



MONASH
University



Turning Point
TREATMENT · RESEARCH · EDUCATION

MONASH
ADDICTION
RESEARCH
CENTRE

SUMMARY REPORT

ANIMATING ALCOHOL
CULTURE CHANGE AMONGST
MALE HOSPITALITY
STUDENTS AND WORKERS:
“HOSPO DRINKING CULTURES”

SEPTEMBER 2022

PROJECT INFORMATION

Title

Animating alcohol culture change amongst male hospitality students and workers: “Hospo drinking cultures” summary report

Project team

Dr Michael Savic^{a,b}

Dr Tina Lam^a

Peta Stragalinos^{a,b}

Kellie Rudlin^{a,b}

Carmel Cammarano^c

Dr Ben Allitt^c

A/Prof Fahad Hanna^c

Prof Suzi Nielsen^a

Prof Steven Roberts^d

A/Prof Brady Robards^e

Prof Dan Lubman^{a,b}

^a *Monash Addiction Research Centre, Monash University, Clayton, Australia*

^b *Turning Point, Eastern Health, Richmond Australia*

^c *Chisholm Institute, Dandenong, Australia*

^d *School of Education, Culture and Society, Monash University, Australia*

^e *School of Sociology, Monash University, Australia*

Suggested citation: Savic, M., Lam, T., Stragalinos, P., Rudlin, K., Cammarano, C., Allit, B., Hanna, F., Nielsen, S., Roberts, S., Robards, B., & Lubman, D. (2022). Animating alcohol culture change amongst male hospitality students and workers: “Hospo Drinking Cultures” summary report. Monash University with VicHealth

CONTENTS

INTRODUCTION.....	4
DEVELOPING INSIGHTS ABOUT MALE HOSPITALITY DRINKING CULTURES	4
CO-DESIGNING THE ANIMATED DOCUMENTARIES.....	6
IMPLEMENTING THE CULTURE CHANGE PROJECT	8
CONCLUSION	9
ACKNOWLEDGMENTS.....	10
REFERENCES.....	11

INTRODUCTION

Research suggests that hospitality workers tend to drink more than the general population, and that heavy drinking cultures operate among male hospitality workers in particular [1-5]. As part of its Men's Risky Drinking Cultures Initiative, VicHealth funded Monash University to undertake an alcohol culture change project focusing on male hospitality students and workers in collaboration with Chisholm Institute.

The aim of the "Hospo Drinking Cultures" project was to cultivate norms and workplace settings that encourage low-risk drinking, care, and alternative post-work practices using animated documentaries. Research shows that animated documentaries are potentially useful for public health efforts, as they can be engaging, sensitive to representation, and can enable rich depictions of complicated, emotional, and challenging experiences and topics, such as drinking [6-10].

The project involved four interconnected stages: 1) Developing insights about the drinking cultures of male hospitality students and workers through surveys (n=298) and qualitative interviews (n=40); 2) Co-designing five animated documentaries to shift male hospitality drinking cultures based on insights developed in stage 1; 3) Sharing the animated documentaries and materials through the implementation of a culture change project involving a campaign and embedding the animations in hospitality training; 4) Evaluating the campaign process and impacts.

This summary report describes the process and key insights across stages of the project, with evaluation findings embedded throughout, before concluding with some reflections for future alcohol culture change projects.

DEVELOPING INSIGHTS ABOUT MALE HOSPITALITY DRINKING CULTURES

Surveys and interviews reiterated that alcohol is prominent in hospitality work settings, especially amongst men who are influential in hospitality drinking cultures. Almost 300 people aged 16-64 years (Mean=29.1, SD=10.1) with hospitality study and/or work experience participated in the online survey, about half (46%) of which identified as male. A total of 40 males aged 20-56 (Mean=30.6, SD=15.4) with over 12 years of hospitality work experience (on average) participated in a qualitative semi-structured interview.

Male survey participants reported drinking more frequently and a greater quantity of standard drinks compared with female participants. Males with hospitality work experience were significantly more likely to be drinking more frequently with co-workers than female participants (see Table 1). This echoes general population findings that males consume alcohol in riskier patterns than women [11].

