

Answers to questions about age, drinking patterns and places are provided in an accessible format that is the first stage in planning methodologically sound alcohol prevention programmes.

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What do we know about young people's use of alcohol?

A review of the literature provides an evidence-base and shows worsening trends with young people drinking more regularly and in greater quantities.

Young people's consumption of alcohol has been attracting growing interest as a serious social and public health issue facing the UK. For example, recent headlines have included 'Mourning after: young drinkers face the epidemic of early death' (The Independent, 2003) and 'Primary school children turn to drink' (The Observer, 2002). Partly in response to this concern, the UK Government is planning its first ever National Alcohol Harm Reduction Strategy. A credible starting point for all health-care professionals, teachers and others interested in the healthy development of young people is to have access to a concise review of the existing evidence-base. This is the primary purpose of this paper. This paper will summarise recent evidence, mainly from nationally representative surveys, surrounding young people's use of alcohol. The review will be of particular use to all those who require a relatively quick insight into the breadth of evidence surrounding young people's use of alcohol.

The reviewed literature

'Young people', in this paper, are defined as between the ages of 11 and 20 years, although most of the survey data have been derived from those aged 11-16 years. Unless deemed as unsurpassed by recent research, this review will report on findings published between 1995 and 2003. The review includes published papers from journals and book chapters, as well as unpublished and 'in press' data that have

been obtained from personal correspondence with the authors or from seminar and conference presentations. For published literature, a number of data bases have been used such as BIDS, POPline, PSYCinfo, PUBMED and MEDline. The review has also involved the attendance to specialist libraries, including those at Alcohol Concern and the Royal Society of Medicine, and the liaison with key informants in this field.

Findings

To present the existing evidence-base in the young people and alcohol field, the review of the literature will endeavour to answer the following four key questions:

1. At what age do young people start drinking alcohol, what proportion drink and how does this drinking progress?
2. What types of alcohol do young people drink?
3. How often and how much alcohol do young people drink?
4. Where do young people drink alcohol?

At the end of each section, a list of key points will be presented as a further summary of findings.

Ten key surveys

Much (but not all) of the information presented in this review has been derived from the increasing number of surveys that have been undertaken among young people in the UK. The research attributes of ten key surveys used to compile this part of the review are summarised

in Table 1. These surveys have been selected according to their recent publication and their quality in terms of sample size, coverage, sample selection and design. The Boreham and Shaw (2002 - continuing the national survey of secondary schools series) English survey will inevitably receive most attention as this is the most recent nationally representative survey published, and also includes trend data for the previous decade.

Table 1. Details of the reviewed surveys

Reference	Survey Year	Sample size	Response rate	Age range	Sample sites	Sample coverage	Sample selection
Measham (1996)	1991 and 1992	543 completed both rounds	Not stated	14-16	2-year longitudinal study with 14-16s	NW England	'Broadly representative'
Haselden et al (1999)	1997	10,351	84%	11-16	70 Secondary schools	England	Stratified random sample
Harrington (2000) Youth Lifestyles Survey	1988 to 1999	1,790	69%	12-17	Private households	England and Wales.	Multi-stage stratified random
Hibell et al ESPAD (2000)	1999	2,641	86% (pupils rather than schools)	15-16	223 Secondary schools	UK (& 29 other European countries)	Systematic random
Balding (2002)	2001	15,881	Not applicable	10-15	334 Primary and Secondary schools	UK	'Opportunity sample' from request from health authorities
SHEU (2003)	Trends from 1983-2003	229,543	Not applicable	12-13 & 14-15	Over 4,800 schools	UK	'Opportunity sample' from request from health authorities
NATIONAL SURVEY OF SECONDARY SCHOOLS SERIES - 'SMOKING, DRINKING AND DRUG USE AMONG YOUNG PEOPLE IN ENGLAND'							
Goddard and Higgins (2000)	1999	9,416	90% (pupils rather than schools)	11-15	340 Secondary schools	England	Stratified random sample
Boreham and Shaw (2001)	2000	7,089	87% (pupils rather than schools)	11-15	225 Secondary schools.	England	Stratified random sample
Boreham and Shaw (2002)	2001	9,357	89% (pupils rather than schools)	11-15	285 Secondary schools.	England	Stratified random sample
Department of Health (provisional data - 2003)	2002	Approx. 10,000	To be confirmed	11-15	321 schools	England	Stratified random sample

Age and drinking

At what age do young people start drinking alcohol, what proportion drink and how does this drinking progress?

