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## Executive Summary

### *Changing Scotland's relationship with Alcohol*

A doubling of alcohol related deaths in the last 15 years (ISD Scotland, 2011) indicates that action is required to reduce levels of alcohol consumption. A strong and pioneering set of policies have been laid out in the Scottish Government's strategic document for tackling alcohol related harm; *Changing Scotland's Relationship with Alcohol*. Although the evidence for the effectiveness of price and availability controls is strong at a population level, how these approaches will play-out across subgroups of the population is less well understood. Cutting beneath a national cultural relationship with alcohol are subgroup experiences where the role of alcohol is differentiated by class, gender, ethnicity and age cohort. In this report, we explore how a key population group, young adults, understand their relationship to alcohol and what influences their choices and behaviours. Further, we maintain a keen focus on a key factor which differentiates the experience of young adulthood – *gender*.

### *Alcohol, young men and young women*

Levels of alcohol consumption for young men and women rose rapidly during the last two decades and remain at a historic high. However, we should not assume that similarities in headline consumption indicate similarity in gendered cultural norms around alcohol – ideas of appropriate use, intentions when drinking or indeed associated risks. This report explores young adults' relationships with alcohol taking account of gendered difference and implications for reducing harm and consumption between genders at this age.

### *Research questions*

In the study we asked:

- How do drinking intentions change across the transition to adulthood and what can be done to reduce consumption?
- Has the drinking style of young men and women converged and what does this mean for current harm reduction approaches?
- What can we learn for policy and practice for action to reduce consumption at this stage of the life-course?
- What can we learn for the broader cultural aspiration of changing Scotland's relationship with alcohol?

### *Study design and methods*

Two forms of qualitative data collection were used; interviews with practitioners and decision-makers and focus groups with young adults. Twenty-one interviews with key informants explored the state of current policy and practice for reducing consumption and harm for young adults and the place of gender within it. Fifty-young adults took part in the focus groups where we explored the role of alcohol and gender in transitions to adulthood.

### *Key findings from practitioners and key informants*

A cross cutting theme in professional perspectives was the view that excessive alcohol consumption played a defining role in normative transitions to adulthood. The following specific points were also made:

- There was a reluctance to generalise about the alcohol experiences across all young adults as there was variety in the intentions and opportunities to drink. Gender was a key feature in differentiating these experiences and behaviours.
- Risks for young men were predominantly seen as stemming a culture of ‘hyper masculinity’ in which alcohol use was central to its enactment.
- Risks for women were grounded in a complex relationship between alcohol consumption and ‘appropriate’ forms of femininity where excessive alcohol consumption was both required to for ‘being one of the girls’ but simultaneously ran a risk of shame, guilt and embarrassment for compromising ‘appropriate’ femininity. Gender orientated alcohol information and health campaigns had contributed to this sense of moral jeopardy around female drunkenness.
- Risks of violence, assault and rape were seen to increase for women in cultures of normative drunkenness but also within a context of an increased sexualisation of young women in culture at large.
- Consequently, despite apparent gender convergence in amounts consumed, a sense that underlying risks and intentions about drinking differed by gender – this would require differentiation in responses in a manner which did not promote existing, damaging stereotypes.
- Many professionals worried about a separation of full adult and young adult worlds and shared understandings exemplified by the growth of social media use. Many recognised the importance of social media but did not understand how the form as well as content had changed in the new media landscape. The alcohol industry was felt to be ahead of health information on this front.

- Brief interventions were identified as having the potential to overcome population heterogeneity and connect with the personal circumstances and contexts of individual drinkers.

#### *Young adults' perspectives*

- Despite recognising the idea that excessive alcohol use was a key part of the contemporary experience of young adulthood, an understanding of their being distinct gendered norms around drinking remained intact.
- Female respondents described taking account of the risk of male violence as a key component of how they structured and understood their group behaviour on a night out. Women's accounts of collective group drinking (and censure against lone drinking) was described as a strategy to mitigate risks of male violence or assault whilst intoxicated.
- For male respondents group solidarity as a safety strategy was less prominent. Risks described included exclusion from commercial drinking establishments and threats of violence or arrest whilst out drinking.

#### *Wanting 'better stories'; maturing out of excessive consumption*

Both male and female respondents described factors that led to more moderate, less excessive drinking. The most consistently reported message was around a process of moderation linked to changes in identity as drinkers progressed through the transition to adulthood. Key processes included having a growing sense of self-confidence, more fixed friendship groups and a preference for higher quality leisure experiences, often linked to a sense of personal development and growth.

#### *The emergence of new risks*

Despite this progression, older drinkers (25-30 year olds) also described new risks associated with alcohol consumption in later young adulthood. They described less excessive but more habitual drinking occasions in which alcohol use had become a more taken for granted form of relaxation. Often the leisure choices available to young adults were cited as undermining intentions to drink less and to drink less excessively when they did drink.

### *Conclusions*

A key finding related to how female drinking styles had adapted to mitigate risks of intoxication. However, this foregrounding of group bonding as an adaptive response to external risks of drinking meant that the individual level risks associated with drinking were less easy to address.

Male drinking norms displayed less adaptation to risk and, as those who drank in unsupervised open spaces were exclusively men, highlights a gap in harm reduction approaches that tend to focus on drinkers in urban night time economies.

### *Recommendations*

The recommendations which stem from these findings include:

- Continuing to develop the potential of alcohol brief interventions (ABIs). In allowing the tailoring of advice, information and support to individual circumstances, ABIs respond to young adult preferences for strategies which connect at a personal level. Key informants felt further work was required in developing them for younger adult age groups.
- In addressing the background alcohol environment in which young people make decisions, and that also shapes the available options to choose from, the public health objective of licensing is a welcome step and should develop with a vision of producing varied night time economies that feature alternatives to alcohol consumption.
- Harm reduction is also required for young drinkers outside the city centre night time economies. In a manner that reflects responses to more affluent city centre drinkers, these approaches should recognise their alcohol use as adaptations of wider cultural norms and not primarily anti-social or criminal behaviour.

## Background

### *Changing Scotland's Relationship with Alcohol*

Substantial increases in alcohol related deaths and harm over recent years makes changing Scotland's relationship with alcohol a core national priority. Since the Scottish Parliamentary election of 2011, an SNP majority government has seen the reinvigoration of the commitment to the recommendations contained within *Changing Scotland's Relationship with Alcohol: A Framework for Action* (2009). Some high profile recommendations remain on the agenda at the time of writing, most notably the introduction of a minimum price per unit of alcohol. The framework document spelt out the underlying logic of Scotland's current strategy as a population level approach to alcohol, viewing alcohol as a societal problem, not just as a problem among high risk groups or individuals. As per capita consumption increases, so too do the proportion of harmful drinkers and per-capita alcohol related harm (Beeston *et al.* 2011).

Given that alcohol related deaths have doubled in the last 15 years (NHS Scotland 2011) strong action is required, yet the mechanisms through which policies translate into cultural change are only just beginning to be understood. The relative success demonstrated by the introduction of the smoking ban demonstrates that Scotland has been able to translate scientifically grounded knowledge and evidence-informed policy into action to transform cultural norms and individual behaviours around a harmful substance. The similarities between tobacco and alcohol are multiple. Among them are that they share a population level argument for action from mortality rates alone and that powerful industry interests, lobbying and marketing are present in the debate. Unlike tobacco however, there is considered to be a 'safe' level of alcohol consumption with risks to consumption being seen less in terms of the zero-sum that characterises tobacco. Alcohol, unlike tobacco, is also an important part of Scottish identity, culture and its economy. From the standpoint of the current historical moment, it is difficult to envisage alcohol consumption ever becoming a minority activity. This means that although much can be learned from previous success around tobacco, the transition from knowledge about the harms of alcohol consumption into workable policies will not follow an identical path.

In this report we explore how a key population group, young adults, feel about their drinking and what influences their choices with a view to informing strategies most likely to change their behaviours and norms around alcohol. Our previous research (Seaman and Ikegwonu 2010) identified the young adult group as one for whom the cultural norms in relation to alcohol provided significant challenge. Our qualitative work showed that young adults understood alcohol use, and moreover, excessive alcohol use as a 'default' choice for peer sociability. Furthermore, this was not understood primarily as individual free choice but as a strongly structured choice, shaped by what was considered normal for this age group by peers and non-peers alike.

The leisure market aimed at young adulthood also reduced the availability of other forms of (non-alcohol related) leisure. A more hopeful finding was the view that excessive, hazardous consumption was considered to be strongly linked to the experience of young adulthood and therefore time-limited. Many predicted moving-on from current alcohol practices and moderating their consumption along with the adoption of full adult identities. However, whether current consumption will be a temporary feature (and change longitudinally over time) or whether high rates will remain into later age stages (a cohort feature) is an open question and one that hangs over data rooted in current experiences.

Our previous analysis could be criticised for having a blind-spot, gender, which we attempt to redress in this report. By speaking to individuals of differing gender, socio-economic trajectory and ages, this report aims to understand how drinking practices change, or are predicted to change, as full adult identities are adopted. It does so in a manner that keeps gender and socio-economic background as key features in the formation of identities.

### *Are young adults already changing their relationships to alcohol?*

Levels of alcohol consumption for young men and women increased markedly during the 1990s and early 2000s (Office for National Statistics 2006). Although levels remain at a historical high, some researchers, observing a levelling-off of consumption rates, have asked whether we may be seeing 'an end to binge drinking' as the characteristic way young people drink<sup>1</sup>.

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<sup>1</sup> This was the provocation posed by Fiona Measham's lecture 'The End of Binge Drinking(?)' as part of Glasgow Caledonian University's Alcohol and Substance Misuse seminar series, 13<sup>th</sup> September 2011.

If such a change in norms and intentions around alcohol and intoxication occurred, would this in itself signal a coming improvement in rates of alcohol related harm? Or would new relationships with alcohol, and other sources of intoxication, indicate a continued, if different, patterning of harm? This question relates to the degree to which young adults are a homogenous group. Could some drinkers be showing moderation, even abstention, disguising the continued excessive drinking of others – the so-called polarisation thesis or case of ‘more alcohol down less throats’? (Balding and Regis 1996). Answers to such questions require a stratified and gendered exploration of how young adult drinkers themselves understand their relationships and intentions around alcohol.

### *Understanding the influence of gender*

The nearing of consumption rates between young men and women has raised questions as to whether male and female relationships with alcohol are increasingly characterised by similarity rather than difference. Some evidence suggests that young women’s drinking has begun to mirror styles more traditionally associated with young men in terms of heavy consumption and intoxication (Sweeting and West 2003) whilst other research reminds us that rates of hazardous drinking remain higher for males (Emslie *et al.* 2009).

Qualitative data will help identify whether the convergence of headline trends represents a convergence of drinking norms and intentions between genders or whether they mask fundamental differences in how young men and young women relate to alcohol and enact their drinking occasions. Understanding this better will inform the direction of the harm reduction strategies currently differentiated along gendered lines.

### *Research questions*

At the beginning of the project we were interested in developing our understanding of how alcohol relates to the transition to adulthood and in understanding factors that shape the statistically demonstrated alcohol consumption ‘arc’ (O’Malley 2004; Maggs and Schulenberg 2004) whereby excessive consumption increases and then decreases following the chronology of increased freedom followed by the adoption of adult role statuses.

Our previous research provided evidence that young adults too believed consumption observed in their late teens and early twenties was not indicative of future consumption but was time limited within the 'in between' experience of young adulthood (Seaman and Ikegwonu 2010). This belief sits at odds with data indicating that consumption rates remain hazardous for older cohorts as they obtain full, working age adult status (Smith and Foxcroft 2009) and moderation, relative to previous peaks, can still be hazardous or harmful. We were interested in exploring the relationships between intention and actual observed behaviours. What factors serve to keep alcohol consumption rates high or bring about a reduction as people move into later young adulthood? Given that many young people predict they will reduce consumption, what actions can be developed to seize the momentum for positive change identified by respondents in our previous studies?

These interests led us to develop the following research questions:

- *How does gender feature in the construction of 'appropriate' drinking behaviour in young adulthood?*
- *How do drinking intentions change across the transition to adulthood? What factors are more likely to lead to moderation of drinking for young men and young women?*
- *What factors and types of drinking environment do young people of both genders believe will lead to either moderation or immoderation of consumption?*
- *What can we learn for the broader cultural problem of tackling Scotland's problematic relationship with alcohol?*
- *What can we learn for policy and practice for this stage of the life-course?*

Hence, the findings have a degree of specificity in looking at a particular age group and social characteristic (gender) but also a generality that can inform wider discussion about changing Scotland's relationship with alcohol.

## **Current research thinking around young adults, gender and alcohol**

Young people's relationship with alcohol is already a much researched area (Emslie *et al.* in press). This study extends the existing field of knowledge by exploring the role of gender in shaping alcohol use during transitions to adulthood. Our interest in investigating the place of gender in shaping young adults' drinking styles follows our qualitative investigation of how social networks influenced young adults drinking choices (Seaman and Ikegwonu 2010). In that study, we noted a similarity between the normative accounts of men and women around drinking intentions that could support the convergence hypothesis of increasing similarity in how men and women relate to alcohol. However, we felt this finding could be accused as being a consequence of leaving gender underexplored in both data collection and analysis. This study was instigated to address the lacuna.

In the previous study, young adults described a scenario whereby excessive alcohol consumption had become normative within a cultural enactment of young adulthood, and supported (if not created) by the alcohol offer made to young people via commercial alcohol establishments and product marketing. However, despite the apparent universal acceptance of excessive youthful consumption as normal, experiences differed on account of socio-economic trajectories to adulthood. Key changes re-shaping relationships with alcohol were the attainment of paid-work, the formation of relationships and in a small number of cases, the adoption of a parenting role.

### *Cultural factors shaping young people's relationships to alcohol*

The relationship that a young adult develops in relation to alcohol is a combination of individual, structural and cultural factors. In debates about 'next steps' for policy responses to problematic drinking, the need for 'culture change' is often mentioned alongside interventions targeted at individual behaviours or restricting the access to alcohol (Scottish Government 2009; Beetsen *et al.* 2011).

However, culture itself is often under described in such discussions, particularly in terms of the processes by which individual, autonomous decision-makers engage with a set of values and expectations that they are as free to adapt and reinvent in their peer networks, as to follow without question.

There are at least three broad cultural influences which provide the raw materials through which individuals construct their identities and find a place for alcohol within their lives. These are: the idea of Scottishness and national culture; more globalised cultures of youth and young adulthood; and a gender dimension. All of these cultural themes will, to various degrees, provide a set of expectations about what constitutes ‘appropriate’ use of alcohol that will often be in conflict. Given the scope and timescale of this particular study, we do not explore the influence of ethnicity on constructions of cultural appropriateness around alcohol despite whole-heartedly recognising its importance. Similarly, class based identities are another important influence that have received attention elsewhere (e.g. Barnes-Powell 1997; Rúdólfsdóttir and Morgan 2009).

### *Alcohol and ‘being Scottish’*

Substantial literature makes reference to a tradition of heavy drinking in Scotland (Paton 1992; Plant 1992; Plant *et al.* 1992; Thomas 1992; MacDonald 1994; O’Donnell 2006; Craig 2010) and it is not uncommon to hear alcohol referred to as ‘part of the Scottish way of life’ (Bromley and Ormston 2005). Glasgow, and the West of Scotland more specifically, has also been described as having a particularly excessive relationship to alcohol, diagnosed as symptomatic of a wider cultural malaise of historical dislocation and the positioning of alcohol as an available means of escape from deprived living conditions (Craig 2010). Many accounts of contemporary drinking and alcohol use in Scotland focus on the social, shared and generous aspects of alcohol consumption (MacDonald 1994) and a stigma attached to abstaining (Bromley and Ormston 2005). Delk and Meilman (1996) comment on the high frequency and greater amounts of consumption *per session* of Scottish students compared to their American counterparts and conclude that excessive consumption was not *perceived* to be a particular problem because ‘alcohol use appears to be part of Scottish culture and is readily accepted’ (p274). This establishes an ambiguous position for alcohol in which ideas of associated harms challenge behaviours widely seen as commonplace for well-integrated adults.

However, increasing harm resulting from alcohol use and a changing set of background conditions has led policymakers in Scotland to question whether cultural attitudes in relation to alcohol should remain so tolerant of harm and misuse. The recent *Independent Enquiry on Scotland’s Drug and Alcohol Use* (2010) highlights Leon and McCambridge’s (2006) finding that despite historical antecedents, alcohol related harm

and mortality has increased in Scotland since the early 1990s. These increases have been linked to a harmful set of background cultural norms being given much freer expression, as alcohol has become 'cheaper, more widely available and consumed in much larger quantities by a much wider range of age and social groups' (p 7).

