Evaluating the impact of the Dandenong Public Drinking Campaign

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Keywords
campaign, evaluating, public, dandenong, drinking, impact

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Abstract

In 2009, Dandenong launch a campaign targeting drinking in public places using stencils, posters and stickers in community settings and bottle-shops. An evaluation was undertaken and 152 participants completed a survey where elements of the Health Belief Model (HBM) were explored. Over 65% of respondents reported that they had seen at least 4 different advertisements, suggesting that the campaign dissemination was very effective. The campaign had a high recall rate and over 25% of people had either stopped or intended to stop drinking in public places. Overall, awareness of the negative effects of drinking in public increased; however no follow up evaluation has been conducted to determine whether this had a longer-term impact on behaviour.

Keywords: alcohol, public drinking, communication campaign, evaluation
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Introduction

In 2007 over 14.2 million Australians aged 14 years or older consumed alcohol at least once in the previous 12 months (NHDS, 2007). Although drinking alcohol is a common activity for Australian adults (and some adolescents), there has been little research into the prevalence of drinking in a public place (parks, roads, beaches, community areas). In 2001 the Parliament of Victoria instigated an inquiry into public drunkenness and found that over three quarters (78%) of those who were held by police were between the ages of 15-34, with the most frequent category being the 20 to 24 year age group (Drugs and Crime Prevention Committee). High levels of public drinking, and the association between public drinking and engagement in criminal activities, result in increasing public concerns regarding alcohol related violence, crime and aggression, particularly among young people (Swahn 2001; Swahn & Donovan 2004). Approval from peers of drinking in public has been shown to be related to alcohol consumption and drinking-related consequences, particularly among adolescents (e.g., Jones-Webb et al., 1997). In the Netherlands, where about 80% of adolescent alcohol use occurs in public settings (Knibbe et al., 1991), perceived social norms were a strong predictor for heavy drinking in public (Oostveen, Knibbe, & de Vries, 1996). Thus, there is a need to address the perceived acceptability of drinking in public places.

The Health Belief Model (HBM) is the model most commonly used as a framework for behaviour change programs (Janz et al. 2002). The HBM can be used to predict the likelihood of an individual (or a targeted group) changing health-related behaviours based on the interaction between the following four factors: perceived susceptibility; perceived severity; perceived benefits; and perceived barriers. The HBM also considers a range of factors that can modify an individual’s perceived susceptibility and severity, including cues to action and variables such as demographic, socio-psychological and structural.

Public Drinking in Dandenong: Why a Dandenong Public Drinking Campaign?

In Greater Dandenong, the local by-law on consumption of alcohol in public places states that ‘a person must not, except with a permit consume any liquor, on a road, in or at a public place, in or on a stationary vehicle on a road or in or at a public place, or on vacant private land (unless with the landowner’s permission)’. While both police and council officers have the authority to enforce the by-law, council officers do not enforce the by-law as they do not have powers of arrest and there are risks to the council staff if they engage with an intoxicated person while working alone (Greater Dandenong ADAC 2009). The Council is increasingly concerned by anecdotal evidence that drinking in public, facilitated by easy access to alcohol (including for underage drinkers), is associated with vandalism, graffiti, violence and assaults, intimidation and theft, and general public disturbances (Greater Dandenong ADAC 2009). The Noble Park Central Activities District (CAD) was identified as a hotspot for public drinking and its associated problems.
The Council hired Convenience Advertising to design and implement a social marketing campaign in the Noble Park CAD, focusing primarily on the use of signage and branding to create increased community awareness of the by-laws and social implications of public drinking. The campaign, launched in 2009, aims to raise awareness of the $1000 penalty for drinking alcohol in public by placing advertisements in easy to see locations within the local shopping area. The advertisements used include footpath stencils, shop window decals (A3), stickers placed on alcohol products, and stickers (A4) for bus shelters, railway stations and local parks. The aim of the current study was to assess the impact of the campaign – specifically to examine recall and acceptance of the campaign, and any changes in attitudes, intentions or behaviours as a result. The Health belief Model was used as a theoretical framework for the assessment of attitude and behaviour change. Perceived susceptibility and severity were addressed by increasing awareness of the penalties for public drinking and the risks of being caught; perceived benefits and barriers by increasing awareness of the problems associated with public drinking (and thus reducing its perceived social acceptability). The campaign served as the primary ‘cue to action’.

