

Social Marketing

Mapping Exercise Report

July 2009

Introduction *(by Commission services)*

At its meeting of 16 July 2008 the Task Force on Marketing Communication of the European Alcohol and Health Forum discussed Social Marketing as one topic among others.¹ It was concluded that the topic needed further in depth discussion in a separate meeting. Therefore the next meeting of the Task Force, on 12 November 2008, was fully dedicated to Social Marketing.²

In both meetings attention was paid to the concept of Social Marketing, based on two papers by Professor Gerard Hastings, and a presentation by Dr. Karine Gallopel-Morvan. Already in the meeting of 16 July the involvement of economic operators in Social Marketing initiatives was discussed, with the economic operators being very much in favour of this, whereas the other members of the Task Force (NGOs) were more negative or hesitant on this. This discussion was continued on 12 November.

After the broad overview of Social Marketing there were several presentations on concrete Social Marketing initiatives to reduce alcohol-related harm, both originating from the private sector (alcohol industry) and from public (health) authorities. Following Professor Hastings' second paper, industry involvement was discussed with a view to 'source credibility'. It appears that industry involvement in Social Marketing can be shaped in different ways: 'branded' (companies 'sign' with their own name, or with the name of a social responsibility organisation, e.g. Drinkaware), or 'unbranded' (no source is given). There was no consensus regarding the extent to which different sources may influence the credibility and the effectiveness of Social Marketing initiatives. The same is true for the environment of Social Marketing (e.g.: is the large volume of commercial marketing 'neutralizing' Social Marketing efforts?) and the question what are 'appropriate messages'.

At the end of the meeting the Chair of the Task Force drew the following conclusions³:

1. Social Marketing is «hard to do»:

- time, money
- impact on behaviour unclear
- social context matters!

2. but: can be effective; good campaigns -

- can raise awareness
- can underpin policy debate
- can build momentum for better enforcement
- can include suggestions for new social norms / behaviour / values

¹ See the Summary report of this meeting:

http://ec.europa.eu/health/ph_determinants/life_style/alcohol/Forum/docs/ev_20080716_mi_en.pdf.

² See the Summary report of this meeting:

http://ec.europa.eu/health/ph_determinants/life_style/alcohol/Forum/ev_20081112_en.htm

³ see also presentation at

http://ec.europa.eu/health/ph_determinants/life_style/alcohol/Forum/docs/ev_20081112_concl_en.pdf

3. evaluation:

- strict causality unprovable
- but: indicators of outcome trends are of interest (e.g.: MEAS results: road deaths before/after)

4. willingness to co-operate

- moving, but from different positions in different Member States –legitimate diversity of approaches
- concept of ‘complementary, coordinated approaches’ to be explored

5. What do we want to share?

- need for mapping of Social Marketing situation and developments in Member States
- identify what is worth to be shared
- research / evaluation / framing of campaigns

6. Degree of trust – source of messages:

- variety of approaches:
- ‘branded’ / ‘unbranded’
- position / role of economic operators?

This report is the result of the need for mapping of Social Marketing situation and developments in Member States, as concluded by the Chair on 12 November (conclusion no. 5), in order to get a more complete and precise picture of what is happening in this area across the EU. Input was submitted by several Member State representatives and members of the Task Force. The current version of the report – which is work in progress – does not offer a complete overview of all Social Marketing initiatives in all EU Member States, but rather an incomplete collection (based on available information) of various initiatives in several Member States.

Before summarizing and analyzing the available information it is useful to note that, despite certain disagreements, there seems consensus on the point that Social Marketing should be more than 'just another information campaign'. This part of the Social Marketing issue – the concept and the benchmark criteria – is therefore briefly described in the beginning of this report.

The information on Social Marketing in Member States in this report is illustrating the issues discussed in the meetings of the Task Force:

1) Apart from some examples, it seems that not all initiatives put forward as 'Social Marketing' meet the criteria of 'real' Social Marketing, as defined in academic literature. There is clear predominance of communication (health 'promotion') rather than a mix of methods and many initiatives seem to lack the rigour which characterizes the 'golden standard'.

2) Based on the available information the conclusion seems justified that evaluating the effectiveness of the Social Marketing initiatives is a rather weak element. In some cases information on this is simply missing. In other cases the measured effects are of a rather 'outward' nature (e.g. the number of hits on a website, or self-reporting by respondents in the target audience, or saying that a certain percentage has understood

a message). None of this is diminishing or excluding the possible effectiveness of the initiatives in terms of behaviour change, but just saying there is no hard evidence to prove this. On the other hand, change of attitudes and increasing knowledge are very legitimate and reasonable aims as well.

3) There is not much cooperation on Social Marketing between different categories of actors (economic operators, NGOs and public authorities). Joint actions from public authorities and NGOs (the German example of the 'Aktionswoche Alkohol') and joint actions from public authorities and economic operators (the Austrian 'Nachdenken statt Nachschenken' campaign) seem to be more common than partnerships of economic operators and NGOs or partnerships of the three categories.

4) The available information does not allow any conclusion regarding what is to be found most in initiatives from economic operators: branded or unbranded. The issue of 'source-credibility' is by the way not limited to initiatives of economic operators. This is e.g. demonstrated by the UK: the UK Department of Health thought the National Health Service (NHS) a more credible source for its Social Marketing initiatives than the Department of Health.

The present report was drawn up by The Open University / The University of Stirling, in the framework of a service contract with the European Commission, and should be considered as a first, baseline assessment on the issue of Social Marketing. As such it is therefore work in progress with further iterations seeking to fill gaps in the current mapping, and to capture greater detail on the variety of issues under discussion. The report will be presented to the Forum plenary meeting of 12 November 2009.

The present report will also feed into the broader review of the implementation of the EU alcohol strategy which the Commission services will publish in September this year.

Mapping Exercise Report on Social Marketing

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THE CONCEPT OF SOCIAL MARKETING

The term social marketing was first coined by Kotler and Zaltman in 1971 to refer to the application of marketing to the solution of social and health problems. They defined social marketing as: *"the design, implementation and control of programs calculated to influence the acceptability of social ideas and involving considerations of product planning, pricing, communication, distribution and marketing research."* (p5). Marketing has been remarkably successful in encouraging people to buy products such as Coca Cola and Nike trainers, so, the argument runs; it can also encourage people to adopt behaviours that will enhance their own - and their fellow citizens' - lives.

Many social and health problems have behavioural causes: the spread of AIDS, traffic accidents and unwanted pregnancies are all the result of everyday, voluntary human activity (at least to a certain extent). Social marketing provides a mechanism for tackling such problems by encouraging people to adopt healthier lifestyles.

