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Alcohol health information labels

Report of qualitative research into health information labels on alcoholic beverages

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Background

This qualitative research was conducted for VicHealth to canvas perceptions about health advisory labels on alcoholic beverages amongst teenagers, young adults and the parents of teenagers. It is the intention of VicHealth to put forward a proposal that health information and warning labels can be used as part of a comprehensive and integrated public health strategy that promotes a healthier and safer drinking culture in Australia.

The objectives of the research were to ascertain which of 12 proposed labels would most likely have an impact on participants' personal behaviour and to gain a better understanding of participants' drinking practices and their approach to responsible drinking.

The research was conducted through a series of 6 group discussions with 44 people who drank alcohol, segmented by age, sex (amongst the younger participants) and socio economic status (amongst the parents). Participants were recruited into one of three group types:

- Underage drinkers aged 16-17 years;
- Young adult drinkers aged 18-25 years; and,
- Parents of 15-18 year olds.

The focus groups were conducted in June 2009.

This research built on findings from the *VicHealth Community Attitudes Survey to Alcohol Policy*, a statewide telephone survey of a random sample of 1523 Victorians aged 16 years and over. Respondents were asked a series of questions about their views on alcohol policy. The survey was conducted between February and March 2009.

The results of the survey indicated a high level of support for health advisory labels on alcoholic beverage containers. The table below details the percent of respondents who either strongly support or support the inclusion of a range of information on alcohol containers.

Label content	% strongly support or support
Recommended daily guidelines for low risk alcohol consumption	85%
Advice that exceeding daily guidelines may be harmful	89%
Targeted advice for specific groups	91%
Nutritional information (cal/kJ, alcohol, protein, fat, carbohydrates per container and per 100ml)	76%
List of ingredients	86%
Number of standard drinks (displayed in a uniform way)	95%
Alcohol content (alcohol by volume)	97%

Currently, Australian regulations require alcohol labels to display alcohol content and number of standard drinks.

The regulations do not require:

- this information to be displayed in a particular place on the container
- information on warnings about health risks of drinking the product
- information about safer consumption
- nutritional information, or
- a list of ingredients.

Drinking behaviour and health awareness

Alcohol consumption

For participants in this research, drinking alcohol was largely associated with social occasions and with being sociable, typically being used to enhance the atmosphere of a night out with friends. It was clear from the focus group discussions that participants were commonly drinking over and above the NHMRC recommended drinking guidelines.

It was uncommon for participants to report that they would monitor how much alcohol they were drinking based on the number of beverages (or standard drinks) that they were consuming; their assessments more typically being based on how they felt (usually a "tipsy" or drunk feeling). There was a greater tendency to monitor how much they were drinking when they were driving.

Safe drinking guidelines

Some of the labels contained a message from the National Health and Medical Research Council's *Australian Drinking Guidelines*. Many participants dismissed these messages because they found them confusing or unrealistic.

There was also a tendency to self-exempt from these guidelines as participants had a poor appreciation of the safe drinking levels that these guidelines referred to and very little personal experience of the health consequences that were referred to. Participants indicated that they did not appreciate being told what to do, especially when they were yet to personally experience any detrimental consequences as a result of their drinking behaviours.

For these guidelines to be understood and accepted there is a need to increase awareness of the guidelines and convince people of the evidence that they are based on.

Awareness of health consequences

Awareness of the health consequences associated with alcohol was quite limited. Perceptions of short term consequences were predominantly associated with violence and clumsiness, and perceptions of long term consequences were mainly associated with liver disease.

Participants were surprised by the link between alcohol and breast cancer and some were curious about the link with brain damage. Responses to these specific pieces of information suggest that heath awareness campaigns, such as health information labels, that were aimed at increasing awareness of the direct health consequences of alcohol could be expected to affect drinking behaviours over time.

Response to the labels

Support for labels

There was no outright opposition to the concept of labels on alcohol containers, and almost an expectation that some kind of health advisory label was likely to be introduced for alcohol products in Australia. Participants generally supported the notion that the labels could provide them with information to increase their knowledge about the effects of alcohol. However, this support needs to be understood in the context that participants demonstrated considerable resistance to being told what to do, and suggested that the social environment was becoming saturated with health messages.

Target the whole population

There was a strong tendency for participants to self-exempt from specific labels and messages, commonly arguing that these labels would be good for other people. For instance, the broad appreciation of the message about drinking during pregnancy demonstrates the tendency to support messages that target other people. This observation suggests that consideration should be given to developing the labels and messages with the aim of increasing awareness amongst the general population of the range of health consequences of alcohol, rather than attempting to direct specific messages to specific groups.

Seek impact over long term

Once general awareness is increased and the range of messages accepted, there is likely to be a greater capacity to target specific messages. Overall, response to the labels suggests that they need to be regarded as an opportunity for impact over time, rather than setting the expectation that they will affect immediate behavioural change. The existing low awareness of the health consequences of alcohol and poor appreciation of the recommended safe drinking levels, suggests that behaviour change with respect to alcohol consumption will take some time.