Method

A questionnaire was developed for administration in an intercept survey. The questionnaire included demographics and questions to determine recall and recognition of the advertisements; the main and secondary messages, relevance, appropriateness, and target market of the posters. It also asked about behaviours such as drinking in public places, talking to friends and family about drinking in public places, and discussing the issue in a general sense. For example, ‘Have you discussed the information contained in this campaign with someone that you know?’ (Yes/No) and ‘Since you saw this campaign, have you talked to others about the campaign? (Yes/No.)’. Finally, elements of the Health Belief Model (HBM) were explored through questions about the benefits of not drinking in public, whether or not the messages are relevant to them or someone they knew, and whether the consequences for drinking in public are severe. For example, What do you think are the benefits to the local community of not drinking alcohol in public? (open-ended). The exact locations of the interviews were not recorded, however all surveys were completed in the Noble Park shopping precinct, with more than 90% of respondents reporting shopping in the area more than once a fortnight. Respondents were approached and asked to participate in the survey as they passed council staff in the selected shopping areas in Noble Park. The City of Greater Dandenong Council set a quota of 150 respondents in order to attain meaningful results and ensure a broad range of respondents.

Results

A total of 152 respondents were surveyed; each had either identified themselves as a local resident (n=113) or trader (n=39) of Noble Park. Respondents ranged in age; with 23.7% aged 18-24 years; 12.5% aged 25-34; 21.7% aged 35-44; 25.0% aged 45-54; and 16.5%
over 55 years. Gender was evenly split with 53.9% of respondents being female; and the majority born in Australia (63.8%). Ancestry was also mixed with 23.0% of respondents having Australian or European heritage, 19.7% South-east Asian, and 13.2% British. These 152 people were asked if they had seen any new messages on footpaths, in shop windows or public areas; and 117 stated that they had seen the messages. The remaining 35 people were then prompted by interviewers: “here are footpath stencils, shop window posters and stickers that have been put on alcohol products. Do you remember seeing them now?” Once prompted, all 35 could recall seeing one of the advertisements. Thus all 152 respondents clearly identified the campaign and the interviewers continued.

Recall and acceptance of the campaign messages

Over 65% of respondents reported that they had seen at least 4 different advertisements, suggesting that the campaign dissemination was very effective. Respondents most commonly recalled stencils on footpaths or on the ground (n=88), in the park (57), on Douglas St (23), and in the town centre or main streets (11); with 13 stating they had seen them ‘everywhere’. Posters were most commonly recalled in shops or the shopping centre (23), with small numbers recalling seeing them on streets or windows. Respondents also recalled seeing signs or other advertisements in parks and streets (60), and stickers on bins (16). However, only five respondents recalled seeing stickers on alcohol products.

When asked what they thought was the main message of the campaign, 53.4% of respondents identified drinking alcohol in public places leads to a fine, with just under half of these (23.8% of the total sample) stating specifically that drinking alcohol in public places leads to up to a $1000 fine. A further 25.2% identified the main message as no drinking in public places, and 19.9% as drinking alcohol in public places is illegal. That is, of the 152 people who completed the survey 97.1% were able to identify the campaign’s main messages. Those who recalled a secondary message gave similar responses to those above, such as drinking in public places leads to a fine (19.1%).

Over half of respondents (54.6%; 83) said that the campaign material was relevant to them. Those born in Australia were more likely to find the campaign materials relevant to them ($\chi^2 = 19.268, p = 0.000$). The majority of respondents (63.8%) felt that the messages would be relevant to someone they knew; with those born in Australia more likely to think this than those born overseas ($\chi^2 = 5.430, p = 0.020$). The most common benefits to the community of not drinking in public reported by respondents were avoiding broken glass (46.7%), creating a safer environment (41.4%) and avoiding public displays of drunkenness (39.5%). When asked to specify other benefits not listed in the survey, comments centred on less noise (7 respondents), as well as cleaner streets/town (3), and less complaints (2).

Over 70% of respondents thought that displaying this type of information was appropriate in the street environment, with an additional 38 people undecided. Those over 55 years of age were more likely to think that it was appropriate than those of other ages ($\chi^2 =10.732, p=0.005$). Only six people thought that the street environment was inappropriate for the campaign material to be publicised, with five of these six people believing that it was
ugly/messy. Over 60% of respondents thought that displaying this type of information on alcohol products was appropriate, with only a small number (5 people or 3.9%) feeling it was inappropriate. A substantial percentage of the sample (36.4%) was undecided on the matter. Those with Australian ancestry were more likely to be undecided or feel it was inappropriate than those of other ancestry ($\chi^2 = 6.200, p = .013$).

