



# Potential Health Effects of Expanding Liquor Licenses to Grocery and Convenience Stores

Kansas Health Impact Assessment Project



## Overview: Potential Health Effects of Expanding Liquor Licenses to Grocery and Convenience Stores: Kansas Health Impact Assessment

During the legislative session of 2014, Kansas lawmakers considered amending the Kansas Liquor Control Act to allow convenience and grocery stores to hold retail liquor licenses. The Kansas Health Institute (KHI) conducted a Health Impact Assessment (HIA) to examine how this legislation might positively or negatively affect the health of Kansas residents.

An HIA is a practical tool that assesses the health impacts of policies, strategies and initiatives in sectors that aren't commonly thought of in relation to health such as transportation, employment and the environment. The overall goal of an HIA is to inform decision-makers of potential health benefits and adverse health effects of proposed actions and to support identification of appropriate policy options. In order to assess the potential health effects of expanding Kansas liquor licenses, the HIA team reviewed existing literature, analyzed state and national data and gathered stakeholder input from various groups. The assessment of health effects was guided by several research questions related to Kansas liquor law changes, including:

### Research Questions

1. How could the expansion of retail liquor licenses to grocery and convenience stores affect consumption of full-strength beer, wine and spirits?
2. If changes in consumption occur, to what extent could they affect traffic accidents, driving under the influence (DUI arrests), crime, sexually transmitted diseases (STDs) and related health effects?
3. *How could the expansion of retail liquor licenses to grocery and convenience stores affect jobs, health insurance, income and related health outcomes?*
4. *How could the expansion of retail liquor licenses to grocery and convenience stores affect state and local tax revenue, funding for health-related services and related health outcomes?*

The review of existing literature revealed limited evidence related to the impacts of expansion of liquor licenses to grocery and convenience stores on jobs, health insurance, income and state and local tax revenue. As a result, *the HIA team excluded the last two questions from further assessment* but included stakeholder perspectives on the economic impacts of this legislation in the report in order to highlight the importance of these issues to community members. However, the HIA report doesn't include any findings, recommendations or projections on these topics.

The HIA assessment primarily focused on the first two research questions and the report details how this legislation could affect overall alcohol consumption, DUI arrests, alcohol-related traffic accidents and traffic mortality, crime, STDs and vulnerable populations in Kansas. Throughout the report, special attention was given to populations that could be disproportionately affected by changes to the law, including youth.

### Summary of Findings and Recommendations

The proposed legislation (Substitute for House Bill 2556), stipulates that the number of retail liquor licenses (Class A — full-strength beer, wine and spirits) in Kansas will be held at the current level of 753 until 2024. Starting in 2019, about one-third of grocery and convenience stores will be eligible to receive a transferred license and sell full-strength beer (Class B) (*Figure 7, page 28*) or wine (Class C), within geographical restrictions set forth in the legislation.<sup>1</sup> After the license cap is removed in 2024, the number of off-premise alcohol outlets in Kansas could increase significantly up to a total of 3,015 as grocery and convenience stores would be eligible to apply for retail liquor licenses. However, this increase would depend on the number of grocery and convenience stores that apply and receive liquor licenses, as well as the number of liquor stores that transfer their licenses to grocery and convenience stores.

Although the Substitute for House Bill 2556 doesn't explicitly stipulate what type of liquor licenses grocery and convenience stores can obtain after 2024, it is understood that grocery and

convenience stores would be eligible to apply for all three types of retail liquor licenses.

Increasing the density<sup>2</sup> of off-premise alcohol outlets<sup>3</sup> after 2024 may increase alcohol consumption. However, the level of changes in consumption will largely depend on the magnitude of an increase in the density of off-premise alcohol outlets. The evidence suggests that consumption may increase slightly for the general population and may increase more for youth. The projected changes in consumption for youth may result in an increase in alcohol-related traffic accidents and STDs. Additionally, availability of alcohol in grocery and convenience stores may increase theft of these products among youth. However, a slight increase in consumption for general population is projected to result in a small increase or no change in DUI (arrests) and alcohol-related traffic accidents. Furthermore, an increase in density of off-premise alcohol outlets and consumption may lead to some increase in violent crime (e.g., domestic violence, child abuse), and STDs.

