

RESEARCH TO INFORM DEVELOPMENT OF A YOUTH ALCOHOL STRATEGY FOR GREATER CHRISTCHURCH

BACKGROUND

Research was conducted from May to July this year.

The research was made possible through a successful application made by The Collaborative Trust to Health Promotion Agency's (HPA) Community Action on Alcohol Partnership Fund in the 2015-16 financial year.

The project had oversight from Christchurch City Council, Hurunui District Council, Waimakariri District Council and Selwyn District Council, along with Community and Public Health, HPA, Canterbury District Health Board (CDHB) and various NGOs.

AIMS AND OBJECTIVES

The aim of the research was to provide a space where seldom heard from populations (young people, their parents and caregivers and people who work directly with young people) could voice their views of what a strategy to reduce alcohol related harm in Greater Christchurch should look like.

It was intended that a strategy could be built on the research findings to target both the prevention of alcohol related harm and the treatment of alcohol related harm to young people in a way that made sense and connected with young people themselves, with their parents, and with people who work with young people on the ground.

The current research project sought to answer the following questions:

- a. What does alcohol related harm look like in young people and which young people/in which situations are most at risk?
- b. What could be done to help prevent young people being harmed by alcohol? Supports/Barriers
- c. What support is there for a GCYAS?
- d. What should a GCYAS cover?

- e. What will enhance the effectiveness of a GCYAS?
- f. How will the message that people aged under aged 18 years should not drink alcohol at all because there is no safe level of alcohol use for this age group (the delay onset message) be received, what could support this message being received, and does this message belong in a GCYAS?

METHODOLOGY

The present research was qualitative in nature, with in-depth interviews being undertaken in focus groups with three groups of people who were identified as being key stakeholders in a Youth Alcohol Strategy for Greater Christchurch:

- a) young people,
- b) parents of young people aged 14 – 17 years, and
- c) people who work with young people.

Young People (three focus groups) – two convened by Tayla Reece, Youth Voice Canterbury along with students at each school

- **Kaiapoi High School:** (n=7; four females, three males, 15-17 years, four New Zealand European, two Māori and 1 NZ European/Māori/Asian)
- **Aranui High School:** (n=7; five females, two males 16-17 years, four New Zealand European, two Māori/NZ European and one Māori/Pacific Islands)

One convened by student at the school

- **Hillmorton High School:** (n=12; seven females, five males, 16-18 years, six New Zealand European, one European, one Māori, two Asian one NZ European/Asian, one ethnicity unknown)

People who work with Young People (two focus groups)

Two focus groups were conducted with people who work with young people, one convened through the Canterbury Youth Workers' Collective, and attended by three female youth workers, and one held during the regular monthly meeting of the North Canterbury Youth Network (n=12). Of the twelve people at the North Canterbury focus group, nine participants were female and three male.

Parents – HARD SELL!

- **Selwyn - Halswell – Hoon Hay** (Te Hāpua) (n=8; seven female, one male, all New Zealand European/European, high socio-economic status, two parent families).
- **New Brighton** (Youth Alive Trust) (n=3; two female, one male, all New Zealand European, medium SES, single parent and blended families).

FINDINGS

What does alcohol related harm look like in young people and which young people/in which situations are most at risk?

High awareness of the kinds of alcohol-related harm across all groups

- Brain and liver damage, and damage to other organs
- Addiction
- Making silly mistakes and behaving poorly as a result of impaired judgement
- Accidents and medical emergencies, alcohol poisoning resulting in a need for hospitalisation
- financial impacts, especially when people become addicted;
- drink driving;
- damage to friendships; and
- pregnancy and unwanted sexual activity.

Most at risk:

As well as agreeing about what alcohol related harm looks like, parents, young people and professionals consulted were also largely in agreement regarding which young people were most vulnerable to harm, and in which situations.

- Young people with parents and significant adults around them who role model heavy drinking
- Young people with older friends
- Young people who are parented either very permissively or very strictly, and
- Young people whose parents do not engage with them were most commonly identified as vulnerable to alcohol related harm.

Māori young people consulted felt that the issue was more common in Māori homes, but this was not expressed by other groups.

In terms of settings where alcohol related harm is more likely for young people, **sports clubs, big events and family gatherings** were most commonly identified across the three participant groups.

What could be done to help prevent young people being harmed by alcohol?

A number of key themes emerged from the focus groups:

- **Education of young people in years 9 and 10**
 - the effects of alcohol at different levels of consumption
 - strategies they can use to say no to alcohol was identified as a key measure in preventing harm.
 - Young people and professionals working with young people shared the view that not enough time is spent discussing and educating young people around this issue at school. They saw a need for young people to be targeted with such education as a core part of the school curriculum in year 9 and 10, reaching young people before most have started drinking.
 - They wanted education to utilise sharing of first-hand experiences, from people that young people can relate to and look up to.

