



**VICTORIA UNIVERSITY**  
MELBOURNE AUSTRALIA

*Drinking contexts and drunken behaviours: Indicators of a cultural shift in drinking practices*

This is the Published version of the following publication

Allan, Julaine and Van Dyke, Nina (2016) Drinking contexts and drunken behaviours: Indicators of a cultural shift in drinking practices. *Health Education and Care*, 1 (1). ISSN 2398-8517

The publisher's official version can be found at  
<https://oatext.com/Drinking-contexts-and-drunken-behaviours-Indicators-of-a-cultural-shift-in-drinking-practices.php#Article>

Note that access to this version may require subscription.

Downloaded from VU Research Repository <https://vuir.vu.edu.au/43439/>

# Drinking contexts and drunken behaviours: Indicators of a cultural shift in drinking practices

Julaine Allan<sup>1\*</sup> and Nina Van Dyke<sup>2</sup>

<sup>1</sup>Senior Research Fellow, Lyndon Community, Australia

<sup>2</sup>Social Research Group, Market Solutions, Australia

## Abstract

**Aim:** This study investigated young people's experiences of drinking alcohol to identify ways a cultural shift in drinking practices could be measured.

**Methods:** Three sets of 'integrated groups' consisting of several focus groups followed by a forum including all groups (n=63) investigated participants' drinking places, people, attitudes to intoxication and influences on drinking. Iterative data analysis identified cultural artefacts described in the focus groups that explained drinking practices and expectations of young people when they drank alcohol.

**Results:** Key findings were that participants identified intoxication by behaviours, acceptability of intoxication varies according to the event, social media plays an important role in constructing drinking practices and supporting intoxication; and non-drinkers create discomfort in drinking networks.

**Conclusion:** Changes in the acceptability of intoxication could indicate a cultural shift in drinking practices. Drunken behaviours could be used as cultural artefacts to develop indicators of alcohol culture. Measuring the acceptability of intoxication across a range of situations is possible but needs to be tested.

## Introduction

Global concern about the personal and social costs of drinking alcohol is growing. The World Health Organisation (WHO) has determined that 5.1% of the global burden of disease is attributable to alcohol consumption and has consequently set a target of a 10% reduction in the harmful use of alcohol by 2025 in the global alcohol strategy. In Australia, alcohol is widely used and socially acceptable in everyday activities as well as ubiquitous at celebrations such as births, deaths and marriages [1]. Recently, deaths caused by alcohol related violence and subsequent changes to regulation of licensed premises have heightened public awareness of problems caused by alcohol (e.g. ABC News, 2014 <http://www.abc.net.au/news/2014-01-21/one-punch-laws-to-tackle-sydney-alcohol-fuelled-violence/5210740>). Despite the acceptability of alcohol, recognition of problems caused by it has led to calls for cultural change in attitudes towards drinking and intoxication. This is a present situation not only in Australia but also many other countries like USA, UK, France, Italy etc. Previously in Australia, alcohol is associated with violent and anti-social behaviour and in some other European countries; drinking behaviour is largely peaceful and harmonious. But the present situation is completely different.

Once a problem such as harmful alcohol consumption is on the political agenda, action becomes the responsibility of policy makers. Identifying the problem is just the beginning of a lengthy process that must include a change strategy [2]. The Victorian state government has embarked on a cultural change project to reduce the acceptability of alcohol intoxication and encourage moderation. Evaluating the effectiveness of any change strategy is integral to policy implementation. In order to do so, a measure of cultural change is needed.

The primary purpose of this study was to identify and assess indicators of alcohol culture that can be measured over time among

young Victorians aged 16 to 29. The study involved both qualitative and quantitative components and was informed in part by a literature review of measures of alcohol culture and alcohol cultural change. The qualitative component reported in this paper was designed to identify the drinking practices that were expressions of alcohol culture that had potential as indicators and could be subsequently tested in the quantitative study. Following a discussion of cultural indicators, this paper presents the findings of the qualitative research.

