http://studentaffairs.acadiau.ca/tl_files/sites/studentaffairs/documents/Acadia%20Strang%20Response%20August%2030%202012.pdf)

x In light of these documents, Acadia is

Figure II



pricing system; manufacturers are permitted to provide free samples to customers provided they are purchased from the licensee. The final cost to the consumer is zero. This undercuts the value of the on-premise minimum pricing policy in Nova Scotia.

Recommended they

### 3. Physical Availability

**Promising Practices:** Nova Scotia allows for citizen input regarding the placement of both on-premise and off-premise outlets. This could be used as a tool to support public health input in alcohol policy decisions. Nova Scotia also has set hours of operation regulated under its respective alcohol control and licensing act for both on-premise and off-premise outlets.

**Areas for Improvement:** Nova Scotia does not provide legislation that restricts the number of licensed establishments in an area based on population density. However, Nova Scotia allows for alcohol sales in the early morning (before 11:00 a.m.) and late at night (past 8:00 p.m. 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 the World Cup Soccer matches or the East Coast Music Awards.

**Recommendations:** Nova Scotia 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



While there is a general ban on using handheld electronic devices, drivers in the graduated licensing program should be prohibited from using any such devices whether handheld or hands free. The pending 0.00% BAC limit should be extended by 3 months and proclaimed in force so that it applies to all drivers under 21 years of age during their first 5 years of driving. As well, it should prohibit all drivers under 21 and all drivers during their first 5 years of driving from being positive for drugs.

Police powers should be broadened to enforce the graduated licensing program, the proposed .00% BAC limit and drug prohibition for new and young drivers. The police should be authorized to demand: identification from supervising drivers; an approved screening device (ASD) test from all drivers and supervisors who are subject to a 0.00% BAC restriction; and a standardized field sobriety test (SFST) from all new and young drivers. Moreover, the police should be authorized to demand these ASD tests and SFSTs, even in the absence of a reasonable suspicion of alcohol or drug consumption.

Administrative sanctions for new and young drivers who violate the graduated licensing program, the 0.00% BAC limit or the drug prohibition should be broadened and strengthened. New and young drivers who have at-fault convictions or commit serious provincial traffic violations should be subject to automatic administrative licensing sanctions. If they violate the 0.00% BAC restriction or the proposed drug prohibition, they should be subject to 30 and 60-day ALSs for first and second infringements respectively.

A 24-hour administrative licence suspension for fitness should be implemented. The short-term administrative licence suspension program should be strengthened and extended to drivers who are reasonably believed to be impaired by drugs or a combination of drugs and alcohol. Drivers with a second or subsequent suspension

Areas for Improvement: There is a lack of emphasis on ~~the~~ risk associated with the use of alcohol on the NSLC's corporate ~~web~~ site's landing page. Nova ~~Site~~ permits manufacturers to donate money for corporate/brand-identified schol

## 7. Screening, Referrals and Brief Intervention

Promising Practices: Screening, Brief Intervention and Referrals (SBIR) is identified as a priority in the document "Changing the Culture Alcohol Use in Nova Scotia" as put forth by the Department of Health Promotion and Prot

For off-premise sales, it is recommended that Nova Scotia continue to track the number and type of challenges and refusals, and continue to evaluate the scope and effectiveness of the program through 'secret shopping' interventions.

## 9. Provincial Alcohol Strategy

**Promising Practices:** Nova Scotia is one of only two provinces (Alberta being the other) to develop alcohol focused provincial strategies. The provincial alcohol strategies include many of the alcohol specific priorities, initiatives and policies identified in the WHO Global Strategy on Alcohol (World Health Organization, 2010).

**Areas for Improvement:** Nova Scotia's provincial strategy does not include priorities aimed at reducing the public health impact of illicit alcohol and informally produced alcohol. A movement towards Ferment on Premises outlets will need to be closely watched, particularly as regards loopholes that may circumvent minimum pricing regulations.

**Recommendations:** The impact of informally produced alcohol (particularly relating to Ferment on Premises outlets) should be included in Nova Scotia's alcohol policy.

## 10. Warning Labels and Signs

**Promising Practices:** There is much unrealised potential in terms of informing consumers of the risks associated with alcohol by implementing packaging labels and point of sale messaging. Nova Scotia has not implemented mandatory warning labels on alcohol containers or packaging. However, Nova Scotia does have an 'internally house' policy requiring that warning signs be posted at least in off-premise outlets. While the quality of warning messages is variable, Nova Scotia did provide some strong health-oriented warning messages with clear and direct messaging, including "Underage drinking causes brain damage- don't buy for minors.", "Before 19 the brain can't take it." and, finally, "Underage drinking can cause permanent brain damage and memory loss."

