

Public discourse on alcohol

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SUMMARY

There are many and varied voices in the public discourse on alcohol: those of the public health interests; those of the vested interest groups; and those of the media themselves. The concerns of those in the field of public health are to prevent any increase and, where possible, reduce the harms which are experienced from alcohol use. Occupying a somewhat different position in the public discourse are the voices of the distributors and producers of alcohol. While there is some shared concern about the adverse consequences of alcohol use, the primary interest of these groups is to protect the return on the investment of their shareholders. Among those with a stake in alcohol industry profits, there is a reluctance to accept the use of public policies which have a direct impact on overall consumption and drinking behaviour. The preference of the vested interest groups is that the public discourse be aimed at informing and persuading the individual drinker (and future drinker) to behave in a certain way. These groups want to limit the role of the public health interests to the use of

educational programmes, while at the same time utilising the mass media to inform and persuade in the form of direct and indirect advertising campaigns which promote the use of alcohol. Other aspects of the public discourse on alcohol are disseminated in the entertainment, news and editorial pages of newspapers and content of television programmes. Here too there are conflicting messages about alcohol, with coverage of the public health issues being juxtaposed alongside the perspectives of the alcohol producers and distributors and other vested interest groups such as the advertising industry. The media are key players in the public discourse on alcohol. Alcohol policy issues have long been hotly contested and in the 1990s much of the debate is shaped by the portrayal of alcohol and alcohol policy in the mass media. There has always been a considerable imbalance between the resources available for the promotion of alcohol use and those to moderate it, and it is concluded that access to the mass media by public health voices is essential if public health goals are to be achieved.

Key words: alcohol industry; alcohol policy; mass media; public discourse

OPPOSING VOICES IN PUBLIC DISCOURSE ON ALCOHOL

There are many and varied voices in the public discourse on alcohol. The unenviable task of the policy-maker is to attempt to reconcile the conflicting views of those who, coming from different sectors, have different primary goals to achieve.

One set of voices consists of those in the public health field whose concerns are to prevent any increase and, where possible, reduce the harms which are experienced from alcohol use. The public health and welfare voices are expressed in public debate on the need for effective alcohol policies and also using educational campaigns to

try to persuade individuals to moderate their alcohol consumption.

Occupying a somewhat different position in the public discourse are the voices of the vested interest groups. While there is often some shared concern about the adverse consequences of alcohol use, a different position is taken on what should be done to reduce our experiences of such harm. In brief, there is a reluctance to accept the use of public policies which have a direct impact on drinking behaviour and its consequences (Morgan, 1988). The preference of the

vested interest groups is for the struggle to take place in the public discourse which is aimed at informing and persuading the drinker (and future drinker) to behave in a certain way. At the same time as giving strong support to the use of educational programmes as the only appropriate role for public health interests, the vested interest groups also utilise the mass media to inform and persuade in the form of direct and indirect advertising campaigns which promote the use of alcohol.

A third group of key players in the public discourse on alcohol are the media themselves. They find alcohol issues useful as topics for editorial material and 'infotainment', particularly when the issues are personalised (Wallack *et al.*, 1990) and when dealing with subgroups such as young people and alcoholics (Brink Lund and Marosi, 1992). Topics of considerable public concern and interest such as alcohol-related traffic crashes in the 1980s (McCarthy and Harvey, 1989) and the reduced risk of coronary heart disease in the 1990s (Casswell, 1993) have been well covered by the media in the anglophone world.

NATURE AND IMPACT OF PUBLIC DISCOURSE ON ALCOHOL

While the mass media have long been used for public discourse on alcohol, the situation has changed markedly during the 1970s and 1980s with the growing pervasiveness of television watching. In the United Kingdom, for example, television was found to occupy between 30 and 40% of most people's free time and was their major source of information and entertainment (Garnham, 1990). The potential impact of the television medium was illustrated by the aftermath of a CBS '60 Minutes' documentary—'The French Paradox' which was broadcast to 21 million US homes in 1991 and gave information about the reduced risk of coronary heart disease associated with alcohol use. Eight months after the 'heart friendly red wine story' was broadcast, sales of red wine had increased by 45% (*The Economist*, 1992; *Independent on Sunday*, 1994). The impact of television is usually more gradual and works to increase homogeneity in society's collective beliefs (Gerbner, 1990), but the impact of 'The French Paradox' illustrates the powerful effect possible when new information was broadcast to a wide audience and the subsequent

change in behaviour was easy for people to achieve.

