Can a Community Address Underage Drinking? Yes, It Can!

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Background

• Underage drinking is an issue of concern around the world.
• There is increasing evidence that social marketing campaigns can produce positive changes in drinking behaviours (Stead et al., 2007).
• Large-scale strategies to change perceived social norms around alcohol consumption have been used successfully to reduce alcohol consumption in other target groups including US university students (Wesley Perkins et al. 2005, 2006).
• However, such successful social marketing strategies have yet to be employed in Australia for the complex issue of underage drinking.
Note, in this jurisdiction:

- It is illegal to purchase alcohol or to drink in a public place under the age of 18, but it is not illegal to drink on private premises.
- It is not illegal for parents to provide their own children with alcohol.
- It is illegal to provide someone else’s children with alcohol unless you have their parent’s consent.
Of those teens who reported drinking in 2014:

- 38% said their parents gave them their last drink
- 22% got their alcohol from friends

There is increasing evidence that:

- allowing children and teens to sip or taste alcohol is associated with early drinking initiation and more harmful drinking patterns
- Most parents do not want to provide alcohol to children and teens but feel pressured to do so by their children and by perceptions of what other parents to
  
  • The most effective tool we have is to get parents to talk to other parents and support each other in not providing alcohol to teens
Program background

• The program aimed to reduce the perceived normative nature of underage drinking and supply of alcohol to minors and, in the longer-term, reduce alcohol consumption among young people aged 12-17 years.

• The Kiama ‘Stop Underage Drinking Project’ included:
  – a youth component that incorporates a range of school and community-based activities;
  – a parent component that includes online and environmental activities; and
  – a community-wide social marketing campaign to alter social norms around underage drinking.

• The intervention commenced in October 2013, and ran for two years.
The intervention

**Whole of Community**
- Poster/message campaign
- Media stories and editorial
- Facebook
- Community activities and events
- Website

**Teens**
- Poster/message campaign
- High school curriculum (years 7-10)
- Information sessions
- Poster and film competitions
- Website content

**Parents**
- Poster/message campaign
- Parent information sessions
- Parent workshops
- Website content
Phase 1: introducing the issue of underage drinking as a concern to the community

Based on the findings from the baseline and formative research phases, the initial message execution focused on raising the salience of the message.
Phase 2: a call to action

The intervention messages subsequently transitioned through raising a question (Can a community...); and issuing a call to action.
Phase 3: local data to address perceived social norms

And finally providing feedback and reinforcing changes brought about by and within the community.
Evaluation

Baseline
• CATI survey conducted with:
  • 610 adults in the intervention community (parents of minors and community members); and
  • 550 adults in a matched control community

Mid-point:
• 397 adults in the intervention community re-contacted at the end of year one.

Final evaluation
• 613 adults in the intervention community
• 535 adults in the control community
Campaign Recall

- 77.2% reporting having seen campaign materials
  - Signs on fences (48.8%)
  - Posters in shops/ cafes/ library (44.4%)

- Tag line recall
  - 45.7% remembered the tagline verbatim
  - 31.3% recalled initial tagline or underlying message
## Acceptable age to consume alcohol

<table>
<thead>
<tr>
<th>Acceptable age</th>
<th>pre</th>
<th>post</th>
<th>Difference</th>
<th>95%CI of diff</th>
<th>p value</th>
</tr>
</thead>
<tbody>
<tr>
<td>sip/ taste</td>
<td>16.00</td>
<td>16.66</td>
<td>0.66</td>
<td>(0.4 - 0.9)</td>
<td>&lt;.001</td>
</tr>
<tr>
<td>weak/ watered down</td>
<td>16.78</td>
<td>17.20</td>
<td>0.42</td>
<td>(0.2 - 0.6)</td>
<td>&lt;.001</td>
</tr>
<tr>
<td>full drink</td>
<td>17.92</td>
<td>18.05</td>
<td>0.13</td>
<td>(0.0 - 0.3)</td>
<td>0.06</td>
</tr>
</tbody>
</table>
Acceptability of underage drinking

### INTERVENTION COMMUNITY

**In your personal opinion, how would you rate the acceptability of...**

<table>
<thead>
<tr>
<th>Scenario</th>
<th>OR</th>
<th>Lower 95%</th>
<th>Upper 95%</th>
<th>P-value</th>
</tr>
</thead>
<tbody>
<tr>
<td>A 16-year-old to drink alcohol</td>
<td>1.59</td>
<td>1.26</td>
<td>2.01</td>
<td>&lt;0.001</td>
</tr>
<tr>
<td>A parent to purchase alcohol for a 16-year-old to drink at home?</td>
<td>1.52</td>
<td>1.20</td>
<td>1.94</td>
<td>0.001</td>
</tr>
<tr>
<td>A parent to purchase alcohol for a 16-year-old to drink away from home at a supervised party?</td>
<td>1.43</td>
<td>1.05</td>
<td>1.96</td>
<td>0.025</td>
</tr>
<tr>
<td>A parent to purchase alcohol for a 16-year-old to drink away from home at an unsupervised party</td>
<td>1.26</td>
<td>0.75</td>
<td>2.12</td>
<td>0.375</td>
</tr>
</tbody>
</table>
## Acceptability of underage drinking

<table>
<thead>
<tr>
<th>INTERVENTION COMMUNITY</th>
<th>In your personal opinion, how would you rate the acceptability of…</th>
<th>OR</th>
<th>Lower 95%</th>
<th>Upper 95%</th>
<th>P-value</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Someone other than a parent (such as another relative or an old friend) to purchase alcohol for a 16-year-old to drink at home?</td>
<td>1.57</td>
<td>1.06</td>
<td>2.32</td>
<td>0.024</td>
</tr>
<tr>
<td></td>
<td>Someone other than a parent to purchase alcohol for a 16-year-old to drink at a supervised party?</td>
<td>1.70</td>
<td>1.13</td>
<td>2.55</td>
<td>0.011</td>
</tr>
<tr>
<td></td>
<td>Someone other than a parent to purchase alcohol for a 16-year-old to drink at an unsupervised party?</td>
<td>1.68</td>
<td>0.84</td>
<td>3.39</td>
<td>0.145</td>
</tr>
</tbody>
</table>

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Discussion

• This social-norms-based social marketing intervention was successful in reducing in misperceptions of *descriptive* social norms (perceptions that teens drink and adults provide).
• Importantly, this was accompanied by decreases in perceived *injunctive* social norms (perceptions that others in the community think it is acceptable for teens to drink and adults to provide).
• The absence of such changes in a matched comparison community support the conclusion that these positive changes were the result of the intervention and not of secular changes in attitudes towards underage drinking.
• Given the central role of social norms in decisions regarding alcohol consumption, these changes have the potential to reduce parental supply and thus underage drinking.
Conclusion

• Australia, like many countries, is currently observing declines in youth alcohol consumption.

• We need to build on this positive trend by providing environments that support not drinking as an acceptable and normative behaviour for adolescents.

• Social marketing can play a key role in achieving this outcome.