



Girls, Women and Alcohol:

An Interim Report of Phase One from the Canadian Women's Health Network to the LCBO
March 2014

I don't think I really know any of the health risks... I've heard that there are some ... but I couldn't tell you what they were.



This is how you become an adult. Know your wines, order at a bar... you're a professional now.



...smoking is such a black and white issue and drinking is much more of a grey area and everyone does it.



... you stop to ask yourself is [a specific health campaign] really about the health risks, or is it about how women should behave?



It becomes harder and harder to navigate in public space without having any alcohol around...



CWHN | Girls, Women and Alcohol Focus Groups

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This early-stage investigation explored young women's (18-24) understanding and realities of alcohol and drinking, and the best ways to communicate the health impacts of drinking. This report is intended as a snapshot from a small number of focus groups, and not the final word on this issue. Further focus groups, with a broader demographic, are planned in the coming months.

Research Areas of Interest

Awareness: knowledge of safe drinking guidelines, specific gendered vulnerabilities to alcohol

Practices: their drinking patterns, understanding of low-risk drinking.

Information gaps/needs: gauge what's missing, what would participants and their cohorts like or need to know.

Messages: what empowering and knowledge-building message resonates, what could a culture of moderate drinking look like.

Transmission: how to craft, package and transmit to reach them and their peers, variations for interests, background, etc, evaluation of impacts and results

Participants

From December 2013 to March 2014, we had 463 respondents to an online survey of women on their drinking behaviour and knowledge, and 226 of these respondents fell within our age target demographic.

In March of 2014, we invited 52 survey respondents residing in the GTA, and additionally reached out to internal networks and social media, to attend a focus group. We held two sessions with seven participants at the Toronto Reference Library. Participants received a small gift for attending.

This report represents the findings of our focus groups to date, with some of the results of the online survey integrated into the conclusions where relevant. While it represents the input from a relatively homogenous group of participants, the discussions provide fuel for further investigation on this issue.



A1
21, drinker
student/worker



A2
23, drinker
student/worker



A3
24, drinker
student

GROUP 1



B1
20, non-drinker
student



B2
25, non-drinker
student



B3
23, drinker
student/worker



B4
23, drinker
worker

GROUP 2

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Reasons Why Young Women Might Drink

When participants were questioned about the reasons why they think young women might drink, in reference to themselves, their friends, and more generally, several consistent themes emerged. The most prominent of these was that social gatherings, networking events, and meetings with colleagues or professors, were usually heavily centered around the consumption of alcohol. Some participants also felt that having a drink at a bar was a way of expressing maturity and professionalism. Other reasons that participants offered included drinking to aid nervousness/anxiety and feelings of disconnectedness, the availability of alcohol (e.g free alcohol at events), lack of public spaces/activities that did not involve alcohol, and drinking to celebrate.

I feel like the minute I became like very **confident** in who I was and what I'm doing and pursuing, the activities that were drinking-centered didn't play that big a part of my life. A1

Now that we've graduated and getting office jobs it becomes a networking thing and you have to hang out with your co workers. This is **how you become an adult** – know your wines, order at a bar, not just some kid, you're a professional now. B3

There are lots of pressures young women face. **Looking good, sounding good.** B3

Also for me it depends on the **availability of alcohol** like most recently when I've drank too much and have been at open bar events... it's there and I wasn't paying for it and everyone else isn't. A1

Back to the pressures of young women- **feeling alone or feeling unconnected** for some reason. If I go out if I get drunk then I will feel more connected to people in a screwed up way. B2

Most of my female friends I think that they actually **drink to celebrate** – graduation, engaged, job. When I think back at times when friends are really upset and you'd expect them to want a drink and they don't want them. They only do it when they're happy. B3

Honestly one of the reasons why I probably still drink as often I think is an **issue of space** and I think it's really hard for people to meet publicly in a space that doesn't have any alcohol and so it just becomes something to do. A3

One of my best friends suffers from **anxiety** and she is my one friend who also gets consistently drunk. B4

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Awareness of Health Risks

When questioned in regard to their awareness of health risks associated with drinking, participants either showed very little awareness of chronic health risks, mentioned superficial changes like weight gain, or posed self-admittedly vague and speculative answers.

