

greatly from strict editing and adding subtitles. This holds true for the main part of the book as well. I was troubled not to find the logic as to why some of the chapters are organized with subtitles (physical effects, psychological aspects, prevention and health education) and others without, or only a few (drinking in pregnancy, treatment issues). Actually, these are some of the reasons why my review of the book is a bit uneven. In some chapters the author reports on one study after another without linking them.

Chapter 6, on treatment issues, is my favorite – even without subtitles. Moira Plant has contributed not only the research results but, in addition, her long experience and expertise in clinical work. The reader feels her deep understanding, empathy and humanity. Her advice is especially valuable, not only for the practitioners but also for all of us who have a parent, spouse or friend, who is a heavy drinker.

I find it also admirable how the author balances conflicting evidence, critically assesses the results, courageously opposes fashionable trends in the field and disproves many myths which have prevailed around the topic.

The bibliography is nearly 140 pages long. Many sources, although not all, have been cited directly in the text. The author herself points out that it is selective information from the industrialized countries, in which the US and the UK are over represented. It would have

been improved by a reorganisation according to the different themes and stricter selectiveness. Even so, I was pleased to find several useful references. However, for those who are interested in Jellinek's papers, I would like to report that the Jellinek citation to 1976 in the

text does not exist: it is in fact the Jellinek of 1945.

In summary, this book should be of great practical help to clinicians as it contains a wealth of reference material and suggestions for prevention and treatment.

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What Can We Learn from the Canadians?

REGINALD G. SMART & ALAN C. OGBORNE: NORTHERN SPIRITS.

A social history of alcohol in Canada. Addiction Research Foundation. (Revised 2nd ed.). Toronto, Canada 1996, 262 p.

● *Northern Spirits*, by Reginald G. Smart and Alan C. Ogborne, is a comprehensive account of the Canadians' experiences with alcohol from the first European settlers until the late twentieth century. My general impression from reading the book is that the Nordic countries can learn a great deal from the experiences that Canada and other Anglo-Saxon countries have gone through during the past decades.

Both Canada and the Nordic countries have a long history of alcohol (spirits) abuse and of legal controls on drink and drinking. In both, the early temperance movement emerged during the first half of the nineteenth century at a time when the consumption of these countries' predominant beverage, spirits, reached levels never

equalled after, and probably never before either. The "typical" Nordic model of alcohol control, which has been characterised by systems of state-owned monopolies (and thus a rather low presence of private profit interests), low availability and high prices, has during the last several years gone through some of the most radical changes it has seen this century. Membership in the European Union (EU) has already contributed to a liberalisation of the policy, and more is likely to come.

Several of Canada's provinces have already experienced those (or similar) changes that currently are taking place in the Nordic countries, especially in Finland and Sweden. Private profit motives, market forces and changed attitudes among

the general population during the past decades have contributed to a relaxation of alcohol control in Canada's provinces. An improved knowledge of Canada's past experiences could add significantly to the understanding of alcohol in the Nordic countries, in general, and the effects of changes in their alcohol control policies, in particular. Seen in this light, it is rather surprising to find that, despite the current changes in the Nordic countries, few seem to have taken an interest in Canada's and other Anglo-Saxon countries' similar experiences.

This is the second edition of *Northern Spirits*. Compared to the first edition, the authors have included recent Canadian research and a new chapter on the treatment of alcohol problems. Several of the chapters have also been revised heavily. The aim of the book is very broad: namely, to describe the history and present the status of drinking and drinking problems in Canada. It also discusses different preventive strategies. This broad approach gives the reader an excellent insight into role of alcohol in Canadian life today and earlier. However, at the same time, the same approach limits the depth of the topics discussed. In this respect, the book comes close to a review of experiences and research in Canada.

I will concentrate on those topics which are of special interest for the Nordic countries; that is, the effects of changes in alcohol control policies and the

priorities of prevention during the past decades in Canada. Before embarking on these topics, it should be mentioned that Canada is a very large country, consisting of 12 provinces with their own governments, which have considerable independence in health and social issues, including alcohol issues. Other aspects of alcohol policy, however, are the responsibility of the federal state: the most important of these being parts of the fiscal policy.

The first three chapters give a historical background of drinking in Canada. Before Canada was settled by Europeans there was no drinking. Soon afterwards it became extensive: heavy drinking was common among the first Europeans. It spread and became detrimental to some segments of the Indian population, especially to the Indians involved with Europeans in the fur trade.

