

July 2015

Drinkaware Monitor 2014: Young people's and their parents' drinking behaviour and attitudes in the UK

An Ipsos MORI report for Drinkaware

© 2015 Ipsos MORI – all rights reserved

The contents of this report constitute the sole and exclusive property of Ipsos MORI. Ipsos MORI retains all right, title and interest, including without limitation copyright, in or to any Ipsos MORI trademarks, technologies, methodologies, products, analyses, software and know-how included or arising out of this report or used in connection with the preparation of this report. No licence under any copyright is hereby granted or implied.

The contents of this report are of a commercially sensitive and confidential nature and intended solely for the review and consideration of the person or entity to which it is addressed. No other use is permitted and the addressee undertakes not to disclose all or part of this report to any third party (including but not limited, where applicable, pursuant to the Freedom of Information Act 2000) without the prior written consent of the Company Secretary of Ipsos MORI.

Contents

- 1 Executive summary 4**
- 2 Introduction 12**
- 3 Consumption patterns 20**
- 4 Motivations for drinking 32**
- 5 Drunkenness 39**
- 6 Harmful drinking 46**
- 7 Risk awareness, moderation and information sources 53**
- 8 Appendix 61**

Executive summary

1 Executive summary

Drinkaware works to reduce alcohol misuse and harm in the UK. In order to determine where and how best to focus its work for maximum effect, Drinkaware draws upon a wide base of research and evidence; which this report contributes to.

Ipsos MORI was commissioned by Drinkaware to undertake a survey of young people aged 10-17 in the UK, to provide a picture of their drinking behaviour; looking at the prevalence of drinking among young people, their motivations for drinking, drunkenness, harmful drinking behaviour and their awareness of the risks associated with excessive drinking, and how they seek information about alcohol and drinking. The research was conducted alongside a survey of adults aged 18-75, and parents with at least one child aged 10-17. Many of the parents surveyed had children who completed the young people's survey. It is therefore possible to draw links between young people's drinking behaviours and attitudes and the behaviours and attitudes of their parents.

1.1 Summary of approach

A nationally representative sample of 754 young people aged 10-17 living in the UK were surveyed online between 17th November and 10th December 2014.

Ipsos MORI has conducted similar research for Drinkaware on an annual basis since 2009. The face-to-face methodology used in 2009-11 was changed to an online methodology for 2012-14. Prior to 2012, the research focused on young people aged 11-17 only; this was expanded to include 10 year olds from 2012 onwards. A number of questionnaire changes have been made over time. This year some standardised research tools were included in the survey, including the CRAFFT harm identification tool, the Alcohol Use Disorder Identification Test (AUDIT) and Drinking Motive Questionnaire (DMQ-R SF) among others.

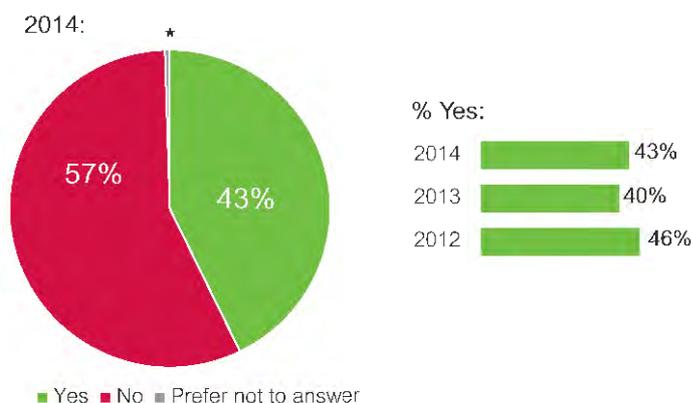
1.2 Key findings

Consumption patterns

Two in five UK 10-17 year-olds have had a whole alcoholic drink (43%). This remains in line with findings from Ipsos MORI's research in 2013 and 2012, and also with wider research – for example HSCIC's Smoking, Drinking and Drugs report shows that 39% of 11-15 year-olds have had an alcoholic drink (with 37% of 11-15 year-olds surveyed as part of the Drinkaware Monitor having had an alcoholic drink).

Figure 1.1 – Prevalence of drinking:

QC4. Have you ever had an alcoholic drink, not just a sip?



Base: All young people aged 10-17 (75+ each year)

Source: Ipsos MORI

As may be expected, age is a major factor in whether young people have had a drink; almost seven in ten (68%) 16-17 year-olds have had a drink, compared to 25% of 10-13 year-olds.

Drinking remains a relatively uncommon event for most young people. Among those who have had a drink, 45% drink no more than once or twice a year. However, one in five (19%) say they drink once a week or more often.

Among those who have had an alcoholic drink, the mean age at which young people report having done so for the first time is 13.23, with two in five (38%) having had their first drink aged 13 or younger. This represents a slightly earlier introduction to drinking when compared to figures from 2013, though remains in line with 2012 findings. Among those who have had an alcoholic drink unsupervised by adults, the mean age at which they first did so is 13.75.

Three in five young people (60%) say they were with at least one relative when they had their first alcoholic drink, while half (52%) were with at least one parent.

Motivations for drinking

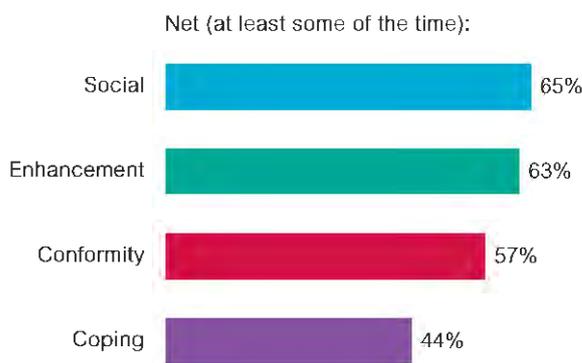
One in three young people (32%) say they have felt encouraged by others to drink alcohol. The majority of this encouragement came from friends; two in five (18%) said they were encouraged by a friend their own age or younger, while one in eight (12%) had encouragement from an older friend. Seven per cent say they were encouraged by a parent or another relative.

The main motivations behind young people's drinking are social, with two thirds (65%) drinking to improve parties and social occasions at least some

of the time. A similar proportion (63%) drink for one or more enhancement reasons – i.e. for 'fun', or enjoyment of the feeling it gives them - at least some of the time. However, there are significant proportions who drink to conform (e.g. to be liked) (57%) or to cope with negative feelings (e.g. to improve a bad mood) (44%) at least some of the time. Meanwhile just over one in four (27%) of young people who have had an alcoholic drink agree with the statement; 'drinking gives me the confidence I need to meet people and make new friends'.

Figure 1.2 – Overall motivations for drinking:

QC28. How often would you say you drink for the following reasons?



Base: All young people aged 10-17 who have had an alcoholic drink (323)

Source: Ipsos MORI

Drinking for coping reasons is linked to potentially harmful drinking patterns on a number of measures. For example, two in five (40%) of those who drink for coping reasons say they drink once a week or more often, compared to 18% of young people overall. Linked to this, one in four (25%) young people with poorer mental wellbeing¹ drink at least once a week, compared to one in ten (10%) of those with better mental wellbeing². Additionally, those who drink to cope are more likely to have been drunk; 68% of this group have done so, compared to 39% of all young people who have had an alcoholic drink. There is also a strong link between drinking to feel more confident when meeting new people, and getting drunk; 55% of those who have been drunk agree with the statement 'drinking gives me the confidence I need to meet people and make new friends', compared to seven per cent of those who have never been drunk.

Drunkenness

Among those who have had an alcoholic drink, two in five young people (39%) say they have experienced being drunk at least once. As with

¹ As defined by a score of 27 or lower on the WEMWBS tool – see full report for more detail.
² As defined by a score of 28 or higher on the WEMWBS tool – see full report for more detail.

drinking in general, older participants are more likely to have been drunk before. Among those who have been drunk, one in three (33%) did so for the first time aged 15 or 16; the average age of being drunk for the first time is 13.86.

Four in five (80%) say they drink with the intention of getting drunk at least some of the time when they drink.

Harmful drinking

Exposure to harm was measured using the CRAFFT score, a tool developed to screen young people for significant problems associated with alcohol or other substances. A score of 2 or more indicates potentially harmful behaviour. Almost one in twelve (eight per cent) of all respondents score above this threshold, with 92% not exposed to significant harm. Among those who have had an alcoholic drink, around one in six (18%) scored 2 or higher.

When asked about specific harms experienced as a result of drinking alcohol, one in four (25%) of those young people who have had an alcoholic drink say they have experienced one or more harmful consequences in the last 12 months. One in eight (12%) have experienced three or more consequences in the last 12 months.

From the list of consequences of drinking presented in the questionnaire, vomiting is the most commonly experienced; one in five (19%) of those who have drunk alcohol say this has happened to them in the last 12 months. One in nine young people have done something which put them in a risky situation, or missed a day of school or college (11% have experienced each of these consequences). One in ten have lost a valued possession, been made to look bad on social media, or had a fight (10% have experienced each of these consequences) in the last 12 months due to drinking.

Among respondents aged 13 and over who have had an alcoholic drink, one in ten (10%) say they have engaged in sexual activity as a result of drinking alcohol. Seven per cent have been in trouble with the police or have been a victim of crime, and the same proportion have been taken to hospital. Overall, 12% have experienced a serious harm in the last 12 months as a result of drinking (been in trouble with the police, being a victim of crime, been taken to hospital or been in a fight).

Risk awareness and moderation

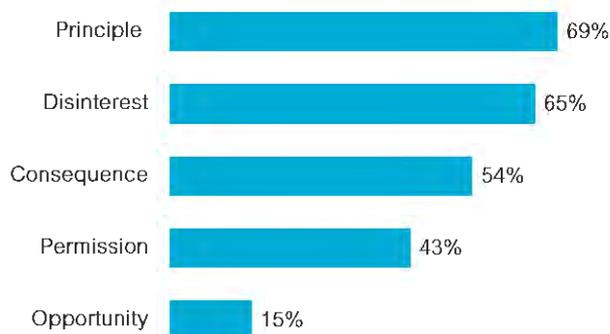
When asked to name possible negative consequences of drinking alcohol, young people tend to focus on more immediate risks such getting into trouble with the police (mentioned by 67%), having an accident or getting

injured (61%) or being involved in violence (57%); longer-term health impacts are less frequently identified.

Among non-drinkers, the main reasons for refraining from drinking pertain to matters of 'principle' and 'disinterest'; two thirds (64%) feel they are too young to drink, while 55% say they are simply not interested in drinking alcohol.

Figure 1.3 – Overall reasons for refraining from drinking:

QC21. You said you have never had an alcoholic drink, why is that?



Base: All young people aged 16-17 who have never had an alcoholic drink (429)

Source: Ipsos MORI

Seeking information about alcohol

Young people are most likely to turn to their parents for information and advice about alcohol. Three in four (73%) say their parents have spoken to them about alcohol, while three in five (58%) have asked their parents questions about alcohol. Around half (52%) have talked to their friends about alcohol, 16% have spoken to a teacher about it and 13% have sought information from the internet, a magazine or a book.

Young people who have had an alcoholic drink, those who have had an alcoholic drink unsupervised by adults, and those who have been drunk are more likely to seek information and advice. Furthermore, those who drink harmfully and, linked to this, those with poorer mental wellbeing are more likely to report having sought information and advice.

Alcohol, young people and parental attitudes

Clear links can be seen between behaviours such as drinking, drunkenness and harmful drinking in young people and factors such as parental attitudes, parental behaviours and parental supervision.

Parental attitudes

Parental attitudes have a major influence on underage drinking. In particular, the age at which young people have their first alcoholic drink closely reflects the age parents feel is acceptable for a young person to have their first alcoholic drink. Over half of young people (56%) whose parents think 15 or younger is an acceptable age for a first alcoholic drink, have had a drink; this compares to 32% of young people whose parents think they should not try alcohol until the age of 16 or 17. In addition to this, young people whose parents think it is acceptable to have a first alcoholic drink at a younger age are more likely to have felt encouraged to drink by their parents; 10% of those whose parents think it is acceptable to have an alcoholic drink aged 15 or younger say they have felt encouraged to drink by their mum or dad, compared to two per cent whose parents think young people should not drink alcohol until the age of 16 or 17.

Parental behaviours

Parental drinking was measured in two ways: weekly unit consumption, giving categories of lower-risk, increasing risk and higher risk; and AUDIT, giving categories of Low risk (Zone 1), Hazardous (Zone 2), Harmful (Zone 3) and Dependent (Zone 4). The survey reveals a number of links between young people's drinking and their parents' drinking risk levels. For example, while one in three (34%) children of low-risk parents have had an alcoholic drink, this rises to almost half (48%) among children of increasing/high risk drinkers. Similarly, just over a third (35%) of children of AUDIT zone 1 drinkers have had a drink, rising to 50% of children whose parents' drinking habits put them in AUDIT zones 2, 3 or 4.

In addition to this, parents who drink above guidelines or who score highly on AUDIT are more likely to think it is acceptable for young people to drink alcohol for the first time aged 13 or younger; 15% of those in AUDIT zones 2-4 think this, compared to nine per cent of those in zone 1. This in turn means that their children are more likely to have their first alcoholic drink at a younger age.

Parental supervision

Who young people were with, and in particular whether or not they were with parents and/or relatives for their first alcoholic drink, has an important influence upon their drinking behaviour and attitudes.

While almost two thirds (62%) of young people who had their first drink without a relative present have experienced being drunk, just one in four (25%) of those who had their first drink in the presence of a relative have been drunk.

Young people who have had an alcoholic drink without an adult present are much more likely to have experienced one or more harmful consequences as a result of drinking; 39% have done so in the past 12 months, compared to eight per cent of those who have not had an alcoholic drink unsupervised by an adult. Those who have had a drink unsupervised are also more likely to agree with the statement 'drinking gives me the confidence I need to meet people and make new friends'; 44% do so compared to 11% of those who have not had an unsupervised drink.

To follow is a detailed analysis of the findings from the Young people's survey; please refer to Ipsos MORI & Drinkaware's separate report, *Drinkaware Monitor 2014: Adults' drinking behaviour and attitudes in the UK* for detailed analysis of the findings from the survey of UK adults.

