

Alcohol Cultures Framework

A framework to guide public health action on drinking cultures

Alcohol culture refers to the way people drink. This includes the formal rules, social norms, attitudes and beliefs around what is, and what is not, socially acceptable for a group of people before, during and after drinking.

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Project aim

The aim of the project was to review the evidence and collaborate with key stakeholders to develop a framework that defines alcohol culture and provides a lens for designing and implementing alcohol culture change programs.

Method

VicHealth commissioned the Centre for Alcohol Policy Research (CAPR) to conduct a literature review¹ of the key concepts in defining and changing alcohol cultures. The review traced the application of the 'drinking culture' concept and suggested paths forward to create change.

A summary discussion paper informed interviews with key Victorian alcohol control stakeholders (n=20). Key themes were explored at a stakeholder workshop (n=25).

The Alcohol Cultures Framework was developed and critically reviewed for practical application in the health promotion context and is currently being used to inform various projects, including the \$3 million VicHealth investment in alcohol culture change.

A vision for a culture that prevents harm

VicHealth would like to see people socially supporting one another to engage in low-risk drinking practices rather than high-risk drinking, resulting in reduced harm for the individual, their family, bystanders and the broader community. Such a culture could be described as follows:

- a supportive policy, physical and social environment where people do not feel pressure to drink
- when alcohol is consumed it is done at levels of low risk
- social pressure supports low-risk drinking and discourages high-risk drinking
- occurrences of drinking are reduced
- intoxication is socially rejected.

Recommended approach

Projects should consider targeting groups at most risk of alcohol-related harm, with a focus on the social and environmental factors that shape the way they drink.

Selected subpopulations should share some common interests, understandings and norms about drinking and drinking practices that contribute to social or health problems; for instance encouraging peers to drink more and downplaying risks from intoxication.

Background

There is no single drinking culture in Australia, but a mix of drinking cultures across different subpopulations. Drinking norms are not uniform – it is important to consider how the role of alcohol is influenced by a wide range of factors which differ between various subpopulations.

The literature shows a limited focus on subpopulation approaches to alcohol culture change. However, promising results have been seen in a small but growing number of programs which work with subpopulations to influence drinking practices by shifting expectations, beliefs and social norms around alcohol. Alcohol culture change is one strategy of many for reducing alcohol-related harm. This work is unique and complements whole-of-population and family–individual efforts to prevent alcohol-related harm.

Frames for intervention

The Framework covers four frames of intervention – societal, settings, subcultures and family–individual. Each frame represents a possible way to approach alcohol culture change.

SOCIETAL

The physical and social environment where alcohol is consumed and the context of the occasion, i.e. national or state-wide groups of people such as men or young people

SETTING

The physical and social environment where alcohol is consumed and the context of the occasion, i.e. public places such as parks or entertainment precincts

SUBCULTURE

Social groups with established boundaries and commitment from members who share identity, values, beliefs and social norms. Identifying as a member of a subculture can extend beyond face-to-face interactions, i.e. self-expression groups such as hipsters or bikies.

FAMILY–INDIVIDUAL

Individuals have a unique combination of genetic and personal characteristics which interact with the configuration of structural, cultural, contextual and interpersonal factors in play in any given situation, i.e. family members or acquaintances.



Examples of societal factors that influence the way people drink and the risk of harm

- Affordability
- Access
- Availability
- Marketing and commodification
- Societal systems and structures
- Social position
- Cultural expectations on gender and masculinity
- National culture and identity

The role of whole-of-population controls is significant and efforts to improve national and state alcohol regulation should continue to be a priority. This framework acknowledges the influence of societal drivers and reinforces the strong existing evidence base for alcohol regulation reform, but its emphasis lies in exploring the setting and subculture frames for intervention. Importantly cultural change and regulation are allies and should not be viewed as alternatives.

Examples of settings factors that influence the way people drink and the risk of harm

- Availability and the role of alcohol
- Layout and design of the drinking environment
- Social context of the setting
- Link between alcohol and the setting
- Formal rules and enforcement
- Settings-based advertising and promotions
- Subcultures that own/operate within the setting
- Role models, positive or negative influences
- Expectations about behaviour while drinking
- Acceptability of intoxication
- Peer influence and social pressure

Examples of subculture factors that influence the way people drink and the risk of harm

- Shared social customs
- Use-values
- Role models, positive or negative influences
- Modes of social control
- Cultural meanings of drunkenness
- Peer influence and social pressure
- Misperceptions around drinking
- Acceptability of intoxication
- Social norms
- Gendered norms (e.g. masculinity)
- Technology

Examples of family–individual factors that influence the way people drink and the risk of harm

- Biological factors (e.g. age, sex)
- Personal values
- Intergenerational factors
- Role models positive or negative influences
- Priorities and responsibilities
- Religion and spiritual beliefs
- Own health wellbeing and resilience
- Physical and psychotropic responses to alcohol
- Isolation or lack of personal interactions/social connectedness

More information: www.vichealth.vic.gov.au/alcoholculturesframework

Reference

¹ Savic, M, Room, R, Mugavin, J, Pennay, A & Livingston, M 2016, 'Defining "drinking culture": A critical review of its meaning and connotation in social research on alcohol problems', *Drugs: Education, Prevention and Policy*, pp. 1–13. © VicHealth 2016 P-A-418

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