

Document tendered by

Professor Sandra Jones

Received by



Date: 6 / 5 / 2013

Resolved to publish Yes / No

The impact of more visible standard drink labelling on youth alcohol consumption: Helping young people drink (ir)responsibly?

SANDRA C. JONES¹ & PARRI GREGORY²

¹Centre for Health Initiatives, University of Wollongong, Wollongong, Australia, and ²Centre for Health Initiatives, University of Wollongong, Wollongong, Australia

Abstract

Introduction and Aims. In response to increasing concerns about excessive drinking among young people the Australian alcohol industry announced that it will introduce more visible standard drink labels. This study sought to examine whether young people use this information in a way that decreases, or increases, alcohol-related harms. **Design and Methods.** Six focus groups with students enrolled in an undergraduate university course in a large regional city in New South Wales, recruited by direct approach on the university grounds and via an online message posted on the university bulletin board. **Results:** The majority of the participants reported that they are aware of the existence of standard drink labelling; notice standard drink labels; and take these into account when choosing what to purchase. However, this was predominantly to help them choose the strongest drinks for the lowest cost. **Discussion and Conclusions.** This study provides initial evidence to support the view that standard drink labelling, in isolation of other modifications to product packaging and marketing, is likely to serve to further increase heavy drinking among young people. [Jones SC, Gregory P. The impact of more visible standard drink labelling on youth alcohol consumption: Helping young people drink (ir)responsibly? *Drug Alcohol Rev* 2009;28:230–234]

Key words: alcohol consumption, labelling, standard drinks, young people.

Introduction

Although there are variations between countries in the age at which people can legally purchase and consume alcohol, underage drinking and heavy episodic drinking by young adults is a significant problem in all developed nations. Alcohol is widely used by Australian secondary students, with 50% of 16–17-year-olds surveyed in 1999 having consumed alcohol in the week before the survey, and 35% having consumed at dangerous levels [1]. Drinking rates are even higher among university students, with 49% reporting heavy episodic drinking in the 2 weeks before a 2001 survey [2]. This continues into young adulthood, with data from 2004 showing that approximately 65% of males aged between 20 and 29 years consuming seven or more alcoholic beverages on at least one occasion in a 12 month period, and 17.4% (compared with 14.6% in 2001) consuming this amount every week [3].

Heavy episodic drinking is a major public health issue for Australia, as for most other industrialised

countries. As well as the long-term risks associated with excessive alcohol consumption, there are a range of short-term risks including alcohol poisoning, unsafe sex, sexual assault, physical violence and motor vehicle accidents [4–6]. It has been estimated that between 1993 and 2002, over 2500 young people aged between 15 and 24 years died from alcohol-attributable injury and disease and more than 100 000 were hospitalised [7].

Standard drink labelling

An Australian standard drink contains 10 g (12.5 mL) of alcohol [8], and the 2001 National Health & Medical Research Centre (NHMRC) guidelines recommend that males limit their alcohol intake to an average of four standard drinks per day and never more than six standard drinks on 1 day, and women to an average of two standard drinks per day and never more than four drinks on 1 day [The NHMRC has issued revised guidelines for public comment, which now recommend

Sandra C. Jones BA, MBA, MPH, MAssessEval PhD, Parri Gregory BSc(Hons). Correspondence to Professor Sandra C. Jones, Director, Centre for Health Initiatives, University of Wollongong, Northfields Avenue, Wollongong, NSW 2522, Australia. Tel: +61 2 4221 4209; Fax: +61 2 4221 3370. E-mail: sandraj@uow.edu.au

Received 21 November 2007; accepted for publication 8 May 2008.

limiting consumption to half of this level (i.e. one standard drink per day for women and two for men)]. The NHMRC guidelines define standard drinks as, for example, one can (375 mL) of low-alcohol beer; a small glass (100 mL) of table wine; or three-quarters of a bottle (330 mL) of alcoholic soda. While 'soda' is an American term, and the usual Australian term is 'soft drink', this is the wording used in the NHMRC school education materials (herein referred to by the more commonly used term RTD, for ready-to-drink). However, the educational materials distributed to educational institutions in association with the guidelines (e.g. standard drink posters) were not designed to keep pace with changes to the potency of ready-to-drink beverages (RTDs), which have in recent years increased their variation in alcohol content. For example, a recent study of alcohol point-of-sale promotions identified common RTDs ranging from 1.1 standard drink (5% alcohol, 275 mL) to 2.7 standard drinks (9% alcohol, 375 mL), with minimal price differences [9].