Introduction

2 Introduction

2.1 Background to this report

Drinking alcohol at a young age can lead to serious long-term consequences, including impaired brain development and function, liver disease and cancer, as well as putting young people at more immediate risk of harms such as becoming injured, taking risks with personal safety, having unprotected sex or becoming involved in crime or antisocial behaviour³.

Historically, a number of studies have shown young people in England to be more likely to drink alcohol than their counterparts in many other European countries. Although the most recent international comparisons suggest some improvement in the prevalence of alcohol consumption among young people in the UK, this remains above the European average. Additionally, the UK exhibits some of the highest levels of alcohol consumption for those who do drink, and British children are more likely to have been drunk or participated in 'binge drinking' compared to children in other European countries⁴.

As a charity working to reduce alcohol misuse and harm in the UK, it is important for Drinkaware to draw on research and evidence to understand the contexts, attitudes and motivations behind harmful drinking behaviours among young people, as well as the prevalence of these behaviours within the UK population, in order to determine where and how best to focus its work for maximum impact.

This report sets out findings from research undertaken in November-December 2014 into drinking behaviour and attitudes towards alcohol among young people aged 10-17 in the UK. Where relevant, findings are reported within the context of the attitudes and behaviours of parents of 10-17 year-olds, also surveyed as part of this study. Ipsos MORI has conducted similar research for Drinkaware on an annual basis since 2009; thus, where appropriate, 2014 findings are situated within the context of those from previous waves of Ipsos MORI's research.

³ Drinkaware (2013). The facts about alcohol and young people.
https://www.drinkaware.co.uk/media/246532/alcohol%20and%20young%20people_new.pdf
⁴ HSCIC (2013). Smoking, drinking and drug use among young people in England 2012.
<http://www.hscic.gov.uk/pubs/sdd12fullreport>

2.2 Aims and objectives

The main aims of this research were:

- To provide an overview of the prevalence and patterns of drinking among 10-17 year-olds in the UK;
- To take a close look at attitudes towards alcohol, motivations for drinking, experiences of drunkenness and harmful drinking behaviour among UK 10-17 year-olds;
- To identify which demographic groups display particular drinking behaviour patterns, and which groups may be most at risk of harm as a result of their drinking behaviour and attitudes, and
- To situate findings within the context of parental behaviours and attitudes, and examine the influence parents have upon the behaviours and attitudes of their children with regards to drinking alcohol.

2.3 Methodology

Between 17th November and 10th December 2014, Ipsos MORI surveyed a representative sample of UK residents, including:

- 2,294 adults aged 18-75
- 813 parents; for this study, 'parents' were defined as adults aged 25-80 who were a parent or guardian of at least one young person aged between 10 and 17
- 754 young people aged between 10 and 17.

Individuals who completed the adults' survey and also identified themselves as parents of at least one young person aged 10-17 were asked four additional questions relating to young people and alcohol consumption, and the drinking habits of a specified 10-17 year-old within their household.

Following the four parents' questions, parents were then asked to give consent for a specified 10-17 year-old to complete the young people's survey, should they wish to do so. The majority (70%) of young people were recruited through a parent who had already completed the adults' survey and parents' questions; this has allowed comparisons to be made between parental attitudes and behaviours and those of their own children. Additional 10-17 year-olds were invited to complete the young people's survey, with parental consent though without parental participation.

Since the first survey was conducted in 2009, there have been a number of changes to the methodology and questionnaires used, as well as to the specific audiences surveyed. The main changes in data collection methods are:

- The move from a face-to-face methodology in 2009-11 to an online methodology in 2012-14.
- The move from GB coverage for the face-to-face research (in 2009-2011) to UK coverage for the online research from 2012 onwards.
- The change from interviewing young people aged 11-17 for the face-to-face research (2009-2011) to interviewing those aged 10-17 for the online research from 2012 onwards.

For these reasons, only comparisons between 2014, 2013 and 2012 are presented in this report.

Several changes were made to the question wording and ordering of the 2014 survey – a number of questions were removed from the young people's section whilst standardised question sets were added to include the CRAFFT test and Drinking Motive Questionnaire (DMQ-R SF) among others.

2.3.1 Standardised tools and question sets

Throughout this report, a number of terms are used to refer to specific groups or types of participants; each of these groupings is determined by individuals' responses to multiple questions or sets of questions within the survey. In order to group participants in terms of drinking behaviours, motivations, mental wellbeing and harms experienced as a result of drinking, the following standardised tools and/or definitions were included in the surveys and analysis⁵:

Harm-identifying tools

To measure harm among parents and children we used two separate tools, both validated and widely used in clinical practice. For children, we used the CRAFFT screening tool; for adults we used AUDIT.

⁵ Refer to the appendix of this report for detailed descriptions of each of the standardised tools/question sets and terms used.

The CRAFFT screening tool

The CRAFFT test is a short behavioural health screening tool developed to screen adolescents for high risk alcohol and other drug use disorders⁶. This tool was developed by the Center for Adolescent Substance Abuse Research, Children's Hospital Boston, USA. Participants are allocated a score between zero and six, based on their responses to six questions about alcohol and drug use. This score is used to identify whether or not the young person is likely to currently have, or be at risk of, alcohol or other substance misuse problems. Individuals with a score of 2 or more are considered to be at risk or potentially at risk of significant problems, while those scoring 1 or 0 are not considered to be at risk. The CRAFFT questions were included in the young people's survey to allow analysis of any differences in response between at-risk/potentially at-risk groups and those not at-risk.

Alcohol Use Disorder Identification Test (AUDIT)

The AUDIT tool, developed by the World Health Organisation, is used to measure an individual's level of risk and/or harm in relation to their alcohol consumption patterns⁷. The test consists of ten questions, each of which carries a score of 0-4, depending on the answer given. This gives an individual an overall AUDIT score between zero and 40, used to allocate them to one of four groups as follows;

	Overall score
Zone 1 (low risk)	0-7
Zone 2 (hazardous)	8-15
Zone 3 (harmful)	16-19
Zone 4 (dependency)	20-40

The AUDIT questions were included in the 2014 adults'/parents' survey to allow for analysis of the influence of parental drinking patterns upon the behaviours and attitudes of their children.

⁶ Knight, J.R. et al. (1999). A new brief screen for adolescent substance abuse. *Archives of Paediatric and Adolescent Medicine*, 153:6, 591-6.

⁷ Babor, T. F. et al. (2001). AUDIT; The Alcohol Use Disorders Identification Test: Guidelines for Use in Primary Care. Second Edition. *World Health Organisation: Department of Mental Health and Substance Dependence*.

The Drinking Motive Questionnaire: Revised Short Form (DMQ-R SF)

The original Drinking Motive Questionnaire (DMQ) consists of 15 reasons why people might drink alcoholic beverages, and asks participants to rate on a four-point scale how frequently they drink for each reason⁸. A revised form of this (the DMQ-R) was later developed, to include 20 reasons and a five-point response scale. The revised short form (DMQ-R SF), developed by Kuntsche and Kuntsche⁹, uses 12 motivations for drinking and a five-point response scale. An individual's responses are used to determine the extent to which they drink for social reasons (e.g. to improve parties and celebrations), enhancement (e.g. because they like the feeling), conformity (e.g. to be liked) or coping (e.g. to improve a bad mood). This measure was included in the adults'/parents' and young people's surveys in 2014, allowing for analysis of young people's responses in the context of their own and their parents' motivations for drinking.

The Warwick-Edinburgh Mental Wellbeing Scale (WEMWBS)

The WEMWBS, developed by Warwick and Edinburgh Universities, uses a set of 14 positively worded statements about specific thoughts and feelings, with five response categories to determine how often over the last two weeks an individual has experienced them; this is used to assess an individual's or a population's mental wellbeing¹⁰. A shortened version of the WEMWBS, with 7 items, was used in the 2014 surveys, to allow for analysis of any differences in response patterns according to mental wellbeing. Each of the 7 items carried a score between 1 and 7, giving individual participants an overall score between 7 and 35 with a lower score denoting poorer mental wellbeing.

Risk

Throughout the report, sub-group analysis is carried out according to parents' drinking-related 'risk' levels, with reference to three distinct groups; low risk drinkers, increasing risk drinkers and high risk drinkers. Participants in the adults'/parents' survey are thus defined based on their weekly alcohol unit intake. This information was derived from their responses to two particular questions. They were first asked which types of drinks (e.g. lager, wine, spirits with a mixer) they typically drank, then asked to specify in what quantities (e.g. a bottle, pint or half-pint of lager) and how many of each they drank in a typical week. This was used to calculate their approximate

⁸ Cooper, M. L. et al. (1992). Development and validation of a three-dimensional measure of drinking motives. *Psychological Assessment*, 4:2, 123-132.

⁹ Kuntsche, E. and Kuntsche, S. (2009). Development and Validation of the Drinking Motive Questionnaire Revised Short Form (DMQ-R SF). *Journal of Clinical Child and Adolescent Psychology*, 38:6, 899-908.

¹⁰ Stewart-Brown, S. and Janmohamed, K. (2008). Warwick-Edinburgh Mental Well-Being Scale (WEMWBS) User Guide Version 1. *Warwick Medical School, University of Warwick*.

weekly unit intake, from which the three risk categories were derived. Parents are classified as low risk if they do not exceed 14 units (for women) or 21 units (for men) in a typical week, increasing risk if they exceed these amounts, or high risk if they typically drink more than 35 units (women) a week or 50 units (men).¹¹

2.4 Interpreting the data

The data discussed in this report is weighted by gender, age, social grade and region, so that it is representative of the UK population.

Where differences in the responses of particular sub-groups are discussed in this report, only those differences that are statistically significant are reported (unless otherwise explicitly stated). These differences are statistically significant to a confidence level of 95%, and therefore have a p-value of less than 0.05. Base sizes of less than 100 should be treated with caution and these results seen as indicative only. Where percentages do not sum to 100, this is due to computer rounding and/or participants being able to select multiple responses. Where there are discrepancies between the sum of several figures displayed in a chart and the figure for this sum discussed in the text, this is also due to rounding.

2.4.1 Data trends

Many of the metrics for the young people's survey remain consistent with results from 2013 and 2012. There does appear to be some movement in metrics concerning drunkenness over the past year, as discussed in this report. However, any differences in the 2014 results should be viewed with caution and considered indicative rather than as evidence of a wider trend in young people's behaviour and attitudes until a longer, more sustained trend is apparent. There are a number of reasons for this:

- The majority of the changes observed cannot yet be considered directional; in many cases shifts are between 2013 and 2014, rather than continuing an indicative trend from 2012.
- A number of changes were made to question wording and order, with new questions being added in the 2014 survey that will have impacted respondents' answers.
- The 2014 sample includes 323 young people who have had an alcoholic drink and 126 young people who have ever been drunk.

¹¹ It should be noted that Public Health England advises that the measure of weekly units is not a good indicator of risk levels, and that the advice is to follow the daily guidance and not regularly exceed these limits. However, these risk categories have been used to allow for comparisons with data from previous years.

These relatively small sample sizes mean survey results are subject to sampling tolerances of up to +/- 5.5% (for the former) and +/- 8.8% (for the latter) at the 95% confidence interval¹².

- In 2014 significantly smaller proportions of respondents were in the company of a parent and/or relative when they had their first alcoholic drink; this can be seen as having an impact upon young people's drinking behaviours and attitudes, and thus is a likely contributing factor to differences in the 2014 results compared with 2013 and 2012. It is unknown whether this difference in 2014 is the result of volatility in the data or whether it reflects a real change in young people's drinking behaviours.
- As would be expected, results for individual questions are subject to some fluctuations year-on-year. This volatility in the data can be attributed to a combination of the effect of relatively small sample sizes, natural variation between samples year-on-year, and poor recall of specific events such as the age of drinking alcohol for the first time.

2.5 Structure of this report

This report sets out Ipsos MORI's analysis of responses to the survey of young people aged 10-17 in the UK. Chapter 2 explores alcohol consumption patterns; Chapter 3 looks at motivations for drinking alcohol and Chapter 4 examines behaviour in terms of getting or being drunk. Chapter 5 explores harmful drinking behaviour, while Chapter 6 examines risk awareness, reasons for refraining from drinking alcohol and actions taken to seek information or advice about alcohol and drinking.

2.6 Acknowledgements

Significant changes were made to the Drinkaware Monitor questionnaire in 2014 to improve its value as a tool to meaningfully assess drinking attitudes and behaviours. These improvements were guided by Drinkaware's independent Medical Advisory Panel and Professor W. Miles Cox of Bangor University. Professor Cox also offered specific advice on the approach to data analysis and interpretation.

In the analysis phase further guidance was given on interpretation and data robustness from Dr Anthony Moss, London South Bank University and Liz Fuller, NatCen Social Research.

¹²Note, the confidence intervals mentioned here (and later references to statistical reliability) assume a random probability sample which cannot strictly be applied to a quota survey such as this.

Consumption patterns

3 Consumption patterns

43%



of 10-17 year-olds have had a whole alcoholic drink

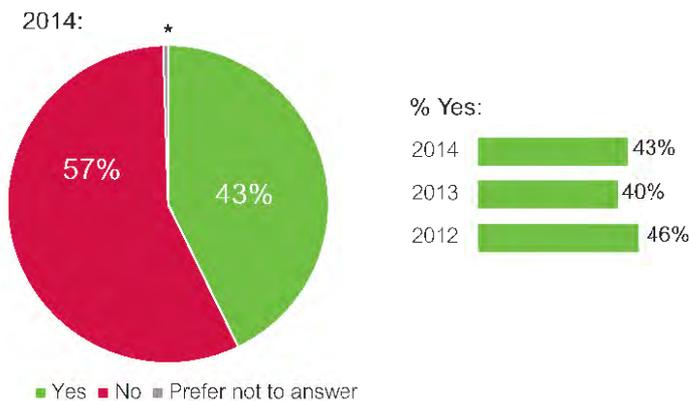
This chapter provides an overview of the alcohol consumption patterns of young people aged 10-17 in the UK; the prevalence and frequency of drinking among this group, and the circumstances in which those who have had an alcoholic drink did so for the first time. It also examines parents' attitudes regarding the age at which it is acceptable for a child to drink alcohol for the first time.

3.1 Prevalence of drinking

Two in five young people aged 10-17 (43%) have had an alcoholic drink. Older participants and those whose parents are frequent or heavy drinkers are significantly more likely to say they have done so.

