

**Student Choices and Alcohol Matters (SCAM):
A multi-level analysis of student alcohol (mis)use and its
implications for policy and prevention strategies within
universities, cognate educational establishments and the
wider community**

By

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CONTENTS

Executive summary		
1	Introduction	1
1.1	Background	
1.2	Aims	
1.3	Methodology	
1.4	Ethics	
2	The Online Survey	5
2.1	Method	5
2.2	Results	10
2.2.1	The Sample	10
2.2.2	The characteristics of Drinkers and Non-drinkers	14
2.2.3	The Drinkers	25
2.2.4	The Non-Drinkers	39
2.3	Summary	40
3.	The Student Focus Groups	44
3.1.	Method	44
3.2	Drinking characteristics of the sample	45
3.3	Themes emerging from the focus groups	47
3.3.1	Motivation for drinking	47
3.3.2	Drinking patterns	50
3.3.3	Drinking at home	55
3.3.4	Negative aspects of drinking	57
3.3.5	Safety and security	61
3.3.6	Effects of drinking on academic activity	64
3.3.7	Changing attitudes and behaviour	68
3.4	Summary	75
4.	The key interviews	78
4.1	Method	78
4.2	Results	79
4.2.1	Perceptions of student alcohol use	79
4.2.2	Perspectives on alcohol related problems	83
4.2.3	Problems arising from students' use of alcohol	84
4.2.4	Problems arising from equality and diversity issues	91
4.2.5	The involvement of external agencies in student alcohol use	94
4.2.6	Addressing alcohol related problems	98
4.2.7	Supporting students with alcohol related problems	102
4.2.8	Changing drinking behaviour	106
4.3	Summary	111

5	Conclusions and recommendations	114
6	References	121
7	Appendices	123
7.1	‘Student Choice and Alcohol Matters’ Steering Group membership	
7.2	SCAM Workshop Programme	
7.3	SCAM Conference on Student Alcohol (Mis)use Programme	
7.4	The On-line Survey and AUDIT Response Codes	
7.5	Factors of the Modified Drinking Motives Questionnaire-Revised’ [DMQ-R]	
7.6	Frequency data on the ‘Alcohol Effects Questionnaire’ [AEQ]	
7.7	Sub-scales of the ‘Alcohol Effects Questionnaire’ [AEQ]	
7.8	Organisations of the Key Informants	

TABLES

- Table 2.1: Demographic information on the total sample, drinkers and non-drinkers
- Table 2.2: Respondents age by year of study
- Table 2.3: Drinking status by gender
- Table 2.4: Gender by drinking status
- Table 2.5: Age of drinkers and non-drinkers by gender
- Table 2.6: Ethnicity of drinkers and non-drinkers by gender
- Table 2.7: Sexual orientation of drinkers and non-drinkers by gender
- Table 2.8: Religious affiliation of drinkers and non-drinkers by gender
- Table 2.9: Type of educational institution attended, by drinkers and non-drinkers by gender
- Table 2.10: Type of qualification studied by drinkers and non-drinkers by gender
- Table 2.11: Mode of study of drinkers and non-drinkers by gender
- Table 2.12: Length of time drinkers and non-drinkers have been studying their course by gender
- Table 2.13: Drinkers and Non-Drinkers living arrangements by gender
- Table 2.14: Drinkers and non-drinkers who live with any dependants by gender
- Table 2.15: Drinkers and non-drinkers responses to the question ‘How much do you know about the risks/effects of drinking alcohol?’
- Table 2.16: Perceived descriptive social norms of drinkers and non-drinkers by gender - ‘How often do you think the typical HE student drinks?’
- Table 2.17: Perceived descriptive social norms of drinkers and non-drinkers by gender - ‘How much do you think a typical HE student at your college/university drinks on a usual weekend evening?’
- Table 2.18: Perceived descriptive social norms of drinkers and non-drinkers by gender - ‘In the last 30 days, what percentage of students at your college/university drank alcohol?’
- Table 2.19: Drinkers and non-drinkers perceived injunctive social norms by gender - ‘How would your friends respond if they thought you drank alcohol every weekend?’
- Table 2.20: Drinkers and non-drinkers perceived injunctive social norms by gender - ‘How would your friends respond if they thought you drank alcohol daily?’
- Table 2.21: Drinkers and non-drinkers perceived injunctive social norms by gender - ‘How would your friends respond if they thought you drove a car after drinking?’
- Table 2.22: Drinkers and non-drinkers perceived injunctive social norms by gender - ‘How would your friends respond if they thought you drank enough alcohol to pass out?’
- Table 2.23: Responses to the question ‘Do you perceive alcohol consumption to be a problem amongst other HE students at your college/university?’ by drinking status and gender
- Table 2.24: Drinking frequency - ‘Of the following descriptions about the amount of alcohol people drink, which best describes you?’
- Table 2.25: Level of alcohol consumption based on the number of drinks consumed during the week prior to the survey
- Table 2.26: Level of risky drinking in the previous week by whether respondents thought they had drunk too much
- Table 2.27: Number of hours respondents spent drinking on their heaviest drinking day in the week prior to the survey
- Table 2.28: Responses to the question ‘Thinking of your heaviest drinking day, during which time of day did you drink the most?’
- Table 2.29: The venue where, in general, respondents report drinking alcohol most often
- Table 2.30: Drinker’s mode of travel home after drinking alcohol away from home by gender
- Table 2.31: Frequency with which drinkers arranged in advance who was to be the designated driver on a night out by gender
- Table 2.32: Drinkers average weekly expenditure on alcohol
- Table 2.33: Responses to the question ‘How often do you have a drink containing alcohol?’
- Table 2.34: Responses to the question ‘How many drinks containing alcohol do you have on a typical day when you are drinking?’
- Table 2.35: Responses to the question ‘How often do you have six or more drinks on one occasion?’
- Table 2.36: Responses to the question ‘How many times have you been drunk in the last month?’
- Table 2.37: AUDIT results by gender
- Table 2.38: AUDIT results by age
- Table 2.39: Responses to the question ‘Do you perceive your alcohol consumption to be a problem?’ by gender
- Table 2.40: Responses to the question ‘As a result of drinking have the following ever happened to you?’
- Table 2.41: Descriptive data on the five motivational sub-scales of the DMQ-R

Table 2.42: To show responses on the Eight Factors of the Rohsenow Alcohol Effects Questionnaire

Table 2.43: Responses of non-drinkers who had never drunk alcohol to the question 'What is the main reason that you've always been a non-drinker?'

Table 2.44: Responses of non-drinkers who had drunk alcohol to the question 'What is the main reason that you stopped drinking alcohol?'

EXECUTIVE SUMMARY

Introduction

The aims of this study were to provide a case study of the nature and experience of student alcohol (mis)use within an East Midlands university¹, its partners colleges and its local community in order to determine the nature and perceptions of student alcohol usage by students and to provide a basis of knowledge on which the university could draw to develop alcohol policies and prevention and intervention strategies for reducing alcohol-related harm to students and secondary harm to the local population and the community.

A multi-method approach was employed involving a cross-sectional survey of the student population for quantitative data together with focus groups with students and interviews with key personnel in the university, its partner colleges and relevant agencies within the local community for more qualitative data as follows:

- 724 higher education students at the University of Northampton and its partner colleges completed an online survey examining their experiences of alcohol and alcohol-related matters
- 143 students took part in 20 focus group discussions which explored students' views on alcohol, reasons for drinking, how to reduce the negative consequences of alcohol, the intra- and inter-personal, university and community factors that influenced alcohol use and the effectiveness of existing health promotion materials on changing behaviour
- 29 individuals from academic and support departments within the University and its partner colleges, the student union and organisations within the community with interests in student alcohol use including the police, Northampton county council, the NHS, licensed premises, non-for profit alcohol agencies, took part in individual or small group interviews

Findings

The online survey:

- Whilst the online survey was not intended to be a representative sample of the student body and only comprises a small proportion of students enrolled at the institution, the general characteristics of those who responded are sufficiently similar to the university generally to enable us to have some confidence that the results are unlikely to be a distortion of the student pattern.

¹ The University of Northampton is a medium sized university with a population of 10,000 students, drawn largely from the Eastern Region of England. Through its commitment to widening participation, its student base reflects a wide socio-economic and ethnic mix. Partner colleges include the Tresham Institute, Moulton College and Northampton College, forming a confederation of more than 20,000 HE, Access and Foundation Degree students. At the university, all first year students are offered accommodation based at one of its two campuses. The location of the largest campus (Park), which is at the northern edge of Northampton, encourages a strong on-campus community, whilst Avenue Campus, more centrally located, provides easy access to the town centre and Northampton's Leisure Zone. Both campuses have their own students bar managed by the Student's Union.

- The majority of students surveyed (83%) classified themselves as drinkers, with only 17% classifying themselves as abstainers. Non-drinkers were more likely to be male, aged 21 and over, from ethnic minority groups, especially Asian, and practising a non-Christian religion.
- Compared to drinkers, non-drinkers reported that a smaller proportion of the students drink alcohol, but considered that students who did drink, did so more frequently. Female drinkers reported they would receive greater disapproval for more frequent and heavy drinking compared to male drinkers. The majority of students considered alcohol consumption to be a problem amongst other higher education students.
- Virtually all respondents (99.9%) reported knowing at least something about the risks of drinking alcohol. Drinkers reported knowing more about the risks than non-drinkers, with 52.3% of drinkers reporting that they knew 'a lot' or 'quite a bit' compared to 43.5% of the non-drinkers.
- Most drinkers reported that they drank 'a moderate amount' of alcohol. Male students drank more heavily than women; more men reported that they 'drink quite a lot' or 'drink quite heavily' and more women reported that they 'drink a little' or 'hardly drink at all'.
- 80.4% of the drinkers reported having 21 or fewer (for men) and 14 or fewer (for women) drinks in the previous week. Just under 20% reported drinking at levels above the recommended weekly guidelines and 2.4% did so at levels that could be considered harmful or even hazardous (2.4%). Those who drank more were more likely to report drinking too much, but a third of those who had drunk more than 50 alcoholic drinks in the previous week, did not consider that they had drunk too much.
- The majority (62.6%) of the student drinkers reported drinking alcohol at least once or twice a week. 19.6% reported drinking more often and 4.2% drank alcohol nearly every day. Men drank more frequently than the women.
- 44.6% of female students drank more than the recommended maximum of 3-4 drinks per day whilst 30% of the male students drank more than the recommended limit of 5-6 per day.
- Nearly 80% 'binge drink' (assessed in terms of having 6 or more drinks on one occasion). 49.6% do so at least once a month and a 19.6% do so at least weekly. Males were more likely to report binge drinking than females. Nearly half of the drinkers indicated that they had been drunk at least once in the previous month and a quarter that they had been drunk 4-10 times or more.
- Results of the AUDIT showed that 51.9% drank alcohol at levels considered 'hazardous', and 3.6% drank at levels considered 'at risk of dependency'. Men and younger students were at greater risk.
- Students reported drinking mainly in clubs or bars (40.5%), or at home or at a friend's/family member's house (37.2%). Less than 2% said that they generally drank alcohol in the student union.

- Drinkers reported a wide range of alcohol related problems in the previous year. Male students reported experiencing more problems than female students. Many problems were short lived and comparatively minor such as hangovers and vomiting from drinking. Others were potentially more serious. For example, just over 10% had been a passenger in a car when the driver was over the limit and 5% had driven when over the limit; a third had been separated from friends and 13.2% had got lost; 15.2% had unprotected sex and 12.2% having sexual intercourse when they 'ordinarily wouldn't have done'.
- Over a fifth attended a teaching session after having several drinks, a quarter reported that they had missed a teaching session after drinking alcohol and a tenth reported that they had performed less well than they expected because of drinking.
- Students reported that they were most likely to drink alcohol for positive social and celebratory reasons and to increase positive feelings. They were least likely to report that they drank alcohol to fit in with others or avoid social disapproval. The strength of men's reasons was greater than women's.
- Male and female students differed in their expectancies about the effects of alcohol, with men expecting more positive general effects from alcohol whilst women expected more positive effects in relation to sexual enhancement and more negative effects in terms of its impact on their cognitive and physical competence.

The student focus groups:

- Students reported drinking alcohol for a wide range of reasons, including as a social facilitator and enhancer, to celebrate and to relax or escapism. Some drank to get drunk whilst others noted that getting drunk was incidental. University culture was also given as a reason.
- Students reported a range of drinking patterns, ranging from light and moderate through to drinking regularly and excessively. Others seldom drank alcohol but 'binged' when they did so. Those who abstained or rarely drank alcohol, did so for a variety of reasons including because they didn't like the taste or the effects of alcohol, or for religious or other reasons such as taking medication.
- Some students thought excessive drinking was problematic, largely because of its effects on their friends, rather than themselves. Many excused their excessive drinking by referring to the context such as the pattern of drinks available in the clubs. For some, the pattern of drinking was a personal challenge, but for many their drinking was undertaken within certain self-regulated limits. Government guidelines on drinking were not viewed as realistic and were regularly exceeded.
- Those students who abstained from drinking reported feeling excluded from many social activities and sports. Drinkers found it difficult not to drink alcohol when out with friends who were drinking because of negative comments and because they found it boring.
- Home based students had a drinking pattern more similar to young people generally, going out on week-end nights such as Friday and Saturday. The younger, more 'traditional' students living in university based accommodation away from home were

more likely to go out drinking during the week, especially on the 'student nights' at the local clubs.

- Price of alcohol was a predominant factor in the pattern of drinking. Many students bought to get the most effect for the least cost, often buying the cheapest type of alcohol in local supermarkets to drink at home or selecting licensed venues where drinks were cheaper.
- A high proportion of students drank at home. Many, especially in student halls of residence or accommodation, pre-loaded on cheap supermarket alcohol before going out clubbing so were often intoxicated when they arrived at the venue. They drank alcohol on 'boys' or 'girls' nights in, watching sport on TV, or having a take-away or a 'girlie' night. Home based students reported drinking with their family at, for example, mealtimes or when relaxing. A few spoke of problems with other people's, such as partner's or family member's, drinking at home.
- Students reported a wide range of negative features related to drinking alcohol including spending too much money either on alcohol or other things when drunk, health problems, injuries, mood changes, increased lack of control, memory loss, embarrassment at things done under the influence of alcohol, increased vulnerability such as that attached to drink spiking, increased aggression and violence, and risky sexual behaviour.
- Students employed a range of strategies to stay safe whilst drinking alcohol, including staying together in groups, controlling consumption, gaining experience to deal with potentially threatening situations, and determining their 'safe' drinking levels. First year students were perceived to be most vulnerable because they were unused to alcohol and the town and had to learn how to manage their drinking and to stay safe.
- Most students spoke of finding the appropriate balance between enjoying themselves and studying. Some did not go out when work was heavy and assignments due in; others went out and tried to stop drinking alcohol early in the evening. Drinking affected attendance at formal teaching sessions the following day and engagement with the work. Moderate or non-drinkers commented on the adverse effect on teaching sessions of students who attended after drinking the previous night or who failed to attend.
- Many students reduced their drinking as they progressed through their studies, partly because social issues were less salient and partly to ensure they performed well. They reported that they socialised and drank more in their first year because it did not count towards their degree classification. Some felt that by doing so they had missed the opportunity to develop skills and knowledge that would have supported their studies in subsequent years.
- Place of study and type of activity impacted on the experience of drinking; students at the partner colleges reported that they had fewer opportunities to drink alcohol on campus and class attendance was more regulated so that study time lost to alcohol was minimised. Many of those at university who went out on placement reported drinking less when they did so.
- Students reported they were more likely to change their alcohol related attitudes and behaviour for social reasons rather than health ones. Mature students were more

sympathetic to health messages. Most students considered that their excessive drinking was a temporary phenomenon, to enjoy whilst they were relatively free from responsibilities. They felt they would not drink over a sufficiently long period to suffer any adverse health consequences.

- Students considered that the university had a role to play in raising awareness of the dangers of alcohol amongst students, especially amongst freshers. Suggestions included the provision of sessions during freshers' week or a short accredited module, and posters or information in strategic locations on campus and in licensed venues that showed the impact of drinking.
- Students held mixed views on current alcohol oriented health promotion campaigns. Most thought that the social focus of recent campaigns was more effective than those based on health. Many thought that comparisons of drinkers' state at the beginning and the end of the evening were effective, but some disagreed, arguing that drinking was a social activity and everyone would be in the same state at the end of the session, rendering them ineffectual.
- There was an overall discrepancy between the students views on units and the government's guidelines on sensible drinking levels. Many reported difficulty in working out how the units related to their own consumption and thus gave up trying. Most referenced their own drinking behaviour which exceeded the guidelines and which didn't appear to harm them, so the message lost credibility and they tended to reject the information wholesale.
- Many considered students to be responsible for their own drinking behaviour and it was the individual's choice if they wished to drink excessively. They were reluctant to interfere if they saw someone having problems through excessive use of alcohol. Exceptions were made for close friends and family where they might encourage them to seek professional help. In addition, some recognised the more systemic elements of alcohol consumption and pointed to a need to modify the student culture.
- Views on the changes to the student union designed to reduce the emphasis on alcohol were mixed, with some considering it had been successful and others that it had just changed the location of the drinking. Increasing the cost of alcohol was seen as an effective way of reducing drinking, but most thought that it was unfair on the majority who drank sensibly.

The interviews with higher education and community staff:

- Seven key themes concerning student alcohol (mis)use emerged from the interviews. There was considerable congruence in the views of internals and externals about student alcohol related issues.
- Interviewees viewed student drinking as part of a university culture where much of student socialisation was organised around alcohol consumption. It was perceived as a temporary phase, which would end when students graduated and gained work and family responsibilities. The culture was seen against a present day background of a general youth culture of excessive alcohol consumption, and thus not solely a university phenomenon.

- Some reflected that not all students drank alcohol, not all drank excessively and that the current financial pressures on students result in more students working and thus having less leisure time to socialise with alcohol. Factors of nationality, ethnicity, religion, type of institution attended, residence and parental influence also affected students' use of alcohol.
- Alcohol consumption raised equality and diversity issues associated with, for example, cultural differences of international students, different religious and ethnic groups, and competing needs of drinkers and non-drinkers. These had implications for the student union and the university's facilities, operations and procedures.
- A wide range of problems were attributed to alcohol, but staff stressed that these affected only a very limited proportion of the students. Problems came to staff attention through the disciplinary route or the student support route. Problems of students living off campus were less likely to be known about.
- Interviewees reported that they seldom saw students with alcohol abuse or addiction, although some students sought help in dealing with such a problem in family members. Instances of serious harm through alcohol use, either by the student or as a consequence of another's drinking were rare.
- In addition to problems of drunkenness such as noise, aggression, academic and financial concerns, interviewees also reported that existing physical and mental problems were precipitated or exacerbated by alcohol consumption. Some non-drinkers experienced problems arising out of pressure to conform.
- There were mixed views on licensed premises such as clubs and pubs. Nightclubs with student nights were seen as both encouraging students to consume excessively and as providing a more supportive environment than conventional venues. Pubs were seen to accommodate both the excessive and the moderate drinkers.
- Interviewees criticised off-licences and their promotions for their role in encouraging home consumption and pre-loading so that students were often intoxicated before going out to social events. The dangers of unmonitored alcohol consumption were noted.
- University and external interviewees considered that it was difficult to assess the extent to which students drew on the general health services in relation to alcohol related problems, because formal records were not kept separately to those of young people in general.
- A number of external agencies specialised in alcohol problems, and both the university and the agencies spoke of working effectively together. Alcohol services were involved in health promotion activities and staff training exercises. The university support services referred students with alcohol issues to them.
- The police interviewees considered that students attending drinking venues on week-nights in the town centre were less troublesome than the general population attending at the week-end. Low level disorder was limited. More trouble occurred when students and locals attended the same event. Alcohol related incidents on campus involving the police were reported by both sides to be rare.

- Student alcohol related problems were addressed through institutional policies and guidelines, the use of disciplinary procedures, by preventing problems emerging through appropriate staff training and development, creating a positive physical environment, and working with the student union to develop and implement strategies designed to reduce excessive drinking.
- Students with alcohol related problems were supported directly by academic staff, and through academic structures such as the 'cause for concern' or 'mitigating circumstances' procedures, the student counselling service and mental health team, the GP medical services, by referrals to the community alcohol service provision, and by student union welfare staff.
- Proposals for bringing about change in students' use of alcohol included developments in university policy, raising awareness of both staff and students of alcohol related harm, changing the culture and its tolerance of excess alcohol use, undertaking alcohol campaigns, implementing a well-being programme, developments in the curriculum, working through the student union and working more closely with agencies in the community.

Conclusions and Recommendations

Whilst this research has shown that not all students misuse or abuse alcohol, a significant proportion do, at potentially significant costs to their health, education and finances both in the short and the long term. Such behaviour also incurs costs for the university and society as represented by the local community. The research has also shown that student alcohol (mis)use cannot be considered in isolation from the community in which the university sits. It adds support to the need for a multi-level approach to dealing with alcohol (mis)use involving action at the level of the student, the university and the community. Drawing on the research provided by this case study, a number of recommendations for action by higher education institutions were made. A full listing of the recommendations can be found in the main report but key ones are listed below:

We recommend that universities and colleges should:

- review their policies, practices and degree regulations to ensure that a clear and consistent message on acceptable alcohol consumption is presented and that students who do not drink are not disadvantaged
- take a strategic lead on addressing student alcohol consumption, and combine with relevant organisations within their community to develop policy and practice designed to reduce the level of alcohol (mis)use. Such a combination should include representatives from the drinks trade and the supermarkets as well as from public organisations such as the police and health services and the not-for profit alcohol welfare services.
- work with those in the community and in the institution who are knowledgeable in the field of health promotion and behavioural change, to develop alcohol focussed programmes and materials designed to engage and positively influence higher education students' alcohol related attitudes and behaviour

- work more closely with the alcohol related agencies in the community to share knowledge and good practice in recognising and working with students with alcohol related issues in order to better support them
- raise staff awareness of the impact and consequences of excessive drinking on the personal and academic well-being of students and encourage them to consider ways in which they could incorporate evidence-based alcohol related topics into the curriculum
- include relevant information on alcohol use in pre-enrolment documentation for first year students to counter misperceptions of the predominant drinking culture and raise awareness of the potential harm of excessive consumption
- give clear messages to students that excessive alcohol consumption is harmful and make available a range of materials and links to other relevant other bodies and organisations that raise awareness of the dangers of alcohol and advise on steps that can be taken to protect themselves
- develop and implement a programme of voluntary, possibly web-based screening, for all students on their use of alcohol which provides a link to support such as a brief intervention programme or access to student service personnel for those wishing to change their behaviour.
- provide a range of non-alcohol focussed leisure activities that meet the needs of all students, together with learning experiences that satisfy the social and integrative needs of students as well as educational ones
- establish appropriate research related to the institution and its local community to determine and monitor the nature of student alcohol related (mis)use and to assess the effectiveness of interventions to reduce associated harm

CHAPTER 1 - INTRODUCTION

1.1 Background

Levels of alcohol consumption and alcohol related problems in the Western world, particularly amongst young people, continue to generate concern (World Health Organisation, 2010). Overall per capita consumption of alcohol has risen 50% since 1950 (Academy of Medical Sciences, 2004). The 2007 General Household Survey figures show that 65% of all 16-24 year olds and 75% of all 25-44 year olds drank alcohol at least once in the week prior to interview, with 32% and 31% respectively drinking more than 8 units on any one day in that week (Statistics on Alcohol: England, 2009). Although there is evidence from the General Lifestyle Survey 2008 (Robinson and Bugler, 2010) that levels of alcohol consumption, especially in the 16-24 year old age group, are continuing to fall from their peak in 2000, there is a need to be cautious in interpreting the evidence at face value. Updated methods of estimating units of alcohol, which might have been underestimating consumption over a period of time, the possible tendency of respondents to under-report consumption because of heightened publicity over the dangers of alcohol and the need to moderate behaviour, and, for the younger age group specifically, the declining level of participation of 16-24 year olds in the General Household Surveys may all have contributed to an overestimation of this fall (Robinson and Bugler, 2010). However, the general consensus is that the prevalence of alcohol use would seem to have stabilised in the second half of the first decade of the 21st century.

