

Smokescreens and beer goggles: How alcohol industry CSM protects the industry

Abstract

Corporate Social Marketing (CSM) is one of several initiatives companies can undertake to demonstrate their Corporate Social Responsibility (CSR). While there are many motivations for CSR and CSM, all are linked to profit in some way, including promoting the reputation of the organisation. While CSM is often seen as evidence of organizations making a contribution to their community, there are some industries whose CSM campaigns have drawn considerable controversy and criticism. This paper discusses the role of the alcohol industry in developing and disseminating ‘responsible drinking’ CSM activities. It discusses some of the problems identified with alcohol industry CSM campaigns – including evidence that industry education campaigns communicate ambiguous messages; improve public perceptions of the industry but do not discourage harmful or underage drinking; and divert attention from more effective approaches, such as controls on price and availability. The paper also addresses the issue of other CSM/CRM activities undertaken by the alcohol industry; such as encouraging consumers to purchase a brand by donating a proportion of the profits to health and social causes (including those that are exacerbated by alcohol consumption). It discusses the value of these activities for the industry, and their potential negative impact on the health of the community. In summary, the evidence suggests that industry CSM and CRM activities protect the industry (from restrictive policies and declining sales) but may in fact be detrimental to the community.

Key words: corporate social marketing, cause related marketing, alcohol industry, responsibility

CSM is an activity that “uses business resources to develop and/or implement a behavior change campaign intended to improve public health, safety, the environment, or community well-being” (Kotler, Hessekiel, and Lee, 2012, p. 111)

Introduction

Corporate Social Marketing (CSM) is one of several initiatives companies can undertake to demonstrate their Corporate Social Responsibility (CSR). CSM differs from other forms of CSR in that its main goal is to persuade consumers to perform a particular behavior or shift their behavior pattern (Yuhei Inoue & Kent, 2014). The literature shows that CSM campaigns have the most effect when they are considered legitimate by their audience, and that they can have a substantial impact on consumers' spending patterns (Yuhei Inoue & Kent, 2014).

The fact that a company participates in CSR, including CSM, does not in itself indicate that they are assuming ethical responsibility for the outcomes of their business practices or that the business is operating ethically overall (Carroll, 1991). Inoue and Kent (2014) give the example of Nike; while publicly participating in CSR practices including CSM, they have also been accused of poor treatment of their workers (Yuhei Inoue & Kent, 2014).

Many CSR activities (such as taking steps to reduce the environmental impact of production) are mandated by government, and some industries – such as the alcohol, gambling and tobacco industries – are mandated to accept a level of harm reduction because their products share the dual characteristics of being potentially damaging and having the potential for the consumer to lose control of their consumption (Massin, 2012). Industry can also use these (mandated) CSR activities to promote and/or re-legitimize themselves and their controversial product. For example, Clubs NSW donates substantial funds to deserving community programs, and earns substantial community goodwill for doing so. However, this program is a result of a government requirement that clubs contribute a percentage of their Electronic Gaming Machine (EGM) profits to the community (Office of Liquor, 2014).

Cause-related marketing (CRM) is a subset of CSR that is often implemented in tandem with CSM. The underlying philosophy of CRM is that the corporation assists a non-profit cause by donating a percentage of its profits or sales to a specific cause (thus benefiting the charity) and in return “by linking the corporate/brand name to a worthy cause, the corporation hopes to enhance its corporate/brand identity in the minds of consumers and thereby increase sales” (Lavack & Kropp, 2003). Such initiatives can be controversial, with questions as to the long-term trade off between benefits and harms and the purity of the intentions. For example, Coca-Cola attracts bouquets for its ‘Replenish Africa Initiative’ (RAIN) which provides funds to increase access to safe water and sanitation (The Coca-Cola Africa Foundation, 2015). However, this is the same company that has identified its ‘competition’ as “all beverages including tap water” (Besanko, Dranove, Shanley, & Schaefer, 2006); produces the market leading bottled water brand (Coca Cola Amatil, ND); is aggressively engaged in growing the bottled water market (Trefis Team, 2014); and is keen to attract positive coverage to counter continuing international criticisms of its products and promotional activities.

CSM campaigns typically address one of four areas; health (e.g. alcohol and tobacco), injury prevention (e.g. traffic safety and secure firearm storage), environment and community involvement (Yuhei Inoue & Kent, 2014). While there are many motivations for CSR and CSM, all are linked to profit in some way, including perhaps the most important one of preserving and/or promoting the reputation of the organisation.

