



May 30, 2023

Re: Bylaw to permit public alcohol consumption in Burnaby parks

Dear Mayor Hurley and Council,

As your local Medical Health Officer, I am writing to express my concerns regarding the proposed bylaw to permit alcohol consumption in select Burnaby parks. In this letter, I will outline my concerns for this policy direction and provide recommendations for mitigating the potential harms. If you do plan to move forward with the proposed bylaw, Fraser Health Population and Public Health can offer guidance on developing a monitoring and evaluation plan.

Scientific evidence on alcohol harms to individuals and communities has been steadily growing. We now know that even “moderate” amounts of alcohol can have serious consequences. [Canada’s Guidance on Alcohol and Health](#), a comprehensive review of current knowledge, highlights the strong evidence linking alcohol to at least seven kinds of cancer, cardiovascular disease, liver disease, and injuries. It is important to note that this evidence applies to even those who consume alcohol “moderately,” e.g. those who consume as few as 3 standard sized drinks per week (a standard sized drink is 12 oz (341 ml) of 5% alcohol beer, 5 oz (142 ml) of 12% alcohol wine or 1.5 oz (43 ml) of 40% alcohol spirits).ⁱ

Unfortunately, alcohol consumption in B.C. has risen over the past decade. Recently released data reveals that alcohol causes more health harms than any other substance in B.C., surpassing tobacco and opioids. It is responsible for more hospitalizations, emergency room visits, and paramedic services than any other substance. This trend is worrisome as it places a significant economic burden. Alcohol related issues cost the B.C. public \$2.8 billion annually.ⁱⁱ

Alcohol use in parks can further normalize alcohol use in social settings, encourage underage drinking and lend legitimacy to spaces used by young people for drinking.ⁱⁱⁱ Alcohol is the most commonly used psychoactive substance by youth and is a leading behavioural risk factor for death and social problems among youth and young adults.ⁱ

While social connection and community belonging are vital for health and wellbeing, it is important to recognize that alcohol may not support the social connection goals of everyone in the community. Alcohol in parks may create riskier environments for individuals in recovery from an alcohol use disorder and act as a barrier for families and groups who are uncomfortable being around those who drink alcohol.ⁱⁱⁱ Other local government action, such as increased community programming or improvements to existing amenities and greenspace, can better support social connection and health goals.ⁱⁱⁱ

Implementing evidence-based alcohol policies has a direct impact on consumption levels/patterns and alcohol-related harm in a population.ⁱⁱⁱ Careful consideration can help mitigate the increase in alcohol-related harms associated with unsupervised alcohol consumption on municipal property. If Council decides to proceed with the proposed bylaw, I encourage you to follow the evidence-based guidance and recommendations outlined by the Canadian Institute for Substance Use Research (CISUR):ⁱⁱⁱ

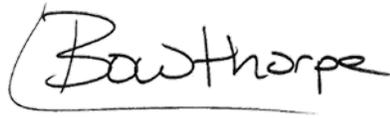
1. Process Recommendations:
 - a. Conduct an initial Health Impact Assessment and Health Equity Analysis
 - b. Seek early and ongoing engagement and feedback across diverse subgroups representing various age groups, income status, and those identified in a Health Impact Assessment and Health Equity Analysis
 - c. Obtain legal counsel on liability implications and municipalities' duty of care
2. Location Recommendations:
 - a. Limit the number of proposed sites and set designated areas of consumption
 - b. Restrict the months/hours of consumption
 - c. Set alcohol consumption limits, and prohibit glass containers to reduce risk of injury from broken containers
 - d. Post clear, extensive, and accessible signage outlining the boundaries of designated sites and hours of consumption in both designated and non-designated areas
3. Implementation Recommendations:
 - a. Pilot and restrict implementation to temporary, time-limited or seasonal approvals, and review annually to ensure due consideration is given before wider implementation
 - b. Expand inspection and enforcement staffing to monitor underage drinking and public intoxication
 - c. Conduct comprehensive monitoring and evaluation with ongoing public reporting of the health-related impacts, and community harms and costs

Furthermore, the location of parks where alcohol consumption is permitted should be carefully considered. For reasons outlined above, park areas where children and youth congregate should be excluded. Parks adjacent or near large bodies of water should also be excluded due to the risk of drowning. Alcohol use was involved in roughly one quarter of accidental drownings in B.C. between 2008 – 2015.^{iv} Additionally, the socio-economic status (SES) of the neighbourhoods surrounding parks should be taken into account. Although individuals from a higher SES may consume as much or more alcohol as compared to persons from a lower SES, individuals from a lower SES are at an up to five times increased risk of dying from an alcohol attributable cause of death compared to those with a higher SES.^v

