

# Grenada National Alcohol Policy



## CONTENTS

### **1. Purpose**

- 1.1 Policy objectives
- 1.2 Scope
- 1.3 Target population
- 1.4 Expected outcomes

### **2. Background**

- 2.1 What is the public health problem?
- 2.2 Stakeholders
- 2.3 Existing policy
- 2.4 Best practices

### **3. Recommendations**

- 3.1 Proposed amendments to the Liquor Dealers' Licences Law
- 3.2 Additional Recommendations

### **4. Monitoring and Evaluation**

- 4.1 Roles and responsibilities
- 4.2 Measuring effectiveness
- 4.3 Research agenda

## Appendices

## References

## 1. PURPOSE

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The purpose of this policy is to reduce the burden of harms related to alcohol in Grenada and the resulting impact on individuals, families, and communities.

### 1.1 Objectives

The National Policy on Alcohol is intended to promote the health and safety of the general public, through the following objectives:

1. To reduce the incidence of alcohol consumption;
2. To reduce the prevalence of alcohol consumption;
3. To reduce access to and availability of alcoholic beverages among minors;
4. To reduce alcohol-related morbidity and mortality, and
5. To increase awareness of the adverse health outcomes of alcohol use

### 1.2 Scope

This policy applies to all producers, suppliers, consumers and persons directly or indirectly affected by alcohol consumption within the nation of Grenada.

### 1.3 Target Population

While the policy applies to all populations, vulnerable populations are considered explicitly through this policy. These include: pregnant women, children under the age of 18 years, and persons who drink excessively.

### 1.4 Expected Outcomes

1. Delayed age of initiation.
2. Reduced alcohol-related morbidity and mortality.
3. Reduced per capita alcohol consumption.
4. Increased collaboration to address alcohol-related health harms.<sup>1</sup>

## 2. BACKGROUND

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### 2.1 What is the public health problem?

#### *Alcohol and Health*

Alcohol consumption is the third-largest risk factor for disease and disability worldwide. It results in an estimated 2.5 million deaths annually, more deaths than caused by HIV/AIDS or tuberculosis. For males ages 15-59, it is the leading risk factor for death. Alcohol consumption is associated with more than 60 types of diseases and injuries including<sup>2</sup>:

- Neurological disorders, such as epilepsy

- Gastrointestinal diseases such as cirrhosis of the liver
- Cancers, including liver, larynx, and breast cancers
- Intentional injuries, including suicide and interpersonal violence, especially domestic violence
- Unintentional injuries, including motor vehicle and pedestrian accidents
- Cardiovascular diseases, including hypertension and stroke
- Fetal alcohol syndrome and pre-term and birth complications

In addition to affecting physical health, harmful use of alcohol has a large social impact. It can disrupt relationships between friends and family members, lead to interpersonal violence, and increase the risk of road traffic accidents. Alcohol is also associated with child neglect and abuse as well as absenteeism in the workplace.<sup>2</sup>

### *Alcohol Consumption in Grenada*

Alcohol consumption in Grenada is a growing national concern. Approximately 6% of males and 1% of females suffer from alcohol use disorders.<sup>3</sup> According to the World Health Organization (WHO), Grenada's total adult per capita consumption of alcohol (defined as the per capita amount of alcohol consumed in liters of pure alcohol among individuals 15 years of age or older) is 10.35 liters annually, compared to an average of 6.15 liters worldwide and 8.67 in the Americas. As a regional comparison, adult per capita consumption is 6.28 liters in Trinidad and Tobago and 5.44 liters in Saint Vincent and the Grenadines.<sup>2</sup>

### *Adolescent Alcohol Consumption*

Adolescent alcohol consumption is of growing concern across the globe and is very prevalent in Grenada<sup>2</sup>. Adolescent drinking can impair brain function and development, disrupt social relationships, and negatively affect school performance. Early initiation of alcohol is linked to the development of alcohol and drug dependence, antisocial behavior, and depression in adulthood.<sup>4</sup>

The WHO-initiated Global School-based Student Health Survey conducted in Grenada in 2008 released alarming data on the early initiation of alcohol consumption observed in the country. 45.6% of surveyed secondary school students reported having at least one drink in the previous 30 days, and 27.3% reported having ever been drunk in their life.<sup>5</sup>