Unlike CSR more generally, CSM is typically not mandated but voluntarily undertaken by organisations; such initiatives have previously been described by the tobacco industry as ‘air cover’ (Daube, 2012). CSM is seen as one of the few remaining ways that they can be presented to the public in a positive way. Because reputation is the main motivating factor, there is extensive international literature examining the difference between CSM discourse and actual harm reduction, although it is difficult to conclusively prove whether this major disjunct between discourse and action is intentional or unintentional; other than in the case of tobacco, where there is access to extensive confidential industry documents following the US

Master Settlement Agreement (UCSF Library and Center for Knowledge Management, ND)

CSM and controversial products

Governments and interest groups have praised the use of CSM and wider CSR strategies by corporations in a variety of industries. There are, however, some industries whose CSM campaigns have drawn considerable controversy and criticism, particularly gambling, tobacco and alcohol; with increasing parallels being drawn between the former's campaigns and those of the alcohol industry.

In an Australian context, the gambling industry has conducted a number of CSM campaigns over the past decade that have covered problem gambling, mental health and gambling-related debt; and has made considerable progress in embedding itself in professional sporting activities and creating a brand community (Gordon & Chapman, 2014). The industry is also closely involved with "problem gambling" informational campaigns in several countries including Australia, New Zealand, the UK and Canada (Hancock, Schellinck, & Shrans, 2008). Despite two Australian Productivity Commission reports indicating that 40% of gambling revenue comes people with established gambling problems (20% more from those on that pathway), Responsible Gambling Awareness Week continues to be sponsored primarily by the industry. Not surprisingly, the messages target the individual rather than the community level problem (Livingstone, 2012).

The pharmaceutical industry has also been heavily criticized for aspects of its CSM (specifically disease awareness campaigns), which have been described as disease mongering (Hall & Jones, 2008; Moynihan & Henry, 2006). The industry claims that these campaigns are intended to educate consumers, whereas others argue that they primarily serve to promote and increase sales, of their patented drugs at the expense of more appropriate lifestyle changes (Hall & Jones, 2008; Mintzes, 2002). In a similar vein to the tobacco industry's use of CSM as 'air cover', pharmaceutical companies build relationships with Non Profit Organisations (NPO) to link their product to a particular health problem, in a process known as 'condition branding' (Hall, Jones, & Iverson, 2011). Some argue that this "facilitates customers' decision-

making, contributes to better health and may improve the standing of the pharmaceutical industry” (Angelmar, Angelmar, & Kane, 2007). Others argue that it primarily achieves the latter along with driving up consumer demand for (often unnecessary) medications and increasing company profits (Cetel, 2012; Ebeling, 2011), and there is evidence that it does indeed increase prescriptions and sales (Basara, 1996; t’Jong, Stricker, & Sturkenboom, 2004).

Over the last decade the tobacco industry has become a pariah (ACOSH, 2011), yet for many years this industry was able to use CSM as part of a wider campaign to survive the mounting evidence against tobacco. Strategies such as Philip Morris’s (PM) Project Sunrise, which including the ‘fair play’ policy, used CSM to undermine the legitimacy of anti-tobacco organisations (McDaniel, Smith, & Malone, 2006), and provide a legitimate platform from which PM could participate in an attempt to present themselves as part of the solution. Under Project Sunrise, PM deliberately campaigned to secure this “legitimate seat at the table” (McDaniel et al., 2006). Aside from the ability to install itself at the centre of behavioral change campaigns, it also enabled PM to present ‘reasonable solutions’, which were rejected by the ‘unreasonable’ anti-tobacco lobby, dividing academics and branding opponents as extremists or killjoys (McDaniel et al., 2006). The industry also argued for substitute targets, such as illicit drugs (Daube, 2012). The overarching goal was to maintain their public legitimacy and shift government policy toward targeting individuals rather than the industry.

Similarly, in Hong Kong, the tobacco industry engaged in an ongoing process of blocking effective policy and making artificial ‘concessions’ in order to avoid government action on effective tobacco control (Knight & Chapman, 2004). For example, in 1973 the industry debated the voluntary withdrawal of television and radio advertising “...to show that we as an industry are doing something about discouraging young people to smoke. This of course is a phony way of showing sincerity as we all well know”; and in 1991 the ATC suggested that “... the industry considers doing a deal with government that we will mount a highly visible, substantial and long term campaign to discourage sub-teenage smoking in return for being left alone across a broad range of anti-smoking measures” (Knight & Chapman, 2004).