Although the increase in alcohol consumption may have levelled off, concern about the use of alcohol has not diminished and attention has transferred to patterns of drinking. Inappropriate alcohol use such as heavy episodic or binge drinking, frequent drinking, drunkenness, and alcohol abuse is associated with a range of adverse immediate and long term consequences for both the individual and their community. Whilst the recent UK evidence suggests an overall decrease in drinking frequency in young people (Smith and Foxcroft, 2009), research indicates a pattern of 'binge drinking' or 'drinking to get drunk' and a greater risk of problematic drinking in young, especially single, adults generally (Goddard, 2006, Pincock, 2003, Engineer, Phillips, Thompson, and Nicholls, 2003). Such patterns appear to be emerging at earlier ages with the average units consumed by under 16 year olds increasing markedly between 1990 and 2006, although again, this has shown signs of levelling off in more recent years (Smith and Foxcroft, 2009). This stabilisation may be a result of the development of a more bi-partite pattern of alcohol use with increasing numbers abstaining or drinking only occasionally whilst the more regular drinkers are drinking in greater quantities or to excess (Measham, 2008)

The UK General Lifestyle Survey 2008 (Robinson and Bugler, 2010) shows that, with the exception of the 65+ age group, levels of weekly alcohol consumption were similar across the three age groups from 16-24 year olds through to 45-64 year olds, averaging at 13 units a week. This suggests that patterns of drinking developed as an adolescent or young adult are likely to be maintained through subsequent ages. Further evidence from the survey clearly shows that adults classified as 'professional and managerial' drink more alcohol than those in 'routine or manual' households, and that those with higher levels of income consume more alcohol than those on lower incomes. This level pattern of consumption from early adulthood to late middle age, together with the greater likelihood that those engaged in higher education will move into managerial and professional occupations and achieve higher incomes, suggest that students may be particularly susceptible to higher levels of drinking throughout their

lifespan and that patterns of alcohol consumption developed during their time in higher education may be sustained in the longer term.

There is evidence that students, when compared with the general youth population, are at particular risk of harmful patterns of consumption. In her review, Gill (2002) found that students who progress to higher education show an increase in consumption relative to their peers in the general population and that drinking is embedded within the university culture and often viewed as synonymous with university life. White et al (2006) found that those young people who left home to attend college showed significant increases in their use of alcohol and in heavy episodic drinking.

Whilst considerable research has been undertaken on college students' pattern of alcohol use in the United States (for a review see Ham and Holt, 2003), less has been carried out with undergraduate populations in the UK (Karam, Kypri & Salamoun, 2007). However, several early UK studies revealed alcohol related problems in students (e.g. West, Drummond and Eames, 1990) and a survey of dental undergraduates found that nearly two-thirds (63%) of male students and over a third (42%) of female students drank over the national safe guidelines (Underwood, 2000). There was some indication that binge drinking by UK students is higher (Gill, 2002). More recent research findings indicate that the scale of the problems in student populations in the UK, Europe and other westernised countries is similar to that in the USA (e.g. Karam, Kypri & Salamoun, 2007; Dantzer et al, 2006). In an international study of students in 21 developed and developing countries, the pattern of 'heavy drinking', defined as 5 or more drinks in men and 4 or more in women on at least one occasion in the previous two weeks, was found to be a concern among students in a number of countries. English female students were found to have one of the highest rates (Dantzer, Wardle, Fuller, Pampalone and Steptoe, 2006). As the undergraduate population in the UK has undergone considerable expansion in recent years due to the Labour government's target of having 50% of school leavers in higher education by 2010, any alcohol related issues related to this group are also likely to increase unless positive attempts are made by universities to address harmful drinking patterns.

Colleges and universities in the USA are legally required to have alcohol policies in place and to enforce the law on underage drinking, but virtually all university students in the UK are above the legal age for alcohol consumption so that pressures on the universities to develop and implement policies and prevention strategies are less salient. Whilst alcohol and drug related problems with those studying to enter the professions in the UK, notably dental and medical students (e.g. Newbury-Birch, Lowry and Kamali, 2002; Barber and Fairclough, 2006) have been a concern for some time, universities are gradually becoming more aware of the harmful consequences of alcohol in the student population more generally, and some are taking steps to develop alcohol policies and to raise awareness and change behaviour (Coghill, Orme and Swindells, 2009). However, evidence on which to base effective primary and secondary prevention efforts for UK students is limited. Traditionally programmes have focussed on raising students' knowledge and awareness of the risks of alcohol use in the belief that this would lead to behavioural change and reduce alcohol consumption, a belief that has been shown to be overly optimistic (Gill & O'May, 2007). The majority of such programmes operate on the assumption of intra- and inter-personal responsibility for alcohol use. However, findings within the USA show the importance of taking a multi-level approach to alcohol use by students, with policies and programmes addressing contextual factors within the institution and in the broader community that play a role in shaping students' alcohol behaviour (DeJong & Langford, 2002). The US NIAAA 2002 report of the Task Force on

College Drinking (NIAAA, 2002) emphasised the need to develop research and interventions that take an integrative approach towards reducing alcohol related risky behaviour in students, and similar recommendations in the UK have been made for programmes aimed at the general population (e.g. Thom and Bayley, 2007). It has also been argued that prevention and intervention strategies would be more likely to succeed in changing behaviour if they recognised that alcohol also plays a positive role in student life, with recommendations geared towards harm reduction rather than extolling abstinence (Park and Grant, 2005) or emphasizing the positive consequences of non-abusive levels of alcohol use (Moore, Perham and Shepherd, 2006).

These findings and those of others already noted (Gill & O'May 2007) suggested the need for a systematic, multi-level study that focused upon the alcohol related attitudes and behaviours of students towards alcohol consumption, with the purpose of identifying factors that could inform the development of interventions and strategies to raise awareness about the prospect of alcohol induced harm and encourage sensible drinking patterns. Whilst much of student drinking takes place on campus in student residences, in campus bars and in the student union, a considerable proportion takes place within the community in, for example, licensed premises and off-campus living accommodation. It is therefore important that the impact of student alcohol use on the community is understood and that the views of interested parties within the locality are represented.

1.2 Aims of the study

The aims of this study were to provide a case study of the nature and experience of student alcohol (mis)use within an East Midlands university², its partner colleges and its local community in order to determine the nature and perceptions of alcohol usage by students and to provide a basis of knowledge on which the university could draw to develop alcohol policies and prevention and intervention strategies for reducing alcohol-related harm to students and secondary harm to the local population and the community. The specific aims and objectives of the research were:

1. To review the nature of existing student-related alcohol concerns and interventions at the university, its partner colleges, and its wider community in order to assess current experience and provide a platform for future policy and activity-based interventions.
2. To determine the pattern of alcohol consumption and experience within the student population, recognising the potential for differences related to age, sex, ethnicity, institution, campus, pattern of student attendance, year of study and form of residence.
3. To understand student perceptions of alcohol and the part it plays in student life.
4. To use information derived from the above to inform university and community alcohol policies and support the development of prevention and intervention strategies

² The University of Northampton is a medium sized university with a population of 10,000 students, drawn largely from the Eastern Region of England. Through its commitment to widening participation, its student base reflects a wide socio-economic and ethnic mix. Partner colleges include the Tresham Institute, Moulton College and Northampton College, forming a confederation of more than 20,000 HE, Access and Foundation Degree students. At the university, all first year students are offered accommodation based at one of its two campuses. The location of the largest campus (Park), which is at the northern edge of Northampton, encourages a strong on-campus community, whilst Avenue Campus, more centrally located, provides easy access to the town centre and Northampton's Leisure Zone. Both campuses have their own students bar managed by the Student's Union.

that are student credible and will increase the probability of effecting behavioural change and reducing student-related alcohol harm.

5. To disseminate the findings of this study to the university community within the UK and to those agencies whose interventions are capable of making a difference.

1.3 Methodology

The research consisted of three strands - an online survey of students from the university and three of its partner colleges, a number of focus groups with students also drawn from across the university and its partner colleges, and a series of interviews with key personnel within the university and its partner colleges and with key personnel from partner agencies, organisations and community groups within Northampton with an interest in student alcohol consumption. These included members of university and college academic, administrative and support staff, the student union and members of relevant local organisations, such as the police, the primary care trust, support and advice services targeting alcohol misuse, and representatives from the licensed trade. This tri-partite approach was taken in order to assess students' use/misuse of alcohol and to explore the issues surrounding alcohol consumption from a multilevel and community perspective. It therefore enabled us to examine the contextual environmental and community factors as well as intra- and inter-personal ones associated with student alcohol use.

Rather than outlining the methods used for each of the three strands in detail here, we have reported the specifics of the methodologies for the online survey, the focus groups and the interviews with key personnel in the subsequent chapters, which address each of these research elements in turn.

In addition to the three research strands, a workshop was convened in order to bring together the views of local and regional professionals specialising in alcohol issues to consider some of the preliminary research findings and to reflect on their implications for student related alcohol policy and practice. A copy of the workshop programme can be seen in Appendix 7.1.

At the end of the project a national conference was organised to bring together other researchers working in the field of student alcohol (mis)use to disseminate findings from the project, to hear of their developments and to share expertise with a range of attendees from organisations and agencies drawn from the public-sector, the not-for-profit sector and the private sectors. A copy of the conference programme can be seen in Appendix 7.2.

A Steering Group to advise on the project was established, which met six times during the progress of the research study. Members were drawn from the University and its partner colleges, the Student Union and representatives from local community organisations involving the public and private sectors. A list of the members can be seen in Appendix 7.3.

1.4 Ethics:

The project was submitted to, and approved by, the University of Northampton's Research Ethics Committee.

CHAPTER 2 – THE ONLINE SURVEY

This chapter contains details of the online survey and its findings.

2.1 Method

2.1.1 Design

A survey comprising questions designed to elicit a range of socio-demographic and alcohol related information was developed and mounted online via the Bristol Online Survey (BOS). Comparisons of the same questionnaires delivered in different formats (web-based compared with paper and pencil ones) have shown that web-based alcohol assessments are reliable and valid and an appropriate alternative to more traditional methods (Miller et al, 2002). As the survey was designed to elicit information from students across the university and three of its partner colleges, online presentation of the questionnaire was considered the most appropriate means of reaching potential participants.

2.1.2 Participants

Higher education (HE) students at the University of Northampton and three of its partner institutions, Northampton College, Moulton College, and Tresham Institute, were invited to take part in the survey. 724 students responded. Characteristics of the students are detailed in the results section of this chapter.

2.1.3 Measures

Two multi-item questionnaires were developed by the researchers to obtain information from students who classified themselves as drinkers of alcohol and from those who classified themselves as non-drinkers. According to Gill (2002) there are no commonly agreed criteria for abstinence and the literature shows that abstaining from alcohol use has been defined in a number of ways. In her review, Gill reports that most studies have reported abstainers as those who did not drink alcohol in the typical week, whilst others, for example Orford et al (1974), defined it in terms of drinking on three or fewer occasions in the last year, and Anderson (1984) defined the abstainer as someone who never drinks alcohol. We allowed the respondents to define themselves as either drinkers or non-drinkers by presenting an initial question that asked all participants to state whether or not they drank alcohol. Those who responded that they did drink alcohol were directed to the drinkers section of the questionnaire, those who responded that they did not drink alcohol were directed to the non-drinkers section of the questionnaire. In addition to questions specific to their drinking status, the two questionnaires had in common a range of general items and ones that were not directly related to the participants' drinking experience. The measures are detailed below. To enhance accessibility we have provided details in three sections - section one relates to measures that were common to both, section two relates to measures for drinkers only and section three relates to measures for non-drinkers only.

2.1.3.1 Section 1: Drinkers and Non-drinkers

2.1.3.1.1 General socio-demographic and educational information

All participants were asked to respond to a number of demographic questions related to age, gender, ethnicity, religion. We also asked for information on which institution (the university or one of the partner colleges) they were studying at, what level of HE qualification they were studying for, how long they had been studying the course, and whether they were studying full or part-time. Information on their living arrangements was requested on the spring term questionnaires and six response categories were given - 'halls of residence', 'with friends/shared accommodation', 'with parents', 'with partner' and 'living alone'. A supplementary question asked participants to state whether they lived with any dependents.

2.1.3.1.2 Risks of drinking

To determine the extent to which students felt that they understood the risks associated with drinking, we asked the question 'how much do you know about the risks/effects of drinking alcohol?' and provided five responses ranging from 'know a lot' through to 'know nothing'. Whilst this did not provide an objective check on their knowledge of the risks of drinking alcohol, it provided us with participants' beliefs about their understanding, which we considered to be the more interesting question.

2.1.3.1.3 Social norms

There is considerable evidence of the relevance of social norms to alcohol consumption (eg. Baer et al 1991). There are two types of social norm - descriptive norms which are related to the perception of other people's drinking based on observation of their behaviour - and injunctive norms which relate to the perceived (dis)approval of others of drinking obtained through actual statements of others or through inference by observing others' behaviour. Both types of social norms were relevant. Measurement of perceived descriptive norms of other students drinking practices was by three questions, the first two relating to drinking frequency and alcohol consumption being derived from the Drinking Norms Rating Form (DRNF - Baer et al, 1991). Respondents were asked to indicate how often they thought that 'the typical HE student at your college/university drinks' (with six response options ranging from 'never' to 'nearly every day'), how much they thought 'a typical HE student at your college/university drinks on a usual weekend evening' (with six response categories ranging from 0, 1-2, 3-4, 5-6, 7-8 to 'more than 8'). The third question asked students to indicate 'the percentage of HE students at your college/university which drank alcohol within the last 30 days' (with response options rising sequentially in 10% intervals from 10% to 100%).

Measurement of the students' perceived injunctive norms of drinking was also based on Baer et al's (1991) work which assessed the perception of their friends' approval, and was obtained through responses to four questions based on the initial phrase 'how would your friends respond if they knew you'. The four statements comprised two items on drinking frequency - 'drank alcohol every weekend' and 'drank alcohol daily', and two on drinking problems - 'drove a car after drinking' and 'drank enough alcohol to pass out'. Five response options were provided, ranging from 'strong disapproval' to 'strong approval'.

2.1.3.1.4 Drinking safely

We were also interested in establishing the extent to which students took precautions when drinking and tried to moderate the potential harm associated with alcohol use. As the pattern of drinking is often irregular in young people and we wished to ensure we were not excluding students who had had some experience of alcohol but who were no longer drinking, we placed the question in both surveys.

We employed a 10-item questionnaire in which we asked the students to specify how often, when they had drunk alcohol during a night out in the past year, they had undertaken a range of behaviours. These included such behaviours as 'alternate non-alcoholic with alcoholic beverages', 'use a designated driver', 'eat before and/or during drinking', 'pace your drinks to one or fewer', etc. Respondents who drank alcohol could answer in one of five categories ranging from 'always' through to 'never'. A sixth option enabled respondents to indicate that they did not drink alcohol.

2.1.3.1.5 *Drinking alcohol as a problem in HE*

We also asked all participants whether or not they perceived alcohol consumption to be a problem amongst other HE students at their college/university. They could respond either 'yes' or 'no'.

2.1.3.2 Section Two - Drinkers only

The Drinkers' questionnaire included a range of questions concerning their use of alcohol, their pattern of drinking, where they drank alcohol, the consequences of drinking alcohol, the reasons why they drank alcohol, and perceptions of alcohol use by other students.

2.1.3.2.1 *Drinking Rates*

This was measured in two ways - perception of their drinking frequency and their actual consumption. Participants reported their typical drinking frequency and the quantity of alcohol consumed during the previous week. To obtain their typical drinking frequency respondents were asked to indicate which of six response options concerning drinking frequency best described them. The six statements ranged from 'I don't drink at all' to 'drink quite heavily'.

To assess the quantity of alcohol they consumed, participants who reported that they drank alcohol were asked to indicate how many alcoholic drinks they had had on each of the seven days during the previous week. They were also asked to indicate whether this was a typical week, and if it was not, whether it was untypical because they drank more or less alcohol than usual. Respondents were also asked to indicate whether they thought that they had drunk too much during this week, with three response categories, 'yes' or 'no' or 'don't know'.

2.1.3.2.2 *The heaviest drinking day*

More specific information on the respondents' heaviest drinking day during that week was obtained. To assess the number of hours in which they consumed alcohol, participants were asked to indicate the time they started to drink alcohol and the time that they stopped drinking alcohol. This information was used to calculate a total time in which drinking took place. To assess the peak time at which most drinking on their heaviest drinking day occurred, respondents were presented with a list of two-hourly interval response options and asked to indicate at which time of the day they had drunk the most. Respondents were also asked to identify the main venue in which they had drunk on their heaviest drinking day. They could select one of eight venues, comprising 'home', 'friend's house', 'club/bar', 'pub', 'students union', 'restaurant', 'outside', and 'other'.

2.1.3.2.3 *Drinking location*

Respondents were asked several questions about their drinking generally. From the same eight venues as those used in the question concerning drinking locations during their heaviest drinking day, they were asked to specify where, in general, they drank most often.

2.1.3.2.4 Travel after drinking away from home

Two questions were included to provide information on the students' travel arrangements when drinking alcohol away from home. The first related to how they usually travelled home and respondents were asked to check one of six categories - 'walk alone', 'walk with friends', 'by bus', 'drive own car', 'a friend or designated driver', or 'by taxi'. A subsidiary question asked how frequently they arranged in advance who was to be the designated driver on a night out if they travelled by car. Respondents could check one of four response categories ranging from 'always' to 'never'.

2.1.3.2.5 Expenditure on alcohol

To obtain information on how much money students spent on drinking alcohol, respondents were asked to report the amount that they spent on alcohol in an average week. They were asked to indicate the amount to the nearest pound.

2.1.3.2.6 Degree of excessive drinking

Excessive drinking was assessed in two ways. Information on the extent to which the students were drinking in a risky way was obtained through the questions of the Alcohol Use Identification Test [AUDIT] (Babor, Higgins-Biddle, Saunders and Montiero, 2001). The AUDIT comprises 10 items; responses can be classified into four categories and identifies whether the individual has a hazardous or risky drinking, harmful drinking or alcohol dependency drinking pattern. It has been used successfully with university students (Fleming, Barry and MacDonald, 1991). In addition, binge drinking was assessed with reference to the frequency with which students became inebriated. They were asked to indicate the number of times they had been drunk in the previous month with five response options 'none', 'once', '2-3 times', '4-10 times' and 'more than 10 times'

2.1.3.2.7 Problems associated with drinking

We were interested in the extent to which students had experienced problems as a consequence of drinking alcohol. Information was obtained through a 33 item scale which asked respondents to indicate how often they had experienced any of the items listed. The list included such phenomena as hangovers, taking drugs, been a victim of crime, had unprotected sex and been in trouble at college/university. Six response categories were provided ranging from 'not happened', 'happened at least once in the past month', 'once within the past six months', 'once during the past year' and 'at least once in their lives but not in the past year'. There was also a category for respondents to indicate that they didn't drink. Several of the items were derived from the measure used in the EXPOSED 2005 drug and alcohol survey undertaken by the University of Sydney Union and Health Education Unit together with further additions from the literature and the researchers own experience.

2.1.3.2.8 Reasons for drinking alcohol

We were also interested in establishing the reasons why students drink alcohol. To do so we asked respondents to complete the 28-item Modified Drinking Motives Questionnaire - Revised [DMQ-R] for undergraduates (Grant, Stewart, O'Connor, Blackwell and O'Connor, 2007). This is a modified version of Cooper's (1994) initial four factor drinking motives questionnaire which distinguishes between drinking to cope with anxious feelings (coping-anxiety) and drinking to cope with depressed mood (coping-depression). The DMQ-R thus has five sub-scales measuring five motives for drinking. They comprise drinking for social reasons (5 items), for enhancement reasons (5 items), for conformity reasons (5 items), for coping-anxiety reasons (4 items) and for coping-depression reasons (9 items). Respondents are asked to indicate how often they are motivated to drink for each of the items listed and

respond on a 5-point Likert scale ranging from 1 (almost never/never) to 5 (almost always/always). Each sub-scale is scored by calculating the mean of the responses for each of the items within it. There is good evidence of the questionnaire's psychometric properties and its reliability and validity with an undergraduate population (Grant, Stewart, O'Connor et al, 2007; Grant, Stewart and Mohr, 2009; Mezquita, Stewart and Ruiperez, 2010)

2.1.3.2.9 Expectancy effects of drinking alcohol

We were also interested in the students' expectations about the effects of alcohol. For this we used a modified form of the Alcohol Effects Questionnaire AEFQ (Rohsenow, 1983). The AEFQ is a modified form of the Alcohol Expectancy Questionnaire (Brown et al 1980). It is used to assess the expectancies that people have regarding the effects that alcohol have on them. It is a 40 item scale comprising statements that range from 'drinking makes me feel less shy' to 'alcohol makes me careless about my actions'. It has six positive (social and physical pleasure; social expressiveness; sexual enhancement; power and aggression; global positive; relaxation) and two negative (cognitive and physical impairment; careless unconcern) expectancy sub-scales. The test-retest reliability and the criterion and construct validity of the AEFQ have been appropriately examined (Rohsenow and Bachorowski, 1984, Rohsenow et al, 1992). We made one modification, changing the true/false response format to the agree/disagree format of Brown et al. (1980) as did Collins, Lapp, Emmons and Isaac (1990).

2.1.3.2.10 View of their own alcohol consumption

Finally we asked about the extent to which the students considered their alcohol consumption to be a problem, again with six response options. Excluding that of the category for the non-drinkers, the remaining five categories comprised three in which the respondent could answer no but for different reasons - 'no, I drink at safe levels', 'no, at times I drink to excess but do not perceive it to be problematic', 'no, I am too young/old to worry about it', and two that allowed them to agree - 'maybe' and 'yes'.

2.1.3.3 Part Three - Non-drinkers only

2.1.3.3.1 Reasons for not drinking

As abstinence from alcohol may not always be permanent, non-drinkers were asked if they had always been a non-drinker and if so, to provide the main reason why. They could respond in one of six categories - 'religious reasons', 'don't like it' 'parents advice/influence', 'health reasons', 'can't afford it' and 'other'. They were asked to give the number of years that they had been a non drinker. For those who had not always been a non-drinker we asked a supplementary question to determine the reason why they had stopped drinking alcohol. They could respond in one of six categories - 'religious reasons', 'don't like it' 'parents advice/influence', 'health reasons', 'can't afford it' and 'other'.

2.1.4 Procedure

Invitations to all higher education students in the four institutions were presented on the university's internal network to which all HE students have access and all students were emailed directly about the survey. The survey was posted online in the second half of the autumn term and remained active for two weeks. The latter part of the autumn term was chosen for presentation of the survey because there is considerable evidence that student drinking - especially that of the first year students - is considerably higher in the first few weeks of the academic year and we wished to obtain a relatively standard, more representative

profile of alcohol use. Initial investigation of the data revealed that very few responses had been received from HE students in the partner colleges. It was therefore decided to present the questionnaire again in the spring term with the aim of obtaining additional students from this sector through the co-operation from the College staff who agreed to raise the profile of the questionnaire and encourage their students to complete it. The survey was presented three weeks into the spring term, in order to mitigate any effects of the Christmas period and the initial week of term on the students' drinking pattern and ensure that drinking patterns reflected general term time consumption at university. Additional students from all institutions were obtained this way.

As we were aware that the pattern of use may vary across the academic year, we compared the spring data with that collected in the autumn term. Levels of drinking across the two surveys differed slightly with a somewhat smaller percentage of drinkers and moderate drinkers in the spring survey. This was an expected finding in that a high proportion of the respondents to the spring survey were from the partner colleges, where the presence of under-18year olds means that the colleges have clearly defined policies on alcohol and access to alcohol on campus is restricted for all students including those undertaking HE courses.

2.1.6 Ethics

Details of the research study and the online questionnaires were submitted to the University's Research Ethics Committee and approval was obtained.

2.1.5 Analysis

SPSS statistical software version 15.00 was used to store, code, clean and analyse the data, using t-tests, and chi-square tests for categorical data. Because of the large number of chi-square tests conducted, a p-value of 0.01 was taken to indicate statistical significance. All tests were two-tailed tests of significance.

2.2. Results

2.2.1 The Sample

2.2.1.1 Demographic Characteristics

724 participants completed the survey. This represents just over 7% of the higher education students enrolled in the university, including the HE students in the partner colleges. Given the limited size of the sample and its opportunistic nature we have to exercise caution in extrapolating from the responses to the university population as a whole. However, we were interested understanding the students' experience of alcohol and this seemed an acceptable sample base. Demographic details of the sample can be seen in Table 2.1.