Many health problems have a social, as well as an individual, dimension. This phenomenon is most clearly demonstrated by the epidemiological data which shows that poverty is one of the most consistent and basic predictors of ill-health in Europe (Whitehead & Diderichsen 1997). Issues such as lack of opportunity, choice and empowerment can prevent people from adopting healthy lifestyles. Social marketing also has a great deal to offer in the upstream environment by influencing the behaviour, not just of the individual citizen, but also of policy makers and influential interest groups. Social marketers might target the media, organisations and policy and law makers.

Andreasen (2002) and the National Social Marketing Centre in the UK have done much work to develop a set of benchmark criteria for what constitutes a social marketing intervention. These benchmark criteria are outlined in the table below:

1. CUSTOMER ORIENTATION - Develops a robust understanding of the audience, based on good market and consumer research, combining data from different sources.
2. BEHAVIOUR - Has a clear focus on behaviour, based on a strong behavioural analysis, with specific behaviour goals.
3. THEORY - Is behavioural theory-based and informed. Drawing from an integrated theory framework.
4. INSIGHT - Based on developing a deeper 'insight' approach – focusing on what 'moves and motivates' the target audience.
5. EXCHANGE - Incorporates an 'exchange' analysis. Understanding what the person has to give to get the benefits proposed.
6. COMPETITION - Incorporates a 'competition' analysis to understand what competes for the time and attention of the audience, and sources of competitive behaviours.
7. SEGMENTATION - Uses a developed segmentation approach (not just targeting). Avoiding blanket approaches.
8. METHODS MIX - Identifies an appropriate 'mix of methods' including use of the marketing mix: product, price, place & promotion.

(Adapted from French & Blair-Stevens 2007)

Reviews on the effectiveness of social marketing interventions at increasing knowledge and changing attitudes, policy and behaviour, including those targeting alcohol, have demonstrated that they can have a positive effect (Gordon et al. 2006, Stead et al. 2007).

Given the development of social marketing in recent years and its potential relevance to the alcohol platform, the Task Force on Marketing Communications of the European Alcohol and Health Forum has asked for a mapping exercise report on social marketing around alcohol issues in EU member states.

SOCIAL MARKETING ON ALCOHOL IN MEMBER STATES

Information on the following interventions or initiatives has been presented by Task Force members and EU Member States as recent examples of social marketing around alcohol issues, or provided upon request by national public policy experts. Furthermore this has been supplemented by details of interventions that have been identified from published academic literature.

Notwithstanding the attention given in the Task Force to identifying criteria for what constitutes social marketing, and the existence of recognised academic definitions and frameworks, the concept seems to be used to describe a broad range of interventions in which communication through the mass media plays a central role.

Concepts can also become blurred in interventions that combine mass media communications with other types of face-to-face activities carried out at local level. These interventions follow the general recommendation based on scientific evaluation studies that information and communication activities are of best use when not deployed in isolation. Whether these kinds of combined initiatives are seen to fall under "social marketing" is an open question, and in some cases 'social advertising' may offer a more suitable definition.

Another important point to note, which arose during the information gathering phase, is that when evaluating effectiveness or attributing effects to interventions, the same kind of scientific rigour tends not to be observed as for instance in the examination of the impact of commercial marketing of alcoholic beverages. As a result, assessments of effectiveness presented by intervention deliverers may be open to criticism from experts in the field.

The list of examples below is intended to be illustrative rather than exhaustive. If the concept of social marketing is used in a broad sense, examples of media-based activities to influence alcohol-related attitudes or behaviour can be found in many, if not most Member States.

While consumer research methods, such as polling and focus groups, have been used for instance to assess visibility of media campaigns and awareness of messages, effectiveness in terms of change in attitudes or behaviours has been demonstrated in but a few of the case examples presented below. Initiatives are described below by country, and a summary table is in Appendix.

Austria

"Nachdenken statt Nachschenken" – Think before you drink

In Austria, a nation-wide alcohol prevention campaign was carried out in June-November 2007 in order to combat underage and excessive drinking by children and youngsters, and specifically to reduce the number of young people admitted to hospital because of alcohol intoxication (1300 in the first half of 2007).

The objectives were: to raise awareness of risky and problematic alcohol consumption; to reduce alcohol related hospitalisation of youngsters; to disseminate information showing alternative "hip" behaviour in peer-groups concerning alcoholic drinks; to encourage stricter enforcement of laws aimed to protect young people, for instance control of selling alcoholic drinks as well as age control and mystery shopping to raise awareness among retailers and pubs. The campaign also included TV and radio spots broadcast nation wide.

The campaign "Nachdenken statt Nachschenken" (Think before you drink) was carried out by the national center of competence in health promotion and prevention in cooperation with 3600 retailers (shops and supermarkets) and 1900 fuel stations that all signed a charter committing themselves to combating the above mentioned problems among young people.

The campaign was deemed successful:

- After the campaign, age control was stricter and more frequent in retail outlets pubs and they were better informed of the legal requirements: While in 2006 only 34% of the pubs did age controls, by the beginning of 2008, this had risen to 42%. In supermarkets and other retail outlets age controls rose from 56% to 62%.
- The number of alcohol-related hospitalisations of young people dropped by 20% by the end of the campaign (comparing 1/07 - 5/07 with 6/07 - 10/07).

Estonia

“Noortekohvik”

In the spring of 2005, a group of young people, the project leader and representatives from the Estonian Temperance Union and the Estonian Union for Child Welfare gathered together and started the development of “Noortekohvik”, an alcohol and tobacco free youth café in Tallinn. To publicize the idea, the group issued press releases and organised a range of events, including a tobacco- and alcohol-free party for the youth, gathering 500 participants, and a tobacco- and alcohol-free day in one of Tallinn’s most well-known cafes. Social advertisement video clips were produced to show the negative effects of alcohol and tobacco use.

In a survey carried out among young people in 2006 by Tallinn University Social Policy Department, three in four respondents thought there was a need for such a Youth Café and were interested in visiting. Of the respondents, 22% visited pubs or

cafes once in a month, 40% once in a week and 24% several times in a week. Many disliked smoking and alcohol use in these public places.

After two years of work to promote the idea, the City administration found rooms for the café in the centre of Tallinn. The Youth Café has now been run for two years by young people with support from NGOs. The Café offers low-cost food and drinks in a drug free environment and educates young people on topics they find interesting. Young people have access to information on health and leisure time provided by NGOs and Governmental Institutions. Discussions, concerts, exhibitions and workshops are arranged every week. It is a popular place among youngsters to participate in events or just to hang out and play table games. Similar Youth Cafes have been started in another district in Tallinn and in the city of Tartu.