It is my recommendation that the City of Burnaby does not pursue this policy change. If the proposed bylaw moves forward, I strongly urge City Council to consider my recommendations for mitigating the potential health related harms of alcohol consumption in parks and to ensure a robust monitoring and evaluation plan is in place. Fraser Health Population and Public Health has worked with other municipalities in this regard and can offer some high-level guidance to city staff in developing indicators and/or an evaluation plan.

I would be happy to discuss the proposed bylaw with you in more detail. For your reference, I have included two informational infographics and the CISUR policy brief mentioned above.

Sincerely,



Dr. Lindsay Bowthorpe, MD, CCFP, MPH, FRCPC
Medical Health Officer – Medical Director
Population and Public Health
Fraser Health Authority

i Paradis, C., Butt, P., Shield, K., Poole, N., Wells, S., Naimi, T., Sherk, A., & the Low-Risk Alcohol Drinking Guidelines Scientific Expert Panels. (2023). Canada’s Guidance on Alcohol and Health: Final Report. Ottawa, Ont.: Canadian Centre on Substance Use and Addiction

ii Canadian Substance Use Costs and Harms Scientific Working Group. (2023). Canadian substance use costs and harms 2007–2020. (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.

iii Farrell-Iow, A., Johnston, K., Naimi, T., & Vallance, K. (2021) Policy Brief. Not Just a Walk in the Park: Unsupervised Alcohol Consumption on Municipal Properties in BC. Canadian Institute for Substance Use Research, University of Victoria, Victoria, Canada.

<https://www.uvic.ca/research/centres/cisur/assets/docs/policy-brief-municipal-unsupervised-alcohol-consumption.pdf>

iv BC Coroners Service. Accidental Drowning Deaths 2008-2016 (2017). Office of the Chief Coroner, BC Ministry of Public Safety and Solicitor General. [Age Category \(gov.bc.ca\)](https://www.gov.bc.ca)

v Probst C, Roerecke M, Behrendt S, Rehm J. (2014). Socioeconomic differences in alcohol-attributable mortality compared with all-cause mortality: a systematic review and meta-analysis. Int J Epidemiol. 2014; 43: 1314-1327

Drinking less is better

Canada's Guidance on Alcohol and Health

Research shows that no amount or kind of alcohol is good for your health. It doesn't matter what kind of alcohol it is—wine, beer, cider or spirits.

Drinking alcohol, even a small amount, is damaging to everyone, regardless of age, sex, gender, ethnicity, tolerance for alcohol or lifestyle.

That's why if you drink, it's better to drink less.

Alcohol consumption per week

Drinking alcohol has negative consequences. The more alcohol you drink per week, the more the consequences add up.



Alcohol and youth

Drinking is a leading cause of death and social issues in young people. Intoxication is associated with:

- High risks of injuries
- Aggression and violence
- Dating violence
- Worsening academic performance

Youth under the legal drinking age should delay drinking for as long as possible.

Aim to drink less

Drinking less benefits you and others. It reduces your risk of injury and violence, and many health problems that can shorten life.

Here is a good way to do it

Count how many drinks you have in a week.



Set a weekly drinking target. If you're going to drink, **make sure you don't exceed 2 drinks on any day.**

It's time to pick a new target

What will your weekly drinking target be?



Tips to help you stay on target

- Stick to the limits you've set for yourself.
- Drink slowly.
- Drink lots of water.
- For every drink of alcohol, have one non-alcoholic drink.
- Choose alcohol-free or low-alcohol beverages.
- Eat before and while you're drinking.
- Have alcohol-free weeks or do alcohol-free activities.

Good to know

You can reduce your drinking in steps! Every drink counts: any reduction in alcohol use has benefits.



ALCOHOL

KNOWING THE IMPACTS

ALCOHOL AND HEALTH

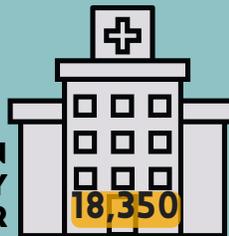


CANCER (LIVER, MOUTH, BREAST, THROAT, AND OTHERS), CARDIOVASCULAR DISEASE, CIRRHOSIS



Prenatal and early exposure to alcohol can have life long developmental impacts.

