6.9 Mailshot triggers reduced drinking amongconcerned problem drinkers

Findings A mailed leaflet encouraging recipients to compare their
 drinking with that of the general population led to reduced consumption among concerned problem drinkers.

The pamphlet asked readers to record their typical weekly alcohol intake and then to compare it with national (Canadian) averages. It also indicated the risk of adverse effects at different consumption levels and invited readers to commit to reducing their

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two-thirds of postal areas in a district of Toronto, the remaining third acting as controls. Over the next month an attempt was made to interview by phone one adult drinker from a random sample of the households. About half were interviewed and 697 entered the study.

About 1 in 10 of the sample had experienced an alcohol problem in the past 12 months and also thought they ran at least some risk from their alcohol use. For them receiving the pamphlet seems to have led to a statistically significant reduction in weekly consumption. Another 8% were also problem drinkers but were *not* concerned about the risks; they tended (not significantly) to *increase* their drinking. No significant impacts were observed among non-problem drinkers.

In context The most important finding is that a minimal intervention sent to unselected households had any impact at all. Correcting beliefs about the 'normal' level of drinking has previously been found effective, but with selected targets and/or within a less minimal intervention. Such findings are consistent with the theory that people tend to conform to what they believe is the norm for their reference group. This belief can be a self-serving exaggeration, allowing heavy drinkers to think that most people drink even more and helping to square the circle of continuing to do something personally or socially disapproved of – a tactic most likely to be deployed by people whose drinking is not so extreme that it would be untenable and where prevailing attitudes are against heavy drinking.

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Limitations of the study include the 1 in 2 response rate, raising doubts over the representativeness of the results. How non-drinkers reacted to the leaflet (which indicated that their *non*-drinking was abnormal) remains an open question. Worries about personal and family lives, work or finances were left out the measure of whether someone was concerned about their drinking. What caused the results is unclear. Possibly problem drinkers concerned about their drinking paid more attention to the leaflet and were more willing to act on its advice, but the results might have been an artifact of gender differences or of how willing respondents were to own up to heavy drinking. Whether correcting normative beliefs, raising awareness of risks, or both were the active ingredients is unknown.

Practice implications From a public health perspective, normative feedback has the potential for a significant payoff because it can be provided at low cost to problem drinkers who might ordinarily never access treatment. The impact is likely to be greatest among people who already consider themselves at risk due to their alcohol use. This suggests a two-stage process: first, raising awareness of risks; second, normative information to prevent this awareness being neutralised through the false belief that everyone else is running even greater risks. If stage 1 is ineffective, stage 2 may even be counter-productive. Where local norms and social networks are supportive of heavy drinking such approaches are likely to be less effective; altering social norms will be the more important first step. Further research using the study's methodology could relatively cheaply help answer the many questions it raises, particularly the impact on people drinking below population norms, reactions of men versus women, how perception of non-health risks affects outcomes, and a possible counter-productive impact among heavy drinkers who deny they are at risk.

Featured studies Cunningham J.A., et al. "Impact of normative feedback on problem drinkers: a small-area population study." *Journal of Studies on Alcohol*: 2001, 62, p. 228–233.

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