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## Where's the harm? A social marketing approach to reframing 'problem' drinking cultures

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## **Where's the harm? A social marketing approach to reframing 'problem' drinking cultures**

*Abstract:*

Alcohol consumption is often linked to a broad range of social and health problems, yet alcohol also plays a fundamental role in social bonding between people. This paper considers the potential of social marketing to contribute to alcohol consumption reduction and reframe social norms that encourage 'problem' drinking. Based on qualitative research with a variety of Scottish drinkers, the paper emphasises how and why a better understanding of the culturally bound meanings of alcohol (e.g. social identity, self-concept) are of crucial importance to inform any social marketing approach to reframing excessive drinking.

*Keywords:* social marketing – social norms – drinking cultures

*Track:* Social responsibility, Ethics and Consumer Protection

## **Introduction**

Alcohol is a major part of western societies' cultural fabric, playing an integral role in many peoples' social lives (Osterberg and Karlsson 2002). However, the broad range of social and health problems associated with alcohol consumption, both at a personal and societal level, have become a global phenomenon (World Health Organization 2002; Klingemann and Gmel, 2001). Although previous marketing research has focused on the causes and types of drinking (Kumar 2005; Piacentini and Banister 2006) very little research has focused on how social marketing can be used to address the related social and health problems. This paper considers then the potential of social marketing to contribute to alcohol consumption reduction. In particular we aim to contribute to our understanding of how social norms encourage 'problem' drinking in a domestic environment, free from wider societal social norms, and how this can be used to develop preventative programmes. An approach that is increasingly engaging with social marketing strategies to influence target audiences to "voluntarily accept, reject, modify or abandon" a behaviour (Kotler, Roberto and Lee 2002, p. 394). Our choice of focusing on social norms is justified by previous research into reducing alcohol consumption (Gomberg, Schneider and DeJong, 2001). We shall illustrate this argument through using a population representative sample group from Scotland.

Across the UK, the popularity of drinking alcohol sits uneasily with the perception that alcohol misuse is a chronic national problem (Gordon et al. 2008); particularly in Scotland, which has the highest alcohol-related death rate in the UK (Scottish Parliament 2007). Estimates suggest that alcohol consumption incurs costs of over £1,125 million per annum in Scotland in lost productivity, criminal justice and healthcare costs (Scottish Executive 2005). Alcohol consumption in Scotland has steadily increased over the past decade, particularly as a result of 'binge drinking', with the highest rates amongst the lower socio-economic groups (Erens and Moody 2005). While 'problem' drinkers exhibit a disproportionate share of personal health and social problems related to alcohol consumption, it seems 'normal' drinkers account for the bulk of social, economic and health problems in society. This preventive paradox (Kreitman 1986) highlights the importance of developing alcohol harm limitation strategies that facilitate responsible social drinking cultures and norms in the population as a whole (Peele and Brodsky 1996).

Our paper starts with reviewing the literature related to the context of alcohol consumption in Scotland and the methodology, describing how current public policy debates linked to reducing alcohol related harm underpinned this study. The findings from qualitative interviews with drinkers are then presented and the paper concludes by proposing that a social marketing approach may encourage a personal connection and responsibility for drinking within social norms.

## **Literature review**

Implementing a social marketing intervention should consist of a number of stages leading to the desired outcome, i.e. a reduction in alcohol consumption. Although a variety of these procedures exist this paper draws upon Walsh et al.'s (1993) social marketing process, consisting of three phases: (I) Research and planning, (II) Strategy design and (III) Implementation and evaluation. Our paper addresses stage I of this process by understanding what aspect social norms play in motivating alcohol consumption and how this can be used to plan and develop a strategy (stage II).

Social norms refer to a level of conformity that an individual undertakes in their behaviour to meet their expectations of another person or group. For example, people often overestimate the number of their peers who engage in high-risk drinking (Gomberg et al., 2001). The idea that others drink excessively, may cause consumers to “feel both justified and pressured to consume more alcohol than they would if they believed instead that their peers drank more moderately” (Gomberg et al., 2001, p375).

Changing peoples’ social norms regarding alcohol consumption, offers a realistic means of reducing risky drinking. Binge drinking is a term commonly used to exemplify ‘problematized’ alcohol consumption. While the media characterise binge drinking as ‘out of control’ teenage drinking (Szmigin et al., 2008), the reality is that the profile of a typical risky drinker has changed. People often do not recognise that they are consuming alcohol in quantities that are damaging to their health, leading them to disassociate themselves with those they perceive as problem drinkers. UK women, particularly those in their thirties and forties, are displaying increasingly hazardous behaviour, such as drinking more, miscalculating units consumed and ignoring health warnings (Watts 2008).

The social norm of high alcohol consumption may lie in consumer culture. Consumption is central to the meaningful practice of our everyday life, and we use consumption not only to create a self image, but also “to locate us in society... Indeed all voluntary consumption seems to carry, either consciously or unconsciously, symbolic meanings” (Wattasnuwan 2005, p179). Hogg, Banister and Stephenson (2008, p1) argue that “symbolic consumption involves reciprocal and reflexive relationships between products (tastes and distastes) and consumers (positive and negative selves) within social contexts”. To be a member of a culture involves “knowing the local codes of needs and things” (Slater 1997, p132), and thus we employ consumption symbolically to connect with others (Kleine, Kleine and Allen 1995).

