



TIMISKAMING  
DRUG AND ALCOHOL STRATEGY  
STRATÉGIE CONTRE LES DROGUES ET  
L'ALCOOL DU TIMISKAMING

247 Whitewood Ave, Box 1090  
New Liskeard, Ontario  
POJ 1P0  
Tel: (705) 647-4305  
Fax: (705) 647-5779  
www.tdas.ca  
tdas@timiskaminghu.com

Premier of Ontario

Legislative Building  
Queen's Park  
Toronto, ON M7A 1A1

November 8, 2024

Re: The Need for an Ontario Alcohol Strategy

Sent by email to: [premier@ontario.ca](mailto:premier@ontario.ca)

Dear Premier Ford,

Given the recent expansion of alcohol retail outlets, the Timiskaming Drug and Alcohol Strategy (TDAS) calls for the development of a comprehensive Ontario Alcohol Strategy to address the province's alcohol-related impacts, particularly in Northern Ontario, where disproportionate rates of alcohol-related harms persist (Ontario Agency for Health Protection and Promotion [Public Health Ontario], 2024).

Currently, 27.8% of Ontarians are consuming alcohol at rates that place them at a high risk of experiencing alcohol-related harms including cardiovascular disease and cancer (Nigatu & Hamilton, 2023; Paradis et al., 2023). In Timiskaming, there were 118 hospitalizations entirely attributable to alcohol in 2023, which translates to a higher rate than any Southern Ontario health regions, despite Timiskaming's smaller and more dispersed population (Ontario Agency for Health Protection and Promotion [Public Health Ontario], 2024).

TDAS, in collaboration with over 20 organizations, actively monitors, reports, and advocates for policies and practices aimed at reducing alcohol and substance-related harms locally. Our partners include health, social, mental health and addiction services, community organizations, and individuals with lived experience from across our district in Northeastern Ontario.

While we acknowledge the government's commitment of \$10 million in additional funding over five years to address alcohol-related harms, however, we fear it is not sufficient to offset the misinformation around alcohol and its active promotion by the alcohol and hospitality industries. We strongly believe that a coordinated, evidence-based action plan—such as an

Ontario Alcohol Strategy that engages health and policy experts, public health agencies, community organizations, and those with lived experience—would effectively complement and amplify our efforts.

Implementing a comprehensive alcohol strategy would benefit the government in multiple ways: it would not only be fiscally advantageous but also crucial in fulfilling its mandate to protect the health, safety, and well-being of all Ontarians. Additionally, a well-structured provincial alcohol strategy would establish Ontario as a leader in national alcohol policy and reinforce its commitment to a health-in-all-policies approach.

## 1. Evidence-based Policy

According to the latest estimates, Ontario had an alcohol-net-revenue of \$5.162 billion against a net cost of \$7.109 billion associated with alcohol sales (Naimi et al., 2023). These costs were reflected in health and social services, lost productivity, the criminal justice system, and many other areas. This led to a net deficit of \$1.947 billion, or a loss of \$0.34 per standard drink sold (Naimi et al., 2023).

Analysis of the previous alcohol sales expansion in British Columbia suggests that the current changes will likely aggravate these costs due to increased hospitalization, ED visits, violence, and chronic disease (Giesbrecht & Myran, 2024). In addition, the increased costs associated with alcohol-related harms will not be restricted to the provincial level as a large portion is absorbed by municipalities in the form of social services and policing and passed on to municipal ratepayers.

In response to the growing deficit, a provincial alcohol strategy can support the government to carefully measure alcohol taxes and pricing to regulate harmful consumption, particularly among youth and high-risk drinkers. An evidence-based approach can also be applied to regulate retail density, hours of sales, proximity to sensitive areas, and marketing to control the net costs of alcohol sales.

## 2. Coordinated Responses

Local public health serves as the central hub to preventing and addressing substance use and alcohol-related harms. Nevertheless, Ontario lacks a government-endorsed, coordinated action plan focused on health and social interventions such as chronic disease prevention, addiction treatment and harm reduction, impaired driving countermeasures, alcohol-related violence, and other social tolls.