Increase awareness by providing facts

Given that major efforts are required to change people's drinking behaviours, the initial communication need is to increase awareness of the consequences of alcohol and convince people about the recommended safe drinking levels. This suggests that, at least in the beginning, the labels are likely to be most effective if they are developed to be factual and informative to increase awareness. Once awareness of the risks of alcohol has been increased, consideration could then be given to developing labels that are more directly aimed at creating behaviour change.

Images

Some participants preferred a prominent image because it caught their attention; however, feedback on the proposed labels was mixed. Labels most likely to be effective were those linked with existing media campaigns.

The images that did appear to have the greatest value in terms of creating awareness and clearly conveying the associated message were those that were recognised from current or recent televised public education campaigns (e.g. Mates; Night out). These findings suggest that, if images are included, these would be expected to be most effective if they are linked with other elements of a social marketing campaign.

Serious tone is better than humorous

While there was some perceived value in terms of attracting attention and enhancing personal relevance through the use of humour in the draft labels, overall, this research suggests that humour is unlikely to be the most effective mechanism for portraying information about the health consequences of alcohol. Humour on these labels risks alienating some people and undermining the seriousness of the messages. There was a consistent expectation for government health messages to be provided in a serious tone, and for these topics not to be treated flippantly. If the initial aim of the labels is to increase awareness, this is likely to be most effectively achieved through focussing on the facts.

In summary, evaluation of these labels has suggested a number of general principles that should be considered for initial development of labels on alcohol beverage containers, including:

- Simple, clear and direct language.
- Provide new information, including evidence where possible.
- A factual and serious tone, rather than humorous.
- Aim to educate and inform, rather than be authoritarian or prescriptive of behaviour.
- If images are used they should be informational in style, and if taken from current or recent televised public education campaigns this would enhance their effectiveness.
- Initial communication objective being to increase awareness of health consequences and recommended safe drinking guidelines.

Responses to individual labels

1. Mates

Participants responded well to this label, the young males could relate to it and were happy to take on board the message to look out for their mates. They already had an appreciation of message from the recent media campaign and as such this was regarded as one of the more effective labels in terms of response to the message.

"I think it's sort of saying it's OK to go and have a drink as long as you got someone there." (Female 16-17)

"But maybe it's like don't let your friends kind of make a fool of themselves that's not what good friends are supposed to do." (Female, 16-17)

"And it's not even saying that they're gonna do something stupid, it's just saying look out for 'em in case they do. Rather than assuming that something bad is going to happen." [Male, 18-25]

"I think it's trying to deter violence, like, when people get drunk and that..." (Male, 16-17)

"... it doesn't say stop it. It says 'look out for your mates' and everyone cares about their mates, that's why they're mates." (Male, 16-17)

2. Night out

The younger participants found this label to be one of the more effective ones because it included facts and figures, they were able to relate to the imagery, and because the situation shown would be embarrassing to them.

"I've seen this one on a billboard and I remember when I saw it I was like I was shocked at the stats..." (Female, 16-17)

"In the magazines that ad. I've seen it in the magazines." (Mid SES Parent)

" 'Drink Responsibly.' 'It could happen to you.' " (Female, 16-17)

"Ah you will end up in hospital if you're not careful." (Male 18-25)

"The fact that it's a girl on the [brand name] bottle really helps as well... More girls drink [brand name] than guys I'd guess." (Male, 18-25)

"I think it would be very effective for first time drinkers." (Female, 18-25)

"Because you can draw, because it's obviously more an in-depth experience from the television. Like it's hard to get so much depth into a label... so it can work in that respect." (Male, 18-25)

3. Breast cancer

The suggestion that alcohol could lead to cancer was a shock to many who saw this label, however they were confused that whilst being told they could get cancer, they could still drink up to two standard drinks a day. Despite the confusion, the new information alone made this one of the more effective labels for the female participants.

"It's confronting because there's no cure for breast cancer." (Female, 16-17)

"Normally you assume alcohol is brain or liver or something but to say that alcohol is linked to cancer I think that's pretty new – or not as spoken about." (Female, 18-25)

"That is a fact I didn't know. If it's true, I didn't know that." (Low SES Parent)

"You don't think of alcohol and breast cancer." (Mid SES Parent)

4. Alcohol is a drug

The message of the label was understood and clear, however it was dismissed by those who did not like being told what to do, those who did not drink everyday and those who felt that no more than two standard drinks was an unrealistic amount to drink.