### *The 'alcohol offer' for young people*

Young people's drinking in Scotland differs to that of older cohorts in that it is characterised by a greater consumption of alcohol per session but with less frequency (Erens and Moody 2005; Bromley and Ormston 2005). Erens and Moody found that on a respondent's heaviest drinking day in the previous week, those aged 16-24 years were most likely to have binged (defined as eight units for males, six for females) at 62% for men and 56% for women respectively. In comparison, the percentages for all age groups together were 37% and 28% respectively. A concern stemming from this is that young adults identified as binge drinkers (i.e. reported getting 'very drunk' at least once a month) are more likely than other young adults to offend; 39% of binge drinkers reported committing an offence within the last 12 months, compared with 14% of regular drinkers (Richardson and Budd 2003). This highlights how alcohol, a risk factor in its own right, creates a broader set of risks.

Alcohol consumption plays an important symbolic role for young people in their transitions to adulthood. The legal age for purchasing and consuming alcohol in licensed premises coincides with the attainment of adult status. Moreover, learning and 'experimenting' with alcohol is understood as a normal part of 'growing up' (Pape and Hammer 1996; Barnes-Powell 1997; MacAskill *et al.* 2001; Coleman and Cater 2003; Bergmark 2004; Rúdólfsdóttir and Morgan 2009). Recent research into the manner in which age related alcohol norms have developed suggest the growth of 'hedonistic intoxication' (MacAskill *et al.* 2001), 'intoxicated weekends', 'moral holidays' (Parker and Williams 2003) and a 'culture of intoxication' (Measham 2006) as increasingly characteristic of the drinking styles of young people.

To achieve such intentions larger amounts of alcohol per session are required, underlining the separation of drinking occasions from more mundane, everyday experiences (Seaman and Ikegwonu 2010).

So what of the population level trends that suggest young people's drinking is showing a downwards trend (Smith and Foxcroft 2009)? Headline, age-segmented, figures may

mask a more complex picture of differentiated drinking patterns amongst young people. Noting that the numbers of young people who abstain from alcohol or only drink occasionally has increased, Measham (2008) suggests a 'polarisation' of drinking patterns. In explanation of these trends, some researchers have suggested that the current social status of young adulthood (as an in between state with social roles and identities still in formation) lends itself well to the use of substances such as alcohol in an experimental manner (Banister and Piacentini 2008). After the 1990s and the challenge of 'rave' culture to the youth alcohol market, alcohol marketers re-positioned their offer to young people (Brain 2000; Measham 2004). This 'hedonistic turn' in youth culture coincided with what Measham and Brain (2005) describe as the 'big bang' in sessional consumption for young adults, supported by the creation of niche café bars, dance and other themed bars as well as appropriately marketed drinks that commoditised an 'intoxicated' enactment of young adult identities. The authors also note that this development coincided with a period in which city centres repositioned themselves as destinations for consumption and leisure as social resorts, a development in which the promotion of the night-time economy was central.

### *Gender and drinking*

Against this backdrop of hedonistic consumption and the development of the night-time economy, do understandings of gender influence young peoples' drinking in their transitions to adulthood? Existing research highlights that over the last thirty years women's drinking has consistently increased, whilst men's has stayed constant (Plant 1997; Leon and McCambridge 2006; Plant and Plant 2006; Smith and Foxcroft 2009). This has led to speculation about 'gender convergence', the hypothesis being that traditional differences between men's and women's drinking are diminishing. However, differences in amounts consumed persist, such as men remaining the more frequent and heavier drinkers and experiencing the greater degree of alcohol related harm (Erens and Moody 2005; Plant and Plant 2006; Valentine *et al.* 2007; Smith and Foxcroft 2009).

Evidence from Scotland collected over the 1990s does however present a challenge to this view suggesting that young women have also begun to drink in a sessional and hazardous manner traditionally associated with male drinking patterns (Sweeting and West 2003). Although men still drink more than women across all age ranges in the West of Scotland (Emslie *et al.* 2009), out of 15 year olds, girls were slightly more likely to have become 'really drunk' than boys (74% compared with 71%, SALSUS 2008).

Explanations for the potential convergence in drinking styles include wider changes in the social and economic position of women over the last t30 years, underpinned by changes in family formation practices (in particular later child-rearing and marriage creating longer periods of financial independence), greater educational opportunities and career mobility. Such aspects chime with the feminist agenda of the 1970s which, as Oakley (1981) highlights, was based on principles of 'equal pay; equal education and opportunities; 24-hour nurseries; free contraception and abortion on demand' (p 30).

At the time of writing, Oakley noted that the preceding ten years had seen an increase in female alcoholics, with reports often emphasising 'social pressures' as the reason for this. The literature suggests that women who have problems with alcohol have complex needs. For example, links have been made between female alcoholism and childhood sexual abuse (Bass and Davis 1988). The increase in women's drinking has also been associated with a shift in service demands; Ettore (1992) argued that alcohol services have traditionally failed to acknowledge and reflect 'women's (multiple) problems, their situations and their needs' (p 42).

During the 1980s, 'public' houses had 'never really been public for women' (Hey 1986; p58). However, more recently drinking spaces have changed to encourage women's access. Partly in response to women's increased independence and consumer power, but also as a strategy to extend the alcohol market in the face of the economic restructuring of the 1980s that eroded the viability of the 'traditional', male, working-class pub (Tuck 1989; Goff 1990<sup>ii</sup>), the economic gains of encouraging female consumption have been seized by the industry. In the new 'chrome and cocktails' bars and clubs of the urban night-time economy, drinking spaces have become far more welcoming for contemporary women than they were for previous generations, particularly in the West of Scotland where women's historical exclusion from drinking spaces has arguably been particularly pronounced (Craig 2010).

Despite this shift, whether women are viewed as equals in drinking spaces remains open to debate. In their study of Manchester's night-time economy, Measham and Brain (2005) observed an absence of gender based constraints around intoxication and excessive behaviour.

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<sup>ii</sup> Cited in Measham and Brain 2005

Bergmark (2004) however maintains that separate discourses of femininity and masculinity remain evident including different standards of appropriate intoxication for men and women. Convergence in habits and drinking patterns does not imply convergence around ideas of 'appropriate' drinking behaviour for men and women. Barnes-Powell (1997) noted a selection of gender-based norms around appropriate behaviour in drinking spaces, including the amount of space men and women could occupy the production and consumption of women-specific drinks and a construction of 'ladylike' behaviour while drinking or intoxicated. More recently, Valentine *et al.* (2007) also comment that women's drinking, particularly drunkenness, is viewed more negatively than men's.

One element suggested to underlie traditional gendered understandings of appropriate behaviour relates to the effects of alcohol on sexual behaviour (Wilsnack and Wilsnack 1997; Wilsnack *et al.* 2000; Day 2003; Day *et al.* 2004; Dutchman-Smith 2004; Levenson 2009; Rolfe *et al.* 2009). Wilsnack and Wilsnack (1997; p3) maintain that women's drinking has been, and still is, 'discouraged or inhibited' because of a two-pronged fear that women are more vulnerable and at risk of sexual advances and that women themselves are less sexually inhibited. The young women in Sheehan and Ridge's (2001) study spoke of being treated differently to their male peers because, as females, they were perceived to be at greater risk of 'sexual harm' (p 359). The researchers describe the participants' reactions to this as 'amused, annoyed and frequently resigned to the double standards they experience'. Caution should be taken when generalising about the influence of alcohol on sexual behaviour, because differences exist between gay men, lesbians, bisexuals and heterosexuals (Donovan and McEwen 2006) that can relate to the deliberate use of alcohol to facilitate sexual encounters and also on account of internalised homophobia of lesbian, gay and bisexual young adults.

Although definitions of 'femininity' (and related, 'masculinity') vary, Scott and Marshall (2005) highlight an enduring contrast with 'masculinity' in regards to connotations of 'passivity, dependence and weakness' (p 281). O'Neill (1997), for example, highlights that 'normal' femininity is stereotyped as 'the good wife and mother, the good girl, reliable, passive nurturing, often fragile, gentle and emotional' (p 4-5).

Indeed, it has been argued that, traditionally, women's main function lies in the roles of 'wife' and 'mother' (e.g. Oakley 1981; Ettore 1992) and as primarily responsible for housework and childcare. Women with alcohol problems then 'present a special threat to this traditional female role and are considered to have deserted respectability in every area of their lives' (Ettore 1992; p37).

The influence of gender on shaping current experiences of drinking receives mixed responses in the literature. Homila and Raitosola (2005) found that women were more likely to have a role as a ‘warden’ or ‘moderator’ of their partner’s drinking, compared to men who were more likely to be encouraging of a partner’s drinking. However, Plant (2008; p166) disputes the idea that women fulfil this role in contemporary drinking contexts, and argues that young women are now drinking and behaving in ways that were previously the ‘prerogative of young men’. She describes the development of a ‘so called ladette culture’ in which ‘the old rules no longer apply’ (p 161). In a similar vein, Rúdólfssdóttir and Morgan (2009) add:

*‘young women do not have an established public drinking tradition on which to draw...they are learning to create and negotiate their own drinking values and ‘rules’ (p 502).*

However, as Watson *et al* (2004; p59) highlight, changes in contemporary drinking contexts have been ‘instrumental in achieving new expressions of identity’ for young men as well as young women. In terms of gender and contemporary society, traditional binary opposites of public/private and masculine/feminine appear to be less defined and clear cut than in the past. Walby (1999), for example, argues that ‘gender relations are being transformed’. Primarily concerned with employment, the author refers to age and differences between younger and older women’s experiences. She states that, in comparison to younger women in contemporary society, older women ‘built their lives around different expectations of a woman’s life, as a carer rather than employee’ (p 3). Younger women’s ideas about ‘gender’ may be very different to their older counterparts due to the fluidity of the components of gender identities over time.

### *Gender and young adulthood*

This intergenerational fluidity in the understanding and enactment of young women’s gender identity may go some way to explaining statistically observed differences in alcohol consumption patterns per session across age-segments.

The Scottish Health Survey (2010 for 2008) describes younger women consuming greater volumes of alcohol per session than older women who consume smaller amounts but on a more regular basis. Younger women were more likely to have

consumed six or more units on their heaviest drinking day. Of those aged 16-24, 34% had done so, and 28% of those aged 25-34, with rates declining steadily to just 2% of those aged 65 and over<sup>iii</sup>. This patterning of consumption, described by Plant (2008) as *concentrated* and *spread* drinking styles, underpins ideas of alcohol consumption changing over the life-course and hedonistic (or 'bingeful') styles being supported by a liminal and time-limited understanding of young adult drinking styles. However, understandings of lifecourse stages, and gender appropriate behaviours and activities within them, are also in flux. It should also be acknowledged that cohort effects may contribute to differences between younger and older people's drinking patterns (e.g. Smith and Foxcroft 2009).

As Plant (2008) notes, contemporary young women have little responsibility and more freedom, which can affect their drinking patterns. According to Plant and Plant (2001), the 18-24 year women's age group drinks the most, whilst the heaviest drinking age group of men is older, at 35 – 54 years. As the authors highlight, this suggests that drinking transitions may play out differently for men compared to women. Indeed, the young women in RÚDÓLFSDÓTTIR and Morgan's (2009) study believed that their drinking would change and 'decline once they settled down and started a family' (p 501), because they regarded alcohol as incompatible with motherhood. However, all the young men who participated in Watson *et al's* (2004; p51) study also predicted that they would reduce their drinking in the future. The researchers highlight:

*'Important transitions that have already affected participants include: adolescence, starting work, marriage, parenthood, unemployment and bereavement. Although these are common experiences each are individually experienced and impact in different ways.'*

Arguably, although growing attention has been directed at women's drinking recently, men's use of alcohol has not been explored in the same depth and detail. Although Plant (2008) highlights there is insufficient gender-specific information to fully understand the phenomenon of women's drinking, the same applies to the phenomenon of contemporary men's drinking.

Our research into young adults' understanding of the place and role of excessive alcohol consumption in the transition to adulthood (Seaman and Ikegwuonu 2010) found that a boundary that some young women put upon excessive consumption related to nurturing;

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<sup>iii</sup> <http://www.scotland.gov.uk/Publications/2010/09/23154223/33> (accessed 22/02/2011)

drunkenness in the company of children was seen as overstepping ideas of appropriate alcohol use. For fathers and future fathers, the need to hold down a job and provide for their family was seen as a potential moderator of excessive consumption.

Excessive alcohol consumption is also described as an available and normative activity through which to build relationships at a time of life when identities and peer networks are in flux. Sheehan and Ridge (2001; p365) refer to 'the power of the narrative' in creating the shared history of these peer associations and emphasise that:

*'Alcohol and bing(e)ing tales contribute to the fabric of these young women's lives with a heady mix of enjoyment, pleasure, confidence, fun, closeness, secrecy, friendships, explorations of relationships and sex.'*

Although the sample in Sheehan and Ridge's (2001) study consisted of females only, Watson et al (2004; p45) examine young men's experiences of drinking, and suggest that young men and young women drink for similar reasons:

*'Both are trying to negotiate uncertainty. Both seek to boost confidence through the safety of group membership and drinking.'*

Thus, although research suggests some aspects of young men's and young women's drinking are similar, a possible point of divergence is in the different aspects that become the focus in the creation of narratives and shared histories. It is within these differences that a more nuanced understanding of how alcohol use relates to gender within the transition to adulthood will emerge. A study that involves both young men and young women will allow for a more in-depth analysis of the role of gender in shaping drinking experiences, by exploring points of difference as well as similarity.

## **Study design and methods**

The study involved two forms of qualitative data collection: key informant interviews and focus groups with young adults. The key informant interviews took place early in the research process, which allowed for the issues raised to inform, and therefore strengthen, the design and development of the focus groups.

### *Key informant interviews*

The aim of the interviews was to gauge the current thinking in the alcohol field around the issues of young people, gender and alcohol. The rationale behind conducting key informant interviews was two-fold. Firstly, it complemented the literature review, by providing a more up-to-date and practice based insight into these issues. Secondly, it allowed for the views of experts in the alcohol field to be taken on board and fed into the design of the focus groups.

### **Recruitment and sampling strategy**

Initially key people/organisations were identified and contacted through an Alcohol Focus Scotland mailing list. The research team also generated ideas about where to gain further representatives, to ensure that people working with alcohol in a range of different capacities were invited to take part. At the close of each interview, individuals were asked to identify anyone else they knew who had particular expertise relevant to the project and subsequently some key informants were also recruited through a snowballing technique.

Aware that alcohol is approached from different, and at times competing, perspectives, a conscious decision was made to reflect this diversity in the sample. Representation was obtained from a range of sources, including from the voluntary sector, a statutory organisation, alcohol practitioners, academics, health promoters, alcohol education, public services, the licensing board, and the alcohol industry. Perhaps one of the biggest debates in the field recently has been the influence of the alcohol industry on health research, policy, and the perceptions of the public (e.g. Jahiel and Barbor 2007; Clarion Declaration 2008; PLoS Medicine Editors 2011). The Clarion Declaration (2008; p316), for example, notes that 'alcohol industries have an overriding requirement to maximise profit for their shareholders'.

Nevertheless, for this study, we felt that it was important to have this balance, to give us the opportunity to learn more about how issues around young people, gender and alcohol are understood across the board.

Interviewees were selected on the grounds of their professional roles within such organisations. Therefore, rather than name these individuals specifically, we refer to their professional role/area of expertise (see Appendix 1 for a full list of key informant interviews). This was highlighted to those involved at the time of interview. We felt this was necessary for the purpose of the report, to provide a sense of 'who said what', and to contextualise their statements.

## **Method**

Twenty-one interviews were conducted with key individuals in organisations for whom alcohol represented a key work issue. Interviews were semi-structured, using a loose topic list to ensure that relevant and comparable information was collected. However, the flow of the interviews was flexible and often led by the interviewee. As every organisation was different, this allowed time to be given to issues they felt were important. Each interviewee was asked at the start of the interview to describe their organisation and work. They were also asked, if applicable, to provide copies of materials they used with young people, which facilitated discussion during the interview about the extent to which these materials reflected issues of gender.

Most of the interviews were on a one-to-one basis, but some were in pairs or groups (from the same organisation), and a small number were conducted by telephone. The interviews lasted between 30mins and two hours and as arrangements were made to suit the interviewees, the vast majority took place at their workplace. Where appropriate, the interviews were audio-recorded and transcribed. In other instances, written notes were made and typed up after the interview.

