

# Vested interests in addiction research and policy

## Alcohol industry use of social aspect public relations organizations against preventative health measures

Peter G. Miller, Florentine de Groot, Stephen McKenzie & Nicolas Droste

School of Psychology, Faculty of Health, Geelong Waterfront Campus, Deakin University, Geelong, Vic, Australia

### ABSTRACT

**Aim** It has been proposed that alcohol industry 'social aspects/public relations' organizations (SAPROs) serve the agenda of lending credibility to industry claims of corporate responsibility while promoting ineffective industry-friendly interventions (such as school-based education or TV advertising campaigns) and creating doubt about interventions which have a strong evidence base (such as higher taxes on alcoholic beverages). This paper investigated whether submissions to Australia's National Preventative Health Taskforce (NPHT) from alcohol industry bodies regarding the Australian SAPRO, Drinkwise, have used this organization to demonstrate corporate responsibility while promoting industry-friendly interventions. **Method** Submissions to the Australian National Preventative Health Taskforce (NPHT) discussion paper *Australia, the healthiest country by 2020* ( $n = 375$ ) were examined to identify those with primary alcohol content. A thematic analysis of the resulting 33 submissions was conducted to determine which organization, institution or individual discussed Drinkwise. **Setting** Australia. **Findings** Nine of the 33 submissions discussed Drinkwise; all were submitted by the alcohol industry or its affiliates. Every industry submission referred to Drinkwise either as providing evidence of social responsibility or by suggesting the industry-friendly actions of Drinkwise as alternatives to those recommended by the NPHT report. **Conclusions** Drinkwise has been used by the alcohol industry to create an impression of social responsibility while promoting interventions that maintain profits and campaigning against effective interventions such as higher taxes on alcohol.

**Keywords** Alcohol industry, corporate responsibility, Drinkwise, preventative health, social aspect public relations organizations.

*Correspondence to:* Peter G. Miller, School of Psychology, Faculty of Health, Geelong Waterfront Campus, Deakin University, Level 3, 27 Brougham Street, Geelong, Vic. 3217, Australia. E-mail: petermiller.mail@gmail.com

Submitted 20 June 2010; initial review completed 19 November 2010; final version accepted 10 May 2011

### INTRODUCTION

Renewed awareness of the serious harms caused by alcohol consumption has been accompanied by an unprecedented globalization of the alcohol beverages industry. These multi-national companies produce a wide range of alcohol products that are promoted via sophisticated marketing campaigns. At the same time the industry has invested massive resources in a global effort to produce a light-touch self-regulatory environment that favours its commercial interests while allowing industry members to represent themselves as 'responsible' corporate citizens [1,2]. In line with this, there is a growing body of literature that identifies and investigates the mechanisms through which organiza-

tions with a vested interest have sought to influence decision makers, government policy, research evidence and public opinion. An example is corporate philanthropy that is linked explicitly to government affairs and used as a lobbying tool [3]. Such behaviour has been well documented with regard to a broad range of interests, ranging from fishing [4] to the marketing of baby food [5]. One common tactic used to influence decision making by such vested interests is the setting-up of industry-supported 'social aspects/public relations' organizations (SAPROs) [6].

SAPROs have been developed by purveyors of products other than alcohol that harm many of their users, such as the gambling [7] and tobacco industries [3,8], and it has been suggested that their primary role is not

to enhance public health [9]. Funding relationships with SAPROs can result in recipients' institutions being identified as industry-funded universities [10]. Young researchers who accept industry funds may have their careers harmed because of prospective employers looking negatively on such funding sources [11,12]. More important, however, is the effect of engaging with funding bodies and thereby supporting their overall agenda of promoting ineffective interventions (such as school education or TV advertising campaigns), while fostering doubt around interventions which have a strong evidence base (such as higher taxes on alcoholic beverages) [13].

To gain a fuller understanding of the picture on SAPROs and the alcohol industry, a study was conducted to examine submissions to Australia's National Preventative Health Taskforce [14,15] from alcohol industry bodies and associated commercial interests (such as advertising companies and media outlets). The primary issue under investigation was if and how these submissions have referred to Drinkwise (an Australian alcohol industry SAPRO), and whether they used Drinkwise as an example of corporate social responsibility. Secondly, the submissions were analysed to determine whether the activities of Drinkwise were promoted as being evidence-based. Finally, submissions from two Drinkwise employees were analysed to examine the position put forward by that body in regard to what constitutes evidence-based practice.

