



Evidence Brief on Alcohol and Cannabis Municipal Policy Options

Developed for the City of Burnaby by Fraser Health Population Public Health (FH PPH)
Wellness Program and the local Medical Health Officer

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Recommendations on Alcohol and Cannabis Municipal Policy Options

Effectively navigating the dynamic regulatory landscape surrounding alcohol and cannabis requires a strategic approach. Fraser Health Population Public Health (FH PPH) presents up to date evidence-based recommendations in the accompanying evidence brief. It is well established that policy shifts increasing access to, and availability of alcohol are known to result in increases of alcohol-related harms. FH PPH strongly promotes a balanced approach that prioritizes public health, safety, and community well-being within the sphere of alcohol and cannabis regulation. Furthermore, FH PPH recommends municipalities aim for lowering outlet density, regulate proximity and buffer zones, regulate hours of operations, alter the consumption environment, and regulate marketing and pricing. Our recommendations are as follows:

1. Density

- 1.1 That Municipalities use municipal levers (e.g., zoning, land use, bylaws, licensing, etc.) to establish alcohol and cannabis retail density limits.
- 1.2 Restrict/do not allow any further expansion of alcohol sales in grocery stores or in places where alcohol is not traditionally sold (such as bookstores, barber shops or coffee shops).
- 1.3 That municipalities establish policy that requires a health-equity analysis when approving new alcohol and cannabis outlets (retail and on-premise).

2. Proximity and Buffer Zones

- 2.1 That municipalities establish proximity zones and/or buffer zones between alcohol and cannabis retail outlets to places where youth regularly frequent.
- 2.2 Establish proximity distances between substance-related retail outlets to avoid clustering of outlets, risks of harm related to density and to avert competition between retailers.

3. Hours of Operation

- 3.1 Consider using municipal levers (e.g., bylaws, licensing, municipal planning agreements) to restrict hours/days of operation, at minimum consider reverting to pre-covid hours.
- 3.2 Limit hours of operation at events hosted on municipally owned or managed property and facilities.
- 3.3 Prohibit or restrict extended hours of operation for special events.

4. Altering the Consumption Environment

- 4.1 Implement risk-based licensing and enforcement (e.g., use policing reports and Liquor Control Board inspections/compliance tracking to determine retail and on-premise locations where offences originate and tie to licensing fees or renewals).
- 4.2 Restrict /do not allow any future expansion of alcohol consumption in public spaces such as parks and plazas.

5. Advertising and Marketing

- 5.1 Prohibit alcohol related sponsorship of municipal facilities or municipally sponsored events.

5.2 Prohibit alcohol promotion on municipally owned property around any establishment where alcohol is sold. Use municipal levers to minimize size and prominence of allowed retail signage.

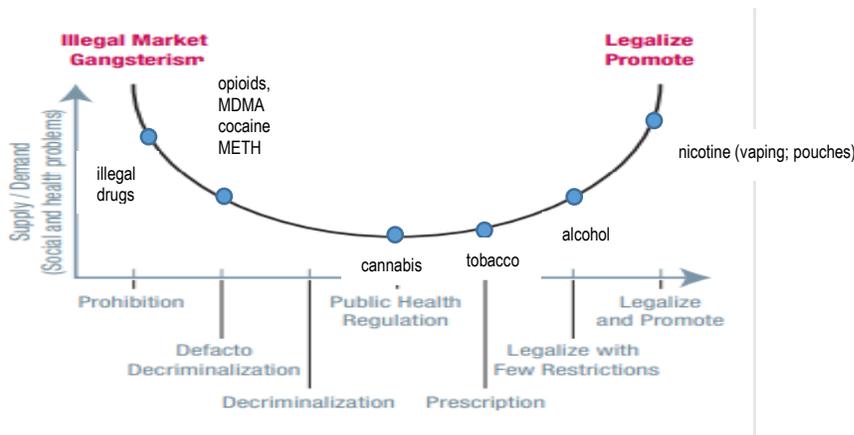
5.3 Institute and publicize a formal complaint process for alcohol promotion that may be in violation of promotion regulations.