## **Analysis**

The first step in analysing the key informant information was familiarisation with the data. This involved repeated readings of the transcripts and typed field notes. As we went along, initial points of interest relevant to the research were noted. When all the interviews were completed, the emphasis was on reading across the dataset to identify repeated patterns and broader themes. We adopted a constant comparative approach to provide a synthesis of the key informant data.

For the purpose of this study, the focus was on themes relating to alcohol and young people, gender, and gaps in current knowledge that could be explored more in the future.

### *Focus groups*

The focus groups constitute the main source of data collection for the study. The aim of this part of the study was to explore how young people's relationships with alcohol change during transitions to adulthood, with a particular interest in gender comparisons. To examine these experiences in sufficient detail, a qualitative methodology was adopted.

### **Method**

We conducted eight focus groups, with a total of 50 young adults aged 16-30. As Litosseliti (2003; p1) highlights, focus groups 'are set up in order to explore specific topics, and individual's views and experiences, through group interaction'. Participants were able to discuss in an interactive manner what they felt to be key points/stages during their transitions to adulthood, and the factors that might affect how alcohol is used.

As well as a focus group moderator, an arts practitioner helped develop activities for the groups so discussion was broader than might be expected within a traditional focus group<sup>iv</sup>. The focus groups were based around two main activities. In the first, participants identified what they felt were the positive and negative aspects of drinking, as well as ideas to reduce young people's consumption. They recorded their thoughts on t-shirts and fed them back to the wider group. In the second activity, participants created 'story boards' in the form of comic strips and/or speech bubbles. They developed two accounts of drinking: one to represent drinking during the ages of 16-18, and one to represent drinking during 25-30. Participants then presented their storyboards to the group, and similarities and differences between their accounts were discussed. They were also asked whether the experiences they described were specific to their gender, or whether young men and young women experienced and used alcohol in a similar way.

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<sup>iv</sup> A trial focus group was conducted prior to this, to check how the activities worked and to gain a sense of timings

There was a small amount of time allocated at the end of each group to answer any questions that participants had about alcohol and/or providing feedback to the group. Each focus group was audio recorded so that the discussion could be accurately transcribed.

### Recruitment and sampling strategy

The research design included specific details about sample composition, in terms of gender, age and educational level/attainment. The sampling strategy was structured in terms of two separate age groups – 16-18 years and 25-30 years – to capture young people at different points in their transitions to adulthood. The focus groups were organised so that participants were in a group with other people of the same age range, gender and socio-economic trajectory<sup>v</sup>. The rationale behind this was to capture a diversity of experiences and alcohol trajectories, and to ensure that focus group participants had a sufficient degree of shared experience to enable discussion. The following eight categories represent the eight focus groups conducted:

Female Aged 16-18 In post 16 education	Female Aged 25-30 Degree level attainment	Female Aged 16-18 Not in post 16 education	Female Aged 25-30 Below degree level attainment
Male Aged 16-18 In post 16 education	Male Aged 25-30 Degree level attainment	Male Aged 16-18 Not in post 16 education	Male Aged 25-30 Below degree level

A recruitment flyer was displayed in arenas such as libraries, bus stops, sexual health clinics, workplaces, and universities. Advertisements were also placed online, on University websites and Gumtree. We contacted local organisations known to work with young people, as well as utilising the existing networks of Glasgow Centre for Population Health (GCPH) and Alcohol Focus Scotland (AFS).

Recruiting young men aged 16-18 and not currently in education posed a distinct challenge. In the end, we recruited this group through a contact at a local college. The young men were on trainee courses for a range of vocations, including shop-fitting, plumbing, tiling and painting/decorating.

<sup>v</sup> Educational status/attainment was used as a marker for socio-economic trajectory.

Although they did attend an educational establishment, their focus was on preparing to enter the job market, rather than continuing on to higher education. Therefore, for the purpose of this study, they were considered to be sufficiently different to the 'in education' groups.

The overall sample comprised 26 males and 24 females. There were 29 participants in the younger age group, aged 16-18, and 21 in the older age group of 25-30 years. Twenty-four participants were categorised as on lower socio-economic trajectories, and 26 on higher trajectories (see Appendix 2 for more information on the sample). With the sampling frame set in terms of gender, age and socio-economic status, other aspects were more out of focus. For example, none of our participants were married (although four were cohabiting and two engaged), and only one was a parent. This may suggest our sample is more reflective of the going out population, but it is also a limitation because it does not capture those young adults who have undergone a transition related to parenthood and/or who drink primarily at home. Of the 50 participants, three were currently abstaining from alcohol. These were all males aged 25-30.

## **Analysis**

The data set consisted of verbal data (the transcripts of the focus group discussions) and visual materials (e.g. decorated t-shirts and comic strips/speech bubbles produced by participants). The process for analysing the data was based on Strauss' (1987) three stages of open coding, axial coding and selective coding<sup>vi</sup>. Open coding begins the process by breaking the data down into coded sections and organising the codes into broader thematic categories. Axial coding then explores the relationships between the thematic categories. Selective coding involves further developing the links between the categories and selecting a core theme. The final part of selective coding involves selecting relevant extracts to be included in the report. The qualitative software package ATLAS was used to aid the management and organisation of data.

Preliminary analysis began during the data collection process. Flip charts were used to identify key points as the discussion went along, which gave participants the opportunity to challenge points that were identified. Field notes were also completed and the researchers discussed emerging issues, which could feed into subsequent focus groups.

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<sup>vi</sup> This form of data analysis has been used in other qualitative studies into young people's alcohol use (eg Brooks 2009; Percy et al 2011).

We also produced a summary 'story' of each individual focus group. We felt this was important to gain a sense of the different focus groups, before they were fragmented in the coding process.

The open coding process continued with repeated readings of the data (both written and visual), noting areas of interest/ideas for codes. Initially, the male researcher (PS) focused on the female groups, and the female researcher (FE) on the male groups. Codes were developed and applied systematically to all the transcripts in ATLAS. New codes were also added as the process continued. This produced a large number of codes, which were grouped into broader thematic categories (e.g. 'Risks', 'Drinking intentions', 'Theories of gender'). During the next step (axial coding), the focus is on exploring and identifying connections between the different codes and categories. The 'Network map' feature in ATLAS was used to develop maps and define the relationships between codes. The 'Memo' function was also used to keep track of emerging ideas/hypotheses during this process, which could be examined further during the next phase of selective coding.

The third step in analysis was selective coding. This involved developing the relationships between the categories and selecting a central core category. The core category identified during the analysis was 'gender convergence?'. The final part of selective coding involves selecting relevant excerpts of the data that are used to write up and illustrate the findings of the data analysis. Throughout the analysis, the researchers met to discuss and compare emergent hypotheses. This allowed for an assessment of inter-rater reliability by checking that both researchers agreed, which reduced the likelihood of bias and 'selective perception' (Kreuger and Casey 2009: p115).

### *Ethics*

Ethical approval for the study was granted by NHS Greater Glasgow and Clyde (NHSGGC) Research Ethics Committee. Informed signed consent was obtained from every participant prior to their taking part, and they were encouraged to ask any questions they had about the research. To protect their identities, identifying features were removed from the transcription stage onwards. Before giving consent, focus group participants were informed of how their data, visual and verbal, would be used in the final report.

## Findings from key informant interviews

### *Excessive alcohol consumption in young adulthood as an axiom*

Although all key informants identified a need to improve understanding of young people's relationships with alcohol, the idea that excessive drinking among the young adult and teenage population was considered a normal aspect of growing up in Scotland formed the basis of professional perspectives on reducing alcohol related harm. The counsellor who reported 'young people have always done it' was not expressing an uncommon view whilst a representative from a national health promotion agency questioned the degree to which binge and harmful drinking was a recent development ('a myth'), believing it to be something made visible through improved data collection.

There was a universal view that alcohol consumption played a defining role in marking the transition to adulthood with its use in increasing self-esteem and confidence broadly recognised. Some focused on how alcohol was attractive to young people at a time when they were trying to establish their identities and 'fit in' with the world around them. A Community Safety Officer felt that "wanting to belong" was a "powerful thing" that contributed to another high profile youth policy issue, gang culture in Scotland. He reasoned:

*"That's why a lot [of] people get drunk. Not because they want to, I think, just because everybody else does – then be part of the crowd and you won't stick out."*

This he saw as a major obstacle to the reception of messages relating to moderate drinking:

*"How do you say to that young person who needs to belong to that social group, be an individual, step outside of it? I don't know if you can"*

The danger of not fitting in presented a challenge in the communication and reception of moderation messages in that there was a high 'cost' associated with their uptake. A worker at a young persons' health charity felt that, from the perspective of young people themselves, the health 'costs' of not feeling part of a peer group were given higher priority than any other threat to their long term health. An alcohol industry spokesperson consequently believed it difficult to disentangle alcohol from that period of life.

In an illuminating discussion he highlighted that their consumer research found the main issue for young people was “losing social currency” among their peers.

### *Young people as a differentiated population group*

Despite the universal centrality of alcohol in the experience of young adulthood, key informants resisted treating young people as a homogenous population group. The inherent difference across the experiences of young adults made it difficult, dangerous even, to make generalisations about how young people relate and experience alcohol in their lives.

We should be aware of how diversity and equality translate into approaches to tackle alcohol use among young people. For example, an industry representative reflecting on the findings of their harm reduction research, believed that industry-led initiatives (for example, *Drinkaware*) were best placed to target the group of drinkers they identified as ‘irresponsible shamefuls’, meaning the group that after excessive drinking, experience regret and embarrassment at their behaviour. This group was a component of a four-fold typology of drinkers based on dispositions towards excessive alcohol consumption. ‘Responsible in controls’ and ‘responsible enjoyers’ were not seen as a public health concern, indeed the latter reflects a public health aspiration of personal responsibility towards alcohol. However, a fourth group ‘irresponsible indifferents’ were identified as those who did not feel regret and shame following an excessive night out and were consequently less amenable to marketing strategies. He suggested that for this group of drinkers, the solution lies in targeted youth work or outreach projects and by implication was outside the industry’s remit.

Questions should be raised about how ‘responsible’ and ‘irresponsible’ dispositions emerge in the context of young people’s social and material environments, and whether there is a correlation between the experience of inequality or discrimination for example and the level of alcohol consumed. Nevertheless, it does highlight the complexity of young adults as a group in terms of dispositions towards alcohol and the need for different approaches to tackle different groups of young people and their alcohol use. Some groups are not targeted as easily as others. As a Community Safety representative put it, “I have never seen an industry campaign aimed at the street drinker.”

Many interviewees recognised that not all young people drank excessively, and acknowledged a dearth of understanding around the motivations and experiences of young people who already show moderation or do not drink alcohol at all. There was also an appreciation that the physical spaces and places in which young people drink have, in contrast to those of previous generations, produced a different manifestation of the alcohol offer made to young people. The influence of the night-time economy (NTE) was regarded by many as playing a part in escalating hazardous drinking on a more concentrated scale than ever before. The current NTE mix sees young people drinking and socialising in age-segmented spaces, often based in city centres. As one of the interviewees highlighted, the night-time economy of Glasgow city centre caters predominantly to the age group 18-25, where a 26 year old even may feel out of place.

Young people were also seen as an impressionable group of consumers for the industry to appeal to, being at a stage where they are forming their purchase and consumption styles (social marketing academic).

It was believed today's young adults experience a more prolonged 'going out career' than those of previous generations (alcohol researcher), due to the changing nature of the transition to adulthood. This interviewee also described how the young adults in her studies identified differences in how they drink across the transition to adulthood, having already changed their drinking styles once or even more. This indicates important age related changes in drinking styles that wax and wane across the late teens and early twenties more rapidly than in older age groups. Her research respondents differentiated between their drinking between the ages of 16 and their early 20s, and now considered themselves to be at a stage where they felt they had accumulated a certain wisdom that their younger self 'who didn't know any better' lacked. Consequently, we believe there is a need to better understand the changing role that alcohol plays along this transition and how it relates to wider aspects of their lives; what do young people at the various phases seek from their drinking and how does alcohol fit in with their changing priorities?

Another aspect of diversity in relation to drinking concerns the much broader cultural spectrum of young adults in Scotland and the Glasgow area than in the past. As the following quote notes, extra consideration is thus required in understanding alcohol use by black and minority ethnic (BME) young people:

*“One of the biggest changes, I’d suggest, right now is that young people aren’t just Scottish anymore. [There is] a big diverse range of cultures and races in Glasgow – the last time I looked, think there’s something like people from 49 different countries living within the city”*

Community safety representative

Reference here was made to a need to overcome language barriers and to better understand and develop more culturally appropriate and sensitive messages in relation to alcohol. Regrettably, due to time and resource constraints, this project was unable to explore this particular aspect of young people’s relationships with alcohol but notes that this is an area of significant research interest.

### *Gender as a feature in shaping risks?*

While the heterogeneity of young people was talked about extensively, interviewees also referred to a shared constant in relation to the exposure to ‘risks’ associated with drinking. The idea that drinking increased exposure to a great variety of risks was described as a ‘universal’ issue (Violence Reduction Unit representatives) for all young people. Indeed, a focus on risk had become the characteristic approach that many of the interviewees adopted when working with young people, in terms of increasing awareness and educating about risks and helping them to develop strategies and make informed decisions.

However, the form these risks took (whether related to health, the likelihood of accident or exposure to violence) was viewed as being predicated on the gender of the young person. Increasing consumption was seen as a factor for both young men and young women, but different risks were seen to flow from current consumption norms and practices, and the gendered features of the social context within which drinking took place. A key part of the differentiation process was how gender was used within marketing and promotion strategies. For young men, the key risk identified was alcohol related violence. Alcohol use was seen to feature within interpretations and enactments of masculine identity in a manner detrimental to health, wellbeing and life chances of themselves and others. For young women, there was a gendered violence correlate in relation to sexual violence and vulnerability. Other ‘female specific’ issues identified included unplanned pregnancy and regretted sex, body image and appearance issues.

As will be illustrated, some key informants felt some ambiguity in messages aimed specifically at young men or young women, given the potential to perpetuate stereotypes and to cloud issues of responsibility for sexual violence and assault.

### *Risks for young men*

The main issues raised by the key informants concerning young male drinkers related to being a victim or perpetrator of violence, gaining a criminal record and the short term health effects of hangovers. The idea of 'hyper-masculinity', seen to be deep rooted in Glasgow culture, was also raised with excessive drinking seen as constitutive of ideas of masculine behaviour. An academic researcher believed young men to 'glorify' excessive drinking, in a culture where capacity for drinking was linked to one's status as a man. As noted by one of the representatives from a national alcohol organisation: *"there's the cultural (idea) ... you're a man, hold your drink"*.

A representative from a violence reduction perspective felt that the feminisation of the workforce, the number of single parent households led by women, and the general absence of positive male role models, were factors complicit in the perpetuation of exaggerated notions of masculinity.

*"Personally, I've just always looked at it in that respect and just thought that particularly in Glasgow, drinking seems to be connected to that role of masculinity and what it is to be a man - you need to drink to do that."*

### *Young women*

Although women were considered to be drinking similar amounts to men, a key gendered difference was felt to concern how women negotiate risks to reputation and prestige around intoxication. Although the risk of gender based violence was implicit in talk about 'responsible' drinking, it was a different category of violence from that which affected men. As the violence reduction specialist put it:

*"The media seems to be desperate to find a big girl gang. I don't think there is one. You'll find instances where 3-4 girls have battered a guy or battered another couple of girls, but not sure that they're actually gangs in the sense that that's what they do."*

Consequently, there was a sense that despite quantitative shifts in women's drinking, men remain more likely to be linked to violence and aggression. As highlighted by one of the representatives from a national alcohol organisation:

*"We know young men are more at risk than young women of being attacked in the street by other men, fights breaking out"*

For women, hazard around prestige was believed to be connected to the risk of embarrassment, shame and guilt accompanying excessive consumption that played to cultural stereotypes of 'appropriate' feminine demeanour. Image-based issues such as weight, skin and hair condition, appearance and falling when drunk were cited as shaming for women but not mentioned for men. The performative enactment of femininity was also extended to 'being one of the girls' with arguments, emotional distress and letting yourself or the side down through impaired judgements also highlighted.

*"It can be about appearance and how they want to portray themselves and be seen. An example of this is a girl in 2<sup>nd</sup> year who snogged a boy in 1<sup>st</sup> year and got a slagging and it took weeks for that to go away".*

Such messages were said to play powerfully to women's capacity 'to blame themselves', and were seen as grounded in long-held cultural stereotypes. The *"ultimate clash"* as one informant termed it (alcohol researcher) however was between motherhood and alcohol. That women are advised to consume less alcohol for physiological reasons would also be cited but most key informants recognised the limits to health information approaches akin to the observed fact of young people *knowingly* consuming over their recommended intake.