## Cultural indicators

Identifying indicators of alcohol culture is challenging. Whereas a considerable body of research has tested and validated measures of alcohol consumption, culture is less amenable to being measured or even precisely defined [3]. Culture is typically defined as shared values, beliefs and practices that are historically created and passed on through social interaction [4,5]. Cultural factors that influence alcohol consumption have been explored through gender (e.g. differences between male and female drinking patterns) [6], age (e.g. young people's beliefs about intoxication) [7], sexuality (e.g. alcohol's role in the creation of gay tribalism) [8], geographic location (drinking practices in rural or urban locations) [2], occupation (e.g. drinking practices vary by industry) [1], social media (the inclusion of drinking practices on Facebook profiles) [9] and ethnic or racial membership (e.g. ethnic differences in drinking rituals and participation) [10,11]. The range of examples highlights that alcohol is frequently part of cultural

**Correspondence to:** Julaine Allan, Senior Research Fellow, Lyndon Community, Australia, Tel: 02-63612300; E-mail: [jallan@lyndon.org.au](mailto:jallan@lyndon.org.au)

**Key words:** alcohol, intoxication, young people, cultural change, behavioural indicators, Australia

**Received:** July 16, 2016; **Accepted:** August 19, 2016; **Published:** August 22, 2016

practices, yet Australia is often described as having a single alcohol culture as though it cuts through all the other categories.

Having an alcohol culture suggests broad acceptance of frequent and heavy drinking and resulting intoxication in a wide variety of social situations. Knock-off drinks, Friday night drinks, drinking games such as boat races, beer pong and community celebratory and social occasions such as Anzac Day and picnic races are all examples of times, places and rituals when drinking alcohol is common in Australia [12]. Drinking practices - when and where people drink, who with and the acceptability of intoxication - are critical to identifying indicators of alcohol culture [13,14].

Culture is most frequently examined and measured in the organisational context. How organisations achieve their goals and share their values across the workforce is integral to organisational change strategies [15]. One way that current culture is identified is by asking employees what behaviours are required to fit in or meet workplace expectations [16]. Shared behavioural expectations are said to represent organisational culture. These norms can include things such as adherence to dress codes, participation in meal breaks and decision-making hierarchies or patterns of communication [17].

Observable behaviours are cultural artefacts or the physical manifestation of culture that can be qualitatively and quantitatively assessed [18,19]. This suggests that cultural artefacts will exist in all cultures. Cultural artefacts in relation to alcohol culture will therefore include places or events where drinking is permitted and promoted, expectations of drinking and observable behaviours that represent drinking or intoxication. Key factors for investigation of alcohol culture are people's descriptions of drinking and drinking places and the status of intoxication rather than the amount of alcohol consumed [20].

Investigating pleasure, sociability, bonding and ways of managing the effects of alcohol are critical to understanding the ways young people drink [21-23]. The objective of this qualitative study was to identify how young people in Victoria, Australia describe how they drink and talk about alcohol, including their experiences of alcohol use and intoxication. Ethics approval for this project was obtained from Charles Sturt University Human Research Ethics Committee (No. 2013/164).

## Method

An exploration of cultural practices is most effectively conducted with qualitative methods [24]. The qualitative study that forms the basis of this paper consisted of three 'integrated groups'. Integrated groups involved running two or more consecutive focus groups

followed by a single forum in which all groups participated. Such an approach allowed exploration of the differences and similarities across demographic groups. Further, this approach provided an opportunity to explore the views and responses of individuals when participating in both a smaller group discussion with peers with whom they share characteristics and a larger group discussion with a more diverse range of participants. Focus groups are known to be particularly useful for investigating social phenomena such as recreational drinking because they make use of social interaction to uncover issues and themes that might not otherwise be exposed [25].

The focus groups were segmented by age or education. During the forums, table groups were mixed. Two of the integrated groups were conducted in metropolitan Victoria while one was conducted in a regional centre. A regional centre was included because alcohol consumption is higher in regional Australia compared to urban areas [26].

## Sampling

Random sampling was used to recruit people into the study. Participants were contacted using a commercially available electronic database of Victorian residents that includes over 6,000,000 telephone numbers (landline and mobile) attached to addresses across Australia. The sample was selected by postcode to ensure potential participants were within close proximity of the integrated group locations (Table 1).

To be eligible for participation people had to have consumed alcohol in the past 12 months. Participants were each reimbursed \$100 (\$77 US or 69 Euros) for their participation in the integrated groups.

Written consent was obtained from all participants and also from parents or carers of young people aged 16 or 17. During recruitment, the young person was advised that parent/carer consent was also required prior to their participation. Participants (and their parent/carer if under aged 18) were then sent consent forms which they returned prior to participate in the research. The consent forms were accompanied by information sheets for participants and parents/carers.