There are vulnerable populations that may be more impacted by changes to the Kansas Liquor Control Act than others. Vulnerable populations can be defined as populations that have experienced greater obstacles to health based on their racial or ethnic group, religion, socioeconomic status, gender, mental health, cognitive, sensory, or physical disability, sexual orientation or gender identity or geographical location.<sup>4</sup> For example, low-income neighborhoods generally have more outlets for alcohol beverage sales and higher rates of youth binge drinking. The HIA found that youth consumption of alcohol would likely increase under the new legislation, which

could lead to negative health outcomes for that population. To mitigate the potential negative health effects associated with the proposed changes to the Kansas Liquor Control Act, the HIA team, with input from stakeholders, developed a set of evidence-based recommendations to inform the decision-making process:

- Track changes in number and density of off-premise alcohol outlets by type (i.e., grocery, convenience stores).
- Include questions in the State Added Module of the Behavioral Risk Factor Surveillance System (BRFSS) related to where Kansans purchase and consume alcohol and the type of alcohol consumed.
- Include questions in the Communities that Care survey (CTC) to determine where Kansas youth obtain alcohol products (grocery, convenience and/or liquor stores) and the type of alcohol consumed.
- Use the KHI HIA Liquor Project “Monitoring Plan” (included in this report) to develop a robust protocol to track the impact of this legislation on relevant health indicators and costs.
- Maintain geographical restrictions on license issuance after 2024.
- Maintain limits on days and hours of alcohol sales.
- Increase sobriety checkpoints, especially in areas where there is an increased density of off-premise retail alcohol outlets.
- Publicize sobriety checkpoints throughout the state.

The full list of findings and recommendations is available in Appendix A, page 63.

