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International Journal of Drug Policy

journal homepage: www.elsevier.com/locate/drugpo



Policy analysis

Gender, intoxication and the developing brain: Problematisations of drinking among young adults in Australian alcohol policy



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ARTICLE INFO

Article history: Received 22 June 2015 Received in revised form 14 October 2015 Accepted 26 October 2015

Keywords:
Gender
Intoxication
Brain development
Youth
Critical analysis
Australian alcohol policy

ABSTRACT

In this article, we draw on recent scholarly work in the poststructuralist analysis of policy to consider how policy itself functions as a key site in the constitution of alcohol 'problems', and the political implications of these problematisations. We do this by examining Australian alcohol policy as it relates to young adults (18-24 years old). Our critical analysis focuses on three national alcohol policies (1990, 2001 and 2006) and two Victorian state alcohol policies (2008 and 2013), which together span a 25-year period. We argue that Australian alcohol policies have conspicuously ignored young adult men, despite their ongoing over-representation in the statistical 'evidence base' on alcohol-related harm, while increasingly problematising alcohol consumption amongst other population subgroups. We also identify the development of a new problem representation in Australian alcohol policy, that of 'intoxication' as the leading cause of alcohol-related harm and rising hospital admissions, and argue that changes in the classification and diagnosis of intoxication may have contributed to its prioritisation and problematisation in alcohol policy at the expense of other forms of harm. Finally, we draw attention to how preliminary and inconclusive research on the purported association between binge drinking and brain development in those under 25 years old has been mobilised prematurely to support calls to increase the legal purchasing age from 18 to 21 years. Our critical analysis of the treatment of these three issues - gender, intoxication, and brain development - is intended to highlight the ways in which policy functions as a key site in the constitution of alcohol 'problems'.

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Introduction

The use of alcohol by young adults, particularly heavy sessional or 'binge drinking', has generated considerable research and policy attention in recent years. This interest has driven, and been driven by, a large body of epidemiological research on patterns of sessional drinking and their acute consequences (Courtney & Polich, 2009; Livingston, 2008), as well as qualitative research on the cultures and social relations of drinking (Hernandez, Leontini, & Harley, 2013; McCreanor et al., 2013). It has also led to research examining the evidence for a range of policy measures, including those targeting young adults, and the degree to which alcohol policy is, or should be, guided by the existing evidence base (Gilmore, Chikritzhs, & Gilmore, 2013; Howard, Gordon, & Jones, 2014). In the existing analyses, policy is frequently understood as a

response to alcohol problems already established by research and/ or public debate. In this article, we set out in a different direction by drawing on recent scholarly work in the poststructuralist analysis of policy to consider how policy itself functions as a key site in the constitution of alcohol 'problems' and the political implications of these problematisations. We pursue this general argument about the ways in which policy constitutes problems with reference to a range of Australian alcohol policy documents that specifically address drinking amongst young adults, but some of the problematisations we identify may also be relevant to alcohol policy in other locations.

Background

Australian alcohol policy has generated an extensive research literature. A key focus of such work has been the analysis of policy processes and the identification of political interests shaping the introduction of specific policy recommendations. For example, Hawks (1990, 1993) provided a detailed analysis

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of the development of the first national alcohol policy in 1990, in which he argued that the policy had been 'watered down' in response to wine industry interests. Approaching this issue from a very different perspective, Stockley (2004:202), an employee of the Australian Wine Research Institute, also criticised the 1990 policy because it sought to reduce alcohol consumption across the whole population and omitted any consideration of the claimed health benefits of light-to-moderate alcohol consumption, such as a reduction in the levels and risk of cardiovascular disease and in overall mortality. She noted that in the 2001 national alcohol strategy a primary aim was to achieve a balance between reducing the burden of alcohol-related harm and maximising the social and health benefits of low risk alcohol consumption (Stockley, 2004:205). Other researchers have argued that the alcohol industry works to deter the introduction of effective alcohol control policy initiatives while promoting interventions that maintain profits (Mathews, Thorn, & Giorgi, 2013; Miller, de Groot, McKenzie, & Droste, 2011; Munro, 2012).

Research on Australian alcohol policy has also focused on policy recommendations such as pricing and taxation (Sharma, Vandenburg, & Hollingsworth, 2014) and limiting availability (Livingston, 2011), including restrictions on late-night trading (Manton, Room, & Livingston, 2014). Other work has focused on gauging public support for a variety of alcohol policy initiatives without which their introduction is perceived to be more challenging (Callinan, Room, & Livingston, 2014; Fogarty & Chapman, 2013a). A recent comprehensive analysis of Australian alcohol policy from 2001 to 2013 concluded that there was a huge range of different alcohol initiatives across Australia, many of which did not reflect evidencebased best practice to reduce harm (Howard et al., 2014). This concern with whether alcohol policy is guided by the evidence base is a recurring theme together with recommendations for future policy options (Gilmore et al., 2013; Loxley et al., 2005; Stockwell, 2004), including those assessed on the basis of their cost-effectiveness (Doran, Hall, Shakeshaft, Vos, & Cobiac, 2010) and/or recommended by alcohol policy experts (Fogarty & Chapman, 2013b). In their review of evidence for the efficacy and effectiveness of alcohol, tobacco and illicit drug harm reduction interventions in Australia, Ritter and Cameron (2006) found that only harm reduction interventions to reduce alcoholrelated road trauma were well founded in evidence.