The focus group questions were derived from a literature review conducted for this project and included broad topics for discussion and group activities designed to stimulate discussion [27]. Participants were also shown a YouTube video (<http://youtu.be/U0HR0eQ8OV8>), which facilitated exploration of participants' reactions to different visual drinking behaviours. The drinking behaviours depicted in the clip included people drinking alcohol in groups, "sculling" drinks, doing shots, being unable to walk or talk as a result of drinking, being assisted by others and vomiting. Inclusion of the YouTube clip ensured that

**Table 1:** Focus groups

<b>Forum 1: Urban (n=26)</b>		
<b>Group 1</b> 16-17 year olds Total Participants: 7 • Males: 3 Females: 4	<b>Group 2</b> • 18-22 year olds Total Participants: 10 • Males: 4 Females: 6	<b>Group 3</b> • 23-29 year olds Total Participants: 9 • Males: 5 Females: 4
<b>Forum 2: Urban (n=10)</b>		
<b>Group 4</b> • Tertiary students aged 18-29 Total Participants: 6 • Males: 2 Females: 4	<b>Group 5</b> • Non-tertiary students aged 18-29 Total Participants: 4 • Males: 3 Females: 1	
<b>Forum 3: Regional (n=27)</b>		
<b>Group 6</b> • 16-17 year olds Total Participants: 7 • Males: 2 Females: 5	<b>Group 7</b> • 18-22 year olds Total Participants: 10 • Males: 6 Females: 4	<b>Group 8</b> • 23-29 year olds Total Participants: 10 • Males: 3 Females: 7

each participant was evaluating and interpreting the same behaviours in their discussions.

Focus group participants were asked about when and where they drank alcohol, which with, ways they had been affected, views on non-drinkers, and influences on how much it drank, getting drunk and how they could recognise intoxication.

Each focus group discussion was recorded on a computer by a note taker during the groups and also on a digital recorder. The recording was later transcribed and all documents were imported into NVivo10 (QSR 2012) for analysis. Data were analysed thematically with the aim of developing themes that reflected the cultural norms for alcohol use. The approach taken to analysis was iterative rather than linear, involving four different although highly interconnected steps: (1) familiarisation, (2) identification and coding of themes, including comparisons within case and cross case, (3) categorisation and (4) interpretation and understanding [28]. The research team met via teleconference weekly to review and discuss the analysis, developing themes and their relationship to the research question.

## Findings

The following section presents the five key themes identified during analysis of the focus group data. The themes – drinking places, observable drinking artefacts including stages of intoxication and intoxication, non-drinkers and social media – were consistently identified across groups; exceptional views are reported.

### Drinking places

Drinking alcohol was widely practiced, expected and anticipated. Drinking alcohol continues to be the norm for Australian young people. Drinking, and to some extent intoxication, were clearly acceptable to and expected by most of the forum participants. For example:

*“If everyone else is doing it it’s okay.”*

Having alcohol at social events was assumed. Events noted by participants where drinking was the norm included nights out with friends to pubs or clubs, sporting functions, birthday parties, music festivals, barbeques, house parties, dinner parties and weddings.

*“Like a special occasion, a wedding or something, you have a few drinks to let your hair down, I think, socialise.”*

Expectations differed regarding the level of drinking at particular events. Drinking to excess was traditionally expected at some events including special occasions such as your own birthday party (extra drinks were purchased for the birthday boy/girl), football grand final parties or events where drinks are provided, such as milestone birthday parties.

*“For the last ten years, most of the times I got really drunk was only ever when it was free for going out getting blotto.”*

*“If someone has a tab, like at a 21<sup>st</sup>, that makes it so much easier.”*

Socialising and relaxing were the key reasons given for consuming alcohol. Many described alcohol as lowering their inhibitions so they would do things and interact with people that they would not have otherwise. For example:

*“It’s easier to strike up a conversation and get in with someone, than when you’re sober waiting in line at the movies.”*

The creation of networks within the context of drinking was evident in participants’ descriptions of having greater confidence to talk to people and behave in less inhibited ways when affected by alcohol. The networks were not just within existing social groups but extended to others – ‘randoms’ – who had come to the same event or location.

*“It makes you less inhibited I suppose. You can – easier to make conversation with complete randoms.”*

Not drinking at social events was discussed as a personal choice rather than the norm. In other words, people expected alcohol to be available in most places. Social occasions where alcohol was not provided were noted as unusual. For example:

*“My parents actually got invited to a wedding and there was no drinking and they said it was crap and... and it was just weird.”*

Events where alcohol was not permitted were said to be rare and challenging to typical drinking practices;

*“If there’s an alcohol free event there’s normally a few people saying, ‘what the hell is this?!’”*

Young people who were studying at university mentioned “schoolies” and “O week” (University orientation) as occasions where drinking was integral and consumption was expected to be excessive. On these occasions, it was considered normal to get “blind” “wasted” or “written off”.