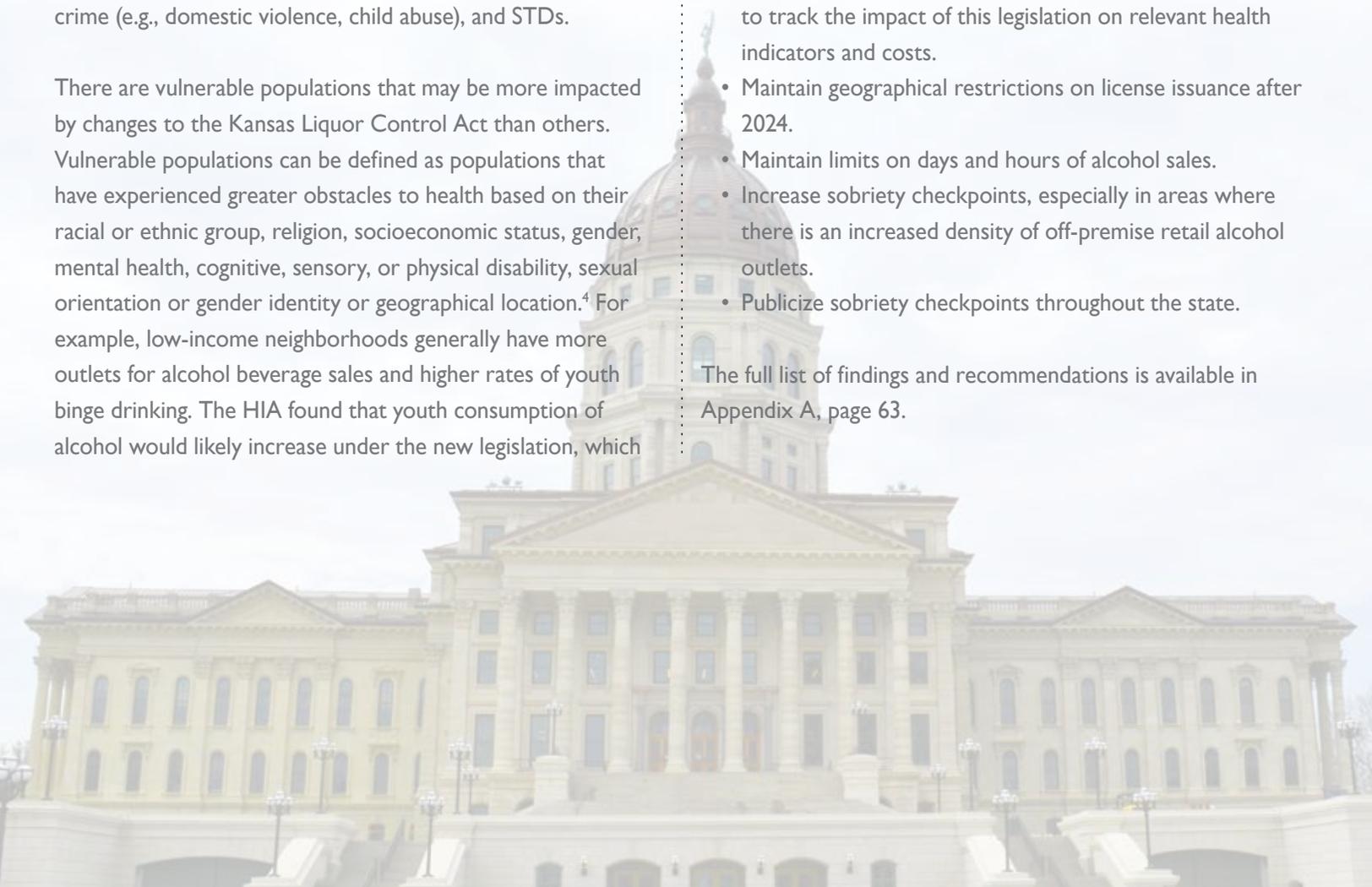


Figure 1: Summary of Health Impacts of Changes to the Kansas Liquor Control Act

Health Factor or Outcome	Literature Review	Data Analyses	Stakeholder Projections	Expected Health Impact	Magnitude of Impact	Likelihood of Impact	Distribution	Vulnerable Population	Quality of Evidence
Alcohol Consumption	Increase	No effect*	Mixed	Negative	Medium	Possible	General population and youth	Individuals with substance abuse disorders, mental health conditions or low-income	**
Alcohol Consumption (Youth)	Increase	Increase*	Increase	Negative	Medium	Likely	Youth that consume alcohol	Youth, low-income youth	***
Driving Under the Influence (Arrests)	Mixed	N/A	Mixed	Mixed	Low	Possible	Individuals who received DUI and their families	Elderly, youth, children	*
Alcohol-Related Traffic Accidents	Mixed	Mixed**	Mixed	Mixed	Medium	Possible	Drivers, passengers and their families	Elderly, youth, children	***
Alcohol-Related Traffic Mortality	Mixed	Mixed**	Mixed	Mixed	Medium	Possible	Drivers, passengers and their families	Elderly, youth, children	***
Alcohol-Related Traffic Mortality (Youth Only)	Mixed	Increase**	Increase	Negative	Medium	Likely	Youth that consume alcohol and choose to drive	Youth, children	***
Crime	Increase	Mixed**	Mixed	Negative	Medium	Possible	Partners, children and general population	Elderly, children	**
Sexually Transmitted Diseases (STDs)	Increase	Increase**	N/A	Negative	Low	Possible	Sexually active individuals	Elderly, youth, infants born to mothers with STDs	***

Note: \* Data analyses were performed to explore the relationship between the indicator and the density of off-premise alcohol outlets. \*\* Data analyses were performed to explore the relationship between the indicator and the density of off-premise alcohol outlets as well as consumption of alcohol. In instances where data analyses yielded different results regarding the relationship between the indicator and the density of off-premise alcohol outlets, and the indicator and consumption of alcohol, the effect was identified as mixed. Legend is available in Appendix B, pg. 68.

Source: KHI HIA Liquor Project, 2014.



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