Alcohol consumption is common practice among young people within the UK. From a previous review of the literature, Wright (1999) concludes that the first experiences of drinking alcohol usually occur between the ages of 8 to 12. More recent research concurs with her findings and there is no strong evidence to suggest that young people are drinking at a progressively younger age. By the time young people reach the teenage years, most would have drunk alcohol. Harrington (2000) reports that 84% of her 12-17 year olds had ever drunk alcohol at some point in their lives. Moreover, Hibell et al (2000) report that 94% of their 15-16 year olds have ever consumed alcohol. From the national survey of secondary schools series, Boreham and Shaw (2002) found that 61% of their 11-15 year olds had ever had a 'proper drink'.

The experience of drinking alcohol clearly increases with age. For example, Boreham and Shaw (2002) note that 27% of 11 year olds had ever had a 'proper drink' compared to 86% of 15 year olds. Interestingly, more younger boys

report ever having alcohol compared to young girls (indicating that boys start drinking earlier than girls), although these differences even out at ages 13 to 14.

Apart from ever consuming alcohol, an additional indication of the proportion of young people drinking is derived from consumption in the previous week. Overall, the Department of Health (provisional data) reports that 24% of their 11-15 year olds drank in the previous week. Unsurprisingly, this measure also increases with age: 5% of those aged 11 had drunk alcohol in the previous week compared to 47% of 15 year olds (Department of Health, provisional data). Similarly, Balding (2002) reports that around one quarter of those aged 12-13 drank alcohol in the previous week, compared to around one-half of 14-15 year olds. Again, boys are marginally more likely to report drinking in the previous week, with this discrepancy being more marked at younger ages within the 11-15 range (Department of Health, provisional data).

Interestingly, the national survey of secondary schools series also show that the proportion of young people who have ever drunk alcohol has shown no sustained increase or decrease since 1988. Between 1988 and 2001, the proportion of 11-15 year olds ever having a

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'proper drink' ranged from 59% to 65% with no discernable pattern through time (Boreham and Shaw 2002). However, the proportion reporting a drink in the previous week has shown a slight increase over the years: from 20% in 1988 to 26% in 2001 (Boreham and Shaw, 2002), among boys and girls of all ages. This may imply, at least according to this measure, a slight increase in the proportion of young people drinking alcohol.

Much of the research into when young people start drinking and how this progresses into adult drinking centres on transition theories (Honest et al, 2000). Harnett et al (2000), in their study of forty 16-24 year-old white males, followed the youth transitions framework to develop a model of eight drinking styles. These indicate how alcohol use evolves through youth and also illustrates some of the motivations behind drinking. The styles proposed were childhood, adolescent, experimental, sociable, recreational, safe, therapeutic and structured. 'Childhood' drinking represents the very first experiences of alcohol and occur anywhere between ages 5 to 15. At this point the drinking is entirely controlled by the adults present. 'Adolescent' drinking (age 14-16) is defined as a time when the drinking situations are exclusively with members of the peer group. The choice of what and where to drink is seen as collective, and the alcohol drunk is usually strong and cheap. The next style of drinking is the 'Experimental' style (age 16-17), where young people start to test out new drinks, and perhaps move to drinking in licensed premises. 'Sociable' drinking styles (age 17+) relates to where drinking is used to manage new social situations. 'Recreational' (age 17+) styles involve drinking to excess, after discovering that alcohol is enjoyable. It is seen as 'fun' to lose control and get very intoxicated. 'Safe' (all ages) drinking styles evolve when the person is aware of the importance of their own safety and limits. 'Therapeutic' (age 17+) drinking styles serve the purpose of relieving social and physical disorders such as anxiety (Pavis, 1997, termed alcohol a 'drug of solace'). Lastly, 'Structured' (age 17+) drinking styles are influenced by factors such as work commitments. In relation to these transitions, we also know that young people who drink heavily are more likely to have parents and friends who drink alcohol (Feldman et al, 1999). For the latter, the association between friends' drinking and one's own drinking may reflect peer pressure as well as peer association (in that drinkers chose to socialise with those who also drink - Wright, 1999).