The authors describe the emergence of the temperance movement, its rise and subsequent fall. Canada belongs to one of the few Western countries which have experienced prohibition. The temperance movement was, among other things, a reaction against excessive drinking and drunkenness in the first half of the nineteenth century, as was the case in the Nordic countries. The fall of the movement occurred earlier there than in the Nordic countries. According to the authors, the reasons for the decline of the movement were the failure of prohibition and demographic and social changes

that reduced the relative size of the driving forces behind the movement, i.e., the Protestant religious organisations.

The authors stress that the general negative view prevalent today toward prohibition, which is seen as a complete failure, is not fully warranted. It was perhaps a failure in terms of problems with legal enforcement, as it was in the US, but it is also quite clear that it did reduce the level of several alcohol-related problems. What is more, the prohibition movement was popular in Canada until the 1920s. Prohibition developed during the First World War, but soon after the end of the war, it was voted down in several provincial referendums.

The temperance movement never recovered from these failures. The authors conclude that after the prohibition era, the ownership of the drinking question has passed slowly from the temperance movement to the provincial governments, which continued to run rather restrictive control policies by limiting the access to alcohol through provincial commissions and monopoly systems.

Chapters 4 to 6 deal with drinking in Canada today. To get a better picture, I will compare the figures from Canada with figures from Sweden and/or other Nordic countries. Canadian surveys show that approximately 25 percent of the adult population do not drink any alcohol. It is not clear whether this refers to life-long

abstinence or one year abstinence, but probably the latter. In either case, the figure in Sweden is much lower. The proportion abstaining during the last 12 months at a minimum has in recent surveys been estimated at 11 to 12 percent (Kühlhorn & Leifman 1997). Canadian surveys also show that the consumption for men is roughly 2.5 times higher than for women, which correspond rather well to Swedish figures. The level of drinking is also higher among those with higher educational level, higher incomes, employed people and those who are single, separated or divorced.

In Sweden, the pattern is somewhat different. The highly educated do not have a higher overall consumption level. As a matter of fact, the alcohol consumption level is rather similar in different social classes, whereas the proportion of heavy drinkers among men is higher in the lower classes (see Leifman 1997).

As for incomes, the consumption increases with an increase in income, but only up to a certain level. Survey data from Sweden show that among the highest consumers, the income level is lower than in the preceding consumer groups. We also find small differences between the employed and unemployed in surveys from the mid-1990s (e.g. Leifman 1997; Kühlhorn et al. 1997). In line with Canada, the data from Sweden also show that single, separated or divorced drink more than those married (or

cohabiting).

According to sales data, the per capita consumption increased in Canada until the late 1970s and decreased by about 22 percent from 1978 to 1990, thereby showing similar trends to a number of other Western countries. The largest decline appeared in the 1980s, while the decline in Sweden was the most marked from the late 1970s until the early 1980s.

Both Canada and the Nordic countries have been typical spirits-drinking countries. However, in the past decades, both have shown large declines in its consumption. Today, beer constitutes 56 percent of Canada's total alcohol consumption. An international comparison shows that Canada is ranked in the middle of the Western countries in terms of per capita consumption, with 7.1 litres pure alcohol in 1990. In Sweden, the per capita consumption was 5.5; in Finland 7.7; and in Norway 4.1 litres. However, the amount of unrecorded alcohol consumption is most likely higher in the Nordic countries, making the real differences smaller (see e.g. Kühlhorn, forthcoming).

Two things become quite clear from reading Northern Spirits. First, that both Canada and the Nordic countries in many respects show the same trend for the past decades: for example, the increase in the number of women drinkers and in their consumption levels, the decline of spirits consumption and the increase in beer consumption. Second,

where differences have occurred, they have been reduced. For example, the proportion of public drinking (restaurants, bars etc.) has decreased in Canada, and the proportion of consumption at home, increased. In the Nordic countries the trend has gone in the other direction.

Chapter 7 discusses alcohol problems in Canada today. Since the authors have shown the trends in drinking for the past decades it could be assumed that they would also show the trends for various alcohol-related indicators. However, for most problems they do not, which is a shortcoming. This chapter, then, rather takes the shape of a text book, where one problem after another is briefly discussed and some data presented without backward references or comparisons to other countries. However, I will mention two of the problems included in the chapter: namely, drunk driving and liver disorder.

