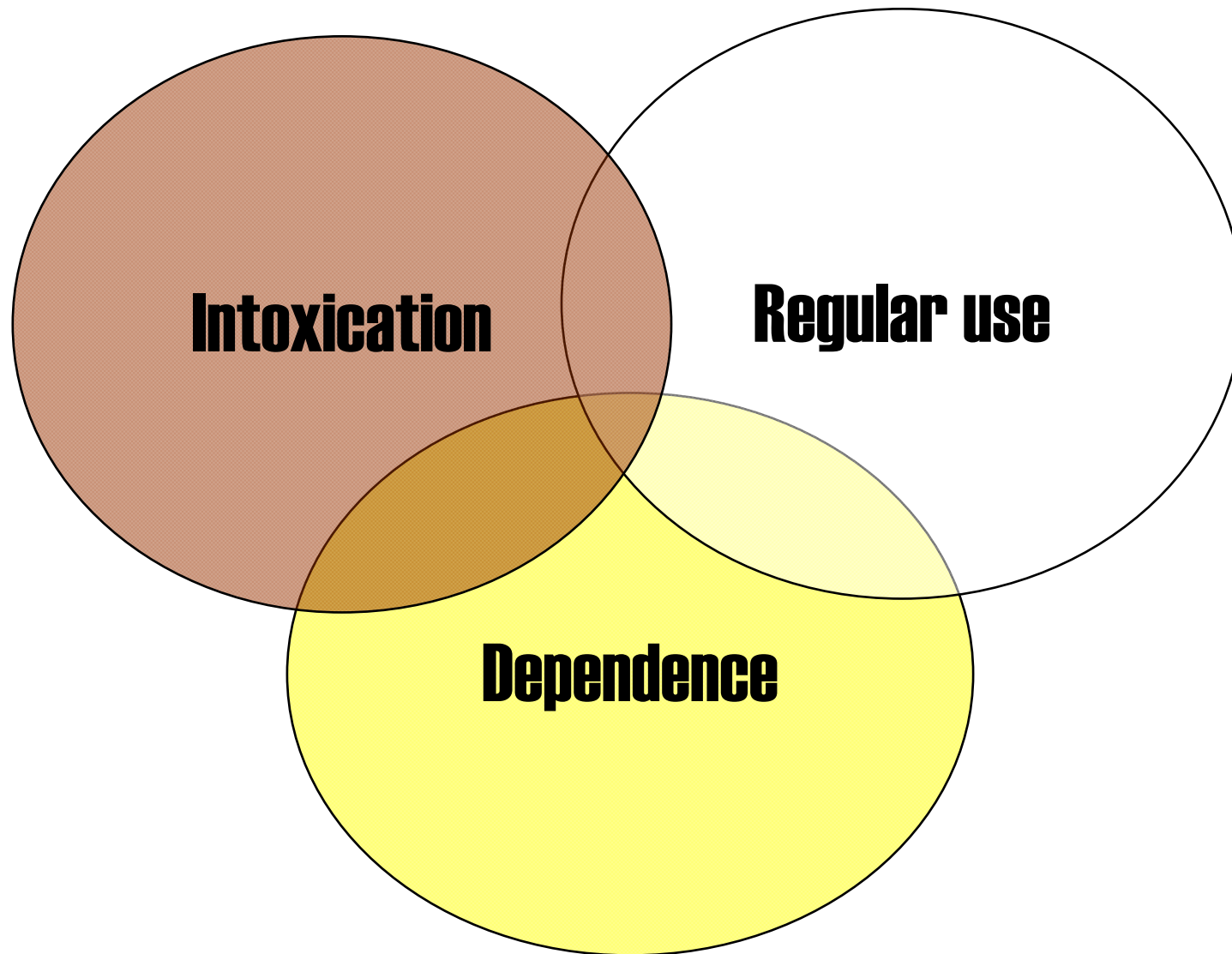


Steve Allsop  
Director  
National Drug Research Institute

Alcohol and young people

# What is an alcohol problem?



In a 10 year period...