6. Minimum Pricing

6.1 Increase the minimum price to \$3.00 for on-premise consumption including specials and sales.

Public Health Approach

This evidence brief will outline established best practices of a public health approach to alcohol and cannabis public policy. A public health approach to reducing substance use harms is based on evidence that can be applied across substances as well as evidence that is substance and context specific. It is an approach that works to reduce risk and maximize health and well-being. A public health approach promotes a legal and strongly regulated approach to substance use as illustrated by the paradox of prohibition where the highest individual and social harms are at the two extremes of a fully illegal market and unregulated free market. The illustration below shows the paradox of prohibition overlaid with current B.C. regulatory approaches to different substances.ⁱ



[Image adapted from Health Officers Council of B.C., Public Health Perspectives for Regulating Psychoactive Substances, 2011](#)

Where possible this brief will discuss alcohol and cannabis together and when required, we address each of them specifically. The primary levers of alcohol and cannabis policy, at the municipal level, are to regulate physical availability through restrictions on hours of operation, place, and density of outlets; changes to the consumption environment, regulate advertising and marketing and implement minimum pricing per standard drink.

Access and Availability

Regulating the physical availability of alcohol reduces the risk of alcohol related harm in multiple ways. It restricts where people can buy alcohol which reduces overall volume consumed and thereby reduces impaired driving, violence, and other harms, and minimizes exposure to children and youth. When children consistently encounter alcohol in their surroundings, it becomes ingrained as a conventional and typical component of their everyday experiences.ⁱⁱ In the 2021-22 Canadian Student Tobacco, Alcohol and Drugs Survey, 64% of Canadian students in grades 7 to 12 reported that it is easy to access alcohol, 42% found it easy to access cannabis.^{iv}

Physical availability refers to:

- Density of retail outlets (e.g., public and private alcohol and cannabis stores) and on-premise licensed liquor establishments (e.g. restaurants and bars; licensed spas, salons etc.)
- Hours and days of operation
- Where outlets can be located (e.g., near schools or other outlets)
- For alcohol, whether takeout and home delivery are permitted.

1. Density

The density of outlets in a jurisdiction is associated with increased consumption and related harm.^v
^{vi} There is strong evidence to limit the density of alcohol and cannabis outlets (both retail and, in the case of alcohol, licensed establishments).^{vii viii ix x}

“A substantial increase in the number of alcohol outlets results in increases in consumption and associated harms. The impact of outlet density on high-risk drinking among younger populations is particularly pronounced, especially when outlets are in close proximity to schools. There is an established body of research demonstrating the relationship between the density of both on-premise establishments and off-premise outlets and alcohol harms. These harms, which include violence and injuries, alcohol-related crashes, instances of suicide and public disturbances, are especially prevalent in neighbourhoods with high outlet density.”^{xi}

[CAPE \(Canadian Alcohol Policy Evaluation\)](#) is an ongoing research project that provides rigorous assessments of provincial implementation of best practice alcohol policies. They have developed a robust group of alcohol specific indicators that can be used to guide policy decisions. For density of alcohol outlets, they recommend a density cap of 2 retail outlets or fewer per 10,000 capita age 15+ including private, government run and ferment-on-premise (Ubrew, Uvin) outlets and a density cap of 15 licensed establishments or fewer per 10,000 capita age 15+. The B.C. average is considerably higher than that, at a rate of 6 off-premise and 19.1 on-premise density rate, underscoring the urgency to actively work towards lowering the density of alcohol outlets in our communities. Of note, even if a municipality is below the density cap outlined by CAPE, initiatives to increase density should be carefully considered, as increased consumption and risk of harm related to alcohol consumption can increase. FH PPH recommends municipalities aim for the lowest density rate possible to mitigate potential harms.

There is evidence to support public retail over private retail. In B.C. both publicly run and privately run retail is allowed for both alcohol and cannabis.