Drunk driving prevention is an interesting case from an alcohol policy point of view, because it may shed further light on the likelihood of influencing alcohol-related behaviour without primarily aiming at reducing overall consumption in society. During the past decades several Western countries, among them Canada and Sweden, have increased their preventive measures on drunk driving, and the attitudes among the population have changed. However, it is not quite clear from the book what

measures have been conducted in Canada, other than increased police spot-checks (not to be confused with random breath tests) and several information campaigns. Once again, it is a pity that the authors do not find the space to delineate this topic in detail. However, the proportion of fatally injured car drivers with a blood alcohol content in excess of the legal limit of 80 mg/100 ml is mentioned. In 1990, the proportion amounted to 35 percent. In Sweden the proportion was 25 percent. The following years the proportion in Sweden went down to about 18 to 19 percent. The trend in Canada is not mentioned.

Also liver cirrhosis deaths have decreased in many Western countries during the past 10 to 15 years. However, the Canadian development is not discussed in the book. Reginald Smart and his colleagues have on many other occasions discussed the reduction in cirrhosis using Canadian and American data. One explanation put forward for the reduction is a changed and increased alcoholism treatment, especially the increase in number of AA groups (e.g. Smart & Mann 1991). The causal inferences of these studies are weak, but it is still an interesting phenomenon that several alcohol-related problems have decreased while the consumption in several countries has been rather stable. It is thus likely that other important factors, other than overall consumption, influence the cirrhosis trends. Exactly

what those factors are is another question.

Taken together, the data from Canada and other Western countries imply that it is possible to reduce alcohol problems without primarily targeting the overall per capita consumption. In fact, the opposite direction may be true, namely that a reduction of the incidence of alcohol problems (e.g. drunk driving) and heavy drinkers (as indicated by a reduction in cirrhosis) may reduce the overall alcohol consumption. This is particularly interesting in the light of the current situation in the Nordic countries, where the traditional means of alcohol control are weakened.

Chapters 8 to 10 are perhaps the most interesting from a Nordic point of view: they deal with alcohol production, taxation and control; the effects of alcohol control and preventive strategies; and changes during the past decades. In Canada, the federal government has control over some aspects of how alcohol is marketed, and they also tax alcohol beverages effective in all provinces. In practice, alcohol control in Canada is governed by the provinces themselves. Despite the provincial bearing of the alcohol control policies, the author of the introduction, Robin Room, points to the many similarities and talks of the "Canadian model" of alcohol control. The model combines several elements; namely, a relatively high price level, a provincial monopoly of the wholesale and

retail trade in spirits and wine (and often of beer) and a strongly regulated on-premises licensing system.

Canada is thus one of the few countries to have monopoly systems for alcohol control. Since the 1960s these provincial systems have seen a relaxation of their control functions and, during recent years, large scale privatisation has threatened the future of the monopolies.

The most usual sales outlets for beer, spirits and wine are the monopoly-owned stores. Beer is also available through brewery stores, licensed vendors or grocery stores. Interestingly, a few provinces nowadays allow the sales of alcoholic beverages in grocery stores: for example, Quebec, wine and beer; Ontario, wine in a few large stores; Newfoundland, beer; and Alberta, the only province where all alcoholic beverages are for sale in independent grocery stores (since February 1994).

The extent of advertising for alcohol beverages is much smaller in Canada compared to many US states and European countries, but higher compared to most Nordic countries. Advertising in Canada involves many regulations, both on the provincial and the federal level. Until recently only beer and wine have been allowed to be advertised on radio and television. However, in 1995, a federal court decided that spirits also could be advertised in these media. Additionally the legal drinking age has changed over time. Before

1970, the legal drinking age was 20 or 21, but between the years 1970-1975, all provinces lowered the age limit to 18 or 19.

Finally, the authors point out that from the late 1980s onwards the provincial control policies have become more influenced by external factors, such as the GATT and NAFTA treaties, which have increased the importation of alcoholic beverages. Similarly the agreement with the European Union has led to reduced prices for beer and wine imported from EU, and given spirits from EU equal access to the domestic market.

In summary, the overall Canadian control policy is, from a Western perspective, still restrictive despite the fact that the physical availability has increased during the period from the late 1940s until today. Several of the changes that have occurred make room for interesting evaluations, some of which have been made. However, the Canadian experience is seldom referred to in the debate of the future alcohol policy in the Nordic countries.