2.2.1.1.1 Gender

The majority of respondents were female (70.7%) compared to only 29.3% males. This compares with the university figures for 2008/9 of 62.3% females and 37.7% males. Thus males are slightly under-represented in our survey. There are a number of reasons why males may not have completed the survey - there is evidence that in general they are less willing to

Table 2.1: Demographic information on the total sample, drinkers and non-drinkers

			N	%
Demographic Information	Gender	Male	212	29.3
		Female	512	70.7
	Age	18-20	346	47.9
		21-30	256	35.4
		31+	121	16.7
	Ethnicity	White	606	83.7
		Mixed	29	4.0
		Asian	53	7.3
		Black	20	2.8
		Other	16	2.2
	Religion	None	321	44.3
		Christianity	327	45.2
		Other	76	10.5
	Student Status	Non-Mature	346	47.9
		Mature	377	52.1
	Living arrangements	Halls	31	24.9
		Shared House	26	20.6
		With Parents	40	31.7
		With Partner	19	15.1
		Alone	10	7.9
Sexuality	Heterosexual	505	92.3	
	Other	42	7.7	
Education	Institution	University of Northampton	689	95.2
		Northampton College	15	2.1
		Moulton College	20	2.8
	Qualification	Sub-degree	57	7.9
		Degree	524	72.8
		Post Graduate	51	7.1
		Other	88	12.2
	Length of study	1 Year	434	60.2
		2 Years	168	23.3
		3 Years +	119	16.5
Mode of study	Full Time	637	88.7	
	Part Time	81	11.3	
Alcohol	Drinker Status	Drinker	601	83.0
		Non Drinker	123	17.0
	Drinking Behaviour (drinkers only)	Hardly drink at all	97	16.3
		Drink a little	164	27.5
		Drink a moderate amount	220	36.9
		Drink quite a lot	100	16.8
Drink quite heavily	15	2.5		

volunteer for such extra curricula activities compared to females but it is possible that the nature of the survey also impacted upon their response rate.

2.2.1.1.2 Age

The respondents were asked to provide their age to the nearest year. The results were then combined into three categories - 18-20 year olds, 21-30 year olds and 31 and over. Nearly half of the respondents were between 18 and 20 years of age (47.9%), with just over a third (35.4%) being 21-30 and the remaining 16.7% being 31 and over. This compares to 33.1% of university students as a whole being under 21 and 66.9% being 21 and over. However, the university figures relate to the student age at enrolment, whilst our survey was carried out during the academic year, so we would expect a proportion to have crossed into the older age group at this stage. The university figures also include a much higher percentage of part-time students, the majority of whom are mature. The survey figures are closer to the university full-time student figures with 47.3% of university students being under 21.

Table 2.2 shows the percentage of students in each age category in terms of their year of study.

Table 2.2: Respondents age by year of study

Age	Year of Study			Total %
	Year 1 %	Year 2 %	Year 3 %	
18-20	54.1	48.2	24.6	47.9
21-30	29.5	35.1	57.6	35.4
30+	16.4	16.7	17.8	16.7
Total N	434	168	118	720
%age of Respondents	60.3%	23.3%	16.4%	100%

There were decreasing numbers of 18-20 year old respondents and increasing numbers of 21-30 year old respondents in each succeeding year of study as was expected. Thus whilst 54.1% of first years were aged 18-20, only 24.6% of the third years were. The percentage of mature students over the age of 30 was very similar across all three years of study. The age pattern in year one suggests that whilst over half of the respondents in their first year are the 'traditional' university students, nearly half of them had not come straight from school. It is tempting to classify them as 'mature students' (ie 21 at the point of entry to their course), but it is likely that at least some of the students in the 21-30 year age band would have had their 21st birthday earlier in the academic year prior to completing the survey.

2.2.1.1.3 Ethnicity

For the purposes of analysis, and because of the small numbers in some of the categories, the breadth of original responses were re-coded to the five categories used for the university returns which comprised white, mixed, Asian, black, and other minority ethnic groups. As can be seen in Table 1, the majority of the respondents were white (84.7%) with Asians being the next largest ethnic group. In the university as a whole 71.45% of students are of white ethnicity, with 8.9% being of Asian and 10.1% being of black ethnicity. Thus the survey is under-representative of black and minority ethnic group respondents, especially the former.

2.2.1.1.4 Sexuality

Respondents were asked to indicate their sexuality from a number of categories. Most of the respondents classified themselves as heterosexual and, because of small numbers in the other categories, they were collapsed for the purposes of analysis. Just 7.7% indicated that they were not heterosexual in their orientation.

2.2.1.1.5 Religious affiliation

Respondents were asked to indicate their religion. The majority were divided between having no religion (44.3%) and being Christian (45.2%). A variety of other religions were specified (Hindu, Buddhist, Muslim, Sikh, etc) but, given the low numbers in each of the groups, they were combined into one category for the purposes of analysis.

2.2.1.2 Educational Variables

2.2.1.2.1 Institution attended

95.2% of the respondents indicated that they attended the university with the remainder attending the partner colleges. Overall, the university percentage of students in the partner colleges is 10.5%, which is higher than the proportion of our respondents. However, the university figure includes students on a broader range of courses than the HE ones. In addition, from supplementary information provided by the partner colleges, this would seem to be an under-representation of the HE numbers in the partner institutions who responded to the survey and we consider that it probably reflects the way in which respondents have interpreted the question. Although studying courses that are managed through the partner colleges, many of the HE students in the partner colleges attend modules on the main university campus, use university facilities and/or participate in activities arranged by the university and/or the students union and thus identify with the university.

2.2.1.2.2 Qualification studied

Respondents were asked to indicate the qualification they were studying for from a broad range. For the final analysis, the qualifications were collapsed into four categories - sub-degree reflecting Higher Educational qualifications at levels 4 and 5 only such as HNDs, Foundation Degrees, Diplomas, etc, degrees including BA, BSc and BEd, and post-graduate qualifications including both taught and research based masters and higher degrees. A fourth category comprised 'other' awards. The greatest proportion of students (72.8%) indicated that they were studying for a bachelor's degree with the remainder being divided almost equally between the other three categories. This compares with university figures of 84% of students being undergraduates, with 13% being postgraduate. The relatively high proportion of respondents checking the 'other' category was surprising. Unfortunately we did not provide a supplementary free response question so that we are unable to comment on the type of qualifications that fell outside the conventional ones listed in the survey's response categories. Further analysis of these respondents in relation to the general demographic and educational variables suggested that these students were more likely to be male, from one of the main partner colleges, in their first year of study, and from an ethnic minority background compared to the overall body of respondents. Drinking rates did not seem to differ from those of the overall sample.

2.2.1.2.3 Course of study profile

Respondents were asked to state how long they had been studying their course. For the purposes of analysis the responses were classified into three categories - one year, two years or three or more years. The results showed that the majority were in their first year with 60.2% indicating that they had been studying their course for one year, 23.3% for two years and 14.4% for three or more years. That there are declining numbers studying for longer is understandable given that all courses have at least one year but not all have three years. However, if we only consider the degree students who study for a minimum of three years, we find that just over half (54.6%) were in their first year, just under a third (32.6%) in the second year and the remaining 23.3% in their third plus year. Thus whilst the percentages in

their second and third-plus years are larger than for the study sample overall, we still seem to have a greater proportion of first years than would be expected from the institutional profile.

They were also asked about their mode of study and 88.7% of respondents classified themselves as full-time students. This is higher than the institutional profile which has a greater proportion of students studying part-time (32.4%). Many of the university's part-time students are studying professional qualifications in health and business whilst working and it is perhaps less likely that they would be as attracted to the survey as the more traditional full-time students.

2.2.1.2.4 Drinking status

Of the 724 students who completed the survey, 601 (83%) classified themselves as drinkers and 123 (17%) classified themselves as non-drinkers. Thus more than four-fifths of respondents were drinkers.

2.2.2 Comparison of the characteristics of drinkers and non-drinkers:

2.2.2.1 Demographic variables:

2.2.2.1.1 Gender

Details of the comparisons of drinkers and non-drinkers by gender can be seen in Tables 2.3 and 2.4.

Table 2.3: Drinking status by gender

Gender	Drinker %	Non Drinker %	Total %
Male	27.6	37.4	29.3
Female	72.4	62.6	70.7
Total N	601	123	724
%age of Respondents	83%	17.0%	100%

Nearly three-quarters of the drinkers were female, and this balance of males and females within the drinking category appears very similar to the gender breakdown in the sample overall. The gender balance in the non-drinkers differs from that of the overall sample, with a greater proportion of non-drinkers being male. This can be seen more clearly in Table 2.4 in which the data is shown as the proportion of males and females who drink/do not drink alcohol.

Table 2.4: Gender by drinking status

Drinking status	Male %	Female %	Total %
Drinker	78.3	85.0	83.0
Non Drinker	21.7	15.0	17.0
Total N	212	512	724
%age of Respondents	29.3%	70.1%	100%

Slightly fewer male respondents were drinkers (78.3%) compared with females (85%) but this difference was not statistically significant. It is not clear whether the slightly lower proportion of male drinkers in the survey reflects the characteristics of those men who undertook the survey. Male university students were also somewhat under represented in the

survey so these figures may also be an under-representation of male students who drink alcohol. However, national figures do show a decline in male drinking compared with female drinking in this age group and may indicate a similar decline in the student population as well.

2.2.2.1.2 Age

For the purposes of analysis the raw age scores were collated into three categories: 18-20 years olds, 21-30 year olds and 31 and over. Table 2.5 shows the age of drinkers and non-drinkers by gender. Statistically significant age differences were found (chi-square=11.764, df=2, p=.003) with more than half of the drinkers falling into the 18-20 year old group compared to just over a third of the non-drinkers. The reverse was the case for the non-drinkers with the majority of them, nearly half, falling into the 21-30 year group. The proportion of drinkers and non-drinkers in the oldest age category were very similar.

Table 2.5: Age of drinkers and non-drinkers by gender

Age group	Drinker			Non Drinker		
	Male %	Female %	Total %	Male %	Female %	Total %
18-20 years	51.8	50.0	50.5	30.4	37.7	35.0
21-30 years	33.1	32.7	32.8	58.7	41.6	48.0
31+ years	15.1	17.3	16.7	10.9	20.8	17.1
Total N	166	434	600	46	77	123
%age of total N	22.9%	60%	83.0%	6.4%	10.7%	17.01%

As can be seen in Table 2.5, gender differences in age were not apparent in the drinkers with almost equivalent proportions of males and females falling into each of the three age categories. A higher proportion of the non-drinking males fell in to the middle age group whilst non-drinking females tended to be more evenly spread between the three age groups, with fewer in the middle age group and more in the 31+ age group compared with the males. However, these differences did not reach statistical significance.

2.2.2.2.3 Ethnicity

A comparison of the ethnicity of drinkers and non-drinkers by gender can be seen in Table 2.6. The majority of both drinkers and non-drinkers were white, but the proportion of non-drinkers from white ethnic groups was smaller with just two thirds of non-drinkers being white. Significant differences in ethnicity were observed between drinkers and non-drinkers (chi-square = 60.617; df=4; p<0.001). The majority of drinkers were white and just over 10% were drawn from the remaining ethnic groups. This compares with only two thirds of non-drinkers being white and nearly a fifth (19.5%) coming from an Asian ethnic background.

Table 2.6: Ethnicity of drinkers and non-drinkers by gender

Ethnicity	Drinker			Non Drinker		
	Male %	Female %	Total %	Male %	Female %	Total %
White	82.5	89.2	87.4	54.3	72.7	65.9
Mixed ethnicity	3.6	4.8	4.5	2.2	1.3	1.6
Asian	9.6	3.0	4.8	28.3	14.3	19.5
Black	1.2	1.6	1.5	10.9	7.8	8.9
Other	3.0	1.4	1.8	4.3	3.9	4.1
Total N	166	435	601	46	77	123
%age of Total N	22.9%	60.1%	83.0%	6.4%	10.6%	17.0%

Gender differences were observed in both drinking groups. Female drinkers were more likely to be white and a greater proportion of male drinkers in comparison with female ones were

Asian (chi-square=13.897, df=4, p=.008). Similar patterns were observed in the non-drinkers although the size of the gender differences were greater; nearly three quarters of the female non-drinkers were white compared to just over half of the males, and more than a quarter (28.3%) of the male drinkers were Asian compared with only 14.3% of the females. However, small cell sizes meant that the differences could not be confirmed through statistical analysis.

2.2.2.2.4 Sexuality

The sexual orientation of drinkers and non-drinkers can be seen in Table 2.7. No statistically significant differences were observed in the sexual orientation of drinkers and non-drinkers or in the sexual orientation of male and female drinkers and non-drinkers.

Table 2.7: Sexual orientation of drinkers and non-drinkers by gender

Sexual orientation	Drinker			Non Drinker		
	Male %	Female %	Total %	Male %	Female %	Total %
Heterosexual	89.9	92.9	92.1	91.2	94.8	93.5
Other	10.1	7.1	7.9	8.8	5.2	6.5
Total N	129	326	455	34	58	92
%age of Total N	23.6%	59.6%	83.2%	6.2%	10.6%	16.8%

2.2.2.2.5 Religious affiliation

Religious affiliation of drinkers and non-drinkers can be seen in Table 2.8.

Table 2.8: Religious affiliation of drinkers and non-drinkers by gender

Religious affiliation	Drinker			Non Drinker		
	Male %	Female %	Total %	Male %	Female %	Total %
None	48.8	46.7	47.3	30.4	29.9	30.1
Christianity	41.6	47.1	45.6	30.4	50.6	43.1
Other	9.6	6.2	7.2	39.1	19.5	26.8
Total N	166	435	601	46	77	123
%age of Total N	22.9%	60.1%	83.0%	6.4%	10.6%	17.0%

Statistically significant differences in the religion of the drinkers and non-drinkers were observed (chi-square=44.584; df=2; p<0.001) with more drinkers indicating that they had no religious affiliation whilst more non-drinkers responded that they practised a religion that was non-Christian, including Hindu, Buddhist, etc. The proportion of drinkers and non-drinkers who indicated that they were Christian was similar across both drinkers and non-drinkers.

2.2.2.2 Educational variables

2.2.2.2.1 Type of educational Institution attended

A breakdown of the institutions attended by drinkers and non-drinkers can be seen in Table 2.9 overleaf. Analysis of the data revealed that only students at the partner colleges of Moulton and Northampton could be identified in the survey.

The proportions of drinkers and non-drinkers differed across the institutions, with more drinkers attending the university and more non-drinkers attending Northampton College (chi-square=16.184; df=2; p<0.001). Fewer male non-drinkers attended the university and more attended Northampton College compared with the female non-drinkers, whose profile was

more in line with that of the drinkers, but these differences failed to reach statistical significance.

Table 2.9: Institution attended by drinkers and non-drinkers by gender

Institution attended	Drinker			Non Drinker		
	Male %	Female %	Total %	Male %	Female %	Total %
University of Northampton	93.4	96.6	95.7	87.0	96.1	92.7
Northampton College	1.2	1.1	1.2	10.9	3.9	6.5
Moulton College	5.4	1.7	3.2	2.2	0	0.8
Total N	166	435	601	46	77	123
%age of Total N	22.9%	60.1%	83.0%	6.4%	10.6%	17.0%

2.2.2.2 Qualifications studied

Table 2.10 shows the analysis of the type of qualification being studied by drinkers and non-drinkers.

Table 2.10: Type of qualification studied by drinkers and non-drinkers by gender

Type of qualification	Drinker			Non Drinker		
	Male %	Female %	Total %	Male %	Female %	Total %
Pre Degree	7.8	8.1	8.0	4.5	9.2	7.5
Degree	69.3	76.7	74.7	50.0	71.1	63.3
Post Graduate Qualification	8.4	5.8	6.5	11.4	9.2	10.0
Other	14.5	9.4	10.8	34.1	10.5	19.2
Total N	166	434	600	44	76	120
%age of total N	23.1%	60.3%	83.3%	6.1%	10.6%	16.7%

Whilst more drinkers than non-drinkers reported that they were studying for a degree and more non-drinkers compared to drinkers indicated that they were studying for a post-graduate qualification or one in the ‘other’ category, the chi-square failed to reach the required level of significance. Thus drinkers and non-drinkers do not differ statistically significantly in the type of qualification they are studying for.

The data shows that more female drinkers and non-drinkers compared to male drinkers and non-drinkers were studying for a degree, whilst a greater proportion of males were studying a qualification in the ‘other’ category, but differences did not reach statistical significance.

2.2.2.3 Mode of study

As can be seen from the data presented in Table 2.11, no differences in the mode of study were observed between drinkers and non-drinkers - similar proportions of drinkers and non-drinkers studied full-time and part-time. No gender differences were apparent either.

Table 2.11: Mode of study of drinkers and non-drinkers by gender

Mode of study	Drinker			Non Drinker		
	Male %	Female %	Total %	Male %	Female %	Total %
Full time	88.9	88.9	88.9	86.7	88.3	87.7
Part time	11.1	11.1	11.1	13.3	11.7	12.3
Total N	162	434	596	45	77	122
%age of Total N	22.6%	60.5%	83.0%	6.27%	10.7%	17.9%

2.2.2.2.4 Length of time studying

Table 2.12 shows the analysis of the length of time respondents had spent studying for their qualification at the time of the survey for both drinkers and non-drinkers. There was little difference between the two groups in the proportion studying in their first year, but slightly fewer drinkers were in their second year and slightly more drinkers were in their third or further year of study compared to the non-drinkers. However, differences did not reach statistical significance.

Table 2.12: Length of time drinkers and non-drinkers have been studying their course by gender

Length of study	Drinker			Non Drinker		
	Male %	Female %	Total %	Male %	Female %	Total %
1 Year	63.3	59.8	60.7	64.4	53.3	57.5
2 Years	19.9	23.0	22.1	22.2	33.3	29.2
3+ Years	16.9	17.2	17.1	13.3	13.3	13.3
Total N	166	435	601	45	75	120
%age of Total N	23.0%	60.3%	83.4%	6.2%	10.4%	16.6%

Slightly more male non-drinkers were in their first year, and slightly more female non-drinkers were in their second year. The drinkers showed a similar pattern of gender differences although not so marked. However gender differences were not statistically significant in either group.

2.2.2.2.5 Living arrangements

Data on living arrangements was only obtained for the spring term cohort and thus the findings must be viewed with caution. The greatest proportion of both drinkers and non-drinkers (33.3%) lived with their parents whilst a quarter (24.6%) of the respondents lived in halls of residence and 20.6% shared with friends. The remainder either lived with a partner (15.1%) or alone (7.9%). No statistically significant differences were observed between the living arrangements of drinkers compared with non-drinkers.

Table 2.13: Drinkers and Non-Drinkers living arrangements by gender

Living arrangement	Drinker			Non-Drinker		
	Male %	Female %	Total %	Male %	Female %	Total %
Halls of residence	21.6	27.1	25.0	16.7	27.8	23.3
Friends/sharing	27.0	16.9	20.8	33.3	11.1	20.0
Parents	32.4	30.5	31.3	25.0	38.9	33.3
Partner	13.5	15.3	14.6	25.0	11.1	16.7
Alone	5.4	10.2	8.3	0.0	11.1	6.7
Total N	37	59	96	12	18	30
%age of Total N	29.4	46.8%	76.2%	9.5%	14.3%	23.8%

As can be seen in Table 2.14, the proportion of both drinkers and non-drinkers who live with dependants is small. Whilst a higher percentage of drinkers indicate that they live with dependants, the difference between the groups is not statistically significant.

Table 2.14: Drinkers and non-drinkers who live with any dependants by gender

Live with dependants	Drinker			Non Drinker		
	Male %	Female %	Total %	Male %	Female %	Total %
Yes	8.6	12.7	11.1	0	6.3	3.7
No	91.4	87.3	88.9	100	93.8	96.3
Total N	35	55	90	11	16	27
%age of Total N	29.9%	47.0%	76.9%	9.4%	13.7%	23.1%

In relation to gender differences, fewer men in both groups reported living with dependants but this is particularly evident for the non-drinking men, none of whom live with dependants. However, differences do not reach statistical significance

2.2.2.3 Risks of drinking

Respondents were asked to indicate how much they knew of the risks of drinking alcohol, responding in one of five categories. The results can be seen in Table 2.15

Table 2.15: Drinkers and non-drinkers responses to the question ‘How much do you know about the risks/effects of drinking alcohol?’

Knowledge of risks of drinking	Drinker			Non Drinker		
	Male %	Female %	Total %	Male %	Female %	Total %
Know a lot	57.1	50.4	52.3	51.3	39.1	43.5
Know a little/quite a bit	27.7	30.2	29.6	25.6	49.3	40.7
Know some	13.1	19.1	17.6	17.9	10.1	13.0
Know very little/Nothing	1.5	0.3	0.6	5.1	1.4	2.8
Total N	137	387	524	39	69	108
%age of Total N	21.7%	61.2%	82.9%	6.17%	10.9%	17.1%

Overall, less than one per cent of respondents said that they knew very little about the risks of drinking alcohol. Virtually all indicated that they knew something about the risks/effects of drinking alcohol with just over half (50.8%) of the respondents indicating that they ‘knew a lot’ and a further 31.5% indicating that they ‘knew quite a bit/know a little’. More drinkers reported that they ‘know a lot’ and more non-drinkers reported that they ‘know a little/quite a bit’ but the chi-square did not reach statistical significance.

In relation to gender, both drinker and non-drinker males were more likely to say that they ‘know a lot’ about the risks compared to the female drinkers and non-drinkers. The gender difference seems to be more marked for the non-drinkers, with more females, nearly half of them, indicating that they knew a little or quite a bit, compared to only a quarter of the males, but differences did not reach statistical significance in either group.

2.2.2.4 Perceived social norms

Two types of social norms were measured, descriptive social norms and injunctive social norms. Descriptive social norms were measured by two items, whilst injunctive social norms were assessed by four items. The results can be seen in Tables 2.16 to 2.19 below.

2.2.2.4.1 Descriptive social norms

Respondents were asked to indicate how often they thought that the typical HE student at their university/college drinks. Differences between the two groups were observed with fewer drinkers reporting that they thought typical HE students in their institution drank 1-2 drinks a week or less whilst more non-drinkers thought that students drank alcohol nearly every day (chi-square=16.604; df=4; p=0.002).

Female non-drinkers were somewhat more likely than male non-drinkers to respond that the typical student drinks 2-3 times a week, whilst the males were more likely to respond that

Table 2.16: Perceived descriptive social norms of drinkers and non-drinkers by gender - ‘How often do you think the typical HE student drinks?’

Frequency of student drinking	Drinker			Non Drinker		
	Male %	Female %	Total %	Male %	Female %	Total %
Never/Less than monthly/once a month	2.8	0.8	1.3	2.6	0.0	0.9
2-3 times per month	8.4	4.6	5.6	5.1	2.9	3.7
1-2 times a week	39.9	40.8	40.6	38.5	26.1	30.6
2-3 times a week	42.7	45.9	45.0	35.9	50.7	45.4
Nearly every day	6.3	7.9	7.5	17.9	20.3	19.4
Total N	143	392	535	39	69	108
%age of Total N	22.2%	70.0%	83.2%	6.1%	10.7%	16.8%

they drank slightly less - 1-2 times a week, but the differences did not reach statistical significance.

Table 2.17 shows the results for the drinkers and non-drinkers on the second of the perceived descriptive social norm question, where they were asked to indicate how much they thought a typical HE student at their college/university drinks on a usual weekend evening.

Table 2.17: Perceived descriptive social norms of drinkers and non-drinkers by gender - ‘How much do you think a typical HE student at your college/university drinks on a usual weekend evening?’

Amount drunk at weekends	Drinker			Non Drinker		
	Male %	Female %	Total %	Male %	Female %	Total %
Nothing	0	0.8	0.6	0	0	0
1-2 drinks	6.3	3.8	4.5	5.3	2.9	3.8
3-4 drinks	18.9	12.0	13.8	26.3	11.8	17.0
5-6 drinks	28.7	29.3	29.2	36.8	35.3	35.8
7-8 drinks	21.7	24.2	23.6	7.9	22.1	17.0
More than 8 drinks	24.5	29.8	28.4	23.7	27.9	26.4
Total N	143	392	535	39	68	106
%age of Total N	22.3%	61.1%	83.5%	6.1%	10.6%	16.5%

Few differences can be observed between the drinkers and non-drinkers. The majority of both drinkers and non-drinkers considered that students drink harmful amounts. Overall, 81.2% of drinkers and 79.2% of non-drinkers considered that the typical HE student drinks at least 5 or more drinks on a usual weekend evening. The highest response category for both drinkers and non-drinkers was that of 5-6 drinks. Slight differences were observed in the 3-4 drinks category with somewhat fewer drinkers checking this, whilst somewhat more drinkers checked the 7-8 drinks category. However, none of the differences reached statistical significance when a chi-square was applied.

Both male and female drinkers and non-drinkers gave similar patterns of response, although fewer male non-drinkers checked the 7-8 drinks category and the 3-4 drinks category. The differences were not statistically significant.

