Prince Albert and Area Community Alcohol Strategy

May 1, 2017

TABLE OF CONTENTS

1 INTRODUCTION LETTER 3

2 EXECUTIVE SUMMARY 4

3 BACKGROUND OF PRINCE ALBERT AND AREA AND ALCOHOL 8

3.1 Description of the Geographic Areas Involved 8

3.2 CMPA and the Case for a Prince Albert and Region Alcohol Strategy 8

3.3 The Case for a Prince Albert and Area Alcohol Strategy 10

3.4 Establishment of the Participative Planning Process 13

4 PLANNING PROCESS 13

4.1 Facilitated Planning Approach 13

4.2 Vision - "Where Do We Want to Be?" 14

4.3 Current State – "Where Are We Now?" 15

4.3.1. Public Intoxication and Binge Drinking Data 16

4.3.2. Youth and Underage Drinking 16

4.3.3 Impaired Driving 17

4.3.4 Chronic Alcoholism or Chronic Binge Drinking 17

4.3.5 Additional Data 17

4.3.6. Liquor Compliance and Licensed Establishments Data 18

4.4 Obstacles – "What is Blocking Us from Realizing our Vision?" 21

4.5 Strategies to Move Toward the Vision – "How Do We Get There?" 22

4.6 Priority Setting and Action Planning 23

4.7 Community Consultation Comments & Commitments 24

5 PHASES AND ACTIONS FOR IMPLEMENTATION 25

6 CONCLUDING REMARKS 26

7 APPENDICES 27

Appendix 7.1: Map of Geographic Area Served 27

Appendix 7.2: List of Participants 28

Appendix 7.3: Facilitated Planning Approach 29

Appendix 7.4: Practical Vision – PA & Area Alcohol Strategy 30

Appendix 7.5: Current State Data Sheet – Focus Groups 41

Appendix 7.6: Underlying Obstacles 43

Appendix 7.7: Strategic Directions – What can we do to deal with the obstacles and realize our vision? 55

Appendix 7.8: Community Consultation Input 63

1 INTRODUCTION LETTER

This document captures the beginning of a journey that continues to unfold….

To commence, data from in and around our community was gathered, analyzed and shared. Based upon this data, we then moved into a guided process under the leadership of a trained facilitator who walked a variety of stakeholders through stages of planning.

These stages included visioning sessions focusing on how we hope our relationship with alcohol will look in the future, as well as identifying obstacles we may encounter, and subsequent strategies to keep moving forward.

This document captures much of that process exactly as it unfolded in the group work that occurred at that time.

This process is not about developing an anti-alcohol strategy. The spirit of this document is an invitation to everyone, young or old, to step in if you choose, with either personal or professional contributions in the form of conversation, decisions or actions to create healthier associations with alcohol.

2 EXECUTIVE SUMMARY

The participative planning process provides an opportunity for the community of Prince Albert and Area to share their voice in the establishment of priority strategic directions for the Prince Albert and Area Community Alcohol Strategy, and how the communities want to see the relationships and attitudes toward alcohol differently in Prince Albert and area in 2019.

Over the past two and a half years, data was gathered by Community Mobilization Prince Albert (CMPA), Centre of Responsibility (COR) staff. The COR is a group of experienced human service professionals seconded from their home agencies to work full-time in a collaborative team environment at CMPA's office. A variety of data was collected to assist with understanding the use of alcohol in the area and the impact that it is having on the communities/families/individuals. It was found that Prince Albert and area, has developed a culture of altered tolerance towards alcohol over the years; which has increased the negative impacts within the area and affected everyone within the communities. Local current state data was gathered regarding the human and financial costs associated with:

- impaired driving,
- underage drinking,
- binge drinking,
- chronic alcoholism and
- Liquor law compliance

In 2013, COR developed a ***Call to Action*** to create awareness of the data in regard to the five categories listed above. The Participative Planning Process, which this document is part of, followed to provide opportunity for input, direction, ownership and action. The goal is to create healthier communities where attitudes towards, and the use of alcohol does not negatively impact the health and well-being of families, and the harms to individuals have been reduced.

Representatives from the community, various agencies, and individuals were brought together to participate in focus groups from January to May 2014, in Prince Albert, Saskatchewan. Using a facilitated approach at numerous sessions, the groups began establishing practical vision elements for the Alcohol Strategy by answering the following question:

"Where do we see Prince Albert and area in 5 years, in terms of our alcohol use, and attitude towards it?" *Through this process the focus and plenary groups identified several key vision elements:*

In 2019 in our communities, PA and area, we envision……"

- ***Celebrating and Supporting Alcohol Free Events***
- ***Safe Healthy Families***
- ***Education Resulting in Positive Attitudes and Choices***
- ***Effective, Innovative and Enforceable Legislation***
- ***Access to Spiritual and Cultural Options***
- ***Accessible and Compassionate Community Support Services***
- ***A Safe Healthy Community Where We Are Proud To Live***
- ***Responsible Alcohol Use and Change in Norms***

Full details of the vision elements can be found in Appendix 7.4.

A second round of focus groups identified the obstacles blocking the realization of the vision. These can be found in Appendix 7.6. Once the obstacles were defined, the focus groups developed strategies to enable achievement of the vision.

The identified strategic directions will guide the future planning of Prince Albert and Area's Alcohol Strategy over the next five years.

The identified strategic directions from the process are as follows.

Strategic Direction 1: Moving Towards Creating a Healthy Community

- Alcohol Free Activities
- Improving Outcomes
- Group Support
- Youth Approaches
- Support Parents

Strategic Direction 2: Moving Towards Marketing Responsible Alcohol Consumption

- Healthy Campaign Options
- Develop a Communication Plan
- Implementing Community Change Towards Alcohol

Strategic Direction 3: Moving Towards Facilitated Stakeholder Collaboration

- Implementing an Action Committee
- Engaging Levels of Influence in Community

Strategic Direction 4: Moving Towards Implementing Alcohol Community Mobilization

- Safe, Free and Alcohol Free Activities for Youth
- "Proud To Be Alcohol Free" Programs
- Research Based Treatment
- Intervention, Rehab and Treatment
- Proactive Services
- Early Education Targeting Children and Youth
- Parent/Family Support Programs
- Mentorship

Strategic Direction 5: Moving Towards Implementing Programs to Meet Community Needs that ensures Access and Support

- Promote Alcohol Free Event – "General"
- Research Informed Approaches
- Lobby for Change
- Local Alcohol Controls
- Champion Leadership Accountability
- Enforce Laws with Visible Consequences
- Increase Percentage of Alcohol Revenues That Goes Back to Community Programming

Full details of each of the strategies can be found in Appendix 7.7.

To this point in the process, it is apparent that concern exists regarding the harmful effects of alcohol in our community and area. The data collected, warrants that concern. It is also evident that individuals who have participated to date have enthusiasm and energy to invest in reducing the harms and increasing a culture of moderation regarding safe and social consumption of alcohol.

The work completed to date locally, identifies opportunities for improvement that we can work towards to strengthen our communities

We are asking for your voice, energy and commitment to continue to strive towards meeting this challenge; making Prince Albert and outlying communities, even safer places to live, work and play. Every citizen, youth or adult, is valuable in creating positive change towards the goal of safe and moderate consumption of alcohol.

We can successfully achieve our vision by building the capacity within our communities to address the identified strategies and building solid collaborative partnerships.

Indeed, it will require all of us to embrace this vision and engage in the important conversations, develop ideas, and take actions that will move us toward solutions so that we can look back in 2019 and take pride in our journey and celebrate our many successes.

3 BACKGROUND OF PRINCE ALBERT AND AREA AND ALCOHOL

3.1 Description of the Geographic Areas Involved

Prince Albert is centrally located in the Province of Saskatchewan, and serves a large geographical area consisting of central and northern Saskatchewan including many First Nations and rural communities. The City has a population of approximately 40,000, and with the service area, a population of approximately 78,000.

The City of Prince Albert, being the only major urban centre for the North and significant distances to the east and west, provides opportunities and challenges in delivering a variety of services.

See Appendix 7.1 for Demographic and Geographic information.

3.2 CMPA and the Case for a Prince Albert and Region Alcohol Strategy

In 2011, several government agencies started to collaborate in a strategic alliance called Community Mobilization Prince Albert (CMPA). The goal of the collaboration is to increase community safety and wellness. Community Mobilization Prince Albert is comprised of two parts, Hub and COR. The Centre of Responsibility (COR) is a group of sectoral specialists designated by their respective agencies to collaborate, identify and research systemic issues in our community. These complex issues have developed over time and are not solved overnight. Our goal is to provide the decision makers with insight into community data, identified gaps and opportunities for wellness and safety to be addressed.

The Hub is a model of risk driven intervention that offers services and is comprised of experienced professionals from a variety of agencies with relationships to the broader resources in our community. These professionals meet twice weekly to address situations of acutely elevated risk.

One of the many results of the collaboration is the identification that the use of alcohol and the attitude towards it need to change. CMPA initiated the work towards the present Alcohol Strategy via the COR by publishing a document called “The Case for a Prince Albert and Region Alcohol Strategy”. The data indicates that Prince Albert and area is in crisis in regard to the impact of alcohol. Statistics regarding alcohol misuse show that it continues to impact every aspect of our community.

Our research suggests that several areas must be addressed in an effective strategy:

- Chronic alcoholism
- Binge drinking
- Youth and underage drinking; and youth access to alcohol
- Liquor compliance and licensed establishments
- Impaired driving

It is important for each of these issues to be examined through the lens of:

- education and prevention,
- supports and treatment,
- harm reduction, and
- enforcement

to ensure that we take a comprehensive approach to this complex problem.

Education and Prevention: Examples may include media messages; classroom or youth group initiatives; school policies, parent messages; effects of alcohol on the unborn, legislated mandatory training of the provincial responsible alcohol service program *Serve It Right Saskatchewan* (SIRS). These need to be fact-based messages or conversations focused on reducing the necessary harms.

Supports and Treatment: Building on collaborations to strengthen existing supports and create new supports as alternatives for those at risk and to assist those trying to change. This can include but is not limited to: arts, cultural, spiritual, religious or sporting groups reaching out to those who are unlikely to engage. This can also include an invitation to individuals within our community who have something to offer in the form of mentorship or engagement.

Harm Reduction: Messages and actions that encourage the community to entertain less harmful options to socializing, partying or consumption. Ideas may include sober driver or shuttle options for driving; *Serve It Right Saskatchewan* training; classroom and youth group initiatives.

Enforcement: Working collaboratively with municipal and provincial agencies in establishing effective enforcement strategies, programs and projects. A shared responsibility, commitment to the process, and consistency from all stakeholders will result in positive change for the community and for those in an enforcement role. Examples of enforcement may also include creating or revisiting policies by agencies or organizations regarding consumption.

3.3 The Case for a Prince Albert and Area Alcohol Strategy

A vast majority of people who consume alcohol do so in moderation and in a responsible manner. Despite this, we hear considerable dialogue around alcohol misuse in our communities and surrounding area. We are also aware of the many harms associated with alcohol. We know that reducing the harms that are associated with alcohol creates a safer and healthier community. A culture of moderate responsible consumption holds benefits for us all.

The Canadian Centre on Substance Abuse (CCSA), Childhood and Adolescent Pathways to Substance Use Disorders, refers to the World Health Organization stating that excessive alcohol consumption is related to more than 60 disease conditions. We also know that the effect of overuse of alcohol is related to much more than health, with implications to relationships, violence, child safety and community safety and the corresponding financial burden.

Leyton, M., & Stewart, S. (Eds.). (2014). *Substance abuse in Canada: Childhood and adolescent pathways to substance use disorders.* Ottawa, ON: Canadian Centre on Substance Abuse. Retrieved from http://www.ccsa.ca/Resource%20Library/CCSA-Child-Adolescent-Substance-Use-Disorders-Report-2014-en.pdf

The CCSA in its National Alcohol Strategy Reducing Alcohol-Related Harm in Canada, Towards a Culture of Moderation, recommended four broad areas for action to address alcohol related harm:

- Health promotion prevention and education
- Health impacts and treatment
- Availability of alcohol
- Safer communities

Retrieved from http://www.ccsa.ca/Resource%20Library/ccsa-023876-2007.pdf

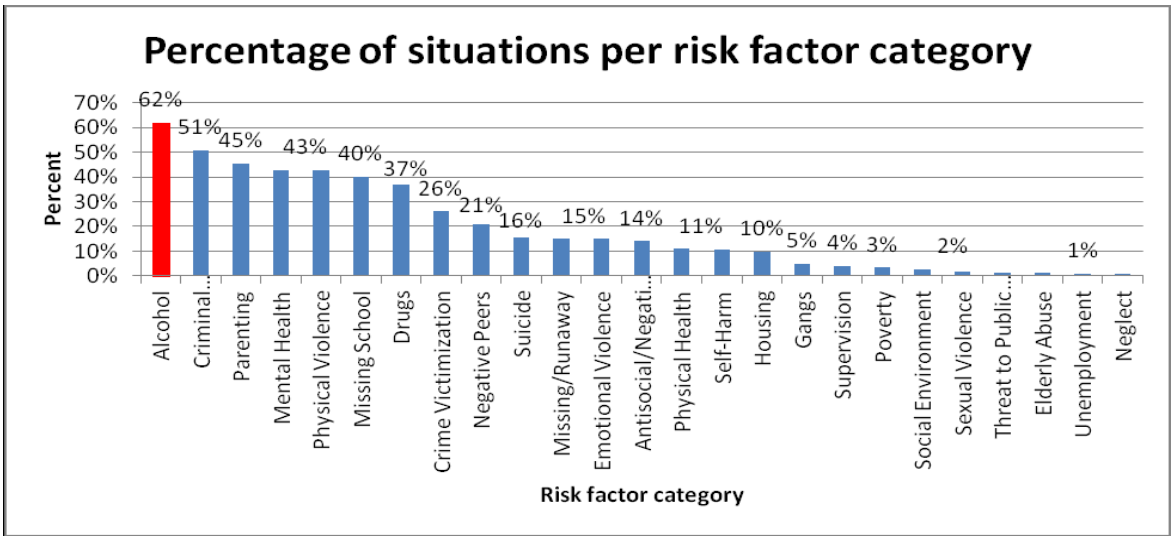
In Prince Albert, the COR compiled statistics on alcohol consumption from multiple sectors that are compelling, compared to provincial and national data. These facts call for all individuals, youth and adult, institutions, and agencies within our community, to ask, ***"What can I do to help build a healthier culture of alcohol use within my community?"***

Sustainable solutions will require all citizens, all sectors, all ages and interests to validate the fact that everyone deserves a safer and healthier home; that is free of the unnecessary harms associated with careless consumption or distribution of alcohol.