Increasing private ownership of television in many jurisdictions has meant increased time devoted to entertainment material in order to attract a mass audience (Gerbner, 1990). The portrayal of drinking and alcohol issues in entertainment material has therefore become an important way in which alcohol is represented in the public domain. Analyses of this portrayal in the 1980s in the UK and the US all suggested that alcohol use was portrayed frequently, with little portrayal of the negative consequences of drinking (Partanen and Montonen, 1988). A longitudinal study of adolescents in New Zealand, who were exposed to US and UK television programmes in the 1980s, showed that those girls who reported watching greater amounts of television when they were aged 13 and 15 were more likely to report drinking more wine or spirits when aged 18 (Connolly *et al.*, 1994).

The other important role for television in relation to alcohol is that of advertising. Television is a powerful medium and alcohol producers are anxious to have access to it to promote their products. In countries where direct advertising is restricted, strenuous attempts are made to utilise television indirectly, as has been described in Finland (Montonen, 1995) and in Spain (Torres Hernandez *et al.*, 1994). The role of advertising has been described as symbolically investing the brand with the positive attributes of desirable lifestyles (Partanen and Montonen, 1988) and advertising gains much of its power from the culture's shared myths, such as the myth of the frontier in the US and Australasia (Postman *et al.*, 1988; Wyllie *et al.*, 1989). An analysis of Finnish advertising suggested that although excessive drinking was not shown, intoxication nevertheless had a central role—self-esteem, freedom and independence were achieved by getting high (Rantila, 1993).

Alcohol advertising tends to be a hotly contested policy issue in most societies, not surprisingly given the importance to a number of vested interest groups of the revenue to be gained from the production and broadcast of the advertisements and the potential impact on alcohol sales. The public health perspective is that the messages communicated by advertising are likely to undermine the public health field's attempts to reduce alcohol-related harm. The advertising may work against the attempts to use education to slow the recruitment of young people to heavier drinking.

Advertising is also likely to counteract the influences on heavier drinkers, which aim to persuade them to cut down their intake. Both groups, public health and vested-interest groups, are also aware of the symbolic importance of mass-media advertising of alcohol which, in de-emphasising the negative consequences of alcohol use, gives a meta-message about alcohol's position in society and may in turn influence the way in which other public policies are applied (Edwards *et al.*, 1994).

Given the hotly contested nature of advertising as a policy issue, it is not surprising that the interpretation of the research investigating the impact of advertising has also been hotly contested. A variety of methodologies have been employed to investigate the topic with recent, more conceptually and methodologically sophisticated research having shown some evidence of a direct effect of advertising on consumption (Saffer, 1991; Wilks *et al.*, 1992; Connolly *et al.*, 1994; Grube and Wallack, 1994). It is likely that alcohol advertising may have particular impact with young people, who are in the process of establishing a sense of identity independent from their parents and are learning to establish relationships with their peers, including members of the opposite sex (Strasburger, 1995); in this situation, media transmission of messages aligning brands of beer, for example, with a sense of belonging to a peer group may resonate strongly with the target audience.

Television is also a popular medium for educational campaigns promulgated by public health voices. One such approach in the UK has been the dissemination of drinking limits and levels to the population at large. The UK has utilised this approach throughout the past decade, particularly focusing on it during 1989–1995. During this time, alcohol consumption has risen, accompanied by an increase in the affordability of alcohol (Alcohol Concern, 1991). In this environmental context the policy focus on 'sensible limits' has not made a significant impact on the one in five of the UK population drinking over the 'sensible limits' (Goddard and Ikin, 1988; Thomas *et al.*, 1994), even though awareness of the limits has increased (Health Education Authority, n.d.)