Initial analysis of the results of the third question relating to perceived descriptive social norms showed that the responses in many of the 10% categories were very limited and cell sizes were too small to allow for meaningful statistical analysis. We therefore collapsed the data into three categories of response. As very few respondents checked percentages under

50%, the data for these categories were combined into one category of 50% or less. Similarly very few respondents checked the 100% response option so this was combined into one category of 90% and above. The third category comprised 60-80%. The results for the recombined data can be seen in Table 2.18.

Table 2.18: Perceived descriptive social norms of drinkers and non-drinkers by gender - ‘In the last 30 days, what percentage of students at your college/university drank alcohol?’

%age of students drinking alcohol	Drinker			Non Drinker		
	Male %	Female %	Total %	Male %	Female %	Total %
50% or less	11.2	5.6	7.1	25.0	21.0	22.4
60% - 80%	62.2	64.5	63.9	44.4	58.1	53.1
90% - 100%	26.6	29.8	29.0	30.6	21.0	24.5
Total N	143	392	535	36	62	98
%age of Total N	22.6%	61.9%	84.5%	5.7%	9.8%	15.5%

Over 90% of the respondents considered that 60% or more of the students at their college/university had drunk alcohol within the last 30 days, with 28.3% indicating that 90%-100% had done so. Thus the overall perception of survey respondents is that the majority of students drink alcohol. Differences between the drinkers and non-drinkers were observed with more non-drinkers reporting lower percentages of students drinking - nearly a quarter (22.4%) of non-drinkers reported they thought that 50% or fewer of the HE students had drunk alcohol during the past 30 days compared with less than a tenth (7.2%) of the drinkers (chi-square=22.738; df=2; p<0.001).

In relation to gender, the perceptions of male and female drinkers across the three categories were very similar. Non-drinkers showed greater differences with more male non-drinkers responding that they thought 90% or more of students had drunk alcohol over the past 30 days. Female non-drinkers were more likely to consider that 60-80% of students had done so. However, none of the observed differences reached statistical significance.

2.2.2.4.2 Injunctive social norms

The analyses of the four items that assessed injunctive social norms can be seen in Tables 2.19 to 2.22. The questions asked respondents to indicate what their friends would think of them if they undertook various drinking related behaviours. The first two items related to drinking frequency; the results for these items can be seen in Tables 2.19 and 2.20 below.

Table 2.19: Drinkers and non-drinkers perceived injunctive social norms by gender - ‘How would your friends respond if they thought you drank alcohol every weekend?’

Friends response to drinking every weekend	Drinker			Non Drinker		
	Male %	Female %	Total %	Male %	Female %	Total %
Strong disapproval	4.2	6.1	5.6	9.8	13.2	11.9
Mild disapproval	7.7	15.1	13.1	12.2	19.1	16.5
Wouldn't care	63.6	67.3	66.4	51.2	60.3	56.9
Mild approval	12.6	6.9	8.4	19.5	4.4	10.1
Strong approval	11.9	4.6	6.5	7.3	2.9	4.6
Total N	143	392	535	41	68	109
%age of Total N	22.2%	60.9%	83%	6.3%	10.5%	16.9%

There were few differences between the drinkers and non-drinkers on the first question concerning drinking every weekend. The majority of both groups indicated that they felt that

their friends ‘wouldn’t care’ - two thirds or 66.4% of drinkers and over half, or 56.9%, of the non-drinkers. Similar percentages of both groups felt that their friends would express either mild or strong approval if they did so. Non drinkers were somewhat more likely to indicate that their friends would either strongly or mildly disapprove (28.4% compared to 18.7% of the drinkers). When the data was analysed separately for men and women, gender differences were observed in drinkers (chi-square=15.775, df=3; p=.001) with more female drinkers compared to male drinkers perceiving mild disapproval from friends for drinking alcohol every weekend, whilst more male drinkers compared to female drinkers perceived more mild approval and strong approval from friends for doing so. A similar pattern was observed in non-drinkers, with non-drinking women perceiving their friends to be less approving if they drank every week compared with the non-drinking men, but the chi-square did not reach statistical significance.

Table 2.20: Drinkers and non-drinkers perceived injunctive social norms by gender - ‘How would your friends respond if they thought you drank alcohol daily?’

Friends response to drinking daily	Drinker			Non Drinker		
	Male %	Female %	Total %	Male %	Female %	Total %
Strong disapproval	34.3	48.7	44.9	25.0	50.0	40.7
Mild disapproval	39.2	38.0	38.3	55.0	36.8	43.5
Wouldn’t care	22.4	11.5	14.4	10.0	11.8	11.1
Mild approval	2.8	1.3	1.7	5.0	1.5	2.8
Strong approval	1.4	0.5	0.7	5.0	0	1.0
Total N	143	392	535	40	68	108
%age of Total N	22.2%	61.0%	83.2%	6.2%	10.6%	16.8%

Drinkers and non-drinkers did not differ on how they thought their friends would respond if they drank alcohol daily, with the majority (83.4%) considering that friends would express either mild or strong disapproval. Only 2.8% of the total considered that their friends would mildly or strongly approve. However, again when the data was analysed separately for men and women, similar patterns of gender differences within the drinkers and non-drinkers were observed, although only that for the drinkers reached the required level of statistical significance. More female drinkers considered that their friends would ‘strongly disapprove’ or ‘wouldn’t care’ compared to male drinkers (chi-square=16.114; df=4; p=.003). Whilst more female non-drinkers compared to male non-drinkers considered that their friends would ‘strongly disapprove’ if they drank alcohol daily, the pattern was reversed for the category of ‘mild disapproval’ and the chi square failed to reach the 0.01 probability level.

Overall it is perhaps surprising that drinkers and non-drinkers do not differ in their perception of social norms on alcohol consumption. However, the gender difference in drinkers is interesting. We can conclude that, despite similar patterns of drinking between male and female students, female drinkers still perceive more social disapproval of frequent drinking than their male counterparts.

The results for the two items assessing injunctive social norms that related to problems associated with drinking can be seen in Tables 2.21 and 2.22. The responses on perceived social norms for drinking problems for the two groups of drinkers and non-drinkers showed clear differences relating to the type of behaviour under consideration. There were minimal differences between the two groups concerning their friends’ views if they drove a car after drinking. Indeed there was a ceiling effect with virtually all students (95.9%) indicating that they would ‘mildly’ or ‘strongly’ disapprove. The ‘don’t drink and drive’ message would

seem to have penetrated this population although there is still a very small proportion who think that their friends either ‘wouldn’t care’ or ‘would approve’.

Table 2.21: Drinkers and non-drinkers perceived injunctive social norms by gender - ‘How would your friends respond if they thought you drove a car after drinking?’

Friends response to drink driving	Drinker			Non Drinker		
	Male %	Female %	Total %	Male %	Female %	Total %
Strong disapproval	80.4	90.8	88.0	77.5	91.2	86.1
Mild disapproval	12.6	5.9	7.7	17.5	7.4	11.1
Wouldn’t care	4.9	2.3	3.0	2.5	1.5	1.9
Mild approval	0	0	0	0	0	0
Strong approval	2.1	1.0	1.3	2.5	0	0.9
Total N	143	392	535	40	68	108
%age of Total N	22.2%	61.0%	83.2%	6.2%	10.6%	16.8%

There was less agreement between the two groups concerning their friends’ views if they passed out after drinking alcohol. The results can be seen in Table 2.22.

Table 2.22: Drinkers and non-drinkers perceived injunctive social norms by gender - ‘How would your friends respond if they thought you drank enough alcohol to pass out?’

Friends response to passing out	Drinker			Non Drinker		
	Male %	Female %	Total %	Male %	Female %	Total %
Strong disapproval	39.9	52.0	48.8	47.5	73.5	63.9
Mild disapproval	30.8	32.9	32.3	30.0	17.6	22.2
Wouldn’t care	38.0	11.2	13.3	15.0	5.9	9.3
Mild approval	7.7	2.6	3.9	7.5	2.9	4.6
Strong approval	2.8	1.3	1.7	0	0	0
Total N	143	392	535	40	68	108
%age of Total N	22.2%	61.0%	83.2%	6.2%	10.6%	16.8%

Overall, the majority (81.6%) considered that their friends would disapprove if they drank enough alcohol to pass out, and only 5.1% considered that their friends would approve. Whilst differences were observed between drinkers and non-drinkers in that fewer drinkers compared to non-drinkers considered that their friends would express strong or mild disapproval, the expected cell frequencies were problematic for statistical analysis. We therefore collapsed the mild and strong approval categories to reduce the number of cells with expectancies less than 5 and applied a chi-square. The results showed statistically significant differences (chi-square 15.775; df 3; p=0.001) with non-drinkers considering that there would be more disapproval from friends. The difference was more marked for ‘strong disapproval’ where 63.9% of non-drinkers felt that their friends would express this view compared to only 48.8% of drinkers.

When the data was analysed separately for men and women, statistically significant differences were observed within the drinkers (chi-square=15.775, df=3; p=.001) but not for the non-drinkers. Compared to female drinkers, fewer male drinkers thought that their friends would express strong disapproval, and more men considered that their friends ‘wouldn’t care’. However, both male and female non-drinkers held similar perceptions of their normative

group with the great majority of both genders perceiving there would be social disapproval for drinking enough to pass out.

Overall, the analyses of the four items assessing injunctive social norms indicate that the perceived norms are different for men and women drinkers, with women perceiving more disapproval from their peer group for more frequent and more excessive drinking compared to the men. Gender differences were not found within the non-drinking group; both men and women non-drinkers would seem to have similar perceptions of their friends' views of drinking alcohol.

2.2.2.5 Drinking safely

In the survey, we presented both drinkers and non-drinkers with ten items concerning the extent to which they carried out behaviours that could reduce the amount of harm when drinking alcohol. However, we have chosen to report the findings for drinkers only, and they can be found in the relevant section. We made this decision because the maximum number of non-drinkers who reported carrying out any of the behaviours listed did not exceed 21 and this number was only reached for one item. All other behaviours were carried out by 15 or fewer non-drinkers. We considered these figures too small to use in any meaningful comparisons with the drinkers.

2.2.2.6 Drinking alcohol as a problem in Higher Education

Respondents were asked if they considered alcohol consumption to be a problem amongst other HE students at their college/university and the results can be seen in Table 2.23

Table 2.23: Responses to the question 'Do you perceive alcohol consumption to be a problem amongst other HE students at your college/university?' by drinking status and gender

Alcohol is a problem	Drinker			Non Drinker		
	Male %	Female %	Total %	Male %	Female %	Total %
Yes	50.3	57.1	55.3	72.2	64.2	67.0
No	49.7	42.9	44.7	27.8	35.8	33.0
Total N	143	392	535	36	67	103
%age of Total N	22.4%	61.4%	83.9%	5.6%	10.5%	16.1%

The data shows a divergence in views between drinkers and non-drinkers with fewer non-drinkers viewing alcohol consumption as problematic compared with the drinkers. However, the results of the chi-square analysis did not reach statistical significance. It is noteworthy that the majority of the respondents considered alcohol consumption to be a problem amongst other HE students at their college/university, with more than half of the drinkers and more than two-thirds of the non-drinkers agreeing that it was.

There is an interesting gender cross-over effect in that fewer male drinkers compared to female drinkers consider alcohol to be a problem amongst students whilst more male non-drinkers think that it is. However, when the data was analysed separately for drinkers and non-drinkers, the observed gender differences within each drinking group did not reach statistical significance.

2.2.3 The Drinkers

2.2.3.1 Alcohol consumption

To obtain an overview of the way in which students engaged with alcohol, respondents were asked a variety of questions about their use of alcohol and drinking pattern. Some of the questions asked for more objective information, whilst others asked for their judgements on their use of alcohol.

2.2.3.1.1 Drinking Rates

Drinking rates were measured in two ways with respondents asked to report both their typical drinking frequency and the quantity of alcohol consumed during the previous week. To obtain information on drinking frequency, respondents were asked to indicate which of six descriptions about the amount of alcohol that people drink best described them. The descriptions ranged from 'I don't drink at all' through to 'drink quite heavily'. The results can be seen in Table 2.24.

Table 2.24: Drinking frequency - 'Of the following descriptions about the amount of alcohol people drink, which best describes you?'

Amount of alcohol drunk	Male %	Female %	Total %
Hardly drink at all	14.0	17.1	16.3
Drink a little	17.1	31.5	27.5
Drink a moderate amount	38.4	36.3	36.9
Drink quite a lot	26.8	13.0	16.8
Drink quite heavily	3.7	2.1	2.5
Total Respondents	164	432	596
%age of Total N	27.5%	72.5%	100%

The majority (36.9%) indicated that they drank a moderate amount, with 27.5% indicating that they drank a little. However, a substantial proportion, 16.8% and 2.5% respectively, indicated that they drank 'quite a lot' or 'quite heavily'.

There were statistically significant gender differences in the frequency with which the respondents drank alcohol (chi-square=24.605; df=4; p=<.001). Men reported drinking more alcohol than women. Whilst similar proportions of males and females reported that they drank 'a moderate amount' there was a cross over effect with more women than men reporting that they 'drink a little' whilst more men than women reported drinking 'quite a lot'.

2.2.3.1.2 Alcoholic drinks consumed in the previous week

Respondents were asked to indicate how many alcoholic drinks they had had in the past week and asked to record their consumption separately for each day of the week from Sunday through to Saturday. Due to the general lack of understanding of the relationship of alcohol units to drinks and the complexity of presenting sufficient information about measuring units in relation to ABV and the type of alcohol and glass size to enable appropriate calculation of the units for each type of alcoholic drink that students use, we decided not to attempt to assess drinking amounts in relation to units but focussed on actual drinks consumed. We recognise that the number of drinks will not directly reflect the number of units consumed, but the results will provide a general view of student alcohol consumption. By doing so it is possible that we will underestimate the number of units drunk, particularly when students drink outside the conventional licensed premises.

To analyse the resulting data, the numbers of drinks that a respondent entered on each of the seven days was totalled to give an overall weekly total. Totals ranged from none through to 105. We then categorised the total drinks consumed into one of three categories based on the government categories of drinking in relation to weekly units consumed for both males and females. With the caveat that the measure of drinks does not directly equate to units, this seemed an appropriate approach to determine the extent to which weekly consumption was at what might loosely be construed as low, medium or high risk levels. Thus for males the three categories were '21 or fewer'; '22-50' and 'more than 50' drinks per week, and for females they were '14 or fewer', '15-35' and 'more than 35' per week. The results can be seen in Table 2.25 below.

Table 2.25: Level of alcohol consumption based on the number of drinks consumed during the week prior to the survey

Level of alcohol consumption (m/f)	Male %	Female %	Total %	Total Respondents
Low risk (= $<$ 21/14)	79.8	80.6	80.4	463
Medium risk (22/15-50/35)	18.4	16.7	17.2	99
High risk ($>$ 50/35)	1.8	2.7	2.4	14
Total N	163	413	576	576
%age of Total N	28.3%	71.7%	100%	100%

Approximately four-fifths of the students reported consuming 21/14 or fewer drinks during the week, suggesting that the majority of students are keeping within government guidelines for sensible drinking. The results also show that, if we equate drinks to units, over a fifth of the respondents drank more than the recommended amount and a small, but worrying, percentage reported drinking heavily with weekly totals above 50. What is also clear from the data is that there are no gender differences in the level of alcohol consumption in relation to potential harm; the proportions of males and females in each of the categories are very similar. Thus whilst in absolute terms females aren't drinking so much as the males, in terms of the risk to their health through the amount they consume, the two sexes are very similar.

If we compare these results with responses to the previous question on frequency of drinking we find that the proportion of respondents reporting drinking a moderate amount or less (80.7%) is very similar to the percentage of respondents whose actual consumption fell in to the 'low risk' category above (80.4%). It would seem that students have a fair understanding of their level of consumption, although we have to add the caveat that the number of drinks recorded during the previous week may underestimate the number of units consumed. Alternatively it is possible that students are consistently misrepresenting their drinking behaviour in both sections.

Respondents were also asked whether the week had been a typical week. Well over half, 59.4%, (60.4% of males and 59.0% of females), responded that it had been a typical week. Of those for whom it had not been a typical week a supplementary question asked them to indicate whether they had drunk more or less than usual. Of these, 62.8%, (62.5% of males and 63.3% of females) indicated that they had drunk more alcohol than usual during the previous week.

Students were also asked whether they thought that they had drunk too much during this week. Nearly three quarters (73.2%) responded with 'no', whilst 20.8% reported that they had. A small proportion 'didn't know'.

We explored whether respondents' views of their drinking coincided with their reported levels of consumption for the week, as measured by the categories of low, medium and high risk drinking. The results can be seen in Table 2.26.

Table 2.26: Level of risky drinking in the previous week by whether respondents thought they had drunk too much

Drunk too much	Low risk %	Medium risk %	High risk %	Total
No	81.9	33.3	42.9	418
Yes	12.7	56.6	57.1	123
Don't know	5.4	10.1	0.0	36
Total N	463	99	14	576
%age of Total N	80.2%	17.2%	2.4%	100%

There was a clear association between the two variables (chi-square 114.003; df=4; p<.001) with greater proportions of those with medium or high risk levels of drinking reporting that they thought that they had drunk too much. However it is concerning that a third of those respondents in the medium risk group who had consumed between 22/15-50/35 drinks, and over two-fifths of those in the high risk group who had consumed more than 50/35 alcoholic drinks during the week, did not consider that they had drunk too much.

2.2.3.1.3 The heaviest drinking day in the previous week

Respondents were asked a number of questions about their heaviest drinking day in the week prior to the survey. Table 2.27 shows the number of hours that respondents reported drinking alcohol, a figure obtained by calculating the number of hours between the time that they reported starting to drink and the time they reported stopping drinking.

Table 2.27: Number of hours respondents spent drinking on their heaviest drinking day in the week prior to the survey

Hours spent drinking	Male %	Female %	Total %
I didn't drink	13.3	18.3	17.0
1 hour	8.2	7.3	7.5
2-3 hours	15.2	18.3	17.5
4-6 hours	29.1	30.8	30.3
7-9 hours	20.3	14.8	16.3
10+ hours	13.9	10.6	11.5
Total N	158	426	584
%age of Total N.	27.1%	72.9%	100%

Whilst this calculation does not mean that respondents were drinking continuously during the period, the measure does give an indication of the extent to which alcohol featured in the day's activities. Whilst a fair proportion of the respondents did not drink alcohol during the week under review, well over half indicated that they drank over a period exceeding 4 hours and over 10% did so for 10 hours or more. The most common period was 4-6 hours, most probably reflecting student drinking during the evening. Few differences were observed between males and females in the number of hours they spent drinking on their heaviest drinking day, although more males reported drinking for the longer periods, but these differences were not statistically significant.

2.2.3.1.4 Daily pattern of drinking

We wished to establish the diurnal pattern of drinking, so respondents were asked to indicate during which time of the day they drank the most on their heaviest drinking day in the week preceding the survey.

Table 2.28: Responses to the question ‘Thinking of your heaviest drinking day, during which time of day did you drink the most?’

Time they drank the most alcohol	Male %	Female %	Total %
I didn't drink	11.6	16.4	15.1
9am-noon	1.2	0.2	0.5
12-2pm	1.2	0.9	1.0
2-4pm	1.8	0.5	0.8
4-6pm	1.2	0.5	0.7
6-8pm	11.0	6.9	8.1
8-10pm	26.2	36.8	33.9
10-midnight	38.4	31.3	33.2
12pm-2am	7.3	4.6	5.4
2-4am	0	0.5	0.3
6-9am	0	1.4	1.0
Total N	164	432	596
%age of Total N	27.5%	72.5%	100%

As can be seen in Table 2.28, most drinking occurred between the hours of 6.00pm and 2.00am, with the majority concentrated between 8.00pm and midnight. A third (33.9%) reported drinking most between 8 and 10pm and a further third (33.2%) reported drinking most between 10pm to midnight. Patterns for men and women were similar though somewhat more women drank between 8-10 and slightly more men between 10 and midnight. The pattern of drinking suggests that student drinking reflects that of society more generally where drinking largely occurs towards the end of the day.

2.2.3.2 Drinking location and travel

2.2.3.2.1 Drinking venues

We also wished to gain a picture of where students were drinking alcohol. We therefore asked them to indicate from a range of response venues the one where they drank alcohol most often. The results for those who drink alcohol can be seen in Table 2.29.

The data indicate that the majority of students drink most often in clubs or bars (40.5%) but that the second most popular venue is home where 25.8% of respondents reported that they drank most often. The pub and friend's/family's homes appear next most popular, at 18.3% and 11.4% respectively. If we add together those who drink at home and at a friend's or family's house we see that over a third of drinking takes place in private houses. It is difficult to know how to view this - private homes are probably safer venues for students than clubs and nightclubs in town and it is possible that drinking levels are limited. However, many people pour much larger drinks at home than the measures available in licensed establishments, so it is possible that consumption in private homes is higher. Unfortunately, what cannot be determined from this data is whether drinking at home/in private houses is a separate activity or if it is combined with drinking elsewhere. It is quite probable that at least some of this home drinking occurs prior to going out to licensed venues.

Table 2.29 The venue where, in general, respondents report drinking alcohol most often

Venue where they drink the most	Male %	Female %	Total %	Total Respondents
Home	26.3	25.6	25.8	152
Friends/Family House	8.8	12.3	11.4	67
Club/Bar	37.5	41.6	40.5	239
Pub	23.8	16.3	18.3	108
Union	1.3	1.4	1.4	8
Restaurant	1.3	2.3	2.0	12
Outside	0.6	0	0.2	1
Other	0.6	0.5	0.5	3
Total N	160	430	590	590
%age of Total N	27.1%	72.9%	100%	100%

One highly notable finding was the very small proportion of respondents who indicated that they drank alcohol most frequently in the student union (1.4%). This was unexpected and may have been a consequence of recent changes to the student union to reduce the emphasis on alcohol in their premises through restructuring the catering facilities, moving the bar upstairs and by eliminating happy hours and other marketing strategies that encouraged students to drink alcohol.

The results also indicate that the venues in which males and females drink alcohol most often are very similar. There is a slight tendency for more males than females to drink alcohol in pubs whilst females report drinking more in private homes and clubs, but differences are not large and did not reach statistical significance.

2.2.3.2.2 Travel home after drinking away from home

Information on the respondents' mode of travel home after drinking alcohol away from home can be seen in Table 2.30.

Table 2.30: Drinker's mode of travel home after drinking alcohol away from home by gender

Mode of travel home after drinking	Male %	Female %	Total %	Total Respondents
Walk alone	9.9	0.7	3.2	19
Walk with friends	16.7	12.1	13.4	79
Bus	4.9	1.4	2.4	14
Drive own car	6.2	1.4	2.7	16
A friend or designated driver drives	13.0	20.1	18.1	107
Taxi	49.4	64.3	60.2	355
Total N	162	428	590	590
%age of Total N	27.5%	72.5%	100%	100%

Nearly two thirds of the respondents used taxis to travel home after drinking alcohol away from home. Of the remainder, most drinkers either travelled in a car with a friend or designated driver or walked home with friends. Gender differences were observed (chi-square=56.186; df=5; p<.001). Female respondents were more likely to take taxis or travel in a car driven by a friend/designated driver whilst males were more likely to travel independently by walking, either alone or with friends, taking a bus or driving their own car.

Respondents were also asked to indicate how often they arranged in advance who would be the designated driver on a night out. The results can be seen in Table 2.31

Table 2.31: Frequency with which drinkers arranged in advance who was to be the designated driver on a night out by gender

Frequency of having a designated driver	Male %	Female %	Total %	Total Respondents
Always	25.5	39.3	25.6	195
Most of the time	12.8	14.3	13.9	76
Sometimes	22.8	18.5	19.7	108
Never	38.9	27.8	30.8	169
Total N	149	399	548	548
% of Total N	27.2%	71.8%	100%	100%

Nearly a third of respondents indicated that they never arranged a designated driver in advance. However a quarter of them always did so, whilst the remainder either did so most of the time or sometimes. There were clear gender differences in the responses (chi-square=11.372; df=3; p=.010), with female respondents more likely to take this precaution. Nearly two-fifths of females said that they ‘always’ made these arrangements whilst a similar proportion of males reported that they never did so. This finding is probably not surprising given cultural differences related to risk and risk taking between the genders.

2.2.3.3 Average weekly expenditure on alcohol

Respondents were given a free response question to establish the amount of money which they spent on alcohol in an average week. They could record the amount to the nearest pound. The spread of responses was considerable, ranging from a couple of pounds to well over a £100, although the percentage who recorded this latter figure was just over 1%. To analyse the data we collapsed the free responses into five categories - under £10.00; £10.00-£19.00; £20.00 to £29.00 and £30.00 - £49.00 and £50.00 plus. The results can be seen in Table 2.32.