The keys of success for this project were the following:

- The youth were offered an option they already use a lot: visiting pubs and cafés.
- They were not pressured to do something because adults wanted it, but the events and ideas were brought to them by other youngsters.
- Advertising also focused on offering ideas for positive alternatives to drinking alcohol

The project's prevention approach is based on the social learning theory developed by Albert Bandura that highlights the role of modelling in the process of learning behaviours (Ogborne 2004). Learning is seen as a constant interaction between cognitive, behavioural and environmental factors (Leonard 2002). The use of psychoactive substances is one type of behaviour learned by social interactions – watching parents, friends and the media (Waldron & Slesnick 1998).

The Estonian Health Insurance Fund participates in financing projects specifically aimed at promoting health and preventing disease. Alcohol-related campaigns supported by the Insurance Fund in 2005-2008 are described below. The Insurance Fund has also financed injury prevention programmes that may include actions to decrease alcohol misuse.

'Why do you knock down yourself?'

The first campaign for young people, "Why do you knock down yourself?" was launched in December 2005 with the aim of raising young people's awareness about the issue. The campaign included TV clips, posters sent to schools, and a quiz in the web site www.terviseinfo.ee. The campaign was successful at generating a high level of awareness (84%) within the target group.

'A beautiful woman is sober. Say no to alcohol!'

The campaign 'A beautiful woman is sober. Say no to alcohol!' was organised in January-February 2007. The campaign was intended to raise awareness of alcohol-related harm to human health and to invite the public to find alternatives for personal fulfilment. The campaign focussed on women, because various studies have shown an increase in alcohol consumption among women. Besides harmful health effects, the campaign highlighted appearance, self-esteem and self-realization.

Television and radio clips, posters in public transport in cities and urban areas, articles in newspapers and press releases were used as well as banners on the Internet and specific material in the web site www.terviseinfo.ee (in Estonian and Russian languages). The average campaign awareness was 69% among the population aged 15-74, but as high as 82% in the age group 15-39 and 70% in the age group 40-64. Average campaign awareness among men was 61% and among women 75%.

'Alcohol. No1 enemy'

In 2006-2007 the Estonian Health Insurance Fund funded a special promotion project and the production of a video and DVD movie about the health issues of alcohol misuse, entitled 'Alcohol. No 1 enemy'. The movie and guidelines for the teacher were circulated to schools in spring 2007, and the movie is now used as study material in schools.

'Alcohol destroys your brain and life!'

Organized in May-June 2008, the campaign 'Alcohol destroys your brain and life!' aimed to raise awareness of alcohol-related harm to the brain and human health and to reverse the positive image of alcohol use created in the media by presenting research-based information about the harm done by alcohol. Targeted at young adults, the campaign was carried out in a period of the year when the marketing of alcoholic beverages is more intensive than usual. The campaign used the same media channels that are used by drinks companies: television and radio clips, posters in public transport, newspaper articles and press releases, banners on the Internet and specific material in the web site www.terviseinfo.ee (in Estonian and Russian languages). Campaign awareness was 70% and the awareness of the outdoor media campaign 47%. Awareness in the age group 15-24 was 62%.

Alcohol information in a series of thematic brochures

In 2007 and 2008, family doctors, hospitals and other institutions were provided a total of 440 000 brochures (25% in Russian language) on the topics: 'Keep the health; keep the heart', 'High blood pressure. How to protect the heart', 'Stomach tumours. How to prevent cancer' and 'Alcohol in my body'. All of the brochures included information about the negative health effects of alcohol abuse and provided information about moderate drinking. Based on the feedback gathered, the brochures produced and funded by the Estonian Health Insurance Fund reached about 180 000 adults who visited a general practitioner during the year.

Finland

Drunk you're a fool

The 'Drunk you're a fool' campaign, developed for the Finish Federation of the Brewing and Soft Drinks Industry was implemented in autumn 2007. The aim of the campaign was to change attitudes such that alcohol should be used responsibly and in moderation, thus targeting drunkenness and its control, an issue deeply embedded in Finnish drinking culture. Channels used included videos and TV adverts, posters and billboards. The campaign also featured an interactive website,

www.kannissaoletaalio.fi, including information about alcohol related harms, and a discussion board which stimulated a two way dialogue with the audience. Drunk you're a fool was a short-term stand alone campaign and therefore was unable to establish a long term impact on alcohol related problems.

Evaluation of the campaign was conducted independently by academic researchers from the Finish Youth Research Network. The focus was on measuring the immediate effects and the process the campaign generated rather than long term effects. The campaign achieved broad visibility and was found to have generated a lot of discussion on the internet, amongst the target group, in the newspapers and amongst actors and stakeholders in the alcohol field. The slogan 'Drunk you're a fool' became a popular catchphrase. It is believed that the campaign helped people to express their disapproval by taking action and to be more proactive in intervening in loutish behaviour. Furthermore some negative attention on the campaign emanated from debates around one of the featured videos on the consequences of harmful drinking known as the 'rape video'.

France

www.2340.fr

The campaign was developed and delivered in partnership with several stakeholders including: E&P (Enterprise et Prevention), FFS (Fédération Française des Spiritueux), ABF Association of French Bartenders, FFVA Fédération française des vins d'apéritif, BNIC (Bureau National Interprofessionnel du Cognac) and IDAC Interprofession des Appellations Cidricoles. It was launched in 2007 with the aim of informing consumers about risk levels of consumption. The initiative is a national communications campaign targeted at the adult population but with specific deliverables aimed towards at risk groups such as minors, drivers and pregnant women. The main campaign activity is a website containing all the advice and information on the guidelines and also a unit calculator to monitor alcohol intake.

Since July 2007 the site has received more than 10,000 visits per month. A web based survey showed that 60% of respondents considered the site interesting with 11% saying they are concerned at their own alcohol consumption. It also found that 56% of respondents said they will be more vigilant regarding their own alcohol consumption.

Germany

Aktionswoche Alkohol

'Aktionswoche Alkohol' is a bi-annual national Alcohol Awareness Week. The programme is organised by the German Centre for Addiction Issues, the Federal Centre for Health Education and the Federal Drug Commissioner. The Alcohol Awareness Week is implemented at Federal state level with each state running its own steering committees.

The aim of the Alcohol Awareness week is to raise public awareness about the harms caused by alcohol. Specific objectives are to:

- Raise awareness of problems related to alcohol consumption.
- Promote sensitive and responsible handling of alcoholic drinks.
- Reduce alcohol consumption.
- Overcome the stigmatisation of people with alcohol related problems.
- Increase the target audience and range of the campaign.
- Turn the awareness week into a national event.

The Alcohol Awareness Week includes a website, www.suchtwoche.de, campaign switchboard and telephone service as well as various campaign materials such as leaflets, posters, games, newsletters, flyers and branded giveaways. Various launch events take place across the country and regional public relations teams work with the media to publicise campaign activities.

