ORIGINAL RESEARCH



A community-wide approach to reducing risky drinking cultures in young people in rural Australia

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Abstract

Objective: This study evaluated the impact of a multi-faceted, harm minimisation program addressing youth alcohol change and risky drinking behaviours in rural Australia. The role and influence of a multi-tiered community approach to changing alcohol cultures is examined.

Setting: An alcohol culture change project for young people (12–18 years) was implemented in rural Victoria. It was informed by the Alcohol Cultures Framework, comprising community-wide events and youth-focused activities, co-designed with young people. The approach aimed at maximising engagement and reducing alcohol-related harm by targeting the shared activities and drinking practices of young people, parents and the community.

Participants: Participants (n = 446) provided feedback specific to three key program activities for promoting alcohol change.

Design: Mixed methods: Feedback sheets were collected, and interviews and focus groups were conducted with program participants.

Results: Participants indicated that the program had informed their understanding of the way people in their region drink, and the social norms and practices around alcohol that encourage risky drinking. It influenced their short- and medium-term reactions, learnings and activities relating to alcohol consumption. The impact of the program was greatest in adults than young people although reflective learning and some behaviour change were evident across all age groups and community clusters.

Conclusion: Community-wide health promotion events offer participants a deeper understanding of the ways in which dominant alcohol cultures inform the practices and activities of young people within a broader community context. Ensuring health promotion programs within a whole-of-community approach are established longer term, is recommended.

KEYWORDS

 $adolescents, alcohol \ consumption, \ community-based \ intervention, \ rural \ and \ regional \ health, \ youth \ health$

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1 | INTRODUCTION

For many, alcohol is a key part of the way that Australians socialise, celebrate and connect. Community tolerance for alcohol is deeply entrenched, with geography, context and culture central factors in shaping society's dominant alcohol traditions. Nero in staping society's dominant alcohol traditions. For there is strong, normative pressure to participate in drinking behaviour within a social context, despite extensive research evidence demonstrating that risky alcohol consumption can precipitate violence, Post of further concern is the culture of tolerance that young people have towards alcohol. In regional and rural areas, young people reportedly consume more alcohol and have been drinking alcohol in the preceding 12-months than their urban counterparts.

1.1 | Factors influencing alcohol cultures for young people

Various factors influence the dominant alcohol culture for young people. Acceptable drinking behaviours are familial, passed on by family members to children and young people. This trend is further perpetuated for young people in rural areas where they are more likely to obtain alcohol from their parents on a regular and ongoing basis. Having friends or siblings that consume alcohol and believing that family and friends approve of drinking also predicts alcohol consumption. 20

Social media also contributes to promoting a proalcohol message that encourages drinking behaviour. 21-24 This is emerging as a significant mechanism for building normative alcohol cultures. 22-24 Geographical location has been found to influence alcohol cultures in young people. Published research 25 shows that rural communities may lack an awareness of the problems associated with excessive alcohol use, and the extent to which the established and socially acceptable rules about alcohol shape and influence community views and behaviours. Promoting awareness of the nature and scope of alcohol use, and the impacts of risky drinking behaviours on community health and well-being is essential for changing cultural perspectives. 26

Multi-level community interventions offer the potential for addressing socially accepted standards in alcohol culture. They can create environments in which alcohol and risky drinking can be viewed differently²⁷ through a community-adopted and driven approach that challenges dominant social expectations and influences behaviour change.²⁸

This study evaluated a multi-tiered, community-wide program to address risky drinking for young people living,

What is already known on this subject:

 There is cultural tolerance amongst young people in rural and regional areas towards alcohol. Emerging evidence suggests a multitiered, whole-of-community approach for addressing normative drinking cultures amongst young people is needed

What this paper adds:

• This research reports on a community-wide program which established an integrated model, co-designed with young people, that allowed the building of a strong interrelationship between each stage of project implementation. This study supports a multi-dimensional approach to addressing a complex community problem: risky drinking amongst youth social worlds in regional areas

attending school and working in a geographically large rural location in Victoria, Australia. The research assessed the impacts of the program on young people in changing their perceptions and influencing their behaviours in relation to alcohol culture.