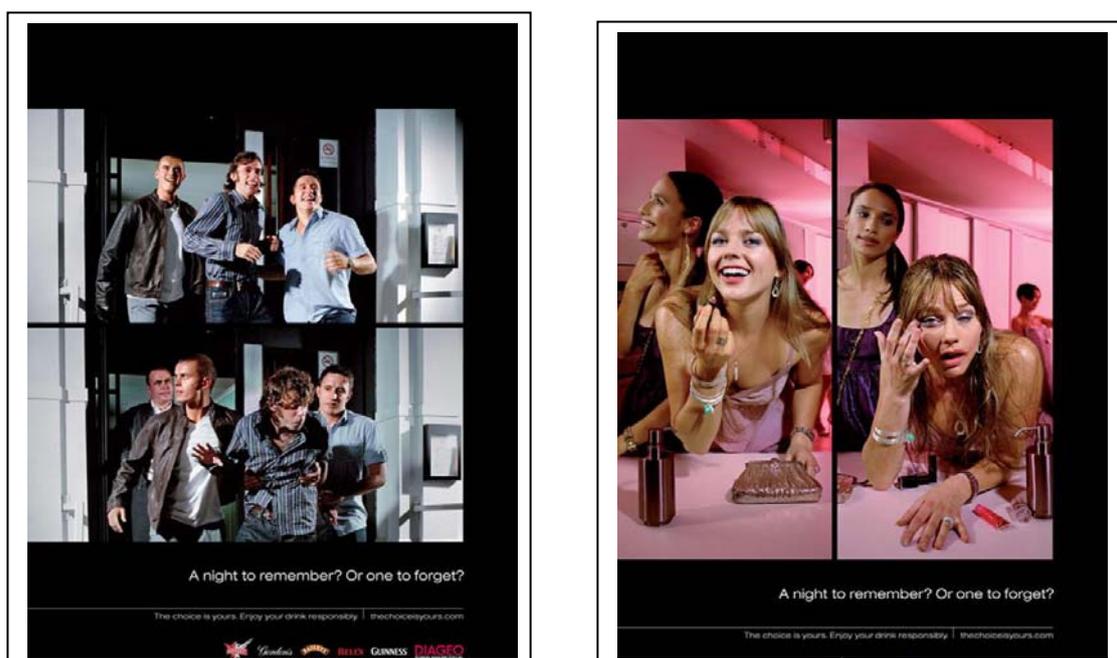
The alcohol researcher's investigations had revealed that women were acutely aware of their boundaries and carefully negotiated their femininity in relation to alcohol. Negotiation of these norms involved upholding group standards of acceptable drunkenness, deportment and dress. Whereas intoxication was seen as normatively acceptable, there were still differences in relation to dress, with group censure often being expressed around women seen as being too *"scantily dressed"*. Women in her (the researcher's) work had reported concern about how men perceived them, and that gendered double standards existed.

The researcher felt that this normative universe revealed that the female alcohol market had become crucially important for the alcohol industry. She told us that the young women involved in the research did not identify with the label 'binge drinker', but that they routinely acted in response to issues of safety and harassment they observed whilst out drinking. This included drinking so as not to lose control, looking out for each other and safeguarding against drinks being spiked. Whilst recognising that these steps were sensible when initiated by women themselves, when turned into broad base public health messages they have the potential to stigmatise female drinkers with *"the implication being that women are to blame for sexual offences if they have been drinking at the time"*.

The ambiguity felt around gender stereotyped messages was also expressed by a Community Addiction Worker:

*"I think some of the advertising campaigns have been ok. I think the one about the young woman who was so steamin' that the guy was actually disgusted with her. I quite like that, because it was about saying, trying to encourage women to have a bit of self respect. I think the undercurrent of it though, that you need to stay more sober so that you're more attractive to them, I had some discomfort about that. I think the guilt and shame associated for a woman stoating home drunk is different from a man. Men are expected to stoat home drunk"*.

**Figure 1 Gendered messages can reinforce stereotypes?**



## Action and strategies to reduce excessive alcohol consumption and harm

Key informants suggested that current strategies targeting alcohol consumption were not reaching all groups and that health protection activity informed by understandings of gendered responses to alcohol required more evidence to aid understanding of next steps. In terms of the 18-30 age range, a number of key informants highlighted that there is no strategy informed by understandings of gender at a national level. Instead, both genders are covered by general approaches operating at a population level such as Alcohol Awareness Week. Although, since the key informant interviews, the Scottish Government's *Drink Smarter* website has been launched, providing tailored advice for men and women but with the target age range being older adults rather than the young adult population discussed here.

For the young adult population, many key informants identified gendered risk intersected by socio-economic factors to produce further heterogeneity. Put simply, young people as a group do not share the same experiences and relationships to alcohol and strategies better need to reflect this. Therefore, strategies such as the *Drinkaware's 'Don't Let the Good Times Go Bad'*, aimed at 18-24 year olds in the student/professional demographic (mentioned by *Drinkaware* Young Adults Campaigns Officer) will not reach all young adults. As the representative from Community Addiction Services in the north of the city told us, assumptions of convergence between young adults of both gender are becoming more commonplace and can be obstructive to helpful understandings to inform practice and policy.

*"We still talk about young people as a group of young people. Young men, I think have always been targeted as the problem drinkers on the streets, hanging about in the community and now young women have been lumped into that. It's interesting, I was speaking to someone at the weekend, one of my friends, who said "oh, sometimes the young women are more frightening than the young men", and I thought what's that about? I think we've just lumped this problem group together and you know there's this real stereotype around it."*

She continued that the risks for male and female street drinkers are *“similar but different and they have a different impact on the longer term”*. She felt young people she worked with were growing up in a sexualised culture which *“almost borders on the abusive at times”* showing how the focus on apparent convergence of young drinkers of each gender re-focuses attention away from the problem of persisting gender inequality and associated harms.

*“We hear less about young women charging about the streets and causing trouble, but we hear young women talked about, almost their understanding of sexual relations being so desensitized that it is like no holds barred and that is quite worrying, in an emotional wellbeing way.”*

A risk reduction approach that recognises the different nature of risk for men and women necessitates a differentiation in messages. There was concern amongst key informants, however, that such messages should be well thought out and sensitive, so that they are not reinforcing stereotypes:

*“We make huge assumptions that women look after children and men get involved with crime. And while we need to take account of gender, we shouldn't be stereotyping or being sexist.”*

A representative for a national health organisation highlighted that there is scope for gender-specific strategies at a more local Alcohol and Drug Partnership (ADP) level. Other interviewees provided examples of local initiatives they were aware of, including a 'pink handbag' campaign (perhaps highlighting the underlying tendencies for gender stereotyping) through which information was tailored to young women with advice about staying safe on nights out. A national alcohol charity also worked with the Scottish Football League and their youth players, who are predominantly male, to offer training and advice on alcohol. Another example focused on young mothers in the West Lothian area. In 2003, a government backed national resource, Gender Issues Network on Alcohol (GINA), was launched to examine gender and alcohol issues. This has since been disbanded due to a lack of funding.

## *Communicating 'risk' to young adults*

Across the interviews, a range of issues arose associated with difficulties in communicating risk and alcohol related hazard to young people. One was the timescales involved in chronic alcohol use do not connect with the mindsets of young people: communications about alcohol related risks to young people tend to focus on short term risks or 'the here and now' (youth organisation worker). Such harm reduction approaches have a tendency to accept excessive alcohol use as a normal part of the young adult experience. The perceived universality of excessive consumption meant messages based around safe limits of consumption are widely accepted as ineffective. Indeed many interviewees were sceptical that an increase in knowledge of units led to behaviour change. As a worker involved in health promotion put it:

*“Repeating the limits to a young person, they’re not going to deal with it because they’ll think, “well, I drink more than that so deal with it’.”*

A recurring feature concerning communicating with young people that informants mentioned was a perceived cultural difference between educators, practitioners and policy-makers and the target audience of interventions. To address this the Scottish Government initiated a *Youth Commission on Alcohol*, and asked *Young Scot* to 'support young people to make suggestions for policy and action to change Scotland's culture in relation to alcohol' (Youth Commission on Alcohol, p4). Sixteen young people aged 14-22 took part in this during 2009, from across Scotland and from a range of socio-economic backgrounds. Thirty-eight recommendations were made suggesting that there was no single 'quick fix' solution.

At a more local level, our attention was drawn to the *Play Safe in Glasgow* campaign aimed at 18-30 year olds and stemming from Glasgow's city centre *Alcohol Action Group*. The campaign is based on three key themes: safer socialising, safer drinking and safer transport home. The 2006 edition of the campaign involved messages such as 'Safety in numbers?' and 'Who's taking you home?' The evaluation of the campaign identified 'A spew too many?' as a popular choice amongst participants. Recommendations proposed from an external evaluation included a push to become 'multi-modal' incorporating 'use of digital approaches'.

In terms of content, the line to be walked between 'having emotional appeal', being 'hard-hitting' and 'not condemning or preaching' (Harkins 2011) demonstrates the difficulties currently experienced in the social marketing-based harm-reduction approaches, where seemingly contradictory messages are hard to synthesise and have the potential to disengage those who do not find them credible or relevant to their own circumstances.

For our key informants, the expanded range of communication platforms currently available in the social media landscape added further complication to engaging young people with messages around alcohol. The post-web 2.0 era (that has allowed applications such as *YouTube, Facebook and Twitter*) has moved the Web from being simply an information-retrieval tool to one with a greater focus on end user involvement, so the person using the web is an active participant in producing content. This represents both a challenge and opportunity for those involved in the provision of health information. The challenge is that the provision of information has traditionally operated along the lines of a credible expert organisation broadcasting (or 'narrowcasting') information to an interested but passive recipient. The opportunity arises from the possibility to engage with end users through co-creation. However, it is still unclear whether the public will desire health information that includes features of co-creation or will continue to seek 'expert' sources to assist decision-making.

A representative of an alcohol campaigning organisation felt *"the days of the leaflet are numbered"*. Many of the key informants, whilst recognising the growth of mobile technology, internet and social media as key conduits of communication, were less able to describe the communication processes that should take place within them. Their fears tended to focus on their messages failing to connect with young people in terms of the verbal or visual language used:

*"I couldn't possibly design something that would make all women of 25 go "that's dead cool" ...they say when you see adverts on the telly, if you don't understand them, it's because it wasn't aimed at you."*

This reflects an understanding that cultures of young people are different from those of adults, not just in alcohol use but also in forms of communication. Many key informants struggled with the new media landscape, recognising its importance and the changed manner in which communication flowed, but often agonising about the content of messages rather than exploring new forms of engagement they make possible.

On-line presence still tended to focus on the provision of information, a strategy developed in the pre-web 2.0 world. A counter-example of this was the case of a local alcohol awareness project that, after delivering alcohol-training sessions to school pupils, set up a page on the social networking site *Bebo* so contact could be maintained. The representatives described the results as ‘organic’, because the young people interacted with the site in ways that the organisation had not anticipated by sending in recipes for non-alcoholic cocktails. This then sparked a shift in how the organisation used the site:

*“At [the] moment on Bebo,[we’re] asking children and young people to send us things in. That came organically because they’d already started doing that, they’d started making up their own alcohol free cocktail recipes and sending them.”*

Furthermore, rather than communicating directly with the young people themselves, they have a young person who, after consulting with the team, responds on behalf on the organisation. This ensures that the exchange is more equal and open and the young people are communicated with in their own terms. The representatives felt that this was essential, with one commenting *“not us, because I’m too old”*, with another joking that *“we can’t stand the bad spelling!”* Indeed, a number of the key informants talked positively about peer education and the importance of young people communicating with other young people.

**Figure 2** *Drinkaware* advert for an educational social network application



Representatives of public and voluntary organisations felt the alcohol industry was more advanced than they were in using social media. Many key informants had noticed how the social media presence of drinks producers and venues allowed young people to share photographs and messages; an on-line extension of alcohol as a medium of sociability. The *Drinkaware 'Good Nights, Great Mates'* application in which users could personalise and create persona for their friends (Figure 2) was cited as a good example of using social marketing thinking to engage young people. It was also felt however that the alcohol industry would retain an advantage in terms of using social media and their high levels of investment and research.

### *Alcohol brief interventions*

In light of key informant emphasis that 'young people' should not be considered a homogenous group, the development of alcohol brief interventions (ABIs) offers a means of personalising alcohol information to take account of gendered issues while avoiding generalisation. Although brief intervention is an umbrella term covering a range of activities, here we mean activities for those not seeking help from specialist services for an alcohol problem, carried out in general community settings and delivered by non specialist staff such as primary healthcare staff, hospital physicians, social workers and other non alcohol specialist professionals. These can take the form of simple ABIs – structured advice taking no more than a few minutes – or extended interventions which are structured therapies taking as long as half an hour and involving one or more sessions. (Raistrick *et al* 2006).

The focus is on bringing about individual behaviour change through an approach that is individually tailored and opportunistic in finding space for an intervention or discussion. A 'teachable moment' such as a visit to a sexual health clinic, can provide the opportunity for reflection on safety and hazard around drinking, that feels tailored to an individual's circumstances and their particular sense of gender identity. The representative of a sexual health clinic recognised the need for gendered health information within ABIs but felt there still needed to be more substance behind what these will look like for people in different age groups, and for men and women.

She also thought something additional was required for people who are not heterosexual:

*"because there seems to be evidence that they have greater issues with alcohol, quite often but, again, for a small proportion of the population, they're often going to be more vulnerable for all sorts of reasons and their needs in this area might well stay overlooked".*

A local sexual health clinic is currently undertaking a project that is exploring the efficacy of ABIs for young people up to 17 year olds visiting a sexual health clinic. Using the AUDIT (Alcohol Use Disorders Identification Test; Babor *et al* 2003), screening tool they offer brief interventions to those young people identified as hazardous or harmful drinkers.

They then plan to follow up that young person, by telephone, after three months and six months to examine whether behaviour change has occurred. Their monitoring and evaluation of this service will offer learning for future application of ABIs with this age group.

### *Drinking environments*

Beyond individual behaviour change, other approaches focus on alcohol as a public health risk. In recognition of the influence of the night-time economy (NTE), a public health objective has recently been incorporated into the licensing board's mandate. The Licensing (Scotland) Act 2005 came into force in September 2009 and identified five objectives to restrict the availability of alcohol to protect the public interest. These include preventing crime and disorder; securing public safety; preventing public nuisance; protecting children and protecting and improving public health. However, at the time of interview the representative from the licensing board told us that how this objective will be met and assessed is yet to be finalised. The licensing representative emphasised that the licensing board operates in a legal capacity and approaches alcohol from a different perspective to that of public health. This suggests an on-going need to build capacity within the licensing board to understand what the objectives mean in practice. In their recent '*Rethinking alcohol licensing*' report, Scottish Health Action on Alcohol (SHAAP 2011) highlighted the conceptual issue for licensing boards, used to dealing with individual premises,

in moving to a more up-scale understanding of alcohol in relation to public health. This presents a dilemma for local authorities for whom alcohol licensing touches upon issues of economic growth and the vibrancy of city centres as well as public health concerns, often with tensions between them.

A suggestion was that the licensing objective could involve more consideration and monitoring of how many licenses are granted within a certain area of space; Sauchiehall Street in Glasgow city centre was used as an example of an area with a high density of alcohol outlet provision. *The Best Bar None Award Scheme* that operates in the city centre area, which tries 'to encourage the responsible sale of alcohol' was cited as an example of work targeted at changing the alcohol environment of the urban NTE. Through the scheme, bars and clubs are encouraged to promote safer drinking through the spreading of best practice and training to help staff manage premises responsibly. The alcohol industry representative felt thinking about city centre provision in broad terms was required, as well as by an outlet by outlet approach. He proposed the criterion of whether families and children felt comfortable using the city centre at night as a litmus test of whether the NTE offer had become too skewed towards excessive alcohol consumption. The presence of children and families, he believed had an improving effect on adult behaviour and required there to be destinations that appealed to older drinkers and parents as well, rather than just young adults. The mix should also include destinations that do not sell alcohol. An award for urban destinations that meet the criteria of offering a diverse and family friendly environment could be used to increase awareness. Such an approach would be consistent with the aspiration of *Glasgow's Health Commission* to make Glasgow a child friendly city and the licensing objective to protect children from harm.

### *Population level approaches*

Scotland's culture was understood to be a key factor in shaping young people's attitudes to alcohol with a perception that the nation lacked a consistent alcohol message and failed to balance the positive and negative aspects of drinking. Unlike health behaviours such smoking, government recommendations are based on the idea that there is an acceptable level of drinking that can reduce risk, and alcohol is recognised as playing a vital cultural role in facilitating leisure and conviviality. The acceptability and availability of alcohol makes messages around safe drinking more nuanced than those currently offered around other drugs.