### Alcohol industry SAPROs

A substantial number of organizations globally are funded partially or predominantly by alcohol industry sources to conduct or themselves fund what purports to be independent alcohol-related research [6]. In 2004, Anderson [16] identified more than 30 such organizations and examples include: Drinkaware in the United Kingdom, the Alcoholic Beverage Medical Research Foundation (ABMRF) and the International Center for Alcohol Policy (ICAP). These organizations have expanded into the developing world and sought to influence policies [17]. Different SAPROs operate in different ways and can look very different in terms of management structures, research foci and board/executive make-up. For example, the ABMRF has a large board with six industry representatives and 13 academic, medical and 'public' members, and is specifically tasked to 'provide the scientific basis for prevention and treatment of alcohol misuse and alcoholism'. Anderson [18] and others [6,19,20] have identified a number of common positions which support the interests of their funders, the alcohol industry. These include: (i) focusing on pathological or 'abusive' drinking patterns, rather than industry practices; (ii) avoiding research into effective measures, such

as pricing and availability controls; (iii) trying where possible to recruit young researchers; (iv) advocating industry self-regulation; and (v) promoting ineffective social marketing practices [18].

### Drinkwise

Drinkwise is the Australian alcohol industry's SAPRO. It was established in 2005 with \$5 million from the alcohol industry. A further \$5 million was contributed by the Australian federal Liberal Party government [20] but discontinued in 2009 by the new Labor government, leaving the organization funded entirely by the alcohol industry.

Drinkwise claims independence from the alcohol industry:

DrinkWise Australia is an independent, not-for-profit organization focused on promoting change towards a healthier and safer drinking culture in Australia [21].

However, this claim has been challenged [10,20,22], particularly because in the 'balanced board' of six industry representatives and six 'community' members, some of the community members have financial ties to the alcohol industry [10,22]. Importantly, in a recounting of a public forum discussing the role of Drinkwise, *The Age* newspaper reported that Ms Trish Worth, the paid chairwoman of Drinkwise and former parliamentary secretary for health in the Howard government, acknowledged the constraints Drinkwise operated within:

She acknowledged that what she said had to reflect the opinions of her board. So could Drinkwise push for change in an area such as sponsorship or labelling? 'I hope that one day we might', she said [23].

She was further quoted in the article as saying that: 'We operate in the space that we can' [23]. This concern with the lack of independence of Drinkwise has been raised previously [22,24].

In 2006, Hall & Room [20] asked a number of questions about the wisdom of the Howard Federal government co-funding Drinkwise. They also identified, like many others, the interventions which have been found to be consistently effective in reducing alcohol-related harm: higher prices for higher alcohol beverages, raising the minimum drinking age to 21 years, reducing outlet density, reducing trading hours, random driver breath testing for blood alcohol concentration <0.05 g/dl, enforcing licensing laws and penalties for serving intoxicated customers [20]. They noted that the evidence remained weak on effectiveness of school-based education campaigns and public service messages [20]. Hall &

Room suggest that we would be able to tell if Drinkwise was living up to its claim of being an independent organization aimed at reducing alcohol-related harm in Australia if they were seen as advocating the public health policies listed above. They also conclude that:

If instead we see high profile media and school-based education campaigns urging us to drink responsibly, and no reductions in any of these indicators of alcohol-related harm, then Drinkwise will prove to have been what many in the alcohol field fear it will be—an attempt by the alcohol industry to avert serious consideration of public health policies that will adversely affect their bottom line ([20], p. 636).

### National Preventative Health Taskforce

The National Preventative Health Taskforce (NPHT) was created in April 2008 by the Australian Federal Government. A discussion paper, *Preventing alcohol-related harm in Australia: a window of opportunity* [14] was published by the NPHT later that year which focused on preventative health-related issues: obesity, tobacco and alcohol. The paper provided up-to-date and evidence-based information on policies and programmes to prevent alcohol-related harm in Australia. Targets were set to reduce the prevalence of harmful drinking for all Australians by 30% by 2020. The taskforce invited community and stakeholder input via submissions until 2 January 2009.

The major actions that the NPHT White Paper recommended were: (i) managing access and price; (ii) addressing the cultural place of alcohol in the society in order to change consumer demand towards safer drinking; (iii) changing the current taxation regime to stimulate further the production and consumption of low-alcohol products; (iv) improving the enforcement of current legislative and regulatory measures; (v) removal of tax deductibility for advertising; (vi) the development of a staged approach to restricting alcohol advertising; (vii) strengthening skills and supporting primary health care teams to help people make healthy choices; (viii) closing the gap for disadvantaged communities with the use of tailored approaches and services; and finally (ix) improving the evaluation of interventions. The taskforce recognized the need for substantial and long-term funding, and supporting well-coordinated and well-directed national and state programmes in order to have effective national prevention.

## METHOD

### Materials

This paper reviews 375 submissions to the NPHT discussion paper [14]. All submissions were searched for mentions of 'alcohol', 'drinks' and 'Drinkwise'.

### Procedure

The submissions were first screened to include only those that primarily concerned alcohol. These were examined by all the authors. A thematic analysis [25] of these submissions was conducted to define which organization, institution or individual also discussed Drinkwise. A distinction was made between the submissions of the alcohol industry and its affiliates and employees of Drinkwise.

All quotes from the alcohol industry and its affiliates referring to Drinkwise were allocated to one of the three following content domains: (i) demonstrating corporate social responsibility through support of Drinkwise; (ii) promoting Drinkwise as an evidence-based organization; and (iii) arguing that Drinkwise was being overlooked by the NPHT. Categories were derived according to major themes emerging from the quotes and on themes suggested in the previous literature [22].