Table 2.32: Drinkers average weekly expenditure on alcohol

Weekly expenditure on alcohol	Male %	Female %	Total %	Total Respondents
Under £10	28.2	38.3	35.5	203
£10-£19	20.5	15.3	24.0	137
£20-£29	18.5	16.9	17.4	99
£30-£49.00	22.4	14.7	16.9	86
£50.00 and over	10.3	4.9	6.4	36
Total N	156	415	571	571
%age of Total N	27.3%	72.7%	100%	100%

Statistically significant gender differences were observed (chi-square=13.889; df=4; p=0.008) with fewer women spending in the higher categories and more in the lower ones, especially under £10.00, whilst men showed the reverse pattern. How much this reduced female expenditure relates directly to levels of personal consumption is not clear; it is possible that female students are buying fewer drinks or buying less expensive ones, but it is also possible that this lower level might reflect cultural patterns where men are more likely to buy drinks for women.

2.2.3.4 Degree of excessive drinking

We used a number of the questions from the Alcohol Use Identification Test [AUDIT] (Babor, Higgins-Biddle, Saunders and Montiero, 2001) to determine the extent to which respondents were drinking in a risky way. We did however, utilise a more fine-grained set of response categories to some of the questions than those normally associated with the AUDIT. The responses to these questions are detailed below.

2.2.3.4.1 Frequency of drinking [Q20]:

Table 2.33: Responses to the question ‘How often do you have a drink containing alcohol?’

Frequency of drinking alcohol	Male %	Female %	Total %	Total respondents
Less than once a month	5.7	8.3	7.4	43
About once a month	2.6	8.1	6.6	38
Two or three times a month	17.9	25.4	23.4	135
Once or twice a week	32.1	41.2	38.8	224
Three or four times a week	34.0	14.2	19.6	113
Nearly every day	7.7	2.8	4.2	24
Total N	156	422	578	578
%age of Total N	27.0%	73.0%	100%	

When asked how frequently they drank alcohol, the majority (38.8%) indicated that they drank once or twice a week, whilst 23.4% indicated that they drank two or three times a month. More concerning is the proportion who indicated that they drank three or four times a week (19.6%) or nearly every day (4.2%). However, it is possible that some respondents may have just one drink nearly every day and drink within safe limits, whilst others who drink less frequently may consume much larger amounts when they do.

Data in Table 2.33 indicates that women were drinking less often than the men; the majority of the female students reported drinking once or twice a week, whereas the majority of the male students reported drinking three or four times a week. These differences were statistically significant (chi-square=40.521; df-5; p<0.001).

2.2.3.4.2 Number of drinks consumed on a typical drinking day [Q21]

To obtain some indication of the amount that students were drinking on each occasion, respondents were asked to indicate how many drinks containing alcohol they had on a typical day when they were drinking. The results can be seen in Table 2.34.

Table 2.34: Responses to the question ‘How many drinks containing alcohol do you have on a typical day when you are drinking?’

Alcoholic drinks consumed	Male %	Female %	Total %	Total respondents
1 or 2	23.6	28.9	27.5	157
3 or 4	28.8	26.6	27.1	155
5 or 6	17.6	25.4	23.3	133
7 to 9	16.3	13.9	14.5	83
10 or more	13.7	5.3	7.5	43
Total N	153	418	571	571
%age of Total N	26.7%	73.2%	100%	

There was a fairly even spread of responses across the categories presented, with just over a quarter drinking either 1 or 2, or 3 or 4 drinks, and just under a quarter drinking 5 or 6 drinks on a typical day. The remainder were drinking 7 or more. Whilst there was no attempt to quantify the amount in terms of units of alcohol drunk, the number of drinks consumed indicates that some students are drinking considerably more than the recommended levels. There is some evidence that males are having more drinks when they do drink, with nearly a third reporting that they have 7 or more at a time, compared to one fifth of the women. However, women are more susceptible to the effects of alcohol and need less to drink to gain similar effects so these proportions are still concerning. If we compare the extent to which they report drinking above the recommended daily level (3/4 for women and 5/6 for men) we see that more of the female students are drinking over the recommended amounts, 45.3% compared to 30.9% for women and men respectively. The difference was statistically significant (chi-square=15.374; df=4; p=0.004).

2.2.3.4.3 Drinking more than six drinks on one occasion [Q22]

To further explore the aspect of binge drinking, respondents were asked to indicate how often they had six or more drinks on one occasion. The results can be seen in Table 2.35.

Table 2.35: Responses to the question ‘How often do you have six or more drinks on one occasion?’

Frequency of drinking six or more alcoholic drinks	Male %	Female %	Total %	Total respondents
Never	17.9	18.2	18.2	105
Less than once a month	16.7	34.1	29.4	170
About once a month	12.8	16.8	15.7	91
Two or three times a month	23.1	14.7	17.0	98
Once or twice a week	23.7	14.0	16.6	96
Three or four times a week	5.1	2.1	2.8	17
Nearly every day	0.6	0.0	0.2	1
Total N	156	422	578	578
%age of Total N	27.0%	73.0%	100%	

Whilst nearly a fifth (18.2%) of respondents indicated that they never drank six or more drinks on one occasion, a fifth of the respondents indicated that they had six or more drinks at least weekly with a further 3.0% indicating that they did so daily or almost daily. The results therefore indicate that a considerable proportion of the students are regularly binge drinking. Significant gender differences were observed (chi-square=30.370; df=6; p<0.001) with male students binge drinking more often. Although there are similar proportions of both sexes that report never drinking six or more alcohol drinks on one occasion, half of the women who do report drinking six or more, do so monthly or less, whilst half of the men who do so, are likely to it at least two to three times a month or weekly.

2.2.3.4.4 Frequency of being drunk

An alternative way of assessing binge drinking is in terms of the effects of alcohol on the individual and particularly in relation to the extent to which individuals get drunk. Thus, to examine further the amount of harmful drinking that was taking place, students were asked to indicate how many times they had been drunk in the last month. Results can be seen in Table 2.36. Over a quarter (26.5%) reported that they had not been drunk during that time. Whilst 18.8% indicated that they had only been drunk only once, nearly a quarter reported being drunk between 4-10 times or more than 10 times. For a concerning proportion of the students then, being drunk would seem to be a normal aspect of drinking.

Table 2.36: Responses to the question ‘How many times have you been drunk in the last month?’

Frequency of being drunk in the last month	Male %	Female %	Total %	Total respondents
None	23.2	27.8	26.5	158
Once	14.0	20.6	18.8	112
2-3 times	26.2	29.9	28.9	172
4-10 times	25.0	17.4	19.5	116
More than 10 times	11.6	4.4	6.4	38
Total N	164	432	596	596
%age of Total N	27.5%	72.5%	100%	

2.2.3.4.5 The AUDIT:

Respondents were asked to complete the ten questions comprising the AUDIT to enable us to determine the level of drinking in relation to conventional criteria. Because we had used more fine-grained response categories for some of the questions we had to convert these to the usual ones in order to provide a measure of the overall level of risk derived from the responses to all 10 items that was comparable to that which could be obtained from the AUDIT in its usual form. Details of the conversion can be seen in Appendix 7.5.

Table 2.37: AUDIT results by gender

AUDIT scores	Male %	Female %	Total
0-7 Normal	25.6	38.9	35.3
8-15 Hazardous	54.5	50.9	51.9
16-19 Harmful	12.2	6.6	8.1
20+ Assess for dependency	7.7	3.6	4.7
Total N	156	422	578
%age of Total N	27.0%	73.0%	100%

As can be seen in Table 2.37, the results indicated that just over a third of the respondents (35.3%) were drinking at normal levels, whilst just over half were drinking at a hazardous level, and 8.1 % at harmful levels with a further 4.7% drinking at a level which should be assessed for dependency. Gender differences were observed (chi-square=14.396; df=3; p=.002), with more women drinking within the normal category and fewer women drinking at harmful and dependency levels.

We also examined the AUDIT data to see if students’ risk differed across the different age groups. The data can be seen in Table 2.38.

Table 2.38: AUDIT results by age

AUDIT scores	18-20 years %	21-30 years %	31+ years %	Total
0-7 Normal	25.9	33.0	64.7	35.2
8-15 Hazardous	56.6	57.3	28.8	51.9
16-19 Harmful	10.58	6.9	4.0	8.1
20+ Assess for dependency	6.14	3.2	3.0	4.7
Total N	293	185	99	577
%age of Total N	50.8%	32.1%	17.2%	100%

There was a clear pattern of decreasing risky consumption with increasing age (chi-square=51.258; df=6; p<.001). Whilst the majority in the younger two categories drank in

the hazardous range, the majority of those aged 31 and over drank in the normal range. The proportion of each age group drinking in the normal category increased with age whilst the proportion drinking in the 'harmful' and 'assess for dependency' categories fell with increasing age. In general it would seem that 18-20 year olds have the most risky patterns of drinking followed closely by 21-30 year olds.

2.2.3.4.6 View of their own alcohol consumption as problematic

Finally we analysed the data related to whether respondents considered their own alcohol consumption to be a problem. Results can be seen in Table 2.39.

Table 2.39: Responses to the question 'Do you perceive your alcohol consumption to be a problem?' by gender

Alcohol consumption is a problem	Drinker		
	Male %	Female %	Total %
No, I consume at safe levels	50.0	61.2	58.2
No, at times I drink to excess but I do not perceive it as problematic	37.3	32.9	34.0
No, I am too old/young to worry about it	2.8	1.8	2.1
Maybe	5.6	3.8	4.3
Yes	4.2	0.3	1.3
Total No. of respondents	142	392	535
%age of Total N	26.7%	73.3%	100%

The majority of respondents reported that they did not consider their alcohol consumption to be a problem. A third considered that they sometimes drink alcohol to excess but didn't view this as problematic. Thus whilst earlier information indicates that a good proportion of the respondents are drinking in a way that could be considered harmful, their overall view of their drinking would seem to be positive. Just over 5% are prepared to say that their alcohol consumption may be problematic.

Significant differences between males and females were observed (chi-square = 16.715; df=4; p=.002). More women compared to men reported that they drank at safe levels or that they drank to excess at times but did not perceive it as problematic. More men acknowledged that their consumption could be a problem.

2.2.3.5 Problems Associated With Drinking

Students were asked for information on the types of problems they had experienced when drinking alcohol. The extent to which respondents reported experiencing the range of problems presented to them was quite variable. The 33 problems covered a number of different aspects of life and we have categorised them into six areas comprising health, anti-social or illegal, financial, educational, vulnerability, sexual health and education. The frequency with which problems in each of these areas was experienced by the respondents can be seen in Table 2.40. Two sets of frequencies are given relating to whether the respondent had ever experienced this problem and whether the respondent had experienced it within the last year.

The seriousness of the problems listed vary considerably and to some extent this is reflected in the data, in that more serious issues tend to happen less frequently. In relation to general

Table 2.40: Responses to the question ‘As a result of drinking have the following ever happened to you?’

	Q30 drinkers combined survey	Ever happened	In the last year			N
			Total %	Males %	Females %	
Health	Had a hangover	88.1	75.2	73.5	75.8	564
	Vomited from drinking	80.3	49.6	54.3	47.8	563
	Had periods of time you could not remember (blackouts)	52.7	33.5	42.7	30.1	562
	Taken drugs	22.8	11.2	14.6	10.0	562
	Other accident/incident	19.1	8.7	14.0	6.8	561
	Injured yourself accidentally	41.3	20.5	23.2	19.5	562
	Harmed yourself deliberately (e.g. cutting, burning)	10.8	3.9	5.3	3.4	563
	Anti Social/ Illegal	Been in trouble with the police	10.1	2.7	6.6	1.2
Let down family/friends		31.3	15.3	16.7	14.8	563
Been involved in a fight		17.2	5.5	14.6	2.2	563
Driven a car when you have had too much to drink		14.1	5.5	9.9	3.9	560
Been involved in a verbal argument		55.7	31.2	41.7	27.4	564
Been ejected from an establishment		19.7	7.6	16.6	4.4	563
Damaged property (e.g. pulled a false fire alarm or other such behaviour)		13.1	5.3	11.9	2.9	564
Been arrested for drink driving		2.3	0.9	2.0	0.5	562
Financial	Been unable to pay bills	7.1	5.0	6.0	4.6	562
	Lost a job	2.3	1.1	1.3	1.0	563
Vulnerability	Been a victim of crime	12.2	5.3	11.9	2.9	564
	Been passenger in a car when the driver has had too much to drink	33.0	11.5	16.6	9.7	563
	Found yourself in a dangerous situation	25.8	10.3	16.0	8.3	562
	Got separated from friends	53.5	31.4	36.0	29.8	563
	Got lost	25.8	13.2	18.0	11.4	561
	Participated in a drinking game	73.2	55.4	59.1	54.0	560
	Thought you might have a problem	16.8	9.4	14.7	7.5	561
Sexual Health	Been sexually assaulted	8.5	1.4	2.0	1.2	563
	Had unprotected sex	30.9	15.2	25.2	11.6	564
	Become pregnant or made someone pregnant	3.2	0.9	1.3	0.7	564
	Contracted an STI	4.1	0.7	2.6	0.0	563
	Had sexual intercourse when you ordinarily wouldn't	26.8	12.2	17.9	10.2	564
Education	Been in trouble at college/university	7.8	4.5	7.4	3.4	561
	Attended a lecture/seminar/class after having several drinks	22.4	15.7	19.2	14.4	562
	Missed a lecture/seminar/class after having several drinks	32.3	23.7	27.8	22.2	561
	ag. Performed less well than you expected at university (e.g. missed a deadline/exam, poor grades)	16.0	10.1	13.2	9.0	564

health, the majority of respondents had experienced a hangover at some time, and the proportion was reasonably consistent from long term to the past year. Just over half had experienced periods of time they could not remember or blackouts and a third had done so in the previous year. Accidental injuries seemed to be relatively common, but what is particularly concerning is the 10% who had deliberately self harmed after drinking alcohol, nearly 4% of whom had done so in the past year.

Re the overall experience of anti-social or illegal activities, more than half the respondents reported they had experienced a verbal argument as a consequence of drinking and a good proportion had been involved in other activities that could be described as aggressive, including a fight or being ejected from an establishment. More than 14% had driven a car when they were over the limit, just over 2% had been arrested for drink driving and 10% reported having been in trouble with the police. Whilst these figures are reduced when problems experienced only the past year are considered, this is still a concerning proportion, especially of males, who participate in anti-social behaviour or have problems with the law after drinking.

Whilst financial problems resulting from drinking were not reported frequently, some students did record them. For people on low incomes, as students normally are, the financial problems they may experience could have considerable implications for their well-being and possibly for their ability to continue their studies.

Drinking does seem to be associated with behaviours that enhance the students' vulnerability. Thus, in considering whether they have ever experienced the problems, more than half report that they have got separated from friends as a consequence of drinking, a third report putting themselves at risk through being a passenger in a car when the driver has had too much to drink, a quarter report getting lost and a similar proportion report finding themselves in a dangerous situation. The frequency with which respondents reported taking part in a drinking game would seem to indicate that this is a fairly normal activity for student drinkers with nearly three-quarters reporting they have done so and the proportion still stays above 50% when reporting on the past year. In addition to the drinking games, getting separated from friends would seem to have been a risk factor for many. In general, the incidences reduce when only the past year is considered, but some problems still stay high.

We separated out the issue of sexual health from the categories of health and vulnerability as this seemed a particularly salient issue for students, the majority of whom are young people in the early stage of sexual relationships. Again the data suggests that a significant proportion of the respondents increase their risk of pregnancy and other adverse outcomes, including threats to their self image as well as more physiological problems such as STIs, by drinking. Nearly a third reported having unprotected sex and just over a quarter indicated that they have had sexual intercourse when they ordinarily wouldn't have done. Again, the percentages drop when only the past year is considered but levels of some problems are still quite high - for example, a substantial proportion (15.2%) have had unprotected sex as a result of drinking and 12.2% had sexual intercourse when they would not have done if sober.

Given that all respondents were students whose future is linked to academic achievement, the data on educational items is concerning. The responses indicate that alcohol has adverse effects on engagement with their studies and, for some students, it would seem to have an adverse impact on their performance. Nearly a quarter reported that they had attended a

teaching session after drinking and a greater proportion, nearly a third, had missed classes because of drinking.

Considering the data overall, two factors stand out. One is the extent to which the frequency with which problems are experienced is reduced when one compares the data for the 'ever happened' column to that of the column reflecting occurrences in the past year. There will of course be some double counting, in that anything that has happened in the previous year will have happened to them in their lifetime and therefore be included in this column as well. However, it is evident that for first year students, and probably for others, alcohol related problems predate their time at university. Of perhaps greater concern, given the high proportion of the respondents who are what we would consider to be 'traditional' students coming straight from school, the data suggests that alcohol is associated with problems at a point where they are not legally eligible to drink in commercial establishments.

The second point that seems very clear from the data relates to the separate analysis of the male and female responses for problems experienced in the past year. The data clearly shows that males are reporting higher incidences of problems than the females. Indeed there is only one item that shows a higher proportion of females reporting the issue than males, and that relates to a 2.3% difference between them when the overall percentage of respondents reporting experiencing a hangover in the past year is 75.2%. Even where we might traditionally consider that females are more likely to experience problems than males, such as in relation to unprotected sexual intercourse or sexual assault, the data disputes this. In all six problem areas, compared to female respondents, males report experiencing more problems. This may be because they have a more cavalier attitude to risk, or drink more heavily, or take fewer steps to protect themselves. Whatever the reason, the finding suggests that there may be a need to enhance male students' awareness of the extent to which they risk experiencing problems as a consequence of alcohol use.

2.2.3.6 Reasons for drinking alcohol:

To obtain this information we used the 28-item Modified Drinking Motivation Questionnaire - Revised [DMQ-R] for undergraduates (Grant, Stewart, O'Connor, Blackwell and O'Connor, 2007) which comprises five sub-scales measuring five reasons for drinking - social motives, enhancement motives, coping-anxiety motives, coping-depression motives and conformity motives. A copy of the scale can be seen in Appendix 7.6.

Respondents were asked to indicate how often they drank alcohol for each of the 28 reasons listed. We then calculated the respondents' scores on each of the five factors by summing the responses to the items in each sub-scale and then dividing the result by the number of items in the sub-scale to obtain the mean score. Overall means and standard deviations for each of the motivation sub-scales were calculated and the results can be seen in Table 2.41.

The results show that the students were most likely to drink alcohol for positive social and celebratory reasons. The second most common reason for drinking was to increase positive feelings (enhancement), with drinking to alleviate anxious (coping-anxiety) or depressed (coping-depression) states coming third and fourth respectively. They were least likely to report that they drank alcohol to fit in with others or avoid social disapproval (conformity).

We also examined the data to see if there were any differences in the motivations for male and female students. Table 2.41 also shows the means for men and women and the results of the

Table 2.41: Descriptive data for the five motivational sub-scales of the DMQ-R

DMQ-R Sub-scale	Mean	SD	Gender	Mean	't' test	df	Sig. (2-tailed)
Social	3.3458	0.8796	Male Female	3.5371 3.2760	3.062	533	0.002
Conformity	1.3936	0.7384	Male Female	1.5465 1.3381	2.702*	203.436	0.007
Coping-anxiety	2.361	0.9315	Male Female	2.4630 2.3240	1.544	532	0.123
Coping-depression	1.7819	0.923	Male female	1.8826 1.6596	2.521	532	0.012
Enhancement	2.632	1.0838	Male Female	2.7761 2.5806	1.857	532	0.64

* = 't' test for unequal variances

t-tests to determine whether there were statistically significant differences between the two groups. Throughout all five motivational sub-scales, men score more highly than the women. However, only two scales are statistically significant at the 0.01 level. These comprise the scales measuring social reasons and conformity reasons for drinking and show that, compared to female students, male students are significantly more likely to drink for social and celebratory reasons and to avoid social disapproval. The difference between the male and female students on the coping-depression sub-scale just misses significance at 0.012, but the results suggest that men may be more likely to drink to avoid or alleviate negative feelings.

2.2.3.7 Expectancies of the effects of drinking

We were also interested in the students' expectations about the effects that drinking alcohol would have on them. Whilst knowledge of their expected effects cannot directly explain why they drink alcohol, it may give some insight into their motivations. Frequency data on the respondents' answers to each item of the Rohsenow Alcohol Effects Questionnaire can be seen in Appendix 7.7. The information is presented in declining order of the frequency with which respondents agreed with each of the statements. Data considered here relate to the eight sub-scales of the questionnaire.

The measure consists of eight factors that relate to different forms of effects (the breakdown of the sub-scales can be seen in Appendix 7.8). They comprise expectancies of effects in relation to eight different conceptualisations of the effects of alcohol consumption and are summarised as global positive, social and physical pleasure, sexual enhancement, aggression and power, social expressiveness; relaxation, impairment and careless/unconcern. The global positive factor relates to expectancies about the generally positive effects of alcohol; the social and physical pleasure factor concerns expectancies that social and physical pleasure will be enhanced by alcohol; the sexual enhancement factor relates to expectancies that both sexual pleasure and performance will be increased; the social expressiveness represents a dimension of increased social assertiveness; the aggression and power factor represents expectancies that alcohol is linked to increases in arousal relating to power and aggression; the relaxation factor represents expectancies that alcohol has a tension reducing effect; the impairment factor reflects expectancies that alcohol is associated with reductions in cognitive and motor impairment and the careless/unconcern factor represents an irresponsibility dimension.

Total scores for each respondent for each of the eight factors were calculated from the students' affirmative responses to the items making up each of the sub-scales. Descriptive data for men and women for each of the factors can be seen in Table 2.42 together with the results of a series of t-tests conducted to determine whether there were statistically significant gender differences.

Table 2.42: To show responses on the Eight Factors of the Rohsenow Alcohol Effects Questionnaire

Alcohol Effects Factors	Gender	No of items in scale	Mean	Std Deviation	't'	df	Sig (2 tailed)	No. of respondents
Global positive	Male	5	1.0629	1.2346	3.253*	219.594	.001	143
	Female		0.6862	1.0394				
Social & physical pleasure	Male	5	3.1818	1.4517	.438	533	.662	143
	Female		3.1199	1.4476				
Sexual enhancement	Male	5	1.3427	1.5794	-2.354	533	.018	143
	Female		1.7143	1.6199				
Aggression & power	Male	7	2.2867	1.8562	.977	533	.329	143
	Female		2.1097	1.8528				
Social expressiveness	Male	5	3.4056	1.7572	1.982	533	.280	143
	Female		3.2168	1.7970				
Relaxation	Male	5	2.4336	1.4514	1.243	533	.215	143
	Female		2.2526	1.5053				
Impairment	Male	5	2.9580	1.6093	-2.079	533	.036	143
	Female		3.2679	1.4941				
Careless/unconcern	Male	4	1.9930	1.4511	-.842	533	.400	143
	Female		2.1097	1.4072				

* = 't' test for unequal variances

Taking into account the range of possible scores on each of the sub-scales, a comparison of the overall mean scores across the factors indicate that respondents had greater expectancies that alcohol would affect them positively in relation to increasing social expressiveness, enhancing social and physical pleasure, and relaxation, and affect them negatively in terms of cognitive and physical impairment. Statistically significant gender differences can be observed in relation to three of the factors. Male students expected more general positive effects from alcohol, whilst female students expected greater positive effects in relation to sexual enhancement and more negative effects in relation to impairment to their cognitive and physical competence.

2.2.3.3 The Non-Drinkers

We asked the non-drinkers several questions to obtain some understanding of their non-drinking status. When asked whether they had always been a non-drinker 48.6% of non-drinking respondents reported that they had, whilst just over half, 51.4% said they had not.

Those who said 'yes' were given a supplementary question asking them to indicate the main reason why they had always been a non-drinker. The results can be seen in Table 2.43. Just under half of them reported that they had always been a non-drinker because they didn't like alcohol and nearly a third said that it was because of religious reasons. Whilst it may seem contradictory to have non-drinkers checking that they didn't like alcohol, we are assuming that this category included those who had had an occasional taste, as many young people do growing up, as well as those who had completely abstained from drinking.

Table 2.43: Responses of non-drinkers who had never drunk alcohol to the question ‘What is the main reason that you’ve always been a non-drinker?’

Reason for not drinking	Total %	Total N
Religious reasons	31.5	17
Don’t like it	48.1	26
Parents advice/influence	7.4	4
Health reasons	1.9	1
Can’t afford it	0.0	0
Other	11.1	6
Total	100	46

We also asked those who had drunk alcohol to indicate why they had stopped drinking it. The results can be seen in Table 2.44. The majority gave up because they didn’t like it. A sizeable proportion checked the ‘other’ box, but as we did not provide an opportunity for expanding on this response we are unable to say what other reasons might be encompassed by this. Stopping drinking because of health reasons was the third most frequently checked category. It is not clear, however, whether this relates to the adverse effects of alcohol directly, or whether aspects of their health, or possibly taking some form of medication, meant that it was not advisable for them to drink alcohol.