It is perhaps not surprising, therefore, that research comparing young people's responses to anti-smoking advertisements (CSM) has found that they engender more favourable attitudes towards tobacco companies among their pre-teen target audience (Henriksen, Dauphinee, Wang, & Fortmann, 2006); and that young people rated Philip Morris' "Think. Don't Smoke" ads as less effective than those produced by the Massachusetts Tobacco Control Program (Biener, 2002).

With the benefit of internal evidence of tobacco industry documents (such as about Hong Kong) and programs like Project Sunrise (in the US) that deliberately undermined academic evidence and subverted government harm reduction efforts, it appears timely to question the alcohol industry's seemingly similar role in developing responsible drinking campaigns.

The alcohol industry and responsible drinking CSM activities

On October 9, 2012 the CEOs of 12 "leading global producers of beer, wine and spirits"¹ announced "a collective commitment to build on their long-standing efforts to reduce harmful drinking through the Beer, Wine and Spirits Producers' Commitments" (<http://www.producerscommitments.org/default.aspx>).

The 12 companies committed to implementing actions in five key areas over the five years 2013-2017:

- Reducing under-age drinking
- Strengthening and expanding marketing codes of practice
- Providing consumer information and responsible product innovation
- Reducing drinking and driving
- Enlisting the support of retailers to reduce harmful drinking.

Each of these areas included actions that related to CSM, CSR more broadly, and other business practices. Consistent with the topic of the special issue, this paper will

¹ Anheuser-Busch InBev; Bacardi; Beam Suntory; Brewers Association of Japan; Brown-Forman Corporation; Carlsberg; Diageo; Heineken; Japan Spirits & Liqueurs Makers Association; Molson Coors; Pernod Ricard; SABMiller and UB Group.

focus on CSM activities undertaken by the Australian alcohol industry. We will particularly focus on CSM activities targeting young adults, as ‘binge drinking’ is currently a key focus of public discourse and concern in Australia, and people aged 18–24 are more likely than any other age group to drink at a level that places them at risk of injury on a single occasion of drinking (NHMRC, 2009) at least weekly (Australian Institute of Health and Welfare, 2014). We anticipate that the alcohol SPROs and the alcohol industry may disagree with some of our statements; however, we report our perceptions as public health practitioners, and support our assertions with per-reviewed evidence.

As part of their ‘commitment to reducing underage drinking’, the alcohol industry – like the tobacco industry before them – develop education campaigns for adolescents, parents and schools. Bond, Daube, & Chikritzhs (2010) cite a document that lists ‘Underage Prevention Efforts’ by Miller Brewing Company (MBC), which includes a booklet “Let’s Talk Over a Beer” which “sends a clear message that drinking beer...is an adult activity”; the exact same strategy used by PM to ‘discourage’ youth tobacco smoking which serves to make the behavior more appealing to adolescents (Wakefield et al, 2006).

The available literature indicates industry-funded educational campaigns lead to positive views of that industry (Anderson, Chisholm, & Fuhr, 2009). As Bond, Daube, & Chikritzhs (2009) note, alcohol industry documents further demonstrate the PR benefit of ‘responsibility’ messages and education campaigns. For example, Philip Morris report that: “Consumers [are] aware of the programs and believe companies are being responsible in providing them” (Bring, 1996).

The alcohol industry in Australia has a long history of CSM campaigns and has successfully ingrained itself in sporting, cultural and business activities. This industry has also divided sections of government, academia and public opinion through the industry funded (and previously also in part government funded) Drinkwise organisation which describes its aim as “to help bring about a healthier and safer drinking culture in Australia”.

Drinkwise, and its UK counterpart Drinkaware, are Social Aspects/Public Relations Organisations (SAPROs). Drinkwise describes itself as an ‘independent not-for-profit organization’ but was established and is funded the alcohol industry, and half of its Board members are senior alcohol industry figures. Others – including the authors – would argue that their basic objectives are to divert attention from population level problems that would indicate a need for increased regulation, tax or other measures that the industry seeks to prevent, and to create an impression among decision-makers that theirs is a responsible industry. Drinkwise point to a range of areas as indicators of their effectiveness; including their collaborative approach across the industry, their development of a “consistent moderation theme for use at sporting, music and cultural events sponsored by the alcohol industry”, Drinkwise market research (Drinkwise, ND-b), advertising and marketing awards for their activities (Drinkwise, 2015), and some encouraging trends in relation to alcohol use. So, why are many public health researchers and practitioners opposed to the involvement of alcohol industry funded SAPROs in addressing the problems of alcohol-related harm? (Miller et al., 2009).