TABLE 1 - SURVEY PARTICIPANTS ALCOHOL CONSUMPTION

Alcohol Consumption	Total Count (%)*	Male Total Count (%)	Female Total Count (%)
Alcohol consumption frequency	n=207	n=98	n=107
Never	25 (12.1)	9 (9.2)	16 (15.0)
Monthly or less	39 (18.8)	15 (15.3)	24 (22.4)
2-4 times a month	47 (22.7)	22 (22.5)	25 (23.4)
2-3 times per week	40 (19.3)	17 (17.4)	22 (20.6)
4 or more times per week	56 (27.1)	35 (35.7)	20 (18.7)
Typical day alcohol consumption quantity	n=190	n=91	n=98
1 or 2 standard drinks	82 (43.2)	32 (35.2)	50 (51.0)
3 or 4 standard drinks	42 (22.1)	21 (23.1)	20 (20.4)
5 or 6 standard drinks	26 (13.7)	14 (15.4)	12 (12.2)
7 to 9 standard drinks	21 (11.1)	11 (12.1)	10 (10.2)
10 or more standard drinks	19 (10.0)	13 (14.3)	6 (6.12)
Frequency of consuming ≥ 6 standard drinks	n=167	n=81	n=85
Never	25 (15.0)	12 (14.8)	13 (15.3)
Monthly or less	61 (36.5)	23 (28.4)	38 (44.7)
2-4 times per month	28 (16.8)	16 (19.8)	11 (12.9)
2-3 times per week	29 (17.4)	15 (18.5)	14 (16.5)
4 or more times per week	24 (14.4)	15 (18.5)	9 (10.6)

* Total includes 98 males, 107 females, and two participants of another self-described gender

The results of the online survey found that most participants:

- agreed that drinking was more common in hospitality workplaces compared to the “average” Australian workplace (59%)
- disagreed that drinking in hospitality workplaces was acceptable (47%)
- believed that alcohol is central to celebrations (48%)
- believed workplace drinking was associated with harm (62%)
- agreed that there were opportunities to socialise with co-workers without alcohol (61%)

These results indicate that participants have an awareness of the pervasiveness of alcohol consumption among hospitality workers and recognise the potential negative impacts, which may explain why many did not think drinking in the workplace was acceptable. We also found that practices like after work drinks arise partly because of the demands of hospitality work. Challenging hospitality work rhythms, conditions and environments can place a toll on physical and mental health and help to explain why practices like after work drinks become so valued.

“



I think de-stressing and decompressing is a big part of [after work drinks] because - especially in a place like where we are where it's so busy all the time, where you get run ragged and everyone gets stressed out, tempers flare up and stuff. At the end of the day if we can all relax and share a couple of beers together and have a laugh it really helps. It really goes a long way ... It's just really bonding, a sense of the family and friendship. (Rhys, 39, Chef)

However, participants also highlighted positive skills, norms, and practices that might protect against harm. These included professional responsibility around ensuring appropriate behaviour, socialising without alcohol, and taking care of each other.

“



I've always worked in pretty close-knit teams. So, most of the time you - you're like friends...If someone's really out of it you'll get them water, you'll get them home in a taxi or uber. If they're really bad, you'll take them home...I've always been quite protective of my staff as - almost like little brothers and sisters. I've usually been older than them, too, so I'm quite protective...I know [managers] who, like myself, who go out of their way to look after their staff and make sure that they get home safe. (Logan, 34, Bar manager)

Participants also expressed a desire for culture change and more discussion of hospitality worker drinking in training.

“



I brought it up as well with my uni [a hospitality training provider]. They said, “that we don't really teach students about alcohol, we don't teach them different ways to socialise, but we do have parties where students get free alcohol.” It would be beneficial if uni did talk about drinking habits and how we can change that. (Martin, 22 Hospitality student and junior chef)

Taken together, insights from the project suggest that there is not only an appetite for alcohol culture change, but that many hospitality workers are living and doing the change.

Through our analysis of the qualitative data, we identified six potentially fruitful themes we could focus on in the animated documentaries to amplify the alcohol culture change that was, in some ways, already occurring. Mirroring and building on the survey data, these included emphasising: 1) The positive and challenging aspects of working in hospitality; 2) The role of men and masculinity in hospitality drinking cultures; 3) Role models and model workplaces; 4) Normalising low risk drinking and promoting harm reduction strategies; 5) Alternative events/activities for winding down and connecting with hospitality colleagues; 6) Caring and looking out for colleagues (and self).