1.2 | Community interventions to address alcohol consumption for young people in regional and rural areas

The most common community-based strategies for addressing normative drinking cultures amongst young people include the following:

- 1. School-based education programs²⁹
- 2. Parent network and parent education³⁰
- 3. Social marketing norm-based interventions using social media. 31

While the effectiveness of these strategies is variable, there is overall support in the published literature for the potential for these approaches to effect change.

These approaches were adopted for the 2-year Youth Challenging Alcohol Norms (Youth CAN) program funded by VicHealth, through the Alcohol Culture Change Initiative 2016–2019. In a partnership between Federation University Australia and the Rural City of Horsham, the Youth CAN program incorporated school-based education, parent education and social marketing to engage young people, their parents and the broader

TABLE 1 Approaches and strategies implemented for each of the three-stages (community; parents and family; young

people) of the program

| | Approach | Strategies to support the approach |
|--------------------|---|--|
| Community | The development of strategic alliances and community awareness building | Establish an advisory group with representation from community-based and government agencies, and young people Education initiatives, workshops and trial community support initiatives Develop a youth-led social marketing strategy using community billboards, local cinema and Facebook |
| Parents and family | Parental knowledge and awareness building | Establish a Parent Network Facebook page and support group Develop and deliver a theatre program Develop and deliver a documentary film and interactive workshop |
| Young people | Knowledge and awareness for young people | As part of social marketing, establish a program brand and logo, T-shirts and associated merchandise as well as posters, information brochures, program on Facebook and a program activity game Implement uniform curriculum initiatives across the two local secondary schools Develop and implement youth-specific events and activities (including theatre activities and sporting events) Youth-led social marketing campaign |

community to reduce harmful levels of alcohol consumption. The title of the program, 'It's OK to say NO', was proposed by the young people actively involved in codesigning the program activities. They assessed the title as reinforcing the program's philosophy, while capturing the peer pressure for many young people to binge drink. The

Alcohol Cultures Framework developed by VicHealth³² guided the development of the culture change program and intervention.

An extensive scoping study³³ informed the implementation of the Youth CAN program for this region. Extensive data collection demonstrated that Horsham had double to

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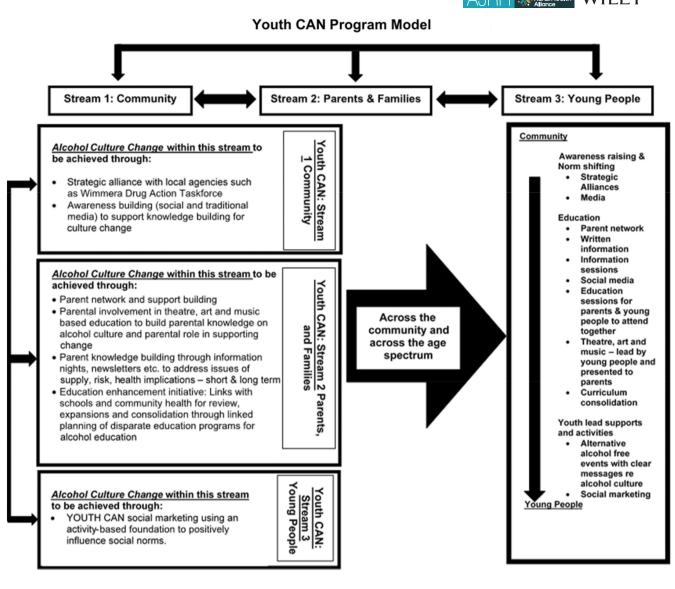


FIGURE 1 Youth CAN program model

triple the State average for emergency department presentations, road trauma, alcohol treatment and behavioural problems particularly for young people aged between 14 and 18 years. The study identified that reducing alcohol-related harm was a priority for the health, well-being and safety of the community.

1.3 | Youth challenging alcohol norms program

The Youth CAN program was established as an integrated model that sought to:

- 1. Influence broader community culture by building strategic alliances and raising awareness.
- 2. Implement education and knowledge enhancement strategies and activities to positively influence skill

- development and shared cultural meanings around risky drinking and parental supply of alcohol.
- 3. Influence socially accepted standards towards alcohol through a youth-led social marketing program.