The emphasis upon self-identity and consumption, and the link to the symbolic nature of drinking has been acknowledged (e.g. Measham and Brain 2005; Pettigrew, Ryan and Ogilvie 2000; Warde 1994; Heath 1987), particularly the role it plays in facilitating social connections and projecting or fulfilling certain images for people (Paton-Simpson 1996). While some meanings attached to drinking can be straightforwardly explained, the complex and dynamic nature of the symbolic reality identified by many studies, and the wide variety of meanings revealed suggest that theory building needs to be sensitive to different cultures, sub-cultures and social contexts. Drinking needs to “be understood in the context of specific social, cultural and historical settings” (Paton-Simpson 1996, p224). By understanding these settings and the meanings drinking and drunkenness have for people will influence how they behave, itself an important aspect of Walsh et al.’s (1993) social marketing process, phase (I) Research and planning. This will provide a key step in developing social marketing strategies and policy initiatives to address alcohol related health and social problems (MacAndrew and Edgerton 1969).

## **2. Methodology**

The initiative for the study lies with the Scottish government, who recognising the culturally entrenched nature of Scottish drinking behaviours, outlined an holistic framework (the Scottish Plan for Action on Alcohol Problems) for promoting a cultural shift toward alcohol consumption patterns that are compatible with a healthier

lifestyle (Scottish Executive 2002). Acknowledging the variations in drinking patterns that exist across age groups, ethnic and religious groups, and urban and rural populations, this argued the need for a better understanding of the role of alcohol in different social and cultural contexts throughout Scotland in order to underpin any public policy initiatives designed to influence Scottish alcohol cultures.

This study supported this initiative, by focusing on ‘normal’ drinkers rather than heavy or abstinent. One hundred and seventy two participants ranging from 18 to 65+ years, living in Scotland, were drawn from three socio-demographic categories. *Urban affluent* and *urban deprived* were drawn from a major city, *rural affluent* were drawn from a market town, and *rural deprived* drawn from a former mining village. Semi structured focus groups and in-depth interviews were carried out to explore respondents’ own drinking patterns in a range of situations, the ways in which people use alcohol, and their individual drinking histories and experiences. Retrospective seven-day drinking diaries were used to record previous drinking of respondents’ who took part in the in-depth interviews (n=70) a sub-group of which were also asked to demonstrate a ‘typical, self-poured’ drink, which was then measured by the researcher as an illustration of home drinking activity (n=21). The audio-recorded files were transcribed and analysed using QSR NVivo software (Richards 1999a, b), drawing out recurring themes around respondents’ drinking behaviour.

## Findings

Recognising the meaning drinking and drunkenness have for people will influence how they behave is an important aspect of understanding alcohol-related behaviour, and a key step in developing any policy initiatives to address the health and social problems linked to alcohol excess (Macandrew and Edgerton 1969). We address this by identifying how social norms motivate alcohol consumption and then the meanings behind this consumption.

Alcohol as a central feature of home socialising was a social norm for both affluent and deprived participants, albeit conducted in different social settings i.e. it was expected that you would drink with other people. The importance of home alcohol consumption increased with age, as lifestyles shifted towards socialising at home, especially in more affluent areas. It was evident from the drinking diaries and participant comments, that self-poured measures demonstrated drinking at home could lead to more excessive consumption and behaviour than public drinking. This was motivated by the lack of social etiquette required when outside or freedom from external commitments, such as childcare and domestic responsibilities. For example:

*“...now we’ve got a nice place to have people over...and it’s cheaper than to go out”... “And if you have a few glasses of wine you can just put your head back and fall asleep without people staring at you”*

**(Couple, rural affluent, 18-30)**

*“Last night my pal was in and we had, we sat in, a bottle of vodka between us, know. But that was, like, during the course of, from teatime...up to half eleven.”*

**(Female, rural deprived, 40-55)**

Reciprocity was a strong social norm that featured in home drinking, undertaken on a semi-routine basis, with informal rotation from house to house. In less affluent households the host was signified by whoever could afford alcohol that night. The timing of alcohol consumption may also influence interpretation, and some drinking

behaviours have been cited as appropriate in certain contexts and not in others (Burns 1980). In this study, the timing of benefits payments was influential in the social process, and a pattern of hospitality was not uncommon:

*"..you'll feel that it's nice to do the same back the next night so everybody sort of is doing it for each other."*

**(Male, rural deprived, 18-30)**

However, this sense of obligation and routine of social drink as a norm was not limited to socio-economically deprived participants. Mealtimes, both during preparation and eating for affluent participants, were frequently an occasion for drinking as one participant put it, *"a very sociable glass of something"*. This was seen as a 'nice' time to catch up with the day's events. Whilst drinking while cooking and eating resulted for many in a high weekly consumption level of alcohol, wine consumed was not always construed as 'drinking':