Figure 3.1 – Prevalence of drinking:

QC4. Have you ever had an alcoholic drink, not just a sip?



Base: All young people aged 10-17 (754 each year)

Source: Ipsos MORI

Just over two in five 10-17 year-olds (43%) say they have had a whole alcoholic drink, not just a sip. This figure remains in line with findings from 2013 and 2012, when 40% and 46% respectively said that they had drunk alcohol. This also reflects findings from wider research; HSCIC reports that in 2013, 39% of school pupils aged 11-15 had drunk alcohol at least once – a figure which continues a downward trend observed since 2003, when 61% of people in this age group had drunk alcohol¹³. Among our 2014 sample, 37% of participants aged 11-15 say they have had an alcoholic drink.

The proportions of boys and girls who have drunk alcohol are very similar, but unsurprisingly the likelihood of having consumed alcohol increases with

¹³ HSCIC (2015). Statistics on Alcohol: England 2015

age. Almost seven in ten participants (68%) aged 16-17 say they have had an alcoholic drink, compared to 53% of those aged 14-15 and 25% aged between 10 and 13. Our findings here again reflect patterns seen in HSCIC's findings. The table below shows a detailed breakdown by age of the proportions of 10-17 year-olds who, in Drinkaware's survey, reported having had an alcoholic drink:

Table 3.1 – QC4. Have you ever had an alcoholic drink, not just a sip? Breakdown of results by age:

Age:	10	11	12	13	14	15	16	17
% yes	18%	25%	28%	28%	48%	58%	63%	74%

Base: All participants aged 10-17 (754: c.95 per age group).

A number of external factors appear to have influenced whether or not a young person has had a whole alcoholic drink. Unsurprisingly, those who say they have felt encouraged to drink alcohol are more likely to have done so; three quarters (74%) of this group have, compared to just over a quarter (27%) of those who have not felt encouraged to drink¹⁴.

Patterns also emerge according to parental attitudes and behaviours. For example, young people are more likely to say they have had an alcoholic drink if their parents believe it is acceptable for a person to drink at a younger age. Among participants whose parents think it is acceptable to have an alcoholic drink at the age of 13 or younger, three quarters (75%) have had a drink; this compares to just under half (46%) whose parents cite 14 or 15, and 32% whose parents cite 16 or 17 as the youngest acceptable age to drink alcohol. Just one in five (20%) participants whose parents think a young person should not drink alcohol until they are 18 or older have had a whole alcoholic drink.

More frequent drinking and risky drinking behaviours among parents also appear to have an impact on whether their children have had an alcoholic drink or not. Among young people whose parents' weekly unit consumption falls into the low risk category, one in three (34%) say they have had an alcoholic drink. This rises to 42% among children of increasing risk drinkers, and almost two thirds (62%) of children of high risk drinkers¹⁵. Related to

¹⁴ This question (QC3) asked: "Have you ever felt encouraged to drink alcohol?" Response options were: Yes, by an older friend; Yes, by a friend my age or younger; Yes, by my mum or dad; Yes, by another relative / family member; No; Don't know; Prefer not to answer. Participants were able to select multiple 'Yes' response options.

¹⁵ See chapter 1 for a brief definition of low/increasing/high risk/above guidelines, or refer to the appendix for a detailed definition.

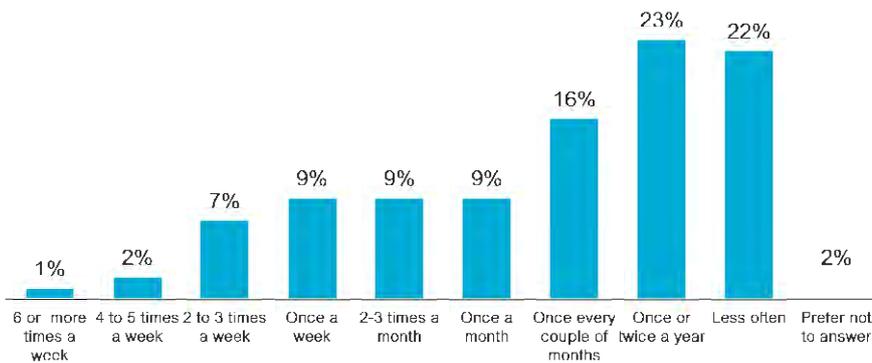
this, if a parent exhibits a higher AUDIT score¹⁶, their child is more likely to have had an alcoholic drink. One in three (35%) young people whose parents are in AUDIT zone 1 (low risk) say they have done so, compared to 45% with parents in AUDIT zone 2 (hazardous) and 61% whose parents fall into zones 3 or 4 (harmful or dependency).

3.2 Frequency of drinking

Among 10-17 year-olds who have had an alcoholic drink, three quarters (76%) say they drink at least once a year. While the majority drink infrequently, one in five (19%) say they drink once a week or more often.

Figure 3.2 – Frequency of drinking:

QC12. How often do you have a drink containing alcohol?



Base: All young people aged 10-17 who have had an alcoholic drink (323)

Source: Ipsos MORI

Three quarters (76%) of 10-17 year-olds who have had an alcoholic drink say they drink alcohol once or twice a year or more often. The majority of those who have had an alcoholic drink report drinking infrequently, with 16% saying they drink once every couple of months, 23% drinking just once or twice a year, and 22% drinking less often than this. However, one in five (19%) say they drink alcohol at least once a week. This figure represents an increase on 2013 and 2012 figures, when eight per cent and 11% respectively said that they drank once a week or more often. It should be noted, however, that a change in question wording for the 2014 survey means that results are not directly comparable and this finding should be interpreted with caution¹⁷.

¹⁶ See chapter 1 for a brief description of the AUDIT tool; refer to the appendix for a detailed explanation.

¹⁷ 2013/2012 question wording: "How often do you USUALLY have an alcoholic drink?" Response options: every day or almost every day; about once or twice a week; about once or



of those who have had an alcoholic drink say they drink once a week or more often

There is no statistically significant difference in response between boys and girls. As may be expected, frequency of drinking among 10-17 year-olds increases with age. Among participants aged 16 or 17 who have had an alcoholic drink, almost nine in ten (86%) say they drink at least once a year; this compares to 71% among 11-15 year-olds, and 55% among 10 year-olds who have had an alcoholic drink.

The circumstances of a young person's experiences of drinking alcohol, in particular for the first time, appear to have an important impact on the frequency with which they drink. For example, one in three (32%) young people who had their first alcoholic drink at the age of 13 or younger say they drink at least once a week. Only one in nine (11%) of those who were 14 or 15, and six per cent who were aged 16 or 17 when they had their first drink, say they drink once a week or more often. Who a young person was with when they had their first alcoholic drink also appears to have an effect on how often they drink alcohol. Three in ten (30%) who had their first drink in the presence of peers (i.e. with no relatives present) say that they drink at least once a week; conversely, of those who had their first drink in the presence of a relative, around one in eight (13%) say they drink once a week or more often.

Motivations for drinking alcohol also play a part in the frequency with which young people drink. Among those who say they have felt encouraged to drink alcohol, a third (32%) say that they drink at least once a week; this compares to three per cent among those who have not felt encouraged to drink.

Young people who use drinking as a mechanism for coping with negative feelings or anxiety¹⁸ and, related to this, those with poorer mental wellbeing, are more likely to report drinking more frequently. Two in five (40%) of those who say they drink for coping reasons (at least some of the time) drink at least once a week, compared to one in five (19%) of all those who have had an alcoholic drink. Meanwhile, a quarter (25%) of those who score lower (between 7 and 21) on the Warwick-Edinburgh Mental Wellbeing Scale (WEMWBS)¹⁹ drink at least once a week, while only one in ten (10%) of those who fall into the highest-scoring group (scoring 28-35) drink this often.

twice a month; less often than this; only on special occasions; I never drink alcohol now; don't know; prefer not to answer.

¹⁸ As identified by the DMQ-R SF question set; see chapter 1 for a brief description of this tool, or refer to the appendix for a detailed explanation.

¹⁹ See chapter 1 for a brief explanation of the Warwick-Edinburgh Mental Wellbeing Scale (WEMWBS). For detailed information, refer to the appendix.

30%



of young people who had their first alcoholic drink *without* a relative present drink at least once a week, compared to 13% of those who had their first drink with a relative present

3.3 Parents' attitudes – youngest acceptable age for a first alcoholic drink

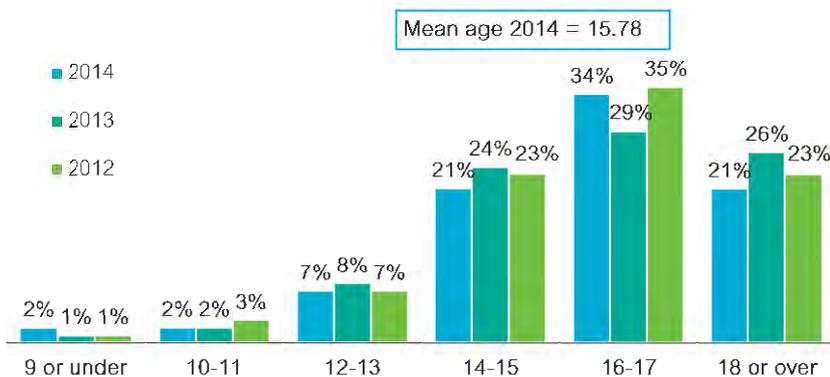
Three in four parents (76%) say that a young person should not drink alcohol until they are 14 or older; however, one in ten (10%) think that it is acceptable for a young person to have their first alcoholic drink at 13 or younger. The mean age at which parents think a young person is old enough to drink alcohol for the first time is 15.78.

76% 

of parents think that a young person should not drink alcohol until the age of 14 or older

Figure 3.3 – Youngest acceptable age for a young person's first alcoholic drink:

QP3. What age do you think is the youngest acceptable age for a young person to have their first drink of alcohol, not just a sip?



Base: All parents of at least one young person aged 10-17; 2014 (813); 2013 (1,003); 2012 (773)

Source: Ipsos MORI

As the chart above shows, the majority of parents (76%) think that a young person should be at least 14 years old when they have their first whole alcoholic drink. A third (34%) say 16 or 17, and one in five (21%) say 18 or older is the youngest acceptable age for a first drink. Just seven per cent say 12 or 13, and four per cent say 11 or younger is acceptable. This gives a mean 'acceptable' age of 15.78.

There is some difference in attitudes between parents and children. While one in ten parents (10%) think it is acceptable for a young person to have their first drink aged 13 or younger, one in four (25%) of 10-13 year-olds who completed the young people's survey report having had an alcoholic drink already. Furthermore, when asked whether they think it is ok, or not, for a person their age to try drinking alcohol to see what it's like, 37% of 10-13 year-olds feel that this is acceptable.

There are no statistically significant differences in response according to age or gender. Parents from black and minority ethnic backgrounds are more likely to cite an older age as being the youngest acceptable age for a young person to have their first alcoholic drink. For example, half (49%) say that a young person should be 18 or older when they do so, compared to

just 18% of white parents who say this. Meanwhile 22% of white parents say it is acceptable for a young person to have their first alcoholic drink aged 13 or younger, compared to seven per cent of BME parents who say this.

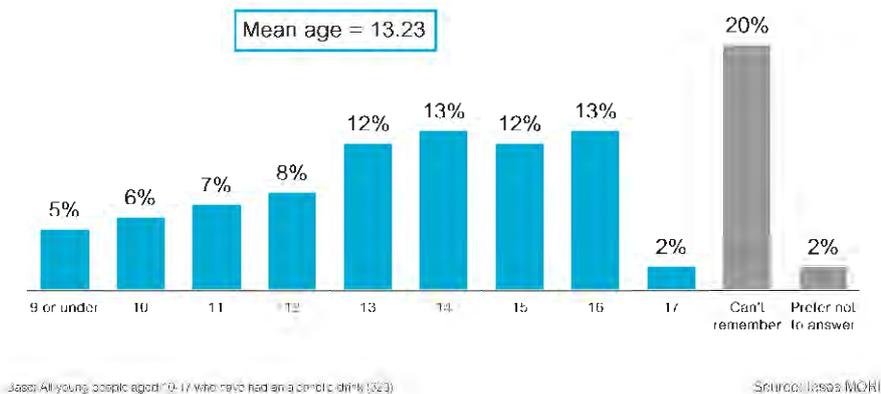
Parents of young people who have already had a whole alcoholic drink with a parent present are more likely to feel that it is acceptable to drink at a younger age. Among this group, 29% think it is acceptable for a young person to drink for the first time at age 13 or younger; this compares to just four per cent of parents whose children have not drunk alcohol with them. Parents who engage in more risky drinking behaviour themselves are more likely to express a lenient attitude towards young people's drinking. One in four (24%) of those in AUDIT zones 3 and 4 think that it is acceptable for a young person to drink at 13 or younger; just 11% of parents in zone 2 and nine per cent in zone 1 think this.

3.4 Age of first alcoholic drink

Among those who have had an alcoholic drink, the mean age at which young people report having done so for the first time is 13.23. Two in five (38%) say they were 13 or younger when they had their first alcoholic drink.

Figure 3.4 – Age of first alcoholic drink:

QC5. How old were you when you had your FIRST alcoholic drink?



Among 10-17 year-olds surveyed, two in five of those who had had an alcoholic drink (38%) say they were 13 or younger when they first did so. A similar proportion (40%) say they were 14 or over, and a significant proportion (20%) say they cannot remember how old they were when they first drank alcohol. This represents a shift compared with 2013 findings, when 33% of those who had had an alcoholic drink said they did so for the first time aged 13 or younger – although findings are more in line with those from 2012, when 38% said this. As a result, the mean age of first alcoholic

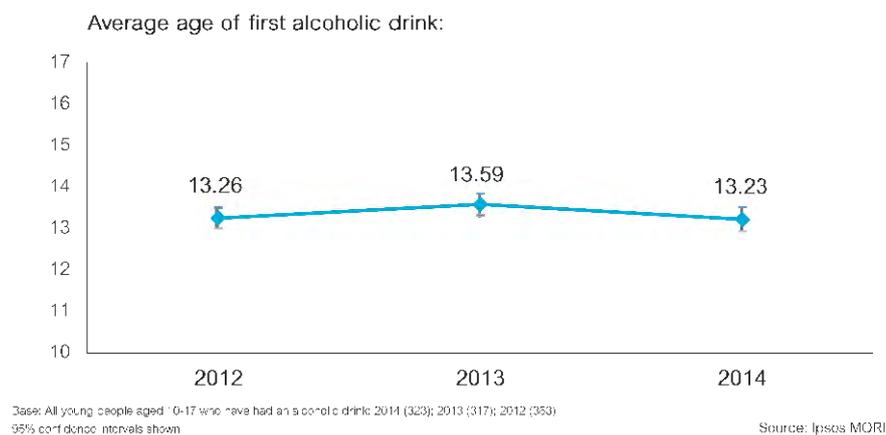


young people who have had an alcoholic drink say they had their first alcoholic drink at the age of 13 or younger

drink, among those who have had a drink, is 13.23 in 2014; this represents a decrease from 13.59 in 2013, but is in line with 2012 findings, when the average age of young people's first drink was 13.26.