Research in the early 1990s showed that standard drink labels on alcohol beverages significantly reduce the average error in adults' estimations of alcohol content, concluding that standard drink labelling would assist drinkers who wished to drink within NHMRC low risk drinking guidelines [10–12]. As a result of this and subsequent research, Australia's Ministerial Council on Drug Strategy recommended the introduction of a policy requiring the inclusion of standard drink information on all alcohol beverages [13]. However, it is important to note that the original research to evaluate the value of standard drink labels used much larger labels than those that were approved by the National Food Standards Council [11,12]. Even more importantly, this research was conducted with adult beer and wine drinkers.

In response to increasing concerns about excessive alcohol consumption, particularly by young people, the Australian alcohol industry is voluntarily introducing new standard drink logos which are three times the size of the existing standard drink statements, and similar in size to those tested in the studies reported above. While this is a voluntary scheme, the industry is monitoring compliance and the Ministerial Council on Drug Strategy asked the alcohol industry to report back on their progress by May 2007 [14].

This reflects a view that providing people with clear information about standard drinks will enable them drink safely, based on prior research with adult beer and wine drinkers. This view, however, relies on a largely untested assumption that young people similarly *want* to drink responsibly, and if they know a particular beverage contains more than the usual number of standard drinks they will consume less of it or choose to consume a beverage with a lower alcohol content. An

alternative possibility is that many young people will actually use this information to select the most potent drinks. The purpose of this study was to examine young people's perceptions of standard drink labelling, the purposes for which they would use standard drink information, and the potential impact on their alcohol consumption levels.

Method

A total of six focus groups, each comprising between six and 10 participants, were conducted with students enrolled in a university course in a large regional city in New South Wales, recruited on university grounds and via an online message posted on the university bulletin board. All participants were aged over 18, and each group ran for approximately 1 h. There were two males-only, two females-only and two mixed sex focus groups, with 23 males and 21 females in total.

Focus group conversations were directed by a discussion guideline, with further probing in certain areas where the researchers felt it appropriate. After asking general questions relating to alcohol consumption, frequency and preferences, specific questions were asked concerning participants' knowledge about standard drinks, situations in which they may have paid particular attention to standard drink labels, and whether standard drink labels influence *what* or *how much* alcohol they consume.

All focus groups were audio-recorded and transcribed in full. These transcripts were then analysed and coded to identify any recurring themes between the groups, and as each group transcription was completed the coding was gradually refined to allow for any new developments. All quotes provided in the manuscript are taken verbatim from the transcripts.

Results

Drinking behaviours

All but two of the focus group participants identified themselves as drinkers. The female participants generally reported drinking predominantly on weekends, with the frequency increasing during holiday periods for some. Male participants, in contrast, were more likely to report drinking several times per week, although there was again an indication that this varied from week to week. Participants of both sexes reported regularly drinking quantities far in excess of the safe drinking guidelines. When asked how they decide how much to drink, participants consistently raised three central influences: who they are with; how much money they have and whether they have to drive.

Knowledge of standard drinks

The majority of the participants showed a reasonable understanding of what constitutes a standard drink. Although they might not have been able to state the correct amount of 'pure alcohol', they could provide fairly accurate descriptions by drink type and it appeared that this understanding was generally based on exposure to the NHMRC 'what is a standard drink' poster and/or school-based education.

Knowledge of, and attitudes towards, standard drink labels

All of the participants reported being aware of standard drink labelling, and were able to describe how to find it and what it looks like. In general, they were of the view that its presence is a legal requirement and perceived that it was designed to inform people about how much they should drink, particularly for people intending to drive or those with medical conditions.