The programme also involves a number of stakeholder partners, including department stores, sports and other clubs, theatres, art galleries, churches, town halls, restaurants, companies and places of education with information and materials delivered at all such venues. The Alcohol Awareness week is designed as a low budget campaign to ensure an excellent cost-benefit relationship.

Following the first Alcohol Awareness Week in 2007 (the second will be in 2009), an evaluation demonstrated that the campaign stimulated more demand for treatment services for alcohol related problems, encouraged a large increase in visitors to the campaign website, mobilized a large number of stakeholders and generated widespread media interest and support.

Ireland

Health Service Executive - Alcohol Campaign 2008

The Alcohol Campaign 2008 was run by the Health Service Executive which is the statutory body responsible for the organisation and delivery of health services in Ireland. The aim of this public awareness campaign was to delay the age at which young people start to drink and to target the general adult population as they are key influencers.

Launched in May 2008, the first phase of the campaign comprised TV advertising broadcast throughout May and June 2008. The TV advertisement focused on a number of young people in different situations where they are exposed to and gain easy access to alcohol. The underlying message behind these scenes is that people should do something about underage drinking before it becomes a problem.

To support the campaign a number of alcohol awareness information resources were made available, including DVDs and booklets. The DVDs are used in alcohol education. The purpose of the booklets is to help parents discuss the issue of alcohol with their teenagers and assist adults in reflecting on their own alcohol use. The booklets are entitled 'Straight Talk – A guide for parents on teenage drinking' and 'Less is More'.

The campaign was supported by extensive local, regional and national public relations and media relations activity involving press releases and spokespersons on the topic giving expert interviews on radio and in the print media.

Drinkaware.ie

The drinkaware.ie programme in Ireland was developed in 2006 by MEAS (Mature Enjoyment of Alcohol in Ireland Limited), a registered charity. MEAS was established in 2002 by the alcohol manufacturers, distributors and licensed trade associations in Ireland as an independent not for profit company with no commercial purpose.

The drinkaware.ie programme is supported by a €20m, five year commitment from the drinks industry given in the context of the 2005/2006 Irish Government sponsored social partnership initiative on alcohol. The aim of the programme is to promote responsibility when drinking and to challenge anti social behaviour related to drinking. It targets 18 to 29 year olds, with a bulls-eye of 22 year olds. A broad range of partners support the programme, including the Gardaí, local authorities, the Road Safety Authority, student representative bodies, NGO's, college health services, on-trade retailers, supermarkets, fuel outlets, insurance companies, public transport, utility companies and the media industry. The programme is informed by theoretical research as well as on-going quantitative and qualitative research.

The communications strategy adopted for the drinkaware.ie programme is designed to effect a change in drinking culture and behaviour. It seeks to do this through (i) implementation of an ongoing overarching messaging campaign challenging the long-standing social permission given for public drunkenness when it impacts on an innocent, sober third party, and (ii) a series of tactical initiatives that are event (e.g. St. Patrick's Day, Easter, Summer festivals, holiday weekends, Freshers Week, Christmas festive season), or 'point of danger' focused (e.g. the morning after a night's socialising). Relevant, 'tangible action' messages designed to prompt more responsible drinking behaviour are communicated in these event or 'point of danger' contexts, such as the importance of slowing down your drinking, knowing the low risk drinking limits, and how many standard drinks you have consumed so that alcohol is eliminated by your body before you drive, etc.

The initial overarching communication (Nov. '06 to Sept. '07) carried the line "*know the one that's one too many*" on mass media such as TV, cinema, radio advertisements and outdoor posters. This was followed in September, 07 (and is on-going) with the 'Had Enough' message which communicates via TV, cinema, internet ads, and outdoor posters how public drunkenness impacts on sober innocents going about their daily lives, such as women out late returning home, casualty nurses trying to do their jobs, the elderly and those living alone, street cleaners and taxi drivers.

Tactical initiatives employ radio advertising, viral advertising (often through partnerships, e.g. with pigsback.com, bebo, MTV, Hotpress.ie, RTE.ie), printed and soft copy formatted guide booklets (such as customised Festival Survival guides, student guides, the Alcohol Sport & You guide, the Christmas Survival guide), ambient advertising, and small, e.g. ATM sized, printed messages. All initiatives are featured on the drinkaware.ie website and a range of devices are used to drive traffic

to this website and engage the consumer, e.g. quizzes on relevant alcohol topics, offering prizes to winning participants, are promoted on partner websites and on www.drinkaware.ie throughout the year. All commercial alcohol advertising invites the reader/listener to 'Enjoy Alcohol Sensibly. Visit drinkaware.ie'. The initiative specific website, Dare2Bdrinkaware.com established in 2007 for the short film competition sponsored by drinkaware.ie and managed by the Digital Hub Development Agency provides information and on-line film development support to the student participants. The winning films are featured on this site, and on the www.drinkaware.ie site. The 2009 winning films were broadcast on City Channel television and screened at the all Ireland Cinemagic Film festival and at the Oxegen music festival (80,000 attendees). The films explore the relationship between alcohol and Irish society and tell stories developed by young people in a medium particularly relevant to the drinkaware.ie target audience.

Qualitative and quantitative research has been undertaken by Lansdowne Marketing Research in 2007, 2008 and 2009 to evaluate the drinkaware.ie programme and to guide its future direction. The 2009 research indicates that key messages are being communicated very strongly in the study population: this group reported sizeable shifts in attitudes to drinking and strong support for the drinkaware.ie brand to be used more widely. For example, the evaluation found that 96% of survey respondents agreed that the '*Had Enough*' advertising shows how innocent people can be harmed by other peoples drinking; 86% agreed that the drinkaware.ie brand should be used more widely; and 83% agreed that excessive drinking in public is becoming less acceptable. There is also evidence of change in drinking behaviour: there was a 27% reduction in those reporting '*suffering a hangover*' in the last month, compared with the response from a similar survey in 2007; and there was a reduction of 30% in 2009 as compared with 2007 in those stating they had been '*drinking more than I should have*' in the last month.

Italy

Aprile - mese di prevenzione alcolologica

The annual alcohol prevention month, April, was inspired by the United States National Alcohol Screening Day that offers education about alcohol and health and also provides free and anonymous screening for alcohol use problems. The first prevention month, 'Aprile - mese di prevenzione alcolologica', was launched in April 2001. The event was supported by the Italian Society of Alchology (SIA), Eurocare Italia and the Association of the Clubs of Alcoholics in Treatment (Aicat).