HOSPITALIZATIONS IN B.C. CAUSED BY ALCOHOL/YEAR



8 Canadians died per day in hospital from conditions entirely caused by alcohol (2019)

STATISTICS

77% OF BRITISH COLUMBIANS CONSUMED ALCOHOL IN 2019-2020

HEAVY DRINKERS* IN B.C.



17%

\$2.8 BILLION annual health care, criminal justice and lost productivity costs in B.C.

*Males who have 5+ drinks or women who have 4+ drinks on one occasion, at least once a month in the past year.

YOUTH AND DRINKING



Mean age of first use in B.C.

44%

OF B.C. STUDENTS GRADES 7-12 HAVE TRIED ALCOHOL (2018)

Starting **YOUNG**, drinking **HEAVILY** and **FREQUENTLY** all increase risk of: depression, suicide attempts, serious injury and doing poorly at school.



COVID-19 IMPACT



IN 2021, NEARLY 25% OF PEOPLE IN B.C. INCREASED THEIR DRINKING

Expanded access: (home delivery, public spaces, extended hours, etc.)



POTENTIAL FOR INCREASED HARMS & NORMALIZATION OF ALCOHOL USE

WHAT CAN MY COMMUNITY DO?

- PROMOTE CANADA'S GUIDANCE ON ALCOHOL AND HEALTH
- PROMOTE SAFER DRINKING ENVIRONMENTS
- CREATE MUNICIPAL ALCOHOL POLICIES

Address the **social determinants of health** in your community to support populations **disproportionally affected** by alcohol-related harms.

ALCOHOL: WHAT CAN MY COMMUNITY DO?

PROMOTE CANADA'S GUIDANCE ON ALCOHOL AND HEALTH

ONE DRINK MEANS

Beer/Cider/Cooler



341 ml (12oz)
5% alcohol

Wine



142 ml (5oz)
12% alcohol

Distilled Alcohol



43 ml (1.5oz)
40% alcohol

THE MORE ALCOHOL YOU DRINK PER WEEK, THE MORE THE HEALTH CONSEQUENCES ADD UP

2 drinks or less → **LOW RISK**

Between 3 and 6 drinks → **MEDIUM RISK**

7 drinks or more → **INCREASINGLY HIGH RISK**

DO NOT DRINK WHEN PREGNANT, DRIVING OR USING ANY OTHER DRUG



PROTECT YOUTH AND VULNERABLE POPULATIONS

Restrict alcohol advertising and sponsorship at municipally owned or managed facilities

Reduce availability through zoning and licensing (location proximity to schools/parks, hours of business operation, enforcement)



Increase access to community programming and wellness activities for youth

CREATE MUNICIPAL ALCOHOL POLICIES

What:

- Provides clear guidelines for where alcohol use is prohibited and permitted in municipally owned or managed settings and events (rec centres, parks, sports arenas, etc.)
- Includes requirements for server training, insurance for event operators, signage and penalties for violations

Why:

- Promotes a culture of moderation
- Helps to reduce the risk of alcohol-related harms (reduced under age drinking, extreme intoxication and impaired driving)

FOR MORE HELP, READ THE **LOCAL GOVERNMENT GUIDE TO CREATING ALCOHOL POLICY.**



CREATE SAFER DRINKING ENVIRONMENTS

Establish and enforce public nuisance and noise bylaws to address disorderly behaviour.



Have ample garbage/recycling to avoid littering and injury from glass.

Implement fees through licensing bylaws that can then be redirected to programs supporting prevention and harm reduction around alcohol.

Provide alcohol-free events/options whenever possible.



NOT JUST A WALK IN THE PARK: UNSUPERVISED ALCOHOL CONSUMPTION ON MUNICIPAL PROPERTIES IN BC



University
of Victoria

Canadian Institute
for Substance
Use Research



BRITISH
COLUMBIA

Evidence-based, public health considerations for local governments to support healthy, vibrant communities

PURPOSE

This guide is designed to provide an evidence-based, public-health perspective to support local government decision-making around unsupervised public alcohol consumption on municipal properties such as parks, beaches, and city plazas. It outlines key areas for consideration with a focus on health equity and creating and maintaining healthy, vibrant, and accessible outdoor community spaces.