- **Educating parents**

A need was highlighted across the groups for education targeting parents of young people, and especially reaching them before their children start drinking. Education around:

- the harm that alcohol can cause to a teenage brain;
- encouraging parents to recognise what an impact their own role modelling around alcohol has on their children;
- developing an understanding of the effects of different amounts of alcohol on young people;
- developing understanding of what a standard drink looks like;
- educating them on their responsibilities under the law;
- educating them around host responsibility and
- encouraging parents to keep the lines of communication with their child open, and to get to know their teen's peers

Young people talked a lot about how they looked to parents and other relatives as key role models around drinking behaviour, yet parents put their emphasis on peers as role models.

Couple of quotes:

“I think you've gotta target the parents first because that's where it starts - at home.”

“I think a lot of the time, adults think that their daughters and sons are influenced by their friends, but I think a lot of the time they're influenced by how your parents act and what they do. I don't think parents realise that they have that much power.”

- **Enforcement**

Parents, youth professionals and young people themselves all talked about enforcement of laws relating to underage drinking and parental responsibilities.

There was a shared belief that parents are not being prosecuted, and that by doing so, Police could send out a clear message that parents need to step up and take a much more active and responsible role.

This was seen as needing to go hand in hand with education around parental responsibilities. Young people and professionals also wanted to see a harder line taken in enforcement around sale of alcohol to be consumed by underage young people.

- **Addressing New Zealand's drinking culture and especially the link between alcohol and sport**

Young people and people working with young people talked about the strong presence of alcohol in sport, and especially rugby and rugby league, and felt that addressing this link was one of the first steps to be made to address New Zealand's drinking culture. While this was acknowledged as a huge task, it was seen as able to be tackled through incremental changes.

In each of the youth focus groups, young people talked about the negative role played by alcohol role modelling of adults in sporting contexts.

- **Alcohol-free, appealing youth events**

Young people were seen as less likely to engage in alcohol use if they have other appealing alternative things to do with their friends. If a range of activities and events are on offer for young people, promoted as alcohol-free and policed as such, they were still seen as appealing by young people as

long as they catered for specific interests of different kinds of young people, ranging from alcohol-free skate events, concerts and events with food on offer.

What support is there for a GCYAS and what would enhance its effectiveness?

Needs to fit within a wider context of efforts to change New Zealand's drinking culture as a whole, and especially the association between binge drinking and sport.

Young people suggested that it was especially important that a strategy such as this **should have buy-in from a high level**, and especially from Central Government.

Youth workers and other people working with young people were keen that the strategy should **cover the ages 10-25 years**.

What should a GCYAS cover?

Education

- Of parents regarding their responsibilities, of their influence as key role models, and regarding the importance of engaging with their children and fostering open lines of communication and connection through the teen years.
- Of young people, especially around year 9 and 10 of high school, attempting to reach them before they start drinking, and building strong understandings of the effects of alcohol on their body (brain development, nutrition, impact on vital organs) and on their decision making capacities, and the harm that can result.

Sale and supply

- Encouragement of measures that make alcohol less appealing in retail outlets.
- Encouraging efforts to limit the number of off-licence outlets at which alcohol can be purchased.
- Encouraging retailers to limit the quantity of alcohol that can be purchased at one time

- Advocating for increases in price of alcohol, and especially of the kinds appealing to young drinkers, to make it less affordable.

Fostering and supporting positive alternatives to alcohol use

- Supporting and resourcing a range of alcohol free events that appeal to different kinds of young people and their sporting, cultural and recreational interests.

Accessible treatment

- Ensuring that treatment and supports for young people who are already experiencing alcohol related harm are easy to access.

How will the message that people aged under aged 18 years should not drink alcohol at all because there is no safe level of alcohol use for this age group (the delay onset message) be received, what could support this message being received, and does this message belong in a GCYAS?

Seen by all the groups consulted as ineffective on its own.

It was seen as too easily deconstructed (i.e. how can it be safe at 18 but not 17),

and far too heavily undermined by the role modelling of older friends, parents, family members and other adults, as well as the strong drinking culture that we live in.

Further, young people noted that young people do not like being told what to do, and a message like this could have the opposite effect of making young people want to drink before 18 years just to rebel.

The message was seen as more likely to get through to parents and to young people if it first “sold the why we need to reduce alcohol use”, and if it fitted as part of a context of active efforts to change New Zealand’s drinking culture at community level.

Participants also identified the importance of messaging being meaningful to the target audience.