CO-DESIGNING THE ANIMATED DOCUMENTARIES






Using a co-design process, we invited five participants to be involved in animation interviews, the audio-recordings of which were used as the narration in our five animated documentaries. The development of the animations was a collaborative and iterative process between the creative team, animation participants, and project stakeholders and collaborators from Monash University, Chisholm Institute, VicHealth and La Trobe University. Feedback and refinement of visual and audio elements occurred throughout all stages of the animation development process (see Table 2).

TABLE 2 - FEEDBACK AND REFINEMENT PROCESS OF ANIMATED DOCUMENTARIES

Process	Description
Refining and communicating themes, focus and style	<ul style="list-style-type: none"> • Creative team were provided qualitative data (e.g., audio files and interview transcripts) to provide them with context/landscape for which animations will be based. • Research and Creative teams collaboratively developed a creative brief including themes (identified in qualitative research), narrative style, positive message framing, acknowledgement of socio-cultural factors and material elements involved in drinking practices. • VicHealth messaging guides [12, 13] were used to help guide animation message.
Animation interviews and curating stories	<ul style="list-style-type: none"> • Five participants were selected for a 1-hour animation interview in a professional studio. These participants were selected based on representation of hospitality roles, experience, age, culturally and linguistically diverse, and discussion of the desired animation themes in the initial qualitative interview. • To maximise engagement, each animation was designed to be around 3-minutes long. A story editor assisted in creating a cohesive narrative that highlighted drinking culture in hospitality, and suggested alternatives that amplified positive experiences.
Developing visual, sound and animation elements	<ul style="list-style-type: none"> • Bespoke figurative-style animations were developed that reflected participants unique experiences and would resonate with the target audience. • Team ensured there was representation across characters (e.g., gender, age, cultural diversity and hospitality roles) and other design elements (e.g., depiction of vegetarian and vegan dishes). • A bold and rich colour palate and original sound design was used to ensure animations were engaging and evocative.
Continuous feedback and refinement	<ul style="list-style-type: none"> • The team sought and incorporated feedback and input from stakeholders, especially hospitality workers, at all stages. • Weekly meetings with Research and Creative team were held to discuss and refine themes, visual elements, character development, animation narratives.

The animated documentaries were about 3.5 minutes in length and feature personal experiences of how men are navigating and changing hospitality drinking cultures to facilitate low risk drinking, facilitating alternative ways of winding down after a shift, and care between hospitality workers (see Table 3). Short 40-second versions of each animated documentary were also produced for social media.

TABLE 3 - SYNOPSIS OF THE FIVE ANIMATIONS

Character	Headshot	Synopsis
<p>Martin 22 year old hospitality student and junior chef.</p>		<p>Martin explains how a conversation with a teacher changed his belief that drinking had to be a central part of hospitality culture. This conversation made him realise that it was social connection that he valued most and inspired him to try different activities with his classmates and work colleagues. As Martin says: "There's a million and one ways to have fun without alcohol."</p>
<p>Jamie 29 year old manager at a cocktail bar and restaurant with many years of hospitality experience.</p>		<p>Jamie talks about how peers can influence drinking, and how senior staff and managers can look out for their staff and help change the culture at work when they lead by example.</p>
<p>Emmanuel 31 year old cicerone (beer expert) and bartender at a brewery.</p>		<p>Emmanuel recognises that male co-workers can influence each other's drinking in ways that aren't always desirable. He points out that workplaces can create change by providing alternatives to alcohol such as food and non-alcoholic drink alternatives.</p>
<p>Thiago 33 year old head chef at a pub, with experience working in fine dining restaurants.</p>		<p>Thiago describes the challenges of working in hospitality, such as long hours and stressful work environments, and the impact that alcohol can have on performance and the ability to work in the kitchen as a team. He emphasises that senior staff are key to helping cultivate a positive and enjoyable workplace.</p>
<p>Paul 37 year old marketing chef, with 20 years' experience in cafes and Michelin star restaurants.</p>		<p>Since moving from food service to a corporate role, Paul recognised that drinking among other sectors isn't as common. He talks about the various risks associated with drinking in a kitchen environment and encourages his staff to participate in other activities that don't centre on drinking.</p>

Thirty hospitality students and workers participated in reaction testing as part of animation development feedback and refinement, whereby participants watched each of the five animations and then completed a survey about their reactions to each animation. Participants were aged 18-52 years (Mean = 20.1, SD=10.2), about half (47%) identified as male, and 3 of 5 participants (60%) were current Chisholm hospitality students.