These two SAPROs place a particular focus on the ‘drinking culture’ of their country as the primary cause of alcohol related harm, and changes in individual behavior as the solution. Drinkwise, with the tagline ‘get the facts’ promotes informational campaigns rather than evidence based, population level responses such as increases in price and reductions in availability (Anderson et al., 2009; Babor, Caetano, Casswell, & al., 2010). While Drinkwise funds research that supports its assertion that the drinking culture is the cause of alcohol related harm (Carah & van Horen, 2011) it responded to the 2009 publication of an open letter by 57 academics opposing its government funding and declaring that they would refuse Drinkwise funding by threatening individual legal action for defamation (McCambridge, Kypri, Miller, Hawkins, & Hastings, 2014).

While Drinkwise has opposed population level responses, such as volumetric taxation, it has launched a number of major CSM campaigns that convey the message that alcohol related problems can be prevented by behavior change at the individual level. Drinkwise draws on the idea that individuals need to change the drinking culture to avoid increased regulation that poses a serious threat to their access to the social and cultural spaces in which they advertise (Carah & van Horen, 2011). In

2008 and 2010 Drinkwise ran extensive campaigns that emphasized the ‘critical role of parents’ and blamed inter-generational transference of drinking habits for the prevalence of underage drinking (*Kids Absorb Your Drinking* and *Kids and Alcohol Don’t Mix*, respectively) (Carah & van Horen, 2011). These campaigns have the dual benefits of legitimising the alcohol industry’s role in harm prevention/ behavioral change campaigns and aiding their efforts to defeat increased regulation (Jones, 2007; Friedman, 2009; Moodie et al., 2013).

In the UK, the National Health Service uses Drinkaware materials and the UK government specifically ruled out increased regulation in 2012 (McCambridge et al., 2014), while the Drinkaware twitter account proclaims ‘helpful tips’, including that 71% of 18-24 year olds go drinking with colleagues on a Friday night (McCambridge et al., 2014).

An Australian Example: How to Drink Properly

In February 2014 Drinkwise launched the *How to Drink Properly* campaign (developed by Clemenger BBDO Melbourne). The animated campaign features a debonair Don Draper-like character who is described by his creators as speaking to young people ‘in their own language’ (see Box 1 for quotes from the campaign).

The campaign is promoted predominantly via social media, but also uses billboards, on-premise advertisements, cinema advertising and transit advertising, and has a dedicated website (www.howtodrinkproperly.com).

Drinkwise describe the campaign as “*designed to influence young adults to drink responsibly – by moderating the intensity and frequency of binge drinking occasions*” (Drinkwise, ND-a) whereas public health advocates describe it as encouraging drinking and presenting alcohol consumption as a ‘cool’ thing to do (<http://mcaay.org.au/assets/publications/submissions/asb-abac---drinkwise-campaign-complaint.pdf>).

The advertisements deliberately avoid reference to drinking guidelines in favour of encouraging people to ‘know your own limits’. However, lines such as “...you’ll

notice when drinking you'll feel very, very attractive, for a time. This is what we call the realm of drinking excellence" and references to characters such as 'Jim' who is described as an "amateur" drinker who reached his limit "a few scotches" ago, could arguably be interpreted to be suggesting that it is the inability to hold large quantities of alcohol that is problematic rather than drinking them per se.

As Adrian Carter and Wayne Hall pointed out on *The Conversation* "The ads state that drinking "too much" is uncool. But what constitutes too much is largely left to the judgment of the drinker. Although there's the helpful suggestion that you've had too much when you vomit or fall over" (Carter & Hall, 2014).

Box 1

Facebook page: "You'll find no s***-faced selfies here. Just some classy tips on how to drink properly"

Ad voiceover: "*Remember, everyone has their limit. Jim here reached his a few scotches ago, which is why he finds it difficult to operate heavy machinery*" (accompanied by an image of 'Jim' driving a tank through a brick wall).