Other mass-media campaigns have focused on promoting a positive image of drinking in moderation or a negative image of drunkenness, and many have focused on the discouragement of drinking and driving (Casswell, 1995). There is

a considerable evaluation literature of mass-media campaigns carried out in the 1970s and 1980s, almost all of which have shown no short-term impact on drinking or alcohol-related harm (Moskowitz, 1989; Gerstein and Green, 1993).

In part, this lack of impact probably reflects the extent of the competing messages, such as those found in advertising campaigns, which provide a hostile environment for educational campaigns (Wallack, 1983). The advertising messages tend to predominate; for example in 444 hours of US television sports programming, 25 advertisements were found which aimed at moderation or prevention, compared with 685 which promoted the product (Maddon and Grube, 1994). In the UK, an analysis of 104 hours of television counted 1258 commercials promoting alcohol and not one advertisement in support of moderation or problem prevention (Barton and Godfrey, 1988). In Finland in the late 1980s, expenditure on advertising for low-alcohol beer (the only sort of beer allowed to be advertised) was threefold that of the expenditure on public education about alcohol (Ahlstrom *et al.*, 1994).

Even if educational messages in the mass media were able to compete in quantity with the advertising messages, they are still unlikely to achieve the results hoped for. Whereas advertising messages are reinforcing and supporting widely held beliefs about alcohol, educational messages, in order to reduce alcohol-related harm, would have to change cultural beliefs about drinking—a more difficult task (Montonen, 1995). For example, in some cultures and particularly among the young, the goal of drinking is often to achieve intoxication, to 'get out of it'. Many countries have the equivalent of the English lager louts, and a non-traditional pattern of drinking alcohol, often beer, outside of meals is becoming increasingly popular among young people in Southern Europe (Cipriani, 1995; Harkin and Klinkenberg, 1995).

It is now apparent to many working in the public health field that mass-media campaigns can only play a supporting role to reduce harm; they have been found, for example, to be effective when supporting policy-level activity such as random breath testing (Homel, 1993). They may also, as with commercial advertising, provide a meta-message about alcohol's place in society in the way advertising campaigns do. One evaluation of a mass-media campaign aimed at persuading young men to moderate their drinking found an effect on the level of public support for alcohol

policies in the population at large (Casswell *et al.*, 1989).

Another major aspect of public discourse on alcohol which emanates from the public health field is school-based education. A very significant part of the available public health resource goes into school-based education in many countries. Unfortunately, the evaluations of the effectiveness of school-based education, like those of mass-media campaigns, and probably for similar reasons, do not justify this expenditure. School-based education has been shown to influence knowledge and attitudes, but not to influence the drinking of young people, at least in the short term (Moskowitz, 1989; Gerstein and Green, 1993). It is likely that school-based education is inherently unlikely to succeed in that students see life outside school as separate from school learning (Slattery and Garrard, 1993). Given that the education takes place in the classroom, it is also not likely to play a major role in public discourse on alcohol and therefore unlikely to influence the social climate around alcohol, unless the classroom learning is linked in with broader community-wide activities, as has occurred in some recent initiatives in the US (e.g. Pentz and Valente, 1993).

As new avenues for public discourse arise as part of the developing information technologies, these are being utilised by both sides in the public debate. For example, music television (Backer *et al.*, 1992), video games and interactive computer programs (Klingemann, 1993) and comic books such as 'Spiderman' (Conroy, 1992) have all been employed by the public health field. Some of the alcohol producers have now established themselves on one of the most powerful new avenues for public discourse, the Internet, operating virtual bars and sponsoring cyberspace football (Marin Institute, 1995).

The different concerns and perspectives about alcohol are also represented in the media in the form of editorial and news coverage. An analysis of all alcohol-related material in the daily newspapers in several provincial towns in New Zealand in the early 1980s showed that while most of the coverage dealt with the social problems associated with alcohol, primarily drink-driving and crime and violence, more than one-third of the material was related to alcohol as a business commodity, including reports of the alcohol industries' affairs and wine columns. A smaller proportion of the material (17%) discussed public policies or educational efforts to shape the alco-

hol environment (Stewart and Casswell, 1993). The policy environment in New Zealand was fairly quiescent at this time, unlike the early 1990s in Sweden when alcohol policy was being discussed in the context of entry to the European Union (EU). At this time, 33% of the material dealing with alcohol discussed policy issues (Olsson, 1994).