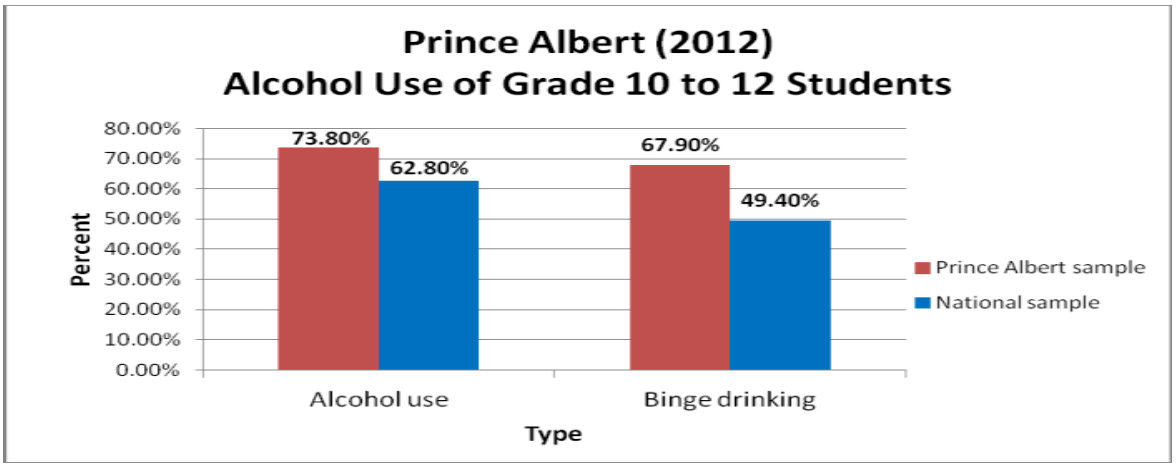
Statistics from Community Mobilization Prince Albert 2012/2013 show that alcohol was the largest risk factor category with **62%** of all Hub discussions.

Since May of 2012, the COR has collated data, analyzed statistics and researched the subject of substance abuse. While doing so, we have taken into consideration, Legislation and Governance, Police, Health Care, Social Services and Education perspectives, and the impact of substance abuse. How can we find sustainable solutions to alcohol misuse? We believe that a combined effort of all stakeholders to create a comprehensive Prince Albert and Region Alcohol Strategy is the answer.
The following facts provide insight into the extent of the alcohol misuse our community is facing.

- Community Mobilization Prince Albert (CMPA) 2012/2013 statistics show that 62% of Hub discussions involve the risk of alcohol abuse.



- Over a three year period from May 2009 - May 2012, the Prince Albert Police Service arrested and lodged **5,595** people solely for public intoxication. This has consumed **$2,548,994** of the Prince Albert Police Service's budget.
- In 2012 alone, there were 1,341 hours (or 55 days) of policing services spent on public intoxication arrests. This translates to a loss of 55 days of policing services which could have been directed on proactive enforcement and crime prevention.
- A 3 year study of the top 25 frequent users of services in Prince Albert has incurred **$3,799,391** in costs across multiple sectors.
- In a recent youth survey, 49.4% of grade 10 students in the Canadian sample had reported binge drinking compared with 67.9% of Prince Albert students in the same grades.



- By age 16, 54% of Prince Albert youth surveyed, reported engaging in binge drinking.
- Over a month study period from June to August 2012, Prince Albert Ministry of Social Services reported 33% of the child welfare intakes (reports) received, directly involved substantiated allegations of alcohol and/or drug abuse.
- From June to August 2012, out of 5,002 emergency room visits at the Victoria Hospital, 458 or **9.2%** were the result of alcohol or drug abuse.
- From 2010 to 2012 inclusively, Prince Albert Police Service showed an average of **37.5%** of violent crime was related to alcohol/drug abuse. The highest percentages of violence-related crime and alcohol/drug abuse and when these incidents were occurring were between **10 p.m. and 4 a.m.** for all three years.
- Prince Albert has 50 liquor licensed establishments. From 2010 to 2012 inclusively, there were **5,205** calls for police service at an approximate cost of **$873,607** for police resources only. The highest calls for service to these establishments included Intoxicated Persons, Evictions, Disturbances, Impaired Drivers, Violence and Property Crime.
- From April 2009 to December 2012, Saskatchewan Liquor and Gaming Authority has issued 9 administrative sanctions (fines or suspensions) against licensed establishments in Prince Albert. There have been no liquor license or business license revocations in the past 5 years.
- Prince Albert spent approximately **$1,249/person** on beverage alcohol in 2011. Moose Jaw residents spent $731/person, a City with a comparable population. The Saskatchewan Provincial average was $703/person on beverage alcohol. Dollar value per person was calculated on population age 15 years and over.
- There have been **22,876** reports of impaired driving occurrences over 3 years in RCMP data within Saskatchewan with 10,462 reports within North District and **1,123** calls for service within Prince Albert over 3 years.

3.4 Establishment of the Participative Planning Process

COR, in consultation with the Prince Albert Parkland Health Region, were able to acquire the assistance of a professional facilitator to aid with the development of a participative, community wide planning process. With the assistance and guidance of Lydia Franc Beaurivage, ICA Certified Technology of Participation Facilitator – a design was developed that would hear the voices of many within the represented communities come together to create a Community Alcohol Strategy for Prince Albert and area.

The process consisted of a planning phase, two rounds of focus groups (visioning and obstacles/strategic direction) and a plenary (representatives from each focus group). A total of 120+ individuals participated in a series of focus groups to create a collective strategy that reflects the communities' desire for a healthier attitude towards the use of alcohol. The multiple focus group sessions were facilitated by Lydia Franc Beaurivage.

A detailed list of participants can be found in Appendix 7.2.

4 PLANNING PROCESS

4.1 Facilitated Planning Approach

The Prince Albert and Area Alcohol Strategy participative planning event used the Facilitated Planning Approach (developed by the Institute of Cultural Affairs) as a framework to move from vision to strategies. In this framework there are five key questions:

1. ***Where do we want to be? (The vision for the future)***
2. ***Where are we now? (Considering current state data and services)***
3. ***What is blocking us from achieving our vision?***
4. ***How do we get there? (Creating strategies to move toward the vision)***
5. ***What else is happening around us that will impact our vision and plans? (Looking at the environment)***

In a facilitated process, using ICA methodology of consensus workshops and focused conversations, many community members/representatives were involved to create this community plan on the vision, priorities and strategies to shift the attitudes and use of alcohol within the community.

(ICA is the Canadian Institute of Cultural Affairs and ICA Associates – a unique facilitation, training and research organization dedicated to creating a culture of participation).

Attached in Appendix 7.3 is a visual copy of the Facilitated Planning Approach.

4.2 Vision - "Where Do We Want to Be?"

Why vision? Visioning takes us beyond fixing one problem after another, and lets us look at a broader, bigger picture. Creating a shared vision provides the opportunity for practical new directions and creates a sense of momentum and ownership of the plan. It is the first critical step in a planning process that will provide a blueprint for moving from dreams to actions to positive outcomes.

> *"At the heart of building shared vision is the task of designing and evolving ongoing processes in which* ***people … can speak from the heart*** *about what really matters to them. The* ***quality of this process****, especially the amount of openness and genuine caring,* ***determines the quality and power of the results****. The content of a true shared vision cannot be dictated; it can only emerge from a coherent process of reflection and conversation. "*
> *Peter Senge. The Fifth Discipline*

Community participants began creating the elements of a vision by answering the following question:

> **"*What do we want the attitudes towards and use of alcohol to look like in Prince Albert and area communities in 5 years?***
> ***In 2019 in our community, PA and area, we envision……"***

Over 120 community representatives from all walks of life and from different community agencies/groups and sectors including youth came together over 7 focus groups to create a collective vision on how to shift the culture of alcohol within PA and area communities.

The areas of focus that the Visioning Focus Groups created are summarized below.

See Appendix 7.4 for the full Plenary Summary Chart and details.

In 2019 in our community, PA and area, we envision……"

- ***Celebrating and Supporting Alcohol Free Events***
- ***Safe Healthy Families***
- ***Education Resulting in Positive Attitudes and Choices***
- ***Effective, Innovative and Enforceable Legislation***
- ***Access to Spiritual and Cultural Options***
- ***Accessible and Compassionate Community Support Services***
- ***A Safe Healthy Community Where We Are Proud To Live***
- ***Responsible Alcohol Use and Change in Norms***

Observations made by participants during Vision Focus Group sessions included:

- The youth in our community are important. We need to have alcohol-free and affordable activities accessible to them.
- Families in our community need support.
- Prevention, through education, for adults and youth will foster the development of positive attitudes around alcohol.
- Changes in enforcement and regulation, with partnerships, are key to alcohol responsibility within our community.
- Faith and spirituality remain important foundations in our community.
- Support and empowerment are crucial for families. A safe community, with community collaboration in offering harm reduction, and treatment.
- We all want a safe community to enjoy what Prince Albert has to offer.
- We need to develop a change in attitude and a responsible use of alcohol within our community.

Full details of the Vision for 2019 can be found in Appendix 7.4.

4.3 Current State – "Where Are We Now?"

The majority of individuals consume alcohol in a safe and responsible manner. However, a variety of devastating events within our community in recent years and the compelling numbers from the Hub table, led the Leadership of the Centre of Responsibility to task the Sector Specialists to focus on alcohol as one of the top priorities.

We know that our children, families, communities and a variety of agencies are carrying significant burdens due to excessive, risky, or addictive use of alcohol. We also now know that our data outlined below, indicates that we have opportunities to improve compared to the rest of our province and country.

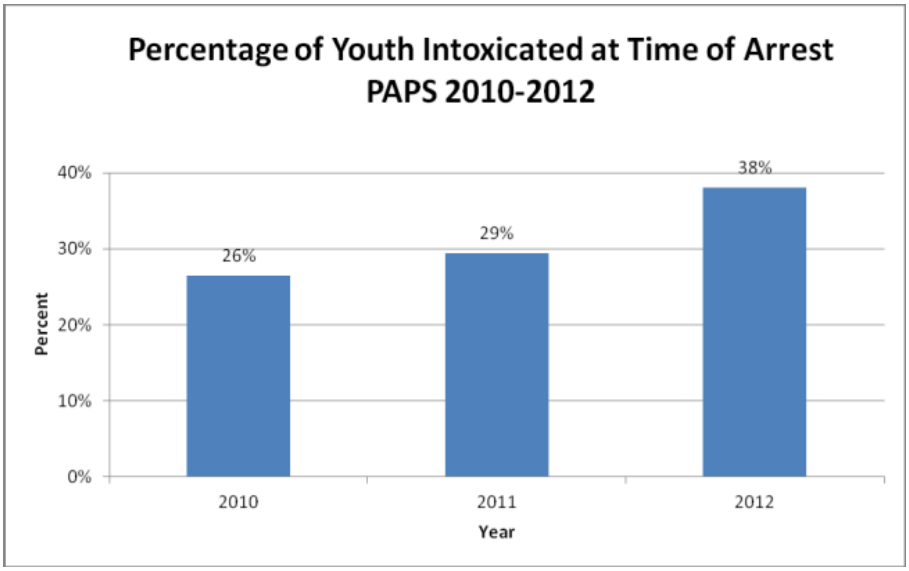
Despite this being a difficult issue, energy and turnout to share opinions and ideas have been strong and enthusiastic. There is a growing level of awareness and interest to improve our reality with alcohol. A continued and widening commitment from all citizens will allow us to celebrate the reduced harms and safer environments for all to enjoy.

4.3.1. Public Intoxication and Binge Drinking Data

- **62%** of Hub discussions involve the abuse of alcohol
- **$2,548,994** of the Prince Albert Police Service's budget was consumed between May 2009 - 2012, for the arrest and lodging of **5,595** people solely for public intoxication.
- **45%** of Prince Albert City Police arrests are for public intoxication compared to **22%** in Regina, **17%** in Saskatoon and **7%** in Moose Jaw.
- **1,341** hours of policing services was spent on public intoxication arrests in 2012. This translates to a loss of **55 days** of policing services NOT spent on proactive enforcement and crime prevention.

4.3.2. Youth and Underage Drinking

- **552** of the 5,595 lodged in cells solely for intoxication were youth.
- Though the percentage of youth being arrested is on the decline, the number of youth that are intoxicated at the time of their arrest is on the rise. **919** youth over three years were intoxicated at the time of their arrest.



- From July 2011 to December 2013, the Prince Albert Police Service investigated the deaths of two youth. In both incidents, the youth had been binge drinking and the cause of death was acute alcohol ingestion.

