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Reducing Underage Kerbside Drinking in North Tyneside: A Social Marketing Project

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experience the highest levels of binge-drinking and life-time drunkenness in Europe. Youth drinking trends in North Tyneside reflect the national picture and many young people drink unsupervised on the streets, placing them at increased risk of alcohol-related harm (e.g. violence and assaults) and environmental danger (e.g. accidents and injuries), as well as contributing to residents' fear of crime. The National Social Marketing Centre (NSMC) is working with North Tyneside Primary Care Trust (PCT) to use a social marketing approach to help reduce underage kerbside drinking in the Borough. A review of the secondary data and original primary research: in-depth, semi-structured interviews, focus groups, and participant observation with underage street drinkers, their parents, local shopkeepers, residents and the trading standards lead, was conducted to explore why underage youths drink in public places in North Tyneside and what exchange could be offered to reduce this trend. A number of motivational drivers of underage street drinking were identified: 1) perception that there was nothing else to do; 2) normalisation of drinking and peer pressure; and 3) availability of cheap alcohol. These findings have led to the development of a multi-stranded intervention that incorporates: 1) ongoing social spaces with building-based activities; 2) out-of-hours activities in existing community services; 3) transportation; 4) reduction in underage alcohol sales; and 5) a communications strategy. The intervention is due to pre-test in July 2008 and preliminary results will be presented at the conference.

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Reducing Underage Kerbside Drinking in North Tyneside: A Social Marketing Project

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Abstract

Heavy and harmful drinking patterns have increased among young people in the UK, who experience the highest levels of binge-drinking and life-time drunkenness in Europe. Youth drinking trends in North Tyneside reflect the national picture and many young people drink unsupervised on the streets, placing them at increased risk of alcohol-related harm (e.g. violence and assaults) and environmental danger (e.g. accidents and injuries), as well as contributing to residents' fear of crime. The National Social Marketing Centre (NSMC) is working with North Tyneside Primary Care Trust (PCT) to use a social marketing approach to help reduce underage kerbside drinking in the Borough. A review of the secondary data and original primary research: in-depth, semi-structured interviews, focus groups, and participant observation with underage street drinkers, their parents, local shopkeepers, residents and the trading standards lead, was conducted to explore why underage youths drink in public places in North Tyneside and what exchange could be offered to reduce this trend. A number of motivational drivers of underage street drinking were identified: 1) perception that there was nothing else to do; 2) normalisation of drinking and peer pressure; and 3) availability of cheap alcohol. These findings have led to the development of a multi-stranded intervention that incorporates: 1) ongoing social spaces with building-based activities; 2) out-of-hours activities in existing community services; 3) transportation; 4) reduction in underage alcohol sales; and 5) a communications strategy. The intervention is due to pre-test in July 2008 and preliminary results will be presented at the conference.

Background

Alcohol consumption by young people in the UK

Alcohol misuse, by both adults and young people, is a major public concern in the UK. Around 60% of 11-15 year olds drink alcohol in the UK and 22% do so on a weekly basis (The Information Centre, 2007). The average weekly consumption of alcohol in this age group has doubled since 1990 from 5.3 units to 11.4 units and UK teenagers report some of the highest levels of 'binge drinking' in Europe (*ibid*). Alcohol drinking increases sharply with age, with 3% of pupils aged 11 reporting that they had drunk alcohol in the past week compared with 46% of 15 year olds, and drinking among young girls is rapidly competing with that reported by boys (Ong, 2007).

Alcohol consumption by young people in North Tyneside

Youth drinking trends in North Tyneside reflect the national picture – a survey conducted for the North Tyneside Children and Young People's Strategy (Carrick, 2005) found that about two-thirds of young people drink alcohol and more than half drink at least once a week. Among 10-17 year olds, girls regularly drink more alcohol than boys (73.3% vs. 54.4%), a finding that contrasts with the rest of the UK. This survey also found that both girls and boys often drink at home, at a friend's house, or on the street. Alcohol was generally found to be

easily obtained from parents or purchased in corner shops either by themselves or older members of the community.

As a consequence, North Tyneside has some of the highest rates of hospital admissions for under-18s due to alcohol-related causes and the teenage pregnancy rate is significantly higher than that for the rest of England (Ong, 2007). Alcohol-related crime and disorder is also on the rise in North Tyneside, a significant proportion of which is associated with under-17 year olds (*ibid*).