Figure 3.5 – Average age of first alcoholic drink, 2012-14:

QC5. How old were you when you had your FIRST alcoholic drink?



There are no significant differences in response according to age or gender. There is a correlation between the age at which a young person had their first drink, and the context in which they drink, or have drunk, alcohol. Young people who say they have felt encouraged to drink – among whom the majority had encouragement from friends – are more likely to have had their first drink aged 13 or younger. Over two in five (45%) of this group say this, compared to 30% of those who have not felt encouraged to drink. Those who say they have been drunk are much more likely to have had their first drink by the time they were 13; 46% say this, compared to 34% who have not been drunk. Likewise, among those whose higher CRAFFT²⁰ scores (of 2 or higher) indicate potential drinking/substance use problems, a higher proportion say they had their first drink at 13 or younger; 64% say this, compared to 32% of participants with CRAFFT scores of 0 or 1 (i.e. no problems indicated).

Parental attitudes also appear to have an impact, though due to small base sizes these results should be interpreted with caution. Among those young people who have had a drink and whose parents think it is acceptable to have a first alcoholic drink at 13 or younger, 58% say they had their first drink at this age. This compares to 25% and 17% respectively among those whose parents think it is acceptable to drink alcohol for the first time at age 14 or 15, or 16 or 17. Likewise, among those whose parents consider 14 or

²⁰ For a brief explanation of the CRAFFT measure, see chapter 1 of this report. Refer to the appendix for detailed information.

15 the youngest acceptable age to drink alcohol, 54% say they did so for the first time at that same age; 26% had their first drink at 13 or younger.

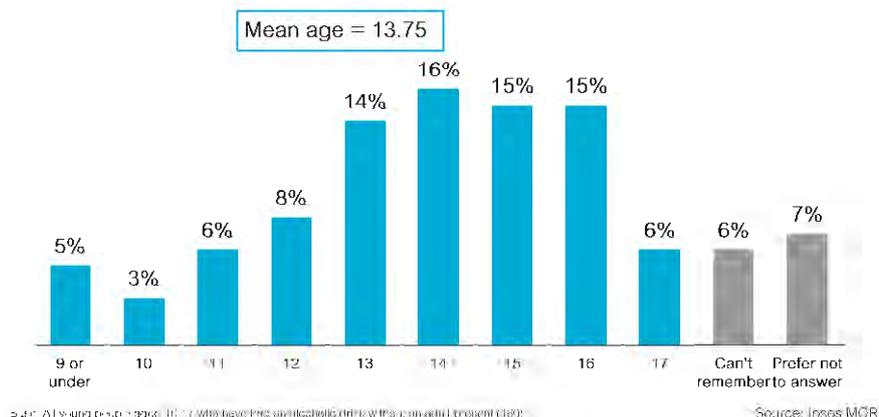
Parents' own drinking behaviour also appears to have an effect upon the age at which their children drink alcohol for the first time; among children of low risk drinkers, a quarter (26%) had their first drink at 16 or 17, compared to just 13% whose parents are considered increasing or high risk drinkers.

3.5 Age of first unsupervised drink

A young person's experience of drinking alcohol without an adult present tends to happen for the first time at a slightly older age than their first supervised drink. Among 10-17 year-olds who have had an alcoholic drink unsupervised by adults, two thirds (66%) did so at the age of 15 or under.

Figure 3.6 – Age of first unsupervised drink:

QC5/C9. How old were you when you had your FIRST alcoholic drink/at what age did you have your first alcoholic drink without an adult present?



Among the young people who have had an alcoholic drink without an adult present, two thirds (66%) say they first did so at the age of 15 or younger, while just over a third (36%) were 13 or younger. A further one in five (21%) say they were 16 or 17 when they had their first unsupervised drink.

The mean age of a young person's first unsupervised alcoholic drink is 13.75. This represents a decrease year on year, from 14.34 in 2013 and 14.65 in 2012. As described in chapter 1, these results should be considered indicative rather than evidence of a wider trend at present.

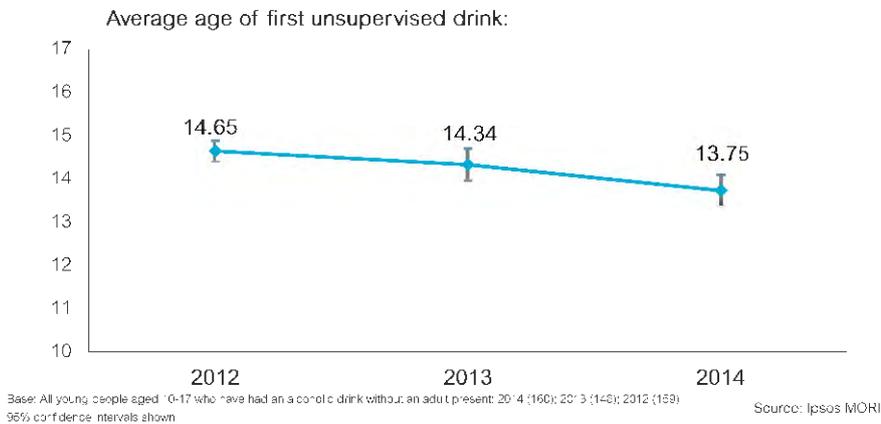
2 in 3



of those who have had an alcoholic drink without an adult present say they did so for the first time aged 15 or younger

Figure 3.7 – Average age of first unsupervised drink:

QC5/C9. At what age did you have your first alcoholic drink without an adult present?



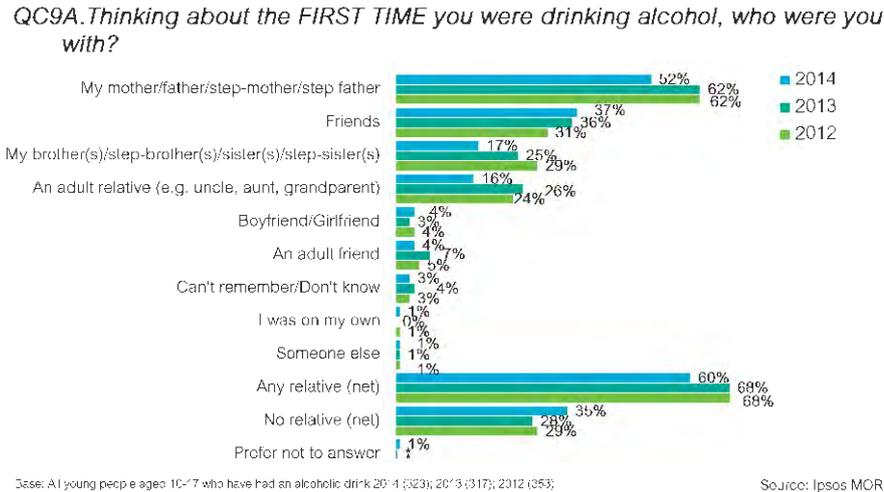
There are few demographic factors affecting the age at which a young person first drank alcohol unsupervised; however, boys are more likely to say they did so at a younger age. Almost half (47%) of boys say they first drank unsupervised at 13 or younger, compared to a quarter (25%) of girls.

Those who have felt encouraged to drink are more likely to have drunk alcohol unsupervised at a younger age: 44% have done so at 13 or younger, compared to 11% of those who have not felt encouraged to drink. Meanwhile, among those who say they have not felt encouraged to drink, two in five (38%) had their first unsupervised drink at 16 or 17, compared to 16% of those who have felt encouraged to drink.

3.6 First drink; who young people were with

Among 10-17 year-olds who have had a whole alcoholic drink, the majority (60%) say they were with at least one relative at the time. In particular, half (52%) were with a parent. Just over a third (37%) were with friends.

Figure 3.8 – First drink; who young people were with:



As the above chart shows, three in five young people (60%) who have drunk alcohol did so for the first time in the presence of at least one relative. Around half (52%) of those who have had a drink say they were with a parent when they did so for the first time, while 17% were with a sibling; 16% were with another adult relative such as an aunt, uncle or grandparent. Just over a third (35%) say there was no relative present when they first drank alcohol. Of these, 93% were with friends, eight per cent were with a boyfriend or girlfriend, four per cent with an adult friend and two per cent were with someone else. These findings reflect those reported by HSCIC, which identified that in 2012 53% of 11-15 year-olds drank alcohol with their parents, 57% did so with friends of both sexes, while 37% drank with friends of the same sex²¹.

The proportion of young people saying that they were with a parent when they had their first alcoholic drink is significantly lower than in previous years, at 52% compared with 62% in 2013 and 2012. At 17%, the proportion saying they were with a sibling is also lower compared with 2013 and 2012, when 25% and 29% selected this answer. Further waves of data should reveal if this change from 2012/13 to 2014 is evidence of an emerging trend in who young people have their first drink with. The proportion who say they were with friends remains in line with previous years.

²¹ HSCIC (2014). Statistics on Alcohol: England 2014.

Among those who have felt encouraged to drink alcohol, 51% say they were with their friends for their first drink, compared to 39% who were with a parent. Indeed, as discussed in section 9.2 below, the majority (78%) of those who have felt encouraged to drink had their first drink without a relative present; this implies that friends have a strong influence upon a young person's decision to drink.

Meanwhile, 59% of those who say they have ever been drunk were with their friends for their first alcoholic drink; just 28% who have ever been drunk had their first drink with parents. Young people with CRAFFT scores of 2 or more (which indicates that they are potentially at risk of problems relating to alcohol) are also more likely to say they were with friends for their first drink; 58% say this, compared to 33% of those with low CRAFFT scores (0 or 1). Meanwhile, 59% of participants with CRAFFT scores of 0 or 1 were with a parent for their first drink, compared to just 19% of those with scores indicating potential problems.

Motivations for drinking

4 Motivations for drinking

This chapter explores young people's reasons and motivations for drinking alcohol.

4.1 Encouragement from friends and family

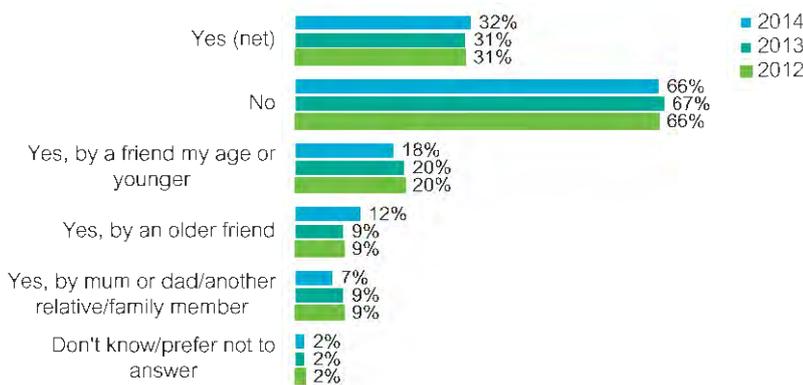
In line with findings from previous surveys, one in three 10-17 year-olds (32%) say they have ever felt encouraged to drink alcohol. One in five (18%) say they were encouraged by a friend their own age or younger; one in ten (12%) had encouragement from an older friend. Just seven per cent have felt encouraged to drink by a parent or another family member.

Figure 4.1 – Encouragement to drink alcohol:



young people have felt encouraged to drink alcohol

QC3. Have you ever felt encouraged to drink alcohol?



Base: All young people aged 10-17 (2014: 1,564; 2013: 1,530; 2012: 1,551)

Source: Ipsos MORI

The majority (66%) of all 10-17 year-olds surveyed say that they have never felt encouraged to drink alcohol. However, 32% have, most commonly by friends. Just under one in five (18%) have felt encouraged to drink by a friend their own age or younger, while around one in eight (12%) were encouraged by an older friend. Just seven per cent say they have been encouraged to drink by a parent or another adult relative. These figures reflect the findings from 2013 and 2012, with no statistically significant changes observed.

There are no significant differences in response according to gender. Older participants are more likely to say they have felt encouraged to drink; two in five (41%) aged 16 or 17 say they have, compared to 31% of 11-15 year-olds and just 15% of 10 year-olds.

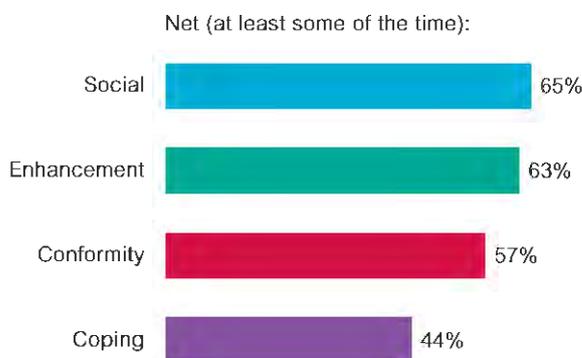
Young people whose parents feel it is acceptable for a young person to drink at a younger age are more likely to say they have felt encouraged to drink; 41% whose parents think 15 or younger is an acceptable age for a first drink say this, compared to 26% whose parents think young people should not drink until they are 16 or older. Some of this encouragement comes from parents themselves; 15% of those with parents who think 13 or younger is an acceptable age for a first drink say they have felt encouraged to drink by their mum or dad, compared to eight per cent whose parents say 14 or 15, and just two per cent whose parents say 16 or older is the youngest acceptable age to drink alcohol.

