

Gender, alcohol, and interventions

This Alcohol Insight summarises the end-of-award report for a study funded by Comic Relief and Alcohol Research UK. The full report is available via the Alcohol Research UK website.

There is widespread concern about health and social consequences of excessive alcohol consumption among young people. Although young men are more likely than women to binge drink, sex differences are decreasing because more young women are binge drinking. Given this, it is important to better understand how gender attributes and attitudes affect young men's and women's alcohol use, and whether different health promotion interventions are required for young men and women.

Alcohol consumption may be particularly important to identity during adolescence and early adulthood, with drinking being a part of socialisation into adult roles. The meaning and importance of alcohol may vary as a function of: age (e.g., whether individuals are above the legal age to purchase alcohol); beliefs about gender; and perceived peer drinking norms and peer pressure. This may create a need for different health promotion interventions for different age groups.

The aim of this study was to expand on our own and others' recent research into young people and alcohol by examining age and sex differences in young people's beliefs about alcohol consumption and interventions to combat alcohol misuse.

Data collection was conducted in the South-East of England among 13-25 year olds. We conducted 30 in-depth individual interviews and 6 group interviews which focused on:

- perceptions of cultural expectations related to drinking
- motives for drinking
- personal experiences of alcohol use
- concerns about downsides of excessive alcohol use
- recollections of, and responses to, public health campaigns
- beliefs about how to increase the impact of alcohol-related health promotion

The full report contains detailed analysis of the issues described below, and includes many quotes illustrative from the large body of interviews. Further analysis will be presented in academic journals. Links to such papers will be added to the Alcohol Research UK website.

Drinking motives and experiences

Alcohol consumption was viewed as a commonplace and normative part of British culture. Furthermore, across all age- and sex-groups, excessive alcohol use among young people was viewed as normative. As part of this, young people perceived age- and gender-appropriate patterns of drinking. Young people were aware of many negative aspects of their own and others' excessive alcohol consumption, but they tended to be ambivalent, and often viewed these downsides as the price one must pay for the perceived personal and social benefits of alcohol use.

Interviewees gave multiple motivations for drinking, with a particular focus on socialisation and fun. Furthermore, some of the downsides of drinking were seen to provide opportunities for social bonding, e.g.

suffering together through a hangover. Current and former university students noted that excessive alcohol consumption in the first year was strongly influenced by the centrality of (excessive) alcohol to forming and maintaining social networks. This suggests that there may be a need counter heavy drinking and/or provide more alcohol-free activities in freshers week.

Associations between alcohol consumption, peer pressure and concerns about image (i.e., being seen as “cool” rather than “boring”) were commonly experienced at younger ages. Interviewees in older age groups gave a clear sense of a learning curve. Part of this was about learning personal limits, so that they did not experience the negative consequences of over-indulgence. Many reported that they had managed to “grow out of” socially expected patterns of regular binge drinking, and that they now felt more comfortable with drinking at a personally-determined level. However, they tended to retain a concern about their image and reputation. These image and reputation concerns included shame at embarrassing or undignified behaviour (particularly among women). Another aspect of reputation concerns was wanting to avoid being a burden on friends when drunk and unable to look after oneself.

Although many young people had personal experiences of the downsides of drinking too much, they tended to downplay the health implications and to distance themselves and their peers from “problem” drinkers. In contrast, they expressed concern about how their own safety and pleasure were often hampered by others’ problematic drinking and/or antisocial behaviour.