The initial aim was to raise awareness in the general population and among professionals about the risks related to alcohol use. Campaign materials included CD-ROMs, booklets, leaflets and posters, and a website was also set up. The campaign set out to mobilize local communities with active involvement in the activities. During the alcohol prevention month, awareness events are held across Italy in local communities; Campaign materials and information is distributed targeting the general population and specific target groups and settings such as workplaces, young people and pregnant women.

Following this campaign, an alcohol prevention day was established by the National Institute of Health in 2002, and has since been repeated every year within the framework of the alcohol prevention month. As part of the event, a workshop is held with participation from public health experts and representatives from the likes of the WHO and NGOs, with alcohol professionals and policy makers as the target audience. The workshop involves dissemination of epidemiological data, evidence based data and policy options.

Although a formal evaluation of outcomes is not available, the campaign has gained national recognition and has facilitated the development of activities across the whole country using standardized information materials. The alcohol prevention month and day events have also generated extensive media coverage.

Netherlands

Healthy School and Drugs

An example of alcohol related social marketing intervention is a school based drug prevention programme carried out in the Netherlands amongst 12 year olds in 12 schools (Cuijpers et al. 2002). The programme demonstrates use of each of the recognised characteristics of a social marketing intervention (Gordon et al. 2006, Stead et al. 2007):

- Behaviour change goal: Prevent drug use.
- Consumer research: Extensive qualitative and quantitative needs assessment and pretesting.
- Segmentation and targeting: Tailored to needs and developmental stage of target.
- Marketing mix: Curriculum, videos, peers, home activities.
- Exchange: Sought to provide “fun” “attractive” activities, positive peer role models.
- Competition: Dealt with indirect and direct pressures to use substances.

The school-based drug prevention programme comprised 3 lessons per year over 3 years plus home activities. The programme was underpinned by needs identified in needs assessment, plus a social influences approach. The curriculum was complemented by school policy development work and information for parents.

A quasi-experimental design was used to evaluate the effectiveness of the programme. The outcomes monitored were reported alcohol use ever and daily. A baseline survey of 1930 7th grade students in 12 schools was conducted and followed-up every year for 3 years after the baseline. It was found that intervention students had significantly lower daily alcohol use immediately and 3 years after baseline, and reported significantly fewer drinks per occasion.

Alcohol awareness campaign

A novel approach utilised in a campaign delivered in the Netherlands featured alcohol-specific child raising support to parents with children who have not started drinking. By addressing parents, rather than children, and by giving tips on how to

deal with alcohol at home the campaign aims to contribute to increasing the age of onset of alcohol use.

This alcohol awareness campaign was started by the Ministry for Youth and Families in 2006. Initial steps were taken to impress upon parents the importance of 'Preventing alcohol damage in your growing child'. The vast majority of parents (86%) have expressed a preference for their child not to drink, and a vast majority (84%) find it important to establish clear rules in order to deter their children from drinking.

In 2006, a national TV and radio campaign, and the website www.alcoholinfo.nl were launched. In 2007, a national and a regional campaign were launched. Institutes in all regions were obliged, de facto, to educate parents and children on the use of alcoholic drinks by children under the age of 16.

In 2008, the national and the regional campaign continued. Additional regional activities were launched to increase awareness. There was also a shift from national and regional to local campaigns. TV and radio spots helped create awareness. Also banners, posters, flyers, advertorials in (supermarket) magazines and a special pamphlet with tips for parents were used. More than 400 parents' evenings were organised by different institutes in the country throughout the year.

Outcomes:

- The number of parents drinking in the presence of children has decreased.
- More parents find it NOT acceptable anymore that children use alcohol under the age of 16.
- Parents seemed to become more strict and cognisant of the issues around youth alcohol use. Around 55% of the parents are aware of the harmfulness of children using alcohol every weekend.

Portugal

Copos: quem decide és tu – Drinks: It's up to you

This campaign was a nation wide initiative aimed at young people aged 14-20. The intervention was delivered in partnership between the Portuguese Red Cross and IDT (Institute for Drugs & Drug Addictions). It consisted of a school-based intervention related to the risks associated with the harmful use of alcohol by young people. The main campaign objective was to enhance personal responsibility towards alcohol use. Campaign features included various school based activities, peer involvement, and geographical flexibility. There was also provision of information on harmful alcohol use and promotion of healthy lifestyle behaviours. No campaign outcome data was available.

Tu Alinhas – Are you in? (IDT)

This web based/community youth intervention was delivered by IDT. It featured a community-based initiative with the aim to provide a tool offering information on psycho active substances as well as providing information on general health

promotion themes. Campaign activities focused around a youth website, featuring an interactive chat service with moderators, and a specific section for parents and teachers. In addition, a campaign email Q&A service was also provided. No outcome information was made available.

Eu e os Outros – Me and the others (IDT)

This was a national campaign aimed at young people aged 10-18 and delivered by IDT. It consisted of a school-based, community intervention. The campaign design focused on encouraging young people to build up insight about developmental issues related to adolescence, and to promote decision making processes, group confrontation and information seeking. The intervention featured various school based activities including an education component, activities involving university students, a telephone helpline, a campaign website, and was also reinforced with various community components. No outcome data was available for the campaign.

Não sejas Camelo – Don't be a camel!! (University setting, name N/A)

The campaign was a university intervention aimed at young adults. The university-based programme aimed to plan guidelines for the prevention of alcohol related problems amongst students. This was to be achieved by collecting information on substance use, providing support for harm reduction programmes, encouraging learning about prevention and treatment, and through the support of comprehensive evaluation processes. An exploratory survey to identify needs was also conducted. Following this, various forms of support for prevention and harm reduction programmes was offered and training for student support services was provided. No outcome data for the campaign was available.

Beba com cabeça – Drink with your head (ANEBE)

This campaign run by ANEBE (Associação Nacional de Empresas de Bebidas Espirituosas) is aimed at consumers aged 18-40. It features a community project with the aim to provide information about alcoholic beverages. This is centred on a sophisticated campaign website featuring: a units calculator, drinks diary, self-testing, a FAQs section, and facts about alcohol. A yearly evaluation survey is also conducted with results feeding into policy and action. It found that the campaign website received 500 hits in less than 2 months.

100% Cool

The intervention delivered by ANEBE, consisted of a national road safety campaign aimed at young drivers. The campaign started in 2002 with the objective of changing young people's attitudes towards drink driving and the harmful consumption of alcohol. The intervention featured various media activities and communications, included the use of a group behavioural change approach, and also delivered a designated driver campaign. The project has received several rewards including a National Efficacy prize (Gold) and in 2007 was included in the short list for the National social marketing prize. A Euro Effie awards in the same category was also given out for the campaign by EACA.