Specifically, this resource provides:

- Introduction to the issue of unsupervised alcohol consumption on public properties in BC **(P2)**
- Current context of alcohol consumption and related harms and costs in BC **(P2)**
- Health-equity considerations and public health risks of unsupervised alcohol consumption on public property **(P3)**
- Related operational impact, and monitoring, enforcement, and liability considerations for municipalities **(P5)**
- Guidance on risk mitigation and harm reduction strategies for public properties where unsupervised alcohol is or may be permitted **(P6)**

For more detailed information on this topic, please refer to the full version of this resource on the Canadian Institute for Substance Use Research (CISUR) website: www.uvic.ca/research/centres/cisur

SUMMARY OF GUIDANCE FOR LOCAL GOVERNMENTS

Unlike licensed establishments such as restaurants and pubs, which have regulated oversight of alcohol consumed on premises, unsupervised alcohol consumption on public properties carries a unique set of public health and safety risks. On balance, the evidence suggests that such policy changes will increase harms within communities and should therefore not be implemented. If local governments choose to proceed, this policy change warrants careful consideration and ongoing review. The guidance below offers strategies for mitigating the associated increase in alcohol-related harms. Specifically, local governments are encouraged to:

- **Conduct an initial Health Impact Assessment and Health Equity Analysis**
- **Seek early and ongoing public engagement and feedback across diverse subgroups**
- **Obtain formal legal counsel on liability implications and municipalities' duty of care**
- **Limit the number of proposed sites, set designated areas, and restrict hours of consumption**
- **Avoid permanent bylaw changes, review annually, and implement relevant companion bylaws**
- **Allocate sufficient budgetary funds to address related increase in operational costs**
- **Expand inspection and enforcement staffing and revoke authorizations for problematic sites**
- **Set alcohol consumption/possession limits, implement meal requirements, and prohibit glass containers**
- **Post clear, extensive, and accessible signage at designated and non-designated areas**
- **Encourage purchase of alcohol from nearby on-trade restaurants, pubs, or food trucks**
- **Conduct comprehensive monitoring and evaluation with ongoing public reporting**
- **Address specific COVID-19 and alcohol considerations related to physical distancing**

BACKGROUND

In response to the social and economic impact of the COVID-19 pandemic, municipal governments in BC have been exploring strategies to support local businesses and facilitate social connection. One option considered by some municipalities is to allow alcohol consumption on publicly owned properties such as parks, beaches, and city plazas, and some have chosen to pursue this. However, this approach carries significant public health and safety risks, may add costs to governments, and may divert sales away from regulated licensed establishments including restaurants and pubs. These decisions therefore warrant careful consideration. Furthermore, this approach may not support the social connection goals of everyone in the community, as not everyone welcomes increased opportunities for alcohol consumption.

Most jurisdictions in Canada and within BC do not permit alcohol consumption on public properties. While BC municipalities have the regulatory authority to permit drinking in certain public spaces, none had chosen to do so prior to the emergence of COVID-19. Our hope is that this guide will help local decisionmakers include public health evidence when considering whether to allow alcohol consumption on public properties or when reflecting on such policy changes that may have already been implemented. Informed, evidence-based decision making that supports the health, wellbeing, and vibrancy of all members of our communities and is an imperative for preventing and minimizing harms that could impact communities well beyond the end of COVID-19 pandemic.

A more in-depth exploration of some of the more commonly cited rationales for allowing drinking in public spaces is available in the full report and related infographic series.

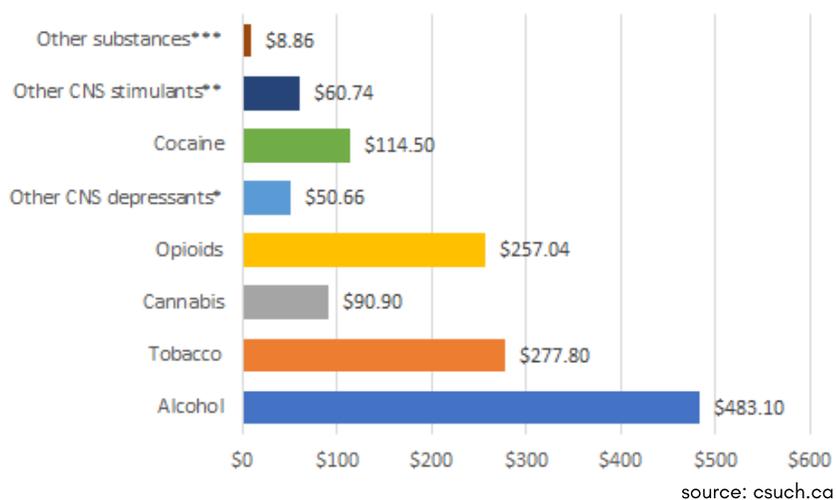
ALCOHOL USE IN BC AND RELATED HARMS AND COSTS