The program was established as an integrated model using a multi-tiered approach. The activities were designed specifically for young people but also with an impact at the broader community level. A summary of the approaches used, and the strategies for each point of focus of the model is presented in Table 1.

Fifteen diverse strategies, activities and events were delivered through the program: the model and approaches are presented in Figure 1. A key goal upon establishment of the program was to track the impact, over time, of program strategies and activities on shifting established alcohol culture, aligned to knowledge, beliefs and behaviours. The continuum between knowledge, attitudes and

TABLE 2 Youth CAN activities and evaluation method and the number of participants completing the evaluation

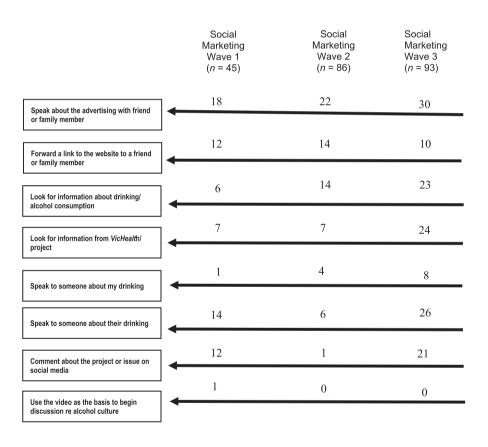
| | Evaluation met | hod and participants | | | |
|--|--|--|-------------------------------------|--------|---------|
| Event or strategy | | | Participants (n) * | | |
| | Evaluation method | Focus/questions | Young people (12-18 years) | Adults | Total n |
| Social marketing | Three feedback sheets; one feedback sheet for each social marketing wave | Feedback sheet 1: 'Did you know'. The questions included demographics (gender and age), alcohol consumption, specific feedback about the event and the Youth CAN project, attitudes to alcohol use (pre- and post event), and whether the event had influenced their perceptions about alcohol use | 36 | 9 | 45 |
| | | Feedback sheet 2: 'You can have fun without alcohol'. The questions included demographics (gender and age), alcohol consumption, specific feedback about the event and the Youth CAN project, attitudes to alcohol use (pre- and post event), and whether the event had influenced their perceptions about alcohol use | 84 | 2 | 86 |
| | | Feedback sheet 3: 'It's OK to say NO'. The questions included demographics (gender, age), alcohol consumption, specific feedback about the event and the Youth CAN project, attitudes to alcohol use (pre and post event), and whether the event had influenced their perceptions about alcohol use | 92 | 1 | 93 |
| 'It's okay to say no' theatre performance | Feedback sheet | The questions included demographics (gender and age), alcohol consumption, specific feedback about the event and the Youth CAN project, attitudes to alcohol use (pre- and post event), and whether the event had influenced their perceptions about alcohol use | 69 | 61 | 130 |
| | Interviews | Interviews comprised open-ended questions about the initiative, its implementation, how and in what ways it increased understanding and knowledge, whether it had an impact on behaviour and attitudes in real-world settings, its transferability and sustainability | 25 | 8 | 32 |
| 'It's okay to say no' documentary film and interactive workshop | Feedback sheet | Assessing the extent to which the event had influenced the audiences' perceptions about the event | 9 | 24 | 33 |
| | Interviews and focus groups | Interviews and focus groups were conducted with attendees at the workshop and those who made the film. The interviews and focus groups comprised open-ended questions about the initiative, its implementation, how and in what ways it increased understanding and knowledge, whether it had impacted on behaviour and attitudes in real-world settings, its transferability and sustainability | 23 | 3 | 27 |

Note: Some participants completed the evaluation for one or more of the strategies. On average, 61.5% of participants completed the evaluation for all three social marketing strategy waves; all participants of the documentary film and interactive workshop participated in the theatre performance.