4.2 Motivations for drinking

The key motivations behind drinking among 10-17 year-olds are social; two thirds (65%) say they drink to improve parties or social gatherings at least some of the time. A similar proportion (63%) drink for enhancement reasons - because it is fun, because they like the feeling or want to get a 'buzz'. However, almost three in five (57%) drink for conformity reasons and around two in five (44%) drink to cope with negative feelings at least some of the time.

Figure 4.2 – Overall motivations for drinking:

QC28. How often would you say you drink for the following reasons?



Base: All young people aged 10-17 who have had an alcohol drink (323)

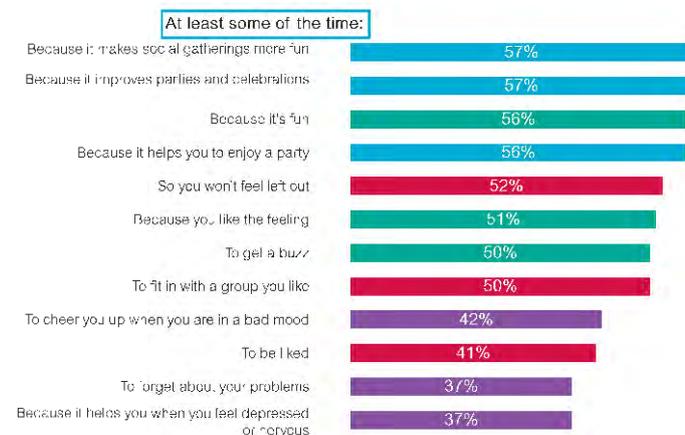
Source: Ipsos MORI

The primary drivers behind 10-17 year-olds' drinking are social; two thirds (65%) of those who have had a drink say that they have done so for at least one social reason. Young people are also highly likely to drink for enhancement purposes, with just under two thirds (63%) saying that they drink 'because it's fun', 'to get a buzz' or 'because they like the feeling'. This is consistent with wider research on drinking motivations, with social reasons consistently coming out as the strongest motivator behind young people's consumption of alcohol, closely followed by enhancement

reasons²². Just under two in five (57%) say they drink at least some of the time for conformity reasons - to be liked, to fit in with a group or to avoid feeling 'left out'. Meanwhile, more than two in five (44%) have felt motivated to drink alcohol for coping purposes – to help them cheer up, feel less anxious or depressed, or forget about their problems. This is a somewhat concerning finding given that wider research, as well as a number of findings discussed elsewhere in this report, links drinking to cope with stress and anxiety with heavier alcohol consumption and potential alcohol-related problems such as academic failure and engagement in risky sexual activity²³.

Figure 4.3 – Specific motivations for drinking:

QC28. How often would you say you drink for the following reasons?



Base: All young people aged 10-17 who have had an alcoholic drink (323)

Source: Ipsos MORI

Looking at this in more detail, the main specific reason given for drinking among 10-17 year-olds is that 'it makes social gatherings more fun'; 57% say they drink for this reason at least some of the time. The same proportion (57%) say that they drink 'because it improves parties or celebrations' at least some of the time. Likewise, 56% say they drink at least some of the time 'because it helps them to enjoy a party'.

'Because it's fun' is the third most cited motivation for drinking, with 56% saying they drink for this reason at least some of the time.

Among those who have drunk alcohol for conformity reasons, the desire not to feel left out is the most cited motivation, with 52% saying they drink for this reason at least some of the time.

²² Kuntsche et al. (2005). Why do young people drink? A review of drinking motives. *Clinical Psychology Review*, 25, 841-861.

²³ Mackinnon, et al. (2014). Testing the Four-Factor Model of Personality Vulnerability to Alcohol Misuse: A Three-Wave, One-Year Longitudinal Study. *Psychology of Addictive Behaviours*, 28:4, 1000-1012.

Worryingly, two in five (42%) participants say that at least some of the time when they drink, they do so to cheer themselves up when they are in a bad mood. Similar proportions say they drink to forget about their problems (37%) or because it helps when they feel anxious or depressed (37%) at least some of the time.

As may be expected, young people who report lower levels of mental wellbeing (attaining lower scores on the WEMWBS) are more likely to say they have drunk alcohol to cope with a bad mood, feeling anxious or depressed or to forget about their problems. Almost two thirds (64%) of those who score between 7 and 21 say they have done so, compared to 42% who score between 22 and 27, and 26% who score between 28 and 35.

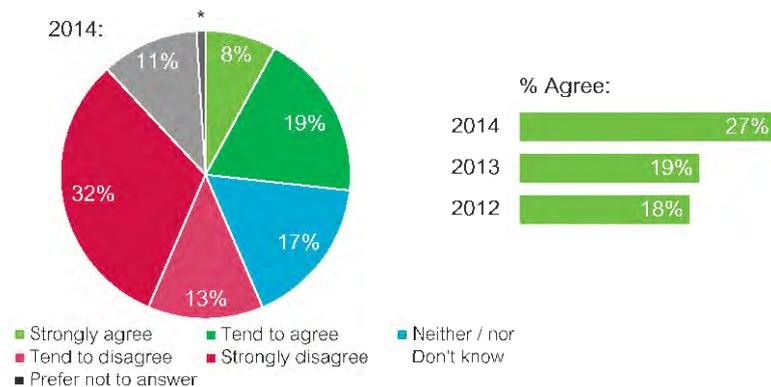
The motivations of those who use drinking as a coping mechanism, or to conform to social norms, are closely related to parental motivations. Half (49%) of those whose parents drink to cope with low moods, negative feelings or anxiety also drink for these reasons, compared to 44% overall; meanwhile 69% whose parents drink for conformity reasons also do this, compared to 57% overall.

4.3 Drinking to feel more confident

Just over one in four 10-17 year-olds (27%) who have had an alcoholic drink say that drinking helps them feel confident when meeting people and making new friends. This represents an increase in comparison with previous years.

Figure 4.4 – Drinking to feel more confident:

QC26. How much do you agree or disagree with the following statement?
Drinking gives me the confidence I need to meet people and make friends



Base: All young people aged 10-17 who have had an alcoholic drink 2014 (323); 2013 (317); 2012 (253).

Source: Ipsos MORI

One in four young people (27%) who have ever drunk alcohol say they strongly or tend to agree with the statement 'drinking gives me the confidence I need to meet people and make new friends'. Just over two in

five (45%) disagree with this statement, while 17% are unsure, stating that they neither agree nor disagree. This represents a significant increase in agreement compared with responses to the 2013 and 2012 surveys, when 19% and 18% agreed respectively. Any shift in attitudes over time should be interpreted with caution due to changes in question order²⁴.

There are no significant differences in response according to gender. However, older participants are more likely to say drinking helps them to feel more confident when socialising with new people and making friends. Just over half (52%) of those aged 16-17 agree with the statement, compared to 38% of 11-15 year-olds.

Participants who had their first alcoholic drink at a younger age are more likely to agree with this statement; 39% of those who first drank alcohol aged 13 or younger agree, compared to 22% who were 14 or 15 and 15% who were 16 or 17 when they had their first alcoholic drink. Those who have felt encouraged to drink are also more likely to agree (42% vs. eight per cent who have not felt encouraged), as are those who have had an alcoholic drink without an adult present (44% vs. 11% who have not drunk alcohol unsupervised). However, these latter two trends may be explained by the higher levels of agreement among older participants, who are more likely both to have felt encouraged to drink alcohol and to have had an alcoholic drink unsupervised by adults.

A strong correlation emerges between drunkenness and harmful drinking, and the belief that drinking helps improve confidence in meeting new people and making friends. Among participants who have been drunk, 55% agree with the statement, compared to just seven per cent of those who have never been drunk. Related to this, 72% of participants with CRAFFT scores of 2 or higher (indicating potential drinking or substance misuse problems) agree, compared to just 17% of those with CRAFFT scores of 1 or 0.

Young people with poorer mental wellbeing, and related to this those who drink alcohol as a coping strategy, are more likely to agree that drinking helps improve confidence in meeting new people and making friends. Just over a third (35%) of those with WEMWBS scores of 7-21 agree, compared to one in five (19%) of those who report the highest levels of mental wellbeing (WEMWBS scores of 28-35). Meanwhile over half (55%) of those

²⁴ In 2012 and 2013, this statement was asked as part of a set of 4 statements: Drinking gives me the confidence I need to meet people and make friends; Getting drunk at my age isn't very cool; It is normal for someone my age to drink; I've seen quite a bit recently about the risks of drinking alcohol. In 2014, only the first three statements were included in the questionnaire. In all years, these statements were rotated so that different participants answered them in different orders.

who say they drink to cope with negative feelings at least some of the time agree with the statement, compared to 27% of participants overall.

Young people whose parents drink to conform are more likely to agree, with 36% of this group doing so compared to 27% overall.

Drunkenness

5 Drunkenness

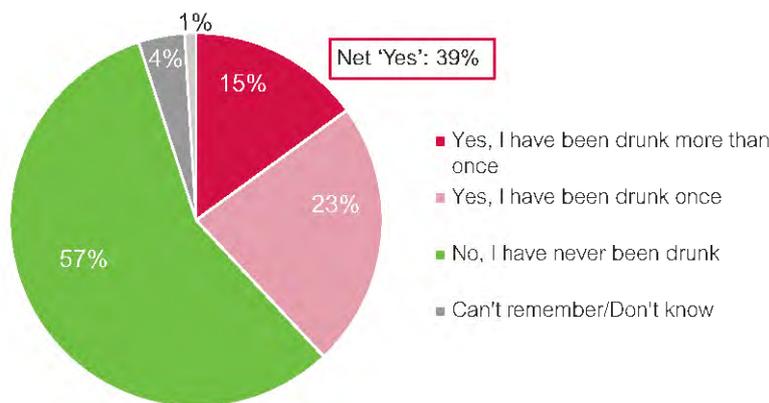
This chapter explores young people's experiences of being drunk, including the prevalence of such experiences among 10-17 year-olds, the age at which they get drunk for the first time, and how frequently they experience drunkenness.

5.1 Prevalence of getting drunk among young people

Among 10-17 year-olds who have had an alcoholic drink, two in five (39%) admit to having been drunk at least once, while 15% say they have been drunk more than once.

Figure 5.1 – Prevalence of being drunk:

QC16. Have you ever been drunk?



Base: All young people aged 10-17 who have had an alcoholic drink (323)

Source: Ipsos MORI

Almost two in five young people aged 10-17 who have had an alcoholic drink, say that they have been drunk at least once (39%). This represents a significant increase compared to the 31% who said this in 2013 – although in line with the 2012 figure (35%). Almost one in six (15%) say they have been drunk more than once.

There are no significant differences in response by gender. As is the case for drinking in general, older participants are more likely to have been drunk. Almost half (46%) of 16-17 year-olds who have had an alcoholic drink say they have been drunk at least once, compared to a third (34%) of those aged 11-15. Motivations for drinking play an important part in 10-17 year-olds' experiences of being drunk. Those who say they have felt encouraged to drink are more likely to say they have been drunk at least once – 56% say this, compared to 17% of those who have not felt encouraged to drink. Among all those who have had an alcoholic drink, those who drink for coping reasons are particularly likely to have experience



39%
of young people who have had an alcoholic drink have experienced being drunk at least once

of being drunk; 68% say they have been drunk at least once, compared to 56%, 55% and 54% respectively among those who drink for enhancement, conformity and social reasons. However, it is interesting to note that those drinking for *any reason* are considerably more likely to have been drunk compared to the overall 39% among all young people who have had a drink. Perhaps linked to this strategy of drinking to cope with problems, participants with poorer mental wellbeing are more likely to have been drunk. Of those who have had an alcoholic drink, half (50%) of those with WEMWBS scores of 7-21 say they have been drunk at least once, compared to 28% of those who score highest (28-35) on the wellbeing scale.

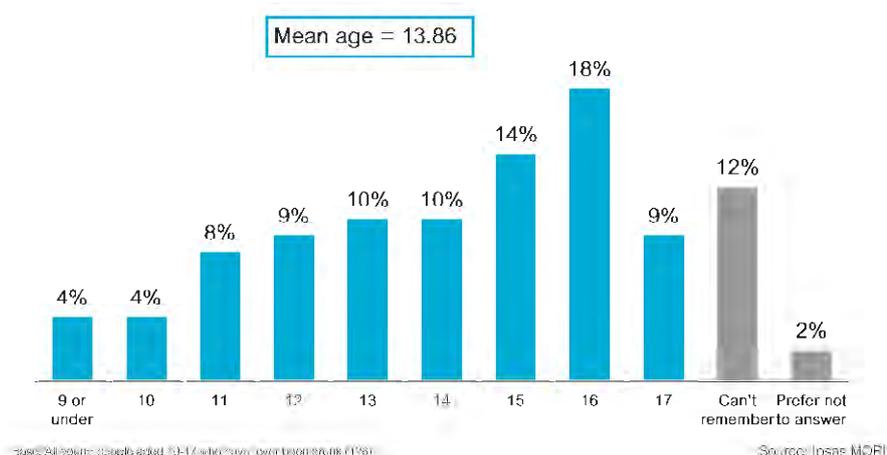
Perhaps unsurprisingly, if a young person has drunk alcohol without an adult present, they are more likely to have been drunk; 63% of this group have, compared to nine per cent of those who have not drunk alcohol unsupervised. The same is true of those who had their *first* alcoholic drink without a relative present; 62% of this group have been drunk, vs. 25% who had their first drink in the presence of a relative.

5.2 Age of first experience of being drunk

Among 10-17 year-olds who have been drunk, one in three (33%) say they were aged 15 or 16 when this happened for the first time. However, eight per cent were aged 10 or younger. Compared with previous survey findings, this may indicate a shift towards 10-17 year-olds getting drunk for the first time at an earlier age.

Figure 5.2 – Age when first drunk:

QC17. Thinking about the *FIRST* time you were drunk, how old were you?