Website: "Here you'll find everything you need to know about keeping your shit together when you drink. Peruse our videos, or click through to our classy as f*ck social pages to discover the difference between drinking, and drinking properly."

The campaign attracted accolades from the marketing industry, including winning Silver awards in both the 2014 Spikes Asia Awards and the Youth Marketing category at the APAC Effie Awards 2015 (Drinkwise, 2015).

However, it also attracted condemnation from public health practitioners and advocates for its apparent encouragement and glamorization of drinking. As one Australian journalist commented "What it actually does is promote drinking as sophisticated and stylish. Rather than make young people want to drink less, it will make them want to drink more because it shows drinking as a route to popularity"

(O'Brien, 2014). The campaign also attracted international attention; for example the US blog 'Sobering Up' noted that "The underlying message seems to be that drinking too much is bad, but drinking just the "right" amount will turn you into better, more sophisticated version of yourself" (Betts, 2014).

According to Drinkwise "The campaign was created after exhaustive quantitative and qualitative research and concept testing" (Ricki, 2014) (see Box 2 for a summary of the publicly-available detail on sample sizes).

Box 2

Qualitative research (July 2013)

- Four focus groups and 16 depth interviews with 18 – 24 year olds

Quantitative Research (August 2013)

- Sample size 1,025 (ABS representation).

Exploratory Qualitative Research (August 2013)

- Eight friendship triads amongst 18 – 24 year old 'Good Timers' and 'Shamefuls' evenly divided between males and females across Melbourne and Sydney

Messaging & Creative Developmental Research

Territory exploration research (October 2013)

- Four friendship triads amongst 18 – 24 year olds (segments as above)

Campaign creative assessment (October 2013)

- Six friendship triads amongst 18 – 24 year olds (segments as above)

Campaign creative refinement (January 2014)

- Eight focus groups, Four triads and Four in-depth interviews (segments as above)

For full details see: (Drinkwise, ND-b)

However, they are somewhat less forthcoming with detail on the evaluation of the campaign, which they describe as a great success. The May 2014 (Wave 1) report states that 751 interviews were conducted with 18-24 year olds, with approximately two thirds based in capital cities and an even gender split (<https://drinkwise->

production-assets.storage.googleapis.com/Quantum-Market-Research-DrinkWise-How-to-Drink-Properly.pdf). At that point (3 months post-launch) 20% recalled the campaign (approx. 150 respondents); and 33% report drinking less on a night out, after seeing the campaign (66% report making some change in their drinking thoughts or behaviors as a result of the campaign – so it would be interesting to know what changes they are making if it is not to reduce their drinking). What many of us would have liked to see – and have asked for – is the detail of the sampling strategy and the questions that were asked. As at 22 June 2015 this information was not available on the Drinkwise website (<https://www.drinkwise.org.au/our-work/drinking-do-it-properly-2/#>), and neither was the data on the more recent evaluation(s).

The second phase of the campaign, launched in November 2014, also attracted its share of controversy. This phase targeted ‘Schoolies’ (school leavers heading off to celebrate the end of school, many of whom are below the legal alcohol purchase age of 18 years). Drinkwise staff were positioned at Melbourne and Sydney Airports handing out ‘All Class’ gift packs and tips to school leavers heading for Queensland’s Gold Coast (Anon, 2014). Again, opinion was divided as to whether targeting these young people was going to serve the effect of encouraging them to drink in less harmful ways or to see being able to ‘handle’ their alcohol as a symbol of maturity (see Box 3 for the voiceover). Interestingly, there was no suggestion (by either camp) that Drinkwise could be encouraging them not to drink alcohol.

Box 3

Staying classy for days on end surrounded by shit-faced rockies takes more than stamina and a she-pee². Pace yourself to soar like an eagle and avoid passing out spread-eagled with expletives sunburnt onto your back

The alcohol industry and other CSM activities

The alcohol industry also has a prominent role using CSM in campaigns to drive behavioral change or fundraising. CRM (cause-related marketing) is a close relation

² Colloquialism for a female urinating standing up

of CSM; and alcohol brands are increasingly partnering with charitable organisations to raise funds for important health and social causes, even where the link between the social cause and alcohol is problematic.