TABLE 3 Participants reflections on drinking behaviours for each of the social marketing waves

| Social marketing caused me to reflect on changes I needed to make around drinking behaviours and culture as it related to: | Wave | Wave | Wave | % change over the 18 months |
|---|------|-------|------|--------------------------------|
| My own drinking habits | 29% | 24% | 39% | +34% |
| The drinking habits of my close friends | 47% | 42% | 58% | +23% |
| The drinking habits of my larger friendship network | 47% | 44% | 47% | 0 |
| The drinking habits of my family | 56% | 54% | 53% | -5% |
| Victoria's drinking culture in general | 78% | 65% | 73% | -6% |
| (Thinking about) the pressure I put on other people to drink | 22% | 25.5% | 34% | +55% |
| (Thinking about) the way I respond to pressure from others to drink | 38% | 33% | 43% | +13% |

FIGURE 2 Information seeking strategies across each social marketing wave.



behaviours is well-documented and frequently adopted in health-focused programs to bring about changes in behaviours (e.g. refs 34-36). It is associated with the health belief model³⁷ in which an individual's health behaviours can be successfully influenced when external factors and internal factors are targeted to address the health behaviours being altered.

In this study, all activities were used to inform and educate individual's beliefs and attitudes leading to changes inrelation to alcohol behaviour. The present evaluation reports on three of the program's strategies. These strategies

were chosen as each captures a principal goal of the project with activities delivered to the wider community, over an extended time frame and involving young people as active participants in both the co-design of the activity and in the presentation of the information. These included the following:

1. A social marketing strategy. This strategy was delivered in three waves, approximately 6-months apart cultivating a message of celebrating alternatives and embracing all parts of the community. Videos, developed as part of each wave of the campaign, were displayed at the local cinema and on a large electronic billboard in the community for 12 weeks. All social marketing material was then placed on the Youth CAN Facebook page. The first wave 'Did you know?' sought to build initial awareness that alcohol culture is a community-wide issue requiring a community-wide response. The second wave, 'You can have fun without alcohol', promoted discussion that alcohol and fun do not have to be synonymous and the third wave 'It's OK to say no' provided a strong message that saying no to excessive and risky drinking was acceptable. The media wave did not promote a message of zero tolerance but rather one of harm minimisation.

- 2. A theatre performance was developed and presented by young people and performed to a large parent and community audience, with the aid of a theatre consultant. Theatre enabled young people to tell their story about experiences with alcohol and community, familial and peer pressure.
- 3. A documentary film and parent information workshop involved an independent theatre and documentarymaking group working with young people to develop a documentary sharing the views of young people on the community alcohol culture.

2 | METHODS

The purpose of this research was to examine three activities delivered during the Youth CAN project to explore the

ways in which these events were assessed as being catalysts for shifting perceptions relating to alcohol culture. The outcomes of this research sought to understand:

- Whether involvement in the program activity had influenced how alcohol was conceptualised.
- The key learnings for individuals and groups resulting from their involvement in the three program strategies.
- The emerging shifts in perceptions and socially accepted expectations relating to alcohol use amongst young people in the target community.

Ethics approval was granted for the project through the Human Research Ethics Committee of Federation University Australia (Number 17-113A).

2.1 | Sample

A total of 1144 study participants were involved in the larger Youth CAN research project, with 446 participants providing feedback across one, some or all of the three program strategies reported in this paper. Young people, irrespective of their drinking experiences, were invited to participate in the study. Participants received an information sheet about the study and a consent form. Meetings were held with parents and young people through the advisory group, the school and through social media to support the process of receiving informed consent. They were advised that their participation was voluntary, all information was confidential,

TABLE 4 Young people's reflections on behaviours and culture following the theatre performance

| | Response options | | | | | |
|--|------------------|------------|--------------|------------|-------------|--------------|
| Did the theatre event alter: | No answer | Not at all | A little bit | A fair bit | Quite a bit | A great deal |
| The way I drink alcohol | 1 | 17 | 18 | 6 | 1 | 0 |
| The way my friends drink alcohol | 1 | 13 | 16 | 8 | 3 | 2 |
| The way teenagers drink | 1 | 11 | 13 | 13 | 2 | 3 |
| The pressure I put on others to drink | 1 | 30 | 10 | 1 | 0 | 1 |
| The way I respond to pressure to drink | 1 | 24 | 14 | 2 | 2 | 0 |
| Speak to family/friends/peers about the way they drink alcohol | 0 | 20 | 17 | 4 | 2 | 0 |
| Seek information about drinking less alcohol | 0 | 29 | 9 | 3 | 2 | 0 |
| Encourage family/friends/ peers to drink less | 0 | 24 | 13 | 2 | 2 | 2 |
| Drink less myself | 1 | 27 | 11 | 2 | 2 | 0 |

and that they could withdraw from participating in the study at any time. Joint consent from young people and their parent was required before participating in focus groups and interviews.