*"It wouldn't be fair to say daily but I would almost inevitably have a glass or two with my evening meal...I would have a glass of wine with my dinner but I very rarely drink at home."*

**(Male, rural affluent, 40-55).**

'Pre-loading' and 'after-party' ritual home drinking was frequently cited among younger and older respondents as a way of reducing the cost of drinking. It also provided a social norm that reinforced a belief in creating a more relaxing, less crowded environment, avoiding trouble and being more selective in their entertainment. Participants revealed that home measures tended to be more generous, and drinking at home was often less inhibited as the cost of alcohol was much cheaper than a bar, which controlled the social norms around drinking. However, participants also believed that home drinking led to less feelings of intoxication, even if the amounts consumed were greater. Consider these two narratives:

*"...you've got a bottle of vodka in the house and you're not measuring, you're just pouring...it creates mair [more] problems I would say."*

**(Female, urban deprived, 31-59)**

*"...when you drink in the house it disnae [doesn't] affect you as much..you have a couple of pints in the pub and you can really feel the effect, but...if you're sitting in the hoose [house], you can sit and have six cans, seven cans and you don't really feel it."*

**(Male, urban deprived, 40-55)**

However, the social norms of drinking did not always require company. Respondents from all backgrounds, especially older people living alone and single parents, reported solitary home drinking. Typically this was in the evening as an end-of-day reward or as a 'nightcap', often characterised as medicinal, harmless or a treat.

The meanings behind alcohol consumption, for our participants, provide an interesting insight into their social norms. Drinking has been identified as fixing people along a continuum of intimacy and distance, an indicator of willingness to socialise with others (Routledge 1979), and plays an important role in "facilitating social bonding between people" (Szmigin et al., p361). A significant proportion of Scottish drinking cultures appears to revolve around the home, and particularly when watching football. One respondent stated that *"Football and beer go hand in hand"* (Male, urban affluent, 18-30), and the proliferation of televised football lent itself to bulk buying and drinking of alcohol drinking, in the home, most days of the week. Even if women were not watching football with their partners, the availability of drink in the home led them to join in the consumption of alcohol. Consider this example:

*“[X] sits through here and I’ve got the television through there. He can sit and watch the football and I can be sitting through there and I’ll have a couple of cans quite often.”*

**(Couple, Rural deprived, 65+)**

Drinking can also be associated with a shift out of the ‘real’ world into a time of play (Roebuck 1986; Paton-Simpson 1995). In the study it was widely reported as a ‘social lubricant’, used to relax, lower inhibitions and let go, or formed part of a more elaborate reward ritual. Using alcohol in this way helped to overcome concerns about drinking alone and its associations with ‘problem’ drinking:

*“..it relaxes you more if you’re in company...you get a couple of drinks down you, you tend to talk a lot mair [more], have mair of a laugh...but, if you’re sober you’re kind of all quiet.”*

**(Male, urban deprived, 40-55)**

*“It’s a bit of a de-stressor at times, if you’ve had a bad day at work, you think, ‘Oh melt into a chair with a bottle of wine. Forget all about your problems”*

**(Female, rural affluent, 18-30)**

However, it was also apparent that someone choosing not to drink could undermine group cohesion, and it was not unusual for non-drinkers to be excluded:

*“..if you’re with your friends it’s excellent to have a drink together, smashing. Nothing better, you compare that with people who don’t drink. I have a problem sometimes with people who don’t drink at all.”*

**(Couple, urban affluent, 65+)**

## **Discussion and conclusion**

While there is considerable variation in individual consumption styles and behaviours, drinking at home, as a social norm, appears to be a culturally entrenched activity among Scotland’s population. Risk is part of product purchase and consumption (Lin, Lin and Raghbir 2003), yet participants tended to display “self-positivity” bias (Perloff and Fetzer 1986) in their assessment of risk; i.e. people believe their chances of experiencing negative events are lower than those of ‘other’ people (Lin et al., 2003). This tendency for “unrealistic optimism” around home alcohol consumption (Weinstein 1980), undermined the ability for Scottish drinkers to perceive their own risk accurately. Participants overestimated the safety of their consumption levels and disassociated themselves from the harm contained therein. Wilk (1997) noted that the positive and negative aspects of goods are often intimately related to each other. For drinkers in this study, alcohol represents hospitality, conviviality, generosity, belonging, freedom and relaxation. Many of the consumers in the study distanced their own home drinking behaviour from perceptions of ‘problem’ drinking, yet the reality suggests otherwise.

Social marketing could aim to change social norms surrounding alcohol consumption by reducing self-positivity bias thereby encouraging preventive behaviours (Lin et al. 2003; Menon, Block and Ramanathan. 2002). We propose, therefore, reframing people’s understanding and perceptions of problem drinking using a social marketing approach to challenge their social norms by reconfiguring traditional images of the dysfunctional alcoholic, i.e. the ‘undesired’ or ‘negative’ self (Banister and Hogg 2001), towards group drinking that holds more personal resonance.

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