A number of local initiatives have been set up to reduce underage kerbside drinking and anti-social behaviour. These include Positives Futures, a national social inclusion programme that focuses on diverting youths from crime to other (sports and leisure) activities, and Operation Childsafe, which is a joint council and police initiative aimed at removing young drinkers from the streets and returning them home. While these initiatives tackle alcohol-related youth crime and disorder, in all likelihood the same hazardous and harmful levels of drinking will continue, albeit out of sight. Therefore any sustained effort to reduce underage kerbside drinking will require a novel and multi-dimensional approach that includes providing ongoing building-based activities for young people, reducing proxy sales and heightening retailer awareness of the health and social consequences of alcohol sales to minors.

Social marketing in the UK

The National Social Marketing Centre (NSMC) was founded in December 2006 to help build wider skills and capacity in social marketing at national and local levels. As part of this commitment the NSMC has established a learning demonstration site scheme, which sees the NSMC working with and alongside local partners to guide them through the social marketing process and support them in applying effective social marketing principles in their work. The 11 learning demonstration sites are positioned across the UK and address a range of health behaviour issues, from breast-feeding and chlamydia screening to smoking cessation and obesity. In December 2006, North Tyneside Primary Care Trust's (PCT) alcohol in young people prevention project became one of the learning demonstration projects.

Methodology

An initial review of the secondary data found that: 1) a large proportion of underage teenagers drink frequently (i.e. more than once a week); 2) young people are able to access alcohol relatively freely and many of them drink unsupervised on the streets rather than indoors; 3) Teenagers 'street drinking' is a key concern for local residents and increases their fear of crime; and 4) alcohol-related incidents and crimes are rising (Ong, 2007). The key behavioural challenge is therefore to reduce kerbside drinking in under-18s.

Primary research was conducted by Dr. Helen Lloyd to explore the current recreational patterns of youths in North Tyneside, the motivational drivers of street drinking, the activities/services that could be offered as an exchange, and the attitudes among local shopkeepers and members of the local community regarding young people's access to alcohol and public behaviour. Ethics approval was not sought as the research was conducted for a health promotion intervention and the populations engaged were non-clinical.

All interviews (except with shopkeepers) were conducted within the general framework of an ethnographic approach and were in-depth, semi-structured, and topic-guided. Interviews lasted between 15 and 60 minutes, were audio recorded and transcribed verbatim. 10 interviews were conducted with youths identified through Childsafe. The young people were between 13 and 16 years old, the majority were females (8/10) and all were White. The same type and amount of interviews were conducted with one parent of each of the young people interviewed. Seven parents were female and three were male. Four pragmatic, topic-guided interviews lasting between 10 and 15 minutes were conducted with local shopkeepers in four areas of the Borough. They were identified by trading standards as having failed test purchasing. A topic-guided focus group was conducted with four residents of different areas in the Borough who had complained to the police about street drinking. A one hour interview with North Tyneside's trading standards lead was conducted to establish knowledge of initiatives and existing partnerships with retailers and licensed premises in the Borough. Interviews and focus group data was analysed thematically.

Two participant observation sessions were conducted on Friday evenings in different areas with underage street drinkers. During the first session, around 30 to 35 youths were present, all were White, and the group was predominantly female. Most youths were between 12 and 16 years old. During the second session, around 10 to 15 youths were present with an equal number of girls and boys. Youths in this group were between 13 and 15 years of age and all were White. Memos of initial thoughts, insights and important issues were recorded on a digital voice recorder and later transcribed.

Results

Research Findings

Qualitative research with the target group highlighted that 'street drinking' was the most frequently reported recreational activity amongst those interviewed. The three main motivational drivers of this behaviour were found to be:

1. *"Nowt else to do": a lack of out-of-hours leisure provision*

The perception that there is nothing else to do and nowhere else to go was held not only by young people, but also by most parents interviewed. In particular, it was felt that there was a lack of spaces or places for young people to 'hang out', and a dearth of appropriate and affordable structured activities specifically for their age group (13-18 year olds) operating during weekday evenings and at weekends. A snap shot audit of youth services was conducted by Dr. Helen Lloyd, which involved a trawl of electronic sources relating to youth services in the Borough, telephone and email conversations with youth and leisure services and other relevant organisations, and analyses of communication aimed at local youth. This audit revealed that youth provision is reduced by two-thirds at the weekend, and that there are virtually no places for young people to hang out.

2. *The normalisation of drinking and the importance of friends*

To young people, street drinking is perceived as a routine leisure activity and synonymous with 'being with friends'. Parents felt that street drinking was the 'current vogue' for young people and was influenced by 'group mentality' or peer pressure. This was also influenced by wider cultural and societal attitudes about alcohol consumption.