A provincial alcohol strategy would help optimize and guide the efforts of experts, service providers, and decision makers. Such a strategy can enhance the effectiveness of planning, coordination, and delivery of targeted treatment, harm reduction, and enforcement measures.

### 3. Monitoring and Reporting

Monitoring and reporting alcohol indicators are vital for informed public health planning and effective policymaking. A provincial strategy supported by up-to-date data and information on usage patterns, health and well-being outcomes, and compliance with regulations would enable the government to identify emerging trends, evaluate the impact of existing policies, and proactively address issues. Furthermore, early identification of areas of concern allows for targeted interventions and resource allocation.

While alcohol use is a personal choice, transparent reporting fosters accountability and supports public awareness efforts ensuring consumers are informed about the risks and benefits of alcohol use. Reporting systems informed by evidence and people with lived experience can contribute to an accurate portrayal of the provincial alcohol landscape. For example, the rates of underage or high-risk drinking, alcohol-related hospitalizations, density of alcohol retail outlets, the cost of alcohol-related harms etc., could inform future policy decisions to reduce harm, improve public health, and enhance the effectiveness of substance use policies.

### 4. Education, Awareness, and Prevention

The public health approach to substance use, including alcohol, emphasizes that education and prevention are essential components alongside policy and enforcement measures. Effective communication campaigns highlight the dangers of excessive alcohol consumption, linking it to chronic diseases, mental health, impaired judgement, accidents, and so forth. A coordinated alcohol strategy reduces duplication in health promotion efforts and centralizes research, development, and the implementation of such interventions. Clear and evidence-based information emphasizing the long-term health benefits of avoiding or reducing alcohol use, can help create a healthier environment, foster informed decision-making, and encourage healthier lifestyles.

Upstream prevention efforts such as Planet Youth (Icelandic Prevention Model) are proven to reduce youth substance use and delay the age of first use by addressing risk and protective factors within the community, leisure time, parent, school, and peer group domains. Delaying the age of first use as long as possible is an effective strategy to reduce the harms of alcohol, tobacco, and other substances (Meyers et al., 2023).

## Conclusion

The call for an Ontario Alcohol Strategy has been consistently supported by leading organizations in our district and was most recently reiterated by the Chief Medical Officer of Health in the Annual Report in March 2024 (Government of Ontario, 2024). The TDAS steering committee recognizes the health and social challenges associated with increased alcohol

accessibility and affordability and emphasizes the need to balance these economic policies with broader considerations.

A provincial alcohol strategy would enable the government to regulate retail density, pricing, and marketing while expanding education, prevention, and harm reduction initiatives. By implementing this strategy, the government can proactively reduce alcohol-related harms, address the financial deficits linked to alcohol consumption, and enhance coordination among public health agencies, social services, and community organizations. This action will not only demonstrate Ontario's leadership in public health policy but also reaffirm the government's commitment to safeguarding the health and well-being of all Ontarians.

Sincerely,

---

Erin Cowan

---

Angèle Desormeau

Co-chairs, Timiskaming Drug and Alcohol Strategy.

cc.

Hon. Sylvia Jones - Minister of Health and Deputy Premier  
[Sylvia.Jones@ontario.ca](mailto:Sylvia.Jones@ontario.ca)

Hon. Peter Bethlenfalvy - Minister of Finance  
[Minister.Fin@ontario.ca](mailto:Minister.Fin@ontario.ca)

Hon. Doug Downey - Attorney General of Ontario  
[Doug.Downey@ontario.ca](mailto:Doug.Downey@ontario.ca)

Hon. Prabmeet Singh Sarkaria - Minister of Transportation  
[Minister.Mto@ontario.ca](mailto:Minister.Mto@ontario.ca)

Hon. Michael S. Kerzner - Solicitor General of Ontario  
[Michael.Kerzner@ontario.ca](mailto:Michael.Kerzner@ontario.ca)