Spain

Consumo Responsable

Consumo responsable is a national campaign aimed at consumers run by FEBE (Federación Española de Bebidas Espirituosas). It consists of an awareness raising campaign with the aim of promoting responsible drinking and to provide consumers with information required to make informed choices about alcohol use.

The main feature is a campaign website with 4 sections:

1. 'to know' – containing information on alcoholic beverages,
2. 'to understand' – information on the effects of alcohol and recommended consumption levels,
3. 'to share' – drink diary and WHO consumption test,
4. 'to find out more' – standard drinks calculator.

The website address launched at the start of 2008, is contained in all FEBE communications, received 2,000 visits by July 2008 with 4,000 visitors predicted by the end of 2008.

Choices

The Choices initiative was a responsible drinking campaign delivered by Diageo launched in 2007. Although it has run in Spain and in the UK and evaluation data has been collected the campaign is being rolled out in other countries. An underlying principle for Diageo was to treat responsible drinking as a brand and apply the same standards of rigour in process and consumer focus.

An extensive planning, insight gathering and consumer research process was followed including interviews with key stakeholders, extensive desk research and literature reviews, qualitative and quantitative consumer research with 3500 respondents across several countries: Austria, Denmark, Germany, Greece, Italy, Ireland, Poland, Russia, Spain, Sweden and the UK. The development process also included work sessions, preliminary reports and the eventual design of a campaign strategy. A monitoring and evaluation framework was also developed. The research process identified that the dominant issue in Southern Europe is drink driving.

The aim of the campaign was to motivate the key target audience, those aged 18-25 years who drink excessively and act irresponsibly, by encouraging moderate consumption. Four consumer segmentation clusters were identified: responsible in control drinkers, responsible enjoyer drinkers, irresponsible shameful drinkers and irresponsible indifferent drinkers. It was decided that for the campaign irresponsible shameful drinkers offered the most scope for changing attitudes. The research showed that young people use alcohol as a social lubricant, and they drink to enable positive social interactions. They are also not aware of the social damage that excessive drinking does to their image. A key brand benefit that being in control of your drinking helps you get more out of a night out was identified. The brand positioning

was to show the audience the power of responsible drinking and the consequences of irresponsible drinking.

Adverts were developed which tracked the development of a night out featuring young adults with the positive social aspects included to build credit amongst the target audience. A tipping point in the night then focused around the choices for young people around their drinking behaviour with a positive outcome and a negative outcome shown resulting in loss of social credit.

In Spain there were lower levels of recognition of the campaign compared to in the UK (29%). This was thought to be due to advertising clutter. Spontaneous decode by respondents that the campaign was about responsible drinking was 75%. Also, 50% of respondents claimed they would be more likely to consider drinking responsibly after seeing the Choices campaign.

United Kingdom

Alcohol Social Marketing Strategy for England

The UK has become one of the leading countries in the development of social marketing with support from the UK government in its Choosing Health White Paper (Department of Health 2004), an internationally recognised academic research centre: The Institute for Social Marketing, an increasing number of social marketing training schemes and courses as well as the formation of the NSMC (National Social Marketing Centre). This has resulted in increased capacity for research, funding and a practitioner skills base, more widely recognised definitions of principles and practice, and the development of professional standards in social marketing (Gordon & Moodie 2009).

Subsequently, the Department for Health has devised an alcohol social marketing strategy for England. The strategy was formulated as part of a raft of measures in response to increasing and higher-risk drinking with an estimated 10 million men and women drinking above sensible limits, and alcohol related illnesses estimated to cost the National Health Service £2.7 billion and the UK economy between £17 and £25 billion per annum. The strategy's primary target are drinkers at a higher risk of developing alcohol-related illness (men drinking over 50 units and women over 35 units per week), who account for the highest proportion of those admitted to hospital. The aim of the strategy is to reduce the number of people drinking at higher risk levels in England and thereby contribute to a reduction in the number of alcohol related hospital admissions.

The strategy was devised using the framework and benchmark criteria for social marketing developed by the Department of Health in partnership with the NSMC. Initial research in the form of a scoping exercise was conducted, including drawing on epidemiological evidence, clinical expertise and experience, consumer research and industry studies. In addition, an independent review of the effects of alcohol pricing and promotion was funded as a separate but parallel investigation. Supplementary ethnographic research was carried out to provide insight into the social context. Stakeholder involvement was also a key component of the strategy development

process as was target audience and segmentation, propositions, messaging and interventions to effect the desired behaviour change.

Consumer research with harmful drinkers found that people appear to be sensible drinkers on the surface and drink to have fun, socialise and relax. Furthermore, they claimed not to drink to get drunk and that they are in control of their consumption. However these respondents were all passionate ambassadors for alcohol. Alcohol was a seamless and integrated part of their everyday life, part of their identity, and they disassociated their drinking behaviours from the negative consequences caused by their drinking. Indeed despite holding an adamant belief that their drinking was normal they possessed a sub-conscious belief that alcohol gave them control over their lives.

It was recognised that most people have never been asked to consider how much they drink; therefore there was a cultural blind-spot to the problem. Rather than take a linear approach it was decided that a shift in perceptions of risk was necessary, and it would be important to improve the exchange process for the target audience. Also a key component of the strategy would be to incorporate cultural and environmental support. Messaging to achieve cut through, relevant and newsworthy health messages, were developed on why to cut down and how to cut down and terminology used to reflect risk: lower risk, increasing risk and higher risk. An inbuilt, regular and robust measurement and evaluation process was designed to measure outcomes. A target group for intervention was identified amongst 35+ C2DE males with nine audience segments and possible levers.

The strategy was introduced in May 2008 with the launch of a drink check website: www.drinkcheck.nhs.uk and an expanded telephone helpline service. Support services and materials have been introduced, a self-help manual devised, various events held and shared learning with stakeholder involvement encouraged. The intention is to create a “pathway to self-help”, where drinkers who wish to cut down would be supported by materials such as the manual. Identification and Brief Advice (IBA) techniques, which have been proven to result in 1 in 8 drinkers reducing their consumption, are being promoted throughout the National Health Service (NHS). The principal of IBA is also being employed “virtually” via the web and marketing.

Further evaluation, research and development is on-going. However, initial results are promising, suggesting there is demand for the pathway and high approval of the support material. In spring 2009 a national segmentation and targeting tool will be launched in the NHS which will enable those working in primary care to pinpoint likely concentrations of higher risk drinkers for social marketing in their area. Also a Knowledge Management on-line resource is being developed to disseminate learning and to capture the learning of others, as well as working with the English regions to roll out social marketing campaigns in their areas.

Choices

The aforementioned Choices initiative (see Spain section) was also run in the UK The research process identified that the dominant issue in Northern Europe is binge drinking and aggressive behaviour.

