

REGULATING THE AVAILABILITY OF ALCOHOL

What is alcohol availability and how to regulate it?

The availability of alcoholic beverages refers to how accessible or easy it is to obtain alcoholic beverages for an individual, population, or community.

Regulations on the availability of alcohol have been used for a long time to reduce alcohol problems in communities throughout the world. These restrictions may include:

- **RESTRICTIONS ON WHEN** (times/days of the week), and where (bars, restaurants, supermarkets, through the internet) alcohol can be sold, and how many alcohol outlets (per neighborhood/area).
- **RESTRICTIONS ON WHO can buy (or sell) alcohol.**
- **RESTRICTIONS ON TYPES AND STRENGTHS OF BEVERAGES AVAILABLE.**



Comprehensive systems of availability



PROHIBITION

Historically widespread and still enacted in specific jurisdictions and settings.

GOVERNMENT MONOPOLY SYSTEMS

Can incorporate the entire supply chain: production, wholesale and retail, but it is most commonly limited to retail sales systems. Widespread in North America and parts of Europe.

LICENSING SYSTEMS

(most frequent system in the Americas)
A regulated private market, with sellers licensed under a range of conditions. Can vary from tightly controlled to basically a free market.



The broad impact of changes on alcohol availability

- **Increases in the number and locations of alcohol outlets tend to increase consumption and harm.** These harms include alcohol dependence/use disorders, and underage drinking. Higher outlet density is also linked to drink-driving, traffic crashes, hospital admissions, suicide, violent crime, and sexually transmitted diseases.
- When more outlets are added to a community, it reduces the cost of accessing alcohol via lower transport costs/increased convenience. **Lower cost often translates into increased consumption and harm.**
- **Outlets can have more direct impacts** on harm via the gathering of alcohol-intoxicated customers in entertainment precincts.
- Alcohol outlets are systematically distributed along income lines such that **poorer neighborhoods tend to have higher outlet density.** This higher quantity of alcohol outlets is then associated with increased harm.
- The link between on-premise (outlets that allow alcohol use at the point of purchase, such as bars, restaurants, and clubs) outlet density and violence is **strong.** Higher densities of off-premise (outlets that only allow take-away sales like liquor stores, grocery and convenience stores, and warehouses) outlets may also contribute to higher levels of violence.
- There is a clear relationship between allowing extra days of retail trade (usually removing restrictions on Sunday opening) and increased alcohol consumption.



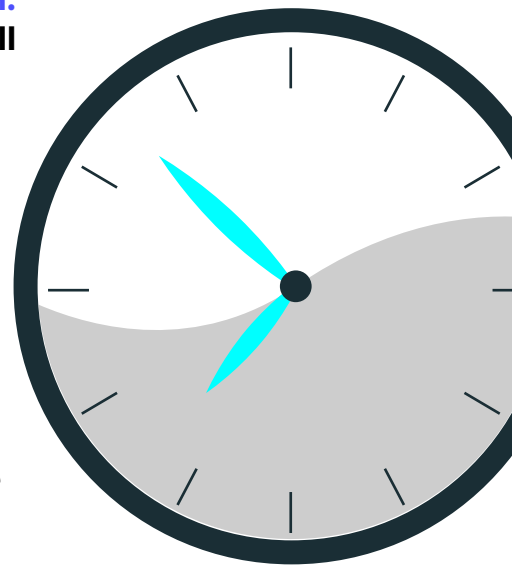
What happens when policy leads to changes in physical availability/retail practices?

- Studies of increased physical availability relating to the privatization of retail markets in the Nordic countries and Canada show increased consumption and alcohol-related problems.
- **Restrictions on alcohol outlet numbers or types** in Russia, Lithuania, and Switzerland all **led to significant reductions in alcohol harm**.
- The complete restriction on alcohol sales in South Africa during the COVID-19 pandemic resulted in a significant reduction in unnatural deaths.
- Deprived areas in Scotland have 40% more places to buy alcohol than places that are more affluent. This matters because Scottish neighborhoods with the most outlets have twice the alcohol-related death rate as those with the fewest.
- Changes in retail practices including home delivery are likely to increase alcohol-related problems. Home deliveries increased exponentially during the COVID-19 pandemic, including with e-commerce apps. A recent study in the United States of America (USA) showed that individuals obtaining alcohol through home delivery increased their alcohol consumption, as well as excessive or heavy episodic drinking.

What happens when policy leads to changes in temporal availability?

Studies of expansion in on-premise trading hours, especially late at night, consistently show increased rates of alcohol harm.

Conversely, **even relatively small reductions in allowable hours appear to reduce violence**; a reduction of allowable hours from 5 am to 3:30 am in Newcastle, Australia, decreased assaults by 33%. When Diadema, Brazil, imposed an 11 pm closing hour on on-premise establishments, homicides had a 44% decline from what would be expected without the law.



Restrictions on off-premise trading hours late at night may also reduce acute harms; interventions in Switzerland and Germany restricting off-premise sales (e.g. to earlier times on Friday nights) led to reductions in hospital admissions for alcohol intoxication, especially for young people.

Other availability restrictions

- There is little research on the effectiveness of limiting or banning sales to specific high-risk individuals. Restrictions on repeat drink drivers in South Dakota, USA, resulted in reduced driving under the influence of alcohol and family violence.
- Big changes in the availability of stronger beverages (e.g. allowing full-strength beer into grocery stores) have clear negative impacts on consumption and harm.
- Programs aimed at encouraging industry to produce and promote lower-strength beverages (e.g., UK Public Health Responsibility Deal) show no evidence of effectiveness.
- Bans on particular products (e.g., large wine casks) may reduce consumption and harm.
- Some evidence that restrictions on sales at sporting events can reduce associated harms.
- When US states increased the minimum legal drinking age to 21 throughout the 1970s and 1980s, there were important reductions in alcohol consumption, crime and traffic crashes.

Key takeaways

- There is a variety of effective restrictions on alcohol availability, including implementing licensing systems to monitor the production, sales, and serving of alcoholic beverages; regulating outlet density and places of sale; hours and days of the sale; retail practices; and increasing the minimum legal drinking age.
- Policies reducing the availability of alcohol are very effective in reducing per-capita consumption and related harm.
- Places with higher outlet density tend to see higher levels of harm, including violence, traffic accidents, injury, sexually transmitted disease, and other negative outcomes.
- Alcohol outlets tend to cluster in lower socioeconomically neighborhoods. The same amount of alcohol in a less-resourced community will do more damage than in a wealthy one.

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