Australian surveys show that 79% of adults report that they are more inclined to purchase from good corporate citizens and 70% prefer to buy from a company associated with a cause (Lavack & Kropp, 2003). Over half of Australians report that they would switch brands or retailers to one using CRM, given equal price and quality (Endacott, 2004); and research suggests that women – including younger, more affluent women – have more favourable attitudes towards CRM than men (Cui, Trent, Sullivan, & Matiru, 2003; Ross, Patterson, & Stutts, 1992).

In a time where government support is diminishing for charities and non-profit organisations, and their demands are increasing, the solicitation of donor funds and resources is becoming highly competitive (Shelley & Polonsky, 2002), particularly in countries such as Australia where donations from individuals and contributions from charitable foundations are substantially less than in the US (Lavack & Kropp, 2003).

Researchers examining the impact of the type of product on CRM attitudes/intentions have found that CRM is more effective when attached to frivolous products than practical products (Strahilevitz & Myers, 1998) – that is, consumers were more likely to pay a premium for a CRM brand over a non-CRM brand when the product was frivolous (and this is posited to be due to a reduction in the “guilt” associated with frivolous purchases). It is also feasible that they are more likely to buy (more of) a product if they can justify their decision with altruism [who amongst us hasn’t felt better about buying a chocolate bar when the profits go to the local primary school?].

Alcohol brands and other social causes

Belvedere vodka participates in the (RED) campaign for HIV/AIDS, with special edition vodka available between October and December each year since 2011. Its advertisements in glossy women’s magazines invite consumers to “Do something extraordinary.” In large text they encourage women to “BUY (RED). GIVE (RED). SAVE LIVES.” as 50% of the profits from their purchase will be given to the Global



Fund to fight HIV/AIDS in Africa; in tiny text (and you have to hunt for it) they also advise them to drink responsibly. While the exact amount of funds that have been donated is not publicly available, it is clearly substantial with Belvedere announcing in 2014 that “Since the launch of the (BELVEDERE)RED bottle in 2011, contributions from its sales have provided funding for more than 6,235,183 million days of life-saving HIV / AIDS medicine” (Moët Hennessy, 2014). As well as the special edition bottles (available in 750 ml, 1 litre and 1.75 litre sizes) in 2014 Belvedere commenced partnering with nightclubs and DJs to host fundraising dance parties.

Yet at the same time, the literature shows links between alcohol consumption and risky behaviors associated with AIDS, particularly among young homosexual and bisexual men (Drabble, 2000). A community assessment in San Diego found numerous alcohol advertisements and significant HIV/AIDS coverage, but almost no mention of the link between alcohol and increased risk (Drabble, 2000). While Belvedere has run this campaign for four years and is partnering with nightclubs to run fundraising parties, prominent LGBT health organisations (such as the Gay and Lesbian Medical Association) have formally ruled out accepting funding from the alcohol industry (Drabble, 2000).

Mike’s Hard Lemonade offers ‘Pink Lemonade’ (5.0% ABV) from August to October each year. Potential consumers are encouraged to “Fight Breast Cancer with mike's hard lemonade” (Cerullo, 2014). Chambord (16.5-23.0% ABV black raspberry liqueur) invites consumers to ‘pink your drink’ and ‘make a difference’ as the company donates part of the profits to Breast Cancer Network of Strength and other breast cancer charities.



The Chambord website (and various other marketing materials) emphasize that “By adding a splash of Chambord to any cocktail you’re supporting breast cancer awareness year round” (Chambord, ND). In 2011, Chambord partnered with American fashion designer Betsey Johnson to host ‘Cocktails and Cupcakes’ at 20 Betsey Johnson boutiques (Ng, 2011). An important question, of course, is whether the CRM promotion actually increases sales and consumption of the product. While that information is not available to those of us outside the industry, we do know that the company has donated more than \$1,000,000 in five years.

In 2014, a consumer reviewer spruiking Mike’s pink product³ told readers: *Now I have to admit, I am not much of a drinker. I only drink a few times a year, or when I have wine reviews to do. I don’t like beer at all, and generally prefer fruity, girly drinks. So of course, this fizzy, pink concoction was right up my alley. It was light and refreshing, with the perfect balance of sweetness and tart. I would definitely drink it again, especially since I know my purchase helps to fund such an important cause.* (<http://beforeitsnews.com/food-and-farming/2014/09/drink-pink-with-mikes-hard-lemonade-and-help-fight-breast-cancer-mymikesmoment-mc-sponsored-2469188.html>)

It is interesting to note that in 2011 when Mike’s were criticized for using the breast cancer cause to market alcohol, company president Phil O’Neil emphasized that the

³ The reviewer provided the following disclaimer: ***Disclosure: I participated in an Influencer Activation Program on behalf of Mom Central Consulting for mike’s hard lemonade. I received a Circle K gift card to facilitate this review and a promotional item to thank me for participating.***

donations are not tied to sales of their Pink Lemonade, rather, “they are our way of honoring Jacqueline” (an employee who died from breast cancer) (Takeda, 2011). However, on their product page, consumers are advised that “A portion of the profits from the sale of Pink Lemonade will be donated to the Breast Cancer Research Foundation” (Brewers Outlet, 2015).