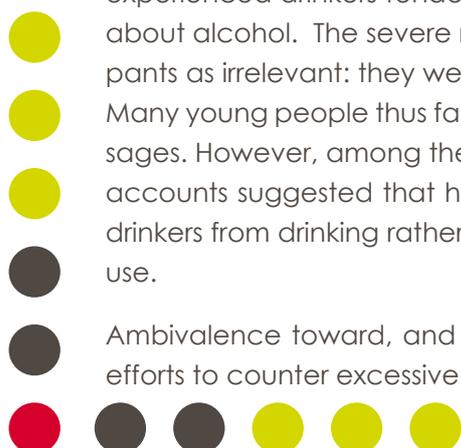
Across age groups, there was a clear concern for personal safety when drunk and for the safety of friends. Concerns were gender-specific, with greater concern about threats to women’s physical and sexual safety from men, and greater concern about threats to men’s physical safety arising partly from their own risky behaviour, but mainly from the aggressive behaviour of other drunk men. Participants were less concerned about their own and their friends’ drunken behaviour than about the drunken behaviour of people they did not know.

Participants of all ages perceived few real barriers to underage drinking, noting that they could deploy various strategies to circumvent licensing laws. Younger respondents reported that if they or their peers wanted to drink, they could obtain alcohol by: acquiring from within the home; purchasing it with the assistance of older siblings, peers, or strangers; targeting retail outlets known not to ask for identification; and/or pooling limited financial resources. Some older interviewees were skeptical as to the government’s real commitment to reducing alcohol consumption.

Interventions - responses and suggestions

Attitudes toward public health campaigns were most positive among the youngest age group: older experienced drinkers tended to be more cynical or skeptical about the impact of mass media messages about alcohol. The severe risks often focused on in public health campaigns were considered by participants as irrelevant: they were perceived to be unlikely to happen, or at least unlikely to happen to them. Many young people thus failed to see the personal relevance of many health promotion intervention messages. However, among the youngest age group there was some support for shock tactics. Interviewees’ accounts suggested that health promotion campaigns may be more effective at deterring young non-drinkers from drinking rather than changing the behaviour of people with personal experience of alcohol use.

Ambivalence toward, and distancing from, the downsides of alcohol use present serious challenges to efforts to counter excessive alcohol consumption among young people. Rather than developing generic



“one size fits all” messages on television, posters, or billboards, better use could be made of targeted advertising and viral marketing via popular internet sites, and social networking sites. Social networking sites could also be key methods for norm-based marketing to change perceptions of acceptable behaviour when drinking and the social and interpersonal consequences of excessive alcohol consumption. Such approaches may be strengthened by focusing on the image, reputation, and safety concerns noted above. It was suggested by older participants that moderate drinking messages in television or internet advertising would be most effective if they were reinforced in drinking contexts, but they also noted that managers and proprietors may not support such approaches.

Rather than attempting to change people’s views of the desirability of drinking per se, a more effective approach may be to work with reputation- and image-related concerns that are already relevant to them. Given the role of alcohol in socialising and the importance of not embarrassing oneself, an effective approach may be to focus on embarrassing drunken behaviour. At a bare minimum, respondents suggested that for campaigns and interventions to be effective, they should be tailored to address the concerns of sub-groups of men and women of different ages. For example, the youngest age group emphasised the need to target peer group mentality, as opposed to gender specific approaches.

Unit-based intake guidelines tended to be considered to be unrealistically low, and were therefore irrelevant. Across all age groups, participants expressed a dislike of feeling that they were being told off or preached at by public health messages. Instead, it was suggested that campaigns should give greater respect to young people: they should provide information and advice, but leave choices about alcohol consumption up to individuals.

School-based education was generally thought of as inadequate. Suggested improvements included making use of case studies which are easy to identify with, and emphasising the physical and interpersonal risks associated with excessive alcohol use, in addition to explaining short- or long-term health effects. There was a general desire for more openness of discussion around alcohol: for drinking to be less of a “hidden” or “undercover” activity. This was suggested as a way to counter the image of teenage drinking as an act of rebellion.

A key finding was the general lack of agreement that any single approach would reduce problematic alcohol consumption among young people, with disagreement regarding actual messages and how they should be presented. Different messages and media may be more effective among different age- and sex-groups, indicating a need for multi-faceted, multi-modal approaches that will resonate with young people.

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