Table 2.44: Responses of non-drinkers who had drunk alcohol to the question ‘What is the main reason that you stopped drinking alcohol?’

Reason for not drinking	Total %	Total N
Religious reasons	10.5	8
Don’t like it	38.2	29
Parents advice/influence	2.6	2
Health reasons	17.1	13
Can’t afford it	2.6	2
Other	28.9	22
Total	100	76

When we compare the reasons given by students who have never drunk alcohol to the reasons given by those who have given up alcohol we can see that ‘religious reasons’ is much more salient for those who have never drunk alcohol and ‘health reasons’ is more important for those who have stopped drinking. In both groups however, ‘parental influence’ and ‘not being able to afford it’ do not seem to be very influential factors.

2.3 Summary

This chapter has provided an account of the general results of the online survey. This section highlights what we consider to be some of the main findings relevant to the aims of the study to establish the nature of student alcohol use with a view to their implications for the encouragement of safe and sensible drinking.

Whilst this was not, and was not intended to be, a representative sample of the student body and the respondent base only comprises a small proportion of students enrolled at the university, we consider that the respondents do not vary too substantially from the institutional profile. However, the sample includes more first years and 18-20 year olds and slightly fewer males and students drawn from ethnic minority groups, especially black

students. In addition, the proportion of respondents from the partner colleges was lower than expected. Thus, the generalisations that we draw from the data, especially when we refer to proportions of students, should be considered in the light of these differences.

There were few differences in demographic or educational variables between the drinkers and the non-drinkers. Drinkers were more likely to be younger, in the 18-20 year old age group, attending the university, white and without any religious affiliation. There were no statistically significant differences in gender, sexual orientation, living accommodation, the type of qualification studied for, the mode of study (full- or part-time) or the length of time they had been studying at the university.

On the drinking related variables, the majority of both drinkers and non-drinkers considered that they knew something of the risks of drinking alcohol, but a higher proportion of the student drinkers reported knowing more about the risks than did the non-drinkers. Whilst we did not test their actual knowledge of the risks, the findings do suggest that many students feel quite confident of their understanding of the risks associated with alcohol consumption, and thus are perhaps less likely to look further for information on the topic.

Analysis of the social norms data revealed some interesting and unexpected findings. Compared to drinkers, abstainers perceived that a smaller percentage of the university students drank alcohol and they considered that student drinkers drink more frequently. They also perceived more disapproval from their friends if they drank alcohol to excess. However, we also found distinctions between the norms operating for male and female drinkers, with female student drinkers perceiving much more disapproval for regular, frequent and excessive drinking compared to the men.

Focusing upon the drinkers, nearly a quarter of the students reported that they drank 'quite a lot' or 'quite heavily', with more men compared to women reporting that they drank 'a lot'. Women were more likely to say that they drank 'a little'. Nearly a tenth reported drinking more than 21 (men) and 14 (women) alcoholic drinks in the previous week, and whilst this isn't directly comparable to the government recommended guidelines in terms of units of alcohol per week, it does suggest that a concerning proportion are drinking more than is sensible. Just over a quarter of the drinkers (26.5%) reported being drunk in the past month and a similar percentage (25.9%) said they had been drunk at least 4 times, with 6.4% being so at least 10 times. 30% of men and 44.6% of women drinkers said that they had had more than 6 or 4 drinks respectively in one drinking session. When assessed by the AUDIT, 4.7% were drinking at a level which indicated that they should be assessed for dependency. Whilst just over a third reported drinking within the normal range, just under two-thirds reported drinking outside that. More men were likely to be drinking at 'harmful' or 'assess for dependency' levels than women, and younger age groups were more at risk than the older students. The data from these various measures of the frequency and quantity of alcohol consumption indicate that a substantial proportion of the students are drinking immoderately, are drinking beyond sensible amounts in any one session and that a minority are at risk of dependency. Whilst women's drinking is similar to that of the men's, men report drinking more heavily and are more at risk than women.

When asked whether they thought they had drunk too much in the past week, greater proportions of those men and women drinking above 21/14 drinks thought that they had, suggesting that the students are aware of the high amounts they are drinking, although it does not appear to affect their behaviour.

Most alcohol consumption takes place over a 4-6 hour period, most often in the evening between 8 and midnight. The students are more likely to drink in nightclubs, with drinking at home or a friend's or family member's home following a close second. The endorsement of home drinking suggests that many students are likely to be drinking non-standard measures in unmonitored situations.

The amount of money spent on alcohol varied considerably with just under a third spending less than £10.00 per week whilst a minority (6.4%) spent more than £50.00. Women tended to spend less than the men, though it's unclear whether this is because they bought fewer drinks, bought less expensive drinks or had more drinks bought for them. The majority travelled home by taxi after going out and drinking alcohol. Where students travelled by car, a quarter always arranged a designated driver although nearly a third never made such arrangements. Women were more likely to have made such arrangements.

From the range of measures then we can say that male students are probably more at risk from drinking higher levels of alcohol, spending more on alcohol and taking more risks than the women.

When asked about the problems they had experienced after drinking alcohol, various different types of problems were reported, both for the previous year and in the longer term. The problems were categorised into six groups. Problems related to health, such as hangovers, were most frequently checked; and the remainder, in declining frequency were those associated with increased personal vulnerability, education, anti-social behaviour, sexual health and finance. In general, men experienced more problems than women in every category, even those related to sexual health, suggesting that they are more at risk after drinking, although whether it is because they drink more heavily or because they are more likely to take risks generally cannot be determined from the data.

When asked to complete the DMQ-R to establish their motivations for drinking alcohol, students reported that they did so for its association with positive social affiliative rewards, such as being sociable or celebrating with friends, and because it increases the enjoyment of a social occasion. Enhancement was the second most reported reason for drinking, and here it is because it makes them feel good and gives them a high, generally adding to and enhancing their experience. This pattern suggests that offering students opportunities for other activities that provide positive social and emotional experiences may be a way of reducing their consumption of alcohol.

The results of the Alcohol Effects Questionnaire indicated that male and female students have rather different expectations about alcohol's effects. Whilst knowledge of their expectancies doesn't explain their use of alcohol it can give some indication of their motivations. The results do tend to reflect the findings of the DMQ-R, with student drinkers most frequently reporting expectancies of positive effects in relation to increasing social expressiveness and social and physical pleasure. Social expressiveness relates to being more open and confident in dealings with others, whilst social and physical pleasure relates to feelings of warmth, positivity and enjoyment with others. They also expected that alcohol would have a negative impact, impairing their ability to concentrate or to act efficiently and making them more clumsy and awkward. Statistically significant differences were found between male and female students, with men expecting significantly more global positive effects whilst the women expected more sexual enhancement and greater impairment.

This pattern of results for the two scales indicates that the predominant reasons why students drink alcohol relate to sociability and the quality of their general experience. These findings suggest that offering students opportunities that provide positive social and emotional experiences but without including alcohol may provide an avenue to reducing their consumption of alcohol.

In addition to these findings concerning students use of alcohol, one needs to bear in mind that not all of the students were excessive or even moderate drinkers. Many reported abstaining from alcohol, most doing so because they didn't like it or for reasons of religion. Thus, as well as providing insight into the nature of student drinking, this survey has flagged up the need to recognise the diversity of the student body insofar as it relates to alcohol consumption. Whilst there is an evident need to address the heavy and potentially abusive drinking of a minority of the students, and the excessive, binge or episodic drinking of a sizeable proportion of the students, the needs of those who do not drink or do so lightly also have to be considered.

CHAPTER 3 - THE FOCUS GROUPS

This chapter addresses the second part of the research project and presents the findings of the focus groups undertaken with students from across the university and its partner colleges.

3.1 Method

3.1.1 Design

Qualitative methodology was employed in order to provide in-depth information on students' views on a range of alcohol-related matters. We used focus groups to examine students' shared experiences and views of alcohol (mis)use and health promotion to provide information which could be used to inform the development of policies and strategies aimed at reducing harm and promoting sensible drinking.

3.1.2 Participants

Participants in the focus groups were higher education students drawn from the University and three of its partner colleges. Students were recruited on a voluntary basis utilising a number of methods of contact, including a facility at the end of the institution-wide online web-survey which enabled students to indicate their interest without compromising their anonymity on their survey data. They were also recruited through invitations on the internal student internet, through posters positioned throughout the educational establishments, and through contacts via lecturing staff. Recruitment was guided by the need to obtain a spread of participants across the different years of study, student age, living arrangements and drinking patterns in the participants.

In total, 143 students took part in 20 focus groups. The total sample comprised 35 males and 108 females, who were aged between 18 and 53. The majority, 120, were single with the remainder either married or cohabiting and 4 were divorced. In terms of living accommodation 37 lived in halls of residence, 33 lived with their parents, 45 were in shared accommodation in the locality, and the remaining 26 lived in their own home either on their own or with a partner. The majority, 110 were white with the remaining 31 drawn from various ethnic groups, predominantly black. Most, 123, were based at the University and 20 were in the partner colleges, 40 were in their first year, 59 in their second year and 43 in their third or final year of study.

3.1.3 Procedure

A list of issues to be considered in the focus groups was devised by the researchers. The structure was kept to a minimum in order to allow for flexibility to follow up issues raised by the students. The groups were asked to identify the key elements of alcohol use by students, the reasons why they drank alcohol and to comment on the positive and negative attributes of alcohol use. They were asked to explore ways in which the negative consequences of alcohol use could be reduced, and encouraged to consider intra-personal, inter-personal, university and community factors that would persuade students to adopt less risky approaches to alcohol use. Existing alcohol focussed promotional materials used within the university and local community were considered and students were asked to comment on the extent to which it

would persuade them to change their behaviour and how health promotion efforts could be improved.

Information on the nature of the study was provided to those students who expressed interest and students who agreed to take part gave their written, informed consent. They were made aware that they could withdraw from the study at any time. Before taking part in the focus group, participants were asked to complete a short questionnaire providing socio-demographic details, course information, and drinking patterns in order to ensure an appropriate range of participants.

The focus group meetings took place at various venues within the four HE establishments, the halls of residence and external accommodation. All of the locations were accessible and familiar to the students, providing an environment that was comfortable in order to promote and support open discussion. All participants were informed about what would be involved and assured of confidentiality and anonymity concerning the data and publication. Issues related to the need to respect others' views, to share only what they felt comfortable in sharing and of respecting the confidentiality of material disclosed during the focus group were addressed with participants at the beginning of the sessions. The focus groups lasted between 1-2 hours. They were facilitated by a main female researcher who was similar in age (young adulthood) and background to the students, with additional support provided by a second male researcher. Each session was audio recorded and transcribed verbatim later.

3.1.4 Ethics

Details of the research project were submitted to the University's Research Ethics Committee and approval obtained.

3.1.5 Analysis

Data from the initial short demographic and drinking profile questionnaire was analysed using SPSS to provide descriptive statistics. The qualitative data set was analysed using thematic analysis, involving the identification of key themes and sub-themes across all the participants. Data were read and re-read to ensure immersion in the data prior to determining the themes. The initial coding was undertaken by the main researcher who had convened the focus groups supported by a second researcher, and the coding was moderated by the principal investigator. In the subsequent sections normal convention concerning the presentation of extracts has been followed including the use of italics to present participants comments verbatim, the use of a dotted line ... to denote material that has been excluded from the quote, and the use of square brackets [] to indicate where material has been included by the researcher to make the data more comprehensible to the reader.

3.2 Results - Drinking characteristics of the sample

The short questionnaire which participants completed prior to the start of the focus group asked for demographic information and information on their drinking patterns. The demographic data has been reported in the sample characteristics above. Here we look at a number of indicators of alcohol use.

3.2.1 Drinking frequency

Members of the focus groups were drawn from a wide range of alcohol users. Whilst 15.9% did not drink or drank hardly at all, 22.3% indicated that they drank a little, 39.6% that they drank a moderate amount, 19.4% that they drank quite a lot and 2.9% said that they drank quite heavily. In comparison with respondents on the online survey we had more students who reported that they drink alcohol 'a moderate amount' or 'drink quite a lot' and fewer who 'do not drink' but the aim in selecting participants for the focus groups was to try to capture the range of student drinking behaviour rather than to take a sample that was representative of the survey.

3.2.2 Alcohol consumption

When asked whether they considered that their alcohol consumption was a problem, the majority of focus groups members did not consider it to be a problem. Of those who reported that they drank alcohol, 43.1% considered that they drank at safe levels, just under a third considered that whilst they sometimes drank to excess they did not perceive it as problematic and a further 5.1% considered they were too young to worry about it. However, 5.8% thought that they 'maybe' had a problem and 1.4% reported that they did have one. It would seem that a good proportion of these participants recognised that they were drinking above recommended levels but that very few had concerns about it, a finding that echoes that of the survey.

3.2.3 AUDIT scores

Similarly the AUDIT scores indicate that, of the 139 students who classified themselves as drinkers, 43.9% drank within normal levels, just under a third (31.7%) were classified as hazardous drinkers, whilst a quarter were drinking in a way that would cause concern, with 12.2% drinking alcohol at harmful levels and a further 12.2% indicating that they should be 'assessed for risk of dependency'. Comparison with the scores from those of the online survey respondents indicate that more focus group participants are drinking at normal levels and at 'harmful' and 'assess for dependency' levels whilst considerable fewer are drinking at 'hazardous' levels. However, the greater proportion of focus group participants consuming alcohol at the riskier end provided us with a more even spread of the different types of student drinkers.

3.2.4 Consumption of six or more drinks on one occasion

If we take the one question from the AUDIT that assesses how often the participants have six or more drinks on one occasion however, nearly a third, 30.2%, indicated that they did so weekly or more often. This compares with 19.6% of the online survey respondents who drank alcohol this frequently. We therefore have a higher level of those who 'binge drink', which again was appropriate for the purposes of the study.

Overall therefore we consider that our sample of participants includes an appropriate spread of student alcohol usage ranging from those who drink very little or not at all, through those who drink at what might be viewed as sensible levels, to those who drink excessively.

3.3 Themes emerging from the focus groups

The transcripts of the focus group discussions were read and re-read until the researchers had a detailed understanding of the data. Data was indexed and coded into seven main themes largely, but not wholly, reflecting the initial topic areas addressed by the focus group schedule. The seven themes comprised motivation for drinking, drinking patterns, drinking at home, negative aspects of drinking, staying safe, effects on academic work, and changing attitudes and behaviour. These, together with their sub-themes are presented below.

3.3.1 Motivation for drinking

Participants reported a variety of motives that underpinned their use of alcohol. Some aspects related to personal and internal factors, others reflected more inter-personal reasons. The various sub-themes are considered below.

3.3.1.1 Social factors

Many of the reasons that students offered for drinking focussed upon the social aspects of alcohol but there was considerable variety in the way in which social factors influenced or was associated with consumption. They varied from alcohol being viewed as an accompaniment to social encounters or a cultural means of celebrating, to alcohol enhancing an individual's ability to be sociable.

The use of alcohol to mark special events figured strongly as a motivation for drinking across all focus groups. Students referred to the association of alcohol with celebrations, drawing on cultural elements that emphasised its role and comparing it with the capacity of non-alcohol beverages to perform a similar function. Alcohol was seen to mark special occasions more effectively than alternative beverages as the following extract shows. *'If you like, said, if you'd won the lottery, you know you don't want to be drinking a cup of tea because, you know, you've won, I don't know, fifteen million pounds or even more than that you know. So you'd want to celebrate with champagne and all the works, 'cause you know that, it's a real good moment, you know, and that's, alcohol can make it feel, feel good'*. Here we see that alcohol is used to accentuate positive events in students' lives. However, students also reported that alcohol could be used on the reverse occasion when things had gone wrong and again was compared more favourably to other types of drink *'Having a celebration or a down day, I don't think a cup of tea kind of cuts either of those does it really?'* Thus, students viewed alcohol as having special properties that made it a more appropriate drink for specific occasions - either good or bad.

Students also pointed to alcohol's use in more general social situations both in terms of it being an adjunct or accompaniment to social situations and in enhancing their ability to be social. Thus, for example, one respondent saw alcohol as *'it's more of a social thing'* and another *'there's definitely a social aspect isn't there?'* as if alcohol was a natural supplement to social situations. This emphasis on alcohol as a social activity meant that some participants only drank alcohol in social situations *'I only drink socially, I don't drink at all if it's not social'*. The actual term social was used in various ways by the students. Many of them referred to social as occasions when they went out with friends *'I mainly drink socially, like with friends if we're going out on a like social night out'* whilst others were more inclusive and defined the types of social situations in which they were likely to have a drink more broadly. They included more everyday activities at home such as mealtimes as the following

student explains *'sometimes like I have also have it at the dinner table when I'm with my family'*. On the whole however, drinking alcohol tended to be viewed as a social activity which students enjoyed with their friends, particularly when there was a group of friends. Going out for a drink was seen as a purposeful way of being sociable with a larger number of friends. Where the group size was smaller involving only two or three of them, other alternatives, such as going out for a meal or some other activity, were considered as the following example makes clear *'because if it was just K and me meeting up we might go for something to eat or something but if there was a big group of us, we probably would go out for a drink or something'*.

Many of the students described alcohol as playing a more purposeful role in social situations, facilitating and enhancing their ability to be sociable. One student considered that alcohol *'makes you more sociable'* whilst another reported *'you're more sociable, you talk to a lot more people'*. Students often found it difficult to tease these two aspects apart. One male respondent typified the tendency to conflate when he reported *'well, it's just good for a social situation I suppose isn't it, if you're out with friends and stuff, you have more, not more fun, but it helps, you know.'* Sociability was often linked to communication, with alcohol seen to enhance people's ability to be more open with others *'from my point of view, it's your friends talk more ... they do communicate a lot more than normal'*. Others referred to the act of going out together to have a drink meant that *'everyone's got the same mind-frame, so it's easier to talk to people'*. While the majority of students referred to alcohol as a facilitator at social events some viewed it as having a compensatory function. Drinking could enhance the evening if the social elements or other aspects weren't going very well *'it tends to improve the quality of the night out if it's not really going too great'*. Here alcohol was seen as a way of having a good time even if the company wasn't particularly good.

Some students were more specific about the socialising effects of alcohol on themselves. For many, it gave them more confidence in social situations and whilst some could articulate this in relation to particular activities others were more general. Thus one respondent reported *'it gives you confidence sometimes'* and another *'it kind of makes me feel more relaxed with my surrounding so I gain in confidence when I drink'*. Whilst this latter respondent saw an increase in relaxation as enhancing her confidence, another distinguished between relaxation and confidence - *'I think it's more of a confidence thing, more than relaxation'*. Other participants were more detailed and related alcohol's confidence enhancing effects on specific activities. More particularly, one participant reported *'normally, like, if we're in a club or something I don't really go on the dance floor unless I've had a few drinks'*. Others extended this ability of alcohol to increase confidence to that of reducing inhibitions which enabled them to do things that they would have been much more self-conscious about doing without having had a drink. In the following example also drawing on dancing, the difference is quite clear *'as I say, I've got no co-ordination whatsoever... but after a few drinks I feel fine to get up and dance, ... you just sort of let yourself go, don't you? Whereas if I was dancing and I'd not had any drink, I'd be so conscious about what I was doing.'* Perhaps the common theme here is that alcohol enables the respondents to be less self-conscious about themselves which then allows them to engage more effectively in the situation, whether it is being sociable or indulging in an activity such as dancing which takes place in a social situation.

3.3.1.2 Drinking to relax

Whilst some students saw a connection between alcohol and its relaxing effects in enhancing social situations, others appeared to use alcohol specifically as a means of relaxing after work

or arduous activity or escapism from unpleasant situations. The nature of alcohol use differed with some students using it in a moderate way, reporting having just one or two drinks to relax at home after work, whilst others went out to drink and to give themselves a breathing space. The contrast can be seen in the following excerpts, the first from a female participant - *'I probably just have like a glass of wine or something like occasionally if I've perhaps had a hard day at work or .. you know, when you just get home and you're like 'oh, I need a drink'* which compares with this male student's approach *'maybe it's a man thing, you know, it's a, to me going to the pub and you know sitting down with men is sort of my time, it's you know, it's away from everything ... it's you know, if you've got any anxieties or anything, it levels out your thinking and it can calm you down.* In the latter, we have reference to the whole context of drinking, rather than just the drink itself, which makes it relaxing.

3.3.1.3 Drinking to get drunk

Students across the focus groups had very varied views on getting drunk. One of the main motivators for some of the students was to obtain the intoxicating effect of alcohol and an altered state of consciousness. Here, the motivation for going out and drinking alcohol was simply to get drunk *'can I just say that getting drunk is quite a big part of the night I'm afraid'* and *'I used to just go out to get smashed - I didn't care, I didn't about girls, I just wanted to get smashed'*. However this view can be contrasted with that of other students, who considered that getting drunk is incidental to having a good time, that they don't set out to get drunk but do acknowledge that they might end up drunk *'if by the end of the night I'm drunk then I'm drunk but I don't start at the end of the night thinking "I'm going to get plastered"'* or *'it's not like my target is to get drunk tonight, like my target is like go out to have a good fun [time]'* Here being drunk is viewed as a by-product or a hazard of drinking alcohol at a social event.

Other students also viewed drinking and getting drunk within a social context, but here their reasons were more externally motivated and they were more likely to make specific comparisons with their friends. For some, drinking was something that they did in order to be similar to others, or because being sober when others were under the influence of alcohol was difficult or unpleasant for them. They reported that their friends' behaviour was different when they were drunk, and found that seeing that behaviour when they themselves were sober was disconcerting. They were then likely to drink in order to join in, to get to a similar state. For one student, reaching the same state of intoxication as others was viewed as a reason for drinking quickly *'because if you go out really late and it ends up being twelve o'clock before you out and your like "oh god, everyone is drunk", so you quickly get down a few drinks to try and, not get drunk, but get to their level'*. It is interesting that this respondent acknowledges that everyone else is drunk and wants to get to their state, but rejects the notion that she is drinking to get drunk.

3.3.1.4 Finance

Finance was also seen as a factor that influenced going out and drinking alcohol. One concern expressed by the students was the overall amount of money that they had available to spend when going out and drinking and the importance of ensuring that they received good value for it. Often they reported that non-alcoholic drinks were as expensive, sometimes more so, than the alcoholic ones. As alcohol was seen to provide additional benefits over the non-alcoholic one, they made what they perceived to be a rational decision to opt for alcohol as the following extracts show *'if you're buying cokes all night there's not a lot of difference*

between the prices.. and you may as well have a proper drink' and 'from a financial point of view there's no benefit with not drinking alcohol is there?' Others referred to the additional expenses associated with going out particularly into the clubs in the town centre, such as taxis, and argued that if you were going to have these further expenses anyway then you might as well drink alcohol and enjoy its added effects.

3.3.1.5 University culture

Finally, students referred to expectations about university life which involved the social as well as the studying aspects. Here participants saw going out drinking as part of the culture of university and that it was important to enjoy all that the university had to offer. For example *'yeah you want to go uni, enjoy the uni life, go out partying'* reflects the view that it is the full experience that they want, not just the academic elements. This view was considered particularly important for the students who attended university straight from school and were living away from home. For many, meeting new people through partying and venues where alcohol was available was seen as a fundamental part of university life. They mentioned the need to maintain a balance between the social and the studying elements, but this aspect is covered in more detail in section 3.3.6.1

To summarise, the students voiced a wide range of reasons why they or their peers drank alcohol. The motivations were varied and sometimes contradictory. They ranged from factors that were driven by the nature of alcohol itself and its effects to those more cultural and contextual factors that reflected their current status as students.

3.3.2. Drinking patterns

In this section we look at the way in which respondents used alcohol and how they typically drank it. Some of the sub-themes - e.g. finance - cross over with those in the section on motivations for drinking alcohol, but they are distinguishable in that here we look specifically at the drinking patterns on occasions when alcohol is drunk and the factors that influence that pattern, rather than at their reasons for drinking alcohol in the first place.