- **67.9%** of Prince Albert students in grade 10 reported binge drinking compared to **49.4%** of students in the Canadian sample in the same grades.

- A review of 47 high school students who missed 90-100% of classes in the 2011-2012 school year - shows that 70% had a history as a perpetrator of violence, 62% had been criminally active in the past, 52% have been victimized, 37% showed alcohol related police involvement, and 33% had gone missing in the past.

- Individuals brought forward at the Hub discussion showing the risk category 'Missing School' often also showed the risk categories Alcohol (51%), Criminal Involvement (47%), and Violence (36%).

4.3.3 Impaired Driving

- **22,876** reported impaired driving occurrences over 3 years in RCMP data within Saskatchewan, with **10,462** within North District (north of Rosthern)

- **1,123** calls for service for impaired driving within Prince Albert over 3 years.

Impaired driving has far reaching effects, sometimes life changing effects, for the victims, their families and the accused.

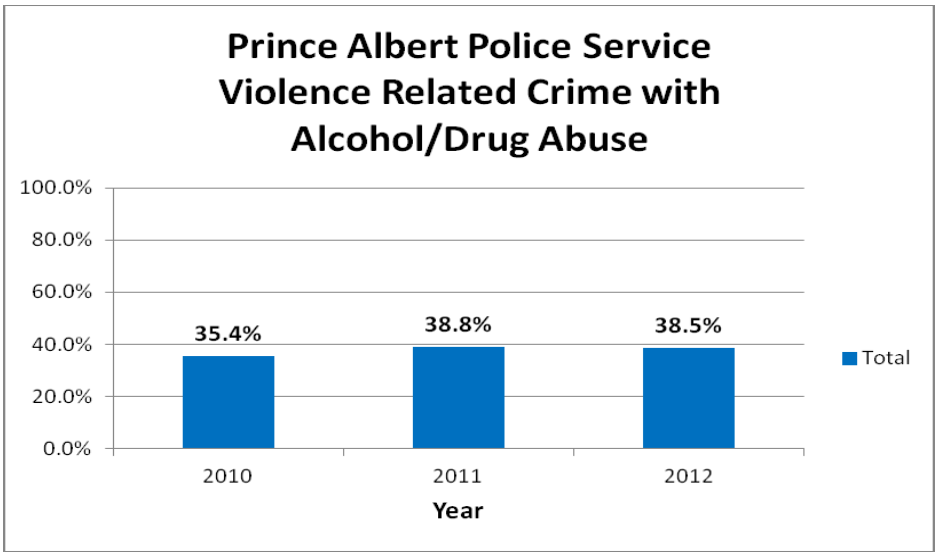
4.3.4 Chronic Alcoholism or Chronic Binge Drinking

- **$3,799,391** in financial costs across multiple sectors was incurred by 25 frequent users of service over 3 years in Prince Albert. The emotional suffering of the individuals and their families, and the stress on the helping professions is staggering.

4.3.5 Additional Data

- **9.2%** or 458 emergency room visits from June to August 2012 were the result of alcohol or drug abuse.

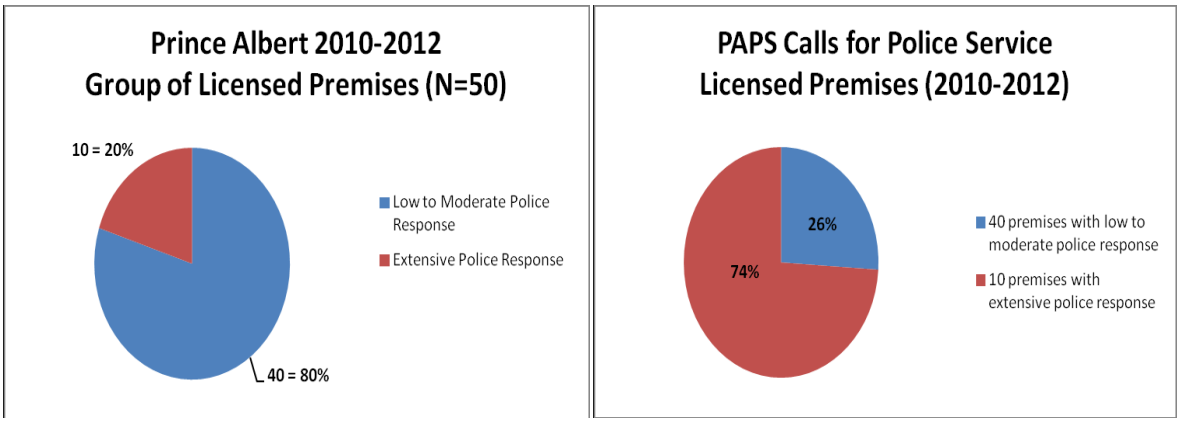
- **33%** of the intakes received by Prince Albert Ministry of Social Services involved substantiated allegations of alcohol and/or drug abuse, over a 3 month study period in 2012.



- **37.5%** of our violent crime related to alcohol/drug abuse over three years, 2010 - 2012 inclusively.

4.3.6. Liquor Compliance and Licensed Establishments Data

- **5,205** calls for Police service to our 50 liquor licensed establishments, from 2010 to 2012, at an approximate cost of $**873,607**, for police resources only. The highest volume included Intoxicated Persons, Evictions, Disturbances, Impaired Drivers, Violence and Property Crime.



These diagrams show that 20% percent of the City's licensed premises account for 74% of police response out of all 50 licensed premises over the past three years.

See Appendix 7.5 Call to Action for further detail

A three year collection of data supports the need and requirement for a full-time Liquor Inspector dedicated to the City of Prince Albert and region. Prince Albert has 50 liquor licensed premises and a growing number of major community events licensed for alcohol sales.

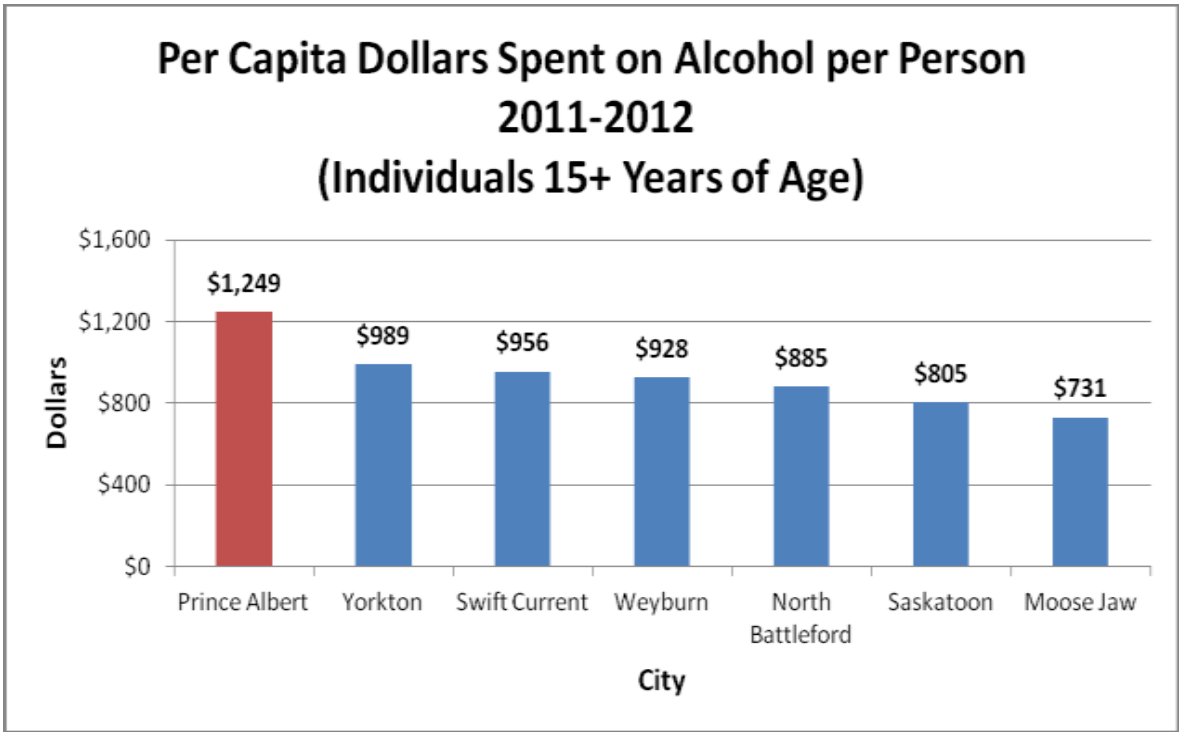
There is an identified need to improve the overall safety of patrons and staff within Prince Albert's liquor licensed businesses and major community events where liquor is served. We can accomplish this by increasing and sustaining education and compliance with regulatory and licensing expectations related to liquor licensed premises and events.

There are currently 8 SLGA Liquor Inspectors for the Province of Saskatchewan; 4 in Regina and 4 in Saskatoon. The Liquor Inspector currently assigned to Prince Albert covers a large geographic area northeast of Saskatoon, including half of Saskatoon itself. The geographic responsibility is bordered by Southend to the north, the Manitoba border to the east, Saskatoon to the south and Highway 11 to the East. With such a large geographic area to oversee liquor compliance, inspections are inconsistent which creates diminished accountability for business owners of licensed premises and an increased potential for problem premises to arise within communities.

A comparison of the number of liquor inspectors in the neighboring Provinces of Alberta and Manitoba was researched. Alberta has a total of 56 liquor inspectors for the Province, Manitoba has 19 and Saskatchewan has 8.

It should be noted that since the Current State Data was released, The City of Prince Albert, Prince Albert Police Service, Prince Albert Fire Department and Saskatchewan Liquor and Gaming have partnered to create the Public Safety Compliance Team working alongside the licensed establishments of Prince Albert.

4.3.7. Saskatchewan Liquor Sales per Capita Data



$34,743,440 is spent on alcohol sales in Prince Albert *(The dollar value per person was calculated based on population age 15 years and over).*

- Prince Albert's sales of alcoholic beverages per capita 15 years and over were $1,249. The Province of Saskatchewan reported $703 of sales of alcoholic beverages per capita 15 years and over. The National average was $742 per person.

4.4 Obstacles – "What is Blocking Us from Realizing our Vision?"

Once a vision is established and the current state is considered, it is important to spend time delving into identifying the obstacles that will impact the community in achieving its vision.

Obstacles to the Vision

Using the consensus workshop method, the participants identified obstacles to achieving the vision answering the question:

"What is blocking us from realizing our vision?"

The chart of obstacles is attached in Appendix 7.6

4.5 Strategies to Move Toward the Vision – "How Do We Get There?"

With the vision, current state information, and identified obstacles in mind, participants moved to creating strategies to reach the vision. The participants first identified strategies to overcome the obstacles and achieve the vision answering the question:

"What can we do to deal with the obstacles and realize our vision?"

The complete set of strategies developed by the community participants includes five strategic directions. These were prioritized by having participants vote for their top 3 and the results are noted.

See Appendix 7.7 for full details of the Strategies work.

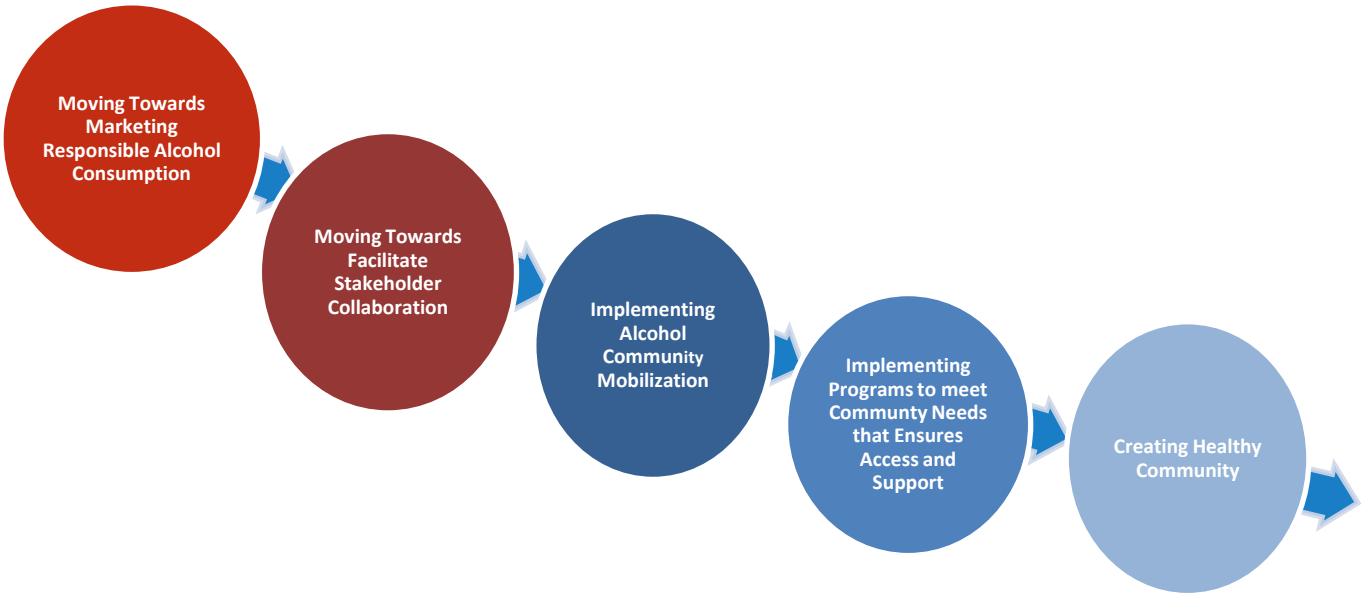
Strategies:

- ***Marketing Responsible Alcohol Consumption – 13 votes***
- ***Facilitate Stakeholder Collaboration - 12 votes***
- ***Implementing Alcohol Community Mobilization – 6 votes***
- ***Implementing Programs to meet Community Needs that Ensures Access and Support – 6 votes***
- ***Creating Healthy Community – 2 votes***

4.6 Priority Setting and Action Planning

The Obstacles and Strategies Plenary Group reviewed the established strategic directions and identified the priorities for implementation for the coming year. The next step will be to develop actions for the selected priority strategies. (see below)

Areas to focus on are shown in the following in order of identified urgency.