### *Drinkwise employees*

Two submissions were also made to the NPHT by employees of Drinkwise. These were examined for alcohol-related harm prevention strategies recommended by the authors.

## RESULTS

Of the 375 submissions to the NPHT, 33 primarily covered alcohol, and nine of these 33 submissions also discussed Drinkwise. Only industry submissions referred to Drinkwise (Table 1), and every submission from the alcohol industry mentioned Drinkwise.

### Alcohol industry and affiliates submissions

There were seven submissions made by the alcohol industry and its affiliates in which Drinkwise was discussed. The text referring to these is presented in Table 2.

### Content domains

#### *Demonstrating corporate social responsibility*

Four of seven submissions were assigned to the social responsibility domain. They argued that Drinkwise had undertaken marketing campaigns to promote cultural change and responsible drinking. For example, the Distilled Spirits Industry Council of Australia (DSICA) wrote: 'The work being undertaken currently by Drinkwise Australia to promote sensible drinking through cultural change is but one example of the commitment of the alcohol industry within Australia to the promotion of a positive and healthy lifestyle'. Similar statements were

**Table 1** Summary of Australia's National Preventative Health Taskforce (NPHT) submissions that primarily covered alcohol and discussed Drinkwise.

<i>Name of organization/person</i>	<i>Discussed Drinkwise?</i>
Australian Hotels Association (AHA)	Yes
Alcohol and Other Drugs Council of Australia (ADCA)	
Alcohol Education and Rehabilitation Foundation Ltd (AER)	
Dr Stephen Dann, Drinkwise employee	Yes
Australian Drug Foundation (ADF)	
Australian Liquor Stores Association (ALSA)	Yes
Australian Publishers' Bureau (APB)	
Brewers Association of Australia and New Zealand Inc.	Yes
Cancer Council WA [2]	
Cummins, Peter	
Diageo	Yes
Distilled Spirits Industry Council of Australia	Yes
Mr Chris Watters, Drinkwise CEO	Yes
Drug Free Australia	
Gippsland Women's Health Service	
Hunt, Stan	
Leigh Clark Foundation	
McNab, Anthony	
National Drug Research Institute	
National Women's Christian Temperance Union of Australia Ltd	
Naylor, B. Christina	
Network of Alcohol and Other Drug Agencies	
People Against Drink Driving	
Telethon Institute for Child Health Research [2]	
The Australian Wine Research Institute	Yes
Turning Point Alcohol and Drug Centre	
UnitingCare, Moreland Hall	
University of Adelaide	
VicHealth [4]	
VicHealth, Alcohol Policy Coalition	
Women's Christian Temperance Union	
Winemakers' Federation of Australia	Yes
Woolworths Ltd	

made by the Australian Liquor Stores Association (ALSA), Diageo and the Winemakers' Federation of Australia (WEA).

*Evidence-based organization*

Another four organizations argued that Drinkwise was an 'evidence-based organization' and therefore its interventions should be acknowledged by the NPHT. The WEA identified Drinkwise as 'an evidence-based organization', as did Diageo, the Australian Hotels Association (AHA) and the Australian Wine Research Institute (AWRI).

*Not considering the work of Drinkwise*

Quotes from three organizations were assigned to this content domain, in which they argued that the NPHT was not reporting on or considering Drinkwise's work. For example, the ALSA wrote that: 'Interestingly there is no mention of the significant Drinkwise cultural change campaign . . .'. Similarly, Diageo and the Brewers Association proposed that the NPHT review was incomplete for not mentioning the work of Drinkwise.

**Drinkwise employee submissions**

Two submissions were made to the NPHT by Drinkwise employees Mr Chris Watters (Chief Executive of Drinkwise) and Dr Stephen Dann (Social Marketing adviser) [26,27]. Mr Watters' submission was an official submission from Drinkwise, whereas Dr Dann presented his submission as being independent of his employers.

The NPHT White Paper ranked interventions in order of priority: (i) regulating physical availability; (ii) taxation and pricing; (iii) drink driving counter-measures; and (iv) treatment and early intervention. Other areas identified by the NPHT that have potential for effectiveness include: altering the drinking context, regulating promotion, and well-funded, sustained public education. Mr Watters' response to the report's recommendations was that: 'DW believes that some of the action items proposed [in NPHT report] to achieve the key priorities represent old thinking and lack a strategic and holistic approach'. Dr Dann's submission proposed that: 'The Taskforce has placed an over reliance on the use of the broad brush stroke approach of regulation'.

Both Drinkwise employees were strongly in favour of substantially increasing the level of 'social marketing' campaigns. Mr Watters wrote that: 'Some of the actions identified in the NPHT Report provide the opportunity for the design and delivery of new thinking such as addressing the cultural place of alcohol via carefully planned, targeted and research-based social marketing'. The Drinkwise submission went on to report that: 'Accordingly, DW engaged in a mass advertising campaign, and the provision of support and advice to parents and young people alike, from a panel of independent experts'.