¹ The exception for this survey, and SHEU (2003) trend data, is the slightly higher percentage of males rather than females drinking spirits.

Age and drinking - key points

- ▷ First experience of drinking alcohol usually occur between the ages of 8 and 12 and is usually controlled by adult supervision
- ▷ The age at which young people start drinking has not changed in recent years
- ▷ Experience increases with age: around 25% of 11 years olds, and 90% of 15 year olds, have ever drunk alcohol. 5% of 11 year olds have drunk in the previous week compared to around 50% of 15 year olds
- ▷ Boys tend to experience alcohol at a younger age than girls, with these gender differences dispersing by age 13 or 14
- ▷ The proportion of young people drinking alcohol has remained relatively stable over the previous decade: there are no obvious differences in ever drunk alcohol, although those drinking in the previous week has shown a marginal increase
- ▷ Adults (parents/carers) have the greatest influence over young people when they are first introduced to alcohol. As the young people progress through adolescence, friends and peer groups become more influential
- ▷ Young people may drink for a range of reasons. These may include enjoyment, relaxation, escapism, and for increased confidence

Types of alcohol

What types of alcohol do young people drink?

Beer, Lager, Cider and Alcopops are the most popular drinks among 11-15 year olds. Of those who drank in the previous week, Boreham and Shaw (2002) report that 70% consumed Beer, Lager or Cider (the former three drinks grouped together as one measure in the questionnaire) and 68% drank Alcopops, compared to 57% who drank Spirits. Balding (2002) distinguished between 'Beer/Lager' and 'Cider' and found that the latter was generally less popular. Again, the types of drink consumed by young people tend to vary according to age group. Beer, Lager, Cider and Alcopops were more popular among the older drinkers, compared to Shandy and Wine, which were slightly more favoured by the 11-13 year olds (Boreham and Shaw, 2002). Furthermore, Beer, Lager and Cider tend to be favoured by boys, whereas girls report more experience of Wine, Spirits and Alcopops in the previous week (Boreham and Shaw, 2002). These gender differences are comparable to those reported by Hibell et al (2000), Balding¹ (2002), Haselden et al (1999) and SHEU (2003). Haselden et al (1999) also showed that boys tended to favour stronger alcoholic drinks.

In terms of trends, the national survey of secondary schools series (Boreham and Shaw, 2002) show relative stability in Beer, Lager and

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Cider. However, Spirits have become increasingly popular (35% of 11-15 year olds who drank in the previous week reported consumption in 1990 compared to 57% in 2001) as have Alcopops (increase from 55% in 1996 to 68% in 2001). The increasing popularity of Alcopops is particularly evident among girls (supported by SHEU, 2003).

Types of alcohol - key points

- ▷ Beer, Lager, Cider and Alcopops are the most popular drinks among young people
- ▷ Shandy and Wine are favoured by the youngest age groups
- ▷ Girls are more likely than boys to drink Wine, Spirits and Alcopops
- ▷ Spirits and Alcopops, especially among girls, have become increasingly popular over the last five years

How often/how much

How often and how much do young people drink?

Boreham and Shaw (2002) reported that 20% of their 11-15 year-olds (total sample, not just those who drink) said that they usually had an alcoholic drink at least weekly. Note that this measure of at least weekly (or frequency of drinking) does not equate to the previous week measure reported earlier. This proportion increases with age (4% of 11 year olds compared to 43% of 15 year olds) and is slightly greater among boys (22% compared to 18% for girls). Of notable concern, the proportion of boys and girls drinking at least weekly has increased from 13% in 1988 to 20% in 2001 (Boreham and Shaw, 2002).

For those who drank in the previous week, 11-15 year olds drink an average of 10.5 units (Department of Health, provisional data). These levels increase with age (6.8 units for 11-13 year olds to 12.9 units for 15 year olds) and boys tend to drink more than girls (11.5 units for 11-15 year old boys compared to 9.6 units for the same aged girls). Balding (2002) found that the mean number of units drunk by the 'drinkers' was 10 for males aged 14-15, and 8 for girls of the same age.