Appendix 7.7 provides further detail of these categories as outlined in the planning sessions.

4.7 Community Consultation Comments & Commitments

Community Consultation Sessions were held May 5 & May 12 2016. Thirty-four members of the public attended the sessions held at the Exhibition Center.

In summary, participants confirmed that the current state facts about the concerns within the community were accurate and that they too were interested in assisting in making a change to the current attitude towards alcohol.

Participants were asked to add any additional concerns/ideas and to identify how they would be willing to assist with making the shift to improve Prince Albert and area's culture toward alcohol.

Details can be found in Appendix 7.8.

5 PHASES AND ACTIONS FOR IMPLEMENTATION

With a practical five year vision and clearly outlined strategic directions the community of Prince Albert and area is solidly positioned to begin the action planning to the priorities identified. Further discussion with the Planning Group will occur to:

1. Determine the process for presenting the draft report to community members to build additional awareness, community support, and provide the opportunity for more community members to add to the plan.

2. Create a plan/process to build multifaceted and multi-stakeholder capacity throughout the community to initiate and sustain ongoing action planning and build momentum within the community to address the identified Alcohol Strategies.

3. Initiate community wide action planning.

4. Provide a mechanism for community groups and organizations to share action planning ideas/progress.

5. Annually review status of progress and celebrate successes/challenges accomplished.

The next steps are to share these priorities for further input on actions that will move us closer to our Vision for 2019.

Individual citizens, agencies or institutions can begin thinking, or discussing and planning, how they can add to this momentum to change our altered tolerance and move towards the Vision. Champions will be needed and even the smallest of change needs to be captured and shared as we celebrate the movement towards a culture of moderation and safety with alcohol.

6 CONCLUDING REMARKS

This plan is the result of co-operation, hard work and meaningful discussions by over 120 community members who participated in the Focus Groups held from January to May 2014. Participants included a diverse representation of community members, community based agencies, Municipal and Ministry representatives, and youth. Community member participants brought their passion, a depth of commitment, an eagerness to be innovative, and a desire to work together to transform the altered tolerance attitude and use of alcohol in Prince Albert and area communities.
This plan also shows the complexity of responding to the needs in a diverse and large geographic area. Significant challenges have been identified and must be addressed to successfully achieve the Prince Albert and area five year vision. This plan outlines strategies to address those challenges.

All of the participants have expressed an interest in continuing to participate in the action planning for the priority items identified. We are hopeful that many more will be compelled to embrace this planning as it moves forward.

Our thanks go to the COR for having the courage and determination to initiate the participative community planning process and to the Prince Albert Parkland Health Region and Community Mobilization Prince Albert for providing the resources for the professional facilitator. Our thanks to Lydia Franc Beaurivage, Facilitator, for leading us successfully to this point in the planning process. And finally, gratitude to all of those so far who have invested their time, ideas and passion in the hope that this investment will grow and spread towards a healthier and stronger future.

It has been worth investing in this process as it has provided the opportunity to offer factual information to share and work from. This data is a springboard or starting place for all who choose to be a small or large force for change.

7 APPENDICES

Appendix 7.1: Map of Geographic Area Served

Primary Area Served:

CITY OF PA APPROXIMATELY 40,000

Secondary Area Served:

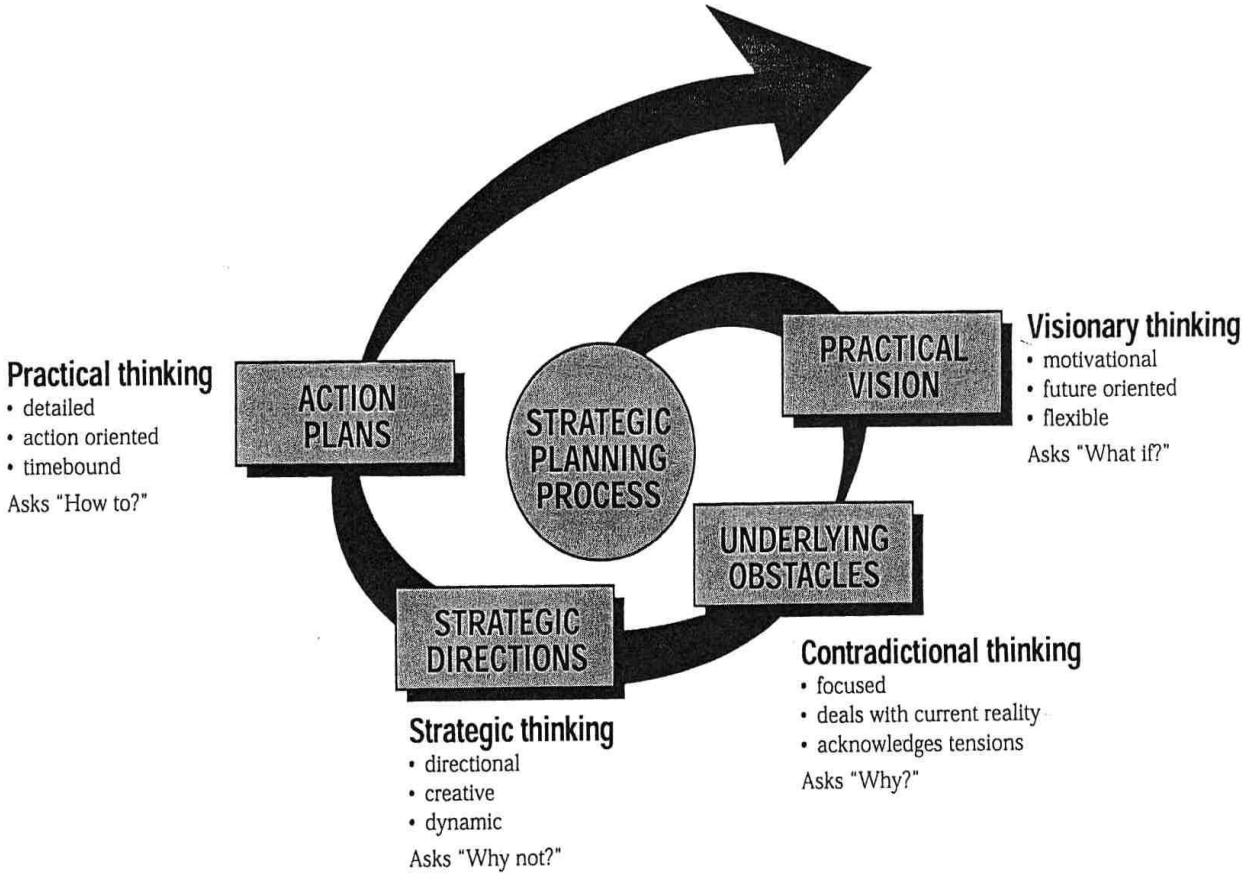
WITH SURROUNDING POPULATION APPROXIMATELY 78,000

Appendix 7.2: List of Participants

Alcohol Strategy List of Participants			
Alan Jones	David Crossman	Janice Boucher	Mitch Holash
Alan Nunn	Dawn Robins	Jennifer Suchorab	Nicholas Auger
Amelia Everett	Dawne Adams	Jim Toye	Paul Ross
Anders Hunter	Deb Kwasnica	Joan Sanderson	Peggy Lynn Gatin
Betty Prosper	Debbie Schutte	John Morrall	Rahim Basaria
Beverly Palibroda	Delphine Melchert	Jordan McEwen	Rain Lucier-Wilson
Bill Bray	Dep. Chief Kelly Stienwand	Jordan Sampson	Randy Emmerson
Bob Gill	Deputy Chief Jason Everitt	Josef Tesar	Rhonda Triskle
Brenda Abrametz	Diane Switzer	Julie Pitzel	Richard Ahenakew
Brent MacDonald	Dianne Cohoon	Kali Stocks	Rick Croshaw
Brett Enns	Dr. A. Ramji	Karen Anthony-Burns	Rick Sanderson
Brian Howell	Dr. Francois Rossouw	Ken Hunter	Rick Stuckenberg
Bruce Ehalt	Donna Brooks	Kevin Mugford	Robert Bratvold
Carla Frohaug	Donna Strauss	Kianne Henry	S/Sgt. Dave Schluff
Carla Kolendreski	Doug Kinar	Kim Vandale	Sandy Anderson
Cecile Hunt	Dwayne Cameron	Kim Werrett	Sandy McLachlan
Chad Levesque	Dwayne MacGillivray	Kirby Rudderham	Sandy Pitzel
Chad Nilson	Dwight Bergstrom	Lisa Simonson	Sgt. Carmela Schneider
Cheryl Lucas	Edna Bruce	Liz Settee	Sgt. Jesse Barlow
Chief Troy Cooper	Fern Fernie	Lorel Trumier	Sgt. Troy Dumont
Chris Lyons	Gayle Cartier	Lorne Zanidean	Shayna Ilnisky
Chuck McCann	George Bolduc	Lynnda Berg	Shelley Storey-Humble
Conrad Burns	George Keenatch	Malcolm Jenkins	Stan Dignean
Constance Roussel	Glenis Clarke	Maria Mitchell	Suzie Stubbs
Cory Trann	Glenn Patey	Mark Dhami	Tamara Young
Councillor Lee Atkinson	Harriet Tomporowski	Mark Phaneuf	Thomas Sewap
Councillor Martin Ring	Hilary Gaudet	Markus Winterberger	Tina Dickson
Councillor Rick Orr	Hillary Mercier	Marty Houle	Tricia McEwen
Councillor Tim Sharkowski	Inspector Jason Stonechild	Matt Gardner	Trudy Hamilton
Crystal Small	Inspector Jeff Rowden	Mayor Greg Dionne	Vice Chief Brian Hardlotte
Dan Dobratz	Inspector Shelly Dupont	Melanie Heleta	Vicki Bird
Dan Ethier	Isla Wilcox	Merle Lacert	Walter Kahpeechoose
Darla Grasby	Jackie Thoms	Merv Bender	Waylon Cain
Darryl Rideout	Jane MacLatchy	Michelle Gaudet	Wes Clark
Dave Webster		Mike Horn	

Appendix 7.3: Facilitated Planning Approach

Types of Thinking in Facilitated Planning



4-16 ART & SCIENCE OF PARTICIPATION · FACILITATED PLANNING

© THE CANADIAN INSTITUTE OF CULTURAL AFFAIRS 1985, 1998, 2005

Appendix 7.4: Practical Vision – PA & Area Alcohol Strategy

What do we want the attitudes towards and use of alcohol to look like in Prince Albert and area communities in 5 years?

Focus Question: In 2019 in our community, PA and area, we envision…..

Practical Vision Plenary Summary Chart – Full details from Focus groups

Celebrating & Supporting Alcohol Free Events	**Safe Healthy Families**	**Education resulting in Positive Attitudes and Choices**	**Effective, Innovative and Enforceable Legislation**	**Access to Spiritual and Cultural Options**	**Accessible & Compassionate Community Support Services**	**A Safe Healthy Community Where We are Proud to Live.**	**Responsible Alcohol Use and Change in Norms**
Accessible Affordable Activities & Play Areas for Youth ********** Alcohol Free Events for All ********** Mentorship for/by Youth **********	Result of positive change in social paradigms. ********** Healthy Community Reforms. ********** Family Betterment & Structure ********** Parent & Adult Mentoring. **********	Effective Parenting through education. ********** Prevention through education ********** Healthy alternatives to alcohol through education ********** Treatment through education ********** Educate youth and families to develop healthy attitudes around alcohol ********** Giving youth a voice in education **********	Responsible management within licensed establishments ********** Elimination of impaired driving ********** Effective Enforcement ********** Legislation and policy changes to reduce alcohol problems. ********** Transportation solutions to reduce impaired driving. **********	Faith Based Solutions. ********** Spiritual Services Availability ********** Reclaiming Spiritual Beliefs **********	Harm Reduction & Support ********** Safe communities ********** Community Collaboration ********** Support & empowerment ********** Empowering families ********** Empathy for all in need. ********** Mental Health and Addictions Treatment **********	Family Friendly Spaces ********** People working together promoting positive Community Development ********** Longer hours and Accessible Public Transportation ********** Vibrant Downtown Area ********** Affordable Housing for All ********** People feel Safe at Home and in Public at all times. **********	Change in Norms ********** Culture change ********** Responsible Use of Alcohol ********** Public intox regarded as an offence. ********

Celebrating & Supporting Alcohol Free Events

Accessible Affordable Activities & Play Areas for Youth	Alcohol Free Events for All	Mentorship for/by Youth
Healthy accessible youth activities available and supported. Increased recreation options for youth (activities) Financially accessible youth facilities/centers PA opens Activity center for youth activities Youth Centers which are safe and do not involve substance use. Bring back “kids being kids” – playing on playgrounds. More casual sports opportunities for youth that are affordable. More pro social options for youth leisure without alcohol.	Alcohol has been banned. Activities for youth that they want that don’t include alcohol Can have fun without alcohol Community events that don’t involve alcohol for families. Graduation celebration without alcohol More downtown events that don’t involve alcohol People can get together and have fun without booze. Alcohol doesn’t need to be a part of community events. Celebrating events alcohol free Celebrations that don’t need to include alcohol Less emphasis on social drinking linked to a good time. Non-alcohol related events available for PA residents	Engage Youth to take leadership roles – help other youth to make good personal choices. Make it cool to not drink. Start early. Help youth be more successful in life (graduating) for a better future. Youth are proud to be alcohol free. Alcohol strategies need input from youth who are experiencing issues – positive and negative. Youth confident to achieve their dreams without alcohol

	Dry grads only Youth sports teams – no tolerance for any alcohol use Greater opportunity for young people to experience sport and culture without alcohol.	