The percentage of sales or profits donated to the cause varies between products, and in many cases is not publicly communicated. However, where the information is available it demonstrates that the donations represent substantial amounts of alcohol purchased, and consumed, to support these good causes.

Consumers may also not be aware that often their purchases are associated with relatively small donations; and that sometimes an additional step is included in the process which is likely to add to the cost of the consumer (or perhaps reduce the company’s donation). One commentator noted in 2012 that, for example, Chambord donated \$1 per bottle (375ml or 750ml); and Sutter Home Wine’s White Zinfandel donated \$1 per bottle (750ml or 1.5l) but only where the purchaser posted in the ‘capsule’ (assuming they didn’t misplace it and were willing to pay the postage costs) (Huynh, 2012).

Discussion

In Australia, as in many other countries throughout the world, adolescent drinking rates have recently been declining (Australian Institute of Health and Welfare, 2011), with rates of abstinence among 14-17-year olds increasing from 32.9% in 2001 to 50.2% in 2010 (Livingston, 2014). These are encouraging trends, and demonstrate the need to provide environments for young people that support and encourage abstinence among minors and safe levels of drinking among adults. At the same time, however, there have been significant increases in alcohol-related harms, particularly among teenagers and young adults (Lensvelt et al., 2015); suggesting the need to better understand the broad range of influences on drinking behaviors and associated risks.

The alcohol industry – and its SAPROs – have argued that their education activities have contributed significantly to the declines (Drinkwise, 2014), while at the same

time asserting that their other marketing activities do not contribute to the increases (Lion, 2013). It is noteworthy that an independent ‘ABC Fact Check’ which reported on the Brewers’ Association CEO’s claim that "The evidence is clear. There is no or very little causation between alcohol misuse and alcohol advertising, and alcohol misuse includes underage drinking" concluded that the CEO’s claim “doesn’t check out” (ABC, 2015).

Substantial evidence from tobacco, gambling and pharmaceutical industry campaigns demonstrates that industry-sponsored campaigns are generally ineffective at best and harmful at worst. We would argue, based on the evidence presented in this paper, that alcohol industry campaigns carry the same risks.

Concerns about the legitimacy of the alcohol industry’s commitment to CSM are not new. In 2008, the US Center for Science in the Public Interest noted that while Anheuser-Busch spent \$19.9 million on ‘responsibility’ advertising on television between 2001 and 2005 and claimed on its website to be ‘the global industry leader in promoting responsibility’¹, in the same period Anheuser-Busch spent \$1.6 billion on television product advertising and \$52 million on other television advertising (Center for Science in the Public Interest, 2008).

As Bond et al. (2009) note “There is much skepticism in the public health community regarding the impact of industry education programs”. This skepticism appears justified when we consider other statements made in the same industry documents that promote the role of industry education programs. It is difficult to believe industry has a true commitment to reducing alcohol-related harm among young people when they also state that “Strategically, we will be working behind the scenes to encourage the 27 states not already imposing a minimum drinking age of 21 to delay any enactment...” (Easton, 1984); “It is a mistake to blame the ‘product’ for alcohol abuse. Individual drinkers are responsible for their behavior” (Unknown, 1994).

Involving the alcohol industry in behavioral change campaigns also carries the risk of enabling that industry to further legitimize its place in the decision making process. Designated driver campaigns are an example of this effect. While there was a legitimate reason behind their inception, they reduced impacts on the industry by

encouraging non-drinkers to drive, and drinkers to utilize public transport or travel with sober friends, rather than reduce their drinking; simultaneously, they drew attention and responsibility away from the product and onto the individual (Cho & Salmon, 2007). Furthermore, as Casswell & Thamarangsi (2009) remind us, research suggests that responsible drinking messages are strategically ambiguous. They appear to have both public relations and sales benefits, whereas industry argues that they are designed to improve health (although the lack of evidence of effectiveness of education intervention suggests this is unlikely to be the case).