If you're driving, or for health reasons where if you drink too much you'll die. [Group 5, males-only]

Driving, medical conditions. If you are driving, you know you can get home without being pulled over and being charged. [Group 2, females-only]

Participants' own use of standard drink labels

Participants were generally in agreement that they notice standard drink labels and take these into account when choosing what to purchase (and consume). However, this was predominantly to help them choose stronger drinks, with the reasons given including: reducing the amount of liquid consumed, reducing the time taken to get drunk and (among males) engaging in competitive behaviour with friends in terms of capacity to consume more alcohol.

You don't have to drink as much liquid and stuff. You're getting drunk but you don't have to drink a huge quantity. [Group 2, females-only]

It's not just how many shots or glasses you've drunk, and you can say that you've had 5 shots of this and that's more than your 7 glasses of that. I've seen that happen. The amount of standard drinks becomes a competition. [Group 5, males-only]

However, the predominant reason was value for money—with all six groups openly discussing their use of standard drink information to choose the most 'cost effective' way of getting drunk.

Sometimes my friends and I look because we're trying to get the best value for money. If the strong

Smirnoff is at the same price, we'll buy those. [Group 2, females-only]

If you want to have a big night, but have limited money, then you take notice and work out which ones will get you drunk fastest. [Group 3, mixed sex] It's useful when you're drinking because you look at the amount of standard drinks and you divide it by the dollar. [Group 4, mixed sex]

When specifically prompted, participants were able to think of some situations in which they thought they might use the information to make safer drinking choices.

I do if I'm driving, but other than that, no. [Group 5, males-only]

If I'm going to a barbecue with the parents, then yes, I might be inclined to buy something that's a bit weaker. [Group 1, females-only]

A number of participants also expressed the view that marketers were aware of consumers' usage of standard drink information to get greater value for money, and were deliberately marketing these products to young people with this in mind.

Their [Smirnoff] marketing is tricky because it says there's 1.9 standard drinks in one bottle. You buy it in a four pack so it's almost like urging you to drink more. You've got a four pack so you've got four drinks effectively in your mind, but that's actually eight drinks, so you're going to get pretty drunk. You know that as a consumer, especially if you're young. [Group 1, females-only]

I definitely do when I'm buying the girlie drinks because they're very deceiving. For the same price you can get 1.3 standard drinks and 1.0 in another. [Group 4, mixed sex]

I think some drinks use it as a sales point too—for example, they try to display that there's 1.9 standard drinks in there. [Group 4, mixed sex]

Participants' views on other people's use of standard drink labels

In describing what consumers (in general) used the information for, they were equivocal as to whether people would use them for the purpose of reducing harm.

If their aim is to get really drunk really quickly, they may well choose something that's going to do that, as opposed to if they're wanting to pace themselves and maybe not have such a big night. [Group 2, females-only]

There are different types of drinkers. There are the ones who will go out and have a drink socially or have a drink over dinner, and there are those who will go out and buy goon [very cheap wine sold in casks or flagons] and buy the cheapest nastiest vodka they can get just so they can get absolutely knackered. [Group 5, males-only]

Participants readily identified other groups of people they thought would use standard drink information in the same way that they do—that is, to maximise the amount of alcohol they could purchase within their limited budgets. In addition to their peers, they perceived that this strategy was particularly prevalent among underage drinkers (and particularly recalled their own behaviours when they were in this age group).

It depends what age group you look at . . . I think our age group it encourages [excessive drinking] overall. [Group 1, females-only]

When you're younger, say 16 or 17, everyone wants to play 'goon of fortune', then the first thing you'll pick is the cheapest and strongest alcohol. [Group 5, males-only]

Young people who are going for the purpose of getting drunk. They're looking for a drink that's cheap and will give them the most alcohol. [Group 3, mixed sex]

Again, it took some prompting to encourage participants to nominate groups of people who might use standard drink labelling to make safe drinking choices, with drivers and people with medical conditions again being the main groups identified.

