5 basic principles supporting our collective communication efforts on alcohol



CONTEXT

Whether occasional or regular, alcohol consumption remains ever-present in Quebec's social fabric and family life. Indeed, the various traditions and festivities that punctuate our lives are often tied to the consumption of alcoholic products. Alcohol is also prominent in the public space: it is advertised everywhere and is commonly featured in the cultural sphere (e.g.: television series, films, variety shows, festivals).

In addition, alcohol benefits from a favourable social norm reflected in Quebecers' consumption habits. **The majority of Quebec adults consume alcohol: in 2017, 84% of men and 79% of women consumed alcohol at least once during the year**¹. In 2021, Quebecers drank on average 8.4 litres of pure alcohol in the year, which is equivalent to 494 standard drinks. Furthermore, despite the legal drinking age being set at 18, several minors also consume alcohol: in 2019, this was the case for 53% of high school students, including 12% who consumed alcohol more than once a month².

However, the pleasure of drinking comes with risks for health and well-being. Prevention and harm reduction in the shortand long-term play an important role in counterbalancing the trivialization of alcohol consumption, but such actions are part of a complex environment where reluctance and sensitivities come into play and must be taken into account.

STEPS

Starting in fall 2022, several organizations and people from a variety of backgrounds including research, public health intervention, and alcohol dependence prevention and treatment have come together to discuss issues related to alcohol consumption. These discussions have brought to light a need and a desire to identify collective solutions to generate public attention and interest in prevention messages and avoid stigmatization.

During these discussions, five principles emerged as a foundation to inspire, motivate and guide decisions and actions. This document therefore aims to guide the crafting of messages that support informed decisions regarding alcohol consumption while avoiding stigma. It is intended for all organizations working with people who consume alcohol who wish to develop and disseminate messages on alcohol in Quebec.

GOALS

- 1. To create a safe environment that promotes open dialogue around alcohol consumption.
- 2. To prevent and help reduce prejudice and judgment that harm the health and well-being of the people targeted by messages on alcohol consumption.
- **3. To promote consistent messaging** around alcohol consumption while empowering organizations to act autonomously.
- **4. To promote the public's appropriation of messages** on alcohol consumption in order to support informed decisions.

PREVENTION GOES BEYOND COMMUNICATIONS

Environment is a major influence on people's choices regarding alcohol consumption, notably through peer pressure, commercial incentives and the trivialization of alcohol due to its omnipresence in the media and public space.

For this reason, although communications play an important role in reducing and preventing alcohol-related harm, efforts cannot rely solely on this approach. Living environments are an essential part of the equation. The environment should:

- **Support the adoption of behaviours** favourable to health and well-being;
- Contribute to free and informed decision-making;
- **Reduce** social inequities.



Consistency between environment and messaging Creates synergy.

PRINCIPLES



Recognize the plurality of realities

No single message on alcohol can reach everyone,

because the alcohol consuming population is very diverse in age, sex, gender, socioeconomic characteristics, lifestyle, and social networks. Different people may experience the effects and harms caused by alcohol consumption very differently. The message's language and vehicle should be chosen based on its target population's habits and preferences.

By understanding **what motivates** behaviours and adapting messages to a community's specific characteristics and environment, it is more likely to feel engaged and adopt new behaviours⁶. By adopting their target population's point of view and putting aside its own frame of reference, the organization behind the message demonstrates its **interest in their reality**.

Focus on a person's capacity to act and think for themselves

When social norms work against the adoption of behaviours favourable to health and well-being, **messages that mobilize positive emotions** can prove effective⁵. Sharing inspiring role models, practical solutions to mitigate risks and tools to help with decision-making and self-assessment are some good examples⁵. This type of message promotes agentivity and appeals to people's thoughts, intelligence and personal engagement, while contributing to the development of the public's capacity for action.

Identifying the motivations behind harmful behaviours and adapting messages based on **people's aspirations and values** promotes the adoption of new habits⁴. A behaviour is more likely to be adopted if it is perceived to be useful and beneficial. Understanding the **potential benefits** that a new behaviour can bring is likely to increase curiosity about this option..

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Involve communities

The people affected by issues around alcohol consumption know best which solutions are adapted to their reality. They are therefore essential actors and must be involved in the development of messages that are meaningful to them. The actions resulting from this process have greater potential to impact the population.