Dr Dann submitted arguments regarding his belief that social marketing should be more prominent. He proposed that: 'The Taskforce has placed an over reliance on the use of the broad brush stroke approach of regulation and education as means to effect the social change to address individual level activity'. Dr Dann offered a number of arguments to support his assertions. For example, in relation to preventing heart disease, he suggested that: 'Heart disease cannot be addressed by Random Blood Test teams issuing financial penalties for high cholesterol levels'. In opposition to restrictions on

**Table 2** Industry submissions to the Australia's National Preventative Health Taskforce (NPHT) discussing Drinkwise.

Submission	Quote
<p>Australian Hotels Association (AHA) [34]                      Australian Liquor Stores Association (ALSA) [35]                      Brewers Association of Australia and New Zealand Inc. (the Brewers Association) [36]</p>	<p>The AHA has a seat on the board of Drinkwise and is keen to ensure: it becomes the preeminent body for the provision of quality research on alcohol in Australia (p. 18)                      The AHA believes it is essential that government policy and practice in relation to alcohol must be evidence based (p. 18)                      Interestingly, there is no mention of the significant Drinkwise cultural change campaign that has shown very positive signs of success in the early evaluations. This is surprising considering it was launched by the Commonwealth Government, with their cooperation and funding support—why was this ignored? (p. 1)                      It [the National <i>Binge Drinking</i> Strategy] combines brief interventions for young people, advertising targeted at high-risk drinkers and support for an ongoing culture change initiative (the <i>Good Sports</i> programme, which industry has also provided funding for through Drinkwise Australia) (p. 11)                      Our members have also been active supporters (and funders) of Drinkwise Australia (<a href="http://www.Drinkwise.com.au">http://www.Drinkwise.com.au</a>) which is actively promoting culture change. Drinkwise has invested heavily in baseline research to ensure rigorous evaluation of campaigns and are currently running a campaign entitled 'Kids Absorb your Drinking' with extensive use of television commercials (p. 12)                      The [NPHT] paper does not look at the potential overlapping footprint with existing bodies working on prevention in Australia. In the case of alcohol this is particularly relevant to: Drinkwise Australia, established in 2005 . . . (p. 22)                      The work being undertaken currently by Drinkwise Australia to promote sensible drinking through cultural change is but one example of the commitment of the alcohol industry within Australia to the promotion of a positive and healthy life-style (p. 3)</p>
<p>Distilled Spirits Industry Council of Australia (DSICA) [37]                      Diageo [38]</p>	<p>Diageo has data and expertise in relation to our consumer base (legal purchase age and above) and we would be pleased to help build the knowledge base and evidence upon which robust and targeted policy positions can be developed. Drinkwise Australia has also built considerable knowledge in this area (p. 8)                      We believe that personal accountability and harm prevention measures at an individual level are worth further investigation by the Taskforce, and we would welcome the opportunity to share our skills and knowledge in this area. We also recommend Drinkwise Australia as a valuable information source on individual consumption patterns and the cultural drivers of alcohol misuse, and as a potential vehicle for social change programmes (p. 8)                      We have conducted consumer research in Europe, Asia and in Australia which shows there is a role for industry in using positive responsible drinking messages to reach certain consumers within the young adult segment. This research has enabled Diageo to identify its role alongside that of Social Aspect Organizations such as Drinkwise Australia, Government and medical professionals (p. 9)                      We were a founding member of Drinkwise Australia and continue to invest behind this organization. We believe Drinkwise Australia is a solid partnership between industry and Government that can be more effectively used to inform and deliver a national approach to harm minimization (p. 9)</p>
<p>The Australian Wine Research Institute (AWRI) [39]                      Winemakers' Federation of Australia (WFA) [40]</p>	<p>Diageo invests experience and funding into transforming consumer attitudes to alcohol. We work with Drinkwise Australia and communicate our own campaigns to deliver relevant responsible drinking messages to specific consumers (p. 13)                      Diageo is a founding partner of, and major financial contributor to Drinkwise Australia, which has been in operation since 2005. Drinkwise is an independent, evidenced-based organization which is focused on promoting change towards a more responsible drinking culture in our community. Reducing alcohol misuse and the harm it causes lies at the heart of the Drinkwise mission for a healthy drinking culture. Its long-term aim is to see intoxication, and 'risky' and 'high-risk' drinking behaviour becoming socially unacceptable (p. 13)                      Drinkwise recently published a detailed research study into the cultural drivers of alcohol use among young Australians. It was conducted by National Centre for Education and Training on Addiction (NCETA) and is available at <a href="http://www.nceta.flinnders.edu.au">http://www.nceta.flinnders.edu.au</a>. Drinkwise recently initiated a TV and other media communications campaign to raise awareness of the influences which can cause young people to make unwise choices regarding their own consumption of alcohol (p. 13)                      The AWRI also provides technical advice and assistance to Drinkwise Australia on requested and is the co-author of a book chapter entitled <i>The biology of intoxication</i> for the book entitled <i>400 Rabbits: The Pain and Pleasure of Intoxication</i>, which is a collaboration between Drinkwise Australia and the International Centre for Alcohol Policies. (p. 3)                      Bringing about cultural change is a primary objective of Drinkwise Australia, an organization supported by the Australian wine sector (p. 5)                      The Australian wine sector is a founding partner of Drinkwise Australia, an evidence-based organization which is focused on promoting change towards a more responsible drinking culture in Australia. A key component of this aim is to minimize potential harms and maximize any benefits from alcohol consumption (p. 6)                      The sector also supports population-based programmes that educate consumers about the health implications of drinking at risky levels and the benefits of responsible consumption to bring about long-term, sustained cultural change. Bringing about cultural change is a primary objective of Drinkwise Australia (p. 17)</p>
	<p>Since its establishment in 2005, Drinkwise has been involved in a number of community-based projects including:                      Good Sports programme, Drinkwise has sponsored the ADF's Good Sports programme for the past 3 years. The Good Sports programme has more than 200 registered clubs in Australia and promotes a responsible attitude towards alcohol consumption;                      Be part of It—Not Out of It. Drinkwise has partnered with the NSW Department of Health to promote a sensible attitude towards alcohol consumption for young people.                      Sports Challenge and Drinkwise have formed a partnership to sponsor the community school and students in remote Timber Creek, Northern Territory, Macquarie University, with sponsorship from Drinkwise, is developing a model that can be transported to other universities for the safe supply and management of alcohol on campus (p. 31)                      In addition, Drinkwise is involved in a number of research programmes which are aimed at gaining a better understanding of alcohol and its effects on society (p. 31)                      In June 2008, Drinkwise launched a major social change campaign, Kids Absorb Your Drinking, which is aimed at creating a long-term generational change towards a more responsible drinking culture in Australia. The campaign focuses on empowering parents to become positive role models for their children; so that the next generation may believe 'drinking to get drunk' is socially unacceptable (p. 31)                      The wine sector supports long-term social marketing campaigns to effect cultural change in the attitude of Australians to drinking. This is evident in the sector's contribution to Drinkwise Australia (p. 36)                      The Australian wine sector is supportive of efforts to implement strategies around the prevention of alcohol misuse in Australia. Indeed, the wine sector supports a sustained, long-term effort towards changing the way Australians drink alcohol to a more responsible drinking culture. This is the basis of wine sector investment in Drinkwise Australia. The Discussion Paper encouragingly identifies an 'emphasis . . . on reshaping attitudes and behaviours, rather than prohibiting them' (p. 43)</p>