When you're on your green 'P's [probationary driver's licence, which requires 0.00 blood alcohol content], standard drinks don't really help because as it soon as it's anything above nothing, you're in trouble. [Group 5, males-only]

Maybe people who need to know for medical reasons. [Group 4, mixed sex]

Additionally, some participants suggested that certain personality types or people in different social situations might use this information to monitor their alcohol consumption.

If you're a shy sort of person, like a couple of my friends, they'll look at the drink and say they'll only have the one so they don't get too drunk. [Group 1, females-only]

People with strict parents. [Group 4, mixed sex]

Overweight people. [Group 4, mixed sex]

Finally, there was a perception that as people got older they may use the information in this way, as part of a general pattern of reducing their alcohol consumption.

Discussion

The focus group participants had a reasonable knowledge of standard drinks and high awareness of standard drink labelling. However, it was clear that they used this information not to reduce their alcohol consumption, and thus their exposure to potential alcohol-related harms, but rather to increase or even maximise their alcohol consumption. Given that young drinkers are already significantly more likely to engage in heavy episodic drinking than their older counterparts [15], a product labelling strategy that facilitates excessive drinking is particularly concerning.

Even more alarming is the participants' perceptions—based on their personal experiences—that this harm-maximisation use of standard drink labelling is even more prevalent among underage drinkers. As pointed out by our participants, underage drinkers have even more limited financial resources for the purchase of alcohol (and are less selective about what they drink) so more likely to purchase alcohol based on the selection process of 'bang for your buck'.

Alcohol labelling has been cited as one of the factors integral to manage the increase in risky adolescent drinking practices [16]. Previous studies have provided strong support for the argument that standard drink labelling would assist drinkers who wished to drink within NHMRC low risk drinking guidelines, for example [10–12]. However, these previous studies were based on adult drinkers and an important element is the proviso that they are people who wish to drink responsibly. The results of the current study suggest that this motivation is not evident in the consumption choices of younger drinkers and that standard drink labelling might be least effective, and perhaps even counter-productive, among people who practise high-risk activities.

However, it is important to note that advocates of standard drink labels have always been clear that they are unlikely to be effective in influencing alcohol consumption in isolation unless they are part of a strong policy package [15,16]. A coordinated approach to interventions on availability and marketing, public education and individual treatment is the key to reducing risky drinking behaviour, and alcohol problems in adolescence and young adulthood [15,16].

As with any proposed policy intervention, targeted research with the target group is vital to inform policy makers of best practice for curbing excessive drinking and alcohol dependence [16]. It is important to note that this was a small-scale, exploratory study—

conducted with 44 young people aged 18–22 in a large regional city in New South Wales. Thus, the results are indicative only and may not be generalisable to all young people, particularly those from different states or countries. Additionally, the use of focus groups is a potential limitation of the study. Although previous research suggests that focus groups are an effective method for exploring alcohol-related behaviours with adolescents and young adults [17,18], there is the potential for the group context to result in participants over-estimating their consumption because of the influence of other group members. However, previous research suggests that advantages of the focus group context are that it is to facilitate, rather than inhibit, the disclosure of information, particularly for sensitive or taboo topics such as alcohol consumption [18,19] and it preserves the meaning of data through using the language of young people [20] which was seen as particularly important in understanding the influences on their drinking behaviours.

Future research could utilise individual interviews, where group pressures are not operating, and compare the findings with those from the present study.

Given the results of this study, further research with larger samples of young people is urgently needed to inform the debate on the labelling, packaging and promotion of alcohol in relation to young people's drinking behaviours.

Conclusion

This study provides initial evidence to support the view that, as a policy operating in isolation rather than as part of a strong new package to address marketing and availability, standard drink labelling is likely to serve to further increase excessive drinking among young people. Contrary to the industry position that introducing more visible labelling will assist people to make more responsible drinking choices, we find that it will assist young people to make more *ir*responsible choices.