One area of contention was the alcohol industry's role in the promotion of healthy consumption messages. Those with a public health interest were sceptical of industry involvement in safe consumption messaging. Their concerns are supported by an analysis of alcohol marketing documents given to a House of Commons Health Select Committee (Hastings 2009) that evidence industry encouragement of excessive consumption within the youth alcohol market. A counter argument presented by an industry representative was that alcohol marketing, particularly but not exclusively, for higher end products, benefits from associations with responsible consumption.

A central plank of population level approaches is the focus on pricing and availability of alcohol. As highlighted by Beeton *et al.* (2011) Scotland's current strategy is based on implementing shifts in legislation and policy to bring about population level change. The theory of change is underpinned by the hypothesis that reductions in population level consumption precede reductions in harmful consumption. To achieve a decrease in consumption, changes are identified at the economic, physical and social levels (pii). The actions set out are reductions in the affordability and availability of alcohol, and changes in attitudes and norms (*ibid.*). A representative of a national alcohol campaigning organisation, amongst others, felt that introducing a minimum price for alcohol was necessary given the difficulties in communicating health messages to young people. As well as reducing population level harm, increasing the price of alcohol (or at least not making it available cheaply) sends out a message about the place of alcohol in society.

According to the theory of change, reductions in population level alcohol consumption are expected to lead to cultural norms about alcohol consumption which will sustain reduced levels of harm. However, other key informants felt action primarily aimed at the level of culture was also required. Alongside the need for regulatory actions, it was believed collective attitudes needed to be targeted also. For some, such as a local alcohol education charity, it was felt important to start at primary school level. They felt strongly that a compulsory programme should be rolled out to all schools across the country, to ensure that all young people receive similar education about alcohol from an early age. Others stressed the need for all to be 'on message' around the ambition to change Scotland's relationship with alcohol.

A Health Promotion Officer told us:

*"I think it is about everybody taking responsibility for educating, not something that happens just in schools, it should happen in home, in communities they live in, by the people around us... as parents we have a huge influence on the way our children grow up and the attitudes they have."*

A representative of a national health organisation highlighted that different professionals and practitioners vary in approaches to alcohol and perceive problems associated with alcohol, through the lens of their professional practice and the issues they come into contact with. The police, for example, *"see the effects throughout the night including domestic violence at the end of it"*. As discussed previously, the licensing representative considered alcohol from a different mindset to that of public health, focusing more on the legal implications of licensing. Such varieties in approach emphasise the need for alcohol professionals and practitioners to work together to tackle the alcohol issue in Scotland but also the need to integrate complementary strands. There was a concern across the interviews that, particularly in the current economic climate, funding for evaluations, through which evidence about new practice, interventions and strategies can be synthesised to further develop best practice, is becoming more difficult to secure.

### *Messages for the research*

The key informants' views helped shape questions to be explored in the focus groups with young people. Informants demonstrated an understanding of the influences on how people drink, recognising these occur at multiple levels (societal, gender, social group, city environment, drinking environment etc.). Culture, environment, peer group and individual choices all offer scope for intervention. Key informants identified a need for further understanding in the following areas:

- At the level of culture, there was a felt need for the population to share an ambition to change Scotland's relationship with alcohol. A number of questions are relevant in this regard, including how close are we to this ambition? What is the level of 'cultural readiness' to change and what are the existing barriers in changing mindsets?

- Cultural norms were recognised as being mediated and reinforced by the physical and social environments we live in. Approaches should reflect the existence of multiple alcohol environments, from the night-time economies of vibrant city centres to homes and to informal drinking spaces such as parks or streets. Whereas the former category is well provisioned in terms of safe drinking messages, how these spaces conform to public health objectives is still poorly understood. Further, alcohol consumption by often younger, more vulnerable drinkers outside of the formal NTE has proven a challenge to both industry and public agency approaches. What messages can be developed for intervention here?
- Another cultural change in the lives of young people is the use of social media which presents a challenge for public health information providers who have traditionally operated on broadcast and later 'narrowcast' models of dissemination. In the new media age the distinction between the producer of the message and the recipient may not hold, as all participants in digital communication are empowered to produce messages. Although social media is not a central feature of our research, understanding gained from how people interact, plan and re-live nights out should contribute to finding ways around this challenge.
- It was evident from the key informant interviews that our focus on gender difference and gendered experiences should be maintained, and the findings used to contribute to the on-going development of messages and approaches. Key informants suggested that further work was required to understand how gender is performed across different socio-economic experiences, particularly those outside the more aspirational city nightscape and drinking environments that have been the recent focus of health information and harm reduction.

## Findings from focus groups with young adults

The focus group data suggest that young adults shared with key informants the idea that alcohol is an important feature of young adulthood in Scotland. The normalisation of excessive alcohol consumption featured for both sexes, however gender focused discussion revealed differences in the underlying intentions of drinking, suggesting gender convergence to be a surface phenomenon and not borne out in reality. The nature of these differences further refines the distinct sets of risk that are shaped by gender.

Personal and group safety was a key priority for young women while out drinking and there was evidence that strategies for keeping safe have been integrated into gendered drinking norms and behaviours. There was also a sense of ambivalence about excessive alcohol consumption itself. Although enjoyed and whole-heartedly entered into, excessive alcohol consumption was also seen as stigmatising and damaging to reputation and self-identity. Excessive consumption was maintained in the belief that one would eventually 'move on' or grow out of it. However it is also clear that the choices presented to young adults at this stage of life, particular around age-appropriate leisure, encourage greater individual level consumption and a reduction in the perceived variety of alternatives to drinking.

### *How does gender shape drinking practices?*

Given the fact that all respondents spoke at length and in depth about the role of alcohol in the experience of being a young adult in Scottish society, it is tempting to claim evidence of gender convergence in relation to alcohol use and intentions. Alcohol was seen as a vital component of leisure and integrative activity in young adults' lives and culture more broadly. Both genders cited the importance of drinking and *drinking spaces* in the creation of leisure, sociability and friendship; activities that came to the fore in young adulthood. Consequently, leisure and alcohol use could become synonymous.

*“Alcohol becomes the hub, it symbolises how the night is going to go. Culturally in Britain friends are made in pubs or through the stuff you take. If you've got really good friends in work, in order to get them into a friendship out with that scenario, you need to lose the barrier, you say 'let's go to the pub.'”*

Female 25-30 with degree level education

This view was also supported by those who did not drink. A male in his mid-twenties who described himself as a recovering problematic drinker found that the centrality and ubiquity of alcohol in the culture of socialising produced “a *dangerous environment*” for him. Forms of socialising that did not feature alcohol felt inappropriate, even if drunkenness was not the sole intention as he said in this quote below.

C: *“Do you want to go for a coffee?’ would be a strange invite I think, whereas ‘do you want to go for a pint?’ it’s like ‘yeah let’s go for a pint!’”*

AL: *“Yeah, and if you say ‘no I don’t fancy a pint’ then there is a good chance you won’t be meeting up on that occasion.”*

Male group 25-30 without degree level education

Focus group discussions revealed how the language of alcohol consumption provides a useful *lingua franca* for talking about friendship and conviviality, particularly in making the leap beyond work-based friendships. “*Meeting for a pint*”, “*a drink after work*” or “*raising a glass*” are phrases with symbolism, beyond the consumption of drink explicitly described. The language of drink was understood as a short-hand for potentially difficult negotiations of friendship, removing the need for (re)negotiation of expectations afresh on each occasion.

As has been described in our previous report (Seaman and Ikegwuonu 2010) a further hazard is produced when the role of alcohol in sociability is replaced with *drunkenness* and the pursuit of intoxication for these ends. A creeping tendency to conflate alcohol’s role in the pursuit of leisure and friendship with drunkenness was described:

A: *“If we are going out or something’s happening I would have a drink, and I do generally drink to get drunk.”*

C: *“That is the same as me. I think that’s pointless to just sit and have one drink, you can never just have one drink.”*

Female group 16-18 not in education

For both genders, the excessive use of alcohol was seen as normal in constructing the narratives and self-identities which are culturally associated with this age stage. The normalisation of excessive drinking was often supported by other adults complicit in creating a cultural narrative around drinking in young adulthood. A female focus group for example discussed the case of a works manager who gave younger people special dispensation from sanctions if they came to work hungover. That older workers would be

disciplined sent young people a message that excessive consumption, experiments and mistakes were part of the experiences that made up young adulthood and were tolerated or even encouraged, in the workplace. This idea could also play out in young people's self-narratives of their own young adulthood in which key alcohol related milestones such as *"doing the naked mile"* created a shared experience and rite of passage in one peer group (Male 16-18 in education).

**Figure 3 Drawing by female 25-30 with degree**



### *Shyness, confidence and alcohol: overcoming a common problem in young adulthood*

Both genders reported alcohol being used to overcome shyness and increase confidence in social situations. This issue is crucial to understanding the value of alcohol use in young adulthood through its efficiency as both a solution to a confidence deficit and a form of socialising in and of itself. Using drink to increase confidence was offered as a common sense explanation. This role was often understood positively and was seen as preferable to the alternative: exclusion from peer based social activity.

Alcohol was therefore seen to have a positive effect, making friendship groups out of peer groups:

*“Like by the end of high school I knew everyone and was mates with everyone, but like second or third year, I barely knew anybody, so alcohol really does become a social aspect and you really start knowing people more because of it. And that is when all the shy people come out of their shells because they’ve had a wee bit alcohol, a wee bit of drink. See I’ve got a couple of mates who are dead shy but once they’ve got a drink...”*

Male 16-18 in education

The current discourse around confidence as a health and wellbeing issue perceives it as both an individual deficit (to be fixed by therapeutic intervention) and a cultural condition (to be addressed through collective reflection on our thought-processes, behaviours and reactions to others as a nation, see Craig 2003). Whereas both approaches offer important means to address our individual and collective mental health, less is said about how lacking confidence in young adulthood may in part be structured by the peculiarities of the life-stage itself.

A young adult is unlikely to be a full social adult, with increases in the age at which key markers of full adult status are achieved (income, an identity defining job, living away from parents, partnering, starting a family). Further, social life in young adulthood is taking place away from the support of family members and more in the public life of the peer group. It was common to hear of alcohol being valued for helping with confidence not only at school age but also into early young adulthood whenever situations still required to be 'eased':

*“You get confidence, you open up, talk to each other more, I guess. When you’re young you find that kind of difficult, so maybe drinking kind of eases the atmosphere a little bit.”*

Female 25-30 with degree level education

## *Gender differences around confidence and alcohol: Being comfortable in public space*

Although both males and females cited improved confidence or loss of inhibition as a benefit of alcohol consumption, it is important to note that there were gendered differences too. A key difference was that female respondents referred to a set of anxieties around conveying outward composure when out and feeling pressure to embody and deport oneself in a manner appropriate to 'feminine' norms and standards. Dress was described as a vital component of the going out experience for women which could simultaneously stem from and exacerbate confidence issues. *"Making yourself look all nice"* (Female 25-30 without degree education) was a foremost intention within drinking occasions, but for some this expectation produced pressures. For example, one female respondent spoke of the challenge of wearing certain forms of clothing when out in clubs and bars, an element entirely absent from male discussions. A related challenge to maintaining an outward sense of composure came from the need to dance in front of people. This feature, not cited in the male groups, could be aided by the consumption of alcohol.

*"I don't like going out being sober because I'm not very confident. So, it just kind of gives me that wee confidence boost to go out dressed the way I am and stuff and kind of go out dancing basically."*

Female 16-18 in education

*"I'm self conscious about dancing."*

Female 16-18 in education

Alcohol was also said to remove the discomfort and unease stemming from others in the venue being drunk. Drinking therefore was not only about the discomfort of not fitting-in but also about matching the standards and expectations of young people's drinking spaces, which unlike other spaces, foreground intoxication.

A: *"Maybe you wouldn't want to drink but you just do because everybody's drinking and you know you're going to be in a mood if everyone else is just shouting at you because they're drunk or trying to pull you up to dance and they're like getting their groove on and you're like trying but you're not drunk".*

J: *"...you look really silly if you're sober".*

Female 16-18 not in education

Men too could feel this pressure to be able to act in a manner prescribed by the circumstances- *“You have a heightened awareness that everyone around you is drunk and that bothers you”* (Male 25-30 without degree level education). So for both genders, there was a shared sense that the commercial places where alcohol consumption took place required the achievement of intoxication for full participation. For the men, comfort with themselves in the social space of clubs and bars came through having a drink to hold. In one focus group a lengthy conversation explored the grounding nature of *“having a drink in your hand”*.

N: *“See if I’m in a club, I don’t know what to do with my hands, so if I’ve got something to occupy my hands it’s alright. If you don’t have a drink, I get kind of nervous. It’s not the fact it is alcohol, if it’s a soft drink I would be fine with it because it’s in your hands. I’m dead fidgety and my hands are always busy, so if I have something to hold onto it’s fine.”*

S: *“Aye, because if you’re sitting just kind of not really talking to anyone and you’re fine with it, just kind of soaking in the atmosphere and all that. But if you just sit there with your hands in your pockets without a drink, you just look like some kind of loner.”*

A: *“Not part of it, aye.”*

M: *“Part of the experience perhaps. So like a gig, having a pint in your hand is part of the package and perhaps you feel more engaged with that package if you have the pint.”*

Male group 25-30 with degree level education

For men, ‘having a pint in your hand’ seemed to be enough to give them a sense of belonging in drinking spaces. Interestingly, this group suggested that a soft drink would make an acceptable substitute and would satisfactorily complete ‘the package’ (*“vodka and Cokes look exactly the same as Cokes”*) but one introduction that fundamentally changed the experience was ‘the plastic cup’ which was seen as downgrading an important element. A plastic glass, although introduced as a safety feature of drinking environments, was seen to reduce the quality of the drink being consumed, and instead brought to the fore its active ingredient and associated effects.

In contrast, there was no evidence of the same relationship to 'holding' a drink for female groups. Rather, their sense of belonging within drinking spaces stemmed from sharing the drinking experience with other people. In fact, the opposite view of holding a drink was expressed by females, in that a drink could be cumbersome in a manner that (perhaps counter intuitively) increased consumption whilst out.

Awkwardness was compounded by other factors including the price (specifically the cheapness) of drinks, fears about spiking (which meant girls were more likely to hold drinks when on the dance floor) and queues. These combined to produce a situation whereby the cheapness of a drink determined the length of the queue at the bar, the number of drinks bought to avoid re-queuing and the speed at which these drinks were consumed so that dancing could continue unencumbered. Such a mindset could also encourage the choice of shot drinks (*"because you don't need to carry it around with you, you just slam it down there and then"*, Female 16-18 not in education).

A: *"I definitely drink faster in clubs because you go up to the bar and you think the bar's busy so you'll buy two at a time and you don't want to be standing with two drinks, so it's like get rid of one."*

E: *"...they can't really stop queues."*

A: *"...it's because the drinks are so cheap as well it's like a pound a drink"*

R: *"...so you are more inclined to buy four rather than just get one."*

Female 16-18 not in education

### *Cultural identity – Scottishness and alcohol*

Alongside ideas of normal young adulthood as a life phase, enactments of Scottishness were also cited as key influences on how both genders drank. It could be argued that Scotland's historically 'problematic' relationship with alcohol has, until recently, been seen as a male problem. That female problematic drinking was likely to have existed behind closed doors, being kept hidden, supports rather than refutes this claim. For the young adults we spoke to, although problematic drinking was understood as a Scottish problem, it was by no means understood as a Scottish *male* problem. However, it would not necessarily translate as a brake on consumption for either younger female or male respondents.

*“For such a small country but with a massive alcohol problem, we are just constantly confronted with it and sometimes when you are younger, you’re just like, well let’s deliver on that promise.”*

Female 25-30 with degree level education

Many identified the origins of their current attitude to drink within their upbringing. Alcohol in Scotland was also seen as ‘an issue’ in public policy discourse as well by parents and educators. This could lead to drink being imbued with both danger and allure. Familiar comparison with countries where alcohol was not seen as such a public health issue were set against Scottish experiences. The absence of normalised moderate consumption in family environments (the ‘*French children have wine at family meals*’ idea) coupled with strong warnings against alcohol as a feature of upbringings resulted in an eager anticipation of alcohol for those growing up in Scotland.