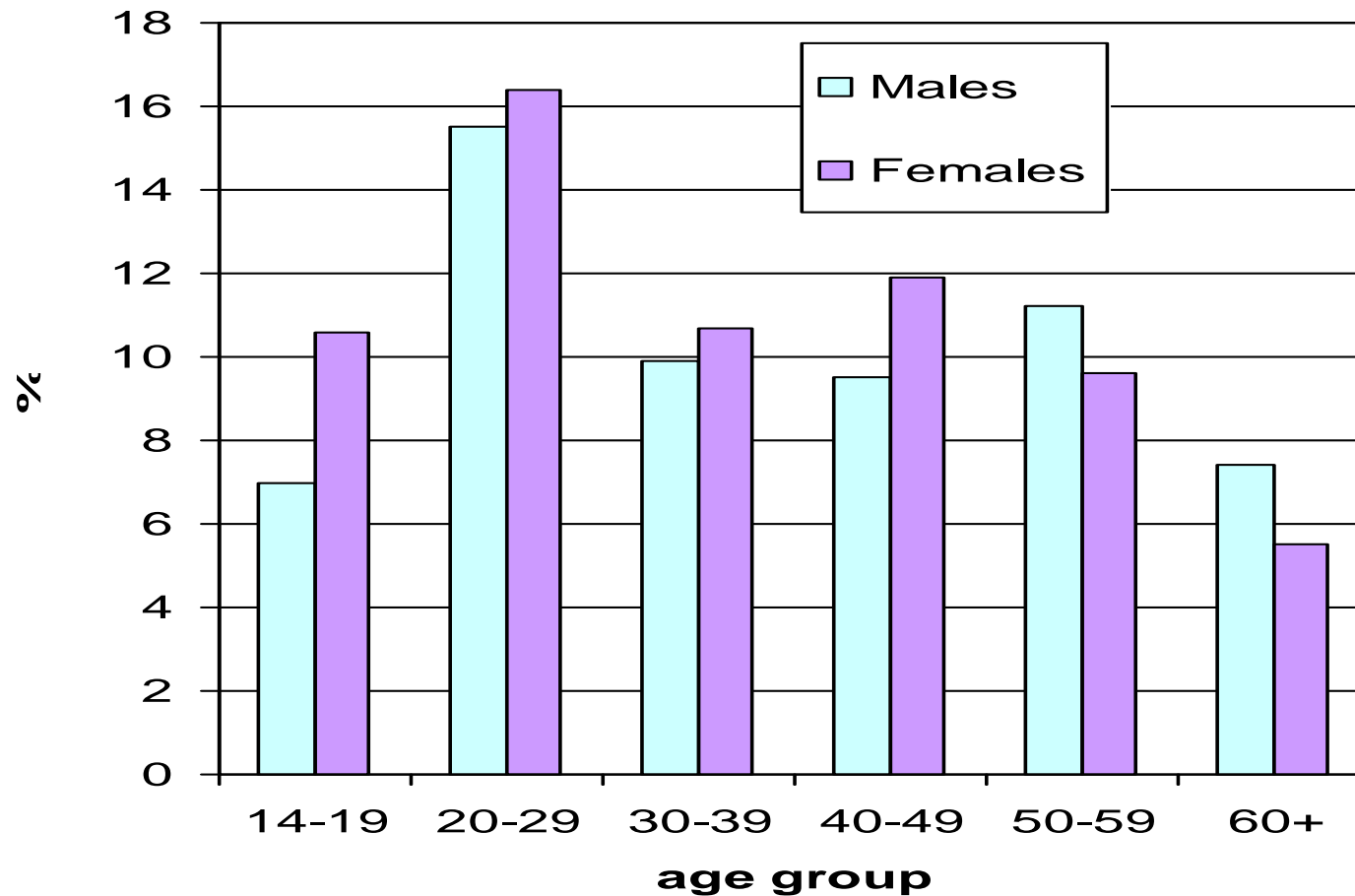
more than 500 deaths and 3,300 hospitalisations were caused by drinking among 14-17 year olds

Each year, about one in seven deaths that occur among 14-17 year olds are caused by alcohol