3.3.2.1 Quantity and frequency of drinking alcohol

Students varied in their reports of the quantity consumed and frequency of drinking alcohol. Some reported that they drank alcohol but not at potentially harmful levels whilst others acknowledged that they often drank excessively. Some of the students who had low levels of consumption had not necessarily always been low consumers but they reported that going to university had led to a reduction in their drinking, sometimes because of life change decisions or because of reduced incomes. For example, in comparing current levels of consumption with considerably higher ones prior to university, one mature student spoke for several saying *'I hardly ever drink at all now, probably once a week and if I do, yeah probably I don't get [drunk] I just have a couple, enjoy myself and that's about it'*. Those with generally low levels of consumption varied in their drinking patterns. Some indicated that they limited their drinking to special occasions *'if I'm on holiday or New Year or something like that'* whilst others drank alcohol more regularly but limited the amount they drank on each occasion *'when I do [drink] it's like one bottle of Magners and that's it'*. Others, who only very rarely drank alcohol, did so because of low tolerance to its effects or because they didn't like the

taste. Sometimes they reported that this was a consequence of other physical problems and sometimes alcohol clashed with medications they were on.

Other participants had heavier consumption patterns so that when they did have an alcoholic drink, they had a large quantity. One student who had recently stopped drinking for lent, referred to starting off by drinking in the region of 6 to 8 pints and then *'just carry on from there'*. The use of two pint jugs in some establishments appeared to encourage drinking larger quantities of alcohol, as they tended not to be shared by a group but used for sole drinking. They reported that other promotions also had a tendency to lead to increased consumption. Some students reported drinking considerable amounts and talked in terms of *'a bottle of wine before I go out and then I drink double gins when I'm out and I probably have about eight to ten of them'*. However there was a great deal of variation in the amount that participants drank so others referred to drinking lower quantities such as *'about three single vodkas and lemonade'* or *'before I go out I'll share a bottle of something, not wine, like something soft like Smirnoff Ice then I'd have like three alcopops with a shot, that's it'*. They were often still drinking considerably above government daily guidelines, but doing so over the course of several hours.

Some students reported having a more erratic pattern where they drank very little alcohol for several weeks and then something caused *'them to go out and binge to excess'*. Precipitants of such binges often involved a change in circumstances; examples given included going to another city or going camping. Other, more moderate drinkers, referred to seasonal changes in their drinking patterns such as the summer months in which they were likely to go out into the countryside on a bike ride for example, and *'come across a pub'*. Still others reported having a varied drinking pattern that depended on the situation in which they were having alcohol, so drinking as an accompaniment to another activity, such as watching a sports match, would be treated very differently to drinking when out on the town. The former would involve less alcohol, the latter would mean they'd drink excessively. As one respondent put it *'if I'm watching the rugby or football, it will just be a few pints in the local pub but when I do go out on the town then I'll just get hammered, you know, because that's why I'm there, that's what I'm there for'*.

3.3.2.2 Drinking too much

The students had very varied attitudes to drinking too much at any one time. Some thought that it might spoil the evening although often this centred, not on their own alcohol intake, but that of their friends. They were more likely to say that friends' excessive drinking was more problematic for them. Sometimes this was because of the impact or limitations on their own behaviour, *'if one of your mates has had too much to drink and they're being a pest ... or a nuisance then it sort of takes the edge off the night'* whereas at other times it was because of more serious consequences of their friend's drunkenness *'it's more behaviour of my friends, once they've had a drink and then you know, police get involved'*. For others, however, drinking too much was part of the evening's entertainment. However the criteria for 'drinking too much' often related to the outcome of the drinking. Thus drinking large quantities of alcohol and becoming intoxicated was often not seen as problematic. Drinking alcohol on occasions which were then associated with adverse experiences, either through their own or through their friend's actions, were much more likely to be defined as 'drinking too much'.

3.3.2.3 The drinking context

Sometimes students related their pattern of drinking to the context in which they were drinking. Some excused their excessive drinking by referring to particular circumstances which influenced their behaviour on particular occasions so that, for example, conditions in the venue contributed to an abnormal pattern. One respondent reported that the queues for drinks when one of the clubs had a *'ten pounds all you can drink'* night meant that they bought drinks in bulk, and that as it was noisy the bartender couldn't hear a specific order so they gave her four different drinks. It was the combination of having that number of drinks *'because you've got four and you're trying to get rid of a couple at least'* and mixing the drinks that meant that she got drunk more *'it was just a nightmare, but yeah, I think that was why I got ridiculously drunk'*. Having a quiet bar and being able to obtain one drink at a time was seen as preferable and less conducive to excessive drinking and getting drunk. Alternatively, some students were deterred from buying drinks at the bar in clubs because of the crowding and the length of time it took to get served so that they did not even attempt to purchase drinks there, or did so only rarely. They had a few drinks before going to the club and then just enjoyed the social aspects of the venue.

3.3.2.4 Limits

Many students talked in terms of their limits for drinking alcohol without adverse effects which influenced the amount they drank. Some recognised that their limits were very low *'I am a complete lightweight, a couple of glasses of rose'* or *'you could give me two glasses of wine and I am talking foolishness'* and tended to be able to recognise the signs that they had reached them and stop drinking. Others maintained that they had higher limits so could drink more whilst a minority reported that their ability to drink and not get drunk actually prevented them from drinking a lot *'I'd probably drink about three or four pints. I could drink a lot more at the weekend but I don't, it takes a lot for me to get drunk so [I don't]'*. Here, getting drunk didn't seem to be worth the cost of the amount of alcohol they would have to consume in order to obtain the effect. Other students had a very different perspective and took pride in their ability to hold their drink, a pride which often led to them trying to extend their consumption. Drinking high quantities of alcohol was also associated with maintaining the initial buzz that they got with alcohol and with testing and extending their own personal limits. *'Everyone is always aware of their limits; the problem [is] you're just always trying to conquer them'*. Thus, for many the pattern of drinking was a personal challenge.

The students also remarked on the apparent variability in the effects of alcohol and its implications for judging where the limits lay, especially in relation to their friends' drinking. They noted that the effect often depended on the circumstances, so that in some situations the same amount of alcohol would have a very different outcome. They commented on friends who could drink a set number of drinks in a pub and remain very calm but who could react very differently in an alternative setting such as a club when they had had a similar amount. Atmosphere and context seemed to be significant factors in their perception of the way in which they responded to alcohol and often clouded their ability to determine where the limits lay, especially in terms of judging whether their friends had reached their limits.

3.3.2.5 Abstaining from drinking

Students who normally drank alcohol talked of the problems they encountered when they tried to abstain from drinking in the company of others who were drinking. They reported

that they often preferred not to go out rather than to moderate their drinking. They found that being with friends who were drunk whilst they were sober was difficult for them and they preferred not to put themselves in that situation. They did however, draw a distinction between going out drinking, when they were likely to become intoxicated, and going out for a drink. Whilst they reported that they could go out with others and have a drink in moderation, many *'would never go out drinking'* when those around them were drinking more heavily and getting drunk. Although many would not go out at all, others reported strategies to deal with the situation which involving changing their drinking pattern, so, for example, either starting to drink alcohol later in the evening or stopping drinking earlier and changing to non-alcoholic drinks or water, *'[I] make sure I'm finished drinking earlier and then make sure I just get on the water so I am fine'*.

Various reasons for abstaining from alcohol were offered. Usually the reason for not drinking related to what they had to do the following day and participants referred to study activities such as a 9.00am lecture or an examination. Alternatively, others didn't drink or drank very moderately because they had work responsibilities in addition to studying which limited what they would drink during the week. Some students tended to be the person who normally drove *'their mates'* home, so again limited their intake or didn't drink alcohol at all. Another reason involved religion, so that some students, who had perhaps drunk alcohol excessively in the past, had changed to a more *'controlled'* pattern as a consequence of their religious beliefs. Those with strong or long term religious beliefs were less likely to go out drinking at all.

In addition, students also referred to the way in which abstaining from drinking would be viewed by others. They considered that non-drinkers would be remarked upon and whilst they might not be *'treated differently they would notice them and wonder what they were doing there'*. It would seem that for some students, the concept of going out involves drinking alcohol, and not drinking is seen as difficult to sustain amongst others who are drinking. This is a view that is reinforced by those who do drink; they perceive that the non-drinker threatens their enjoyment of the evening and can have an adverse effect on the feelings within the group whilst those who aren't drinking don't *'feel right'* in not drinking. Where students reported going out and not drinking they noted that they often either succumbed to the pressure to drink or cut the evening short, frequently because they found the situation boring *'I go out but I swiftly come back [if I'm not drinking] because it's just boring'*. They also tended to be aware of the amount consumed by others and its impact on their behaviour when they were not drinking themselves and found it discomforting. As one non-drinker said about drinking peers *'people tell you the same stuff over and over again, and, you're like you just told me [that]'* finding it difficult to understand how they could not be aware of such behaviour. It is probable that the drinkers prefer others to drink with them perhaps to protect themselves from adverse comments or judgements on their behaviour when intoxicated, by non-drinkers.

3.3.2.6 Style of drinking

Students reported drinking alcohol in a number of ways but they often made the distinction between having a drink or drinking and having a night out. Nights out were associated with the town centre and specific types of venue. They often involved starting to drink at home, then going out, probably to more than one venue, usually beginning at a pub and then going on to a club. However, the nights out did not always begin at home. The pattern of starting the evening by drinking at home was largely associated with those students who lived independently, either in halls or in student accommodation in the community. Those who

lived at home with their parents were more circumscribed and tended not to start drinking until they were out at a licensed venue. Even those who lived independently during term time acknowledged that the pattern of drinking whilst at university was different to that out of term time when they were in the family home *'when I'm at home, I don't really start at home because my parents are there'*.

In discussing these different types of drinking, often the notion of planning emerged from the discussions. Students reported that they made decisions in advance about the kind of drinking they would do on that occasion. Thus sometimes they planned to go out and just have one or two drinks whilst at other times they would go out with the intention of drinking excessively or *'getting trolled'*. The latter situation often, but not always, involved celebrations such as birthday parties. The two forms might merge, so drinking would often start in one way, sometimes at home, sometimes with a particular group of friends, and then progress to a night out *'I tend to start with, like, drinking with my mates from football or tennis and then develop and go into town from there so it'd be a night out'*.

3.3.2.7 Drinking nights

Many respondents would report restricting their drinking to either student nights, which were usually evenings early in the week, or to weekends. Use of the term drinking here often meant excessive or binge drinking. Factors relating to weekend drinking often differed from those for weekday drinking. Weekend student drinkers were more similar to those young people in paid employment, who drink on Friday and/or Saturday nights because they have the following day to recover. They viewed their academic activity in a similar way to working, with structured time for study set aside during the week. Students here referred to their drinking not affecting university work because they only drank at the weekend when they didn't have any need to attend teaching sessions or submit assignments. However, other students had a different perspective and did go out in the week and attend the night clubs on student nights. They reported a variety of reasons for doing so which included such ones as the clubs were catering for students so they thought that they were more likely to meet people similar to themselves, that it was a safer environment for them in which to drink excessively, that there was often return transport laid on, and that there were the financial benefits of cheaper drinks. Those who did go to student nights at the clubs often drank heavily *'the Tuesday nights being the cheapest night to go out and get absolutely leathered'*.

3.3.2.8 Sports teams

When and where students drank tended to be influenced by their friends, and the pattern of drinking also often related to the way in which their friends drank. Going out with heavy drinkers tended to increase the amount of alcohol they consumed. A particular pattern of drinking was associated with being in a sports team. Those who went out with [sports] teams referred to the high quantities that they tended to drink *'we don't really go out as a team that often but when we have done it has been pretty excessive'*. The students also referred to the initiations associated with induction into the sports teams which often involved a range of activities. Some initiations centred on drinking games, perhaps involving drinking a set number of shots in a short time period, though others were much broader in scope. However, a central aspect involved very heavy drinking *'it's not really socialising, it's just getting drunk'*. The predominant view was that students who didn't drink or weren't prepared to drink excessively would not be tolerated in the team - they would be pressured into drinking,

although there was an occasional view that as long as the individual didn't *'preach .. about drinking to everyone else'* they would be tolerated.

3.3.2.9 Cost of alcohol

Cost of alcohol was a particularly salient factor in the students' drinking behaviour. It tended to influence the type of drink, the quantity drunk and the venue in which drinking took place. Some students considered the price of drinks when deciding on the venue for the evening, choosing the one that would give them the most alcohol for their money. Sometimes this meant that they would start off in one establishment and load up on the alcohol before moving on to one that offered other advantages but where the price of alcohol was higher. They would *'find somewhere cheap to start off with where you don't have to pay to get in kind of thing'*.

Others commented on the extent to which the type of alcohol they drank was conditioned by the price. Many mentioned setting a budget for drinking in a night and that they would calculate the type of drink and its effects against the amount of money they had to get the best result - *'and you think "it costs the same price to have a cider as it does a VK and yet I'll get like drunker quicker drinking the cider" so sometimes for me if I want to make it a cheaper night I'll drink cider which is worse for you, but I know that I don't have to spend as much to get drunk'*. Other students appeared to have a set budget for the night and where the price was lower than anticipated, rather than reducing the amount they spent, they would stick to the original budget and just drink more *'like say, you can get like a quid pints at the Pennywhistle or whatever, so we'll spend, get more drinks in, but not necessarily spend more'* and *' - yeah, so we spend the same amount of money'*.

Price was also considered when drinking at home and, for some, the balance of cost and effect dictated the type of alcohol that they drank. Some students reported deliberately drinking alcohol that they didn't particularly like in order to get the effect as quickly and as cheaply as possible *'if I want to get drunk like before I go out I'll get like a bottle of wine and I'll get the cheapest possible bottle of wine even though it's going to be horrible and it's going to be hangover the next day and I just put blackcurrant in it to cover over the taste'*. Here having a drink is perceived in purely functional terms in relation to its ability to create a specific state and the choice of alcohol is based solely on cost.

To summarise this theme, the students reported very varied patterns of drinking. These appeared to be influenced by a wide range of factors, ranging from the students own preferences, to those of their friends and the context in which they consumed alcohol.

3.3.3 Drinking at home

This section focuses on drinking at home, which emerged as a special form of venue for drinking alcohol. It served a number of purposes and was spoken about in a variety of ways, often linked to the type of student and/or the type of home the student inhabited. Thus sometimes the drinking reflected their own preferences, at other times it reflected those of others in the home.

3.3.3.1 Familial patterns

Where students were living in the familial home, drinking tended to reflect the pattern of drinking within the family. Some would drink with their parents, usually over a meal. Others referred to their parents drinking pattern, which had influenced their own drinking behaviour, so they might drink of an evening or drink to relax when they came in from the day's activities. Some spoke of the socialisation effects of alcohol use at home and the influence that it had on their own drinking behaviour *'I've always, with my family at, we've always drunk at home ... I go down to the pub with my dad very often in the evening for a couple of pints and a chat, we always had family parties where we've drunk, so I've always had, I've always been drinking'*. For others who didn't drink alcohol, the family's pattern was also important. Their non-drinking often had its origin in the family approach to alcohol and the broader religious and ethnic culture in which the family was embedded. Occasionally it was influenced by their experiences of dealing with the adverse consequences of the drinking of other family members.

3.3.3.2 Relationships

Some more mature students had encountered problems in their relationship as a consequence of their partner's alcohol use. The problems tended to occur when one partner drank alcohol more often than the other and particularly if the drinker began to spend more time and money drinking than the student considered appropriate. Whilst students reported that some drinking could be excused on the basis of their circumstances, for example, *'I also know that he has a very stressful job and if on a Friday afternoon all he wants to do is chill out with a few pints and his mates, that's fair enough'*, not all could and when the drinking became more extended and/or excessive then their tolerance was likely to be reduced. Sometimes students reported that this led to situations where they could sit down and talk it through and things changed, but at other times the drinking was more embedded and the relationship faltered.

3.3.3.3 Pre-loading

Home drinking, particularly for the traditional student away from home and living in student accommodation, often occurred in order to 'pre-load' with cheaper alcohol before a night out to *'get tanked up and then go out'*. Many would drink more at home than they would when they actually went out as illustrated by this male student's account *'I normally get very drunk like, just doing a shot a minute and I'll get really drunk then I'll go out and I don't really need any money, just taxis, like one or two drinks when I'm there cos I'm already drunk so I'm fine'*. Again, as mentioned earlier in the section on cost, the motivation here was the unaffordable price of alcohol in the licensed venues as is exemplified by the following extract *'I always drink before I go out because I can't afford drinks when I'm out'* or because it *'saves money'*. Many reported drinking alcohol as part of getting ready for a night out; it was part of the routine so they would have a couple of drinks before getting dressed up or whilst they were waiting for the taxi to arrive to take them to the venue. But here too they often tended to discriminate according to where they were going for their night out. Thus some would not drink at home when they were going out to a pub, but they would start drinking at home if they were going into town for a night out.

3.3.3.4 Socialising at home

For other students, drinking at home was the main focus - they were happy to share a bottle of wine with a friend and have a night in socialising. Some referred specifically to *'having a girlie night in'* when they would order in a pizza and have it with a bottle of wine, perhaps whilst watching the TV or just chatting. Men too had a similar pattern of drinking in with their friends, but this tended to revolve around sporting activities - *'you could be watching a football game so you watch it at home and have a drink at home with your mates'*. Whilst much of the drinking at home involved companionship, there were some participants who drank alcohol on their own *'I'll have a can or so of Strongbow in a night'* just to relax or *'chill out'*. Others would seldom drink out but would drink in a home situation if it was a birthday or a house party or other form of celebration.

For some students, socialising at home involved drinking games. This tended to occur in halls and respondents justified it saying that it was a good way to socialise and get to know people. Games involved 'truth and dare' or 'spin the bottle' and alcohol was viewed as a necessary accompaniment, presumably to reduce inhibitions and facilitate interaction. Home drinking also involved house parties. These usually took place at the weekend, and sometimes occurred locally and at other times some distance away, for example in London. Such parties were often viewed positively because people were drinking and *'mixing with friends or with friends of friends'*.

To summarise, a high proportion of the students across the focus groups spoke of alcohol consumption within the home, the term home relating to both the familial home and to their accommodation whilst at university where the two differed. Drinking was bound up with those who also lived at home, the nature of relationships and with the students' broader social life.

3.3.4 Negative aspects of drinking

A range of negative outcomes were mentioned in relation to alcohol and this section focuses on the main ones. Some related to tangible factors such as money, some to the physiological and physical consequences, and others to more psychological or emotional ones such as changes in mood or personality. Most of the negative aspects mentioned tended to refer to excessive use of alcohol rather than drinking generally.

3.3.4.1 Finance

Here students referred to spending too much money, both directly on alcohol but also on other items such as fast food or on gambling as a consequence of having drunk too much. Many echoed the following sentiment of one participant who remarked *'in the morning like you wonder where your money has gone'*. Whilst many dealt with this problem by having a strict budget and only taking a specific amount of money with them when they went out, usually divided into drinking money and taxi money for the journey home, this was not always effective and did not address the longer term problem of the accumulated cost of nights out. Students, especially those who only drank alcohol moderately or not at all, found it difficult to understand how some could spend so much of their budget on alcohol, especially given the costs associated with studying and gaining their qualification. Such expenditure meant that

reductions had to be made elsewhere which could adversely affect their ability to buy books or food.

3.3.4.2 Health

Most of the groups referred to the adverse health consequences of drinking '*we know it's bad for you*'. The most proximal and salient issue tended to be the hangover which affected the following day's activities. The view of students across the focus groups on the adverse outcome of drinking is encapsulated by the following quotation - '*and the next day when you wake up and you feel like stumbling, slurring, vomiting*'. There were discussions about the type of hangover associated with particular types of alcohol, a factor which sometimes influenced their drinking pattern, so they might avoid certain drinks if they had commitments the following day, but would drink them if they had the space to manage the resulting hangover the next morning.

Others took a broader view, referring to the overall impact that use of alcohol could have on their general physical and mental health, both in the short term and in the longer term. Some clearly acknowledged the potential impact on their health whilst others had a more nuanced perception. They referred to alcohol related health issues being raised by others, so that '*you'll always have people telling you that you're drinking too much or whatever ..*' but did recognise that the comments had some validity. On the whole, health as a negative consequence was commented on in relation to the consumption of excessive amounts of alcohol rather than sustained, but more frequent, use of alcohol. For some students, the health consequences of having had too much alcohol had impacted on their overall consumption so that early bad experiences, such as having to have their stomach pumped after heavy drinking as a teenager, were referred to as reasons for not drinking or only drinking low levels of alcohol.

3.3.4.3 Loss of control

This sub-theme includes both physical loss of control through passing out and loss of control of other aspects of behaviour, such as disclosing more than they usually would under normal circumstances or responding adversely to another's behaviour such as in the following example '*I didn't have self control and I was pissed and slapped them*'. Other participants expressed some concern about their loss of ability to control what they were doing which could lead to physical harm, such as falling down stairs, as well as to risks from other people, a factor that was especially pertinent for the women as the following extract shows '*you can't control what you're doing so anybody can come up to you and do whatever*'. Whilst loss of control was viewed negatively, there was some attempt to excuse it by referring to the uncertainty of the effects of alcohol and the difficulty of determining when they should stop drinking to avoid the effect. They pointed to factors such as the context, the atmosphere, the amount they'd had to eat during the day as all playing a part in determining whether they would lose control, and the difficulties of balancing these factors to prevent loss of control.

3.3.4.4 Memory loss

Most of the students reported that they found their inability to remember events when they had been drinking a negative factor. For some it was the mere fact that they just couldn't remember that they '*found scary*' and that their sense of self or knowledge of self went as in '*you just disappear*'. For others it was the concern that they didn't know what they had done

and had to be told by friends the following day; hearing of their actions that were often out of character was disconcerting and embarrassing. Some related experiences where they had no recall of the end of the evening or of having been brought home, undressed and put to bed by friends. For other students it was the thought of what could have happened to them in the situation they couldn't recall, that particularly alarmed them. However, some took a more sanguine approach and talked of their ability to *'patch together the night'* because there were *'always five or six of us'* who had been out drinking together but even here, participants expressed negative views about the experience, both in terms of the loss of memory itself and of subsequently getting to know what had happened as this man's extract shows *'it does come back to you in time. Gradually it does, but I hate it, I hate it when that happens'*. Some students reported that such experiences had affected the way in which they drank alcohol in the future *'I woke up with someone that I didn't even remember talking to let alone getting home with .. and I've never got that drunk again'*.

3.3.4.5 Vulnerability

Many respondents referred to the increased vulnerability associated with alcohol use although this was not always recognised at the time. As one participant put it *'you feel less vulnerable but you probably are more vulnerable'* and another member of her group affirmed this view by saying *'definitely more vulnerable'*. They referred to friends having been raped as a consequence of rohypnol being put in their drink and the impact that that had had on their own drinking behaviour. Always drinking out of a bottle, increased vigilance of their own drinks such as always looking at the drink and never leaving it to one side were strategies implemented to try to reduce their own vulnerability. Students talked about girls in particular becoming more vulnerable after drinking. Some referred to girls losing their inhibitions when drinking and so doing things, such as having unprotected sex or going home with people that they wouldn't normally go home with, which they would not do if they hadn't been drinking alcohol.

3.3.4.6 Putting themselves in danger

Here students referred to behaviours that they'd committed whilst under the influence of alcohol that could have had serious consequences, such as *'I've like walked around town on my own completely legless, can't even see straight walking home and I would never do that normally if I hadn't had a drink'*. Some referred to the actual use of substances that *'could mess up their body'*. Others remarked on injuries actually experienced as a consequence of alcohol use. They reported friends getting run over, getting mugged, breaking an arm, falling over, getting bruises, etc. Sometimes these quite serious injuries were not noted at the time; only when they woke up the following day and experienced pain did they take action to find out what was wrong.

3.3.4.8 Mood changes

Many students noted the differences in mood as a consequence of drinking alcohol. Some referred to changes in others, some to themselves, but the common element related to the tendency to become emotional or over-emotional. Female students referred to their own tendency to *'get down'* and end up crying after having alcohol *'a lot of people end up crying, well I do .. I end up crying'* or for peers to become depressed or to get aggressive or argumentative. Sometimes this was linked to particular types of alcohol, so that they mentioned that certain drinks were likely to have specific effects on them. Emotional

changes were viewed largely as a female phenomenon - but here emotional is distinguished from changes that result in aggressive or violent behaviour. Whilst some referred to changes in mood leading to violence the majority distinguished emotion from aggression. The reference to couples who at the beginning of the evening were *'really happy together'* who ended up quarrelling and even fighting at the end of the night can be distinguished from the majority of comments on aggression and violence because of the emphasis on the change of mood affecting the relationship, rather than the type of behaviour induced by alcohol.

3.3.4.9 Self presentation

Students also reported that alcohol could influence the way in which they were viewed by others. Female students in particular referred to the contrast of young women at the beginning of the evening compared with how they looked at the end. One, who worked in a pub, commented on how glamorous the women looked when they came in but later *'when they're going out of the club it's a different story 'cause they're missing their shoes and everything and they look absolutely horrible'*. Viewing such contrasts made them wonder if they also deteriorated in this way and looked that bad at the end of the evening.