2.2 Data collection methods

A mixed methods design was implemented with data collected from semistructured interviews, focus groups and feedback sheets for the identified events and strategies. Feedback sheets were distributed at the conclusion of the events. Recruitment for the focus groups and interviews was through online notifications and re-engagement activities. Advertisements were also posted on social media seeking input from individuals who were interested in activities such as video review. The number of participants involved in each evaluation strategy and the scope of the evaluation methods used are presented in Table 2.

2.3 Data analysis

The feedback sheet was analysed using Excel. Written comments, views and opinions provided in the feedback sheets were analysed using accepted content analysis techniques. The same content analysis techniques were used for qualitative data collected through interviews and focus groups. All qualitative data were coded by two researchers and then compared and collated to minimise researcher error. These data were then able to be triangulated for detailed insights across data collection approaches.

3 RESULTS

3.1 | Social marketing

Social marketing was assessed using feedback sheets. The results from participants are summarised in Table 3. An analysis of shifts in the percentage of individuals who assessed that the strategy had caused them to reflect on a set indicator between wave one and wave three of the social marketing strategy is presented in the final column of the table. Overall, fewer participants were inclined to reflect on their own drinking behaviour, or the pressure they put on others to drink, regardless of the social marketing wave for which they were providing feedback. There were differences across each wave of the social marketing campaign related to the levels of reflection for individuals about their own drinking habits, and the pressure they placed on others to drink. Although there was an increase in the number

of individuals who indicated that the social messaging had made them reflect more on their own drinking habits and issues of peer pressure (an increase of +34% and +55%, respectively), it is difficult to compare changes over time. While many of the same individuals were involved in the feedback process (identified through a question included in the feedback sheet), it is not possible to determine whether the increased level of re-

flection overtime was due to a cumulative effect of the

messages, or the content of individual social messaging

waves.

Participants were also asked whether the content and focus of social marketing would cause them to seek additional information or enter into discussions with others about the issue. Across the three waves of video marketing review, 131 (58%) participants indicated that they would be more likely to follow-up on a range of different information seeking and sharing options as a result of the social marketing exercise. Figure 2 shows that information seeking occurred across a range of strategies with the most consistent method involving discussing the issue with family and friends and seeking additional information to better understand issues.

3.2 | 'It's okay to say NO' theatre performance

Feedback sheets and interviews were used to assess the theatre performance. Theatre was identified by young people as a platform for highlighting the experiences and perspectives of young people seeking to understand established alcohol cultures within the rural context. Analysis of the feedback from young people specific to the extent to which the event might have influenced their own behaviours shows low levels of overall impact. As presented in Table 4, the majority of young performers identified that the theatre performance in itself was most likely to either not influence behaviours at all, or to only minimally influence behaviour across a range of key indicators.

While measuring shifts in behaviour through involvement in the theatre performance had minimal immediate impact, interview data from youth performers consistently revealed that their involvement with the theatre performance provided a catalyst to reflect on dominant alcohol cultures. Assumptions about engagement in risk taking and binge drinking behaviour by young people were a point of concern for young people as captured in statements such as 'but there's only like a handful of that (getting smashed) and they're (adults) thinking - oh that handful, they must be all like that' and 'I think it isn't so negative, perceptions aren't always what adults think'. Existing perceptions were assessed as acting as a barrier,

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limiting discussion on potential community action for addressing dominant social expectations around alcohol.

The theatre performance was viewed by young performers as a very initial point for beginning a discussion with the community. The use of performance as a platform to initiate change was embraced, with the theatre initiative viewed as requiring revision and consolidation in order to maximise its potential impact. Additional points of reflection sourced from interviews with young people highlighted the following:

- The need for community and peer-based acknowledgement of the acceptability of choosing not to drink, or not to drink excessively, to shift the dominant culture which closely ties fun, socialisation and normative behaviour to alcohol use.
- The long-term impact of social media on shaping established alcohol cultures and acknowledgement of the vulnerability created through social media for young people when intoxicated.
- The need to reduce risk-taking behaviour and aggression through planned, and publicly supported and promoted, peer support.