Um, gaining weight, bad skin [laughs], like, all very physical...and those are the things that I care about. A1

It turns out I know very little about the health risks of drinking, um... like, if you drink too much beer you'll have a beer gut, but, health risks, I am sure it's related to maybe chronic heart disease, I'm not really sure I mean, I'd imagine some kinds of cancers, um, or stroke, I really don't know. A2

...but big heavy hitter health risks, I don't think I connect them exclusively to drinking. A1

I don't think I really know any of the health risks, I was thinking about it and I can think of some things that are connected to smoking readily off the top of my head, but I don't think I'd be able to do that for drinking, I'm not completely - everything is speculation. A3

Loss of muscle control, liver disease, dehydrating, bad for your skin. B4

Definitely makes you look older –maybe if you smoke at the same time. I've never really looked at the health risks but there has to be something bad about it, because of the headaches and stuff you know. B1

...smoking is such a black and white issue and drinking is much more of a grey area and everyone does it. There is a kind of drinking that isn't good but there's a kind of drinking that is kind of okay. A2

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Understanding Of “Risky” Terminology

When questioned about their understanding of the term ‘risky drinking’, participant responses revealed that the term was predominantly linked to immediate and situational risk rather than matters of health, let alone long-term health. Drink driving, bike-riding, drinking fast, mixing drinks and drinking on an empty stomach are examples of the kinds of risks that were mentioned. Participants agreed that the term ‘risky’ elicited more short term dangers, while ‘at risk’ was more readily associated with matters of health. When questioned regarding their knowledge of Canada’s Low Risk Drinking guidelines, awareness about the Guidelines was low.

Eating, mixing alcohol, drinking fast to leave and save money – it’s all risky. People seem to really want to **get plastered** before they go like storing acorns through the winter. But it’s not rationing it out, it’s just going to get you. B4

I would say that risky drinking... would be like **drinking and then putting yourself in a dangerous situation** but that’s more immediate risks...drinking to a point where your judgement is impaired and something could happen to you where you couldn’t react appropriately I suppose.

Immediately thought of **driving**. Or in **any context where you need to be sober soon**. I mean maybe you can control it but most of the time you can’t. Like a designated driver who drinks a little at the start of the night. B3

I haven’t heard that before [in reference to Canada’s Low Risk Drinking Guidelines]. A2

Drinking near water without a life jacket. Drinking and cliff jumping. Cottage lifestyle. Pool parties. Stuff where people can get injured. B4

Not eating before you drink. Or if you know you’re **taking prescriptions** – I just took all these antibiotics. Even ADHD meds or adderall or accutane and drinking with that... also mixing a lot of alcohol. Oh and driving. B2

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Reactions to Existing Media Campaigns

When participants were asked to respond to a variety of drinking-related media campaigns that were predominantly directed at women, both groups reacted similarly. Participants responded negatively to media that was perceived to have a moralizing agenda, was shaming, blaming or judgemental, was providing unhelpful or unsubstantiated 'facts', or was engaging shock-tactics as a communication device. Most participants expressed feeling very sensitive toward, and insulted by, media that specifically shamed or blamed women, subtle or not, especially in regard to sexual violence and rape. In contrast, participants responded positively to media that portrayed people they could relate to, contained well-substantiated facts or statistics (particularly when it came to gendered information), provided helpful tools/tips to mitigate risk, used humour, or communicated a thoughtful response to realistic scenarios within drinking culture (i.e. "Don't Be That Guy" campaign).