As local governments consider changes to alcohol policy, it is important to have a complete and current picture of the impact that alcohol has on the lives of British Columbians. While many people consume alcohol in lower-risk ways, alcohol consumption remains a significant public health concern in BC.

The rates of alcohol consumed in British Columbia are higher than the national average and have been steadily increasing since 2013[1]. COVID-19 has further affected alcohol consumption patterns and there has been an overall increase in consumption in BC[2] since the start of the pandemic. The trend of increasing consumption is concerning for several reasons, but particularly because as population levels of alcohol consumption increase, so too do the associated harms and costs[3]. Alcohol is a causal factor in more than 200 chronic disease and acute injury conditions[4] and was responsible for an estimated 19,172 hospitalizations and 2,380 deaths in BC in 2017[1]. These harms impact the lives not only of the drinkers, but also their families, friends, workplaces, and communities.

The economic costs of alcohol consumption in BC are also substantial. In 2017, alcohol use cost British Columbians an estimated \$2.38 billion, surpassing tobacco as the costliest substance. There were an estimated \$838 million in direct health care costs related to alcohol, \$989.7 million in related lost productivity costs, and \$311.4 million in criminal justice costs[5], a portion of which directly impacts budgets at the municipal level. Alcohol-related costs are expected to rise with the increase in alcohol consumption from the COVID-19 pandemic.

Per capita substance-attributable costs in BC, 2017



RISK OF UNSUPERVISED ALCOHOL CONSUMPTION ON PUBLIC PROPERTIES

PUBLIC HEALTH AND HEALTH EQUITY CONSIDERATIONS

Given the substantial burden of alcohol use globally, significant effort has gone into looking for ways to reduce the harms and there is a substantial body of international evidence available. The evidence shows that the most cost-effective, high-impact way to prevent and reduce the negative consequences of alcohol consumption in a population is through implementation of evidence-based alcohol policies. Known as the ‘best buys’[6], these include minimum unit pricing and taxation measures, limitations on the retail availability of and access to alcohol, minimum legal drinking age, marketing and advertising controls, and impaired driving countermeasures[4,7].



The presence or absence of strong alcohol policies have a direct impact on consumption levels/patterns and alcohol-related harm in a population. In addition, policy decisions that impact alcohol use at a community level also come with important health equity considerations. In this particular instance, it is important to consider that the health outcomes of certain groups may be unfairly and unjustly impacted by initiatives allowing alcohol consumption in public spaces because of the compounding health effects of alcohol with other factors such as income, social status, race, gender, education or other socially determined circumstances[8].

Increased number of places to drink alcohol, increased harm

Having a high density of outlets where alcohol can be purchased such as liquor stores, restaurants, and bars has a negative impact on overall community health[9,10,11]. A greater concentration not only of outlets where alcohol is sold but also places where alcohol consumption may occur increases both community-level harms such as noise, nuisance, impaired driving and vandalism, and individual-level harms such as injury, violence, poor mental health, and acute and chronic diseases [12-13]. **Allowing alcohol consumption on municipal properties will increase the number and density of places where alcohol can be consumed and thereby increase the overall burden of harm to the community.**

Increased secondhand harms of alcohol

Alcohol consumption can often result in harm beyond what is experienced by the drinker themselves. Known as the “secondhand” impacts of alcohol, other people’s drinking can affect not only individual victims but also families, workplaces, and the broader community[14,15,16]. A large proportion of secondhand harms from alcohol occur in public places because there are typically a higher number of people around who have been drinking; women and younger adults often bear the brunt of alcohol’s harm to others[17, 18]. People with lower socioeconomic status (SES) also experience higher levels of alcohol-related harms, including secondhand harms, even though they are less likely to drink and consume less alcohol overall[19]. **Allowing alcohol consumption on municipal properties will increase secondhand harms of alcohol in the community including assault, gender-based violence and other forms of violent crime; reduced ability to enjoy shared public spaces; acute injuries (eg. from broken glass containers); and vandalized park amenities.**