Showing openness and listening are also protective factors against mistakes which can hurt or break a bond of trust. This is true for the general population, but is particularly true for minoritized and marginalized groups who are more likely to be subject to prejudice and social exclusion. Community involvement in identifying and constructing alcohol messaging is essential.

4

Adopt a caring, egalitarian tone free from value judgment

The meaning of a **caring**, **egalitarian** and **non-judgmental** message can vary from one group to another. Messages should demonstrate a positive consideration of the public, with its strengths and challenges, in order to empower people to make their own choices.

Conversely, using injunctions or a directive, imperative or guiltinducing tone should be avoided. The same goes for the use of statements based on presumptions and undue generalizations, or words with moral connotations. These practices create a distance and carry the potential to stigmatize, widen social inequities and hinder the public's adherence messages⁷.

The use of certain words can be perceived as a value judgment and requires vigilance in order to inform without stigmatizing. This is the case, for example, of the following words: good, bad, best, better, healthy, and unhealthy.

Convey a clear, transparent and nuanced message

A health message's credibility is based, among other things, on the public's trust in the organization behind it. This credibility may fluctuate over time and is reinforced by the empathy, transparency, and clarity that emerge from the message and the person or organization behind it³. People must feel that the organization respects their ability to make informed decisions adapted to their specific reality.

In order to support decision-making, the information transmitted to the public must be simplified, scientifically accurate and nuanced. To do this, the possible consequences of alcohol consumption are presented factually, exposing the risks without the intention of convincing or dissuading consumption. We must recognize that people have the capacity to make their own decisions, while ensuring that individual choices do not threaten the safety of others (e.g., drunk driving).

Sometimes, less is more

Quality messaging around alcohol consumption is essential, but overexposure must be taken into consideration. To this end, concerted prevention efforts can be used to multiply a single message and avoid diluting information. Additionally, some messages about alcohol are the same as for other substances and can sometimes be combined.

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References

- Institut national de santé publique du Québec. INSPQ — Expertise. 2019 [cité 14 juill 2020]. Portrait de la consommation d'alcool au Québec et au Canada. Disponible à : https://www.inspq.qc.ca/ substances-psychoactives/alcool/dossier/ portrait-de-la-consommation-alcool-aucanada-et-au-quebec
- 2. Institut de la statistique du Québec. Enquête québécoise sur le tabac, l'alcool, la drogue et le jeu chez les élèves du secondaire 2019 [Internet]. Institut de la Statistique du Québec ; 2021 [cité 5 juill 2023]. Disponible à : https://statistique. quebec.ca/fr/document/enquetequebecoise-tabac-alcool-drogue-jeueleves-secondaire-2019
- Cortin V, Laplante L, Dionne M. La communication des risques à la santé [Internet]. Institut national de santé publique du Québec ; 2018 [cité 3 juill 2023]. Disponible à : https:// www.inspq.qc.ca/sites/default/files/ publications/2406_communication_ risques_sante.pdf
- Rhodes N, Roskos-Ewoldsen D, Eno CA, Monahan JL. The content of cigarette counter-advertising: are perceived functions of smoking addressed? J Health Commun. nov 2009; 14 (7):658-73.

- 5. Guttman N. Persuasive appeals in road safety communication campaigns: Theoretical frameworks and practical implications from the analysis of a decade of road safety campaign materials. Accid Anal Prev. 1 nov 2015; 84:153- 64.
- Dunstone K, Brennan E, Slater MD, Dixon HG, Durkin SJ, Pettigrew S, et al. Alcohol harm reduction advertisements: a content analysis of topic, objective, emotional tone, execution and target audience. BMC Public Health. 11 avr 2017; 17 (1): 312.
- 7. Centre de collaboration nationale sur les politiques publiques et la santé, Institut national de santé publique du Québec. Comment pouvons-nous (et pourquoi devrions-nous) analyser l'éthique des politiques paternalistes en santé publique ? [Internet]. 2018 [cité 4 juill 2023]. Disponible à : https:// ccnpps-ncchpp.ca/docs/2018 Eth Paternalisme Fr.pdf? gl=1*1v4niwr* ga*ODUyMDczNTA1LjE2OD g0ODI3NTU.* ga CDEMY14CF4* MTY4ODQ4Mjc1NC4x LjEuMTY4ODQ4Mjc2Ni4wLjAuMA..* ga 540BD8VH33*MTY4ODO4NDcxM y4yLjAuMTY4ODQ4NDcxMy 4wLjAuMA..&ga= 2.119560904. 1155047708.1688482755-852073505. 1688482755

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