One interesting case is the province of Alberta. The authors mention that the prices so far have risen by as much as 15 percent, after the privatisation of the retail system (presumably from February 1994 to the end of 1995). The effect on consumption and problems is not discussed. I do not know the extent and design of the evaluation conducted or possible evaluation plans for the fu-

ture. In any case, Alberta is an interesting case to follow in the future when more time has elapsed.

Several studies on the effect of alcohol control in Canada are mentioned. Among other things, the authors refer to a number of studies that have analysed the effect of the density of retail outlets, types of outlets, hours of sale, drinking age, advertising and promotion on the consumption of alcohol. One problem is that the evaluation designs and methods are seldom mentioned, which makes it more or less impossible to know if the studies applied a sophisticated or less sophisticated method, with less control over potential confounders. Smart and Ogborne, however, conclude from the Canadian studies on the density of retail outlets that the evidence for a cause-and-effect relationship is mixed and a conclusion, therefore, is difficult to make.

This may be a correct conclusion based on Canadian data, but there are many studies from other countries where the conclusion generally is the opposite (e.g. Edwards et al. 1994). It is hardly too much to ask that at least some of these results be mentioned. The authors do, however, mention that most studies in Canada and the US on the effect of lowering of the drinking age showed an increase in both drinking and alcohol-related traffic accidents among young people.

As mentioned one important

result is that despite increases in availability, the consumption has decreased during the last 10 to 15 years. The authors thereby raise serious doubts about the importance of the physical availability in lowering alcohol consumption. It cannot be ruled out, of course, that availability plays a minor role. However, it can not be ruled out either that availability plays an important role, but that other counteracting factors play an even greater role. In another chapter, the authors mention changes in attitudes and lifestyles as well as altered behaviour due to the increase in alcohol education and health promotion programs.

Still, the fact that consumption has declined in Canada when alcohol availability has increased makes one wonder whether the future increase in accessibility of alcohol in the Nordic countries must necessarily be followed by an increase in consumption and alcohol problems. At the time of the writing of this review (December 1997), there is no evidence that the consumption has increased in Sweden or Finland, despite a general increase in availability of alcohol. However, there are already signs of counteractive forces, at least in Sweden. The Swedish attitudes towards sales of alcoholic beverages have also become much more restrictive during the last one to two years compared to 1993-1994, when EU in many people's eyes was perceived of as the promised land, at least when it came to alcohol. On

the other hand, it should be pointed out that perhaps not enough time has passed. The increase in accessibility so far is modest; more is perhaps coming, which may change the situation completely.

Concerning the prevention of alcohol problems, which is discussed in Chapter 10, I confine myself to a short comment on the drunk-driving issue. Not surprisingly, this has frequently been on the public agenda in Canada. Here the public supports increased efforts to prevent drunk driving. Surprisingly, the authors state that the increase in penalties in Scandinavia has not worked. This is simply not correct. The generally strict drunk-driving regulations in Sweden seem to have had a lowering impact on the incidence of drunk driving. For instance, the reduction of the legal BAC-limit in 1990 appears to have decreased the extent of drunk driving (Norström 1997). Moreover, in the next paragraph, the authors state that research shows that the best method for discouraging drunk driving is to make people believe that they will be caught and punished. As a matter of fact, this is actually what has been done in Sweden during the past decade. The permissible blood alcohol level in Canada is still 80 mg/100 ml, which is much higher than in the Nordic countries. Canada still has the potential to reduce the permitted BAC and to introduce random breath tests (which, I believe,

are not legal), both with a potential deterrent effect. In the concluding chapters, Smart and Ogborne discuss, among other things, the alcohol policy and the greatest needs in the future. According to them, there should be an increased emphasis on prevention, targeting risk- and vulnerable groups (heavy drinkers, alcoholics, young people), especially by means of educational programs and measures that prevent the occurrence of certain alcohol-related problems, especially drunk driving. General population-based preventive measures that lower the availability and that strive to reduce overall consumption are not mentioned, except the need to maintain high real prices of alcoholic beverages.

The Nordic countries' prevention policies are still, to a large extent, resting on general preventive measures that are aimed at reducing availability. However, a certain shift in targeting is already visible and will perhaps become more apparent if the traditional means of control become even less possible and primary prevention turns out to be very much a matter of education and information. The main question is, then, if the traditional means will continue to be eroded. If so, the Nordic countries have even more to learn from the past experiences in Canada and in other Anglo-Saxon countries, and Northern Spirits becomes even more important to read.

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