I feel like **it's trying to scare me** so badly that I want to resist it. If there was a statistic or a percentage that would be better. B3

They never show **relatable people**, I dunno, or kind of, they **make the person seem like weak...** and maybe that is the case, but you would never want to admit to yourself that you are succumbing to peer pressure, so by doing that approach you no longer relate to the video or the message in itself. A1

I like that it's a **normal woman** [in reference to her body]. B2

I think they ['Don't Be That Guy' Campaign] do a good job, especially because they've **touched a nerve** with people. There have been a lot of negative reactions to that campaign because it is so common. A3

I think that probably a positive approach is to say **why this affects women** not just put it in a 'versus' like men versus women. This is exactly why it affects you as a female and this is the pathology of it...that might make it more appealing. A2

...often you're a bit sceptical, you don't want it [health information] to be **couched in morality** like what women should be doing.. you stop to ask yourself is it really about the health risks or is it about how women should behave? A2

I think that those **anti rape campaigns are problematic** because they are putting the onus on women, and it's not saying don't drug people's drink. And they really disgust me. It's not our responsibility to make sure that we don't get raped. A1

I think putting yourself in the story, we're not being told someone else's story. We're given an image and **we each see our own story within it**. A2

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Reflections On Their Own Drinking

When questioned regarding how concerned they are about their own drinking, participants mostly reported feeling unconcerned, or not very concerned. Only one participant (A2) reported that she is often concerned about the frequency of her drinking, and that this is a more recent change in her thinking. Interestingly, 6% of our survey participants reported being concerned about their own drinking, while 41% reported being concerned about a friend's drinking. The majority of participants spoke about their bad drinking habits in the past tense - usually in reference to high school and their first year of university. Binge drinking, and drinking 'to get drunk' seemed to be a common experience shared by participants, which had been more recently replaced by drinking socially and/or professionally.

I stopped drinking about a year ago...my awareness is heightened, when I had a drink the other month it had a real effect on me. B2

I would say that I think about it quite often, I would say I'm pretty concerned. I made a conscious effort also to limit the amount of days I'm drinking, it's not as much how much I'm drinking on those nights, just the amount of nights that I'm drinking. A2

I had a friend [in high school] and we would always split a mickey of vodka. A2

[Peak drinking was in] grade 12, right after submitting applications for university - you don't have to worry about anything and I drank so much I fell and broke my arm. It got to the point where it was a 2-6 of vodka. A1

I'd say, not concerned to maybe a little bit concerned. like I think that once in a while I do drink too much and that is a little concerning to me but generally not really or not very concerned would be my answer. A3

I used to wonder why I would waste so much money on booze. And I feel like guys wait for your senses to be dulled so they can start up a creepy dialogue. And alcohol affects your whole brain, dulls all your capacities. B4

Peak drinking happened] before 12, uni and also first year of university. Not everyone in high school drank but in 1st year university it was a more general thing - we split a Texas Mickey between eight. A3

I don't think I'm concerned at all. Health issues maybe like a little bit, but I'm paranoid about everything, so it falls into general paranoia about my future health but alcohol as like a specific thing, not really. A1

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Messaging and Transmission

When asked how best to craft, package and transmit drinking-related messages, participants offered valuable insights on how best to reach them and their peers. They offered specific feedback on how they might access this information while online, search terms and needs for information, and what they might share on social media. There were divergent opinions on where best to communicate these health messages - some expressed frustration at seeing drinking-related campaigns in bar bathroom stalls, as they are already partaking, while others thought this was a great place to promote positive drinking messages. Participants also disagreed on communication methods, where some preferred visual stories and others preferred straightforward facts and statistics to inform their decisions. Several participants connected their heavy drinking experiences in high school, and how harm reduction messages could resonate with these audiences when packaged as informational, relatable and realistic.