advertising, Dr Dann proposed that: 'The short message burst of sponsorship and advertising is the minority of the content of the sports broadcast, and if the message of sporting activity is not being conveyed in the majority message, then there has to be more than just the advertising message as a reason for antisocial behaviour'. Dr Dann provided no referenced case studies to demonstrate the effectiveness of the approach for social marketing, nor for criticisms of 'the broad brush stroke approach of regulation'.

#### *Claims of evidence-based practice*

In addition to claims on the benefits of social marketing, Mr Watters referred to a report commissioned by Drinkwise [28] as a measure of its research credentials:

Over the past 3 yrs, DW has funded research by leading academics across a number of Australian Universities, e.g.; the seminal research on the cultural drivers impacting upon young people and alcohol, by Prof Ann Roche, Flinders University has identified a range of key influences on GenY, indicating current policies have little to no impact on young, single, upwardly mobile, brand conscious, highly educated, affluent and technologically astute drinkers.

Other findings of the Roche report were not discussed.

## **DISCUSSION**

This paper is the first of its kind to document official submissions to government bodies by the alcohol industry in which it uses its SAPRO (Drinkwise) as a demonstration of its corporate social responsibility. The study documents the claims of Drinkwise in regard to its 'evidence-based' status and compares its submissions to previously published reviews. Every industry submission to the NPHT referred to Drinkwise, either in terms of it being evidence for social responsibility and therefore deserving credibility, or in terms of suggesting the industry-friendly actions of Drinkwise as alternatives to those recommended by the NPHT report.

#### **Social capital/corporate responsibility**

Four of the seven alcohol industry submissions to the NPHT that mentioned Drinkwise highlighted their links with the organization as an example of their own corporate social responsibility. Drinkwise has been particularly prominent in its name placement on sponsored TV advertisements, with the Drinkwise logo appearing for 3 seconds at the end of commercials when the main message of the advertisement is being conveyed. The industries used the majority of their limited space within

the submissions to the NPHT to highlight their relationship to Drinkwise, so that politicians and other influential members of the community will be receptive to industry claims of responsibility. These include: 'Our members have also been active supporters (and funders) of Drinkwise Australia' (The Brewers Association), and 'We were a founding member of Drinkwise Australia' (Diageo). A number of authors have highlighted the importance that industry sources place on gaining credit for their investments in, for example, corporate philanthropy and gaining public exposure wherever possible [6,9,16]. Professing corporate social responsibility, which is generally viewed as benevolent, often improves a company's image while it influences policy makers and legislation [3]. This tactic was adopted by the Phillip Morris's (PM) charity, PM21: In 1998, the Washington Relations Office of PM identified PM21 as another opportunity 'to create political capital in DC' and decided to investigate how such 'events and activities can be leveraged' with congress members. By the end of that year it was reported that political contributions had proven 'a powerful tool in strengthening relationships with Congressional and State Government Leaders' ([3], p. 2127). The submissions of the alcohol industry to the NPHT suggest that this tactic is an integral part of their argument to government.