The ability to highlight and discuss these issues through the mechanism of theatre performance was identified by 18 young people involved in interviews as a positive outcome and a planning resource for other arts events delivered through the Youth CAN program.

Feedback from the audience participants provided insights into the benefits of theatre as a medium for parents and the community to understand how young people experience dominant alcohol culture. Written feedback from the audience identified that the use of theatre to highlight the perspective of young people was positively assessed (85%; n=111). Audience members assessed the use of theatre as a catalyst for reflecting on how parental and community action influences how young people embrace alcohol culture. Examples of this are represented in statements including: 'The involvement of the teenagers and hearing their words - made me think more about the impact of my drinking on them' and 'Yes, it reinforces the fact that when parents provide their teenagers with alcohol for parties, they are giving them the message that alcohol is okay. Their rationale that it's better to supply limited drinks is not the answer. They need to learn to say no'.

Parents who attended the student performances, and in particular the skits relating to drinking, social media and aggression, assessed that:

- The activity provided a vehicle to start a conversation with young people in an inclusive way. The parents who were interviewed had had conversations with their children and the children of friends before the event but felt that the theatre performance provided a starting point for further discussion.
- It raised issues of parental supply and the centrality that alcohol has to local culture. It established a platform for future planning, highlighting the need to work together for cultural change, and opened up the discussion of 'where do we go from here?'

Overall, the feedback provided by parents was that, as a starting point for community action, this activity had shifted the issue back into the community arena.

TABLE 5 Participant assessment on drinking behaviours and culture following the documentary initiative

| Did the documentary | Response options | | | | | | |
|---|------------------|------------|--------------|------------|-------------|--------------|--|
| event alter: | No answer | Not at all | A little bit | A fair bit | Quite a bit | A great deal | |
| The way I drink alcohol | 4 | 9 | 2 | 9 | 4 | 5 | |
| The way my friends drink alcohol | 3 | 3 | 3 | 10 | 8 | 6 | |
| The way teenagers drink | 2 | 0 | 2 | 8 | 11 | 10 | |
| The pressure I put on others to drink | 3 | 15 | 2 | 7 | 5 | 1 | |
| The way I respond to pressure to drink | 3 | 10 | 5 | 6 | 6 | 3 | |
| Speak to family/friends/ peers about the way they drink alcohol | 3 | 5 | 6 | 6 | 8 | 5 | |
| Encourage family/friends/ peers to drink less | 3 | 5 | 6 | 6 | 8 | 5 | |
| Drink less myself | 4 | 9 | 2 | 9 | 4 | 5 | |

3.3 | The documentary film project and parent information interactive workshop

The feedback provided about the documentary film-making project was that it was a successful way to engage and build knowledge. Participants learnt new things, not only about the types of risks associated with binge drinking, but also about the experiences of others in high-risk situations. As identified by one participant: 'sitting around talking about how we might put something in the video meant that different kids talked about their own experiences in this area and it was [sic] put a new light on what it meant to go through something like that—it made me think about it more'.

Feedback from the adults involved in the process reinforced this assessment, as highlighted in the following participant statement:

The kids felt that it was their project but they also felt they could link it back to what they had learned in class about alcohol, they could check what different kids in the group knew and could act as mentors and support to the younger kids. We really listened to what they had to say about the theatre production stuff we ran last year and we stepped back this time and let them run it. The year 12 students were great with the younger ones. They listened, they shared and they made sure that everyone was part of it.

The co-design team assessed the documentary-making process as an effective approach to exploring alcohol culture. They identified that it provided a forum for others to discuss things in a safe environment and it meant that there was much more openness about the issue, and that young people reviewed behaviours as part of an informed discussion. This feedback is captured in the following representative comment: 'it was much more effective than just talking and it helped people to open up about the stuff they had gone through and how they tried to learn and change'. This view was reinforced by one of the adults associated with the documentary film-making. They assessed the documentary as secondary to the opportunity to have a voice on an issue that was having a huge impact on their lives:

They really wanted to share how bad alcohol use could be and they wanted to talk through things so they could present it accurately in the documentary. We were amazed about the stories they told us and how much they supported each other.