Dr. Kieran Moore - Chief Medical Officer of Health and Assistant Deputy Minister  
[CMOH@ontario.ca](mailto:CMOH@ontario.ca)

Hon. Michael Tibollo - Associate Minister of Mental Health and Addictions  
[Michael.Tibollo@ontario.ca](mailto:Michael.Tibollo@ontario.ca)



Hon. Michael Parsa - Minister of Children, Community and Social Services  
[MinisterMCCSS@ontario.ca](mailto:MinisterMCCSS@ontario.ca)

Hon. Greg Rickford - Minister of Indigenous Affairs and Minister of Northern Development  
[Minister.Indigenouaffairs@ontario.ca](mailto:Minister.Indigenouaffairs@ontario.ca)

## About TDAS

Launched in 2022, the Timiskaming Drug and Alcohol Strategy (TDAS) is supported by over 20 local organizations and agencies working together to reduce the impact of substance use. We build collective impact through a common agenda, shared measurement, mutually reinforcing activities, and continuous communications among community partners and the backbone agency.

TDAS operates under the leadership of a multisectoral Steering Committee and is supported by four working groups, which correspond to our four-pillar approach to substance use: Prevention, Harm Reduction, Treatment, and Community Safety.

We recognize the complex nature of substance use and its impacts on individuals, families, and the wider community. To learn more about our progress in the past year and priorities in 2024, please [visit our website](#), or consult our latest [Report to the Community](#).

## References

Giesbrecht, N., & Myran, D. T. (2024). Harms and costs of proposed changes in how alcohol is sold in Ontario. *Canadian Medical Association Journal*, 196(13), E447-E448.  
<https://doi.org/10.1503/cmaj.240069>

Government of Ontario. (2024). *2023 Annual Report of the Chief Medical Officer of Health of Ontario to the Legislative Assembly of Ontario. Balancing act: An all-of-society approach to substance use and harms*. Catalogue No. 301527. King's Printer for Ontario. Accessed from <https://www.ontario.ca/files/2024-04/moh-cmoh-annual-report-2023-en-2024-04-02.pdf>

Meyers, C. A., Mann, M. J., Thorisdottir, I. E., Berry, A., Sigfusson, J., Sigfusdottir, I. D., Eggertsson, G. E., & Kristjansson, A. L. (2023). Examining the impact of a leisure time intervention on organized sports and other activities participation among adolescents: A quasi-randomized study in Franklin County, Kentucky. *Health Education Research*. 38(4), 320–328. <https://doi.org/10.1093/her/cvad016>



Naimi, T., Stockwell, T., Giesbrecht, N., Wettlaufer, A., Vallance, K., Farrell-Low, A., Farkouh, E., Ma, J., Priore, B., Vishnevsky, N., Price, T., Asbridge, M., Gagnon, M., Hynes, G., Shelley, J., Sherk, A., Shield K., Solomon, R., Thomas, G., & Thompson, K. (2023). *Canadian Alcohol Policy Evaluation 3.0: Results from Ontario*. Victoria, BC: Canadian Institute for Substance Use Research, University of Victoria. Access from <https://www.uvic.ca/research/centres/cisur/assets/docs/cape/cape3/on-results-en.pdf>

Nigatu, Y.T., & Hamilton, H.A. (2023). *CAMH Monitor e-Report: Substance Use, Mental Health and Well-Being Among Ontario Adults, 1977-2023*. Toronto, ON: Centre for Addiction and Mental Health. Available at <https://camh.ca/camhmonitor>

Ontario Agency for Health Protection and Promotion (Public Health Ontario). (2024). *Alcohol Harms Snapshot: 2024 Report*. Retrieved from <https://www.publichealthontario.ca/en/Data-and-Analysis/Substance-Use/Alcohol-Harms>

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. Accessed from <https://www.ccsa.ca/sites/default/files/2023-01/Canada%27s%20Guidance%20on%20Alcohol%20and%20Health%20Final%20Report.pdf>