3. *Cost and availability of alcohol*

The local accessibility and low cost of alcohol was cited as one of the reasons why young people regularly engage in street drinking. While alcohol is becoming harder to obtain for this group as a result of recent trading standards and police initiatives, there remain problematic retailers who continue to sell alcohol illegally, and the problem of proxy sales requires immediate attention.

Other themes emerged related to street drinking – it appeals to some young people because it provides access to unstructured social situations and opportunities to experiment with self-identity, forms part of a ritual and temporal process, and is ‘fun’. Street drinking was associated with tension with local residents, the police and other youths, and for a small minority of the sample, it also caused family problems. Most young people did not, however, associate drinking with harm or danger. A minority of youths reported engaging in other recreational activities, mainly football, which they reported reduced their street drinking.

Stakeholder & internal/external environmental analysis

Underage kerbside drinking is a key concern across many sectors. As such, initial consultations (interviews, meetings, workshops, etc.) were carried out with a range of stakeholders to explore opinions, gather knowledge/experience, and map potential resources. From this wider group, key stakeholders who have most power and interest were identified: North Tyneside PCT, North Tyneside Council, local licensees/retailers, young people, parents, local youth projects, transport planning officer, Police/Childsafe, schools, local facilities providers, best practice youth services (UK-wide), and the NSMC. Public and private partnerships are being explored to support and enhance the intervention. These include partnerships with large supermarkets (e.g. Tesco) and smaller neighbourhood shops to prevent illegal sales of alcohol to minors, other private companies (e.g. Anglian Water) who can offer resources and expertise, and youth services across the country to foster exchange programmes for young people.

Intervention Development

Insights gained from the findings of the research clearly point to a multi-stranded approach that incorporates all four primary components to influencing behaviour – educate, support, design, and control (NSMC, 2007):

1. *Building based out-of-hours activities*

Permanent social spaces where young people can ‘hang out’ with friends in an informal environment and take part in a variety of structured activities like sport, dance, drama, DJ’ing, and discos. For the proposed service to appeal to the target group it would need to be tailored to their age group (13-18 year olds only) and staff should be understanding and engaged in youth culture rather than authoritarian. Involving youth and adult volunteers from the local community in addition to trained personnel would generate a sense of community ownership and support and help foster positive relationships between young people and adults in the local community.

2. *Out-of-hours activities*

Free/subsidised events for young people available out-of-hours, particularly Friday and Saturday evenings, at locations such as local cinemas, sports grounds, theatres, and music

halls. 'Exchanges' whereby young people can visit other youth projects across the country that have proved successful e.g. Roundhouse Recording Studio in London which offers opportunities for young people aged 13-25 to explore and develop their creativity.

3. *Transportation*

A free/heavily subsidised shuttle bus service to transport groups of young people safely from pick up points to activities and home again. Text messaging and mobile phones will be used to cost-effectively direct groups to designated pick up points or direct the shuttle bus to trouble hot spots.

4. *Reduction in illegal alcohol sales to minors and adults buying for minors*

A communications campaign targeting retailers and supermarkets in key problem sites to raise awareness of the wider social impact of underage sales and increase pledges to the 'Challenge 21' scheme, whereby retailers ask customers trying to buy alcohol for proof-of-age if they appear to be under 21.

5. *Communications strategy*

Includes branding of the service (e.g. 'Out-of-Hours'), a launch festival, and promotion of 'what's on' pre- and post-launch via the web (Facebook group), mobiles and schools.

Key individuals from selected organisations have been recruited to two project teams, which will help plan and deliver the intervention: one group will address the retailer/proxy sales issues and the other will develop the youth service itself. Process and outcome evaluations, using qualitative (e.g. interviews with young people and members of the public) and quantitative methods (e.g. surveys of young people's drinking behaviour and participation in intervention activities), will be carried out to monitor performance and determine impact.

Conclusion

The primary research provided valuable insight into why young people drink on the streets and indicated how several different strategies need to be implemented in tandem to effectively impact on underage kerbside drinking. With the intervention now in the development phase, time and effort has been dedicated to identifying and obtaining buy-in of appropriate stakeholders and partners. Council Children's Services, for example, are now taking strategic lead for delivering the youth service and will help ensure the sustainability of the project. Working cross-sectorally with various stakeholders and partners has, however, had implications for timelines, but the intervention will hopefully be pre-tested in July. The conference presentation will focus on providing an overview of the development of the intervention, presenting any initial results, and demonstrating the use of the NSMC's social marketing benchmark criteria and 'Total Planning Process' model in practice.

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