Decreased access to safer shared greenspaces



Safe, enjoyable, high quality greenspaces are an important community asset for people of all ages[20-21], and many municipalities are working to protect and increase the number, quality, and access to these types of amenities. People visit parks and beaches to gain the benefits of connecting with nature. Ensuring these spaces and the people who frequent them are protected from commercial interests and negative influences supports health and wellbeing, and provides people with spaces to relax, recharge and grow. **Allowing alcohol consumption on public properties may deter the use of these spaces by those who feel uncomfortable being around groups drinking alcohol, such as families with children, people who choose not to drink or those who have experienced harm from other's drinking.**

Decreased inclusivity and equitable access to shared public greenspaces

Neighbourhoods with lower SES typically have less access to safe and enjoyable outdoor spaces due to the lower quality, number, and accessibility of the spaces[22-23]. There is growing evidence that the health benefits of having access to greenspaces may be strongest among the lowest SES groups[24], making access to these spaces even more important from an equity perspective. While alcohol harm-reduction initiatives that encompass highly stigmatized populations, including those in lower SES neighbourhoods, are an important part of alcohol policy and should be included in discussions around allowing drinking in public outdoor spaces[25], a population-level approach to permitting alcohol consumption in shared greenspaces has the potential to cause harm. **As those with lower SES also experience a greater burden of alcohol-related harms[18], allowing alcohol consumption in public spaces or not including these groups in decision-making around drinking in public greenspaces could doubly impact those with lower SES and increase health inequities.**

Increased risk of COVID transmission

Alcohol has been shown to play a role in the transmission of COVID-19, especially in contexts involving larger crowds and social gatherings, as its psychoactive effects weaken attention to physical distancing and safety protocols such as mask-wearing and hand washing[26,27]. **While outdoor social gatherings have a substantially lower risk of increasing COVID-19 transmission, the added element of alcohol use which impairs thinking, judgement, decision-making and behaviour[27], will make it more difficult to ensure adherence to health and safety guidelines.**

Increased risk of underage drinking and normalization of alcohol use

Increased exposure to alcohol use among children and youth has been shown to increase the frequency of drinking among young people and the belief that underage drinking is normal, common and even encouraged[28]. Increased exposure is likely to impact youth alcohol consumption by increasing social access to alcohol, normalizing drinking in public spaces, and legitimizing spaces that underage youth often use for drinking[7]. **Allowing alcohol consumption in parks, beaches and city plazas will further normalize drinking in public spaces and increase social access to alcohol among underage children and youth with limited enforcement infrastructure to prevent underage drinking.**



Increased risk of alcohol-impaired driving

While the number of hospitalizations and fatalities related to alcohol-impaired driving has decreased since strengthened countermeasures were introduced in BC in 2010, it remains a substantial cause of preventable harm[29]. **Drinking in public spaces may increase the risk of alcohol impaired driving, primarily due to the eventual need to travel to another location or return home and may be particularly acute in areas with limited public transportation options.**

Increased risk of drowning at waterfront properties

Alcohol use was involved in roughly one quarter of accidental drownings between 2008 and 2015, with a higher proportion of those deaths occurring among young adults (42%) than middle aged (23%) and older adults (35%) [30,31]. **Unsupervised alcohol consumption on public properties with beach or lakefront access is likely to increase the number of accidental drownings.**

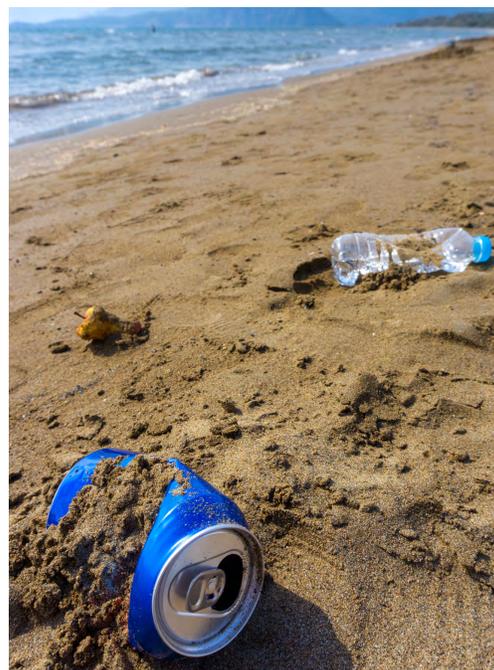
OPERATIONAL AND ECONOMIC CONSIDERATIONS

Authorizing unsupervised alcohol consumption on public properties will require substantial investments of time, energy, money, and staffing to mitigate any potential negative outcomes on the local community. It is worth considering whether there are other local government actions that would better support social connection and health equity goals such as increased community programming or upgrades to existing amenities and greenspaces. The social and economic burden of harmful alcohol use is felt deeply within communities and municipalities can make a positive difference through their local alcohol policies.