**Behaviours and behavioural intentions following the campaign**

Over thirteen percent of respondents said they had stopped drinking in public places since they had seen the campaign, and an extra 13.8% reported that they intended to stop drinking in public places in the future. Only 10.5% reported they did not intend to stop drinking in public places having seen the campaign materials. A substantial proportion of the sample (61.2%) reported that they did not drink in public places. Respondents who were 18 to 34 years of age were more likely to say they had not stopped drinking in public places, and those over 35 more likely to say they did not drink in public places ($\chi^2 = 32.783, p=0.000$). Also, those who were Australian born were more likely to report that they intended to stop drinking in public places, whilst those born overseas were more likely to report that they did not drink alcohol in public places ($\chi^2 =15.607, p=0.000$).

Only 6.6% of respondents said they had told a friend or family member to stop drinking in public places; however 53% stated they intended to in the future. Respondents aged 18 to 24 years of age were more likely to say they would not talk to a friend or family member, and those 35 to 44 years of age were more likely to say they would ($\chi^2 =11.234, p=0.047$). Whilst only 25.0% percent of respondents reported that they had talked about the information in the campaign, a substantial proportion of people intended to talk about the information in the campaign in the future (84.9%). Females were more likely to say they intended to talk about the information in the campaign ($\chi^2 =6.031, p=0.014$).

**Attitudes and beliefs on the drinking of alcohol in public places**

Interestingly, a large proportion of the sample (48.7%) did not feel drinking in public places was a problem in the area under survey, compared to 42.1% who did, and a non-response of 9.2%. Females were more likely to perceive public drinking was a problem than males; and 18 to 24 year olds more likely to say public drinking wasn’t a problem in the area than 45 to 64 year olds. When asked their opinion on a number of statements related to the consequences of drinking in public, the majority of respondents agreed with all statements, however, those aged 18 to 24 were more likely to disagree, and those aged 55 to 64 more likely to agree that the consequences of drinking alcohol in public are severe for other people in the area at the time; and those aged 18 to 24 were more likely to disagree, and those aged 45 to 64 more likely to agree that the consequences of drinking alcohol in public are severe for the community overall. Those of Australian ancestry were more likely to disagree with these statements than people of other ancestry.

**Discussion**
All 152 people approached by the interviewers could recall seeing the public drinking campaign in the Noble Park Precinct; and over three-quarters were able to identify the campaign without being prompted (with the remaining 35 recalling it when prompted). Interpretation of perceived main messages of the campaign is very straightforward, with all but three people mentioning drinking alcohol in public places. The three main responses given by respondents were that drinking in public places leads to a fine (or, more specifically, up to a $1,000 fine), no drinking in public places, and drinking in public places is illegal. This shows that the messages in the campaign were being clearly presented to the general public and they were able to understand each message. Even more encouraging is that when asked for further information, the two highest responses again were drinking in public places leads to a fine and drinking alcohol in public places leads to a $1000 fine – suggesting that almost all respondents were able to recall the key messages. It is positive to note that the most commonly perceived main messages were from a variety of campaign materials such as posters and stencils, and that of the people that responded to the question regarding the number of different stencils/posters/stickers seen, nearly 90% had seen more than 4 different campaign advertisements in the local area.

Just over half of the respondents reported that they found the messages relevant to them; and an even greater proportion thought that the campaign was relevant to someone they knew. It was particularly interesting that those who were born in Australia were more likely to find the campaign relevant; which may be associated with the Australian drinking culture where public drinking is seen by many as a social norm (other cultures may be different). Respondents’ actions since seeing the campaign varied somewhat with only 10 people telling a friend/family member to stop drinking in public; although 50% said they intended to tell a friend or family member to stop doing so. Further to this 38 people had talked in general about the information in the campaign with 84.9% (n=129) saying they intended to talk about it. It was positive to note that 21 people reported that they had stopped drinking in public places since seeing the campaign with 42 people saying they intended to stop. Although we won’t know with certainty whether these behaviours are maintained, it is encouraging that the message was effective in reaching the general public.

It was very clear that the majority of people were not offended by these messages being communicated in the street environment and on alcohol products, and thought that it was an acceptable campaign location. While the campaign was well received by the public, it was interesting to note that nearly 50% of the sample did not feel that drinking in public was a problem in the area. Males and those aged 18 to 24 years were less likely to perceive that public drinking is a problem than females and those aged 45 to 64.

Conclusions

Overall, based on respondents who completed this survey the campaign was well received by the public, had excellent levels of recall and did make respondents more aware of drinking in public places. It would be interesting to observe the number of fines issued over the following 6 months; and, ideally, to repeat the survey in 3-6 months to determine whether there has been a shift in public opinion regarding drinking in public.
References