“The evidence indicates that privatization and deregulation of systems lead to a greater liquor outlet density, and this promotes competition that involves alcohol sales during longer hours, with lower pricing, and with less rigorous interventions to prevent sales to minors or intoxicated patrons. In Canadian jurisdictions where

government retail monopolies have been dismantled and partial or full privatization has been introduced, increases in alcohol consumption and harms have been observed. In British Columbia, a rising proportion of liquor stores under private ownership was associated with overall increase in per capita alcohol consumption, and, more concerning, with increased alcohol-attributable deaths and hospital admissions.^{xii}

The research on legal recreational cannabis outlet density as it relates to individual and population harms is limited. Studies are indicating an association with density and related risk factors for youth and young adults.^{xiii xiv xv} One systematic review states that while the link between availability of cannabis and increased harm is still poorly understood, restrictions on the number of legal cannabis retailers is warranted.^{xvi} Evidence that addresses the cumulative impact of multiple types of substance-related retail is lacking, but given there is evidence to support high accessibility and availability is associated with increased substance use, it would be reasonable to consider the density of all types of substance retail in a given neighbourhood or area.^{xvii}

There are also health equity concerns. Higher outlet density and lower median household incomes have been linked to increased likelihood of cannabis-related hospitalization.^{xviii} Two years post non-medical cannabis legalization, lower-income neighborhoods, and areas with a higher proportion of Canadians aged 20-29 had more cannabis stores within a one-kilometer range compared to higher-income neighbourhoods.^{xix} Alcohol, cannabis and tobacco retail outlet density is often higher in neighbourhoods with lower socio-economic status.^{xx}

Recommendations:

- 1.1 The Municipalities use municipal levers (e.g., zoning, land use, bylaws, licensing, etc.) to establish alcohol and cannabis retail density limits.** (Evidence is substantial).
- 1.2 Restrict/do not allow any further expansion of alcohol sales in grocery stores or in places where alcohol is not traditionally sold (such as bookstore, barber shops or coffee shops).** (Evidence is substantial).
- 1.3 That municipalities establish policy that requires a health equity analysis when approving new alcohol and cannabis outlets (retail and on-premise).** (Evidence is substantial).

2. Proximity and Buffer Zones

The placement of substance-related retail outlets has also been used as a policy lever. Proximity and buffer zones are generally discussed as measures to protect children and youth by establishing mandated minimum distances from schools, playgrounds, and parks.

In an extensive review of alcohol, cannabis, tobacco, and vaping literature, we found that the evidence for proximity is mixed. This was, in part, due to significant methodological variation between studies. There was no consensus of the most impactful proximity measure of substance outlet distance to schools (proximity measures of retail outlet to schools in evidence we reviewed spanned from 110m to 1.6km). The strongest evidence of increased risk to youth is where youth are regularly exposed to environments saturated with substance specific store fronts, signage and marketing.^{xxi} This is not necessarily in proximity to schools but in neighbourhoods where youth

live and places attractive to youth (e.g. malls). In this regard, proximity can be seen as a measure of density.

Recommendation:

2.1 That municipalities establish proximity zones and/or buffer zones between alcohol and cannabis retail outlets to places where youth regularly frequent. (Evidence is limited but supportive of taking precautionary approach)

Proximity distances between retail outlets is another policy option that can support limiting density. Evidence is limited; however, it is likely to have support of business owners as it may act to limit competition. Available evidence is largely from tobacco control. In modeling studies, the strategy of requiring a minimum distance between tobacco retailers has been shown to reduce overall tobacco retailer density^{xxii}. A recent New Zealand study found that the implementation of 150 m, 300 m or 450 m distance restrictions between tobacco retailers would result in an average reduction in tobacco availability by 35%, 49% and 58%, respectively.^{xxiii}

Recommendation:

2.2 Establish proximity distances between substance-related retail outlets to avoid clustering of outlets, risks of harm related to density and to avert competition between retailers. (Evidence is limited).

Examples where municipalities have limited density and proximity of alcohol outlets include:

- *“Surrey’s Locational Guideline requires that private liquor stores be located 400m from children’s facilities (e.g., schools, parks, and playgrounds) as well as public libraries and recreation centres. It also requires private liquor stores not be located within 1km of another private liquor store.*
- *Edmonton’s Zoning Bylaw requires a minimum separation distance of 500m between alcohol outlets. In addition, bylaw prohibits alcohol outlets less than 100m from any site being used for community or recreation activities (e.g., community league buildings and facilities, children’s playgrounds and play areas), public or private education, or public lands.*
- *Fredericton’s Zoning Bylaw does not permit alcohol outlets, within 300m of a place of worship, school or in a building also used for residential purposes (with some exceptions).*
- *Calgary’s Land Use Bylaw does not permit liquor stores within 300m of any other liquor stores, nor can they be located within 150m of a school.*
- *Vancouver’s Land Use Development Policies: Liquor Store Guidelines indicate that no liquor store should be located within 150m of a church, park, elementary or secondary school, community centre or neighbourhood house. In addition, Vancouver and Victoria use Business License Bylaws to require alcohol retailers to conduct public consultation on impact and assess density in their applications.*^{xxiv}