Increased operational costs for municipalities

Allowing alcohol consumption on municipal properties is likely to increase costs to local governments. These additional costs may include:

- Additional monitoring, compliance, and enforcement staff/FTEs.
- Increased training needs to ensure staff are prepared to manage increased alcohol-related incidents and those under the influence of alcohol.
- Increased trash collection/recycling (the City of North Vancouver reported an additional \$80,000 for additional trash collection in 2020 related to unsupervised public alcohol consumption in their parks[32])
- Increased cleaning and maintenance of the public spaces where consumption is allowed and adjacent washroom facilities.
- Provision of additional washroom facilities.
- Signage development, installation, and maintenance.
- Increased insurance costs.
- Legal fees associated with increased liability risks.
- Staff time for data collection, analysis, and reporting.



Increased diversion of onsite business for licensed restaurants and pubs

COVID-related restrictions have contributed to a consumer shift towards buying alcohol at retail liquor stores[33]. While it is possible that some consumers may purchase takeout alcohol from restaurants and pubs to consume in public spaces, it is more likely that they will continue to purchase cheaper products at liquor stores instead.

Allowing drinking on public properties is likely to further encourage consumers to purchase alcohol at retail stores at the expense of patronizing licensed restaurants and pubs.

Increased liability risks

Allowing alcohol consumption in municipal spaces could expose the municipality to legal liability risks. Under BC's Occupiers Liability Act (OLA), municipalities have a 'duty of care' that is defined in Section 3 of the Act "that in all the circumstances of the case is reasonable to see that a person, and the person's property, on the premises, and property on the premises of a person, whether or not that person personally enters on the premises, will be reasonably safe in using the premises". For example, a municipality providing playground equipment would have a duty of care to ensure that the equipment meets established safety standards and is inspected regularly to ensure it continues to meet the required standard of care that would be expected. ***In the case of allowing alcohol consumption in parks, city plazas and beaches, it raises the question as to what parameters are sufficient to meet the municipality's "duty of care" to protect everyone who wishes to access public spaces from undue risk of harm.***

Challenges with monitoring and enforcement

Managing alcohol consumption and the interaction of intoxicated persons is critical for public safety[34] and allowing unsupervised alcohol consumption in public spaces is likely to increase local enforcement and compliance needs. Related considerations include:



- Difficulty monitoring expansive open areas, particularly if there are multiple designated consumption spots in a municipality.
- Increased risk of public intoxication and underage drinking.
- Lack of a designated primary operator to fulfill supervisory and oversight functions (unlike restaurants, pubs or other licensed establishments).
- Staffing availability and limitations resulting in an over reliance on voluntary compliance with bylaws[35] and reduced capacity to enforce rules around consumption hours, noise and other public-safety concerns.

GUIDANCE AND RECOMMENDATIONS FOR MITIGATING THE IMPACT OF ALLOWING UNSUPERVISED ALCOHOL CONSUMPTION ON PUBLIC PROPERTIES

As outlined in this guide, the evidence suggests that unsupervised alcohol consumption on public properties will increase public health harms in communities and should therefore not be implemented. Whether local governments choose to proceed with or have already implemented such policy changes, these decisions warrant careful consideration and ongoing review to mitigate associated increases in alcohol-related harms. Specifically, local governments are encouraged to:

Conduct an initial Health Impact Assessment and Health Equity Analysis

Conduct a Health Impact Assessment[36] and Health Equity Analysis[37] to identify unintended health impacts, positive or negative, on diverse population groups and mitigate the risks. Examine which community groups are not being included in the initiative or who might not benefit from it.