A particular concern for adolescents is alcohol advertising. Studies consistently show that young people are especially vulnerable to the effects of advertising. Youth who are exposed to alcohol advertising are more likely to have positive attitudes and beliefs toward alcohol.<sup>6</sup> Exposure to alcohol advertising is also linked to the likelihood that an adolescent will initiate consumption of alcohol and an increase in the quantity of alcohol an adolescent consumes.<sup>7</sup>

Appendix A contains more detailed data on alcohol consumption in Grenada.

## **2.2 Stakeholders**

A number of stakeholders in Grenada are affected by alcohol consumption. Relevant interests include:

1. *Government agencies*

- a. *Ministry of Health*: The Ministry of Health is a key stakeholder in the development and implementation of the National Alcohol Policy as a means of protecting the public's health and reducing negative health effects associated with alcohol drinking, especially among minors.
- b. *Ministry of Education*: The Drug Control Secretariat is responsible for administering the nation's drug control programs, including those relating to alcohol. In addition, the Ministry of Education plays a key role in implementing alcohol education programs in primary and secondary schools.

2. *Law enforcement*

- a. *Magistracy Department*: The Magistracy Department works with the Drug Control Secretariat to limit alcohol availability through the application of licensing laws. The two departments can undertake joint actions to review and revise licensing regulation and to analyze how changes might affect levels of alcohol-related harm and economic development.
- b. *Royal Grenada Police Force*: The police force is a stakeholder of the enforcement of legal requirements and restrictions relating to alcohol, including the legal age restriction and prohibition of illegal production.

3. *Industry*

- a. *Grenada Beverage Alcohol Alliance*: Alcohol production is a prominent industry in Grenada. The Grenada Beverage Alcohol Alliance's policy statement supports the responsible distribution and consumption of alcohol products, and appropriate marketing and advertising. Any regulatory changes must take into consideration potential economic effects on the industry.
- b. *Illegal suppliers*: Anecdotal evidence suggests that illicit production of alcoholic beverages is on the rise in Grenada. In developing societies, the presence of illegal suppliers often competes with legitimate producers and can limit the effectiveness of taxation and pricing measures to reduce consumption.<sup>8</sup> In addition, unrecorded alcohol production can complicate accurate data collection and evaluation. While illicit production activity cannot be condoned, its presence must be considered in order to develop effective alcohol policy.
- c. *Distributors*: The Drug Secretariat and the police force will need to work with distributors to ensure that new regulations will be followed.

### **2.3 Existing Laws and Policies**

Grenada does not currently have a comprehensive national alcohol policy. However, key laws regulate certain aspects of alcohol distribution:

1. *Liquor Dealers' Licences Act*, enacted in 1911, makes some provisions to control the availability of alcohol. It requires licences for the sale of alcohol, restricts sales to certain times and days, and prohibits sales to certain populations, including persons under the age of sixteen years.
2. *National Schools Policy on Drugs*, effective for all schools in Grenada, Carriacou, and Petite Martinique, is intended to address student alcohol and drug use. Among its provisions is a prohibition of "the use, sale, and distribution of alcohol and alcoholic beverages... by schools at any school function."<sup>9</sup>

## 2.4 Best Practices

A large body of scientific evidence exists on the most effective policies to reduce alcohol harms.<sup>10</sup> In general, an effective national alcohol policy integrates interventions on the individual, community, and environmental levels to reduce excess consumption and its related harms.<sup>8</sup>

Policies should be comprehensive in scope, in order to be effective. For example, restrictions on sales licences may fail in the presence of an unregulated black market. Industry self-regulation and harm-reduction strategies, such as training of bartenders, are often ineffective in the absence of enforcement. Finally, warning labels, public information, and school education campaigns can alter knowledge and attitudes relating to alcohol use and its harms, but must be combined with other measures cause behavior change.**Error! Bookmark not defined.**

### *Recommendations from the Pan-American Health Organization*

According to the Pan-American Health Organization (PAHO), comprehensive controls on alcohol availability, combined with effective deterrence and enforcement measures, can minimize public health harms relating to alcohol. They recommend a set of best practices, including:

- Pricing and taxation: reduce consumption and generate direct revenue
- Alcohol availability: controlling liquor sales, including location and time, and restricting populations at risk of alcohol-related harms
- Drinking context: making premises licensed to sell alcohol safer, including making owners liable for alcohol-related harms
- Drunk driving: implementing and enforcing countermeasures for drunk driving
- Treatment: delivering interventions and other treatment for alcohol dependence
- Alcohol advertising: restricting advertising, promotion, and sponsorship practices, especially those directed at young people
- Deterrence, monitoring, and enforcement: effective implementation of policies, including community engagement in monitoring and enforcement.<sup>11</sup>

## 3. RECOMMENDATIONS

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The National Policy on Alcohol outlines measures which the Government of Grenada would adopt regarding the sale, distribution and consumption of alcohol, in the following areas:

1. Regulate physical availability of alcohol through restrictions on time, place, and density of alcohol outlets.
2. Regulate alcohol advertising and other marketing of alcohol.

To accomplish the objectives as outlined in Section (1) of this document, the Drug Control Secretariat and Ministry of Health shall advocate for the integration and revision of the Liquor Dealers' Licences Law and the National Schools Drug Policy, as well as increased public education and enforcement.

### **3.1 Proposed amendments to the Liquor Dealers' Licences Law**

To reduce the availability of alcohol to vulnerable populations, the Drug Control Secretariat and Ministry of Health shall advocate for revisions to the Liquor Dealers' Licences Law, including, but not limited to:

#### *1. Provisions relating to licensing:*

- Section 14 outlines current requirements for granting licences. Applicants should be further required to certify that they understand and agree to uphold national alcohol laws.
- Section 16 allows the permanent secretary to refuse a licence until the applicant has satisfied that he or she does not have in his or her possession any spirits in which trade duty is unpaid. The policy should include a mandatory inspection of shops to determine if the sale of untaxed bush rum is occurring.
- Section 19 allows the magistrate to issue temporary licences to any licensed dealer to sell anywhere for up to 4 days for any reason. A restriction should be added to deny temporary licences within 100 yards of school or other youth functions.
- Section 23 requires licensed dealers to display their licence. Licensed dealers should also be required to visibly display the legal drinking age on their premises.

#### *2. Provisions relating to sales:*

- Section 28.1 currently states that no licensed dealer "shall sell or expose for sale any intoxicating liquor, or open or keep open his or her licensed premises, on any night after 9 p.m., or on any morning before 6 a.m." This requirement should be updated to reflect more realistically enforceable hours of sale.
- Section 37 states that no licensed dealer is allowed to sell spirits less than 30 proof. A maximum proof should be considered.
- Section 41 requires labels indicating the quantity of liquor being sold to be affixed to bottles. This requirement should extend to illegally-produced liquor.
- In addition to current requirements:
  - Shops should be required to demarcate a clearly-marked section of the store specifically for alcohol products, separate from non-alcoholic beverages.
  - Restrictions on alcohol sales at school functions, as currently described by the National Schools Drug Policy, should be updated and implemented into law. Specifically:

- The Ministry of Education should forbid the consumption, sale and distribution of alcohol and alcoholic beverages at any school function.
- The Ministry of Education should forbid temporary licences to be allowed within 100 yards of school functions, including sporting events.
- The Ministry of Education should prohibit the sponsorship of school events by alcohol distributors.

### *3. Provisions relating to purchasing and consumption*

- Section 39 currently prohibits the sale of liquor to juveniles under the age of 16, except if the liquor is “sold or delivered or supplied in corked or sealed vessels for consumption off the premises only.”
  - This exemption should be stricken; all sales of any liquor to minors should be prohibited.
  - The legal age of purchasing and consumption should be increased to 18 years of age.
  - Liquor dealers should be required to request photo identification including name and date of birth, or a combination of identification providing the necessary information from persons wishing to purchase alcohol.
  - Persons should be prohibited from purchasing alcohol with the intent of supplying it to minors.