...something that **strikes a balance between light hearted and useful**, like something that **isn't too serious and isn't too moralizing but is helpful**. A2

I would google "things to do that don't involve drinking". Because **I'm trying to think of a real situation**. I'm not going to think "how do I get my friend in to an intervention"; I'll think more "where can I go with my friend on a wednesday night that isn't drinking". A1

If it's **on a computer** rather than on a poster... I'm more likely to click or just google it. A2

What I got most out of this conversation is that **most people respond positively to a harm reduction approach**, where you know that people are going to do these things and you've already taken that into account and these are ways you can mitigate the risks or deal with this situation. A2

I think I would **need to hear it from multiple sources**. Hearing it from one doctor would be easier to block it off. It's so integrated in our culture and so difficult to think about my long term health risks and change how I behave. A3

I would google things like: "how to know if you have a drinking problem?"; "how much is too much?" I'd hope to find something **trustworthy, something based on science, something that wasn't too moralizing**. CWHN sounds great. A3

I would probably click on it if there was **something for me to read**... I am more inclined to click on it if there is something that goes along with it like an article or a report, because it wouldn't seem like someone was trying to sell me something. A2

I feel like, especially dealing with younger women, I feel like right now we are so overeducated. I feel like **we don't need the over the top stories** to tell us why it's bad because it's like, yeah it's bad, but **let's look deeper**. A1

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Areas Of Further Exploration

These are the interim findings on a set of data that we are hoping to build upon.



1

Drinking culture, and the pressure to drink, make moderation difficult to implement for young women.

The ubiquitousness of alcohol and inescapable culture of drinking in both work and school environments create strong social pressures that undermine communications around moderate drinking.

2

Reflections on Canada's low-risk drinking guidelines.

A low level of awareness about Canada's Low-Risk Drinking Guidelines, evidenced in the focus groups and the on-line survey, indicate a need for further marketing and outreach around this information tool in order to reach this audience.

3

Young women want and need more information on health impacts of alcohol.

There seems to be an appetite in this demographic for fact-based information on drinking-related cancers, of alcohol metabolism and health risk differences between males and females.

4

Keep communications 'real'.

The young women we spoke to want real, relatable campaigns that include reliable statistics, use realistic women's bodies, and portray plausible images and scenarios that respect the intelligence of the audience.

5

Shaming and fear have mixed results.

Though a couple of the participants noted that fear-based campaign messaging has either affected their behaviour, or could potentially affect the behaviour of others, the majority had strong negative reactions to campaigns that linked moderate drinking to anti-rape campaigns that blame and shame young women.

Appendix 1: Focus Group Questions

1. Why do you think young women drink?

How do you feel about your friends' drinking?

How do you feel about your own drinking?

2. What does risky drinking mean to you?

Is it about the amount you drink, or risky behaviour, situations, etc?

What do you consider to be too much to drink?

If you have ever drunk too much, why do think that happened?

What is binge drinking?

When people binge drink, what do you think contributes to making that happen?

3. Are there specific health risks around drinking? [if health not mentioned]

What are the risks of drinking today that could lead to health concerns/impacts in the future?

4. If I told you that alcohol affects women differently than men, what would you say to that?

For example, if I told you that women metabolize alcohol differently than men, what would you say about that?

5. Have you heard about Canada's Low Risk Drinking Guideline?

[pass around the pamphlet]

How does this impact you?

Do you think these are important? Useful? Why?

Where would you expect to find these guidelines?

What would be the best way to get this information to you and your friends?

6. Where do you go for health information?

If you were concerned about your drinking or a friend's, how would you go about getting information and support?

Where would you look? Who might you ask?

[Existing Campaign Materials Review]

Preamble: Here are some messages related to drinking that other groups or agencies have produced in the past few years. We'd be really interested to get your feedback on them to help us in developing some materials for women and girls in the future.]

7. What do you think about these campaign materials?

What do you like or dislike?

What would you do or say differently?

What would motivate you personally to pay attention to your drinking?

8. Is there a time or place that this type of information would be useful for you?

9. What do you think young women be interested to know about drinking and health impacts?

How should these messages be shared with young women?

10. Is there anything we're missing?



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Le Réseau canadien pour
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