All participants acknowledged that their involvement in the initiative had enabled them to reflect on the issue of alcohol use in the community, and to enter into a shared discussion that it was a community-wide issue and not merely something that impacted on them at the individual level. Linked to this, participants were asked to assess the extent to which involvement in the video documentary had built their understanding of a range of issues relating to alcohol culture. Parental supply was one of the areas that all co-design group participants identified as a key learning for them.

Overall, the use of a documentary film was assessed as opening discussion on the issue, enabling young people to drive the process, and to share their narrative and experiences. This increased their own understanding of common issues and concerns and built links within and across different age groups from the same social world, as captured by the following participant quote: 'working with other guys made it a problem we can face and work on together'.

Feedback from participants of the documentary screening identified this event as an opportunity to enter into discussion with others, both adults and young people, and to build their knowledge about issues, particularly as the workshop enabled audience members to interact with field experts. Feedback was sought from participants about the documentary and the most common messages identified were as follows:

- There is a significant alcohol culture in the community and the documentary provided insights into what young people understand and think about this issue.
- Alcohol culture change is a whole-of-community issue.
- Parents play a key role in how drinking culture develops through the power of role modelling and through parental supply of alcohol.
- Young people have a key role in working with the community to achieve change.

Participants were also asked whether the messages that they received might prompt them to reflect on their own drinking behaviours, those of family and friends, and about issues of peer pressure to drink. Their responses are presented in Table 5 and show some shifts towards behaviour change across the majority of indicators.

4 DISCUSSION

Community-wide programs that challenge normative perceptions about alcohol have shown initial success leading to changes in drinking practices. In this study, a community-wide program was implemented in rural Victoria to address alcohol and risky drinking targeting young people. The findings from a review of three program

strategies confirmed change—at varying levels—in participants' reflections, learnings and behaviours across these events.

4.1 Knowledge building and awareness raising

The evidence demonstrates that social marketing raised awareness and promoted enhanced knowledge-building for young people and adults. This strategy prompted participants to reflect on a range of issues about their drinking and that of others. It also promoted some consideration and actions associated with enhanced knowledge building and information sharing. Social media is frequently connected with promoting alcohol consumption.²¹⁻²⁴ However, it can also provide a mechanism for addressing normative social and cultural expectations relating to alcohol.²²⁻²⁴ The reflections of participants in this study are consistent with the latter research evidence. It highlights that social marketing incorporating social media is influential in directing young people's perceptions about alcohol and in influencing normative behaviour relating to alcohol culture.

The use of arts-based initiatives (theatre and documentary film-making) was effective in developing young people's reactions to, and knowledge about alcohol, with insights suggesting some small changes in drinking practices. Young people indicated that they would react differently to alcohol consumption involving their family and friends. However, they were less likely to make changes in relation to their own alcohol consumption. Through interviews, young people further articulated their understanding about alcohol including the awareness of the vulnerabilities experienced by individuals who are intoxicated, particularly the increased propensity for violence and aggression, and the risks associated with using social media when intoxicated. Furthermore, young people indicated that they would actively support other young people who choose not to drink and assist their peers to reduce risky behaviours associated with alcohol consumption.

Evidence about the impact on adults attending the events showed shifts in terms of their reactions and learnings. During interview, adult participants indicated that they had learnt a significant amount about youth alcohol culture and that this knowledge was retained and being used to influence their decisions and actions.

4.2 | Promoting safer alcohol practices

Together the theatre activity and documentary filmmaking promoted safer alcohol practices for young people and adults facilitating changes in reaction, learnings and behaviours. These findings are consistent with other research^{39,40} highlighting that theatre and other arts-based activities are efficacious health promotion strategies. Furthermore, the overall feedback, particularly from adults, was that the program offers a starting point for community action, providing a mechanism to better understand the perspectives of young people.