#### **Evidence-based practice**

Every industry submission to the NPHT claimed that the strategies undertaken by Drinkwise represent 'evidence-based' practice. The material presented above supports the views of many commentators that Drinkwise and similar bodies serve a purpose of creating doubt about what measures are effective [17,24,29,30], rather than engaging with evidence-based measures that reduce alcohol-related harm (e.g. [2,14]).

Another issue is whether the submissions of Drinkwise staff presented evidence-based statements, or if not, whether they supplied credible alternatives from independent peer-reviewed research. They did neither based on the recommendations of the most comprehensive reviews available (e.g. [2,14]). In the official Drinkwise submission, Mr Watters argued against evidence-based practice, such as increasing alcohol price and reducing its availability, stating that Drinkwise did not recommend 'fiddling with alcohol tax', because it was 'old thinking' [10]. Dr Dann proposed that social marketing should be more prominent. No evidence was provided for criticisms of 'the broad brush stroke approach of regulation', nor for the effectiveness of social marketing. Interestingly, while there is a small body of evidence demonstrating that social marketing may have something to offer (e.g. [31]), it primarily suggests the need for more independent

regulation of advertising and that the enormous expenditure on advertising, much of it inappropriate, is encouraging more consumption [32].

#### Evidence from Drinkwise's own commissioned research

The Drinkwise submission to the NPHT included the fact that it had commissioned research by Professor Ann Roche as a demonstration of its credentials in research and its 'evidence-based' status. However, the submission failed to refer to any of the findings of this research, which included the following conclusions:

There is an intrinsic connection between alcohol and sport in Australia. Aspects of the drinking culture within Australian sport that pose risks to young people include: 1) underage drinking on club premise; 2) modelling of intoxication; 3) drink driving to and from the club; 4) continued service to intoxicated patrons; 5) alcohol as a reward for athletic performance in the form of 'shouts' or free drinks ([28], p. 9).

Professor Roche's report also included recommendations to change the operation of licensed premises through stricter enforcement of existing laws as well as restricting outlet density. Further, it highlighted the problems associated with pre-mixed (ready-to-drink) drinks (RTDs), and suggested that 'the lack of a differential taxation system that would offer some protection to young and vulnerable drinkers' should be addressed—i.e. raise the price of specific beverages. This issue became hotly debated in 2008 when the Australian Federal government introduced a specific tax on RTDs [10,33]. Despite having this evidence from their own commissioned research, Drinkwise was quoted at the time as opposing the changes [10]. The Drinkwise submission did not mention these findings.

#### CONCLUSION

Every alcohol industry submission to the NPHT referred to Drinkwise. Most of these submissions suggested that their connection with Drinkwise was evidence that they were socially responsible. Many also suggested that the interventions used by Drinkwise were alternatives to those recommended by the NPHT report, particularly the recommendations which would reduce industry profits or restrict marketing. Further, Drinkwise promoted ineffective industry-friendly interventions, such as TV advertising and campaigned against effective methods such as higher taxes on alcohol.

Drinkwise has not met any objective criteria through which it can be called 'evidence-based'. Nor has it shown that it can be relied on to advocate evidence-based

findings, even from its own commissioned work. This study should be replicated with other alcohol industry SAPROs, such as Drinkaware in the United Kingdom and ICAP, in order to assess whether or not governments and researchers world-wide should work with such bodies.

#### Declarations of interest

None.

#### Acknowledgements

Special thanks are due to Brian Vandenberg of VicHealth for identifying this source of information and Alissa Squire for comments on an earlier version of this paper.

