Alcohol culture refers to the way people drink. This includes the formal rules, social norms, attitudes and beliefs around what is acceptable and what is not, and how people understand the role of alcohol in society.

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 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.

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 pathways 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=125).

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.

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.

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 above factors of population contexts are significant and refers to the core dimensions of alcohol use, and alcohol consumption should exist in due proportion. This framework exemplifies the influence of societal factors in shaping alcohol consumption behavior and supporting the underlying individual and social factors. The framework also permits the application of change and regulation on all and should not be viewed as an alternative.

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.

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

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.

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

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 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