*“Yeah, there’s a lot of social events that get organised by Uni where the goal is definitely to get as drunk as you possibly can... they’ll deliberately have drinking games with like, whoever drinks the most beer wins and whatever... The aim is to get really, really drunk.”*

Some drinking practices signify new drinking occasions. ‘Schoolies’, the celebratory holiday many young people have when they finish high school, was frequently mentioned as a rite of passage where alcohol was so integral steps had to be taken to ensure those under the legal drinking age did not ‘miss out’;

*“And there’s a lot of people who are 17 when they’re in Year 12, like at Schoolies, and we got a house and most of my friends turned 18 in February, but we all bought them drinks anyway because it was Schoolies and their parents totally understood. Otherwise they would be missing out on that.”*

Pre-drinks is another example of a more recent tradition similar to schoolies. Pre-drinks is a term used to describe alcohol drunk at home before going out. This practice was common among young people in the focus groups as a way of saving money because drinking the same amount in bars and clubs would be prohibitively expensive. Pre-drinking was described as part of the going out ritual – widely accepted and practiced. For example:

*“So if you go out to a nightclub, you’ve got to have pre’s, meet at 8 o’clock at a mate’s house and that’s just the routine.”*

### Stages of intoxication

Most effects of drinking alcohol were described as positive. Participants used terms such as “happy”, “relaxed” and “excited” to describe how they felt when drinking. However, when asked about getting intoxicated or drunk, more negative comments were made. These comments included physical signs of alcohol consumption; for example, slurring words, losing balance, blurred vision, throwing up and passing out.

The amount of alcohol required to experience these effects was described as different on different occasions as well as varying from person to person. For example:

*“Mum might have 4-5 glasses and then she’s gone. Whereas I might have that and nothing. It’s sort of hard to know.”*

*“I’ve got some older friends who, if I drank like them, I’d be like, dead. But they can have like 8-9 drinks and I wouldn’t even be able to tell that they’re very drunk.”*

Becoming intoxicated was described as stages that people went through as they consumed more alcohol. Participants talked about particular behaviours related to becoming intoxicated rather than amounts consumed. The early stage was frequently described as tipsy or happy where there was a feeling of warmth and the effect of alcohol was minimal or barely noticeable;

*“You are still ok in front of parents.” “Or like if something happened, they could be suddenly almost sober.”*

The next stage was often described as excited – drunk, where people became more talkative, less inhibited and felt more energetic. For example:

*“You get like louder. You talk more, maybe talk to people you don’t know”*

Stage three was described as “pissed drunk” where people were unable to hide their level of intoxication, spilled drinks or stumbled and might slur their words. For example: “They start like speaking differently. Not necessarily slurring, but they start doing that thing where they say a word for longer, like, ‘heeeeeey.”

*“When you start speaking your feelings. Like the other night my friend would not shut up about this girl she hates and it’s like, ‘ok we heard you.”*

Stage four was described as “smashed” or “trashed” where behaviours included lacking control over movement and words as well as aggressive or emotional words and actions that may lead to regret or embarrassment. For example:

*“You feel pretty gone, you don’t have very many inhibitions. You can stand up and you’re not falling over, but you drink to feel almost, not out of control entirely, some sort of control that you feel really relaxed, and willing to do almost anything within reason.”*

*“Yeah it starts with the ‘I love yous’ and then it turns to crying.”*

*“Pain tolerance. Like once I was like cheers and I cheers someone with a bottle and it like smashed the top off, like smashed and I went, oh I will just scull it anyway and I put it up and like a shard of glass went, and I didn’t even know and I had this like, and there was this blood coming down... you have got blood like coming all the way down here and then I just stopped it bleeding and then I just didn’t even care and just kept drinking.”*

*The final and most intoxicated stage was often called blind-wasted-passed out, and including vomiting, inability to stand up or speak and sometimes unconsciousness. For example:*

*“Passed out. Can’t walk”.*

Different stages of intoxication were described by many group participants but getting drunk was not always the goal. Some participants reported intoxication as a goal of consuming alcohol;

*“We drink to get drunk. Every Saturday night, that’s the whole point.”*

However, others were more interested in the effects of alcohol in the earlier stages and perceived end stage intoxication as a mistake. For example:

*“it has been kind of unintentional, so I have gone out to get like a certain amount of drunkenness, which I enjoy, but I have gone over the top because I am not keeping track of how much I am drinking, or how much I am drinking and eating and yeah just gotten carried away.”*