3. Hours of Operation

There strong evidence supporting limiting hours and days of operation for alcohol outlets, both retail and on-premise.^{xxv xxvi xxvii} International research shows that, along with high density of retail outlets, extended hours and days of sale are associated with high-risk drinking and alcohol-related problems.^{xxviii}

“A systematic review concluded that extending hours of sale for on-premise outlets was followed by increases in assaults, injuries, or drink-driving offenses while restricting trading hours at on- and off premises outlets was associated with reductions in assaults and hospitalizations. International evidence also indicates that longer hours of sale, particularly late at night, increase the amount of alcohol consumed and the rates of alcohol harms. The literature indicates that acute harms were most likely to increase with increases in hours of sales, conversely, reducing hours of sale is associated with a reduction of heavy drinking and acute harms.”^{xxix}

CAPE recommends that retail outlets do not start before 11:00 am or extend beyond 8:00 pm, are open less than 7 days per week and are open less than the maximum hours of operation per week. They further recommend that on-premise outlets do not start before 11:00 am or extend beyond 1:00 am and that they are open less than the maximum possible hours of operation per week. They recommend not granting any extension for special events.

In BC, on premise hours of operation are 9:00 am to 4:00 am the next day, and for off-premise are 9:00 am to 11:00 pm. These hours are permanently extended from the pre-covid hours for on-premise from 11:00 am to 1:00 am the following day, and for off-premise from 11:00 am to 9:00 pm.^{xxx}

While hours of operation are regulated provincially, municipalities have the ability to further limit hours of operation within their boundaries.

- City Council of Wetaskiwin, Alberta introduced its [Business Hours Bylaw](#). This bylaw sets the hours of operation for alcohol retail stores and alcohol off-sales establishments between 10:00 am and 10:00 pm, seven days per week, including statutory holidays. Alcohol delivery services may only operate between the hours of 10:00 am and 10:30 pm, seven days per week, including statutory holidays.^{xxxi}
- The Town of Wolfville, Nova Scotia has used their Municipal Planning Strategy to reduce hours of operation for licensed establishments. They have restricted the closing time to 1:00 am rather than the provincial regulation of 2:00 am^{xxxii}

Recommendations:

- 3.1 Consider using municipal levers (e.g., bylaws, licensing, municipal planning agreements) to restrict hours/days of operation, at minimum consider reverting to pre-covid hours.** (Evidence is substantial).
- 3.2 Limit hours of operation at events hosted on municipally owned or managed property and facilities.** (Evidence is substantial).
- 3.3 Prohibit or restrict extended hours of operation of special events.** (Evidence is substantial).

4. Altering the Consumption Environment (Alcohol specific)

As outlined in the density section, the community environment can influence substance use decisions and behaviors. The trend to allow public consumption is changing the alcohol environment in B.C. Public consumption of alcohol can increase the normalization of alcohol for children and youth. Allowing alcohol in parks and beaches will increase social access to alcohol among underage children and youth as well as increase risks related to public intoxication, violence and property crimes, impaired driving, underage drinking, the spread of infectious disease, and the enjoyment of public spaces by non-drinkers and vulnerable persons.^{xxxiii}

The retail and on-premise consumption environment can also increase or decrease harms. There is evidence that enforcing the laws governing the service of alcohol and the management of licensed premises and issuing commensurate penalties for violations can contribute to reducing alcohol related harm.^{xxxiv}

“Law enforcement has been shown to be an important component of effective community-based responses to alcohol-related crime and violence, but full effectiveness requires considerable stakeholder engagement, effective leadership, sustained funding, and community support. Targeted approaches based on data that identifies high-risk licensed premises have shown some effectiveness (e.g., collecting information from impaired driving suspects about where they purchased their last drink). In most cities, a small proportion of late-night venues (e.g., 10 to 20%) tend to be linked to most of the drink-driving and violent offences.”^{xxxv}