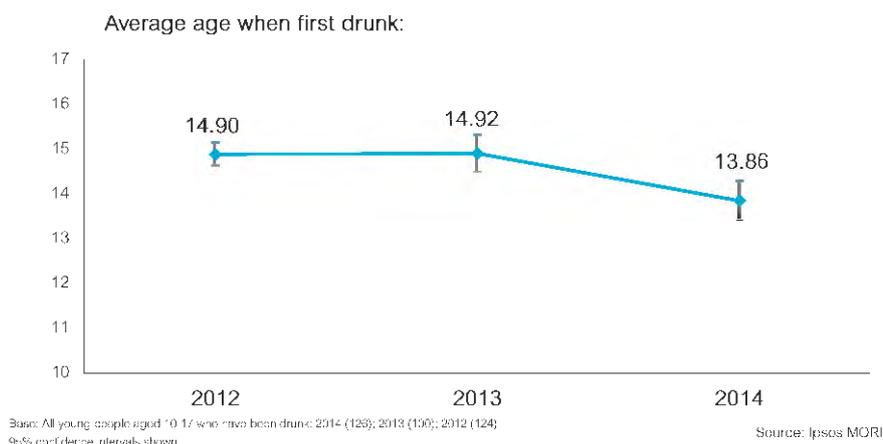
In 2014, 16 is the most common age at which 10-17 year-olds first experienced being drunk; almost one in five (18%) say this. A slightly

smaller proportion (14%) first got drunk at the age of 15. However, 28% were aged 11-13, and eight per cent were aged 10 or younger.

Overall, the average age of participants' first experience of being drunk is 13.86 – a figure which has fallen significantly when compared with 2013 and 2012 findings, when the average ages were 14.92 and 14.90 respectively.

Figure 5.3 – Average age when first drunk:

QC17. *Thinking about the first time you were drunk, how old were you?*



This decrease in mean age is driven on the one hand by an increase in the proportion of young people who say they were drunk for the first time when aged 10-12 (21% say this in 2014, vs. just eight per cent in 2013 and six per cent in 2012). On the other hand, fewer young people in 2014 report having been drunk for the first time at the age of 16 or 17; just over one in four (27%) say this, compared to 40% in 2013 and 33% in 2012. Further research is required to find out if this is a long-term trend.

Due to the small base sizes of sub-groups of those who have been drunk, it is not possible to identify any statistically significant trends according to demographics or wider attitudes and drinking behaviours. However, being drunk is linked with harmful behaviours: one indicative finding is that among those with CRAFFT scores of 2 or higher, 41% say they were aged 10-12 the first time they were drunk, compared to just six per cent of those with CRAFFT scores of 0 or 1.

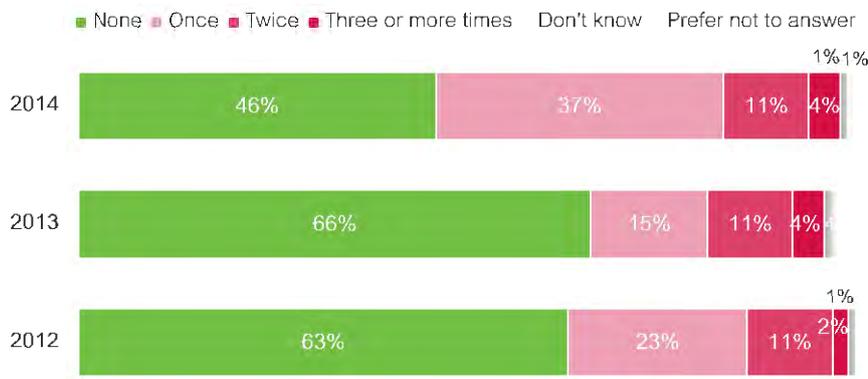
5.3 Recent drunkenness

Among 10-17 year-olds who have been drunk, half (52%) say they have done so at least once in the last four weeks. This figure has increased significantly compared with 2013 and 2012, when 30% and 37% respectively said they had been drunk recently. The proportion saying

they have been drunk more than once remains similar to previous findings.

Figure 5.4 – Frequency of being drunk in the last 4 weeks:

QC18. In the last four weeks, how many times, if any, have you been drunk?



Base: All young people aged 16-17 who have been drunk: 2014 (126), 2013 (100), 2012 (124)

Source: Ipsos MORI

Just over half (52%) of participants who report having been drunk say they have been drunk in the last four weeks at least once. This represents an increase compared with 2013 and 2012, when 30% and 37% respectively said they had been drunk in the last 4 weeks. However, these findings should be treated as indicative only, due to the small base sizes of participants in 2014, 2013 and 2012 who have been drunk (126, 100 and 124 respectively).

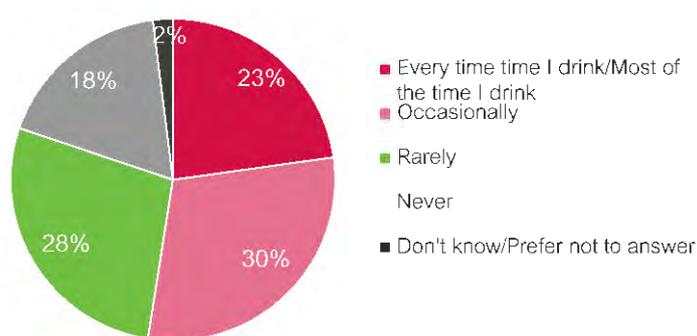
Again, due to the small sample size of participants who have been drunk, it is not possible to make robust comparisons between sub-groups. However, there again appears to be a correlation between recent drunkenness and potential drinking problems (as indicated by CRAFFT score). Three quarters (75%) of participants with CRAFFT scores of 2 or higher say they have been drunk in the last 4 weeks, compared to a third (34%) of those with scores of 0 or 1. This finding, however, should be interpreted with caution due to the very small base size of participants with CRAFFT scores of 2 and above who have been drunk (N = 55).

5.4 Drinking to get drunk

Among 10-17 year-olds who have been drunk, four in five (80%) say they drink to get drunk at least some of the time, while one in five (18%) never do this. Clear links are indicated between drinking to get drunk and the potential of significant drinking problems.

Figure 5.5 – Drinking to get drunk:

QC19. How often, if ever, do you drink to get drunk?



Base: All young people aged 10-17 who have ever been drunk (126)

Source: Ipsos MORI

Of those participants who report having ever been drunk, one in five (23%) say they drink with the intention of getting drunk every time or most of the times that they drink alcohol. Almost one in three (30%) say they do this occasionally, while a similar proportion (28%) say they do so rarely. One in five (18%) say they never drink with the intention of getting drunk.

It should be noted that due to changes in question and response option wording, the findings for this question are not directly comparable to those from previous surveys²⁵. However, some indicative comparisons can be made. When asked how often they and their friends drank to get drunk, in 2013, one in five (19%) said that they did so at least once week; around one in eight (12%) said this in 2012. This compares to 23% in 2014 who say they drink to get drunk every time or most times. In 2013 and 2012, 28% and 30% respectively answered 'I never get drunk now'; this compares to 18% in 2014 who say they never drink to get drunk.

As is the case when examining other metrics on drunkenness, participants who show potential of significant drinking problems (i.e. those with CRAFFT

²⁵ In 2013, 2012 and earlier surveys, the equivalent to this question was: "How often, if ever, do you and your friends drink alcohol to get drunk?" Response options were: 1) Every day or almost every day 2) About twice a week 3) About once a week 4) About once a fortnight 5) About once a month 6) A few times a year 7) Once or twice a year 8) I never get drunk now 9) Prefer not to answer.

scores of 2 or higher) are more likely to say that they drink to get drunk every time or most of the times that they drink; 38% say this, vs. 10% with CRAFFT scores of 0 or 1. However, it should be noted that the sample size for those with CRAFFT scores of 2 or higher who have been drunk is very small (N = 55), and so this finding should be interpreted with caution.

Harmful drinking

6 Harmful drinking

This chapter explores the harms and consequences experienced by young people as a result of drinking alcohol.

6.1 The CRAFFT measure of alcohol-related harm

In order to provide a measure of participants' overall risk in relation to their drinking behaviour and attitudes towards alcohol, the CRAFFT screening tool²⁶ was included in the 10-17 year-olds' questionnaire. This tool was developed by the Center for Adolescent Substance Abuse Research, Children's Hospital Boston, USA. It consists of 6 questions, developed to screen adolescents for high risk alcohol and other drug use disorders. Participants are allocated a score based on their responses to the six questions, and this score is used to identify whether or not the young person is at risk of potential alcohol or drug-related problems. Individuals with a score of 2 or higher are considered to be potentially at risk of significant problems, while those scoring 1 or 0 are not considered at risk. Please see chapter 1, or the appendix, of this report for more information on the CRAFFT tool.

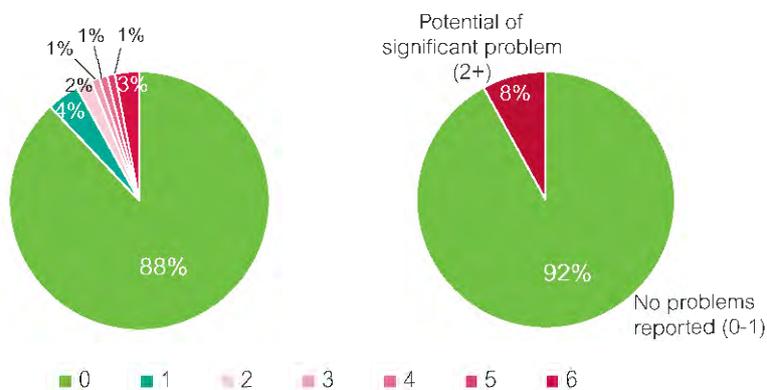
6.2 CRAFFT Scores

The CRAFFT scores of the vast majority of 10-17 year-olds indicate no potential of significant problems related to alcohol or other substances; nine in ten (88%) score zero. However, eight per cent of participants score 2 or higher, suggesting that they may be at risk of significant problems.

²⁶ Knight J.R, et al. (1999). A new brief screen for adolescent substance abuse. *Archives of Paediatric and Adolescent Medicine*, 153:6, 591-6.

Figure 6.1 – CRAFFT Score:

CRAFFT Score



Base: All young people aged 10-17 (754)

Source: Ipsos MORI

The vast majority (92%) of participants score 0 or 1 on the CRAFFT measure, indicating that no problems or potential problems exist in relation to alcohol or other drug/substance use. Almost nine in ten score 0 (88%), while four per cent score 1. On the other hand, eight per cent of participants (60 individuals in total) score 2 or higher, indicating that they have or may be at risk of developing significant problems.

Among those who have had an alcoholic drink, 18% score 2 or more on CRAFFT, with 82% not apparently at risk of developing significant problems.

There are no statistically significant differences in CRAFFT scores by age or gender.

Mental wellbeing appears to have an important impact upon harmful behaviour as indicated by CRAFFT score. Among participants with lower WEMWBS scores between 7 and 21, just over one in eight (13%) have a CRAFFT score of 2 or higher, and thus may be at risk of significant alcohol or other substance use problems. Linked to this, participants who say they drink to help them cope with problems or negative feelings at least some of the time are significantly more likely to have a higher CRAFFT score; 38% score 2 or higher, compared to 29% who drink for conformity reasons, 28% whose drinking is socially motivated and 27% who drink for enhancement reasons.

The context in which a young person drinks, and also the circumstances in which they have their first whole alcoholic drink, appear to have an impact upon their CRAFFT score. In particular, those who say they have felt encouraged to drink alcohol, those who had their first alcoholic drink at a younger age and those who were with their friends (and without a relative

present) for their first drink are more likely to score higher on the CRAFFT measure.

Almost a third (30%) of participants who had their first alcoholic drink at the age of 13 or younger fall into the potentially at-risk category with a CRAFFT score of 2 or higher, compared to five per cent of those who had their first drink at 14 or older. Those who had their first alcoholic drink without a relative present (and therefore most likely in the company of friends) are more likely to have a higher CRAFFT score; 30% of this group score 2 or higher, compared to 11% of young people who had their first drink in the presence of at least one relative. Almost a quarter (23%) of participants who have felt encouraged to drink have a CRAFFT score of 2 or higher, compared to just one per cent of those who have not felt encouraged to drink. These two factors appear to be closely linked; those who had their first drink without a relative present are more likely to have felt encouraged to drink; meanwhile the majority who have felt encouraged say this encouragement came from friends.

Parental alcohol consumption appears to influence young people's behaviour. Among all the children whose parents completed the survey, five per cent have a CRAFFT score of 2 or higher; however, eight per cent of young people whose parents are increasing or high risk drinkers scored 2 or higher on the CRAFFT measure, compared to four per cent whose parents are low risk drinkers. There is also a correlation with parents' AUDIT scores; although the difference is not statistically significant, 14% of young people with parents in AUDIT zones 2-4 (hazardous, harmful or dependency) have a CRAFFT score of 2 or more, compared to two per cent whose parents are in AUDIT zone 1 (low risk).

Young people whose parents think it is acceptable for a young person to have their first alcoholic drink at a younger age are also more likely to fall into the higher risk CRAFFT category; 13% of young people whose parents think it is acceptable to drink for the first time at age 13 or younger fall into the higher risk CRAFFT category, compared to four per cent of those whose parents feel a young person should be 14 or older when they first drink alcohol. Please note that due to the small base size of young people whose parents think it is acceptable to have a first alcoholic drink at 13 or younger (N = 54), this finding should be interpreted with caution.

6.3 Specific harms experienced as a result of drinking alcohol

Among 10-17 year-olds who have had an alcoholic drink, one in four (25%) have experienced one or more harmful consequences in the last 12 months as a result of drinking; one in eight (12%) have experienced 3 or more consequences. In particular, one in five (19%) say they have vomited as a result of drinking in the last 12 months.

Table 6.1 – QC25. During the last 12 months, as a result of drinking alcohol, how often have you...?

	Weekly or more often (net)	Monthly or less often (net)	Less than monthly	Monthly	Weekly	Daily or almost daily	Never
Vomited	2%	17%	14%	3%	1%	1%	81%
Done something which put you in a risky situation	2%	10%	5%	4%	1%	1%	88%
Missed a day of work, school or college	1%	9%	7%	2%	1%	*	89%
Lost a valued possession (such as a mobile phone or wallet)	2%	8%	6%	2%	1%	*	90%
Been made to look bad on social media the next day	2%	8%	5%	3%	1%	1%	90%
Had a fight	2%	8%	6%	1%	1%	1%	90%
Engaged in sexual activity	1%	9%	7%	2%	1%	0%	90%
Got into trouble with the police	2%	5%	3%	2%	1%	1%	93%

Table 6.2 – QC25. During the last 12 months, as a result of drinking alcohol, how often have you...? (Continued)

	Weekly or more often (net)	Monthly or less often (net)	Less than monthly	Monthly	Weekly	Daily or almost daily	Never
Been a victim of crime	2%	5%	3%	3%	1%	1%	93%
Been taken to hospital	1%	5%	3%	2%	1%	1%	93%
Experienced serious harm ²⁷	2%	10%	7%	3%	1%	1%	88%

Base (all options except 'engaged in sexual activity'): all young people aged 10-17 who have had an alcoholic drink (323). Base ('Engaged in sexual activity'): all young people aged 13 and over who have had an alcoholic drink (258).