Pre-testing found that 50% of respondents believed the ads would result in them being more likely to consider drinking differently, 80% claimed they would remember it is an ad for responsible drinking, and the idea of contrasting the good and bad was well understood and credible.

In the UK the campaign achieved 63% recognition amongst the target group. Spontaneous decode that it was a responsible drinking campaign was 80%. It was found that 62% claimed they would be more likely to consider drinking responsibly after seeing the campaign.

Taskforce Members' campaigns

Without firm conclusions on how to classify Social Marketing, a number of members of the Task force have also come forward with initiatives that they feel should qualify within the genre. As there is not the time here to analyse all European initiative, the references to these campaigns are instead provided here to allow readers to judge for themselves.

NAME	REFERENCE
Drinks Industry Initiatives	http://www.europeanspirits.org/documents/drinks_industry_brochure_2008.pdf
WBA Initiatives document	http://www.brewersofeurope.org/docs/publications/Worldwide%20Brewing%20Alliance%20%20Brochure%202007.pdf
The Brewers of Europe's first interim rep	http://www.brewersofeurope.org/docs/publications/090313_Interim_Commitments_BoE_report.pdf
Goda (in Danish)	http://www.goda.dk/

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Appendix: Summary of initiatives presented, by country

Member State	Campaign / Intervention Name & (Sponsor)	Target Audience and setting	Intervention Framework & Aims	Campaign activities	Outcomes
Austria	Nachdenken statt Nachschenken" – Think before you drink (National Centre for Competence in Health Promotion & Prevention)	Nation-wide campaign aimed at young people	Alcohol prevention campaign with aim to combat underage and excessive drinking by children & youngsters. Specific aim to reduce alcohol related hospital admission of young people	TV and radio spots, test purchasing & mystery shopping scheme, stricter enforcement of existing laws, information dissemination	After the campaign age control was stricter. Increase in use of age controls in pubs from 34% in 2006 to 42% in 2008. In supermarkets and other retail outlets this figure rose from 56% to 62%. Number of youth alcohol related hospital admissions reduced by 20%
Belgium					
Bulgaria					
Cyprus					
Czech Republic					
Denmark					
Estonia	Noortekohvik (Estonian Union for Child Welfare, Estonian Temperance Union)	Localised community setting aimed at youth	Designed using social learning theory. Establishment of an alcohol & tobacco free youth café. Aim to provide a social outlet, a drugs free environment for youth and to provide information on relevant topics.	Press releases, various events, tobacco and alcohol free youth party, tobacco & alcohol free day, social advertising clips, discussion groups, concerts, exhibitions, workshops	Running for two years now the café offers low cost food and drinks in a drug free environment and educates young people about various topics. Similar cafes have been started in another part of Tallinn and in Tartu.
	Why do you knock down yourself? (Estonian Health Insurance Fund)	National campaign aimed at young people	Awareness raising campaign with aim of raising young people's awareness about alcohol issues	TV advertising, posters in schools, quiz, and campaign website.	Generate a high level of awareness (84%) amongst the target audience.
	A beautiful woman is sober. Say no to alcohol (Estonian Health Insurance Fund)	National campaign aimed at women	Awareness raising campaign designed with the aim of increasing awareness of alcohol related harm amongst women and publicise alternatives for personal fulfilment	TV and radio adverts, posters, articles in newspapers, press releases, website.	Campaign awareness was 69% amongst adult population aged 15-74, 82% amongst 15-39 year olds, and 70% in the age group 40-64. Average

					awareness among men was 61% and among women was 75%.
	Alcohol. No1 enemy (Estonian Health Insurance Fund)	Youth promotion project	School based promotion project aimed at providing information on the health issues surrounding alcohol misuse.	Production of a DVD and Video and related course materials delivered by teachers in school.	N/A
	Alcohol destroys your brain and life! (Estonian Health Insurance Fund)	National campaign aimed at young people	Awareness raising campaign aimed to raise awareness of alcohol related harm to the brain and human health and to reverse the positive image of alcohol use presented in the media	Use of various media channels including TV and radio adverts, posters, newspaper articles, press releases, campaign website.	Campaign awareness was 70% and awareness of the outdoor media campaign was 47%. Awareness in the age group 15-24 was 62%.
	Alcohol information in a series of thematic brochures (Estonian Health Insurance Fund)	Information campaign aimed at health service providers	Information campaign delivered to family doctors, hospitals and other institutions with the aim to publicise the negative effects of alcohol abuse and provide information about moderate drinking	Information brochures	Production of 444,000 brochures. The brochures reached about 180,000 adults who visited a GP during the year.
Finland	Drunk you're a fool (Finish Federation of the Brewing & Soft Drinks Industry)	National campaign aimed at binge and heavy drinkers	Communications campaign during 2007 aimed at changing attitudes such that alcohol should be used responsibly & in moderation, target drunkenness & its control and challenge the deeply embedded Finnish drinking culture	Videos and TV adverts, posters and billboards, interactive campaign website.	Short term campaign so no long term impact on alcohol related problems. Evaluation research did demonstrate that the campaign achieved high visibility, generated increased discussion on the issues and helped people express disapproval by intervening and taking action against drunkenness and loutish behaviour
France	www.2340.fr (E&P, FFS, ABF, FFVA, BNIC, IDAC)	National initiative aimed at the general population but also at specific at risk groups such as minors, drivers and pregnant women	Awareness raising communications campaign aimed at aim informing consumers about the WHO's low risk levels of consumption	Predominantly a campaign website featuring guidelines, information and a unit calculator	Site has received more than 10,000 visits per month since July 2007. Web survey found 60% of respondents considered the site interesting, 11% concerned at their own alcohol