In terms of trends, research points to a worrying situation of higher levels of consumption. These trends have also been evidenced in previous reviews by Wright (1999) and Newburn and Shiner (2001). To provide an example of more recent evidence, the Department of Health (provisional data) survey reports that the average weekly consumption of pupils 'who drank in the last week' increased from 5.3 units in 1990, to 10.5 units in 2002. These increases were generally consistent among boys and girls from a variety of ages within the 11-15 year

range. Further evidence of this increasing consumption, this time allocated to a single session, has been reported by Measham (1996). She found that 'heavy drinking' (11-40 units) on the last drinking occasion, among her sample of 'current and ex-drinkers', had increased from 22% to 31%. Although most measures have recorded increased levels of consumption over the course of a week, these trends (in particular the Measham study) could also support the supposed increases in 'binge drinking', or loosely defined here as excessive quantities of drink consumed over the course of a single session. This binge drinking was also evident in the Balding (2002) survey which found that one-half of their 10-15 year old 'drinkers' drank on only one day in the previous week.

In conjunction with these increased levels of consumption, some researchers have reported how often their sample report episodes of being 'drunk'. For example, Haselden et al (1999) found that 20% of their 15-16 year olds, who drink at least once a week, reported being drunk more than 10 times in their lifetime. Similarly, Hibell et al (2000) found that 33% of boys and 27% of girls aged 15-16 (from the total sample) had been drunk 20 or more times in their lifetime. Hibell et al (2000) also report that 14% of boys and 11% of girls aged 15-16 (again from the total sample) reported drinking more than five or more drinks in a row, six or more times in the previous month.

This increase in drinking frequency alongside rising levels of consumption is reflected in SHEU Trend data (2003). These surveys indicate a slight upward trend from 1990 in the proportion of 14-15 year olds that had drunk more than 10 alcohol units during the last seven days. Also, these surveys show that, on average, young people who drink alcohol are drinking more than they used to: In 1990, less than 25% of 14-15 year old males who drank alcohol last week drank more than 10 units, compared to 33% in 2001.

How often/how much - key points

- ▷ A minority or around one in five of all 11-15 year olds consume alcohol at least weekly
- ▷ The proportion of young people drinking at least weekly has increased over the last decade
- ▷ For those who drank in the previous week, the typical level of consumption for that time period, among 11-15 year olds, is 10.5 units
- ▷ Among those who drink (in the previous week), older age groups and boys drink more than younger age groups and girls
- ▷ Among those who drink (in the previous week), levels of consumption over the week have nearly doubled

- over the last decade (boys and girls of all ages)
- ▷ Among those who drink (in the previous week), levels of consumption over the course of a single-session and reported drunkenness, has also increased

Drinking venues

Where do young people drink alcohol?

Compared to other measures reported previously, fewer surveys have identified the most popular locations for young people's drinking. Goddard and Higgins (2000) found that the place where young people usually drink were at their own home (43% of 11-15 year old drinkers), at parties with friends (22%), outdoors / on the street (21%) and at someone else's house (18%). Similarly, Balding (2002) and SHEU (2003) show a dominance of drinking at home among 10-15 year olds, with 'friends or relations' and 'outside in a public place' also being reported (to a lesser extent than at home). In contrast to age, these surveys reported very little difference according to gender (Hibell et al 2000, Goddard and Higgins 2000 and Balding 2002). Interestingly, however, there were variations in location according to frequency of drinking. Those who usually drank once a week were twice as likely to drink in pubs, clubs and outdoors, although were less likely to report drinking in their own home (Goddard and Higgins, 2000).

A study by Forsyth and Bernard (2000) is notable by focussing upon drinking location in more depth. Among their sample of 1240, 13-16 year olds, they too found the popularity of own and friends' homes and outdoor / hidden locations (more so than the Goddard and Higgins work). Of particular interest, they report that the location of drinking is a good indicator of potential for alcohol-related harm, even before the environmental risks inherent to that setting are taken into account. They found that drunkenness was less likely in own home, but much more likely in friends' houses and especially in outdoor/hidden locations (Forsyth and Bernard, 2000). They also found that high volume drinks (e.g. White Ciders) were more likely consumed in these outdoor / hidden locations. Given the popularity of outdoor / hidden locations, together with the greater hazards inherent to this location (see Pavis et al, 1997), and combined with the greater likelihood of drunkenness in these areas, this is clearly a scenario of some concern.