### *4. Provisions relating to advertising*

No existing law or policy in Grenada governs alcohol advertising. Given the relationship between alcohol advertising and consumption, advertisers should engage in responsible marketing practices and refrain from targeting youth. Specifically:

- Television advertisements of alcoholic beverages should be prohibited during primetime hours and during programming aimed at minors below the age of 18.
- Sponsorships of events targeted at youth or where youths are the primary participants (e.g. youth sporting events) should be prohibited.
- Print and outdoor advertising at and around schools and other youth-oriented venues (e.g. sporting stadiums, playgrounds) should be prohibited.
- Alcohol companies should implement security measures to prohibit persons under drinking age from accessing Internet sites promoting their products.
- Advertisers should not design ads intended to appeal to youth, including, but not limited to using cartoon characters or depicting youth drinking.
- Advertisements should bear messages about responsible drinking age and behavior.
- Advertisements should not promote any positive therapeutic, social, or sexual effects of alcohol.
- The law should establish penalties for violating these guidelines as appropriate.

## **3.2 Additional Recommendations**

## *Education*

To meaningfully influence positive behavior change and reduce alcohol consumption among vulnerable populations, the preceding policies should be accompanied by strategies to increase public awareness of alcohol-related harms. Specifically:

- General public information campaigns should focus on:
  - Both immediate and long-term health impacts of alcohol abuse, such as drunk driving accidents, domestic violence, and chronic conditions such as cirrhosis and cancer
  - Negative impacts of alcohol use in vulnerable populations, including adolescents and pregnant women
  - How to practice responsible drinking behaviors, including moderation and harm-reduction strategies, such as the use of designated drivers to limit drunken driving
- Primary and secondary school health education should incorporate alcohol education where appropriate.
- Producers, suppliers, and vendors of alcoholic beverages should be aware of their legal responsibilities and roles in preventing alcohol-related harm.

## *Enforcement*

According to the WHO, the willingness and ability of the state to enforce laws is required for alcohol countermeasures to be effective. To minimize alcohol-related harms, enforcement efforts should focus on:

- Enforcing existing and updated requirements and penalties in the Liquor Dealers' Licences Law
  - Ensuring that all producers and sellers of alcoholic beverages are licensed as appropriate
  - Eliminating sales to individuals under the drinking age
  - Inspections of vendors to reduce sales of illegal products
  - Inspections of production facilities to ensure safety and standardization of alcoholic products
  - Allocating resources so that all individuals have access to a means of providing photo identification for the purchase of alcohol
- Enforcing laws and penalties regarding alcohol-related harms such as drunk driving and domestic violence

## **4. MONITORING AND EVALUATION**

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### **4.1 Roles and Responsibilities**

The Drug Control Secretariat/Ministry of Education will:

- Continue collecting data related to alcohol-related health outcomes
- Provide surveillance data of key indicators to measure policy effectiveness
- Work to increase surveillance of accidental alcohol-related health outcomes



The Ministry of Health will:

- Ensure that policy objectives are clearly communicated to stakeholders
- Advocate for alcohol awareness
- Increase health education campaigns to reduce alcohol consumption

The Magistracy Department will:

- Ensure all dealers sign that they understand and will follow the alcohol laws before being issued a licence or permit
- Advocate for the reduction of the physical availability of alcohol around minors

The Royal Grenada Police Force will:

- Enforce all current and future laws regarding alcohol production, consumption, sales, and advertising
- Allocate efforts and resources to develop new approaches to the aforementioned legislation

Alcohol suppliers will:

- Abide by the rules and regulations of the alcohol policy
- Work collaboratively with the Ministry of Health to reduce alcohol consumption

Alcohol consumers will:

- Refrain from excessive alcohol consumption.
- Refrain from providing alcohol to minors

## **4.2 Measuring effectiveness**

Determining the effectiveness of a national alcohol policy requires monitoring and evaluation of critical policy indicators. Some of these data are currently collected and available as part of existing national surveillance activities. Additional data should be collected in support of this policy.