### Acceptability of intoxication

Participants described similar expectations for both males and females to drink alcohol. However drunk women were judged differently to drunk men. The youtube clips created discussion around the varying acceptability of intoxication. For example:

*“I think there’s more pressure on chicks when they get drunk to uphold that certain edge and when they go over that tipping point it’s, “shit she’s messy”, like screaming, on the dance floor and falling over or something like that. You kind of have that expectation to uphold, which sucks, whereas with guys if they’re falling over, you say “he’s just wrecked” or whatever.”*

Young women perceived they would be judged more harshly for being drunk than young men were. In responses to the YouTube video, participants generally laughed at the drunken men but described the women as embarrassing or “messy”;

*“I think it stems from the very general and very stereotypical thing, but from a certain perspective males are more acceptable to do risk taking things, so if you have a group of year 9 boys that like to jump off the roof of this building, if a group of year 9 girls are like “lets jump off this building”, it’s “what are you doing, that’s ridiculous”, so it almost stems from there, that same thing, that girls are expected to not behave like that because they’re not expected to behave like that in general.”*

At the same time, young women were often judgemental of other women’s behaviour when intoxicated. For example:

*“If you are just driving past and you see girls are drunk, I think people are more judgemental being drunk than guys being drunk. But they immediately just think, I shouldn’t say it but, slut you know, because they are sort of like how they are walking around.”*

### Intoxication, risks and harms

The risk discourse depicts young drinkers as objects at the mercy of the effects of alcohol whereas they are more likely to control their drinking practices by ensuring drinking happens and, if being drunk is the goal, that they achieve it. Young people managed some of the risks associated with drinking by choosing where and with whom to drink because some places and people were clearly perceived as safer than others. Intoxication was noted as a particular time of risk that had to be managed by being careful where you were;

*“I can stay the night if we’re at a house party, and it’s always an element of danger or whatever when you’re out at a night club whereas if it’s a house party you’re always just like, I know these people, they’ll take care of me. Not that that’s an excuse to go to excess, but...”*

*And who you were with;*

*“It’s the people you’re with as much as the alcohol. If you’re with the right people, then if you ever do something stupid, they’re going to be like, ‘come on man, you’re better than that’. Whereas bad people will*

*just go like 'yeah cool', and when it goes pear shaped, they go like 'you're on your own now'."*

While young people are aware of the negative consequences of intoxication but when they are weighed up against the benefits of drinking the negatives are of little concern. Things going pear shaped included drinking so much that memory of events was impaired the next day. However, that was often celebrated by the peer group and provided support for intoxication. For example;

*"If, the next day, when you are trying to remember what happened and people play it up like it's a big funny joke, you think that's okay. Whereas if they said 'you're an idiot, you did this' you would sort of go 'maybe I won't do that again'."*

Experiences of harm were retrospectively glorified in some examples:

*"My sister had a 16<sup>th</sup> at my house and this kid rocked up who was 14 and he was passed out for an hour on my driveway and he had to get his stomach pumped. Yeah that was a crazy party, all our windows got smashed and a kid got bottled and like, it wasn't that bad, but all our things got stolen, but, yeah, it was a good night."* However, several participants stated problems associated with drinking were the exception rather than the rule. For example:

*"I think it doesn't always end like that, where somebody is vomiting or thrown into bed or violence, pulling pants off."*

Injuries and ambulances made for better stories and memories of drinking occasions than when nothing dramatic occurred. Participant accounts included some glorified drinking stories where injuries were received. However, they were described as occasional memorable events rather than frequent experiences. The risk of serious harm from a single occasion of drinking was not a deterrent to drinking and was perceived as the exception rather than the rule.

Drinking alcohol, and less so being drunk, was overwhelmingly described as positive, even exciting. Public health discourse that emphasises the risks from single drinking occasions is unlikely to resonate with people who drink frequently but rarely experience harm.

*"There's people who like the people that they become when they get drunk. The person that will try and climb that random post, or the person who will break in behind the bar and pour themselves a drink, or whatever. People like being that person. Like it gives them an alter-ego."*

### Non-drinkers

Fitting in by consuming alcohol was an important to participants. When asked about not drinking, participants initially said it was acceptable and the choice of the individual. However, upon further exploration there were many exceptions to this stance. Group discussion revealed that having non-drinkers around was not desirable. Young people reported feeling less comfortable drinking in front of non-drinkers for fear of being judged and, under these circumstances, non-drinkers were said to not fit in or not be as much fun. For example;

*"I am more likely to invite them if I know they are drinking, [non-drinkers are] sitting back and judging it, and being 'no I am too mature for this.'"*

Pressure to conform to drinking norms was described in the following example where the participant notes 'you say you drink';

*"I think it's the amount of times. Like it's okay if some people don't drink occasionally but you say you drink. But if it's like, one person in*

*particular never ever drinks and always comes out, you're always a bit like. . . or you make a comment or you get them to try it or something."*

Not drinking or drinking small amounts of alcohol and pretending to be drunk was described as one way of fitting in with others who are drinking.