Although the majority of those who have had an alcoholic drink (75%) say they have not experienced any of the negative consequences of drinking listed within the last 12 months, one in four (25%) have experienced at least one, while one in eight (12%) have experienced 3 or more consequences. The majority of those who have had an alcoholic drink (88%) have never experienced a 'serious harm'; here taken to mean they have never got into a fight, got into trouble with the police, been a victim of crime, or been taken to hospital as a result of drinking alcohol. The most commonly experienced consequence is vomiting; 17% say they have done this monthly or less often, while two per cent have done so weekly or more often, as a result of drinking alcohol. One in nine (11%) say they have done something which put them in a risky situation at least once. Similar proportions have missed a day of work, school or college (11%), lost a valued possession (10%), been made to look bad on social media (10%), or had a fight (10%) in the last 12 months as a result of drinking alcohol. Small but significant proportions of those who have had an alcoholic drink say they have engaged in sexual activity (10% of those aged 13 and over have done this), been in trouble with the police (seven per cent), been a victim of crime (seven per cent) or been taken to hospital (seven per cent) as a result of drinking in the last 12 months.



1 in 4
young people who have had an alcoholic drink have experienced at least one negative consequence in the last 12 months as a result of drinking

²⁷ "Experienced serious harm" covers the following harms: "Had a fight", "Got in trouble with police", "Been a victim of crime", and "Been taken to hospital". Results shown here reflect the highest frequency of these four harms for each individual.

Among all those who have had an alcoholic drink, certain sub-groups emerge as being more likely to say they have experienced each of the harms discussed. Most prominent are:

- Participants who say they have felt encouraged to drink alcohol; 34% of this group have experienced one or more consequences, vs. 11% of those who have not been encouraged to drink.
- Those who have had an alcoholic drink unsupervised by adults; 39% have experienced one or more consequences, vs. eight per cent of those who have not drunk alcohol unsupervised. Related to this, 37% of those who had their first alcoholic drink *without* a relative present have experienced at least one consequence, vs. 18% of those who were with a relative for their first drink.
- Participants with higher CRAFFT scores; 62% of those who score 2 or higher on the CRAFFT measure have experienced at least one consequence, while 45% have experienced 3 or more. This compares to 17% and five per cent respectively among those with CRAFFT scores of 1 or 0.
- Those with poorer mental wellbeing; 33% of participants who score between 7 and 21 on the WEMWBS have experienced at least one consequence, vs. 20% of those with scores of 22 or higher.
- Those who drink for coping reasons; 44% of this group have experienced at least one consequence, while 24% have experienced 3 or more. This compares to 25% and 12% respectively among all participants.

Risk awareness, moderation and information sources

7 Risk awareness, moderation and information sources

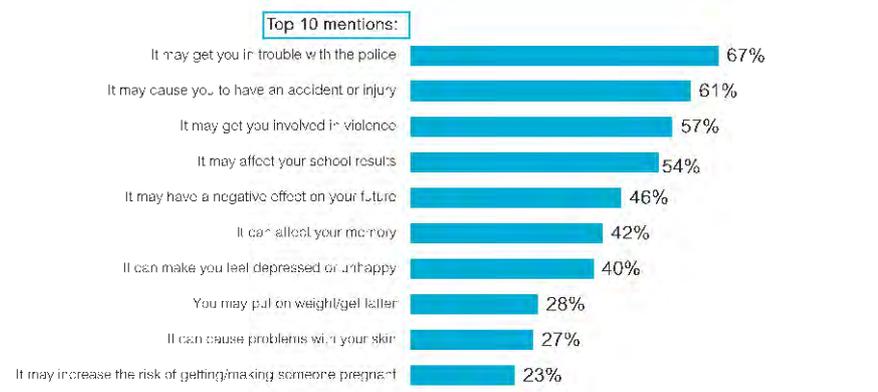
This chapter explores young people's perceptions of the risks associated with drinking alcohol, their reasons for not drinking alcohol, and where they go to seek information about alcohol and drinking.

7.1 Knowledge of risks associated with drinking alcohol

When asked to identify possible negative consequences of drinking, young people tend to focus on more immediate issues such as getting into trouble with the police, having an accident or becoming injured, or being involved in violence; longer-term health impacts were less frequently identified.

Figure 7.1 – Risks associated with drinking too much alcohol at a young age

QC23. Which, if any, of the following problems do you think can happen by drinking too much alcohol at a young age?



Base: All young people aged 10-17 (764). Please note that only those aged 13 and older (258) were shown the option 'It may increase the risk of getting/making someone pregnant'. Source: Ipsos MORI

When presented with a list of possible negative consequences of drinking, the most commonly selected options are getting in trouble with the police (67%), having an accident or getting injured (61%), being involved in violence (57%) or having a negative effect on school results (54%). Just under half (46%) believe that drinking could have a negative effect on a young person's future, while 42% think that it could affect their memory, and 40% say that it could cause depression or make them unhappy. Findings for this question remain very similar to those seen in 2013 and 2012.



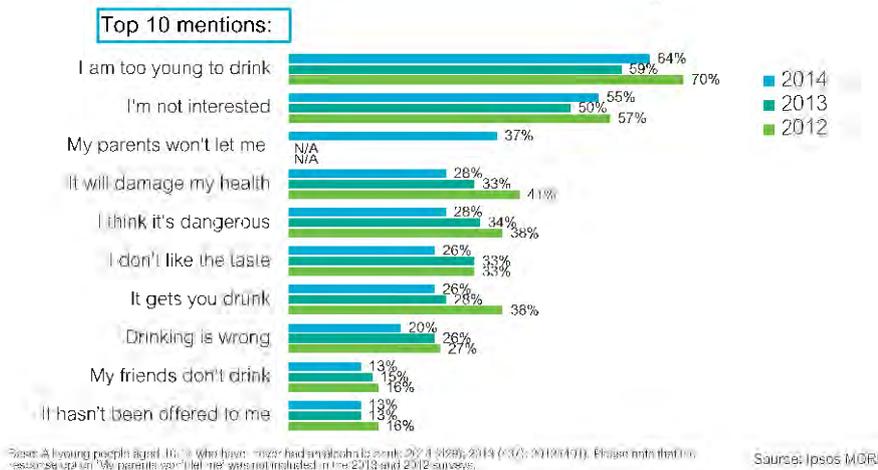
Of young people think they could get in trouble with the police as a result of drinking alcohol. 61% are worried about having an accident or being injured

7.2 Reasons for refraining from drinking

Among 10-17 year-olds who have not had an alcoholic drink, principle and disinterest are the biggest drivers behind this behaviour. Almost two in three (64%) say that they are too young to drink, while just over half (55%) say that they are simply not interested in drinking; nearly two in five (37%) say they have not had a drink because their parents won't let them.

Figure 7.2 – Specific reasons for refraining from drinking:

QC21. You said you have never had an alcoholic drink, why is that?



The two main reasons for not drinking alcohol remain the same year-on-year; two thirds (64%) feel they are too young to drink, while just over half (55%) are simply not interested in drinking. However, 2014 sees some shifts in attitudes compared to 2013 and 2012, with significantly smaller proportions now saying they avoid drinking because they are concerned it will damage their health, because it is dangerous, because they don't like the taste, because it gets you drunk or because they feel drinking is wrong.

Using the full list of responses given at QC21, five main categories were created by grouping together similar/related reasons, as detailed in the following table.

Table 7.1 – Grouping of response options at QC21

Principle	I'm too young to drink; Drinking is wrong; For religious reasons
Disinterest	I'm not interested; I don't like the taste

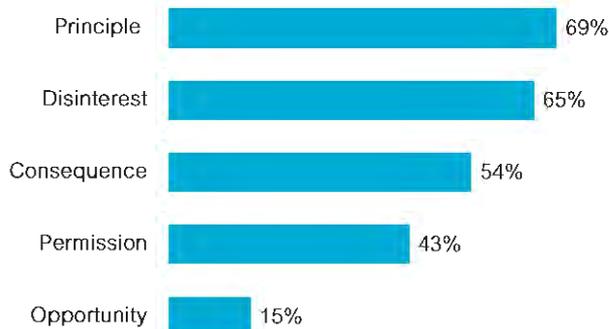
Table 7.2 – Grouping of response options at QC21 (Continued)

Consequence	It will damage my health; I think it's dangerous; It gets you drunk; I don't want to get addicted; I'm worried about embarrassing myself/doing something I would regret; I might do something against the law; I'm worried about being out of control;
Permission	My parents won't let me; My parents don't drink;
Opportunity	It hasn't been offered to me; I can't get hold of any drink.

Figure 7.3 below shows the proportions giving each of these overall reasons for refraining from drinking alcohol.

Figure 7.3 – Overall reasons for refraining from drinking:

QC21. You said you have never had an alcoholic drink, why is that?



Based on young people aged 10-17 who have never had an alcoholic drink (n=200)

Source: Ipsos MORI

Principle

Among young people who have not had an alcoholic drink, seven in ten (69%) say that they do not do so out of principle (i.e. they select at least one of the reasons in the 'principle' category). Two thirds (64%) say they are too young to drink, while one in five (20%) feel that drinking is wrong. A small minority (three per cent) say they do not drink for religious reasons.

Younger participants are more likely to say that they do not drink out of principle; over seven in ten (75%) 10-15 year-olds who do not drink give one of these reasons, while two thirds (67%) say they do not drink because they are too young; this compares to 48% and 41% respectively among participants aged 16-17 who have not had an alcoholic drink. Girls who

have not had an alcoholic drink are more likely to say that this is because drinking is wrong; 24% say this, compared to 17% of boys who have not drunk alcohol.

Disinterest

A lack of interest is the next biggest factor, with two thirds (65%) of those who have not had an alcoholic drink giving this type of reason. Just over half (55%) say that they are not interested in drinking, while one in four (26%) say they do not like the taste.

Girls who have not had an alcoholic drink are again more likely to say that they don't drink due to disinterest; almost three in four (73%) give one of these reasons, compared to 58% of boys who have not drunk alcohol.

Consequence

Just over half (54%) of young people who have not had an alcoholic drink say that they are worried about the possible negative consequences of doing so. Just over a quarter (28%) are worried that drinking will damage their health, and similarly 28% think it is dangerous. A quarter (26%) cite becoming drunk as a reason to avoid drinking. Around one in ten are worried about becoming addicted (11%) or embarrassing themselves or doing something they regret (nine per cent). Seven per cent are worried they might do something against the law, while five per cent say they are worried about being out of control.

Girls who have not drunk alcohol are more likely to say that they don't drink due to concern about consequences; three in five (59%) give one of these reasons, compared to 49% of boys who have not had an alcoholic drink.

Permission

Just over two in five young people (43%) who have not had an alcoholic drink give lack of permission as one of the reasons why this is the case; 37% say that their parents won't let them drink, while 11% say that their parents don't drink.

Younger participants are more likely to cite lack of permission as having prevented them from drinking; more than two in five (44%) of those aged 10-15 who have not had an alcoholic drink give one of these reasons, compared to 36% of 16-17 year-olds.

Opportunity

A significant minority (15%) of those who have not drunk alcohol say that this is because they have not had the opportunity to do so. Just over one in

eight (13%) say they have not been offered an alcoholic drink, while four per cent say they cannot get hold of any alcoholic drink.

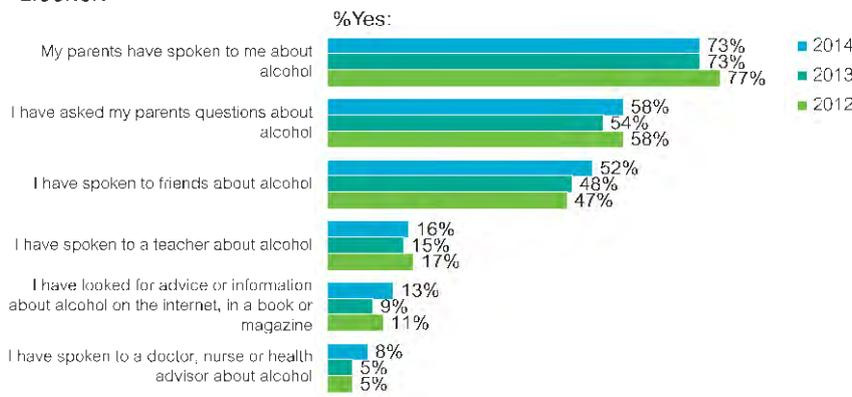
Unsurprisingly, younger participants are more likely to cite lack of opportunity as a reason for not having drunk alcohol. Just under one in five (17%) of those aged 10-15 who have not had an alcoholic drink give this reason, compared to five per cent of 16-17 year-olds. Boys are more likely to say that not being able to get hold of alcohol has prevented them from drinking; seven per cent who have not drunk alcohol give this reason, compared to one per cent of girls who have not had an alcoholic drink.

7.3 Seeking information about alcohol and drinking

Young people are most likely to seek and receive information about alcohol from their parents. Around three quarters (73%) say that their parents have spoken to them about alcohol, while three in five (58%) say they have asked their parents questions about alcohol. Around half (52%) have spoken to their friends, while 16% have spoken to a teacher and 13% have sought information from the internet, a magazine or a book.

Figure 7.4 – Sources of information about alcohol and drinking:

QC27. Which, if any, of the following have you done to find out about drinking alcohol?



Size: All young people aged 10-17 (2014 (754), 2013 (764), 2012 (757))

Source: Ipsos MORI

When asked about things they might have done to find out more about alcohol and drinking, responses remain similar to those seen in 2013 and 2012. The majority (73%) of 10-17 year-olds say their parents have spoken to them about alcohol. Around two in five (58%) say they have asked their parents about alcohol, while half (52%) have spoken to friends. One in six have spoken to a teacher (16%), while one in eight have looked for information on the Internet or in a book or magazine (13%). A minority (eight per cent) say they have spoken to a doctor or another health professional about alcohol.