**Areas for Improvement:** Nova Scotia has not implemented mandatory warning labels on alcohol containers and/or packages, nor made reference to risks of chronic diseases associated with alcohol use in their warning messages.

**Recommendations:** There have been several attempts to introduce warning labels in Canada. The public should be made aware of the risks of alcohol use in the most direct ways possible; a label on the beverage container which conveys a clear health message is one way this may be accomplished. Nova Scotia is encouraged to have mandatory warning signs in both on-premise and off-premise venues. These messages should focus on a range of health related themes, highlighting different alcohol problems. Messages should be clear, visible and concise. For example, vague 'please drink responsibly' messages should be replaced with expanded text offering concrete advice on daily and weekly drinking limits, as well as specific advice on how the drinker can achieve more responsible levels of alcohol consumption. These warning messages and all 'counter-advertising' should be subject to rigorous third party evaluation.

## Recommendations for Nova Scotia

The following is a summary of the recommendations that have been outlined in detail in the above sections. It should be noted that the policy recommendations are listed in the order in which they are most likely to have an impact on reducing alcohol related harms and costs. The potential impact of these policies was assessed based on their scope (population reach) as well as the evidence of effectiveness. These policies are central to a comprehensive approach and jurisdictions are encouraged to implement policies from all three categories.

- f Adjust all prices to keep pace with inflation
- f Do not permit exceptions to minimum prices such as free samples
- f Maintain majority government monopoly (65%) of alcohol retail outlets
- f Place a moratorium on further expansion of Ferment on Premises outlets
- f Strengthen liquor board's social responsibility and control mandates
- f Reduce overemphasis on marketing and retailing at the expense of control functions
- f Continue to involve citizens in decisions regarding the placement of all retail outlets and licensed establishments
- f Do not increase the availability of alcohol at community events
- f Implement the drinking and driving countermeasures recommended by MADD Canada
- f Prohibit the advertisement of price or sales incentives by all alcohol retailers
- f Tighten restrictions on sponsorship, specifically begin by banning alcohol sponsorship at community events or in places minors may frequent
- f Increase the minimum legal drinking age to 21 years of age
- f Implement a fee for service code for physicians that can be used specifically for screening, brief intervention and referral activities
- f Conduct an evaluation of the server training program with reference to programs with established and demonstrated effectiveness
- f Increase collaboration among liquor administrators of the server training programs across provinces
- f Track challenge and refusals in on-premise establishments as well as private retail outlets and make this data available readily for monitoring and surveillance activities
- f While Nova Scotia has a provincial alcohol strategy that emphasizes alcohol specific prevention and intervention initiatives, policies aimed at reducing the public health impact of illicit alcohol and informally produced alcohol should be included. Tight regulation of Ferment on Premises outlets will be key to reducing this public health impact
- f Implement mandatory warning labels on beverage containers with clear and direct health messages
- f Expand the current repertoire of mandatory warning signs in on-premise and off-premise outlets to include clear and direct messages on other health topics such as moderate consumption and alcohol as a modifiable risk factor for chronic disease

Alcohol is no ordinary commodity (Babor et al., 2010; CPHA, 2011) and it is imperative that Nova Scotia continue to implement precautionary alcohol policies in order to reduce the harm and costs associated with alcohol use and to protect the health and safety of Nova Scotians. Refining and implementing the recommendations listed above will require an evidence-based perspective, leadership, commitment to reducing alcohol-related harm and a spirit of collaboration among key stakeholders including various ministries and sectors of government,

NGOs working on health issues, public health advocates and representatives from the private sector.

## Acknowledgements

The authors would like to acknowledge funding from Canadian Institutes of Health Research in support of the project “Reducing Alcohol-Related Problems by Implementing Evidence-based Tools that Translate Research Knowledge into Prevention Practice”, (Principal Investigator: Norman Giesbrecht). We would also like to gratefully acknowledge receipt of data and feedback from Lisa Jacobs, Beth Martin, Rick Perkins, and Jennifer Price Huds. Finally, we thank Mothers Against Drunk Driving (MADD) Canada for permission to use materials collected for their 2012 Provincial and Territorial Review. The in-kind support provided by our organization is gratefully acknowledged. As well, the project team members are thanked for their contributions to this project. The views and opinions expressed in this report are those of the

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