This community-wide program provides evidence for shifts in cultural, and community change. The findings provide further support for community-wide approaches in changing perspectives about alcohol in which there is a collective commitment and participation from across the community. This is consistent with the existing literature, which claims that community programs are important for influencing behaviour change. 28,41 The findings also indicate that multiple approaches involving key 'stakeholders' from the community are an effective method for challenging and addressing community alcohol cultures. This is consistent with the proposal outlined by Roxburgh.²⁶ Critically, the study highlighted the importance of sharing the voice of young people and ensuring they are active participants in the change process. This is essential for the successful integration of inclusive, community-wide approaches leading to shifts in normative attitudes and behaviours about alcohol consumption.

4.3 | Community-wide approaches to shift alcohol culture

The evidence in this study supports the use of community-wide approaches for health promotion in regional and rural locations. Inclusive, community-focused programs to counteract deeply entrenched attitudes to alcohol are resource intensive but lead to multiple benefits that have a ripple effect throughout the community. While funding for this program was finite, the inclusion of a youth voice in highlighting issues and working towards change was a powerful tool leading to structural change. The project was an important, albeit not exclusive, driver for the decision of local government to employ a youth worker to work with young people to address a range of issues. This included a continued focus on shifting normative alcohol culture.

Importantly, the youth worker appointed was the same individual employed as the project worker for the Youth CAN project. This continuity strengthened the potential for change strategies to be supported and extended into the future. Integral to the workplan of the new youth worker position was the continued implementation of the strategies outlined in this paper. Included in the planning was the task of undertaking an annual review of longer term

MURPHY AND OLLERENSHAW change through an internal review of key indicators, such as emergency department admissions, ambulance and hospital data, and school-based information. Further, the program advisory group established for the Youth CAN project has been maintained and supported by local government, through the youth worker ensuring continued strategy implementation and design. While the actions and focus of this ongoing work has not been formally reviewed, the implementation of current alcohol culture change strategies within local government highlights that Youth CAN provided an initial and important catalyst for change and has created a shift in focus towards proactive youth action within a rural community. This provides the potential, albeit unmeasured, for positive change to continue in the future. Limitations 4.4

The results reported in this study, as a definitive measure of project impact, must be considered with some caution. The contribution of this research, as a review of the impact of the specified activities and events associated with the program, is contained only for the duration of the program. It does not provide insights into the learnings for young people over time, following the completion of the program. This limitation is common across similar programs and strategies that are time-limited and fundingdependent. It is recommended that future programs such as this implement a comparative analysis of data across multiple time points, including 12-month postprogram implemented/completion. This would contribute deeper insights into the longer term impacts on young people, their families and the wider community.

Similarly, the ongoing impact of particular strategies included in this program is unclear. For example, the long-term contribution of a short-term marketing strategy offered in this program is unknown, particularly when competing with the pervasive methods through which the consumption of alcohol is promoted. 21-24 Future health promotion programs will need to be proactive in the strategies implemented, giving greater consideration to the external factors that may counteract or diminish the health promotion messages of these programs.

To conclude, a community-wide approach was implemented for the development, promotion and delivery of a program to address the socially accepted standards that influence risky drinking amongst young people in rural Australia. The program was evaluated to understand the impact of the program and indicates changes to attitudes and reported behaviours for young people and adults in the community. The findings highlight the efficacy of the program in influencing the short- and

medium-term reactions, learning and behaviours to alcohol for young people and adults exposed to social media/marketing, film and theatre events and workshops. While the impact varied between adults and young people, with adults showing increased uptake of the messages presented, the community approach provided effective in shifting accepted cultural standards to alcohol during the program's implementation. Further exploration of the longer term impacts of such programs is necessary. Redressing the shared culture to alcohol for this rural community is consistent with the available, albeit limited, published evidence and supports a recommendation for the implementation of community-wide, multi-tiered programs as a mechanism for changing and enhancing community health cultures.

AUTHOR CONTRIBUTIONS

AM: conceptualization; formal analysis; funding acquisition; investigation; methodology; validation; visualization; writing - original draft; writing - review and editing. AO: conceptualization; formal analysis; visualization; writing - original draft; writing - review and editing.

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CONFLICT OF INTEREST

None.

ETHICAL STATEMENT

Ethics approval was granted for the project through the Human Research Ethics Committee at Federation University Australia (Number 17-113A).

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