#### References

1. Miller P. G., Hall W., West R., Marsden J., Darke S. A renewed call for action on alcohol policy. *Addiction* 2010; **105**: 767–8.
2. Alcohol and Public Policy Group. Alcohol: no ordinary commodity—a summary of the second edition. *Addiction* 2010; **105**: 769–79.
3. Tesler L. E., Malone R. E. Corporate philanthropy, lobbying, and public health policy. *Am J Public Health* 2008; **98**: 2123–33.
4. Wagner W., Steinzor R. *Rescuing Science from Politics: Regulation and the Distortion of Scientific Research*. New York: Cambridge University Press; 2007.
5. Ferriman A. Advertising standards authority finds against nestle. *BMJ* 1999; **318**: 417a.
6. Babor T. F. Alcohol research and the alcoholic beverage industry: issues, concerns and conflicts of interest. *Addiction* 2009; **104**: 34–47.
7. Adams P. J., Rossen F. Reducing the moral jeopardy associated with receiving funds from the proceeds of gambling. *J Gambl Issues* 2006; **2**: 1–21.
8. Parascandola M. Science, industry, and tobacco harm reduction: a case study of tobacco industry scientists' involvement in the national cancer institute's smoking and health program, 1964–1980. *Public Health Rep* 2005; **120**: 338–49.
9. Adams P. J. Assessing whether to receive funding support from tobacco, alcohol, gambling and other dangerous consumption industries. *Addiction* 2007; **102**: 1027–33.
10. Miller P. G., Kyprilou K., Chikritzhs T., Skov S., Rubin G., Stanley F. *et al.* Health experts reject industry-backed funding for alcohol research. *Med J Aust* 2009; **190**: 713.
11. Babor T., McGovern T. Minimizing moral jeopardy: perils of the slippery slope. *Addiction* 2007; **102**: 1037–8.
12. Miller P. G., Babor T. F., McGovern T. F., Obot I., Buhringer G. Relationships with the alcoholic beverage industry, pharmaceutical companies, and other funding agencies: holy grail or poisoned chalice? In: Babor T. F., Stenius K., Savva S., O'Reilly J., editors. *Publishing Addiction Science: A Guide for the Perplexed*. Rockville, MD: International Society of Addiction Journal Editors; 2008, p. 190–212. Available at: <http://www.parint.org/isajewebsite/isajebok2.htm> (accessed 10 June 2011; archived by Webcite at <http://www.webcitation.org/5zLrGzZfk>).