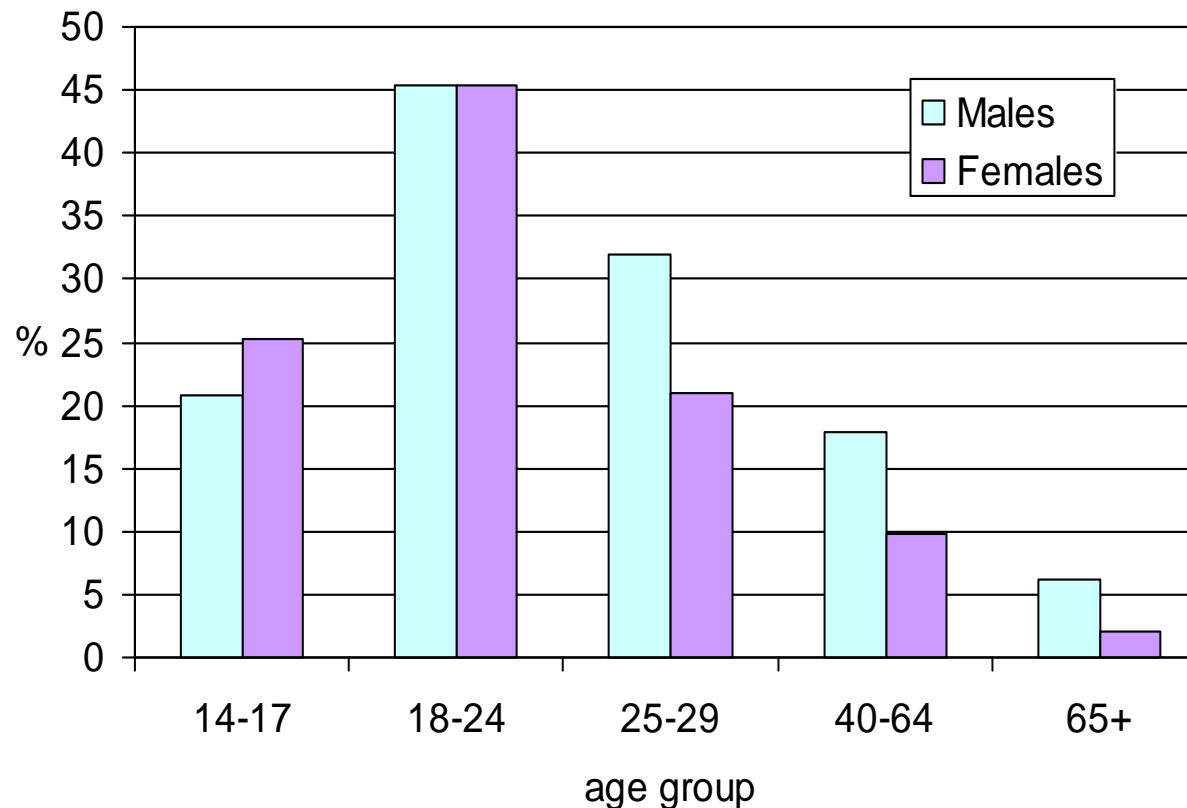
Male alcohol-attributable deaths out-number female deaths by about 3.0/3.5 to 1

**But it's only a minority ...**

Estimated national proportion of population 14+yrs exceeding *NHMRC 2001* low-risk drinking guidelines for minimising **long-term** (2F:4M p/day) harms from alcohol in 2007. Source AIHW 2008



Estimated national proportion of population drinking at risky/high risk levels for **acute** harm (4F: 6M) at least monthly by age group and sex Source: AIHW 2008



# Summary so far

- Different patterns of use=different harms
- Quite a lot of people occasionally have problems
- Way too many people have severe consequences