Safe Healthy Families

Result of positive change in social paradigms.	Healthy Community Reforms.	Family Betterment & Structure	Parent & Adult Mentoring.
No children born with FAS Develop a social conscience – empathy for disadvantaged people; support for people with addictions, mental health, no stigmatism Our children will grow up free of harms associated with Alcohol and Drug misuse in our homes Our society is responsible for its current state. No blame. Reduced child apprehension People interacting with each other to solve issues rather than defaulting to others. Our children would not be exposed to the effects of alcohol use. Personal wellness all around	Healthy, happy, open-minded kids (allowed to be kids) Mentoring positive lifestyle in family and community. Healthy options becoming a reality. Recreation activities, drama, art, cultural activities, clean playgrounds. I feel safe to walk in my community. Family friendly neighborhoods. More localized neighborhood activities for youth.	Parents/families investing time and money into kids instead of alcohol. No alcohol in homes. Parents set better example and are confident in setting appropriate boundaries around alcohol use with their kids. Encouraging family time together. Intact family units. Better family structure/skills Regular work hours & weeks. (9 – 5)	Positive adult role models. Adults model appropriate use of alcohol – social and in moderation. Parents don't become friends/peers with their children. Link between contemporary and traditional parenting. University mentors to youth Children cared for by sober caregivers. Authorities (parents, teachers, church) to set abstinences example. Parents paying attention and interacting with each other and kids.

Education Resulting in Positive Attitudes and Choices

Effective Parenting through education.	Prevention through education	Healthy alternatives to alcohol through education	Treatment through education	Educate youth and families to develop healthy attitudes around alcohol	Giving youth a voice in education
Parents positive role models for their children. (not drinking and driving) The community will find other ways to celebrate events without alcohol Kids and adults are learning about and striving for high self esteem Promote success stories. Teens must have their parents consent before drinking. Parents discipline children pertaining to alcohol use, set ground rules.	Public education (social media, groups, public forums) People understand that alcohol Be overdose can kill. When one vomits they are overdosing – not funny Increased understanding of all that contributes to addiction. Community education around our normalization of alcohol. The harm of alcohol use by kids to their development becomes common knowledge. Education to show responsible use /prepare youth. Education and prevention starts in school at kindergarten/primary grades re: drugs & alcohol School based education regarding alcohol is standard.	More education on alcohol for both parents and child Children, teen, etc. know more about alcohol and its effects on body long term. Youth have an informed and healthy introduction to alcohol. Increased in known prevention and education strategies and programs. Educate everyone about affects of alcohol use. Less pressure on youth to drink as more awareness is available on substance abuse. DE normalization of attitudes toward the use of alcohol. The term party isn't immediately associated	Program to teach life skills Treatment for intergenerational issues; more education on these issues. More programs for youth from broken homes &homeless situations (no matter age) Create programs specific to court charges for youth. Easy accessibility to counseling – walk in/drop in for youth. In school programs – addictions & mental coping skills. Youth intoxication rates lowered.	Community Youth Centers – hang outs (supervised) Affordable community sport/leisure activities for families and youth. Youth focus and involvement in activities not associated with drugs and alcohol. Increased in use of youth activities options that model healthy lifestyles. Youth see drunkenness as inappropriate behavior and have alternatives available for social entertainment. Increase in access to high interest, low cost activities for youth. Greater access and participation in sports/recreation/ clubs. Empower youth – leadership; ownership.	Mentoring youth Involvement of youth in Advisory Board in City Youth role models Youth/peer groups practicing healthier lifestyles/norms. Kids look at alcohol with healthy attitudes and respect.

	Youth view success in school and sports as most important; alcohol is not cool. Better educated young people making better choices. 2 or 3 specified classes in Grades 6/7 re: alcohol effects and outcomes After school time programming – available to all students; no income barriers to access. Health & education based on wellness model. Responsible use of alcohol thru education. Better education for all stakeholders Change community culture thru education – engage all groups/cultures in community; PSAs Responsible service of alcohol thru education. Decision makers easily choosing no alcohol at events.	with alcohol. Drinking like smoking becomes not socially acceptable. Youth attitudes – partying not cool. City wide recognition of alcoholism in the mainstream. Stigma/perception of city – beautify riverbank, parks, downtown. Youth awareness of appropriate consumption of alcohol Employment and education opportunities that support marginalized people to transition into jobs. Socially unacceptable to see an intoxicated person in public.			

Effective, Innovative and Enforceable Legislation

Responsible management within licensed establishments	Elimination of impaired driving	Effective Enforcement	Legislation and policy changes to reduce alcohol problems.	Transportation solutions to reduce impaired driving.
Public expectation that servers are adhering to best practices. Bars looking after the people who drink. Know when to say no. Permittees will sell liquor legally, no minors/no intoxication. Bars providing transportation for patrons. Bars will have laws against over serving Special occasion and community events will not serve minors or over serve. Fancy non alcoholic drinks on bar menu.	No drunk driving Impaired driving unacceptable to all An impaired driver would be publicly shamed, because it would not be accepted in PA. Zero tolerance for impaired driving No injuries associated with alcohol misuse associated with vehicular accidents. Reward system attached to “RID” similar to “Crime Stoppers”	Bars and liquor stores behaving responsibly - law enforced. Stronger enforcement with community solutions. Increased enforcement of licensed establishments. Liquor access closes by midnight. More harsh fines will be attached to impaired driving and youth drinking. Harsh laws for repeat offences of bootlegging youth access. Effective, inter- connected enforcement model Complete compliance with liquor laws. Need 2 alcohol inspectors in Prince Albert Stronger enforcement and inspections, with realistic penalties for violations.	Interlock devices in all vehicles Taxation incentives for Certified establishments that provide staff training, positive inspections, decreased in no of police calls for service Reduce availability of hours for alcohol purchased. Local autonomy in liquor licensing (promote compliance) More accountability for alcohol abuse/misuse. Perpetrators of violence while under the influence –are forced into programs similar to DWI classes. Elimination of drive thru liquor stores. Raise prices Limit the amount of alcohol each person could buy a week (ie swipe ID) Limit pack size of alcohol	Easier transportation to reduce drunk driving Transportation options in line with liquor established hours of operation Operation Red Nose all year

		Underage “pulling” of alcohol for kids has been stopped.	Reduced access to alcohol Lower the drinking age to 16, so when they turn 19 they do not lo se control. Raise drinking age Stronger penalties for alcohol/drug issues. Public intox regarded as an offence. Public consequences for public intoxication. Legalize marijuana Alcohol access limited to youth.	

Access to Spiritual and Cultural Options

Faith Based Solutions.	Spiritual Services Availability	Reclaiming Spiritual Beliefs
Sponsored access to Faith based alcohol addiction rehabilitation. Biblical wisdom for solutions	Elders and spiritual leaders are out and accessible in the community.	Embrace culture, reclaim identity as part of recovery Reconnect with spiritual foundation

Accessible & Compassionate Community Support Services

Harm Reduction & Support	Safe Communities	Community Collaboration	Support & Empowerment	Empowering Families	Empathy for all in Need.	Mental Health and Addictions Treatment
Prevention/harm reduction focus and accepted community practice Special system to deal with persons causing disturbances related to alcohol. (connected to but not actual police officers) More social programming, less police action Reduce police time spent on alcohol abuse Policing – less dollars spent on public intoxication Police not spending considerable time lodging drunks Going into society without being exposed to intoxicated people Places for intoxicated on streets Shelters for people who don't have a safe place to go when	Create a safe environment for everybody whether they drink or not. Safe environment A community with a reputation of being welcoming – a place to be City lends itself to people friendly beautiful common places….for interaction More proactive policing Improved community safety Violence free A safe community where neighborhoods know each other	Community working together A community of partnership regardless of profession business Interaction with other agencies and the public. Front line response to intox persons is a multi-agency unit. Non criminal event. Successful reintegration of inmates with addictions using a collaboration of multiple resources. Services available outside 8 – 5 Easy access for programs/courses	Groups to empower themselves, learning to take control and responsibility of their lives. More peer support; less peer pressure Thru actions we put someone on the right path. Staff and volunteers have been trained to handle situations and help individuals access needed resources. We have trained others to teach our values. Root causes being addressed…poverty, violence – notable changes. Accepted solution – not forced. People helping each other. People with previous	Family centered treatment programs Neonatal support treatment A range of community supports that offer a good fit to youth and families Community support workers to assist families People stop caring about drinking and start caring for their families. Children, youth and families being supported in the community. Ie access to and recreation activities.	Compassion to persons affected No shame in seeking help Inclusive community with opportunities for all, regardless of status Equal opportunity and resources available to everyone – no despair Understanding root cause Our mission is being purely listened to Accepting of all cultures, less racism Less judgment, more awareness/empathy	Adequate addiction, mental health treatment for all ages. Support successful programs working with addiction Continuum of addiction services regardless of point of recovery. Rehabilitation centers Alcoholism is a symptom of hurt/trauma – people need opportunity to heal. Access to mental health services outside of office hours.

intoxicated More public housing options with support to transition Reduction in cost to taxpayer Intox person is viewed as “Community wellness” concern rather than a public nuisance or unsightly concern. Chronic alcoholics being cared for in wethouses/transition houses after treatment 1 year with no deaths linked to alcohol Care for palliative folks – some one to take responsibility Better options for dealing with public intoxication (no drunk tank) A cell block free of people who shouldn’t be there		Collaboration with all agencies to problem solve	addictions now healthy pro-social contributors in community		Empathy to present situation	

A Safe Healthy Community Where We Are Proud to Live

Family Friendly Spaces	People working together promoting positive Community Development	Longer Hours and Accessible Public Transportation	Vibrant Downtown Area	Affordable Housing for All	People feel Safe at Home and in Public at all times.
Free recreation for youth More city facilities for families and youth Family friendly spaces Family oriented green space close to all homes Clean attractive green space safe for children to play in	More community based strategies to decrease poverty. Community development in west flat Positive inroads made to address systemic impacts of poverty Access to services in all neighbourhoods Support from city in West Flat area Job creation in West Flat Business and community work on solutions together Model after pro-active countries and their social systems People are doing things they are passionate about More events that bring community together	Transportation issue fixed Longer city transportation hours	Revitalized down town core Create safer streets (downtown) Downtown becomes the “go to” place to shop & socialize Clean streets/parking lot/ public areas to promote sense of pride Partnerships between youth/ families/ organizations. EX seniors/youth, community beautification projects so youth feel ownership Public areas and core downtown a pleasure to be in. Overbridges and public buildings are clean and attractive (graffiti free)	Affordable housing – access to all who need it, change criteria to access. Safe homes for our youth o evening/overnight Access to affordable and safe housing. More shelters for homeless Increased access to affordable housing and effective support Housing – availability of low income housing	Violent crime has continued to fall and people feel safe at all times of day. Reduction of crime – safe community Bars are a nice place to go out and have a drink in-not scary. Safe and happy entertainment/nightlife Police presence isn’t noticeable All areas of the city are calm Decline in crime related to alcohol abuse Intoxicated person not passed out in public Prince Albert & alcohol are no longer used in same sentence. City image expectations - enforcement, place for healthy

					lifestyles No more late night parties in Ken's neighborhood

Responsible Alcohol Use and Change in Norms

Change in Norms	Culture Change	Responsible Use of Alcohol
Culture of responsibility versus acceptance Change of attitudes for all (this is our problem not your problem) Make alcohol less of commodity No tolerance for public intoxication – responsible use of alcohol Public intoxication not accepted Zero tolerance for alcohol use in youth "not acceptable to drink" The norm isn't alcohol Non alcohol events is the norm Culture – need to change; drive thru?; sports and other events where booze served It will be the norm that Canada's low risk drinking guidelines are the norm. Alcohol treated with respect, like a dangerous substance (warning labels)	Drinking not cool Make drinking like smoking in schools – unacceptable Socially appropriate fundraisers without alcohol Games, holidays not supported by alcohol companies; or sold at functions.	People not drinking just for the sake of getting drunk If celebrations include alcohol it is not the main focus; the celebration is the focus Alcohol no end all be all Healthy attitudes evident in workplace….no missing working due to over indulging Alcohol isn't such a big part of youth culture (less peer pressure/ridicule) Eliminate binge drinking Decreased association of alcohol with celebrations, events, sports, youth, rights of passage Use less services because of reduction in alcohol consumption

Appendix 7.5: Current State Data Sheet – Focus Groups

A Call to Action Document, found on Community Mobilization Prince Albert Website: wwwmobilizepa.ca

The Current State data sheet presented below is a summary of some of the data from the larger Call to Action Document

Prince Albert Community Mobilization
Community Starts Within

THE CASE FOR A PRINCE ALBERT AND REGION ALCOHOL STRATEGY

A *Call to Action* to collectively develop and implement a comprehensive alcohol strategy to reduce unnecessary harms and improve community safety.

- ***Prince Albert spent approximately $1,249/person on beverage alcohol in 2011.***
- ***Saskatoon residents spent $805/person on beverage alcohol in 2011.***
- ***Moose Jaw residents spent $731/person, a City with a comparable population.***
- ***The Saskatchewan Provincial average was $703/person on beverage alcohol.***

The dollar value per person was calculated based on population age 15 years and over.