Analysis illustrated that reactions to the animations were positive with most participants reporting:

- the animations were useful (70%)
- desirable to include in hospitality training courses (90%)
- they would share the animations with people working or studying in hospitality (87%).

The animations were also found to prompt stimulation of thought on:

- the impact of alcohol consumption on school/work (77%)
- risks associated with drinking (77%), individual alcohol consumption (70%)
- influence on others drinking (70%)
- other students and/or co-workers alcohol consumption (70%)
- reduction in frequency of alcohol consumption (57%)
- reduction in quantity of alcohol consumption (53%)

Very few perceived the animations as judgemental or insensitive (<5%), reiterating the value of our positively framed narratives and attention to representing people and the issue of hospitality worker drinking in a sensitive way.

The qualitative comments from participants were also positive, with people remarking on the engaging nature of the animations and their usefulness. There were also a few comments about potential unintended interpretations around the animations reinforcing or glorifying drinking and a useful suggestion about future work that draws more on the experiences of women in hospitality.

IMPLEMENTING THE CULTURE CHANGE PROJECT

We implemented the culture change project and shared the animations via three main avenues: 1) A website; 2) A campaign, 3) Embedding the animations in hospitality training (see Table 4). By making the animated documentaries publicly available via the website and encouraging their use by hospitality trainers and organisations, we hope to increase the likelihood that the positive impacts of the project are not only sustained but continue to grow.

TABLE 4 – IMPLEMENTATION ACTIVITIES

Implementation Activity	Description
Website	<ul style="list-style-type: none"> • Developed website hospdrinkingcultures.org.au in collaboration with Turning Point web developers. • Website hosts the animation videos, project information, frequently asked questions, how to support culture change and wellbeing in the hospitality industry, project news and events, and information on services that could be contacted for alcohol and other drug support. • The website has had over 1,000 visitors since the campaign launch.
Campaign	<ul style="list-style-type: none"> • A media release was issued on Thursday, 17 March 2022 and was picked up by independent, online and radio media platforms. • The social media campaign (sharing longer and shorter versions of the animations) commenced with organic social media posts across Facebook, Twitter, and LinkedIn, with a paid campaign across Facebook. The social media campaign reached over 101,000 people and the animations were viewed over 2,000 times. • Conducted in-person and online presentations of the project insights and animations to hospitality representatives, clinicians, students, researchers, and policy makers.
Embedding the animations in hospitality training	<ul style="list-style-type: none"> • Worked with Chisholm collaborators on formally embedding the animations into hospitality training courses at Chisholm. • Delivered an animation screening event with moderated panel at Chisholm, Dandenong. • Promoted the campaign and animations via Chisholm intranet and staff and student digital newsletters. • Presented and shared animations to Chisholm staff across various faculties and campuses. • Electronic mail-out to enrolled Chisholm hospitality students.

CONCLUSION

Although further research on the longer-term impacts of the “Hospo Drinking Cultures” project is needed, initial findings suggest that animated documentaries may be a useful way of engaging male hospitality students and workers in alcohol culture change. While culture change is likely to be a gradual process, the positive reactions to the animated documentaries, wide reach and engagement through the campaign, and commitment from hospitality training providers to embed animated documentaries into hospitality training demonstrates the positive impacts of the project.

Similarly, our animation development process - which included a strong emphasis on co-design, collaboration and collaborative decision making, trusting in the expertise of the creative team, and continuous feedback and refinement - might be a useful model for story-based culture change projects, irrespective of whether these use animations or videos or other media to tell stories. Our experience suggests that developing animated documentaries (and potentially any other story-based culture change products) for the purpose of alcohol culture change involves a delicate balance between informing and entertaining. Excessive informing and presenting culture change messaging at the expense of entertaining may disengage the target audience or run the risk of paternalism. On the other hand, entertaining at the expense of informing, runs the risk of diluting and obscuring messaging.

However, feedback and refinement, and testing culture change project materials with the target audience can help to ensure that the balance is satisfactory. As our project can attest, feedback and input from stakeholders, especially the target population, is also vital in ensuring that culture change project materials resonate. For us, this also meant trying to ensure that the animated documentaries were positively framed and not completely ignoring peoples’ complex experiences of pleasure and social connection through drinking. Ignoring this complexity risks threatening the relevance and credibility of the resources with the target audience.