*“Whereas for us, if you are caught drinking when you are young it is a bad thing. So it makes it more fun to do, so maybe if it was more acceptable and a levelling thing [abroad] rather than a sort of a big event.”*

Female 25-30 with degree level education

With this awareness that underage drinking could land them in trouble, participants talked about formative drinking experiences being secretive and furtive affairs and selecting their drinking locations accordingly:

*L: “ I know a lot of young folk like underagers they go down there, and because the nearest road comes up the top then it’s all the way downhill, down another hill. And all the way down like next to the river that runs through it and they all go down the bottom down there because the police can’t get a car down far enough. If you saw people coming down everybody will either run or just go really quiet if it was dark.”*

*M: “Aye, it was the same in (my home town). It was motorway flyovers were the popular ones, like just underneath them.”*

Male 25-30 without degree level education

Many felt it a contradiction that people in Scotland encountered so many warnings against alcohol that were at odds with the apparent acceptability and centrality of it in society.

*“I don’t know what it is like in your circles, if you find that everyone talks about drink. In my life, in my work, in my social life, going to the local shop, everybody is talking about drinking.”*

Female 25-30 without degree level education

A feature of Scottish adolescence that was considered a particular national characteristic was the ‘empty’ or house party in the family home in the absence of parents. This element of Scottish coming of age was seen to cut across generational experiences and had become a recognised, if not always approved off, rite of passage.

N: *“It’s the way you’re brought up.”*

M: *“Aye your parents did it. My mum used to tell me stories about when she went to parties and folk were being sick downstairs and stuff. I suppose it’s just part of the tradition.... I would say that everybody who is sixteen to eighteen in Scotland has experienced a house party of some description.”*

Male 16-18 in education

Other nations’ views of Scottish drinking culture were also used to support the view that Scotland’s relationship with drink was pathological:

*“You don’t hear about people having wild eighteen year olds in France. I’ve got a Chinese friend and he’s over here doing a year. He says in China no one goes to a nightclub unless they are rich, everyone just goes and plays table-tennis. So he is everyday ‘are you going to The Garage [local nightclub popular with students] tonight?’ Oh he is loving life at the minute, a different world I think.”*

Male 16-18 in education

However, not all cultures were considered to have healthier relationships with alcohol. A Polish respondent felt his experience of drinking in Glasgow was moderate compared to the pattern of drinking considered normal back home. However, there was a pervading sense that Scottish culture around alcohol was two-faced, being characterised simultaneously by both deep concern and enthusiastic embrace. This was evident in the views of the respondents themselves who could extol the merits of a night of heavy consumption one moment and the next recognise not only the health harm but also aspire to spending their leisure time more meaningfully.

## *Beyond gender convergence: Differences in female and male drinking intentions*

Although in the balance of the focus group data there was a high degree of similarity between genders given for why young people drank as they did, this should not be understood as supporting an argument for comprehensive gender convergence around drinking intentions and styles. Even if objective measures such as quantities being consumed suggest a coming together, when we compare men and women in finer grained detail with regard to the intentions and understandings of what is being achieved in drinking occasions, evidence of gendered difference emerges.

For female drinkers, the consumption of alcohol was understood as a means of obtaining group membership and bonding. The primary motivation described was not to achieve drunkenness for its own sake, but to express friendship and togetherness through the shared use of alcohol or intoxication (*“It’s how we show our love, getting absolutely steaming and then looking after each other. It’s how we show our appreciation for each other”, Female 16-18 in education*). Female participants would therefore feature their relationships of care toward one another as an element of their story, a feature they believed absent from men’s experiences.

Figure 4 illustrates a recurring theme of women’s stories – the loss of a friend on a night out, who, through the concern of her peer group, is eventually returned to the fold. In concluding the story of a lost and subsequently found friend, one narrator told us; *“that wouldn’t have happened with boys, they would just go away and leave without saying”* (Female 16-18 not in education).

Figure 4 Comic strip drawn by females 25-30 with degree level education



The reasons why women expressed greater care and concern for one another related directly to gender based risk – *“I think guys are probably a wee bit more fearless, they’ve got less to worry about I think, if they are alone and drunk, they’ve got less to worry about than if a girl is alone and drunk”* (Female 16-18 not in education). The imperative that women ‘maintain the group’ on a night out continued into standards for conduct when partnering on a night out. Leaving the group unannounced after meeting a potential partner, as well as being considered unsafe, was also seen to contravene group standards of ‘appropriate femininity’.

*“Because like if a girl doesn’t come home that night everyone’s going to be like ‘oi, slut, where did you go?’ Whereas if a guy doesn’t come home that night the boys are like “good man” that kind of thing.”*

Female 16-18 in education

This quote suggests it was women as much as men who labelled their female peers to maintain a norm of female group solidarity on a night out. Ideas of appropriate femininity around alcohol practices also featured in a discussion of why young women considered it inappropriate for women to enter bars alone.

- PS: *“So why don’t you like being in a pub on your own?”*
- L: *“It’s just like not cool [laughs].”*
- A: *“Aye. I probably got that from my mum that women shouldn’t be in a pub themselves, it doesn’t look very nice if you’re sitting in a pub yourself drinking.”*
- L: *“I don’t think it is nice”*
- A: *“I don’t think it’s nice either.”*
- L: *“To be honest, I think women shouldn’t”*
- PS: *“Not very nice because?”*
- L: *“We’re all ladies.”*
- A: *“Not very lady like [laughs].”*

Female group 25-30 without degree level education

Whereas it would be an overstatement to say that getting together with partners (or ‘pulling’) was off the agenda for women, it was considered to be more of a central and up-front intention for male counterparts, revealing how men featured group togetherness less prominently. Below, two female respondents describe a drawing one of them produced depicting male intentions on a night out:

- E: *“He’s moved on to the club after and he’s changed from drinking like the casual pint onto spirits. It’s more about trying to pull. Guys are more likely to break away from one another. This guy’s alone at the minute trying to pull.”*
- R: *“But he’s alone, he’s still alone and what we thought was, through the whole night, the most sociable time for a guy is perhaps at the pub beforehand. From then on it’s they’re single and ready to mingle!”*

Female group 16-18 not in education

The group-centred intention around female drinking shaped events earlier in the evening (before going out). The phenomenon of ‘pre-drinks’ had a precise set of meanings for the women we spoke to, and was considered by both men and women to be a bigger part of the evening for women. For men, drinking at home in groups was described as a result of being, or looking, too young to gain entry to commercial drinking establishments or as having a cost implication. A group of 16-18 year old males commented on how much more central ‘pre-drinks’ were for their female friends.

- A: *"I go to parties in the halls of residence all the time, it is mainly girls at the parties because I think guys mix more in pubs. But the girls do it more in their flats and have some wild parties."*
- N: *"... when you are in the pub it's mainly like 75% guys."*
- A: *"Girls take longer to get ready don't they?"*
- M: *"Aye, the pubs are shut by the time they're out."*

Male group 16-18 in education

Female respondents too discussed how 'pre-drinks' was a more female style of socialising.

- E: *"...you never really hear guys going 'come over to mine for pre-drinks'"*
- C: *"...let's all get ready together" [laughs]*
- R: *"Not going to happen."*
- E: *"Not a thing guys do."*

Female group 16-18 not in education

As well as getting ready together, catching-up on news and information was a central feature of pre-drinks for women. This was easier to achieve in the relaxed, less self-conscious 'home' environment prior to the public space of commercial establishments. Interestingly, discussing which male peers people were intending to get together with was acceptable at pre-drinks, suggesting that planned getting together was considered more acceptable than haphazard, unplanned encounters. This also supports the hypothesis that female drinking was about shared experience – knowing who was interested in who bonded the group through possession of each other's personal information.

Figure 5 Drawing from female 16-18 in education

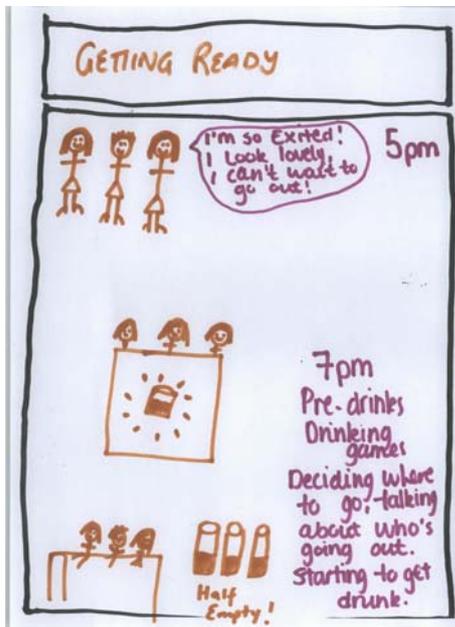


Figure 6 Drawing from female 16-18 not in education

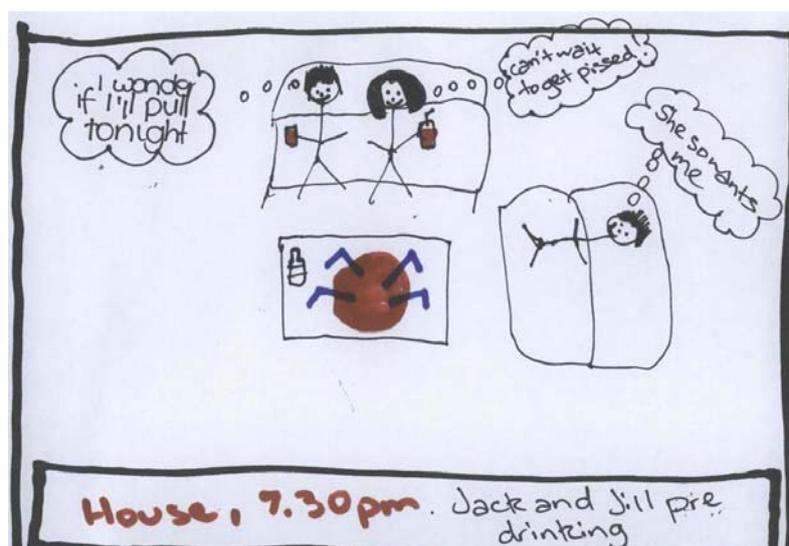


Even the manner in which drink was consumed could be shaped by the intention to engineer a shared experience, as in the following drinking game which was designed to equalise the level of drunkenness experienced.

*"What we'll do is, we'll get a big bowl and fill it with vodka and we'll put diluting juice in and water and ice and everyone gets a straw and drinks it. That's what we do before we go out. So we usually get totally ready and then we'll do that and then head straight out. Just so we're a kind of happy drunk. We're all at the same level of drunk as well, if that makes sense."*

Female 16-18 in education

**Figure 7 The Vodka Bowl: female 16-18 in education**



### *Gendered risks*

As well as divergence of intentions, there was evidence of a different ordering of risks and perceived risk for men and women whilst out drinking. For both genders, one of the most frequently discussed risks was a risk to reputation through decisions taken under impaired judgement. Risks of violence were also identified, but again this area of risk showed gendered difference.

In terms of risks, female respondents worried about memory loss or black outs and the damage to interpersonal relationships and group esteem that could entail. Women were generally ambivalent about displays of drunken behaviour although they stated drunkenness as an intention. They often felt uncomfortable witnessing other people's drunkenness as it could reflect back to them their own behaviour – seeing themselves as they saw others behave. No one wanted to be *“the girl crying in the corner”* (Female 25-30 with degree). That was considered to represent a loss of self-respect and pride. Not having a clear recollection of the previous night meant that people could not be sure whether they had acted in a manner that might cause regret or shame. In particular, damaging relationships with friends and peers through drink impaired judgement or argument was something many had experienced – and feared repeating. When memory loss happened, the friendship group became a resource for piecing together the evening.

- J: *“The memory loss the next day frightens me, like I totally blackout I have no idea what I’ve done the night before like near enough every time I drink.”*
- K: *“We usually need to patch things up, we’re like detectives trying to look through our texts and then we talk to people.”*
- J: *“And everything kind of comes together and you cringe [laughs]”*
- C: *“That’s what I do and try not to think of it, I just put out of my head what’s so embarrassing”*
- J: *“But yeah, I just get a total blackout of memory, I don’t remember nothing.”*

Female group 16-18 not in education

For men the risk to reputation described from impaired judgement or black outs involved letting oneself down (*“making an arse out of yourself”*, Male 16-18 not in education) or *“going home with the wrong person”* (Male 25-30 in education). A key feature of maintaining judgement for men related to avoiding fights and violent encounters with other male peers.

For women, the most serious risks associated with memory loss or black outs were sexual assault and rape. The possibility of having drinks spiked took issues of black outs potentially out of the realm of individual drinking decisions. Avoiding risky situations through loss of awareness was an important focus of young women’s drinking experiences and was a key function of the group solidarity that had become central to the organisation of their nights out. Collective ‘keep safe’ strategies included going out in mixed sex groups to help keep unwelcome male attention at bay (*“I just feel safer with guys, you know they’ve got an eye on you, like watching people around you. I just feel safer”*, Female 16-18 not in education). But more often women described strategies that involved looking out for each other. This could involve someone taking responsibility for staying in control although this did not necessarily imply that this person stayed sober. Women also took personal responsibility for not leaving the group without telling anyone. They also took personal responsibility for having an awareness of the risk of spiking and of making poor judgements when drinking.

*“Don’t leave your drink down. See if it’s a house party and guy’s like ‘oh I will go and get you a drink’ like make sure you see the drink being made. Like if you went back to someone’s house after a night out just make sure you can see him pour the drink so you know they are not putting something more into it.”*

Female 25-30 with degree level education

*“I wouldn’t wait on a taxi myself or anything, I always make sure I’m with friends.”*

Female 25-30 with degree level education

L: *“I would never take a drink off a guy ever”*

A: *“No, either would I.”*

L: *“Like I don’t care if it was Brad Pitt, I still wouldn’t take a drink off him”*

Female group 25-30 with degree level education

For younger men, the risks stemmed from same sex violence (although women were not immune to fights) and from being denied access to commercial drinking spaces through appearing either drunk or underage. Male participants also mentioned concerns about the effects associated with long term alcohol abuse such as losing jobs, friends and family.

Women too felt that men were more likely to end up in fights and that alcohol could increase their aggression levels. One factor that compounded the likelihood of men experiencing violence is that their early ‘going out careers’ were more likely to take place in informal drinking spaces such as parks or streets where local tensions already existed, and not within the monitored environments of pubs and clubs. On the storyboards that the young men produced in focus groups, depictions of drinking in informal spaces included parks and back alleys. A group of younger men not in education also depicted being picked up by the police as a routine hazard of their early drinking experiences. Male and female respondents differed crucially in terms of the places in which drinking took place. For women, the private home replaced the park or street as the place where early formative drinking occurred because of their acute awareness of the risks facing them in public space. Men, although described as ‘fearless’, also suffered the risk of violence but their strategies for keeping safe were not as well adapted or rehearsed as those of the women.

## Maturing out of excessive consumption – what do young adults believe works?

A key focus of the research was to explore factors that may lead to a reduction of alcohol consumption and to safer drinking in general. To investigate this we asked respondents to think about the factors that either had already led them to reduce their alcohol consumption or they felt might bring a reduction or safer consumption if put in place in future. As well as discussing these factors in focus groups, we asked people to write them down on the sleeves of t-Shirts after spending some time thinking first about the positives, and then the negatives associated with alcohol and drinking occasions. We have summarised the written answers in Table 1 below, showing what young adults felt would be moderating influences.

**Table 1 Summary of moderating influences from t-shirt exercise**

		Male	Female
16-18	Not in ed.	Nothing/No point (x2) Change drinking spaces Cost/pricing	Better Information (x2) Health (physical) Next day/work/interference with life Shame/regretful experience Cost/pricing
	In ed.	Cost/Pricing (x2) Health (physical) Change drinking spaces	Health (physical) (x3) Mental Health Lessons from experience (x2) Shame/regretful experience (x2) Cost /Pricing Alternatives (activities other than going out) Increase in self confidence
25-30	w/o degree	Cost/Pricing Lessons from experience Shame/regretful experience Given up/ in recovery Health (physical) (x2) Better information	Cost/Pricing Driving Alternatives (soft drinks/food) Alternatives (activities other than going out)
	w. degree	Next day/work/interference with life Lessons from experience	Alternatives (activities other than going out) Next day/work/interference with life Desire for personal growth/ quality experiences (x5) Change drinking spaces

Table 1 is based on an exercise that was conducted at the start of each focus group, to encourage discussion. Therefore, it gives a good indication of how the different groups understood moderating influences at the beginning of the research contact. It is clear that women cited a greater variety of moderating influences than male respondents but that many of the factors were shared by both genders. However, no influences were universally cited by all groups at the start of research. Caution should be observed in interpreting this table as a final reflection of which factors were likely to moderate influence in each group. For example, the younger men in the top left hand box did not indicate factors that would be coded under '*shame /regretful experience*' in the t-shirt exercise but did discuss this later with reference to unplanned sexual encounters. However, as a general guide the table gives a feel for the range and diversity of issues brought by each group.