Several areas that need attention are **chronic alcoholism, binge drinking, youth and underage drinking, liquor compliance and establishments and impaired driving.** Each of these can be viewed through lenses of **education/prevention, supports and treatment, harm reduction opportunities and enforcement opportunities.**

- **62%** of Hub discussions involve the abuse of alcohol according to CMPA statistics.
- **552** of the 5,595 lodged in cells were youth.
- **$2,548,994** of the Prince Albert Police Service's budget was consumed between May 2009 - 2012, for the arrest and lodging of **5,595** people solely for public intoxication.
- **45%** of Prince Albert City Police arrests are for public intoxication compared to **22%** in Regina, **17%** in Saskatoon and **7%** in Moose Jaw.
- **1,341** hours of policing services was spent on public intoxication arrests in 2012. This translates to a loss of **55 days** of policing services NOT spent on proactive enforcement and crime prevention.

- **$3,799,391** in costs across multiple sectors was incurred by 25 frequent users of service over 3 years.
- **54%** of the 921 youth surveyed, reported engaging in binge drinking by age 16.
- **67.9%** of Prince Albert students in grade 10 reported binge drinking compared to **49.4%** of students in the Canadian sample in the same grades.
- Though the percentage of youth being arrested is on the decline, the number of youth that are intoxicated at the time of their arrest is on the rise. **919** youth over three years were intoxicated at the time of their arrest.
- **37.5%** of our violent crime related to alcohol/drug abuse over three years, 2010 - 2012 inclusively.
- The majority of violent crime occurs between 10pm and 4am.
- **5,205** calls for police service to our 50 liquor licensed establishments, from 2010 to 2012, at an approximate cost of $**873,607**, for police resources only. The highest volume included Intoxicated Persons, Evictions, Disturbances, Impaired Drivers, Violence and Property Crime.
- **$34,743,440** is spent on alcohol sales in Prince Albert (per capita examples listed above)
- **9.2%** or 458 emergency room visits from June to August 2012, were the result of alcohol or drug abuse.
- **33%** of the intakes received by Prince Albert Ministry of Social Services involved substantiated allegations of alcohol and/or drug abuse, over a 3 month study period in 2012.
- **22,876** reported impaired driving occurrences over 3 years in RCMP data within Saskatchewan, with **10,462** within North District (north of Rosthern) and **1,123** calls for service for impaired driving within Prince Albert over 3 years.

If this data moves you as it has us, please question it, learn it, and understand it so that you can in turn be a building block within our community to stimulate informed conversation, support and action. We collectively need to use these facts and the voices from the focus groups and the community to increase the momentum to become a healthier, safer and vibrant place for all to thrive. If you have questions please call 765-2880 or email Karen at kanthony@papolice.ca Thank you.

Appendix 7.6: Underlying Obstacles

What is blocking us from realizing our vision?

Obstacles

- ***Conflict Between Government Revenue Generation and Alcohol Regulator Impedes Proactive Work Addressing Local Priorities and Responsible Use***
- ***Advertising and Social Media Manipulates Attitudes Towards Alcohol***
- ***Existing Attitudes Impedes Our Ability To Change and Adopt Healthy Choices Around Alcohol***
- ***Normalization of Alcohol Use Limits Creative Responses to Alcohol Abuse***
- ***Economic, Community, Family and Personal Alcohol Related Obstacles Impede Common Solutions for Positive Growth and Change***
- ***Internal and External Challenges Affects Ability to Make Personal Change***
- ***Existing Resources, Knowledge and Attitudes About Alcohol Restricts Community Actions – Solutions***

See chart below for full details.

Obstacles Plenary Summary Chart

Focus Question: What is blocking us from realizing our vision?

Conflict Between Government Revenue Generation and Alcohol Regulator Impedes Proactive Work Addressing Local Priorities and Responsible Use	**Advertising and Social Media Manipulates Attitudes Towards Alcohol**	**Existing Attitudes Impedes our Ability to Change and Adopt Healthy Choices Around Alcohol**	**Normalization of Alcohol use Limits Creative Responses to Alcohol Abuse**	**Economic, Community, Family and Personal Alcohol Related Obstacles Impede Common Solutions for Positive Growth and Change**	**Internal & External Challenges Affects Ability to make Personal Change**	**Existing Resources, Knowledge & Attitudes about Alcohol Restricts Community Actions** **→ Solutions**
Our unique community. ********** Business of alcohol. ********** Leadership. ********** Inter-agency collaboration on alcohol strategy. ********** Adapt and enforce existing legislation. **********	Mixed messages. ********** Social media. **********	Deep seated societal attitudes. **********	Options for activities without alcohol. ********** Peer pressure. ********** Unwilling to accept responsibility. **********	Us/them problem vs. community response. ********** Resistance to change. ********** Social, political and economic inequities. **********	Alcohol Addiction. ********** Personal mind set. ********** Family Influences. ********** Community cultural connections. **********	Community involvement. ********** Education in community. ********** Needs driven programming. ********** Education in schools. ********** Vision plan & clarity. ********** Human & financial resources. ********** Ownership of Problem

Conflict between Government Revenue Generation and Alcohol Regulator Impedes Proactive Work Addressing Local Priorities and Responsible Use

Our Unique Community	Business of Alcohol	Leadership	Inter-agency Collaboration on Alcohol Strategy	Adapt and Enforce Existing Legislation
Unique community pressures. Common purpose for participants – right people at table. PA is a converging point – social issues from other communities. Unique populate i.e.: jails. Our "community" is far larger than the Prince Albert corporate limits. Trading area. Transient population north and south.	Alcohol taxation related to government spending. Gov't & communities receive too much in tax dollars to want to change. Lost revenue from alcohol sales. Alcohol = $ fundraiser Business owners that have made a successful business reluctancy. Revenue stream. Financial repercussions of reform. "Big" business side of alcohol $23 Billion last year in Canada.	Lack of leadership/mentoring. Sustained leadership. Leadership taking it into the future.	Agencies protect their own turf. Communication between agencies. Top down or bottom up approach to change. Stovepipes with competing mandates. Priority of funding. Requires involvement of local agency provincial federal.	Human rights legislation hindrances. Educate and enforce legislation already in place. Ease of obtaining alcohol. Higher drinking age "21". Misalignment of priorities. Requires larger involvement : • Local agency • Provincial • Federal Laws and policies that inhibit progress. Existing red tape. Law enforcement education. Regional/provincial City buy in Some legislation is beyond control of PA. A discomfort politically to change, tighten restrictions.

				All of government buy in (all leadership) Existing alcohol legislation. Provincial legislation – outside influences. Law enforcement lack of resources – social support.

Advertising & Social Media Manipulates Attitudes towards Alcohol

Mixed Messages	Social Media
TV makes it look fun. Marketing (advertising of social) (case law re: tobacco). Bars are made a BIG deal. Media. Mixed media messaging. Media messaging glorifies alcohol use. Advertisements. Signals in society – advertising. Sensationalized advertising.	Social media. Social media. Social media (culture).

Existing Attitudes Impedes Our Ability to Change and Adopt Healthy Choices around Alcohol

Deep Seated Societal Attitudes
Church acceptance of “needy people.”
Deep seated societal attitudes.
Racism.
Stereotypical thinking.
Stereotype of our “bad community.”

Normalization of Alcohol use Limits Creative Responses to Alcohol Abuse

Options for Activities Without Alcohol	Peer Pressure	Unwilling to Accept Responsibility
Lack of affordable socially acceptable activities – teens.	Peer pressure still strong.	Society’s acceptance of alcohol.
Lack of affordability of access to youth sport/cultural activity.	Teenagers think getting drunk is funny.	Lack of responsibility for the issue.
Nothing to do here in PA (youth centers, activity groups.)	Drinking is cool when you are a teen.	Lack of assuming personal responsibility.
Youth find other ways to have fun.	People’s attitude around alcohol to have fun, relax, fit in…..there needs to be another way to do this.	It is not my problem.
Fear that people won’t participate without alcohol.	Peer pressure – youth & adults.	Non-alcohol events not currently accepted.
		Hiding behind traditional mandates.

Not enough opportunity accessibility to try new sports or art programs for youth/families.	Non-alcoholic events are not successful (traditionally). Society views alcohol as a necessity at parties and get together. De-normalizing the cycle of abuse. Breaking the stigma that “youth drinking is normal.” Peer pressure makes it difficult to say no to alcohol. Peer pressure. Mental health & addictions – society attitudes. Everyone drinks. People are put down and shamed if they don’t drink. Culture of conformity normalization. People aren’t aware or just don’t care about all the consequences. Shaming and judgment of others.	Agency refusal to address current problem for fear of increase workloads. People refuse to face reality. Blame game.

Economic, Community, Family and Personal Alcohol Related Obstacles

Impede Common solutions for Positive Growth and Change

Us/Them Problem vs. Community Response	Resistance to Change	Social, Political & Economic Inequities
Creating the "we" problem. Those people attitude. Overwhelming task – "Just too large." Community willingness. No individual ownership of problem. Lack of personal responsibility and ownership. Enough is enough (reclaiming our neighborhoods, parks, etc.) Lack of pride in our community. Stigma of admitting it's a problem.	People and agencies resist change. Always been an acceptable norm. No plan to address the "fear" of crime and only addressing crime. Multi-level apathy. Fear of change. Fear and apathy in community. People are unwilling to stop drinking or change their ways. There is not enough motivation to carry out changes. Someone to take 1st step to change. People don't believe they can change. Unable to change or affect outside influences. Afraid to take a stand.	Public housing is not adequate (supportive housing needed). Social, political, economic inequities within community. Poverty trap. Poverty – lack of economic ability to facilitate change. Local economics & employment. Lack of job satisfaction. Poverty.

Internal & External Challenges Affects Ability to Make Personal Change

Alcohol Addiction	Personal Mind Set	Family	Community Cultural Connections
Addictions. Wanting to run away from reality. NOT addressing biological part of alcoholism. Alcohol is an addiction. Gambling/Addictions. The prevalence of addictions is consuming communities.	Strong morals. Lack of self-esteem and hopelessness situations. Fear of change. Bad last minute judgment call (risks/chances). <u>Sadness!</u> Self-hatred! Troubled past! <u>Oppression</u> Victim mentality helplessness (I can't). Way of coping with hurt.	 Generational attitudes & norms. Generational: Force of habit (i.e.: Dad use to do it). Family Unit breakdown i.e.: lack of social skills. Wrong influences. Children not exposed to parents drinking. Family influences. Wrong influences. Growing up with alcoholism. Parents supporting alcohol.	Lack of connection and sense of belonging. Lack of spiritual connection & direction. Social structure – way of life. Lack of 1st Nations culture connection. Cultural competency – true understanding. Lack of motivation/ self-esteem. Faith based not seen as a solution.

		Alcohol as a role model. Parents aren't setting good examples. Parenting: role model – participation with youth. Safe environment. Outside influences i.e.: media, video games, values, etc. Lack of individual role models in families (self-assessment). Lack of role models for families – therefore they lack parenting skills (not accessing ext. family to assist families). Parents supporting alcohol. How people were raised. Traditions or family history. Parents don't have enough facts. Erosion of family. Growing up with alcoholism. Drinking all some have ever known (generational). Parenting is broken. Parents aren't setting good examples. Family influences.	

		Parenting/family time. Lack of parenting skills (values). Need to break intergenerational cycles. Lack of parenting skills – values.	

Existing Resources, Knowledge & Attitudes about Alcohol Restricts Community Actions ⟶

Solutions

Community Involvement	Education in Community	Needs Driven Programming	Education in Schools	Vision Plan & Clarity	Human & Financial Resources	Ownership of Problem
Apathy of community leaders. Collaborative environmental planning – make downtown inviting for all. CPTED for Downtown. Lack of collaboration between services. Getting the entire community united and on board. Need community commitment/support to address problems. Hopelessness of communities.	Education to hazards of use. Real understanding of what alcoholism is. Lack of awareness with what alcohol can do to you. Confusing message to public. Not anti-alcohol but pro responsible use. Freedom of Choice with responsibility to be informed. Education of adult population. Too much info at once. Education not	There are beliefs that there are not enough supports. Lack of programming for early years. Mentoring role models. Cultural divide – different treatment & acceptance! Lack of support after treatment is complete. Lack of treatment options – variety to meet needs. Focusing only on abstinence. Responsive not preventive. Too many band-aid fixes. Cultural divide – different treatment & acceptance. Level of harm not	Lack of Education – young age. Not applying knowledge. School lack of curriculum. Messages to youth are ineffective. Long term (youth) ongoing education (start young). Not enough awareness at younger ages.	How do we get it out to the community? About the vision. Common vision. Community acceptance of vision. Who vision is directed to. No public outlet for individuals / families to express needs / wants for their neighbor hoods. Is this only an alcohol issue, or drug / alcohol? Where to start? Perception as a prohibition	Funding for the vision to become a reality. Enough volunteers to continue planning and follow through with vision. Alignment of resources. Resources • People (volunteers) • Money Agencies are funded to provide crisis mgmt. – not prevention. Program funding short fall.	Ownership not my problem. Not my problem (attitudes). Want to blame others. Admitting to a weakness is hard. Ourselves – personal responsibility. You are part of the problem or part of the solution. Community – persons taking responsibility. Freedom of choice with responsibility to be informed.

	being provided of the current state: Fact Sheet Info Lack of understanding of trauma. Recognition as illness – compassion and empathy. Recognizing alcoholism as a disease. Effective education with follow-up. Inappropriate tolerance & attitude. Oppression. Road blocks in information sharing between services.	recognized. Education & understanding of alcohol treatment. 12 Step programs (i.e. AA) not mentioned in vision. The hours of service need to reflect the needs of the community. Treatment is too short. Lack of accessing the availability of what is offered. No go to place to assist individuals accessing services. Effective processes & programs. Community acceptance of residential treatment. Lack of late night transportation (impaired driving) and rural.		movement. Vision is not well known. Communication between community as a whole. Needs to be long term plan. Getting “The Word” out. Problem seems too big.		Community doesn’t buy in / see need for change.