13. Miller P. G. Research independence matters for practitioners and researchers in the addictions. *J Groups Addict Recovery* 2008; **3**: 43–55.
14. National Preventative Health Taskforce. Preventing alcohol-related harm in Australia: a window of opportunity. Technical Report no. 3. Canberra, Commonwealth of Australia: National Preventative Health Taskforce; 2008.
15. National Preventative Health Taskforce. National preventative health strategy—the roadmap for action. Canberra, Commonwealth of Australia: National Preventative Health Taskforce; 2009.
16. Anderson P. The beverage alcohol industry's social aspects organizations: a public health warning. *Addiction* 2004; **99**: 1376–81.
17. Bakke Ø., Endal D. Vested interests in addiction research and policy. Alcohol policies out of context: drinks industry supplanting government role in alcohol policies in sub-Saharan Africa. *Addiction* 2010; **105**: 22–8.
18. Anderson P. *The Beverage Alcohol Industry's Social Aspects Organizations: A Public Health Warning* The Globe. London: Institute for Alcohol Studies; 2002.
19. Babor T. F., Edwards G., Stockwell T. Science and the drinks industry: cause for concern. *Addiction* 1996; **91**: 5–9.
20. Hall W., Room R. Assessing the wisdom of funding DrinkWise. *MJA* 2006; **185**: 635–6.
21. Drinkwise. *Who We Are*. 2011. Available at: <http://www.drinkwise.org.au/c/dw?a=da&did=1018514> (accessed 5 April 2011; archived by WebCite® at <http://www.webcitation.org/5xjNM4LPR>).
22. Miller P. G., Kypri K. Why we will not accept funding from Drinkwise. *Drug Alcohol Rev* 2009; **28**: 324–6.
23. Miller N. *Here's Jeers!* 2009. Available at: <http://www.theage.com.au/national/heres-jeers-20091204-kb2e.html> (accessed 5 April 2011; archived by WebCite® at <http://www.webcitation.org/5xjNfx3dx>).
24. Daube M. Some questions about the independence of DrinkWise *Croakey*, 2009. Melbourne, Crikey.com.
25. Kellehear A. *The Unobtrusive Researcher: A Guide to Methods*. St Leonards, NSW, Australia: Allen & Unwin; 1993.
26. Watters C. *Preventative Health Taskforce Submission*. 2008. Available at: [http://www.preventativehealth.org.au/internet/preventativehealth/publishing.nsf/Content/submissions-public-cnt-d/\\$File/D347-2008.pdf](http://www.preventativehealth.org.au/internet/preventativehealth/publishing.nsf/Content/submissions-public-cnt-d/$File/D347-2008.pdf) (accessed 5 April 2011; archived by WebCite® at <http://www.webcitation.org/5xjPFNDYt>).
27. Dann S. *Preventative Health Taskforce Submission*. 2008. Available at: [http://www.preventativehealth.org.au/internet/preventativehealth/publishing.nsf/Content/submissions-public-cnt-a-1/\\$File/D299-2008.pdf](http://www.preventativehealth.org.au/internet/preventativehealth/publishing.nsf/Content/submissions-public-cnt-a-1/$File/D299-2008.pdf) (accessed 6 April 2011; archived by WebCite® at <http://www.webcitation.org/5xjZBCJnN>).
28. Roche A. M., Bywood P., Borlagdan J., Lunnay B., Freeman T., Lawton L. *et al.* Young people and alcohol: the role of cultural influences. Adelaide: National Centre for Education and Training on Addiction (NCETA) for DrinkWise Australia Ltd; 2008.
29. Anderson P. Consulting with the alcohol industry. *Drug Alcohol Rev* 2008; **27**: 463–5.
30. Caetano R. About smoke and mirrors: the alcohol industry and the promotion of science. *Addiction* 2008; **103**: 175–8.
31. Donovan R., Boulter J., Borland R., Jalleh G., Carter O. Continuous tracking of the Australian national tobacco campaign: advertising effects on recall, recognition, cognitions, and behaviour. *Tob Control* 2003; **12**: ii30–9.
32. Jalleh G., Donovan R., Giles-Corti B., Holman J. Sponsorship: impact on brand awareness and brand attitudes. *Soc Mar Q* 2002; **8**: 35–45.
33. Chikritzhs T. N., Dietze P. M., Allsop S. J., Daube M. M., Hall W. D., Kypri K. The 'alcopops' tax: heading in the right direction. *Med J Aust* 2009; **190**: 294–5.
34. Australian Hotels Association (AHA). *Preventative Health Taskforce Submission*. 2008. Available at: [http://www.preventativehealth.org.au/internet/preventativehealth/publishing.nsf/Content/submissions-public-cnt-a-2/\\$File/D167-2008.pdf](http://www.preventativehealth.org.au/internet/preventativehealth/publishing.nsf/Content/submissions-public-cnt-a-2/$File/D167-2008.pdf) (accessed 6 April 2011; archived by WebCite® at <http://www.webcitation.org/5qUdu7azq>).
35. Australian Liquor Stores Association (ALSA). *Preventative Health Taskforce Submission*. 2008. Available at: [http://www.preventativehealth.org.au/internet/preventativehealth/publishing.nsf/Content/submissions-public-cnt-a-2/\\$File/D171-2008.pdf](http://www.preventativehealth.org.au/internet/preventativehealth/publishing.nsf/Content/submissions-public-cnt-a-2/$File/D171-2008.pdf) (accessed 6 April 2011; archived by WebCite® at <http://www.webcitation.org/5qUeaEbXJ>).
36. The Brewers Association. *Preventative Health Taskforce Submission*. 2008. Available at: [http://www.preventativehealth.org.au/internet/preventativehealth/publishing.nsf/Content/submissions-public-cnt-b/\\$File/D186-2008.pdf](http://www.preventativehealth.org.au/internet/preventativehealth/publishing.nsf/Content/submissions-public-cnt-b/$File/D186-2008.pdf) (accessed 6 April 2011; archived by WebCite® at <http://www.webcitation.org/5qUegJM9e>).
37. Distilled Spirits Industry Council of Australia (DSICA). *Preventative Health Taskforce Submission*. 2008. Available at: [http://www.preventativehealth.org.au/internet/preventativehealth/publishing.nsf/Content/submissions-public-cnt-d/\\$File/D346-2008.pdf](http://www.preventativehealth.org.au/internet/preventativehealth/publishing.nsf/Content/submissions-public-cnt-d/$File/D346-2008.pdf) (accessed 6 April 2011; archived by WebCite® at <http://www.webcitation.org/5qUepqH2>).
38. DIAGEO. *Preventative Health Taskforce Submission*. 2008. Available at: [http://www.preventativehealth.org.au/internet/preventativehealth/publishing.nsf/Content/submissions-public-cnt-d/\\$File/D344-2008.pdf](http://www.preventativehealth.org.au/internet/preventativehealth/publishing.nsf/Content/submissions-public-cnt-d/$File/D344-2008.pdf) (accessed 6 April 2011; archived by WebCite® at <http://www.webcitation.org/5qUelYmmP>).
39. Australian Wine Research Institute (AWRI). *Preventative Health Taskforce Submission*. 2008. Available at: [http://www.preventativehealth.org.au/internet/preventativehealth/publishing.nsf/Content/submissions-public-cnt-t/\\$File/D97-2008.pdf](http://www.preventativehealth.org.au/internet/preventativehealth/publishing.nsf/Content/submissions-public-cnt-t/$File/D97-2008.pdf) (accessed 6 April 2011; archived by WebCite® at <http://www.webcitation.org/5qUewhFsR>).
40. Winemakers Federation of Australia (WEA). *Preventative Health Taskforce Submission*. 2008. Available at: [http://www.preventativehealth.org.au/internet/preventativehealth/publishing.nsf/Content/submissions-public-cnt-wy/\\$File/D337-2008.pdf](http://www.preventativehealth.org.au/internet/preventativehealth/publishing.nsf/Content/submissions-public-cnt-wy/$File/D337-2008.pdf) (accessed 6 April 2011; archived by WebCite® at <http://www.webcitation.org/5qUfIHHTw>).