					consumption, 56% will be more vigilant regarding their own alcohol consumption.
Germany	Aktionswoche Alkohol (German Centre for Addiction Issues Federal Centre for Health Education Federal Drug Commissioner)	National campaign aimed at whole population	Alcohol awareness week conducted bi-annually. The aim is to raise public awareness about the harms caused by alcohol. Specific objectives are: to raise awareness of problems related to consumption, promote sensitive & responsible handling of alcohol, reduce consumption, overcome stigmatisation of people with alcohol related problems, increase campaign reach & target audience, turn the campaign into a national event	Campaign website, telephone service, various materials: leaflets, posters, games, newsletters. Launch events. Stakeholder activities in church halls, youth clubs, places of education. Media events.	Evaluation research in 2007 showed that the campaign stimulated more demand for treatment services, encouraged a large increase in visits to the campaign website, mobilized a large number of stakeholders & generated widespread media interest & support
Greece					
Hungary					
Ireland	Health Service Executive - Alcohol Campaign 2008 (HSE)	National campaign aimed specifically at young people but also at general adult population (as key influencers)	Awareness raising campaign started in 2008. Aim is to delay the age at which young people start drinking and to target the general adult population who act as key influencers	Extensive TV advertising, DVDs, booklets, press releases, public relations activities, expert interviews on TV and radio	N/A
	Drinkaware.ie (MEAS)	National intervention aimed at young people, excessive drinkers and drivers	Programme designed using consumer research and theoretical underpinning. Aimed at tackling the issues of underage drinking, excessive drinking and drink driving. Goals were to change the drinking culture and tackle issues such as anti-social behaviour	TV adverts, posters, creation of brand and brand values, website, guides, competitions, use of peer to peer media, posters & billboards, evaluation research & measurement.	Slight decrease in drink driving fatalities was observed coincidentally with the campaign but likely to be the result of new legislation on mandatory testing and increased enforcement by police
Italy	Aprile - mese di prevenzione alcolica (SIA, Eurocare Italia, AICAT)	National general population campaign but with some specific target groups: workplaces,	Annual alcohol prevention month offering education about alcohol and health, & provision of screening & treatment services. Aim to raise	CD ROMs, booklets, leaflets, posters, website, community events, expert workshop	No formal evaluation but campaign has gained national recognition and facilitated the development of activities

		young people, pregnant women	awareness of risks related to alcohol use.		across the country using standardised information materials. Also has generated extensive media coverage
Latvia					
Lithuania					
Luxembourg					
Malta					
Netherlands	Healthy School and Drugs (N/A)	School students	School drug prevention programme designed using social marketing principles. Aim was to change attitudes and behaviour related to alcohol use including reduced consumption	Extensive consumer research and pre-testing, segmentation & targeting, curriculum based educational activities, videos, peer activities, home activities	Published evaluation research demonstrated that intervention students had significantly lower daily alcohol use immediately and 3 years after baseline and reported significantly fewer drinks per drinking occasion
	Alcohol awareness campaign (Ministry for Youth & Families)	National campaign aimed at parents	Alcohol specific child raising support intervention, aimed to increase the age of onset of alcohol use.	TV and radio adverts, website, regional campaign, education provision, banners, posters, flyers, parents evenings	Number of parents drinking in the presence of children has decreased, More parents find it not acceptable that children under 16 drink, 55% of parents aware of the harms of children using alcohol every weekend
Poland					
Portugal	Copos: quem decide és tu – Drinks: It's up to you (Red Cross & IDT)	Nation wide initiative aimed at young people aged 14-20.	School based intervention related to risks associated with the harmful use of alcohol by young people. Campaign objective to enhance personal responsibility towards alcohol use	Various school based activities, peer involvement, geographical flexibility. Provision of information on harmful alcohol use. Promotion of healthy lifestyle behaviours.	N/A
	Tu Alinhas – Are you in? (IDT)	Web based/Community youth intervention	Community based initiative to provide a tool offering information on	Youth website, interactive chat service	N/A

		psycho active substances as well as general health promotion themes	with moderators, campaign email Q & A service, specific site section for parents & teachers	
Eu e os Outros – Me and the others (IDT)	National campaign aimed at young people aged 10-18.	School-based, community intervention designed to encourage young people to build up insight about developmental issues related to adolescence, and promote decision making, group confrontation and information seeking	Various school based activities including education component, activities involving university students, reinforced with community components, telephone helpline, website	N/A
Não sejas Camelo – Don't be a camel!!! (University setting, name N/A)	University intervention aimed at young adults	University based program with aim to plan guidelines for prevention of alcohol related problems amongst students by collecting information on substance use, support for harm reduction programmes, encourage learning about prevention & treatment, & support evaluation processes.	Exploratory survey to identify needs, support for prevention and harm reduction programmes, training for student support services	N/A
Beba com cabeça – Drink with your head (ANEBE)	Consumers aged 18 to 40	Community project with aim to provide information about alcoholic beverages	Campaign website featuring: units calculator, drinks diary, self-testing, FAQs, and facts about alcohol. Yearly evaluation survey.	Website received 500 hits in less than 2 months
100% Cool (ANEBE)	National campaign aimed at young drivers	Road safety campaign started in 2002 to change young people's attitudes towards drink driving and harmful consumption of alcohol	Various media activities and communications, use of a group behavioural change approach, designated driver campaign	Project has received several rewards including national Efficacy prize (Gold) and in 2007 was included in the short list for social marketing, and a Euro Effie awards in the same category was given out by EACA

Romania					
Slovakia					
Slovenia					
Spain	Consumo Responsable (FEBE)	National campaign aimed at consumers	Awareness raising campaign with the aim of promoting responsible drinking and to provide consumers with information required to make informed choices about alcohol use	Campaign website with 4 sections: to know – containing information on alcoholic beverages, to understand – information on the effects of alcohol & recommended consumption levels, to share – drink diary & WHO consumption test, to find out more – standard drinks calculator. Website address is contained in all FEBE communications	Website received 2,000 visits until July 2008 with 4,000 visitors expected by the end of 2008.
	Choices (Diageo)	National campaign aimed at young adults aged 18-25	Responsible drinking communications campaign aimed at motivating the key target audience who drink excessively and act irresponsibly to think that moderate consumption can be aspired to	Designed using extensive consumer research and insight gathering, and use of segmentation & targeting. Main feature was TV ad campaign centred on a night out and the positive & negative social consequences of drinking behaviours	Level of campaign recognition was 29%. Spontaneous decode that it was a responsible drinking campaign was 75%. Also 50% of respondents claimed they would be more likely to consider drinking responsibly after seeing the Choices campaign.
Sweden					
UK	Alcohol Social Marketing Strategy for England (Department of Health)	National strategy aimed at risky drinkers with segmentation and targeting of specific audiences.	Comprehensive social marketing strategy started in 2008, containing various campaigns & activities. Aim is to reduce the number of people drinking at higher risk levels and reduce the number of alcohol	Designed using social marketing benchmark criteria, consumer research, segmentation & targeting, consideration of	Data not yet available

			related hospital admissions	exchange concept and competition. Website, telephone line, self help manual, stakeholder service provision, IBA services, ongoing measurement and evaluation processes	
	Choices (Diageo)	National campaign aimed at young adults aged 18-25	Responsible drinking communications campaign aimed at motivating the key target audience who drink excessively and act irresponsibly to think that moderate consumption can be aspired to	Designed using extensive consumer research and insight gathering, and use of segmentation & targeting. Main feature was TV ad campaign centred on a night out and the positive & negative social consequences of drinking behaviours	The campaign achieved 63% recognition amongst the target group. Spontaneous decode that it was a responsible drinking campaign was 80%. It was found that 62% claimed they would be more likely to consider drinking responsibly after seeing the campaign.