Appendix 7.7: Strategic Directions – What can we do to deal with the obstacles and realize our vision?

Strategies Plenary Summary Chart

Focus Question: What can we do to deal with the obstacles and realize our vision?

Creating Healthy Community **2 votes**	**Marketing Responsible Alcohol Consumption** **13 votes**	**Facilitate Stakeholder Collaboration** **12 votes**	**Implementing Alcohol Community Mobilization** **6 votes**	**Implementing Programs to meet Community Needs that Ensures Access and Support** **6 votes**
Alcohol free activities. ********** Improving Outcomes. ********** Group Support. ********** Youth approaches. ********** Support parents. **********	Healthy campaign options. ********** Develop a communication plan. ********** Implementing community change towards alcohol. **********	Implementing Action Committee. ********** Engaging levels of influence in community. **********	Safe, free and alcohol free activities for youth. ********** "Proud to be alcohol free" programs. ********** Research based treatment. ********** Intervention, rehab and treatment. ********** Proactive services. ********** Early education targeting children and youth. ********** Parent/family support programs. ********** Mentorship.	Promote alcohol free event "General." ********** Research informed approaches. ********** Lobby for change. ********** Local Alcohol Controls. ********** Champion Leadership Accountability. ********** Enforce laws with visible consequences. ********** Increase % of alcohol revenues that goes back to community programming. **********

Creating Healthy Community

Alcohol Free Activities	Improving Outcomes	Group Support	Youth Approaches	Support Parents
Inexpensive and simple access to healthy options for low income families. Celebration of culture diversities at all levels. Positive family activities. Universal access to activities for youth. Alcohol FREE activities.	Don't rely strictly on measurable outcomes. Enhance incentives for people to make better choices. Mandate treatment & education for those convicted. Trauma knowledge to captive audience. THE BRAIN CONNECTION. Give reasons to provide motivation to change. Informing & getting everyone on board but also doing a follow up to see a lasting change. Stop enabling and make people accountable for their behavior. Recognizing & addressing trauma caused by residential schools & foster care drift. Drug & MH court options. Remove stigma of needing & accepting help. Government subsidizes responsible behavior.	Organize local community groups to come together to promote common causes. Target at risk groups for needed services. Small group information sharing. Create support groups to talk about addictions. Celebrate successes & support groups/ind that promote responsible alcohol use. Research successful programs and implement here.	More awareness at younger ages. Informing youth and young people what alcoholism can lead too. Opening a youth program, free of charge so youth / people will have something to do other than drink on a Friday night. Entertainment and activities available for teens. Safe and healthy environment for teens. More affordable things to do in Prince Albert. Implement education about addictions into school curriculum.	Positive parents. Identify individuals & families at risk and provide support. Enhancing services for at risk families. Support healthy family growth & development. Parenting workshops (extra judicial?) Support parents to be great parents. Encourage & educate on 40 Developmental Assets & Positive Ticketing.

Marketing Responsible Alcohol Consumption

Healthy Campaign Options	Develop a Communication Plan	Implementing Community Change Towards Alcohol
Ban alcohol advertising on TV and print (like cig advertising). Media campaign with motto or reminders. Work on eliminating alcohol (Television specifically) advertising. (Just like done for cigarettes). Follow success of tobacco campaign. Ban alcohol advertising (TV, posters). Ask individuals what they want / see as a need. Positive media messaging (impact messages). Control alcohol advertising as tobacco is now legislated. Restrain amount of alcohol and alcohol related commercials. Restrictions on media. (FB, Twitter, YouTube, Instagram). Community Campaign (PA & area) • Alcohol is not norm • Social media focus • PSA's work Showing the tragedies or crimes committed due to alcohol. Use media to report stories of positive / responsible change.	Create school programs and back it up with media campaign. Wordsmith language in campaigns to reflect community vision. Have awareness about the subject & have a plan for action. Culturally geared media campaign. **Our plan must be marketed promoted…..** Media campaign • Newsletters • PANow • Church bulletins Educational campaigns strategy by special task force (i.e. CORE) Education and awareness abt alcohol problem. Develop clear messaging & communication plan. Promote & change what is considered to be "normal" alcohol use. Spread public awareness with the strategy, solutions. Public campaign promoting strategy – All of us are part of the solution. Promote positive non-alcoholic activities. Use advertising media to our advantage.	Implement a campaign about local issues. Talk to the community openly about what situations we have with alcoholism within the community. Ask them to give their ideas and opinions. Continue to hold community strategic consultations regarding alcohol initiative. No more blind eye. Secure community buy-in & commitment. Make it "cool" to participate. Continue to actively involve community groups to start taking responsibility. Community must actually follow through with plan. Change of attitude, perception in our community. Community pride, community slogan. Programs to give people a better understanding of the consequences. Deploy the allocations toward the alcohol strategy. Clear and concise focus on strategy – Bold Community – who to involve?

Role models (advertisement). Get facts out through all forms of advertising (pamphlets, radio. TV, newsprint….) electronic media. Encourage possibility of change through social media. Warning pictures on alcohol products. Advertising a positive message that help can be had. Lobby gov't to reduce / cease sensationalized ads. Key messaging confident.	Education & awareness to reduce apathy. Educate community on possibilities of positive change (alcohol strategy).	

Facilitate Stakeholder Collaboration

Implementing Action Committee	Engaging Levels of Influence in Community
Create forum for better collaboration. Continue community mobilization efforts to facilitate interagency cooperation & proactive action. Encourage all cultures to become involved. Make it fun when delivering the message. Lobbying judiciary for support of multi-agency. Join forces with communities out of City.	Inform the public and engage in solutions. Public and agency engagement. Lobby non-gov't organizations for their skills / support. MADD. Involve youth, FN's, street people in strategizing. Accept social issues in PA belong to all of us. Community leaders assist in promoting the strategy & understanding of addictions. Town hall meetings to share info & invite ownership & action.

	Organize meetings with community stakeholders. Challenge status quo. Drop egos and start working from the heart.

Implementing Programs to meet Community Needs that Ensures Access and Support

Safe, Free and Alcohol Free Activities for Youth	"Proud to be Alcohol Free" Programs	Research Based Treatment	Intervention Rehab and Treatment	Proactive Services	Early Education Targeting Children and Youth	Parent / Family Support Programs	Mentorship
Universal access to activities for youth. Establish formalized social activities for all teens. Teens part of development. Youth activity centers in schools – safe (e.g. After school rec. programs) (4 – 8 pm) Ensure children are connected to supports to create	Not being judgmental….but to listen and help them. Self worth programs. Being yourself! Not following the crowd! Promote the freedom to remain unique, yet collaborate. Highlight positive initiatives related	Develop evidence based strategies that are valid, reliable & ethical. Treatment designed to support research based practice.	Initiate proactive intervention, support and/or treatment programs. Length of rehab include: • Longer stays • Family • Return Need City, Province, Feds More programs addressing healthy lifestyles.	Look beyond immediate problem to address root causes. Agencies ask for f/b on barriers to their service. (Human Service). Establish centralized multi-resource access facility. All agencies must refer to Hub to connect people to services. Convenience store approach to alcohol tx	Target children and youth. Decision making programs available in schools (part of ELA). Early teachings for alcohol education. Teach "consequences" of choices. Education can begin at	Selective programs targets high risk families. Support parents in parenting. Support initiatives that reduce poverty. Explore transitional programming measures e.g. Housing, life skills, employment, mentors.	Initiatives that inspire hope. Model / Mentor programs opportunities (start young). Role models to prove there is hope. Education & mentorship at early stages. Mentorship programs.

more resilience. Free fun gatherings • Self-esteem • Finding spirit • New personal script (FN Univ.?)	to peer pressure.		Seek funding for innovative treatment interventions. Increased one on one interventions. (cells, shelters, etc.) for those addicted.	/social needs. Rationalize existing programs, services, facilities. Create the network. Judeo Christian solution to wisdom and knowledge. Utilize AA / Clergy in all institutions. Encourage use of services available and connect people with them. Ensure addicted person is connected to healing, counseling resources. Streamline services. Change measures to focus on prevention rather than treatment / response.	elementary level. Implementing education early (childhood). School plus concept. Easier access to resources. Educating to deliver the message.		Enhance skills to make better choices. Male mentors for males – jail, streets. (A lot of focus on women, little for men). Creating supportive env. for taking personal responsibility.

Implementing Alcohol Community Mobilization

Promote Alcohol Free Events "General"	Research Informed Approaches	Lobby for Change	Local Alcohol Controls	Champion Leadership Accountability	Enforce Laws with Viable Consequences	Increase % of Alcohol revenues that goes back to Community Programming
Non-alcohol related events or activities. Host alcohol free events. No-alcohol policy for developmental sports teams. Alcohol free establishments. Promote alcohol free events. Find & provide grants financially to hold alc free events. No alcohol in public funded events.	Develop evidence-based strategies that are valid, reliable & ethical. Advocate to politicians with effective strategies, local, prov, federal. Identifying the real cost of alcohol abuse. Review, analyze what works – programs effective (not) focus resources. Encourage involvement despite / in spite political / financial interest (only accepting in our community what is good for us).	Break problems down to small steps. Break complex issues into smaller issues. Create pressure by lobbying gov't (at election time). Need to buy into it. Lobby to sell it. The message. Develop a lobby group – x section of community representation – to address policy changes. Obtain community buy-in & commitment to contribute to	Policies that address local issues. Local government to set local policy. Different – Identify policies and support change with accurate data and recommend solutions. Strengthen City Bylaws to prevent over-consumption of alcohol.	Leadership accountability! Make people accountable. Find a champion with power. Show the need for change to those who can make the changes. Strong leadership from stakeholders. Promote / elect actual leaders! Get it in writing from leaders of agencies.	Limit the amount of alcohol that is accessible. Mandatory ID at LB stores. Swipe ID. Partner with Prov. Gov't to develop responsible alcohol policy. Police outside the pubs. **Legislative change** • **Increase of cost** • **Labeling of harmful effects.** Enact more effective laws / policies. Multi-agency approach to liquor compliance, Education, Prevention & Enforcement. Increase # of liquor inspectors. Dedicate 1 to PA area. Identify gaps & flaws in policy /	Community consumption tax. Creative ideas to replace revenues. Provincial priorities assessed against social risk / harm. Expose / report Provincial revenue from alcohol sales. Find innovative ways to raise $$ to support Arts and Sports for kids. Re-prioritize government funding allocations. Make gov't more accountable for the revenues from sales of alcohol.

	Use of geo-mapping & hot spotting neighborhoods to prioritize response allocation. Hold politicians (starting at local level) to be accountable for being informed and aware of what is going on here. Opportunity for conversations – Privacy? Policies - & sharing of info. Research policy & legislation on a national scale. Present research findings to legislators – community demand for change.	positive change.			legislation regarding alcohol. Use the laws in place *Would you let your 12 year old take your truck for the night? Then why is it OK for 14 – 15 year olds to drink? Advocacy / Lobbying for legislative policy change. Propose higher age for drinking, more barriers. Not selling to somebody under the influence. Early alcohol cut off points at bars. Stricter ID policies. Limit on alcohol buying (like treaty smokes). Individual liquor consumption license.	Petition gov't for alcohol taxes to be put back into community. Alcohol tax dollars go back to community for neighborhood improvement. Gov't to use alcohol revenues for prevention & treatment only.

Appendix 7.8: Community Consultation Input

Community Consultation Feedback:

May 5, 2016
- Activities and social events that offer choices – alcohol, lemon water, tea coffee, more alcohol free drinks. This needs to be encouraged more. - Making a personal choice not to have a drink, others will follow your example. - Music events, activities that don't involve alcohol. They are cropping up in different cities. People who have quit drinking are looking for other choices and are very relieved to go out and enjoy life without alcohol. Post these activities if possible. This is more for the average person, not someone involved with addictions and law enforcement. This will help change the attitude.
- We need more awareness that we need deal with the alcoholic, not only ourselves.
- More helping agencies to promote not drinking during pregnancy or trying to get pregnant.
- Have a program to connect good to others good so they can leave the bad and learn more about the good they have.
- No liquor advertisement on TV or out in the highway.
- Aftercare: a home to go to after rehab.
- Recognize that PA has institutionalized racism.
- Call to Action to lobby the government to do more. Express an interest. - City Council must set an example with City events and Alcohol Permit denials.
- Better collection of data as it relates to alcohol use/abuse in Prince Albert.
- The creation of a data repository to track improvements and change from this strategy.
- Sustained funding for proven solutions and treatments.
- Signage that shows Sober House similar to the Northern Alcohol Strategy (on reserve). Harold and Joan
- Post-rehab transitional housing with supports - Like Oxford House currently operational in Regina and Alberta
- Educate Golf Course management on responsible alcohol consumption particularly around golf tournaments – enforce. - Outcome measurements for treatment programs being offered in PA. What is working and what isn't.
- Alcohol free Raider Games. - Mandatory Alcohol free grad parties at schools in Prince Albert - All adults acknowledging their role in teaching of youth about addiction - Welcoming and supporting marginalized people into our community - Compassion and kindness - Building community mentoring programs
- We need community commitment – letters of agreement to do something individuals, families, youth group as agencies, CBO's
- The community wins should be championed to show progress ex: PSCT results
- Stats need to be updated to 2016
- We need a Wet House and Safe Injection Site
- People drink because family has passed or something happened to them to release stress of what happened

- Hack into people iPods/iPhones once a month to see if they had been drinking or drunk driving
- Ask local communities how they deal with binge drinking and drunk driving
- More ghost cars/trucks
- Make vehicles that can scent out alcohol and shut down the vehicle if it smells alcohol
- Make more sweat lodges and healing circles
- Make a machine that can be installed in schools, cars/trucks that they have to blow in and see if they been drinking.
- Get the youth doing what they like doing like fishing, hunting, skate boarding and other stuff to get alcohol off their mind or make a youth center
- Post warning messages in the media
- Put warnings on video games like PS3, PS4, Xbox1, Xbox
- Put cameras on street lights
- Make a machine that can catch fake ID's

- FASD assessments and supports for children/caregivers. Difficult process in SK. Limited resources available without diagnosis. Parenting strategies/resourcing/training. FASD Network training.
- Family Treatment Centre. 2nd stage resourcing and supports (transportation and childcare for meetings). Partnership with Homeward Bound.
- Resources to address underlying trauma that contribute to substance abuse (ie. Sexual abuse, residential school, grief, etc.) Especially resourcing Mobile Crisis and Sexual Assault Worker.