Analyses of Australian alcohol policy have also focused on its effects on specific population groups such as pregnant women (McBride, 2014; O'Leary, Heuzenroeder, Elliott, & Bower, 2007) and Indigenous people (Brady, 2007; Weatherburn, 2008). Young people are another target group of policy interest, although 'young people', like 'youth', is a broad and shifting category which, for policy purposes, generally starts at 13 years and continues until the age of 25 (Wyn & White, 1997:1). Thus the target group of interest can be secondary school students (McMorris, Catalano, Kim, Toumbourou, & Hemphill, 2011; Paschall, Grube, & Kypri, 2009), school leavers (Hutton, Cusack, & Zannettino, 2012), adolescents in transition to adulthood (15–22 years) (Pidd, Boeckmann, & Morris, 2006), university students (Hernandez et al., 2013) or young adults (18–25 years) (Moore, 2010).

A smaller body of work has drawn on qualitative research on drinking cultures to critique some of the central assumptions in alcohol policy. For example, Brown and Gregg (2012) concluded their study of young women's use of Facebook while drinking by questioning the policy assumption that young women inevitably experience shame and regret following drunken sexual encounters. In her analysis of national alcohol policy, Keane (2009) argues that the strict intoxication/moderation and carnal/disciplined binaries underpinning alcohol policy contrast with the desire for pleasure and controlled intoxication found amongst young drinkers.

Although this literature has contributed many crucial insights, largely absent is a critical analysis of alcohol policy as a key site in the formulation of alcohol 'problems', relating in our case to young adults. What kinds of 'problems' do alcohol policies aim to address? How are alcohol, its effects and its consumers framed in these problems and on what basis? And what are the political effects of policy problems – that is, what kinds of specific actions are made visible and possible by these problematisations and which are ruled out, rendered unthinkable? In the next two sections, we outline the theoretical approach that informs our analysis, clarify how we selected and analysed the policy documents, and explain how we identified the three themes that we have chosen for critical scrutiny.

Theoretical approach

Our analysis is informed by recent scholarly work in poststructuralist policy analysis. This approach explores how realities are constituted in discourse and practice. Poststructuralist policy scholar Carol Bacchi, for example, argues that social problems are 'endogenous - created within - rather than exogenous - existing outside - the policy-making process' (Bacchi, 2009:x). Conceptualising policy in this way, she argues, allows us to identify some of the ways in which it constitutes 'problems' and to critically assess these problematisations for their assumptions and political implications. As Bacchi herself acknowledges, such an approach is inspired by Foucault's work on problematisation (Bacchi, 2015; see also Gusfield, 1980) and it has been usefully deployed in critical analyses of Australian policy on amphetaminetype stimulants (Fraser & Moore, 2011; Lancaster, Ritter, & Colebatch, 2014), Australian national drug policy (Lancaster & Ritter, 2014) and addiction (Fraser, Moore, & Keane, 2014).

Bacchi's (2009:xii) approach to policy analysis involves identifying 'What's the Problem Represented to be' and consists of six questions, three of which are relevant to our analysis:

- What is the problem represented to be in a specific policy?
- What presuppositions or assumptions underlie this representation of the 'problem'?
- What is left unproblematic in this problem representation?
 Where are the silences? (see also, Law, 2012:170).

Taking our cue from this analytical approach, we sought to examine the 'continuities', 'changes' and 'silences' in policy discourse on young people and the 'problem' of alcohol, and the supporting research and assumptions, over time.

Method

Our analysis focuses mainly on three national alcohol policies (1990, 2001 and 2006) and two Victorian state alcohol policies (2008 and 2013), which together span a 25-year period. The five selected documents represent all of the government alcohol policy documents available nationally and for Victoria. We chose national documents for analysis because of their key role in setting policy agendas and the Victorian documents in order to investigate the extent to which the themes present in the national documents also appeared in those produced at the state level. Choosing the Victorian documents also extended the time span to around 25 years, providing us with the opportunity to better examine continuities and changes between policies over time.

The first-ever national alcohol policy, the *National Health Policy on Alcohol in Australia*, was endorsed by the Ministerial Council on Drug Strategy in 1990 (Ministerial Council on Drug Strategy, 1990). Since then, there have been two further national alcohol policies:

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