# Why do they do it?

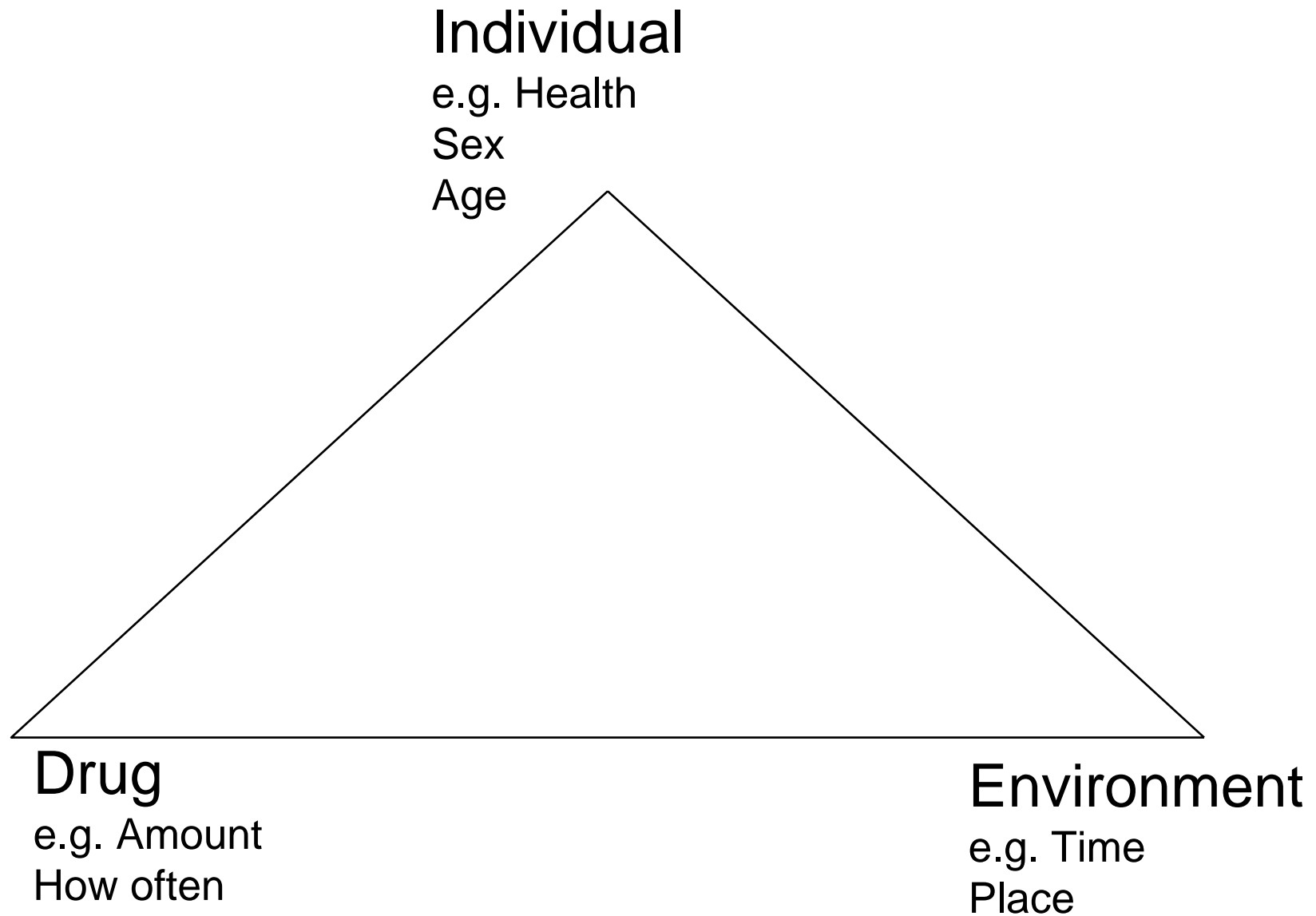
- There is no single reason for use

# Risk factors for heavy/harmful use

- Individual factors
  - Genetic characteristics and vulnerabilities
  - Sensation/novelty seeking; Poor problem solving; Self-esteem and alienation
  - Poorly managed ADHD; CD in early years
  - Low social and emotional competence
  - Fetal exposure
- Family factors
  - Favourable attitudes to drug use/drinking/ poor supervision and monitoring
  - Family disharmony, conflict, violence, abuse and/or neglect
  - Life events; Trauma; Hazardous use in family (e.g. CDRC)
- Community factors
  - Poor housing and economic circumstances; deviant peers
  - Poor connectedness
- Availability
  - Actual and perceived