We note that the alcohol industry, and its SAPROs, appear unwilling to share the details of their CSM approaches. A more open debate could be facilitated were these organisations to release the details of their formative and summative research – including details of the methods of data collection, sample sizes, data collection instruments etc – so that they could be reviewed and critiqued in the same way as research undertaken by academics and public health practitioners, which is normally peer-reviewed and publicly available.

Alcohol (like jewellery, lingerie and nail polish) is seen by many as a ‘frivolous product’ and one that we feel guilty about over-indulging in. However, unlike those other products, alcohol is also associated with substantial risk of short- and long-term harm to the consumer. Thus, CRM activities which encourage people to buy alcohol to ‘support’ worthy causes and thus give consumers a justification for buying, and consuming, greater quantities have the potential to improve the wellbeing of some (the recipients of the CRM profits) and the expense of others (the consumers who contribute to those profits). This is particularly concerning when the charitable cause being supported by the CRM activity is one that is associated with alcohol consumption. For example, we now have substantial evidence that alcohol consumption is a risk factor for breast cancer.

Industries that market harmful products use CSR as a means of presenting themselves in a positive light, engaging with decision-makers, linking themselves with prestigious or popular organizations and individuals, displaying their activities as an alternative to effective action such as regulation, and directly or indirectly promoting their companies’ products to potential consumers of all ages. Previous research has

shown that there are **significant links between the perceived CSR of a company and the level to which a consumer assigns blame for harm related to their product (Klein & Dawar, 2004)**. Further, as discussed above, there is evidence from the pharmaceutical industry that ‘education’ campaigns and CSM activities serve to drive up sales of pharmaceutical products at the expense of more appropriate lifestyle changes (Basara, 1996; Mintzes, 2002; t’Jong, Stricker, & Sturkenboom, 2004; Hall & Jones, 2008; Ebeling, 2011; Cetel, 2012).

CSM is a part of such CSR strategies. Alcohol, tobacco and other harmful industries invariably “promote ineffective, individually targeted information and education approaches and sometimes employ covert marketing”; they over-emphasize personal choice and responsibility in place of government intervention; they “avoid disclosure of relevant health information for consumers”; and “to deflect criticism...(they) promote actions outside their areas of expertise” (Moodie et al., 2013).

The Director General of the World Health Organization, Dr. Margaret Chan has noted that industries such as alcohol are using similar approaches to those of the tobacco industry “to shape the public health policies and strategies that affect their products”, adding, “When industry is involved in policy-making, rest assured that the most effective control measures will be downplayed or left out entirely. This, too, is well documented, and dangerous. In the view of WHO, the formulation of health policies must be protected from distortion by commercial or vested interests.”

There is a case for public education, health advice and warnings, and consumer information in areas such as tobacco, alcohol and gambling, but these should be from governments and health authorities, not companies whose sole aim is to promote use of harmful products, and which have a long history of seeking to oppose action that can reduce the harms - including effective, evidence-based health warnings and education.

Can we trust industry to develop responsible and effective solutions to our alcohol problem? In answering that question we need to remember that they define the problem like this:

...Many of the threats to us, P.M., arise from concerns which have lost touch

with common sense and reality. People (and politicians) do need causes, and in a world which is generally more peaceful and affluent than ever before, there's a shortage of big causes. That's why we hear so much about really rather little causes: smoking, drinking, dietary hazards..." (Maxwell, 1986).

A 'little cause'? In one year (2010) in Australia alone there were 5,554 deaths and 157,132 hospitalisations attributable to alcohol. Globally, it has been estimated that an estimated 3.8% of all deaths and 4.6% of disability-adjusted life-years are attributable to alcohol (Rehm et al., 2009).

Conclusion

It is timely to question the role of the alcohol industry in designing and conducting CSM campaigns to encourage responsible drinking, given the evidence from similar industries of the counter-productive effects of such campaigns and the clear evidence that alcohol industry campaigns focus on individual responsibility and divert the discussion from evidence-based approaches such as addressing price and availability. Further, it is important to consider the potentially harmful effects of CRM campaigns that encourage people to purchase and consume alcohol in order to support interventions to address the harms associated with the very same health conditions that share alcohol consumption as a common risk factor.

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