- Process measures
  - Number of people receiving effective treatment for alcohol abuse
  - Prevalence of advertising near schools
  - Prevalence of alcohol retail establishments near schools
- Alcohol consumption
  - Prevalence of underage drinking
  - Average age of alcohol initiation
  - Per capita consumption
- Health effects and other alcohol-related harms
  - Number of drunk driving offences
  - Morbidity and mortality relating to drunk driving offences
  - Incidence and prevalence of other alcohol-related harms, including chronic conditions

### 4.3 Research agenda

In addition, a comprehensive research agenda can inform the development of effective regulation that considers Grenada's unique cultural, social, economic, and political context. Some questions to study include:

- Understanding the illegal production of alcohol in Grenada
  - Identifying the prevalence and availability
  - Understanding the production and content
  - Evaluating potential negative health outcomes specific to illegal production, such as safety
- Surveillance
  - Describing the need for greater surveillance of alcohol-related morbidity and mortality, including accidental outcomes such as drunk driving
  - Geographic mapping of retail establishments near schools
- Consumption of alcohol among youth
  - What are the consumption habits of youth? Do youth purchase and/or consume commercial or illegally-produced alcohol?
  - What is the effectiveness of warning labels in the purchase of alcohol among youth?

## APPENDICES

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### Appendix A

Summary statistics of alcohol consumption in Grenada and selected countries in the vicinity are provided below for regional comparison.

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	Grenada	Trinidad and Tobago	Saint Vincent and the Grenadines	Saint Lucia
Recorded consumption*	9.85	5.78	4.94	11.35
Unrecorded <sup>§</sup> consumption	0.50	0.50	0.50	0.50
Total consumption	10.35	6.28	5.44	11.85
Beer	3.16	3.10	2.55	3.49
Wine	0.42	0.11	0.12	0.72
Spirits <sup>°</sup>	7.15	2.78	3.16	8.21
Other	0.04	0.04	0.05	0.31

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Note: All values are for individuals 15 years or older and recorded in liters pure alcohol consumed per year; Values are for 2005 unless otherwise noted

\* Average 2003-2005

<sup>§</sup>Refers to alcohol that is not taxed and outside usual governmental control

<sup>°</sup>Includes all distilled alcohol

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## Appendix B

### Adolescent alcohol consumption

	Total
Percentage of students who tried alcohol for the first time in the past 30 days	15.3
Percentage of students who had at least one drink containing alcohol in the past 30 days	35
Percentage of students who reported consuming a drink in their lifetime	70
Age at first drink of alcohol	
< 7	8.3
8-9	9
10-11	22.8
12-13	28.5
14-15	22.9
≥ 16	9.6
Data from the 2013 GSHS	

## References

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<sup>1</sup> Trinidad and Tobago Ministry of Health, Alcohol Policy, reference number He/0050/ALC, 2012.

<sup>2</sup> WHO, *Global Status Report on Alcohol and Health*, 2011.

<sup>3</sup> WHO, *Grenada Country Profile on Alcohol*, 2011.

<sup>4</sup> National Institute on Alcohol Abuse and Alcoholism (2009). *A Developmental Perspective on Underage Alcohol Use*. Alcohol Alert: Number 78. Rockville, MD. U.S. Department of Health & Human Services.

<sup>5</sup> The World Health Organization. *Global school-based student health survey*, 2008.

<sup>6</sup> Anderson, P. (2007) The impact of Alcohol Advertising: ELSA project report on the evidence to strengthen regulation to protect young people. Utrecht: National Foundation for Alcohol Prevention

<sup>7</sup> Anderson P, de Bruijn A, Angus K, Gordon R, Hastings G. Impact of Alcohol Advertising and Media Exposure on Adolescent Alcohol Use: A Systematic Review of Longitudinal Studies. *Alcohol Alcohol*. 2009;44(3):229–43.

<sup>8</sup> World Health Organization, *Alcohol in developing societies: a public health approach*, 2002.

<sup>9</sup> Grenada, National Schools' Policy on Drugs, 2002

<sup>10</sup> Anderson P, Chisholm D, Fuhr DC. Effectiveness and cost-effectiveness of policies and programmes to reduce the harm caused by alcohol. *The Lancet*. 2009;373(9682):2234-46.

<sup>11</sup> Pan American Health Organization, *What you need to know about alcohol policy*