# Protective factors

- Quality family life – harmony, support
- Connectedness and sense of belonging
  - School
    - Social and academic competence
  - Adults
  - Community
  - “Spiritual”, not just material



# How do risk and protective factors have influence?

- Risk and protective factors have influence directly and may interact or combine/operate cumulatively
  - e.g. impulsivity may be associated with drug use when drugs are readily available & perception of peer acceptance of drug use
  - Impact of parental drug use ameliorated by quality care & boundaries
- Timing of exposure to risk factors may influence risk
  - e.g. early initiation appears to increase risk

# Young people and families

- Family has crucial role
  - Attachment to families/adults
  - Liking and wanting to be like parents
  - Favourable parental attitudes to drinking/drug use
  - Parental neglect and abuse
  - Parental problems/parental harmony
  - Parent-adolescent conflict and parenting skills –
    - communication, conflict resolution, monitoring
- Closeness of parent child bond important and can impact on choice of peers

# Young people and families

- Parental supervision and monitoring can prevent, delay and reduce use –
  - increase parental supervision and monitoring will significantly reduce early onset and heavy use
- But
  - Excessive authoritarian and permissiveness risk for earlier onset
- “Family bonding is the bedrock of relationship between parents and children. Bonding can be strengthened through skills training on parent supportiveness, .. communication and ... parental involvement.” NIDA
  - Monitor activities
  - Praise appropriate behaviour
  - Apply moderate consistent discipline that enforces defined family rules

# Where do young people get alcohol?

- Teenagers most commonly obtain alcohol from friends, relatives, other adults
- The sale of alcohol to people under 18 years is illegal in all Australian states and territories
  - Despite this, almost half of teenagers have purchased alcohol from a retail outlet – mostly bottle shops



# A note on alcohol and the developing brain

- The brain develops into the early 20's
- May be particularly susceptible to effects of alcohol at this time
- Improved technology and sensitivity of tests illustrating impact on specific sites and detecting more subtle impacts than were previously detectable
- Evidence in early stages – modest number of studies on humans, most animal studies, but ....

# What to do?

# What doesn't work?

- Avoid making it worse
- Reliance on 'masterstrokes'/magic bullet
  - Isolated punitive, or "tough," approaches
  - Isolated psycho/social/biological approaches
  - Scare tactics
  - Moral persuasion
  - Education as propaganda – 'show them the dangers and they won't do it'

# What to do?

Protection and risk protection approach

- Reduce known risk factors (e.g. access to alcohol; supporting vulnerable families)
- and
- Encourage known protective factors (e.g. connectedness to schools etc)
- Prevent and/or delay onset of use and heavy use

# What to do about alcohol?

- Control alcohol promotions, especially regarding young people

# Control alcohol promotions?

But they are already regulated

# Alcohol promotion

- There are diverse forms of promotion
  - Advertising
  - Point of sale
  - Internet
- Concerns about current control mechanisms
  - No evidence about effectiveness of formal regulation
- Concerns revolve around nature, ubiquity, impact
- Evidence is mounting that it has an impact on intentions to drink and associated with consumption especially among young people

# What to do?

- Control alcohol promotions, especially regarding young people
- Regulate availability
  - Taxation/price
  - Hours of sale
  - Minimum price?
  - Age of access?
  - Secondary supply
- Better address family factors/role of parents
- Enforcement of existing laws
- Target particularly risky behaviours (e.g. drink driving)
- Build support within communities
- Access to advice and youth friendly help



# Harm reduction

- RBT
- School leavers
- Glass controls
- Transport/lighting
- Food/water lower alcoholic beverages
- How to look after your mates
- Sobering up shelters/safe places for people who are intoxicated

# What can we do?

- We will need a range of responses – I-E-D
- Prevent use and prevent exposure to risk
- Delay onset of use
- Reduce harm in those who use – for them and for others
  - Control supply – supply matters
  - Control promotions
  - Reduce demand
  - Connectedness matters – adults, community, school
  - Address needs of vulnerable individuals, families and communities
- And .... What we do as adults matters

Steve Allsop  
[s.allsop@curtin.edu.au](mailto:s.allsop@curtin.edu.au)