"I suppose it's trying like I don't know not really kind of like frighten but not frightening just kind of make you think it could be me on the bottle." (Male, 16-17)

"Um you know look the guys depressed, he's obviously hitting the bottle and it's just saying, it's linking excessive alcohol use with depression and loneliness I suppose. Yeah, the message is just really clear so, when you're mixing it with coke you understand what's going on." (Male, 18-25)

"Sometimes the problem with alcohol, yeah, it's legal so you think it's acceptable to go on big binges and do this... you look at these drugs and don't accept them, yet we'll accept this and perhaps you shouldn't be doing that." (Female, 18-25)

Response to other components of the labels

Nutritional Information

Opinion was mixed about whether nutritional information added any value to labels on alcoholic drinks. The main perceived value appeared to be in relation to the calorie content for those who were concerned about issues such as weight management, allergies, etc. Generally, this was of more value amongst the female groups than the male groups, although, across all participants.

Standard Drinks / Alcoholic Content

Participants were aware that this information was included on current alcohol labelling. Many used it to select specific types of alcohol. Some of the younger participants in particular reported that they would select products with higher alcohol content with the view to getting drunk as quickly as possible or getting more value for money. There was a tendency for participants to calculate their consumption based on the number of drinks they consumed, whether that be glasses, shots, bottles or otherwise, rather than the number of standard drinks. The notion of standard drinks was reported to be quite confusing and difficult to make practical use of, given that drinks were served and bought in a range of different standard amounts. The main perceived utility of the notion of standard drinks was in relation to monitoring drinking when driving.

Warning label

'Health Warning' was the preferred wording to use at the top of the labelling (rather than 'Government Health Warning' or 'Warning'. Participants reported that they accepted the value of these messages in relation to concerns about their health, but were sceptical and unresponsive to government messages that were perceived as telling them what to do.

Perceived impact of labels

Participants were asked what impact they believed the labels would have if they were to be introduced. There was no outright opposition to the idea of the labels. There was almost an expectation that some kind of health advisory label was likely to be introduced for alcohol. Participants generally supported the notion that the labels could provide them with information about the effects of alcohol that they did not already know.

Participants often related alcohol labels to cigarette pack warning labels. Those who currently smoked were suspicious of the value that these had made, while some others felt that they might have been effective, and that this could be a justification for a similar approach to alcohol labelling.

Some said that if they wanted to drink, a health information label would make no difference. They felt that personal experience, such as being witness to a nasty accident that came about as a result of alcohol was believed to have a greater impact on reducing alcohol consumption than a label.

Others felt that the labels acted as a good reminder about the effects of alcohol. It wouldn't necessarily stop them from drinking it, but at least it put the message at the front of their mind.

It was suggested by some that the labels would have more effect if the images were more striking, such as those that used in cigarette pack warning labels. Others felt it would also be more effective if the labels were linked to advertising campaigns, where greater detail could be conveyed. The labels would then act as a reminder of the TV or billboards seen. Clearly, this latter point was borne out in relation to those labels that did provide images related to television advertisements.

"Cigarette packets they've got these really disgusting pictures... they're more attention grabbing. It's a bit more confronting." (*Female, 16-17*)

"But younger people coming through, as I said, if it was more graphic and it was marketed so big and they kept putting it on maybe it would reduce the amount of the younger generation that are coming through to that stage that are trying the alcohol." (Low SES parent)

"I think the ones relating to the TV ads definitely work better." (Low SES parent)

Throughout some of the groups, the idea of having the address for a website, such as something similar to Quit would be a worthwhile addition to the labels.

"... I do think a website or something, obviously they would follow it up with something like that or have links to websites for people with alcoholism or issues." (Female, 18-25)

There was a sense amongst some of the groups (especially the parents groups), that the introduction of alcohol health information labels would have much more of an effect on the future generations who were yet to start drinking alcohol.

If they were used to seeing messages about the bad effects of alcohol from an early stage of life, it was likely to have a greater effect on their drinking practices. Certainly throughout

the mid SES parent group, references to campaigns for wearing seatbelts and drink driving had all had an impact on their children's generations, changing behaviours over time.

"Like the next generation I think." (Female, 16-17)

"Yeah it's very good for people who are starting to drink..." (Female, 18-25)

" ' They're not drinking. I know all my kids and their friends they just won't drink if they're driving.' 'Because of that advertising.' " (Low SES parent)

"But it may not happen through our generation, it might start a good cycle for the younger generation to be aware of these signs whereas we just blow off because we don't care but they might." (Mid SES parent)

"Here's an example. I also remember when I was a child that my parents were allowed to drink and drive... That's changed. All the advertising, the laws or the rules. That's different now." (Mid SES parent)

It was clearly evident during these groups that much of the information contained on these labels was new to these participants. For instance, there was little knowledge about the link between alcohol and breast cancer, there was poor awareness and understanding of how alcohol could affect brain development, there was little awareness of the current NHMRC guidelines (with the possible exception of that relating to pregnancy), and poor appreciation of the relevance and value of the consumption amounts mentioned in these guidelines. These observations highlight the importance of regarding the concept of these labels as an opportunity to educate the public about the effects of alcohol and about safe drinking levels.

Further, it should be noted that this limited awareness and understanding appears to exist across the demographic groups included in this research, indicating that the need for education is broad population based, rather than necessarily targeted to specific sub-segments.



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