Seek early and ongoing public engagement and feedback across diverse subgroups

Have a variety of mechanisms in place to receive public feedback on proposals at each stage of the process including online and in person surveys and focus groups. Ensure that input is received from a broad range of diverse populations and community groups, including those identified in a Health Impact Assessment and Health Equity Analysis as being potentially impacted by this change. Provide evidence-based information about the potential risks and costs of allowing public drinking alongside the anticipated benefits. Account for under-reporting of certain types of incidents (such as sexualized violence).

Obtain formal legal counsel on liability implications and municipalities' duty of care

Seek formal legal counsel to ensure all relevant liability considerations related to alcohol consumption on municipal properties have been considered, particularly in relation to a municipality's "duty of care" under the *Occupiers Liability Act*.

Limit the number of proposed sites, set designated areas, and restrict months/hours of consumption

Restrict the number of public spaces where alcohol can be consumed (i.e., only in designated areas on certain municipal properties). Use findings from the Health Impact Assessment, Health Equity Analysis and public engagement to inform the best locations for these spaces. Consider whether the location is either primarily used by children and youth or vulnerable populations, or close to spaces they use frequently (e.g. schools, daycares, libraries, recreation centres and sports fields). Designate separate areas where alcohol can be consumed and maintain substantial alcohol-free areas in all sites. If designating picnic areas, ensure that there are sufficient tables elsewhere for those not wishing or legally able to consume alcohol. Restrict days and/or hours when alcohol can be consumed (e.g., from noon until dusk) and allow the consumption only during certain months of the year, such as summertime.

Avoid permanent bylaw changes, review annually, implement relevant companion bylaws

Restrict implementation to temporary, time-limited, or seasonal approvals that are revisited regularly; avoid permanent bylaw changes that may be difficult to reverse in future. Use a sunset clause or provision to ensure temporary approvals do not roll into permanent changes without due consideration. Ensure there are robust noise, nuisance, public intoxication, and litter by-laws in place.



Allocate sufficient budgetary funds to address related increase in operational costs

Ensure there is room in the municipal budget to cover related costs that may arise, such as increases in cleaning and maintenance (garbage pick-up, washroom facilities, etc), staffing costs related to bylaw enforcement and training, insurance, legal fees signage and other issues, including collecting and analyzing public feedback.

Expand inspection and enforcement staffing and revoke authorizations for problematic sites

Develop a Bylaw Enforcement Strategy[35] and ensure sufficient funding is allocated for additional bylaw enforcement officers and security staff to monitor underage drinking and public intoxication and keep consumption spaces safer and more enjoyable for all. Remove approvals for public sites with numerous police interactions or public concerns.

Set alcohol consumption limits, implement meal requirements, and prohibit glass containers

Set limits on the amount of alcohol that is allowed in designated spaces (e.g., no more than 2 standard drinks per person of legal drinking age) and include meal requirements in picnic areas (over and above snacks). Restrict use of glass alcohol bottles to prevent injury from broken containers.

Post clear, extensive, and accessible signage in both designated and non-designated areas

Post clear and specific signage and other visual markers to indicate boundaries of designated sites, allowable hours of consumption, and specific regulations related to drinking alcohol on public properties. Signs should also be posted in non-designated areas to clearly demarcate alcohol-free zones. Post notice boards with information about the program and contact information for providing public feedback or complaints.

Encourage purchase of alcohol from nearby on-site licensed restaurants, pubs, or food trucks

Highlight specific kiosks or adjacent on-premise establishments such as restaurants or pubs where alcohol can be purchased along with food to support local hospitality operators, encourage age verification/ID checking of consumers, and decrease overall alcohol consumption on a single occasion.



Conduct comprehensive monitoring and evaluation with ongoing public reporting

Ensure monitoring and evaluation indicators related to community harms and costs (such as public safety/security, liability, trash collection, signage, etc.) are designed as part of program implementation and included in budget estimations. Provide ongoing reports to local leaders and the public on key indicators in advance of policy changes and adjust or terminate programs in response to evaluation outcomes indicating the rationale for the program is increasing community harms and costs.

Address specific COVID-19 and alcohol considerations related to physical distancing

Follow current public health guidelines advising the number of people allowed to congregate in a group to reduce risk of alcohol-influenced COVID-19 transmission. Ensure signage clearly outlines current public health and physical distancing requirements and that contact tracing mechanisms for COVID-19 exposure are available if necessary. Ensure onsite bathroom facilities are adequate to meet current public health guidance and provide detailed signage on latest COVID-19 protocols.

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*Authors listed in alphabetical order.

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