The message is that multiple influences on moderation co-exist. One set of influences relates to the way alcohol is made available: factors such as the cost and pricing of alcohol, the available (or more pertinently, unavailable) alternatives to alcohol within the bars and clubs, and the nature and drinking spaces young people consume it within. A second set focuses upon the products of health promotion around alcohol related harm – such as better information and concerns around the health consequences of drinking. A significant number however are about personal trajectories and growth. These include lessons from experience (such as learning to know your own limits) that are closely allied to shaming or regretful experiences related to drinking. Having something else to do the next day (such as work or another activity) was also a widely cited influence. One group (Female 25-30 with degrees) took this a stage further citing a desire for personal growth, self-improvement and friendships grounded in something other than the commonality of shared drinking experience. Such factors at this end of the spectrum reinforce drinking not as health behaviour but as cultural capital, self-identity and social participation.

Across the groups there was a sense of excessive alcohol consumption as a knowing expression of relative immaturity linked to the freedom and carefree experience of young adulthood. Despite this, there was not a sense that moderation automatically came with maturity. In fact many discussions centred on how proactive steps needed to be taken to moderate consumption once maturity brought a reflection and stock-take about where drinking trajectories were heading. In aiding this new direction, many respondents listed ideas that could support more positive choices.

## *Pricing of alcohol*

There was a sense that the choice to drink alcohol and to drink it beyond safe guidelines was all too much embedded within the social lives of young adults in a manner than undermined positive choices. Most accorded with the sentiment that *“the association between drinking and enjoyment .... is real and true”* (Male 25-30 with degree) and it was within that context that pricing became a problem. As people matured their drinking style, they would report happily paying more for a drink if it reflected an improved drinking experience, and in so doing, reducing the amounts consumed over an evening. Not only was alcohol often cheaper than soft drinks, it was also seen to offer better value than non-drinking alternatives. One group discussed the student experience at a local University whose student bar had closed down and had run a number of successful student events without alcohol. Those in the group who had attended felt the nights *“had proved that you don’t need alcohol to get people together”* (Female 25-30 in education). A more common experience however was of cheap alcohol sales in youth orientated drinking establishments increasing consumption.

Beyond commercial drinking establishments, the use of alcohol within leisure could also be increased through pricing mechanisms, such as supermarket special offers, which ‘made sense’ economically but created the potential for hazardous alcohol consumption at home.

*“Three bottles of wine for a tenner in ASDA, they should do away with that because that’s my problem. See if I pick three bottles, that’s my problem if it is in the house I will drink it.”*

Female 25-30 not in education

## *Improving health information – the challenge of connecting personally*

The provision of information around the effects of alcohol was more contentious in discussions about what might lead to more moderated drinking styles. It was contentious because health information was already widely available and was not felt to noticeably change behaviour for respondents or their peers. Knowledge about units was a case in point. Although all had been told about safe levels of drinking in the past, they had chosen not to remember it *“because the units are so tiny, you don’t really acknowledge them”* (Female 16-19 not in education). Some believed harder hitting information was required at an earlier age.

A comparison was made with drug information, which people felt had a much higher profile than alcohol in school-based health education. This was felt to be out of proportion with the actual risk posed to young people, who were far more likely to encounter alcohol than they were illegal drugs. An innovation from smoking prevention was the use of shocking and hard hitting imagery on product packaging. Some felt this was a powerful tool but others, including a smoker herself, felt it would not change behaviour.

There was consensus however around the idea that health information needed to 'connect personally'. This is a challenge for information providers: how do you 'connect personally' with a heterogeneous population, each aware of his or her own 'individualised' relationship with alcohol? As the discussion around unit information and use of images revealed, even within subgroups of the population (represented in each focus group) what 'connected personally' changed from person to person. The implicit risk in failing to connect was of eroding the credibility of the message. Many in the groups felt that if messages connected to their own personal concerns around alcohol they would be more likely to have a greater impact. This could push along the momentum for change already established themselves. Such trigger points were in the realm of subjective experience (many referring to personal reactions and experiences as a trigger for reflection on their personal consumption habits). For example, one female spoke about how, after a particular bad drinking experience, she now reacts negatively to the smell of that particular drink. Others with experience of alcohol abuse in their family histories felt this made them more likely to seek out and remember alcohol harm information. Appealing to an individual's personal trigger points is difficult at a population level. However, in one way it was already happening informally: friends posting images from nights-out on social media was met with ambivalence from many of the young people and seen as particularly negative when the images confirmed fears they had about how they appeared or acted when drunk.

### *Moving-on: De-centring alcohol use from leisure*

A more cross-cutting factor for moderating consumption style was the desire to 'move-on' from a particular stage of life and to adopt more mature leisure choices. The momentum for change came from young adults' changing relationship priorities, work and changes in their peer group but also their changing sense of who they were and where their life was going. For both men and women, as they moved into their late twenties, certain drinking spaces were considered increasingly less appropriate.

*"A lot of my friends have just had babies and got married and I've moved in with my boyfriend. Everyone's just more settled and there's more things going on rather than everyone just going out and partying at the weekend."*

Female 25-30 degree level education

*"Once you hit twenty-three you can't be seen in a club ever again. It's just, you don't want to be that creepy older guy [laughs], so you've only got five years to do it."*

Male 16-18 in education

*"You're experimenting with drugs and everything until you're about 22 in my case when I started getting a handle on life and I knew which direction I wanted my life to go and what life I wanted to live... and it has definitely shaped the way I am and I don't really regret much of it."*

Male 25-30 without degree level education

Both sexes cited increased confidence as an important feature underpinning a change in drinking style. A particular feature was of no longer worrying about 'missing out' on drinking occasions and feeling less pressure to 'fit in'. Confidence in the security of relationships gained in later young adulthood meant drinking intentions shifted from a means of widening social contact and forming new friendships to an appreciation of existing ones. As well as confidence, the greater appreciation of leisure time (*"the weekend becomes more precious to you"* Female 25-30 with degree) also features, with less emphasis being put on gregarious fun for its own sake. This was captured in the comment *"you want better stories to tell people than I got really hammered again"* (Female 25-20 with degree). There was also a growing attention on the authenticity of situations and of how activities undertaken in leisure time relate to a sense of identity that, unlike in earlier years, appeared less fluid and was beginning to set.

This would lead to the foregrounding of hobbies and activities which allowed expression of identities and personal growth, such as rock climbing, learning languages or crafts. As with drinking in early adulthood, these non drinking activities would be used to express elements of personality that were felt to be inhibited through work-based identities.

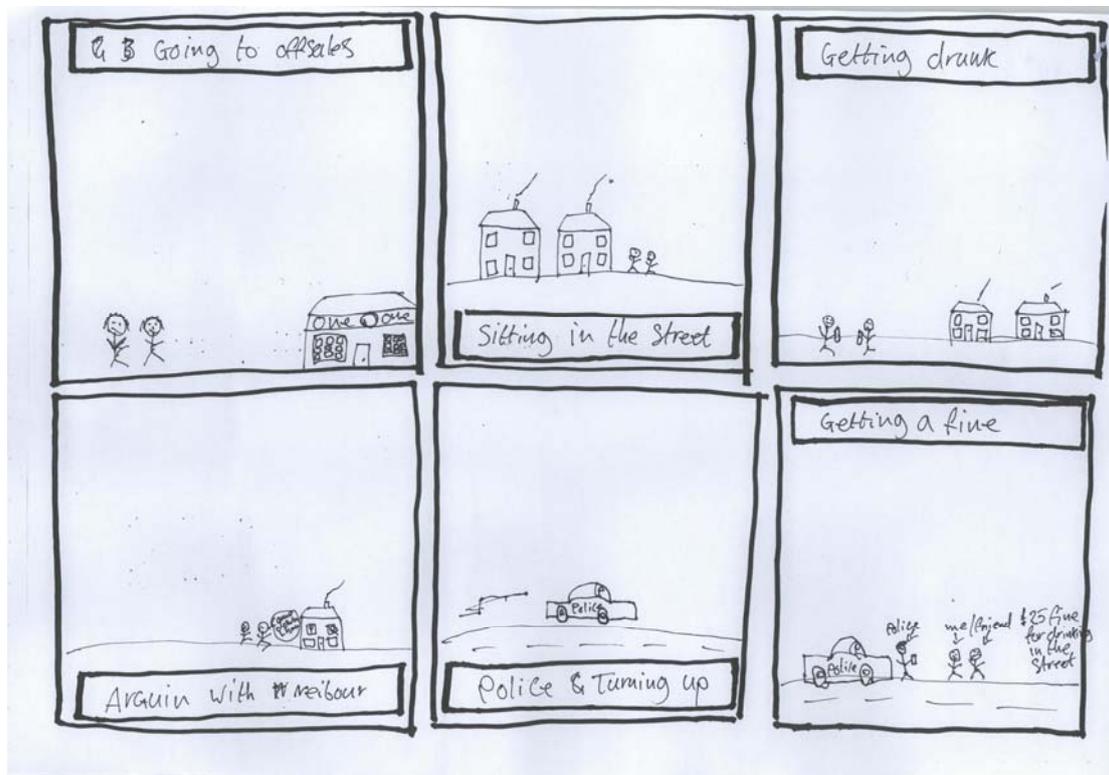
### *Gender and moving-on.*

The experience of moving-on and socialising in different ways also had a gender dimension. Male respondents spoke of “*feeling more mature*” in a pub and progressing towards an experience “*not more civilised (but) having a different view on what socialising means*” (Male 16-18 in education). The exclusion from adult drinking spaces experienced by some younger men was also lifted, allowing safer drinking and forms of leisure.

*“You’re not going to be roaming round the streets, you can get into pubs, you cannae get stopped or anything.”*

Male 16-18 not in education

**Figure 8 Male 25-30 without degree (drawing of when aged 16-18)**



Some men however would also describe later age stage drinking as lacking the excitement of younger age drinking. This was in contrast to women, for whom the centrality of group bonding in drinking occasions had been more important than the pursuit of intoxication for its own sake.

**Figure 9 Male 16-18 in education**



*"I've settled down and I'll have a mortgage and a motor to pay off and probably a wean by that point. I know the clock says half ten but I will probably have been in my bed since half eight."*

Male 16-18 in education

### *Gender and risks associated with mature drinking styles*

#### **Women and insidious harmful drinking**

Female respondents expressed concern that less excessive but more frequent drinking became a problem as they matured. Moderation was often referred to as a style and intention of drinking rather than a reference to the *actual* amount consumed. A risk identified was of a more relaxed, habitual style of drinking that, paradoxically, meant that drinkers were less aware of harms.

*"Whereas before it was bingeing, now maybe you'd have a glass of wine every night for like three nights in a row and then be like 'wait a minute, wait a minute, I didn't even notice I had that'. Before you would always know you were out this night or out that night which was a specific drinking thing rather than just a relaxed attitude towards it."*

Female 25-30 with degree level education

A key difference between men and women in describing the risks associated from more mature moderated styles reflected the group maintenance intention described earlier by female respondents. For women, risk was seen as a reflection on group, as much as individual, behaviour. What did promote more moderated stances was a growing recognition of health consequences and a loss of the feeling of 'invincibility' that accompanied earlier young adulthood. However, when the health consequences of drinking were seen as group decisions rather than personal choices, actions could become harder to monitor and change.

*"This is sort of a more typical night out now; someone would invite you round for dinner on a Saturday night with cocktails. Everyone brings a few bottles of wine with a bottle of vodka or something. After dinner everyone's a wee bit tipsy so we decide to go to the pub. The pub closes; someone has this great idea of buying wine from behind the bar to take home. Everyone gets back to somebody's flat, get the music going. Dancing gets started, more people get invited round and it just turns into a bit of a mess ... next day you wake up wishing you were dead, until you speak to your friends and realise everybody else feels the same, so you all sort of meet up for food and hair of the dog."*

Female 25-30 with degree level education

**Figure 10 Drawings from females aged 25-30 with a degree**



### **Men and the spectre of alcoholism as an identity**

Men also began to question the health consequences of extending excessive relationships with alcohol over their mid-to-late twenties, yet they were more likely to individualise the health risks of alcohol. As a result, they were more likely to explicitly cite the condition of alcoholism. Whereas women focused on problematic drinking as taking place in a group context, with the group habits being labelled as problematic, men were more likely to identify a lone individual dependent upon alcohol as the risk identifiable with mature drinking. In a small number of circumstances, this was based upon direct personal experience and current identities as recovering alcoholics or drinkers. The lone, individual drinker was identified by younger male participants too. In one of their drawings, a lone, homeless alcoholic was depicted as a possible future drinking story.

This became the backdrop to the reflection of male participants on their current or past drinking. Problematic reflections could at least bring a questioning of their long term drinking trajectories, if not a full blown wakeup call about the direction their drinking was taking. It was when drinking threatened personal safety through the threat of violence, when other obligations or responsibilities were being missed, or there were observable physical health concerns evident that stock was taken.

One of the focus groups spent some time sharing their experiences of 'taking stock'. One in the group had stopped drinking for two months after he realised it was leading him to *"miss University and stuff."* Another, who continues to drink, had also engaged in uncomfortable reflection.

G: *"Me and my friends go out every weekend."*

PS *"And you consider that fine?"*

G: *"No I don't. I'm very, very aware that I think it's a problem. Like the next day when I take stock I think we drank a lot last night and there are nights when I do actively step back and think this is getting a bit wild."*

Male 25-30 with degrees

For men, the experience of violence was more likely to feature in their uncomfortable reflection around drinking experiences. Many had been involved in violence, as a victim or otherwise, stemming from their drinking or being in places where alcohol is consumed.

Whereas there was recognition that the threat of violence decreased as the nature of the places they drank in changed, violence began to be less taken for granted and viewed as a warning sign about their lifestyle.

*“I just remember one of the big guys from somewhere else just walking past us and then going ‘I’ll have those’, smashing one of my friends, taking the bag (of carry-out) off him. I just remember feeling ‘what am I doing? Why am I here.’ But that didn’t end my drinking sadly.”*

Male 25-30 with degrees

*“See if there’s idiots somewhere in some of the clubs and obviously something is going to happen, I’d stop drinking. If my mates were getting a bit rowdy, I would stop drinking as well.”*

Male 16-18 in education

### *Summary of focus group data*

Despite external similarities in the manner young adults of different genders drank alcohol, there were subtle differences in the underlying intentions. For women, drinking practices and gender-based norms (being ‘feminine’ or ‘one of the girls’) had converged around the maintenance of safety as a response to the risk of sexual assault or violence when drinking in the city centre nightscapes of young adulthood. This could be seen as a potential success of harm reduction messages. For men, risks in early adulthood stemmed from exclusion from the monitored spaces of commercial establishments and from alcohol related, same sex violence.

Although moving-on from youthful, excessive drinking styles was seen as normal and almost inevitable, the alcohol environment could influence decision-making. Factors stemming from alcohol marketing and pricing should not be overlooked for their role in maintaining high levels of consumption.

Wanting to “create better stories” (Female 25-30 with degree) underpinned a desire to moderate drinking and diversify leisure activities as part of a maturation process. However, women in particular described a process whereby group, rather than individual, decision-making could undermine individual motivations for change.

This refers to the issue of alcohol being perceived as being central to leisure activity in society more broadly. Therefore alongside information designed to target individual choices around alcohol, there is need simultaneously to provide a more diverse set of leisure choices for those who have already established a momentum away from excessive alcohol consumption. Peer-based leisure activity has a tendency to reinforce or entrench individual decisions when they accord with collective group norms. In the case of alcohol consumption, this had led to an explosion in the young adult drinking market in recent years with a consequence that drinking – and drinking to excess – is made easier and supported by drinking infrastructure, pricing and marketing. We will explore what actions might help to re-balance the situation in the following section.

## Conclusions and recommendations

### Answering the initial research questions

- *How do drinking intentions change across the transition to adulthood? For both genders, what factors are more likely to lead to moderation of drinking?*

The appetite for adopting more moderated drinking styles as young people matured is one of the defining features of the data. However, the data also highlight the constraints limiting personal choice in achieving this ambition. Many sought to replace drinking occasions with other forms of socialising. The fact that alcohol and social participation are so closely intertwined in Scottish culture, however, means that a high degree of will is required. Drinking occasions reflect an individual's social and cultural capital. This means change can be difficult, as the support networks for new ways of socialising have to be created. Not just individuals but groups of individuals need to change their thinking. Without effort, allies in change and fresh ideas of how to spend one's leisure time, alcohol remains the default choice for meeting up.