Drinking venues - key points

- ▷ The most popular location for drinking alcohol (among underage drinkers) is in one's own home, although drinking in friends' homes or outdoors is also reported (to a slightly lesser extent)

- ▷ Levels of consumption, and reported drunkenness, tend to be greater in friends' houses and outdoors compared to levels in one's own home

Discussion

This paper has summarised our knowledge of young people's consumption of alcohol. We have summarised data on the proportion of young people who drink, how this drinking progresses, what types of drink are consumed, how often and how much young people drink, and where this drinking occurs. Although the proportion of young people drinking alcohol in the UK has remained relatively stable throughout the last decade, perhaps the most notable finding of this review is the worsening trends in two dimensions. Firstly, more young people are drinking on a regular basis (or at least weekly). Secondly, and perhaps of most concern, young people are consuming alcohol in greater quantities, especially during a single-session. These findings should be interpreted as valid and accurate; they have been predominantly derived from nationally representative samples of young people in their thousands.

These particular findings are of great concern given the negative short- and possibly long-term consequences of excessive drinking of this nature. The short-term consequences of excessive single session drinking include a greater likelihood of acute alcohol intoxication, facial injuries, accidents and consequences of drink driving. For example, in a recent study of young men's drinking, 24% of 16-17 year-old men reported either sustaining or causing an injury due to their drinking (Harnett et al, 1999). Moreover, in a screening study of ambulant attendees at Accident and Emergency departments in London, looking specifically at young people aged 16 to 24, 37.2% were found to be drinking harmfully and 14.6% considered their attendance to be alcohol-related (Thom et al, 1999).

Although the negative consequences reported above could equally apply to behaviours in adulthood, the implications among young people are potentially more serious. The lack of full physiological development may often result in less physical tolerance and a higher blood alcohol limit that, in turn, may increase the likelihood of harm. Moreover, drinking in locations other than licensed establishments (more apparent among younger, 'under-age' drinkers) may further increase the risks of alcohol related accidents.

In addition, the physical consequences of alcohol misuse are even more worrying if we consider the widely reported associations

between alcohol consumption and additional risk-taking behaviours. These include drink-driving, fighting, vandalism, drug misuse, and lack of contraceptive and condom use; all of which have been associated with high levels of alcohol use (Durant et al 1997, Schmid 1998, Jainchill et al 1999, Merrill et al 1999, Flisher 2000 and Lindberg et al 2000). In a climate of high levels of youth drinking, teenage pregnancy rates and sexually transmitted infection rates, the association between alcohol and unsafe sex has deservedly received much recent publicity. Finally, and of some concern, the impact of young people's drinking has been argued to extend to problems in later life suggesting that the longer-term consequences could be equally as serious (Grant and Dawson, 1997).

Given the worrying trends in consumption reported above, and in light of these negative consequences of excessive consumption, it is particularly concerning that we are still uncertain as which alcohol-related intervention programmes are the most effective. Foxcroft et al (1997) assessed the methodological quality of evaluations of alcohol misuse prevention programmes specifically for young

people, and concluded that "...the lack of reliable evidence means that no one type of prevention programme can be recommended." (p.531). More recently, Waller et al (2002) similarly found that there was little evidence for the effectiveness of any alcohol prevention programme targeting young people, due to the lack of methodological rigour. However, they did find some evidence that certain aspects of programmes were more effective than others in reducing alcohol misuse. Peer-led (rather than teacher-led) prevention programmes tended to be more effective, as were more interactive programmes, which fostered the development of interpersonal skills. Also, there was slight evidence for the effectiveness of skills training in reducing consumption among college students (Waller et al, 2002).

Indeed, and as a final note, the necessity for methodologically sound interventions with a high quality evaluation strategy, in light of our knowledge surrounding young people's use of alcohol, must now be the priority. It is hoped that presenting the evidence-base for young people's use of alcohol, in an accessible format, is the first stage in planning any such work.

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The most popular location for drinking alcohol (among underage drinkers) is in one's own home.