73%



Of young people say their parents have spoken to them about alcohol

Girls are significantly more likely to have discussed alcohol with others, when compared to boys. For example, 62% have asked their parents questions about alcohol compared to 54% of boys who have done this; 60% have spoken to friends about it, compared to 45% of boys. Meanwhile, 76% of girls say their parents have spoken to them about alcohol, compared to 69% of boys.

Older participants are more likely to have spoken to their friends about alcohol, with 65% of 16-17 year-olds having done this, compared to 51% of 11-15 year-olds.

There is a clear trend between experience of drinking alcohol and having sought information or advice about drinking. Those who have had an alcoholic drink, those who have had a drink without an adult present, and those who have been drunk are all more likely to have taken each of the actions listed above in order to find out more information about alcohol. Linked to this, those who say they have felt encouraged to drink alcohol are also significantly more likely to say they have taken each of the actions.

It seems that young people who exhibit riskier behaviours and poorer wellbeing – as signified by a number of metrics – are more likely to have spoken to friends, a teacher or a health professional about alcohol, and to have looked for information on the internet or in a magazine or book. For example, of those who score 2 or higher on the CRAFFT measure, 84% have spoken to friends about alcohol, compared to 49% of those with lower scores. Meanwhile, 57% have spoken to a teacher (vs. 13% with lower scores), 57% have spoken to a doctor or health professional (vs. four per cent) and 63% have looked for information on the internet or in a book or magazine (vs. nine per cent).

Those with poorer mental wellbeing (as indicated by a score of 7-21 on the WEMWBS) are more likely to have spoken to a doctor (13% have done so, vs. five per cent of those with scores of 28-35), and to have looked for information on the internet or in a magazine or book (20% vs. nine per cent). Linked to this, young people who say they drink to cope with problems or negative feelings are also more likely to have spoken to a teacher (31% have done this, compared to 16% of participants overall), spoken to a health professional (31% vs. eight per cent overall) or used the internet, books or magazines to find information (37% vs. 13% overall).

Parental attitudes play an important part in whether or not young people have had discussions with their parents about alcohol and drinking. For example, among those whose parents think it is acceptable for a young person to have their first drink at the age of 13 or younger, 80% say their parents have spoken to them about alcohol, while 74% say they have asked their parents questions about alcohol. Among participants whose parents

think 14 or 15 is the youngest acceptable age to drink, 74% say their parents have spoken to them, while 60% say they have asked their parents questions about alcohol. Only 60% of those whose parents think that a young person should not drink alcohol until they are 18 or older say their parents have spoken to them about alcohol, and just 53% of this group say they have asked their parents questions about alcohol.

Appendix

8 Appendix

8.1 Academic tools and question sets

8.1.1 The CRAFFT screening test

The CRAFFT test is a short behavioural health screening tool developed to screen adolescents for high risk alcohol and other drug use disorders²⁶. It was developed by the Center for Adolescent Substance Abuse Research, Children’s Hospital Boston, USA. Participants are allocated a score between zero and six, based on their responses to six questions about alcohol and drug use.

Participants are initially screened using three questions, as per the table below:

Table 8.1 – CRAFFT – part A

During the past 12 months, did you...	Yes	No
A. Drink any alcohol (more than a few sips)?		
B. Smoke any cannabis?		
C. Use anything else to get high? ('anything else' includes illegal drugs, over the counter or prescription drugs, and things that you sniff or 'huff')		

If the participant answers ‘yes’ to one or more questions in part A, they are then asked all six of the questions in part B. If they answer ‘no’ to all three questions in part A, they are only asked the first (‘Car’) question of part B.

Table 8.2 details the questions asked in part B.

²⁶ Knight, J. R. et al. (1999). A new brief screen for adolescent substance abuse. *Archives of Paediatric and Adolescent Medicine*, 153:6. 591-6.

Table 8.2 – CRAFFT part B

	Yes; score	No; score
Have you ever ridden in a car driven by someone (including yourself) who was ‘high’ or had been using alcohol or drugs?	1	0
Do you ever use alcohol or drugs to relax, feel better about yourself, or to fit in?	1	0
Do you ever use alcohol or drugs while you are by yourself, or alone?	1	0
Do you ever forget things you did while using alcohol or drugs?	1	0
Do your family or friends ever tell you that you should cut down on your drinking or drug use?	1	0
Have you ever gotten into trouble while you were using alcohol or drugs?	1	0

The total score between 0 and 6 is used to identify whether or not the young person is likely to have or be at risk of alcohol or substance misuse problems.

Table 8.3 – Interpreting CRAFFT scores

CRAFFT Score:	Degree of problem related to alcohol or other substance abuse
0-1	No problems reported
2+	Potential of significant problem

8.1.2 Alcohol Use Disorder Identification Test (AUDIT)

The AUDIT tool, developed by the World Health Organisation, is used to measure an individual’s level of risk and/or harm in relation to their alcohol consumption patterns²⁹. The test consists of ten questions, each of which

²⁹Babor, T. F. et al. (2001). AUDIT; The Alcohol Use Disorders Identification Test: Guidelines for Use in Primary Care. Second Edition. World Health Organisation: Department of Mental Health and Substance Dependence.

carries a score of 0-4 depending on the answer given. These are detailed in the following table.

Table 8.4 – AUDIT questions and scores

	Response	Score
How often do you have a drink containing alcohol?	Never	0
	Monthly or less	1
	2 to 4 times a month	2
	2 to 3 times a week	3
	4 or more times a week	4
How many drinks containing alcohol do you have on a typical day when you are drinking?	1 or 2	0
	3 or 4	1
	5 or 6	2
	7-9	3
	10 or more	4
How often do you have six or more drinks on one occasion?	Never	0
	Less than monthly	1
	Monthly	2
	Weekly	3
During the last 12 months, how often have you found that you were not able to stop drinking once you had started?	Daily or almost daily	4
	Never	0
	Less than monthly	1
	Monthly	2
During the last 12 months, how often have you failed to do what was normally expected of you because of drinking?	Weekly	3
	Daily or almost daily	4
	Never	0
	Less than monthly	1
	Monthly	2
	Weekly	3
	Daily or almost daily	4
	Never	0

Table 8.5 – AUDIT questions and scores (continued)

	Response	Score
During the last 12 months, how often have you needed a drink in the morning to get yourself going after a heavy drinking session?	Never	0
	Less than monthly	1
	Monthly	2
	Weekly	3
	Daily or almost daily	4
During the last 12 months, how often have you had a feeling of guilt or remorse after drinking?	Never	0
	Less than monthly	1
	Monthly	2
	Weekly	3
	Daily or almost daily	4
During the last 12 months, how often have you been unable to remember what happened the night before because you had been drinking?	Never	0
	Less than monthly	1
	Monthly	2
	Weekly	3
	Daily or almost daily	4
Have you or someone else been injured as a result of your drinking?	No	0
	Yes, but not in the last year	2
	Yes, during the last year	4
Has a relative or friend, a doctor or another health worker been concerned about your drinking and suggested you cut down?	No	0
	Yes, but not in the last year	2
	Yes, during the last year	4

The scores for each individual question are then added together to give an overall score between zero and 40. The overall score is used to allocate participants to one of four groups based on the risk of potential harm posed by their levels and patterns of alcohol consumption. The allocation of scores to risk categories is detailed in the table 8.6.

Table 8.6 – Scoring AUDIT

	Overall score
Zone 1 (low risk)	0-7
Zone 2 (hazardous)	8-15
Zone 3 (harmful)	16-19
Zone 4 (dependency)	20-40

Please note that in order to maintain as far as possible a similar ordering of survey questions to that used in previous years, the AUDIT questions were asked in the intended order but were interspersed with other questions.

8.1.3 The Drinking Motive Questionnaire: Revised Short Form (DMQ-R SF)

The DMQ-R SF, developed by Kuntsche and Kuntsche³⁰, uses twelve motivations for drinking and a five-point response scale. An individual's responses are used to determine the extent to which they drink for social, enhancement, conformity or coping reasons. The question wording and list of reasons are as follows:

Q. The following are reasons that people sometimes give for drinking alcohol. Thinking of all the times you drink, how often would you say that you drink for the following reasons?

1. Because it helps you to enjoy a party
2. Because it helps you when you feel depressed or nervous
3. To cheer up when you are in a bad mood
4. Because you like the feeling
5. To get a buzz
6. Because it makes social gatherings more fun
7. To fit in with a group you like
8. Because it improves parties and celebrations

³⁰ Kuntsche, E. and Kuntsche, S. (2009). Development and Validation of the Drinking Motive Questionnaire Revised Short Form (DMQ-R SF). *Journal of Clinical Child and Adolescent Psychology*, 38:6, 899-908.

- 9. To forget about your problems
- 10. Because it’s fun
- 11. To be liked
- 12. So you won’t feel left out

Response options: **Almost never/never; Some of the time; Half of the time; Most of the time; Almost always/always.**

Table 8.7 – Overall motivations for drinking

Social	Enhancement	Coping	Conformity
Because it helps you to enjoy a party	Because you like the feeling	Because it helps you when you feel depressed or nervous	To fit in with a group you like
Because it makes social gatherings more fun	To get a buzz ³¹	To cheer up when you are in a bad mood	To be liked
Because it improves parties and celebrations	Because it’s fun	To forget about your problems	So you won’t feel left out

Participants are referred to as drinking for a particular motivation if they drink for one or more of the three reasons in that category ‘some of the time’ or more often. For example, any participant who drinks for one or more of the three ‘social’ reasons (see above table) at least some of the time would be considered a socially motivated drinker. Please note that due to overlap in the responses of individual participants, a given participant could be considered as drinking for more than one, or indeed all, of the above reasons.

8.1.4 The Warwick-Edinburgh Mental Wellbeing Scale (WEMWBS)

The WEMWBS, developed by Warwick and Edinburgh Universities, uses a set of 14 positively worded statements about specific thoughts and feelings, with five response categories to determine how often over the last two weeks an individual has experienced them; this is used to assess an

³¹ In the original American English version of the questionnaire the wording ‘to get high’ is used. We replaced this with ‘to get a buzz’, as it was felt that the use of ‘getting high’ by British English speakers would usually be associated with drug taking and not drinking alcohol.

individual or a population’s mental wellbeing³². A shortened version of the WEMWBS, using 7 items (known as the short WEMWBS or SWEMWBS), was included in the questionnaire; the questions, response options and associated scores are detailed in the following table.

Table 8.8 – Short WEMWBS

	None of the time	Rarely	Some of the time	Often	All of the time
I've been feeling optimistic about the future	1	2	3	4	5
I've been feeling useful	1	2	3	4	5
I've been feeling relaxed	1	2	3	4	5
I've been dealing with problems well	1	2	3	4	5
I've been thinking clearly	1	2	3	4	5
I've been feeling close to other people	1	2	3	4	5
I've been able to make my own mind up about things	1	2	3	4	5

This gives an individual an overall score between 7 and 35, with a higher score indicating better mental wellbeing. For the purposes of this study, 3 score categories were drawn in order to make comparisons between participants with higher and lower WEMWBS scores; 7-21, 22-27, 28-35. The mean score among young people aged 10-17 participating in the survey was 25.33.

8.1.5 Risk

Throughout the report, sub-group analysis is carried out according to parents’ drinking-related ‘risk’ levels, with reference to three distinct groups; low risk drinkers, increasing risk drinkers and high risk drinkers. Parents

³² Stewart-Brown, S. and Janmohamed, K. (2008). Warwick-Edinburgh Mental Well-Being Scale (WEMWBS) User Guide Version 1. *Warwick Medical School, University of Warwick*.

who completed the adults' survey were asked which types of drinks (e.g. lager, wine, spirits with a mixer) they typically drank, then asked to specify in what quantities (e.g. a bottle, pint or half-pint of lager) and how many of each they drank in a typical week. This was used to calculate their approximate weekly unit intake. The following table shows the unit values used for each type of drink.

Table 8.9 – Unit conversions for different drink types and sizes

	No. of units
Pint of lager	2.8
Half pint of lager	1.4
Can of lager	2.2
Bottle of lager	1.7
Pint of other beer or ale	2.8
Half pint of other beer or ale	1.4
Can of other beer or ale	2.2
Bottle of other beer and ale	1.7
Large glass of white or red wine (250ml)	3.3
Medium glass of white or red wine (175ml)	2.3
Small glass of white or red wine (125ml)	1.6
Medium glass of Champagne (175ml)	2.1
Single spirit and mixer	1
Double spirit and mixer	2
Pint of cider	2.8
Half pint of cider	1.4
Bottle of cider	1.7
Can of cider	2.2
Single shot	1
Double shot	2
Bottle of Alco-pop (275ml)	1.4
Bottle of Alco-pop (500ml)	2.5
Fortified wine	1
Cocktail	2

Parents' weekly unit intakes were then used to allocate them to a risk category; these differ for men and women, as detailed in the following table.

Table 8.10 – Risk category definitions

	Low risk	Increasing risk	High risk
Men	0-20	21-49	50+
Women	0-14	15-34	35+

For further information please contact:

Andrew Russell
Research and Insight Manager
ARussell@drinkaware.co.uk

Drinkaware
3rd Floor (Room 519), Salisbury House
London Wall
London EC2M 5QQ

t: +44 (0)20 7766 9910

Ipsos MORI contacts

Louise Park
Associate Director and Public Health Lead
Louise.Park@ipsos.com

Stephanie Crowe
Research Executive
Stephanie.Crowe@ipsos.com

Ipsos MORI
3 Thomas More Square
London E1W 1YW

t: +44 (0)20 7347 3000
f: +44 (0)20 7347 3800

www.ipsos-mori.com
www.twitter.com/IpsosMORI

About Ipsos MORI's Social Research Institute

The Social Research Institute works closely with national governments, local public services and the not-for-profit sector. Its c.200 research staff focus on public service and policy issues. Each has expertise in a particular part of the public sector, ensuring we have a detailed understanding of specific sectors and policy challenges. This, combined with our methodological and communications expertise, helps ensure that our research makes a difference for decision makers and communities.