*"Oh it is so ridiculous when a girl has had like one cruiser and she acts like she has had like 20 and you are like you are not drunk, please be normal. "*

Participants in several groups noted that girls would pretend to be drunk. For example: "Girls like love to act really drunk."

Alcohol was a significant part of creating commonality and shared experience but it is not clear from the focus groups why girls pretended to be drunk and boys were not perceived to do this. Participants described people who never drank alcohol as being excluded from conversations and invitations to future events. It was only acceptable for young people to be non-drinkers on single occasions such as when they were the designated driver or they were unwell. For example:

*"Everyone is always really aware of who is driving, who's only having 1 or 2 and who's driving. "*

There was one notable exception to the above views about non-drinkers. One young person stated their peer group was inclusive of non-drinkers and indicated cultural factors (religion) as one reason people may not drink;

*"I have friends that decide not to drink for other reasons, whether it is religious or they just don't want to, and I have others that I do drink with, and it is just that, it doesn't really matter in our group of friends. If they don't want to drink, that is fine, we are not going to pressure them but they are going to be around even if we are drinking."* However, in spite of comments about not excluding non-drinkers, it is clear that drinking means being part of the bigger group – the 'we' that drinks.

### Social media

The increasing use of social media was highlighted as a new element of drinking practices. . Participants in a number of groups raised the influence of social media such as Facebook and Instagram in sharing experiences of intoxication. Posts related to drinking and intoxication were described as common. Strong support for drinking is created via social media. Posting personal pictures of drinking or drunk friends that are liked by others is recognition of the way individual behaviour links to others who also engage in similar actions.

Photos that supported drinking were categorised by focus group participants; "Certainly there would be three types of photos I reckon. The first would be a picture of your drinks. Second would be selfies and the third would be photos of you tagged at a club." *"Or you're having a party and you have so many drinks you have to take a photo of the empties."*

Posts and photos about the negative consequences of intoxication were common but they generally supported drinking and intoxication. For example;

*"I was going to say there is a pretty funny photo of me and there is this chick vomiting in a bucket and I am just standing there like that, just over her. It like got a few likes, probably about like 40 likes."*

*"Yeah, I kind of think that some of the photos on Facebook people see them as a glory tag: look at me, look at what I did. Whereas, if it was more like everybody wrote comments on there like, 'You fool, look what you did'..."*

The quote above suggests there could be some influence over intoxication via responses to drinking photos. Another participant noted that social media responses of peers were more important than others for influencing behaviour; *“I think it would have to come from your peers, because if your parents jumped on Facebook and went, ‘You’re being stupid’, you go, ‘Well, great, that’s what I wanted to do. But if your best friend jumped on and went ‘You look stupid’, you’d go, ‘oh no’.”*

The social media sanctions described were not usually against drinking but against taking or posting photos of people in vulnerable situations. For example:

*“The worst thing is when your mates start figuring out YouTube – you know that video where they carried him to his bedroom right and you heard somebody say that you’re on YouTube, like that should be your primary thought. Especially in that situation. Sure, if it comes up later, it’d be like oh, this is awesome, but you shouldn’t be videotaping with that pure thought.”*

While drinking and intoxication was mostly acceptable amongst peers and social groups, there was recognition that intoxication was not always viewed positively; *“Employers do look at Facebook pages and all that sort of stuff and go, ‘Oh that is interesting...’*. The phenomenon of “drunk Facebook” was described, where decisions to post photos are made while intoxicated and those photos could be easily recognised by others. For example;

*“Snap chatting or drunk Facebook or whatever we do.”*

Photos without alcohol featured are simply social snaps and those where drunken behaviour is extreme are sometimes censored. However, the widespread recognition that some photos and comments related to alcohol need to be censored suggests that levels of intoxication vary in their acceptability according to relationships between the drunken person and those likely to see the photo.