Co-design and feedback can also help with (but not guarantee) thoughtful consideration of representation. This involves thinking critically about how the decisions we were making were framing the problem and solution, people, and their experiences. For instance, we tried not to just include content that trades in ideas of individual responsibility or blame – the “just say no” messaging – when workplaces and a range of other elements are involved in hospitality drinking cultures. It also meant respecting participants’ preferences for how they wanted to be depicted, including what they looked like, their name, and what they wore.

Future culture change projects aimed at addressing masculine drinking cultures would benefit from exploring the experiences of women and gender-diverse people in hospitality, given that they also inhabit the same working environments where masculinity and masculine drinking cultures are experienced. Given that practices like after work drinks arise partly because of the demands of hospitality work, efforts to cultivate hospitable work conditions and environments for staff are also likely to be essential to wellbeing and alcohol culture change.

ACKNOWLEDGMENTS

We would like to thank:

- Participants for generously sharing their stories, experiences and feedback
- Creative team: Isobel Knowles, Lucy Hayes, Juliet Rowe, Robert Healey, & Glen Maw
- Chisholm marketing and communications: Melanie Sayers, Jessica Brinsdon, Sarah Rice
- Website development: Tony To, Khabab Javed, & Orson Rapose from Turning point, Eastern Health
- Evaluation team: Vanessa White, Geraldine Marsh, and Virginia Lewis of La Trobe University
- Hospitality organisations: White Jacket Effect, Go Hospo, Hospo for Life, Australian Culinary Federation (Victoria) and other individuals and groups who helped promote the project
- Funder: VicHealth

REFERENCES

1. Buvik, K. and J. Scheffels, *On both sides of the bar. Bartenders' accounts of work-related drinking*. *Drugs: Education, Prevention and Policy*, 2020. **27**(3): p. 221-228.
2. Conway, T. and P. MacNeela, *A young person's game: Immersion and distancing in bar work*. *Psychology & Health*, 2012. **27**(8): p. 971-989.
3. Pidd, K., A. Roche, and V. Kostadinov, *Trainee chefs' experiences of alcohol, tobacco and drug use*. *Journal of Hospitality and Tourism Management*, 2014. **21**: p. 108-115.
4. Roberts, S., Ralph, B., Elliott, K., Robards, B., Savic, M., Lindsay, J., ... & Lubman, D. I. (2019). Exploring men's risky drinking cultures. Melbourne: Victorian Health Promotion Foundation.
5. Pidd, K., et al., *Risky behaviours, risky work settings: The alcohol and drug consumption patterns, health and wellbeing of commercial cookery trainees*. *Journal of Health, Safety and Environment*, 2014. **30**(2): p. 301-311.
6. Bolaki, S., *Illness as many narratives: arts, medicine and culture*. 2016: Edinburgh University Press.
7. Calderón, J.L., et al., *Improving diabetes health literacy by animation*. *The Diabetes Educator*, 2014. **40**(3): p. 361-372.
8. Champoux, J.E., *Comparative analyses of live-action and animated film remake scenes: finding alternative film-based teaching resources*. *Educational Media International*, 2005. **42**(1): p. 49-69.
9. George, S., et al. *Using animation as an information tool to advance health research literacy among minority participants*. in *AMIA Annual Symposium Proceedings*. 2013. American Medical Informatics Association.
10. Schnellinger, M., et al., *Animated video vs pamphlet: comparing the success of educating parents about proper antibiotic use*. *Pediatrics*, 2010. **125**(5): p. 990-996.
11. Australian Institute of Health and Welfare, *National drug strategy household survey 2019*, in *Drug Statistics series no. 32. PHE 270*. 2020, AIHW, Australian Government: Canberra.
12. VicHealth, *Healthy persuasion: A message guide for health promotion practitioners*. 2020, VicHealth: Victoria Australia.
13. VicHealth, *Framing masculinity: Message guide*. 2020, VicHealth: Victoria Australia.

Further information

Monash Addiction Research Centre
Monash University
Peninsula Campus
Moorooduc Hwy
Frankston, Victoria 3199
Australia

T: +61 3 9904 4262
E: marc.info@monash.edu