We agree that there is an important role for standard drink labelling as long as it is combined with other policies addressing the price, availability and marketing of alcohol which are of proven effectiveness in reducing alcohol related harm. However, it is also clear that effective harm-reduction strategies in relation to young people and alcohol use should include imposing limits on the alcohol content of ready-to-drink products or instituting a system that mandates a direct association between alcohol content and purchase price.

References

- [1] White V, Hill D, Effendi Y. Patterns of alcohol use among Australian secondary students: results of a 1999 prevalence

- study and comparisons with earlier years. *J Stud Alcohol* 2003;64:15–22.
- [2] NSW Health. University drug and alcohol survey 2001: initial report. Sydney: NSW Health, 2001.
- [3] Australian Institute of Health and Welfare. 2004 national drug strategy household survey. Canberra: Australian Institute of Health and Welfare, 2005. Report No.: 13.
- [4] Perkins H. Social norms and the prevention of alcohol misuse in college contexts. *J Stud Alcohol* 2002;S14:164–72.
- [5] Wechsler H, Davenport A, Dowdall G, Moeykens B, Castillo S. Health & behavioural consequences of binge drinking in college: a national survey of students at 140 campuses. *JAMA* 1994;272:1672–7.
- [6] Wechsler H, Lee J, Kuo M, Seibring M, Nelson TF, Lee H. Trends in college binge drinking during a period of increased prevention efforts. *J Am Coll Health* 2002;50:203–17.
- [7] Chikritzhs T, Pascal R. Trends in youth alcohol consumption and related harms in Australian jurisdictions, 1990–2002. National Alcohol Indicators, Bulletin 6. Perth: NDRI, 2004.
- [8] NHMRC. Australian alcohol guidelines. Canberra: Commonwealth of Australia, 2001.
- [9] Jones SC, Lynch M. A pilot study investigating of the nature of point-of-sale alcohol promotions in bottle shops in a large Australian regional city. *Aust N Z J Public Health* 2007;31:318–21.
- [10] Stockwell T, Blaze-Temple D. The case for introducing standard drinks labels on all alcohol containers (letter). *Med J Aust* 1990;153:61.
- [11] Stockwell T, Blaze-Temple D, Walker C. A test of the proposal to label containers of alcoholic drink with alcohol content in Standard Drinks. *Health Promot Int* 1991;6:207–15.
- [12] Stockwell T, Single E. Standard unit labelling on alcohol containers. In: Plant M, Single E, Stockwell T, eds. Alcohol: minimising the harm. London: Freedom Association Book Ltd, 1997:85–104.
- [13] Stockwell T. Influencing labelling of alcoholic beverage containers. *Addiction* 1993;88:53S–60S.
- [14] Pyne C. Media Release: new standard drink logos to be introduced on alcohol, 15 May. Canberra: Australian Government Parliamentary Secretary to the Minister for Health and Ageing, 2006.
- [15] Davey J, Davey T, Obst P. Alcohol consumption and drug use in a sample of Australian university students. *Youth Stud Aust* 2002;21:25–32.
- [16] Bonomo Y. Adolescent alcohol problems: whose responsibility? *Med J Aust* 2005;183:430–3.
- [17] Sharma M. Tapping into the potential of focus groups for research in alcohol and drug education. *J Alcohol Drug Educ* 2004;48:3–6.
- [18] Beyea SC, Nicoll LH. Learn more using focus groups. *AORN J* 2000;71:897–900.
- [19] Phillips-Morrow G, Burriss-Kitchen D, Der-Karabetian A. Assessing campus climate of cultural diversity: a focus on focus groups. *Coll Stud J* 2000;34:589–602.
- [20] Wilkinson S. Focus groups in health research. *J Health Psychol* 1998;3:329–48.

1. *[Faint, illegible text]*
 2. *[Faint, illegible text]*
 3. *[Faint, illegible text]*
 4. *[Faint, illegible text]*
 5. *[Faint, illegible text]*
 6. *[Faint, illegible text]*
 7. *[Faint, illegible text]*
 8. *[Faint, illegible text]*
 9. *[Faint, illegible text]*
 10. *[Faint, illegible text]*