- *How does gender feature in the construction of 'appropriate' drinking behaviour in young adulthood?*

The culture around alcohol use in recent years has been characterised by change and transformation for both genders of young adults. A new alcohol offer has been created that is characterised by *concentrated* drinking in either domestic or commercial settings. Although for both genders, later consumption comes to be more *spread* (more frequent, lower intensity), our data suggest the period characterised by *spread* overlaps with, rather than replaces, the *concentrated* period, with the chronologically earlier style having a long tail. However, drinking styles are not only enactments of cultural norms around alcohol and social participation, they are also enactments of gender norms with alcohol use informed by ideas of masculinity and femininity. These produce some characteristic differences in the intentionality and uses of alcohol in social participation.

### **Alcohol and femininity**

Women characteristically drank to maintain a group, and the group facilitated the drinking. This group dynamic was considered stronger in women than men on account of safety concerns around alcohol and increased exposure to risks. However, such risk aversion was implicit rather than explicit in understandings of why women drank as they did. Health and safety is rarely at the forefront of our minds as a guide for behaviour yet it can still function as an available rational explanation when asked to account for our everyday, taken-for-granted behaviours. That norms of femininity and alcohol have adapted to take account of increased risk when out drinking is positive and could possibly be linked to awareness raising campaigns around risk and alcohol for this age group and gender.

However, the foregrounding of group bonding as a culturally adapted response to *external* risks from alcohol (predominantly the threat of violence from men) has meant that *internal* risks associated with drinking become harder to address. The very same group intention which protects women navigating drinking-scapes in their teens and early twenties can perpetuate harmful drinking in later years as forms of consumption become embedded as a means of exchange and shared understanding within the group.

### **Alcohol and masculinity**

Men on the other hand seemed to have a greater awareness of the *internal* health risks of alcohol; particularly of how trajectories of excessive use in young adulthood could lead to dependence. In the earlier phase of young adulthood, ideas of masculinity as expressed within drinking occasions appeared not to have adapted to take account of risks of violence from other young males. There were signs however of the growing recognition of the risk of violence as a trigger point for reflection on drinking trajectories as men matured. A changing background feature against which the research was set was an increase in the profile of the issue of violence and young men through initiatives such as those of the *Violence Reduction Unit*. This should be taken into consideration as a potential influence.

Masculine drinking styles tended to give more priority to the alcohol itself over the group bonding that stemmed from it. At least the latter was spoken of less when compared to women's accounts. This presented a problem in terms of moderating alcohol use in later young adulthood in that the absence of drink and intoxication itself was seen as an absence of excitement. Male predictions of future use (as illustrated in drawings) were

more likely to be characterised by the mundane, ennui or the desperation of the problem drinker; that excessive drinking careers are short but burn bright.

- *What factors and types of drinking environment do young people of both genders believe will lead to either moderation or immoderation of consumption?*

Despite the taken-for-granted understanding of excessive consumption as a normal part of young adulthood, people were still able to identify components of the drinking experience that increased the likelihood of excessive drinking.

### **Price and availability**

Young adults believed that the pricing of drinks influenced consumption. In bars and clubs, cheap drinks would increase the pace of consumption. Street drinkers too expressed the logic that you drink as much as you can afford. However, a remaining concern after minimum pricing is that alcohol being seen as a primary means of social participation may make it resilient to price increases.

Another factor affecting the availability of alcohol is a reduction in the amount of money that young people have to spend as employment opportunities and maintenance grants decrease and the general cost of living increases. In a presentation given at Glasgow Caledonian University's alcohol and substance misuse seminar<sup>vii</sup>, Fiona Measham described a levelling off of young people's drinking beginning in the early millennium – a period of economic buoyancy and higher disposable income for young people. However, it is too soon to say whether the reduction in binge drinking is a longer term trend or what its causes may be.

- *What can we learn for policy and practice for this stage of the life-course?*

The findings here speak to general policies around the experience of young adulthood as much as those around alcohol. A socially structured absence of confidence and need for social participation underpinned much drinking activity in younger adulthood. With the economic downturn, youth labour markets are likely to continue their contraction, with young adults being more likely to be excluded from work and, consequently, denied a source of participation.

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<sup>vii</sup> 'The End of Binge Drinking (?)', Glasgow Caledonian University's Alcohol and Substance Misuse seminar series, 13<sup>th</sup> September 2011.

The injury will be greater than merely economic forms of disadvantage. Exclusion of young people from important spheres of adult life, such as work would deny them purpose and networks from which varied forms of leisure and participation could flow. The story around moderated alcohol consumption in the data is about the development of numerous and varied activities, other than peer drinking, that underpin the formation of solid, authentic identities. Work and the networks of meaning and identity it provides will remain crucial.

- *What can we learn for the broader cultural problem of tackling Scotland's problematic relationship with alcohol?*

Focus group respondents were ambivalent about the role of alcohol in Scottish society and generally supported the direction of travel outlined in *Changing Scotland's Relationship with Alcohol*. The young persons' data suggest a complex relationship between price and alcohol decision-making at the stage of young adulthood. Yet if price controls changed broader drinking norms and reconfigured the place of alcohol in culture, then this would make the moving-on intention of later young adulthood easier to achieve.

### **Reducing harm and tackling excessive drinking across multiple levels of influence**

In the following section we attempt to indicate some directions for working with the desires expressed by young adults in the data to create or maintain moderated patterns of consumption. The data point to the influence of multiple dimensions or levels of influence in the creation of problematic relationships to alcohol for Scotland's young adults. These multiple levels will be familiar to those in the public health field, as the widely accepted model provided by Dahlgren and Whitehead (1991) requires little amendment to describe them. Radiating out from the level of the individual and their lifestyle factors, to their social and community networks, to their working and living conditions to broader social, cultural and environmental conditions, we can begin to piece together from the data the manner in which alcohol is presented across all levels. Life-course factors and gender however also cut through this model giving it an added level of complexity.

### **The individual and their network**

The individual need for social participation, integration and belonging in which drinking sits should not be seen as a deficit of confidence or self-esteem but as a fundamental human need and urge that makes social cohesion a possibility. However, within the data there was also evidence of individuals proactively deciding to alter their drinking trajectories in later young adulthood, albeit influenced by understandings of age associated norms. Whenever this time comes, the desire repeated in the data for health promotion and alcohol education to 'connect personally' reveals the influence of individualised decision-making within structured circumstances.

It occurs to us that **brief interventions** are a service development that allows this personal connection: they can be implemented at a time when an individual might be considering change, and the proximity of the service provider to the recipient can allow an exchange that takes account of motivations and concerns felt to be unique to that particular individual. There is potential in alcohol brief interventions to provide a stimulus for reflection around drinking practices that accord with young adult desires for personal connection. Furthermore, the period of late young adulthood as a potential stage of transition offers a receptive moment. The evidence for brief interventions suggests that they have efficacy in reducing alcohol consumption among hazardous and harmful drinkers at low-risk levels but not for current high-risk drinkers (Raistrick *et al.* 2006). The evidence of greater effectiveness at more normative levels of consumption suggests that they may be suitable for the later young adult population group.

We were also struck by how personal connection emerged from peer to peer social media use. Distaste at seeing on-line pictures of oneself intoxicated, for example, was often cited. **Social media** has led to disclosure amongst peers of both positive and negative experiences with alcohol, and this insight could be harnessed to create applications that connect personally and offer the possibility of peer support around moderating drinking in a contextually relevant manner. An example that segues into the social network dimension is the *moodscape* application which was designed to garner peer support for mental health and wellbeing through choosing friends to follow moods. This could be converted into a drink diary format. Drink diaries have become commonplace and generally focus on amounts consumed or units. However, our report is only one of many evidencing the inappropriateness of such approaches (unit counting) in the mindset around alcohol use.

Approaches for moderating consumption that focus on moods, feelings and other personal (and interpersonal) responses around drinking occasions could target the desire for personal connection in information use and avoid the resistance young adults have to measuring alcohol through unit calculation.

### **Living and working conditions – the alcohol environment**

A broad structural factor which shapes how networks are experienced in adolescence and young adulthood is the contemporary separation of this age group culturally from other adults. The structural antecedents of this are complex and include factors such as the operation of the labour market, the requirement of extended periods of education and a consumer culture that encourages and supports a separate enactment of young adulthood from full-adulthood. In recent years, this separation has been pronounced in the *night time economies* (NTE(s)) of city centres where young adult drinking experiences have become common place, creating a limited leisure offer in city centres. We suggest that in **assisting licensing boards to understand their public health role**, reflection should be encouraged not only about the *number* of alcohol retail outlets in areas but also the *variety* of leisure opportunities on offer across a geographical area. Such an approach potentially takes responsibility out of the licensing boards hands exclusively and features other planning agencies. It is common-place for people to comment on the different character of nightscapes experienced in holiday destinations, particularly in relation to the absence of drunkenness or visible alcohol misuse. However, what these observations often miss is the presence of alternative forms of leisure and also the heterogeneity of users present (often including children and families as well as young adults). Thinking about whether our urban NTEs welcome such a diversity of groups would also be in keeping with the recommendation of the *Glasgow Health Commission* that the city should aspire to be a child-friendly city.

Another important aspect of the alcohol environment relates to the differences in risks presented between drinkers in informal public spaces (notably younger men) and commercial drinking establishments (older young adults and more women across the life phase). Safety messages aimed at the former group tend to focus on alcohol misuse as a component of anti-social behaviour and violence reduction strategies rather than recognising that drinking in these spaces stems from a normative desire for social participation. Messages aimed at drinkers in the urban NTE tend to recognise better the normative desires driving activity. We suggest that harm reduction efforts equivalent to *PlaySafe* in the city centre be tailored for the different experience of drinking in more informal and hazardous spaces outside commercial establishments.

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# Methodological Appendices

## Appendix 1 – List of key informant interviewees (by organisation)

	Organisation
1.	North Community Addictions Team
2.	Association for Young People's Health
3.	Glasgow Licensing Board
4.	National Union of Students (NUS)
5.	Alcohol Focus Scotland (x 2 interviews)
6.	Greater Easterhouse Alcohol Awareness Project (GEAAP)
7.	Institute for Social Marketing, Stirling University
8.	RCA Trust (formerly Renfrew Council on Alcohol)
9.	Violence, Risk & Public Health Network
10.	NHS Health Scotland
11.	Sandyford Initiative, NHS Greater Glasgow and Clyde
12.	Violence Reduction Unit, Strathclyde Police
13.	Social and Health Sciences, Abertay University
14.	Glasgow Community Safety Services
15.	Glasgow Council on Alcohol
16.	Fast Forward
17.	Diageo
18.	NHS Ayrshire and Arran, Alcohol and Drug Partnership
19.	Interventions Unit, Strathclyde Police
20.	Drinkaware

## Appendix 2 – More information on the sample

### *Sample composition*

In total 50 people participated in the focus groups. A sample of this size was felt to provide adequate data for a qualitative study such as this one. The sampling strategy ensured representation in terms of gender, two specific age groups and socio-economic status. Twenty four females and 26 males took part. There were 29 participants aged 16-18 (the younger cohort) and 21 aged 25-30<sup>viii</sup> (the older cohort). Of the overall sample, 26 participants were classified as on a higher socio-economic tract and 24 were classified as on a lower socio-economic tract.

### *Breakdown of focus groups*

There was an average of six participants per focus group. The table below shows how many participants were in each group. With ten participants, the largest group was young men, aged 16-18 and not in higher education (FG7). The smallest group represented was females aged 25-30 and without degrees (FG6). Although three participants actually attended the focus group, one was studying for a degree. Subsequently, we decided that older people who were currently studying for degrees should be included in the 'with a degree' focus group. Whilst at the time they did not hold a degree, they were on a higher education trajectory, which is what we were focusing on. This explains the (+1) and the (-1) in the table below and means that in total, eight women in the older age group were categorised as having degrees, and only two were categorised as without degrees. This figure was disappointing. The non-attendance rate for FG6 was the highest. It took place on the evening of St Patrick's Day when many in the age group may have had plans to meet up with friends.

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<sup>viii</sup> One participant aged 24 at the time of the focus group was also included

## Table of focus group participants

FEMALE		MALE	
FG1 16-18 in education <i>n</i> = 8	FG2 25-30 degree <i>n</i> = 7 (+1)	FG3 16-18 in education <i>n</i> = 5	FG4 25-30 degree <i>n</i> = 5
FG5 16-18 not in education <i>n</i> = 6	FG6 25-30 without degree <i>n</i> = 3 (-1)	FG7 16-18 not in education <sup>ix</sup> <i>n</i> = 10	FG8 25-30 without degree <i>n</i> = 6

### *Relationship status*

As the table below shows, just over half of the participants (28) were single. Fourteen were in a relationship; this was defined by participants and ranged from ‘seeing someone’, to being in ‘long term’ relationships of, for example, three and a half years. A further four were cohabiting and another two were engaged. None of our respondents were married. We did not specifically ask participants about their sexual orientation. During conversations with prospective participants, two men did identify themselves as gay and one woman was in a relationship with another woman. However, in the end, none of these three attended an actual focus group.

### **Participants’ Relationship Status (self completed)**

	FG1	FG2	FG3	FG4	FG5	FG6	FG7	FG8	Total
Single	5	2	4	4	4	1	6	2	28
In a relationship	3	3	1	1	2	2	1	1	14
Cohabiting	0	2	0	0	0	0	0	2	4
Engaged	0	0	0	0	0	0	1	1	2
Married	0	0	0	0	0	0	0	0	0
No response	0	0	0	0	0	0	2	0	2
Total	8	7	5	5	6	3	10	6	50

<sup>ix</sup> Male trainees – mixture of shop-fitting, plumbing, tiling, painting/decorating

### *Parents*

Of our sample, only one (Male, 25-30 without a degree) was a parent, and one other (Male 16-18 not in education) had a child on the way. Another parent who had been due to take part in one of the female groups cancelled on the day because childcare had fallen through. As a result, this sample is more reflective of the 'going out' population, rather than young adults who predominantly drink in the house and/or have entered parenthood. Some participants, however, did talk about friends they had that were parents, and the impact that parenthood had on their friends' drinking.

### *Non-drinkers*

The focus of the research was on current drinkers. However, three participants who identified themselves as currently abstaining from alcohol also took part. When these individuals first came forward, we discussed whether or not to include them in the study. We were concerned that having abstainers in the groups might influence how the rest of the participants would talk about alcohol, and we did not want the discussion to become uncomfortable for anyone involved. At the same time, we felt that discussions involving both current drinkers and abstainers could provide a rich insight into young adults' transitions around alcohol. We were also keen to hear their views on how do moderate young people's drinking. After considering the options, we decided to invite them to take part but we reiterated that the study focused on current drinkers and that the other people in their focus group were likely to view their own alcohol consumption in a positive way.

Each of these participants were men in the older age group. Two identified themselves as recovering alcoholics, and had experienced negative drink related life-events including criminal activity and homelessness. Both of them took part in the 'without a degree' group. The third reported he had been abstaining from alcohol for one month at the first point of contact with the research team. He made this decision after having frequent blackouts from alcohol, and felt that drinking had been negatively affecting his university studies. This participant was currently studying for a degree, and so took part in the 'with a degree' focus group.

However, each of these participants talked about pubs and licensed premises as 'dangerous environments' for them to be in; extreme experiences had led each of them to stop drinking. Not only did they did not use the night-time economy as a space to socialise in, they deliberately tried to avoid. Nevertheless, their insight provided an interesting and alternative view of drinking spaces.

### *Recruitment strategy*

For the most part, the recruitment strategy relied on young people themselves coming forward to express an interest to take part. This was the case with the posters, the *Gumtree* advertisement and emails sent out to relevant groups of young people. This could have been a particular issue in this study, because participants were being asked to attend a group discussion with people that they did not already know, and so a certain level of confidence would have been required. Another consideration is that people with particular interests in alcohol/health may have come forward. Some of the students also talked about being interested in what a focus group was like because they needed to do a piece of research for their studies. All but one of the focus groups took place in the evening, at a city centre location, which again may have affected the type of person who was able to take part.

With this sampling frame set in terms of gender, age and socio-economic status, other aspects were more out of focus at the recruitment stage. As mentioned above, none of our participants were married, only one was a parent, and one had his first child on the way. Although this suggests our sample is more reflective of the going out population, it is also a limitation because it does not capture those young people who might drink primarily at home, or those who have undergone a transition related to parenthood. Additional channels of recruitment, such as a crèche, might have allowed for a more diverse sample in terms of parental status.

For practical reasons, we had decided to hold the focus groups in the same city centre location. Holding a group onsite at a crèche might have also made it more convenient for parents to have taken part.



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