

Don't privatize, re-direct LCBO for public health

How fortunate for Philip Preville that he derives such delight in bargain-hunting in Alberta for his premium \$90-a-bottle scotch (*"Hard to Swallow," November 2004*).

How detrimental for the rest of us if the Ontario government agreed to let "the primal joys of consumer culture" rule. The LCBO has no place in the liquor cabinets of the province, Mr. Preville suggests—the government should regulate the industry but let "private retailers push product."

Not if you care about the health and safety of Ontario citizens!

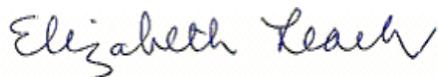
Many of us derive pleasure from drinking alcohol, but the plain reality—brazenly dismissed by Preville as a "hoary argument"—is that alcohol is a drug that imposes a heavy, under-reported burden on public health. According to the World Health Organization (WHO), *global alcohol-related harm is nearly equal to that caused by tobacco, and far greater than for illicit drugs.*¹ Adolescents and young adults are at particular risk.²

In 2000, fully a third of road fatalities in Ontario involved a drinking driver.³ The annual provincial cost of alcohol-related lost productivity and increased health care and enforcement services is estimated at nearly \$2.9 billion.⁴

Why not jettison the LCBO and let private profits drive alcohol sales?

A fully privatized alcohol system would result in more outlets selling alcohol, longer hours of sale, more sales to underage individuals and, critically, and higher overall alcohol consumption,⁵ which generally leads to greater public harm.⁶ In Ontario, more people would suffer from liver cirrhosis, alcohol-related cancers and other chronic diseases. There would be more alcohol-related car crashes, drownings, and falls; more public disorder and domestic violence. *Maintaining public alcohol retail distribution systems with a strong duty of social responsibility is, according to WHO research, one of the most effective ways to minimize alcohol-related harm.*⁷

Regrettably, as Preville rightly notes, the LCBO is now allowed to place far too much emphasis on "glamorizing liquor consumption" at the expense of its duty to promote public health and safety. Ontario does need to re-direct the LCBO. But privatizing it—making serious alcohol problems even worse—to allow the very rich to buy expensive liquor more cheaply? That is, indeed, too hard to swallow.



Elizabeth Leach
Executive Director
Ontario Public Health Association

Endnotes

¹ The World Health Organization recently identified alcohol as one of the world's top ten health risks. World Health Organization (2002), *The World Health Report 2002, Reducing Risks, Promoting Healthy Life*, Geneva, Switzerland: World Health Organization. See p. 82, Figure 4.9: "Global distribution of burden of disease attributable to 20 leading selected risk factors."

Of the 26 risk factors examined in the WHO 2000 Global Burden of Disease study, alcohol ranks as fifth most detrimental, accounting for about the same amount of global burden of disease (4.0%) as fourth-ranked tobacco (4.1%).

World Health Organization (1999) *Global Status Report on Alcohol*. Geneva, Switzerland: World Health Organization.

See also:

Babor, T., Caetano, R., Casswell, S, Edwards, G., Giesbrecht, N., Graham, K., Grube, J., Gruenewald, P., Hill, L., Holder, H., Homel, R., Osterberg, E., Rehm, J., Room, R. and Rossow, R. (2003) *Alcohol, No Ordinary Commodity: Research and Public Policy*, Oxford: Oxford University Press.

² Babor, et al., 2003, *Alcohol, No Ordinary Commodity: Research and Public Policy*, *supra* note 1.

³ Mayhew, D.R., Brown, S.W. and Simpson, H.M. (2002) *The Alcohol-Crash Problem in Canada 2000*, Ottawa, Transport Canada.

⁴ Addiction Research Foundation, *The economic costs of alcohol, tobacco and illicit drug abuse in Ontario: 1992*. For media highlights, visit <http://sano.camh.net/announce/htscost.htm> .

See also:

Single, E., Robson, L., Xie, X. & Rehm, J. (1998). The economic costs of alcohol, tobacco and illicit drugs in Canada, 1992, *Addiction* 93 (7): 991-1006.

⁵ Centre for Addiction and Mental Health, January 16, 2004, *op. cit.*, p. 6.

⁶ See, for example:

Edwards, G., Anderson, P., Babor, T.F., Casswell, S., Ferrence, R., Giesbrecht, N., Godfrey, C., Holder, H.D., Lemmens, P., Makela, K., Midanik, L.T., Norstrom, T., Osterberg, E., Romelsjo, A., Room, R., Simpura, J., & Skog, O.-J. (1994) *Alcohol Policy and the Public Good*, New York, Oxford University Press.

and

Babor, et al., 2003, *supra* note 1.

⁷ Babor, et al., 2003, *supra* note 1.