- They could add what alcohol does to your central nervous system (cns), the affects to your brain, how alcohol creates affection to your ulcer. Make alcohol less avalible, and the lever, lable the alcohol.

- Government priorities are not aligned with health indicators. Increasing access at the same time as they recognize the harm.

- They could put images that show people and teens what regular brain and what abused with alcohol, or I think they just plain band alcohol.
- They should band commercials of beer that make beer look good and fun to drink.
- Make a beer license but fake ingredients.

- Government mixed message (policy)
- Balance for responsible drinkers

May 12, 2016

Email Feedback submitted May 11 2016

1.) Prince Albert needs adequate social and regulatory supports if it is going to overcome challenges with liquor consumption – and that will mean putting pressure on the provincial government to increase those supports. As it stands, those supports are inadequate, and in some cases are being cut further. As already noted in the draft report last month, Prince Albert is badly underserved when it comes to liquor inspectors, and the number of inspectors covering the city needs to be increased to a reasonable level.

Community members may also be aware that, as of June 1, the Prince Albert Mobile Crisis unit will no longer be providing daytime services Monday to Friday as of June 1st. Currently, frontline staff provide services 24 hours a day, 7 days a week delivering care for individuals and families in need of crisis intervention, including addictions counselling and referrals. The P.A. Mobile Crisis Unit has seen a 19% increase in demand for services since 2013, but is still facing a major cut to its ability to provide services to the community. The concern here is that efforts to improve Prince Albert

residents' relationships with alcohol will lack yet another form of support in the community. 2.) The provincial government plans to introduce a new private liquor store in Prince Albert. We urge you to consider the importance of a publicly-owned liquor retailing system in minimizing the social harms caused by alcohol. A wide range of public health authorities and advocacy groups across Canada and the world – such as the Centre for Addiction and Mental Health, the U.S. Centres for Disease Control, and Mothers Against Drunk Driving – hold the opinion that privatization increases the social problems, health issues, and safety concerns that go along with alcohol consumption. We're certain you will carefully consider the idea of whether Prince Albert needs another liquor store, but we urge you to also consider who should own that store. Government-owned liquor retailers can afford to sacrifice some profitability in the name of minimizing excessive liquor consumption, because government will more than make up the difference through savings in health care, law enforcement, and social services. Private retailers do not have this flexibility – their only goal is to maximize profits, and that goal will come into conflict with the healthier relationship with alcohol you are trying to build in your city.
- Find funding to hire a Youth Coordinator for the City of Prince Albert. Engage a representation of all youth to organize alcohol free weekend social activities (13 yrs and up). Possible venues: community clubs and schools
- Say no to liquor stores open to 3:00 am - Say no to drive through liquor sales - Say no to home delivery
- Start education re: healthy lifestyles in school <u>early</u> – Grade 6 is too late - Increase education in school around mental health and coping with anxiety
- Local controls: off sale hours – currently controlled by SLGA. Control of actual liquor stores – municipal leadership
- Lobby government to increase funding to community programs that address the foundational issues of alcohol abuse: - Food Bank - Mobile Crisis - Counselling - Spiritual care - Youth education, etc.
- The Province or City "possibly" must own the liquor stores to secure revenue and pricing and access to alcohol. - Local municipal control.
- Mental Health needs to be addressed: - Early intervention - Available services - Education - Where is the money going to come from to provide these services? Detailed outline and government commitment. - More programs to address grief and trauma - Regulate hours NOT SO LATE OFFSALE!!! - AA groups promoted and available in all areas of the community

- Emergency professionals: Police, Healthcare having information of available services in the community available to people in need. - If underlying issues of poverty, mental health, trauma, grief….are not addressed, alcoholism will always be an issue.
- Do not expand the current alcohol retail system until further analysis is completed. The new reforms need to be viewed through this type of lens.
- Unique solutions to bring the concerns of the community in alcohol use to a level of similar size communities - Reduce access - Local control of rules around alcohol - Target lobbying to favourable politicians. Those more likely to champion your cause.
- Mental Health – alcohol inducing mental health issues - More treatment options in PA and area for adults and programs/treatment that also include mental health component. - Champions/Role models – attraction rather than promotion - Promotion of healthy hobbies, exhibition of fun without alcohol - Get rid of drive through off sales - Bring back to PA the AA luncheon for education on Alcoholics Anonymous (used to be put on by the PA Roundup) to inform professionals/public. - Greater health care support especially for mental health patient, I think more resources are needed. - Education – peer to peer
- How does 50 licensed outlets compare per capita to other communities. It seems excessive. - When did the 3:00 am closure of drive throughs first come to being? Have them all closed by 1:00 am. Alcohol is too easily accessible. - The attitude towards people with a drinking problem troubles one. I've been picked on even though I don't drink as I spend a lot of time on the street (collecting cans). - The commercial: For every changed life there is someone who made it happen." Addicts get put down a lot instead of pulled up. Places who have been given the power of banning a person for life takes away the reward for improvement. - The City of Prince Albert leadership refusing to comply with Provincial and City laws teaches youth and people that the laws mean nothing in Prince Albert. When smoking is allowed with no consequences. It says something about the disregard for law and decency.
- Truth and Reconciliation Committee – What does this mean to Prince Albert? - Youth – how do we encourage them to have fun without drinking – seems the norm is to go out and get drunk on the weekend. - What is responsible drinking? How do we teach it? - Advertising – telling us where alcohol can fit into our lives – it seems to be part of everything we do….even at movies, holidays and vacation. - Deal with trauma, pain and self-medicate with alcohol. We need to get to root causes. - Have young people who are in recovery act as mentors for younger people who are starting to experiment with drugs or alcohol. - Better regulations of dances eg. Community Clubs, Country North show, Voices of the North etc. eg. Have dances without serving alcohol. - Create Youth Activity Centre in neighborhoods. - Leader
- Regulate the number of dances allowed. Dances that serve alcohol. - Voices of the North/Country North Dances – alcohol promoted – STOP! - Bar owners need to be responsible ie. Train workers on cutoffs/taking keys, etc. - Role modeling attitudes about alcohol use. - Social media forums: FB page, Blog, Twitter – make the input process more accessible by whatever means possible - Declare year of (the start) Reconciliation in PA (TRC) – alcohol freedom included City of PA, PAGC, Metis Locals, CAP, Friendship Centre,

- Videos by kids on alcohol abuse - Inter-agency meetings ie. Lunch networking functions - Bear Paw Patrol in Winnipeg example look at other strategies - Community Talking Circles include Police/authorities, etc.
- ie. Simon House – Calgary – long term phased treatment and recovery homes – will assist housing, employment and sober living.
- Reconciliation – First Nations involvement ie. Leaders - Social Services/ Social Assistance/Social Workers - Minister of Social services involvement. Are clients being treated with respect & dignity? Do they feel empowered or disempowered by workers? Is there a threat of withholding finances/checks because of addictions? It is not only about referrals. - LGBTQ Involvement: Pride Week May 29th – Addiction Services LGBTQ Support Group – AA LGBTQ Saturdays - Talk with family, friends, children about stigmatization, not only alcohol consumption - Going to communities on personal level to get to know the people & isues - What are the grassroots on the ground doing & seeing? What works for them & what doesn't?
- A showcase of "fun" activities that do not involve alcohol – Sport/Leisure – Arts
- Transitional homes – those coming out of treatment - Classes in schools dedicated to knowledge - Youth/peer support at schools
- Advocating for treatment centre in PA (adult & youth) - Youth run and created activities – ALL SCHOOLS
- We need to find a way to support families that are having difficulties with life – parenting, financial, socially. More programming for children so that they are learning skills and developing a positive view of life.
- Find community champions - Tell stories and provide role models that promote – not put them on a pedestal - Positive role models
- Bikers of Prince Albert sober ride – promote alcohol awareness – sober driving and motivate teens to find healthy hobbies/past times - I would love to volunteer to organize something like this. Just to get the word out.
- Youth Related Ideas - We need Youth Activity Centre back – find old building – get teens involved in renovations so they can make it their own - Library offering free activities – they already do but maybe more - Free activities after school – families don't have money - Alfred Jenkins offering free programs - Movie theatre offers free matinees – can they offer more for teens? - Sayknow.org – come to schools – great information/speakers - Wet housing for homeless? Safe place to go – follow harm reduction concept
- Educate the public about the Low Risk Alcohol Drinking Guidelines

Community Consultation Commitments:

May 5, 2016	
Fern	- Steering Committee - Modelling sensible use of alcohol - Speak to local sport teams re: role modeling appropriate use
Troy	- Lobby Federal/Provincial governments re: fit - Encourage youth to look for those peers doing the right thing
Cameron	- Put up signs around neighborhood
Seth	- Continue to participate in events like this and tell his friends about the effects of alcohol
Stacia	- Action planning training - Lobbying governments to mobilize people
Ethan	- Undercover cops trial a social experiment and put on social media - Mingle with youth to find out what is really going on and why
Markus	- Teach children about alcohol and make good choices - Continue professionally and contribute as a volunteer
Shirley	- Drive change in family and community - Support and assist in action planning (when you have time)
Jim	- Continue on Steering Committee - On Public Safety Compliance Team - Lobby government – be part of team - Continue to encourage “get a safe ride home at events he goes to”
Toni (SGI)	- get into more high schools in PA and talk about consequences of drinking/driving - Grade 7/8 – impaired driving effects making better decision and not get into car with those driving impaired
Donna	- Be a better example - Inform people of events where there is no alcohol - To help youth to build self esteem so they know they don’t need alcohol
Karen	- Steering Committee support - MADD - Bring awareness to non-drinking and spread in own circles
Shelley	- Steering Committee - Advocating in schools to look at healthy relationships with alcohol - Binge drinking not OK - Support youth in family to continue to make good choices

Rick	- Steering Committee - Being advocate of promoting strategy and importance of getting involved
Suzie	- Steering Committee - PSCT team - Meet Homeward Bound re: role to play in partnership
Bill	- Steering Committee - Become a better liaison with other groups/committees
Steven	- Steering Committee - Figure out how to bring back YAC
Jeff	- Steering Committee - Youth mentorship in family
Spencer (Media)	- Look for positive stories about people making a deifference in our community - Write up a story of tonight's consultation meeting
Tyler (Media)	- Ditto above - Being more critical about why alcohol needs to be part of events
Trina	- MADD – Implement binge drinking and healthy relationships with alcohol into community presentations and events instead of just focusing on only impaired driving. - Prepare and be open to collaboration with other groups when the opportunity arises. - Work harder to get into schools – elementary and high schools. We have programs to offer for almost all ages.
Rob	- Commit to bringing two new people to May 12th session
Marcia	- Be a good Elder - Take care of youth who want something better - Treat alcoholics as if they are human - Address racism
Irah	- Teach young people how to speak clearly and positive for healthy ways
Glenis	- Commit to spreading the word and supporting this process and actions that have begun in support of improving the altered tolerance.
Tamara	- Continue to offer sober rides to friends and family - Work hard on the data collection piece
Veronica B.	- Go to Al-Anon open meetings or AA open meetings if you have family or neighbours what to find out about alcohol abuse
May 12, 2016	-
Robert	- Steering Committee and on committee that plans many events. Will promote safe responsible use of alcohol.

Martin	-	Lobbying efforts by City, controlling hours of off sale and changes for responsible use of alcohol.
Bob (SGEU)	-	Take back to own organization to make changes; ask gov't to hold off on changing legislation.
Kevin (SGEU)	-	How do we lobby gov't, get message to gov't – being a pair. Help to get access to government's ear in the right way.
Nicole (NDP)	-	Support from Provincial gov't. Share with fellow co-workers, spread the word/message to get support from others.
Nora	-	Share information with Ministerial Assoc. (60+ churches). Host community consultation session with community churches.
Michelle	-	Addiction Counsellor (women). Organize event ie. Biker Sober Event; healthy hobbies
Ashley	-	Youth involvement – coping; develop strategies – summer activities that are free and safe.
Dave	-	Continue to encourage staff to volunteer to assist people with drug/alcohol addictions. Staff already supported 15 – 20 hours on own time.
Teegan	-	Continue to work with Dave and keep investing time in helping clients at Homeward Bound.
Shawn	-	Stay in recovery, stay grounded to communicate to others that it can be done; connect them to resources, walking the talk, continue to participate at grass roots level and connect to leadership (FN) and LGBT – getting word out that there are supports for all people.
Marg	-	Continue to spend time on street assisting others to have a voice and help with whatever is needed.
Tamara	-	Dry wedding