The term, “drunk Facebook” was recognised by other focus group participants and describes a new way of communicating drinking practices across networks. It also highlighted that drunken behaviours could be recognised in photos and in the text accompanying posts even if people did not describe themselves as drunk;

*“I don’t think you can necessarily judge that when you are drunk when you’re uploading photos. You do the next morning, but I think very often photos have gone on. You think how funny and then the next morning you’re like, ‘shit my boss will see that’ and my parents will see all these sorts of things.”*

## Discussion

The key aim of the study was to develop indicators of alcohol culture that could be used to measure change in culture over time. Indicators need to be measurable yet also relate to qualitative expressions of alcohol culture [18]. Exclusion of non-drinkers from social groups, judgements of drunk women or drunk men; and the frequency of social media posts of positive depictions of alcohol all have potential as indicators of change.

However, the most likely cultural artefacts are the behavioural descriptors of levels of intoxication and the places or occasions where drinking is most acceptable. These have good potential as indicators of culture because they are observable [18,19]. Behaviours were the descriptors when talking about others drinking or degree of intoxication, for example young women acting drunk by staggering.

Stages of intoxication have been previously described and this concept is a way of standardising peoples descriptions of behaviour [22]. Testing if similar behaviours were associated with each stage of intoxication across a larger sample is a way of verifying intoxication as a cultural artefact.

The prosocial norms around drinking alcohol were clearly described as rewards that created a strong sense of belonging [29] to the extent that those who did not drink did not belong. Being accepted as part of the ‘we’ that drinks – and gets drunk – continues to be important for young people. Indicators of alcohol culture can be shaped around fitting in by drinking at certain events or occasions. If drinking became less prevalent at weddings or birthday parties for example, it would indicate a change in the ubiquity of alcohol consumption.

Frequent representations of intoxication on social media enhance the mainstream, normal nature of severe intoxication [9]. However, participants recognised that drunkenness and drinking photos were not universally highly regarded. In spite of consistency of findings in the current study, it is highly likely that groups comprised of more diverse ages, genders, ethnicities and places will vary in their drinking norms and expectations. Any measure of alcohol culture will need to include these demographic variables to identify alcohol micro-cultures rather than assume homogeneity.

Measures of alcohol consumption abound in the literature and have been extensively tested. Such measures identify how much alcohol affects physiological functioning and causes harm over time [30]. Participants, however, argued that alcohol affected them differently on different occasions. Stages of intoxication identified by behaviours could be recognised in others. The patterns of behaviour that occur in social situations and are recognised by others as indicative of alcohol consumption are potential measures of alcohol culture [4].

## Limitations

The key limitation in this study is the inability to generalise the findings to the broader community. There are many population subgroups in Australia where drinking practices will vary considerably from those described here [31]. It is possible that stereotypical drinking norms were over emphasised in the group setting where individuals were not comfortable expressing different views. However, the consistency of views expressed across groups indicates any individual or subgroup differences are likely small. The concept of behavioural indicators accurately measuring acceptability of intoxication across situations needs to be tested.

## Conclusion

This qualitative study has reiterated that drinking alcohol on most occasions is valued by young people and expected in Australia. However, investigation from a cultural perspective has established potential for particular behaviours to be linked to stages of intoxication and places intoxication is acceptable. The impact of policy strategies intended to change the culture of drinking should be measured. Behavioural indicators of intoxication have the potential to identify changes in Australia’s drinking practices because the behaviours are cultural artefacts inextricably linked to alcohol culture.

## Acknowledgements

This study was funded by the Victorian Law Enforcement Development Fund (VLEDF). Thank you to Emma Saleeba for her comments on earlier versions.