The STAD (Stockholm Prevents Alcohol and Drug Problems) is a 10-year project led by an action group consisting of members from the county council, the licensing board, police, public health, and bars and restaurant owners. The project included training in responsible beverage service for servers, security staff and owners, and enhanced enforcement by the licensing board and police. The project increased refusal to

intoxicated patrons and decreased violence in the intervention area. Results have been sustained and strengthened over time.^{xxxvi}

Recommendations:

- 4.1 Implement risk-based licensing and enforcement (e.g., use policing reports and Liquor Control Board inspection/compliance tracking to determine retail and on-premise locations where offences originate and tie to licensing feed and renewals).** (Evidence is reasonable).
- 4.2 Restrict/do not allow any future expansion of alcohol consumption in public spaces such as parks and plazas.** (Evidence is substantial).

5. Advertising and Marketing

Alcohol marketing to young people can increase the rates of underage drinking.^{xxxvii} Students who were exposed to advertisements involving alcohol were more likely to immediately consume alcohol, compared to students exposed to non-alcohol advertisements.^{xxxviii} A ban or comprehensive restrictions on alcohol marketing is one of the most effective policies for reducing the harms caused by alcohol.^{xxxix}

Marketing and advertising are regulated by both federal and provincial regulation. Municipalities can further strengthen these protections.

Restrictions on alcohol marketing can include the volume of advertisements, advertisement content, price-based promotions, and placement of advertisements.

Recommendations:

- 5.1 Prohibit alcohol related sponsorship of municipal facilities or municipally sponsored events.**
- 5.2 Prohibit alcohol promotion on municipally owned property around any establishment where alcohol is sold. Use municipal levers to minimize size and prominence of allowed retail signage.**
- 5.3 Institute and publicize a formal complaint process for alcohol promotion that may be in violation of promotion regulations.**

Examples where municipalities have limited advertising include:

- *“Saskatoon Transit Advertising Policy prohibits alcohol advertisements on transit. Advertising in Recreation Facilities Policy restricts alcohol advertising at recreation facilities.*
- *Hamilton’s municipal alcohol policy (MAP) prohibits advertising of alcohol beverage names, brands or manufacturers at events frequented by youth. Halifax’s MAP requires approval of alcohol advertising on municipal property (including transit) and inclusion of messages about consumption of alcohol and options for safe transportation in accordance with Low-Risk Drinking Guidelines. In addition, the policy restricts alcohol ads, promotion of products/brands, or distribution of promotional items on municipal property except by permit or permanent liquor license.*
- *Ottawa’s MAP does not permit marketing practices that encourage increased or immoderate consumption (e.g., oversized drinks, double shots of spirits, drinking contests, alcohol raffles and volume discounts). In addition, no alcohol advertising is permitted on municipal premises frequented by youth (unless Director approval received).*
- *Brampton’s MAP bans alcohol at events where the focus is on youth under 19, minor sports events, and street/block parties.*
- *Caledon’s MAP bans alcohol permits for events for youth, including minor sport events.*
- *Whitehorse’s Indoor Facility Sponsorship Policy prohibits advertising of alcohol at venues frequented by children. In addition, the Purchasing and Sales Policy prohibits sponsorship or advertising by companies whose main business is sale or promotion of alcohol.*
- *Halifax’s Sponsorship Policy requires alcohol sponsorships to comply with the MAP and contain information about responsible drinking.”^{xl}*

6. Minimum Pricing

Increasing the price of alcohol is a highly effective strategy for reducing consumption and alcohol health and social harms.^{xli xlii}

Recommendation:**6.1 Increase the minimum price to \$3.00 for on-premise consumption including specials and sales.** (Evidence is substantial).

- *“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) 1fl oz of spirits having an alcoholic content of 17% or more, served on its own or in a mixed beverage, (ii) 5fl oz of wine having an alcoholic content of 1.5% or more, or (iii) 20fl 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.*
- *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) 1fl oz of spirits having an alcoholic content of 17% or more, served on its own or in a mixed beverage; (b) 5fl oz of wine having an alcoholic content of 1.5% or more; (c) 12fl oz of beer, cider, or a cooler, having an alcoholic content of 1.5% or more.”^{xliii}*

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