The way in which a nation's news media covers issues around alcohol use is likely to be crucial to the way in which the government responds to the policy needs created by alcohol's use. The representation of ideas in the mass media legitimate them for debate, if not acceptance, in the eyes of policy-makers and other players (Milio, 1986). Policy-makers value information that comes to them naturally, not that which they have to work to obtain, and they are particularly receptive to mass-media messages because they know the same story reaches all the other players in the policy arena (Weiss, 1987). Major developments in public policy which are supportive of public health interests are unlikely to occur unless preceded by considerable public debate, as was the case in France which implemented restrictions on alcohol advertising after more than 10 years of public debate (Dubois, 1989). In contrast, the recent liberalisation of policy on alcohol advertising in Finland was preceded by media coverage which gave the impression there was very little serious opposition to the liberalisation (Montonen, 1995).

Much of the news and editorial coverage of alcohol in the anglophone media in the past 5 years has concentrated on the research-based evidence that alcohol is good for the heart. This is a story that has seized the imaginations of many journalists and has been promoted by the alcohol industry. It appears to have had some influence on alcohol policies, making it less likely that public health oriented policies would be adopted (Casswell, 1993). In the US, for example, attempts to increase alcohol taxes, in order to halt the increase in the affordability of alcohol, were thwarted by the use to which the vested interest groups put the information about the reduced risk of coronary heart disease (*Forbes*, 1993; Reuters, 1994). The increased recognition of the importance for public health of the public policies which shape the alcohol environment, and the role of the mass media in influencing these policies has led those in the public health field to take an active part in mass-media policy debate. Media advocacy is the use of the media to argue

for and increase support for healthy public policies (Wallack, 1990). Access to the mass media for public health sectors and other interest groups in order to debate public policies is now a central issue for participatory democracy.

CONCLUSION

While there is some overlap in terms of goals of the different sectors involved in the public discourse on alcohol, and the vested interest groups do express concern about the harm associated with alcohol use, the primary (and legitimate) goal of the vested interest groups is somewhat different from that of those in the public health field.

The vested interest groups primary interest is to protect the return on the investment of their shareholders, whether these be shareholders in advertising companies, the media or the distributors and producers of alcohol. In the case of the producers of alcohol, the protection of profits usually requires no significant fall in overall sales. Generally, countries which allow legal access to alcohol all experience a similar skewed distribution of consumption among their drinking population (Edwards *et al.*, 1994); in many countries the skewed distribution of consumption means that about 10% of the drinkers drink about 60% of the alcohol consumed. These heavier consumers are obviously the backbone of the alcohol producers' markets and, given that they are continually dropping out of the market, either by death or maturation, it is necessary for new members to be recruited at a comparable rate. It is therefore not surprising that the efforts of the public health sector to prevent such recruitment, both by education and by public policies, are met by countervailing voices.

Compared with the messages from the public health field, the educational messages of the vested interest groups are likely to resonate more strongly with the target group of heavy and potentially heavy consumers, given that the advertising does not try to change their beliefs about alcohol but to support and uphold them (Lazarsfeld and Merton, 1975). There has also been a considerable imbalance in the resources available to promote alcohol use rather than moderate it.

Other aspects of the public discourse on alcohol are disseminated in the entertainment, news and editorial pages of newspapers and content of

television programmes. Here, too, there are conflicting messages about alcohol, some emphasising alcohol's role as business commodity and a central, widespread part of social life, which has the added benefit of being good for health, while other media discourse outlines the social problems associated with its use.

Alcohol policy issues have long been hotly contested whenever there has been an attempt to reduce society's experience of alcohol-related harm by means of effective public policies. In the 1990s the nature of the political, social and economic environment is such that much of the debate is shaped by the portrayal of alcohol and alcohol policy in the mass media. It seems likely, therefore, that access to the mass media by public health voices, in order for their perspective to be strongly represented in the public discourse, will be essential if public health goals are to be achieved.

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