## References

1. Pidd K, Roche AM, Buisman-Pijlman F (2011) Intoxicated workers: findings from a national Australian survey. *Addiction* 106: 1623-33. [Crossref]
2. Allan J, Clifford A, Ball P, Alston M (2012) You're less complete if you haven't got a can in your hand': Alcohol consumption and related-harms in rural Australia: the role and influence of cultural capital. *Alcohol and alcoholism* 47: 624-629.
3. Schwandt TA (2001) Dictionary of Qualitative Inquiry, Second Edition, London: Sage Publications.
4. Paige RM, Yershova Y, Jacobs Cassuto M, DeJaeghere J, Bennett M, et al. (2003) Assessing intercultural sensitivity: An empirical analysis of the Hammer and Bennett Intercultural Development Inventory. *Int.Jntercult Relations* 27: 467-486.
5. Kroeber & Kluckhohn (1952) Culture: A critical review of concepts and definitions.
6. Measham F (2002) Doing Gender-Doing Drugs: Conceptualizing the Gendering of Drugs Cultures. *Sage* 29: 335-373.
7. Lindsay J (2006) A big night out in Melbourne: drinking as an enactment of class and gender. *Contemp Drug Probl* 33: 29-61.
8. Slavin J (2004) Whole grains and human health. *Nutr Res Rev* 17: 99-110. [Crossref]
9. Ridout B, Campbell A (2014) Using Facebook to deliver a social norm intervention to reduce problem drinking at university. *Drug Alcohol Rev* 33: 667-673. [Crossref]
10. Maher L (2004) Drugs, public health and policing in Indigenous communities. *Drug and Alcohol Review* 23: 249-976.
11. Duff C, Puri A, Chow C (2011) Ethno-cultural differences in the use of alcohol and other drugs: Evidence from the Vancouver Youth Drug Reporting System. *J EthnSubst Abuse* 10: 2-23. [Crossref]
12. Roche JR, Friggens NC, Kay JK, Fisher MW, Stafford KJ, et al. (2009) Invited review: Body condition score and its association with dairy cow productivity, health, and welfare. *J Dairy Sci* 92: 5769-801. [Crossref]
13. Hopper, K. (2004). Interrogating the Meaning of "Culture" in the WHO International Studies of Schizophrenia. In Schizophrenia. *Cambridge University Press* 11: 62-86.
14. Kleinman A (1998) Experience and Its Moral Modes: Culture, Human Conditions, and Disorder.
15. Masi RJ, Cooke RA (2000) Effects of transformational leadership on subordinate motivation, empowering norms, and organizational productivity. *Int J Organizat Analysis* 8: 16-47.
16. Kwantes CT, Boglarsky CA (2004) Do occupational groups vary in expressed organizational culture preferences? A study of six occupations in the United States. *Int J Cross-Cultural Management* 4: 335-353.
17. Newman J (1996) Shaping organisational cultures in local government. London: Pitman.
18. Yauch CA, Steudel HJ (2003) Complementary Use of Qualitative and Quantitative Cultural Assessment Methods. *Organizational Research Methods* 6: 465-481.
19. Robbins SP (1996) Organizational behavior: concepts, controversies, and applications. 7th ed. Englewood Cliffs, NJ: Prentice Hall.
20. Asbridge M, Duff C, Marsh DC, Erickson PG (2014) Problems with the Identification of 'Problematic' Cannabis Use: Examining the Issues of Frequency, Quantity, and Drug Use Environment. *European Addiction Research* 20: 254-267. [Crossref]
21. Hutton F (2012) Harm reduction, students and pleasure: An examination of student responses to a binge drinking campaign. *Int J Drug Policy* 23: 229-235. [Crossref]
22. Lindsay RW, Zhang J, Schweiger A, Steele M, Stern H (2009) Arctic Sea Ice Retreat in 2007 Follows Thinning Trend. *J of Climate* 22: 165-176.
23. Griffin C, Bengry-Howell A, Hackley C, Mistral W, Szmigin I (2009) The Allure of Belonging: Young People's Drinking Practices and Collective Identification. *Identity Studies in the Social Sciences* pp: 213-230.
24. Denzin NK, Lincoln YS (2005) The discipline and practice of qualitative research. In Denzin NK, Lincoln YS (eds). *The Sage Handbook of Qualitative Research*, 3rd edn. Thousand Oaks, CA: SAGE pp: 1-32.
25. Morgan DL (1988) Focus groups as qualitative research. Newbury Park CA: Sage pp: 200.
26. Australian Institute of Health and Welfare [AIHW] (2014) National Drug Strategy Household Survey detailed report: 2013. Drug statistics series no. 28. Cat. no. PHE 183. Canberra: AIHW.
27. Reid M (2013) Drinking-related lifestyles: exploring the role of alcohol in Victorians' lives Research summary.
28. Gronklaer M, Curtis T, De Crespigny C, Delmar C (2011) Acceptance And Expectance: Cultural Norms For Alcohol Use In Denmark. *Int J Qualitative Stud Health Well-Being* 6: 8461.
29. Manton E, Pennay A, Savic M (2014) Public drinking, social connection and social capital: a qualitative study. *Addiction, Research and Theory* 22: 218-228.
30. National Health and Medical Research Council (NHMRC) (2009) Australian guidelines to reduce health risks from drinking alcohol. NHMRC, Commonwealth of Australia.
31. Room R (2015) Cultural aspects of and responses to addiction. In: El-Guebaly N, Carrà G, Galanter M., eds., *Textbook of Addiction Treatment: International Perspectives*. Heidelberg: Springer.