3.3.4.10 Embarrassment

Whilst embarrassment was sometimes mentioned in relation to memory loss, there was a broad base of comments which we felt merited a separate sub-theme. Respondents would mention recalling the embarrassing things that they had done whilst drinking the previous night *'waking up the next day and going "oh my god, I did that, didn't I, oh god"'*. Such occurrences often impacted upon their social lives in that they did not want to meet the people that they had been with when they committed those embarrassing acts. They referred to flashbacks interfering in the following day's activities and encountering photos on Facebook *'the new curse'* that meant that embarrassing behaviours, which at one time might have been restricted to the small group present on the occasion, were now available to a much wider audience. Whilst many women mentioned being embarrassed by their behaviour under the influence of alcohol, men too often experienced it, especially in relation to actions with the opposite sex. Examples here included trying to talk to girls when they'd had too much to drink and which tended to go wrong, or having to cut short an evening out because they had drunk enough to make them sick

3.3.4.11 Aggression and violence

The number of incidences of aggression and violence mentioned in relation to alcohol use provided the basis for a separate sub-theme in this category of negative outcomes. For some, the violence itself was the problem, for others the aggressive actions had longer term consequences. For example, one student who got in to a fight when he was too drunk to notice that the police were present ended up having to retake his final year as a consequence of the criminal charges. Some mentioned aggression from others, in particular in relation to partners, after they had been drinking. Some students perceived a gender difference in terms of aggression, usually associating it with men, whilst others considered that women too could be aggressive. Students drew attention to the point that incidents such as treading on someone's shoe, which would normally be dealt with by an apology that would be accepted, became magnified when people were drunk so that such precipitants could cause fights that might result in serious injury. They also noted that alcohol could bring out *'aggressive tendencies'* in some people.

Often aggression involved groups, with one set of friends being '*jumped*' by others. The level of violence reported could involve quite serious injury, with people being knocked out or having their jaws broken. When group violence was referred to it was often associated with a view that it was more likely to occur when there was a mixture of locals and students in the clubs or pubs. As one respondent put it '*it's when the locals get involved that they tend to want to scrap*'. Attempts to reduce exposure to such aggression meant that participants would sometimes reduce the amount they drank and would tend to go out on student nights rather than weekend nights when '*you get normal working guys out, they're not happy with their lives and their jobs so they have a good drink and they want to take it out on students or on other members of society*'. The view was that students were less likely to become violent, were more likely to get into conversation on nights out and be friendly. Whilst it didn't occur often, there was a perception that some people went out for an evenings drinking looking for a fight, but again the participants tended to associate this behaviour with non-students.

3.3.4.12 Anti-social behaviour

Some groups referred to a range of activities that tended to be anti-social, either towards the community in general or on a more personal level affecting them personally. Noise and disturbance to others late at night was often cited as an issue, with some flatmates or housemates coming in from a night out drinking and waking up other members of the household '*they always come back at like four, half four, like they woke me up at half past four this morning, they were just shouting until about quarter past five, ... but it really irritates me when they do that*'. Others reported adverse effects on the neighbourhood through anti-social behaviour relating to actions that affected the local environment such as taking street signs and damaging street furniture, or behaviours and high spirits that impacted on property such as jumping on cars. One reported that '*in my house they've got a thing about road signs and bollards and police cones and my boyfriend [says] "there's another two bollards in the hallway" and you drive up [the road] and they're gone, so they're in my house*'. Other anti-social behaviour that affected the neighbours included the noise of students going out to the clubs late in the evening and slamming doors, or shouting in the street on their return '*that annoys the neighbours*'.

Summarising, we can see that the discussions within the focus groups revealed a wide range of negative correlates of drinking alcohol, some relating to the experience of the drinker, others relating to the consequences of other people's drinking. Some of these negative factors were ones that might be described as uncomfortable or unpleasant; others however, were significant and reflected the potential for, or actual, serious harm.

3.3.5 Safety and security

This theme focuses upon the concerns that the respondents expressed about their personal safety when drinking and reflects the strategies that participants used to stay safe or feel secure when drinking alcohol, usually when they went to external venues. It concentrates on the different elements that provide drinkers with a feeling of security

3.3.5.1 Safety in groups

Safety in groups was a key sub-theme, especially with the female students. The women tended to emphasise the need to keep together when drinking away from home, to make sure that no-one was left on their own as *'you need to stick together if you're all girls'*. They tended to go out together and tried to make sure that they went home together, even to the extent of challenging those friends who attempted to leave with someone else. Groups of friends reported that they would take steps to contact the others if they did go home alone - they would use their mobiles to update their friends. There was a clear expectation that friends would be looking out for each other and would miss them if they went off. Most were quite positive about the cohesiveness of the group and were confident that their friends would look after them if they did have too much to drink. However, the reality was sometimes different and the following extract conveys the distress felt when the system failed *'..my friend left me and I had to get home on my own and I was gutted, I wasn't even drunk which made it worse because then I was scared'*.

Going out together to the student nights in the clubs was also viewed as a way of minimising harm, but they also took a more relaxed view at these times, so whilst many would ensure that they normally went to the toilets together when in nightclubs, they were less likely to do so on a student night. On student nights they felt safer because they thought that there would always be someone that they would know, so even if they got separated from their immediate friends they would be alright - the view was expressed well by the respondent who reported *'so you definitely feel safer when you know it's students'*.

The women also reported travelling in cabs or relying on a non-drinking friend to take them out and return them home in their car. Sometimes the friends reported that they found the excuse of driving their group to the venue a useful way of justifying abstaining from alcohol when they were there.

3.3.5.2 The importance of home

Home was seen as a safe haven. Students felt that under certain circumstances they needed to get home where they would be alright. Thus if feeling ill, or recognising that they'd had too much to drink, they would attempt to get home as for this participant *'I'd got to that stage where I thought "I need to get home, I need to be home" and I .. just walked out of the pub and went home'*. Sometimes this involved them in walking home, at other times it involved them in taking lifts or taxis, and whilst the intention was to increase their safety the independent actions they took might often have increased the dangers.

3.3.5.3 Controlling consumption

Here the students showed their awareness of the effects of alcohol on their physical and cognitive abilities and the importance of not going beyond a certain point or limit that threatened their competence. They often referred negatively to others who got drunk or paralytic, and asserted that they would never do that. Such respondents talked of only drinking alcohol to the stage at which they could still make appropriate decisions and then stopping, or stopping once they had got to the stage when they knew that if they had any more there would be repercussions the following day. *'I don't ever get so drunk that I can't be in control of my own actions'* or *'I've never been paralytic'* were sentiments that were frequently expressed. They used strategies such as switching to drinking water when they felt that

they'd had enough as the following extract shows *'I knew in my head that where I'd be like "no, I'll get the water now"'*. However, some students did recognise that whilst they might think that they were in control they had drunk too much and actually were not, and that then left them very vulnerable. The emphasis on controlling their drinking and keeping within their known limits was the strategy for ensuring that that didn't happen, but again some acknowledged that there were times when they knew that they should stop drinking but didn't.

3.3.5.2 The importance of experience

One aspect that many students across the groups talked about was the role of experience in building up their understanding of their limits and also the type of dangers that they could encounter when drinking alcohol. Here, recognising that drinking was becoming a problem evidenced by, for example, being sick, or the world spinning around or looking back on their behaviour and thinking *'oh my god, did I really do that'*, could lead them into reflecting on what they were doing to themselves and think *'I should cut down'*. The importance of pre-empting dangers by understanding the situation was expressed clearly by one male respondent who said *'you've got to be clued up to your surroundings and try to, you know, stay ahead of things, always think ahead, what could happen and knowing when to walk away'*. Others referred to sometimes learning by their mistakes *'knowing who to look at and who not to'* and the need to determine their own levels of tolerance. A particular issue in staying safe was the need to recognise those situations which could become violent, where a small incident like bumping into someone by accident could turn nasty when the other person responded aggressively. They expressed the need to be aware of the potential for aggression in these types of situations and to exercise caution and try to avoid them. However, experience had also shown them that sometimes the issue of safety meant getting engaged in aggression in order to protect a friend from violence that had developed in this way. Here protecting the safety of one person involved others in a potentially harmful situation; judging the most appropriate response in such circumstances was something which they had had to learn.

3.3.5.1 Vulnerability of first year students

Many of the students also expressed the view that those new to university life were more vulnerable and they needed to develop appropriate experience to maintain their safety. Whilst recognising that many had already had some experience of drinking before going to university, they commented that drinking as a youngster was often very different to drinking alcohol at university and that those who perhaps had done more drinking when they were younger *'in the parks and so on'*, were probably not the ones to go to university anyway. Thus they considered that there was a need for first year students to learn the cues and to find ways of keeping themselves safe. First years were viewed as particularly susceptible because of the new freedoms of living away from home for the first time, their recent ability to purchase alcoholic drinks legally, having large sums of money at their disposal and not knowing their limits. The students drew on their own experiences in the first year, referring to incidences in which they had got lost, or been injured, or seen others injured, as a consequence of being unable to control themselves through alcohol. They made the comparison with later years where *'nothing as bad'* had happened *'because you learn to control yourself when you drink as well'*. Learning to drink and handle alcohol was viewed as an integral part of the first year experience. The role of clubs and alcohol promotions which encouraged drinking were also seen as threats to the safety of students, and student nights with their free entry and *'really cheap drinks'* were criticised by some for encouraging

more drinking by students. First years in particular were seen as less able to withstand such pressures to drink.

3.3.5.1 Determining 'safe' drinking levels

One issue that many of the students wrestled with was that of units of alcohol and its implications for the amount they drank. Some recognised a problem when they realised what the guidelines meant in terms of their own consumption *'it is scary though when we had that talk about how many units you do have and it is like you're meant to have something like three is it? ... oh yes - it's fourteen a week and we were consuming that in like one night and more, and it was something ridiculous like - when someone worked it out for us I was like whoa!'* Many were aware of the recommended guidelines concerning 'safe' drinking levels but had problems in determining how many units they were consuming. For some, this meant that they chose never to drink alcohol and drive because they couldn't be sure whether they would be within the appropriate margins. Others expressed the view that just counting units did not take account of peoples' different responses, arguing, for example, that how much they had eaten influenced the speed with which alcohol affected them and so they needed to consider the context as well as the amount of alcohol they had drunk *'like if you don't eat a full dinner or you haven't eaten a lot that day, like a quick glass of wine can go straight to your head'*. Often the complexity of calculating the units meant that they just gave up *'so by the time you try and work it out you're just thinking - what's the point?'* and relied on other indicators, such as their physical state, to determine whether they were drinking safely. Other participants simply misinterpreted the guidelines *'I think, yeah, it's like you should average out fourteen but I always take that as I can have fourteen in one night and still be healthy'* in a way that supported their ability or wish to drink excessively on one occasion.

In conclusion we can see that students showed an appreciation of the risks inherent in alcohol, especially in excessive alcohol consumption. Awareness did not necessarily lead to changes in drinking but many attempted to take steps to reduce the harm that could be associated with alcohol use and spoke in terms of ways they could monitor their behaviour, learn from experience and work with others to achieve a safer experience.

3.3.6 Effects of drinking on academic activity

Reflecting the importance of learning at the centre of university life, this theme focuses upon issues related to the impact of alcohol on study commitments and outcomes and the relationship between the two. Students referred to the association between alcohol and study in a number of ways suggesting that a number of factors influenced the relationship.

3.3.6.1 Getting a balance

Students spoke of the need to get the correct balance between going out and studying. The emphasis on study compared with social activities differed across the participants. For some, studying was the priority *'the academics has always got to be first, but then the drinking kind of appears on the side - it should never take precedence'* whilst others challenged this view *'I think it's on an even par because you are obviously here to get an education but you're here for the uni life as well'*. On the whole, the students recognised that there was a need to maintain a balance between these aspects. However, whilst some were quite confident about their ability to manage that balance *'if we know we've got something to do then we won't*

drink so much others acknowledged that sometimes the balance broke down so that drinking could interfere with their studying *'but there's periods where you don't have the balance and you're just putting drink over[work]'*. Some students referred to having got over the need to go out and had reduced the time spent on alcohol related social activities because they wanted to do well. Others spoke of the need for moderation and juxtaposing their social activities with their work demands so that they wouldn't go out if they had, for example, a nine o'clock lecture the following day. Many had arrived at this juncture after experiencing problems with trying to do just that. Whilst some would not go out at all, others would go, but would moderate their drinking so they would try to stop drinking alcohol earlier and drink water instead to ensure that they were fine for the morning lecture the following day. Others reported that they had learned to manage themselves so that they did not let the drinking affect their studies the following day *'but you learn to like teach yourself just, if you go out, just get up, because, like, it's like you've got to get up [to do your work]'*.

3.3.6.2 Campus living

The students mentioned the impact of place of residence on the relationship between drinking and studying and in particular that of living on campus. They referred to the easier time they had when living in halls when it was possible to go out the previous night and *'roll out of bed and you're here [for classes]'* but found it more difficult when they had to get up a couple of hours before the lecture in order to make it to the venue on time. However, others felt that living on campus meant that they were more likely to be pressured into drinking and thus more likely to miss lectures the following morning.

3.3.6.3 Drinking and achievement

Some participants spoke of the tension between going out until the early hours of the morning and being present at lectures and/or working on clinical shifts concluding that *'it's just not possible'*. Some students had altered their drinking pattern in order to accommodate their studying, for example, not drinking when they had a dissertation to complete, acknowledging that if they had a drink they wouldn't get any work done. Others postponed going out for several nights in order to complete their assignments. Examinations seemed to have greater salience than having a coursework deadline in determining whether or not they went out drinking and students reported that others were more likely to recognise the need to study for an examination rather than socialise *'everyone else understands that if you've got an exam the next day no-one encourages you to come out'*.

Many students discussed the impact that alcohol had on their ability to do their academic work and on their performance. They stated that going out drinking was a distraction and if they did give in and go out when friends called when they had work to complete, it had an adverse effect on their willingness to do their assignment the following day, making it difficult for them to concentrate. They felt that it definitely affected the standard they would achieve, largely because they couldn't *'think as clearly as what you could have done if you hadn't had a drink'*. Others recognised the overall impact of drinking on their studies, pointing to missing the early morning sessions and not going in to classes until lunchtime and then noting the cumulative effect on their ability to do their work effectively *'as the weeks go on, one or two lessons a day all adds up'*. Still others spoke of how their performance improved when they stopped drinking and that they had found things easier to cope with, that *'learning now comes really easier to me'*. Some students referred to others who had failed modules because their socialising had affected their attendance *'and they start to, like, have to*

redo modules the next year and it does affect you in a long way if you miss lectures'. Those in later years of their course reflected back and recognised the impact that the drinking had had on their first year achievements *'if we all drunk less and went out less I reckon we'd all, definitely in the first year, have got better grades'* whilst others noted the effects on subsequent years *'it puts the pressure on for the next year as well if you just scrape through the first year, it makes your next year a lot harder as well'*.

However, an alternative perspective emerged, with some students pointing to a different strategy in which alcohol was drunk deliberately before settling down to complete their work. They reported that *'some students intentionally go out on a night out, leave their assignment to the last minute and start writing when they get back in'*. Whilst the majority said that they did not subscribe to this strategy themselves and considered it to be a dangerous one, it appeared to be a valid one with some students intentionally using drink to facilitate their studies, considering that it enhanced their performance. Others reported that having a good night out resulted in a more positive mood *'you're feeling good the next day'*, so that, even with a hangover, they were more likely to try harder in their studies because they felt better.

3.3.6.4 Impact on teaching sessions

Participants noted the impact that drinking had on their own attendance and that of others. Sometimes they missed teaching sessions; at other times they attended but noted that if they had a hangover *'there probably wasn't much point in being there anyway'*. They talked of not concentrating very well and the possibility that they might go to sleep and start to snore. They were aware of the adverse impact that this might have on their peers, but also commented that other students also looked *'rough'* and were likely to be suffering from the effects of alcohol. Mornings after student nights at the clubs were particularly likely to be affected and *'you just notice that the whole class is quiet'* or that attendance is poor *'I know loads of people who have just missed all their Tuesday lectures because they've gone out on the Monday night'*. They noted that people could still be under the influence of alcohol the following morning and that they could smell the alcohol on people. Attitudes of the students were often quite varied, so that whilst some laughed whilst recounting such effects on the lecture sessions others were more concerned about the longer term impact on performance. Often they mentioned that lecturers were aware of the reason for the poor turnout and that some had shifted the sessions later in the day *'changing the timings to.. try and get students in'*. However, some participants pointed to students using the drinking as a cover for not engaging, that they would use it as an excuse for not going in to lectures when they had no intention of going in anyway. They referred to this as covering up their *'laziness'*. Other students reported teaching themselves to get up for sessions after going out drinking the previous night, comparing their current behaviour with that in the first year when they didn't make early morning lectures even though they lived in halls of residence on campus. Some pointed to the need to feel that they had achieved something during the day and that if they didn't go in they didn't get this; others that they would miss activities and readings that were given out in classes and so would fall behind and be unable to prepare for the next lecture. Even if they were not fully functioning because they had a hangover, these students considered that they would have some sense of the curriculum and future requirements.

3.3.6.5 The HE/FE environment

The students pointed to a difference between the approach of the university lecturers and those at the partner colleges in that the latter were more stringent in checking student

attendance so that there was less opportunity to skip sessions. Talking of the staff taking registers in class one college student reflected the understanding of many of his peers when he said *'it's fairly stringent here ... when we go to the lectures at UN, I meant they sometimes pass a bit of paper round ... but that's very rare, whereas here, they'll have sheets, people checking it'*. The college based students also contextualised this with the reduced nightlife available in the partner colleges and the impact of the FE students on the undergraduates' ability to experience university life in the way that those attending the university did. Opportunities for drinking alcohol were reduced, and more rigorous checks were made on their welfare and their rooms, so that alcohol had far less of an impact on their study and performance.

3.3.6.6 Changing priorities throughout their university career

Many of the students pointed to their change in attitude and behaviour throughout their time at university. Some considered that they were much more focussed on their studies than when they first arrived at university, others that they were more relaxed after their first term. Some had not worked very well during their sixth form but had become more engaged at university and found that they could do the work. However, one particularly salient sub-theme to emerge here was the contrast between the first year and subsequent years. They pointed to students who failed their first year or had to repeat modules because they'd been *'enjoying themselves that little bit too much'*. A factor in the heavier social emphasis in the first year was that they considered that the results of the first year didn't count towards their degree classification. Some were aggrieved that they hadn't realised this, and implied that they might have *'partied more'* if they had been aware of it. Others regretted not going to more lectures during their first year, partly to get more of an understanding of the work because they had come to recognise that the first year forms the basis for work in subsequent years, and partly because they would have developed skills such as time management or steady study habits that would have been beneficial in general. In addition, some mentioned regrets that they didn't attend because now they didn't know many people on their course; in their absence their peers had developed friendships that excluded them. Attending formal sessions in their first year would have enabled them to meet and get to know more of their fellow students.

3.3.6.7 Placements

Here the sub-theme concerns students who were on courses that involved undertaking placement such as on the health, education and business courses. They reported tensions between drinking and placements and whilst some changed their drinking habits some reported that a minority of students gave up their placement because of drink related matters. For example, one respondent dropped out of his placement because he wanted to go drinking with his friends and the constraints of working during the week meant that he was unable to do so on student nights. He referred to housemates who came back at 3.00am after drinking and woke him up and he found it difficult to do his work with limited sleep. Despite encountering financial and course related problems as a consequence, he still saw this as a reasonable decision, wanting to experience all of university life and not just work all day. Other students taking the opposite approach pointed to the long days associated with placements and the energy required to undertake them and so stopped drinking whilst on placement - they either didn't go out or they went out but didn't drink. Those working with children were careful to point to the risks of *'being hungover'* on placement and the potential for being unable to continue in their field of work if they had drink-related problems.

However, not all were so careful, and some found that it was acceptable to go for a drink in the evening with other workers in their placements.

3.3.6.8 Student experience

Some students raised the issue that drinking affected the interaction between course members. They reported that drinking tended to predominate with some students, so that, for example, they never found out what they were doing on their course or had any meaningful conversation because all they talked about was *'oh we got wasted the other night'*. Some were quite scathing about such students, and were perplexed about why they were wasting the considerable amount of money incurred through attending university and taking a degree on just going out drinking alcohol. Many, often mature and home based students, also pointed to the broader impact of alcohol expenditure on other aspects of the students' lives such as their diet and contrasted it with their own ability to go home and *'have a proper dinner'*.

Overall we can see that the students held quite extensive and often quite different views on the impact of alcohol on academic activity. It is likely that much of this variation relates to differences in the students own drinking behaviour. They were able to reflect on the way in which their approach to alcohol had changed through their academic career, with both personal and contextual factors influencing their perceptions. One of the main features of this theme is the tension between the social and the academic aspects of university life and the need to regulate the balance between the two.

3.3.7 Changing attitudes and behaviours

One aspect of the research was to inform future development of policies on supporting more sensible drinking and reducing harm. We therefore asked participants for their views on factors that might influence student attitudes to drinking and drinking behaviour. We also asked for their opinions on the potential of health promotion campaigns and materials for effecting change to more sensible or safer patterns of alcohol use. A number of themes emerged.

3.3.7.1 Health

Many students considered that they didn't think very much about the long term health implications of their drinking, often because they didn't see themselves or fellow students as *'severe drinker[s]'*. They tended to think of people who had high levels of consumption - people who drank large amounts of spirits such as whisky each day - as the ones who would experience health problems. Others however, did seem to be aware that some students were drinking considerable quantities of alcohol and expressed some concern that they were storing up health problems for themselves in the future. They were more likely to notice or express concern if someone they knew, perhaps one of their friends, was drinking heavily. Participants who did mention health also tended to consider the problems as something that would happen when they were older, and sometimes drew the analogy with smoking - that we know now of the health risks of smoking and in the future that we might be considering alcohol in the same way. Often it was the mature student who seemed more conscious of the long term consequences of alcohol and thus was more likely to be influenced by them.

Health was also discussed as a factor that might stop people drinking alcohol. People who were hospitalised because of alcohol, both with longer term problems such as liver damage, and also acute ones such as having to have their stomach pumped after excessive alcohol consumption, were seen as the people who would give up drinking. In the main though, students acknowledged that they didn't consider their health before going out drinking as the following extract shows - *'I don't consider the condition of my liver before I go out the door or when I get home'*. However, the mention of liver damage here does indicate some awareness of the adverse effects of alcohol, even though they are not seen as relevant to themselves. The majority didn't think that just telling people that they would become ill if they drank alcohol would be a reason for stopping drinking and rejected the notion that potential illness several decades into the future would be a reason to give up alcohol. Many saw the period of student drinking as temporary phase which would not have a lasting effect on their health - *'I'm thinking ... get it over and done with while I'm young then I'll be able to recover in my twenties and thirties and I'll be fine'*. They also had a positive view of developments in medicine, tending to consider that cures for alcohol related problems would be available in 30 to 40 years time. The mention of this timescale suggests that most considered alcohol related health problems to develop over the longer term. None seemed to be aware of the increasing health issues consequent upon excessive alcohol use arising in early to mid adulthood.

3.3.7.2 Transition from University

This sub-theme focussed on the extent to which students were expected to change their drinking pattern when they left university and began work. Many participants assumed that high levels of social activity accompanied by excessive drinking was specific to the student lifestyle. They viewed the student pattern of drinking as a transient one, created by the context and driven by cultural expectations about student life and the ease with which heavy alcohol use could be accommodated within the more flexible lifestyle of the student as the following extract shows *'here we've got no responsibilities apart from turning up to lectures and managing money or whatever, so there's no pressure not to drink, you've got that opportunity to drink'*. Some used this perceived temporary freedom of the student lifestyle to explain the amount of drinking that they did - that because they saw this time of their life as the only time they would have the freedom to go out drinking every night if they wished to, they made the most of it.

Most participants considered that when the circumstances changed and they stopped being a student the pattern of alcohol use would also change *'and soon you're going to have to stop it anyway when you get a full time job'*. They envisaged that after they graduated and on leaving university they would have to adjust to a more regular pattern of work and increased responsibilities which would inhibit their ability to stay out late or drink heavily and in consequence assumed that their overall level of alcohol use would reduce. The following discussion between two male respondents typified this approach *'... part of coming to uni is getting really, really drunk. I saw that as, I'm not going to go back home and have the same kind of lifestyle that I've got now. Purely because I'm not at uni any more, you know, I've got to get a job and whatever..'* His co-participant in the focus group confirmed this view *'you'll mature out of it later anyway. You kind of get by going into uni when you're hungover but if you have a job and you go in drunk you'll just get fired, after like a week or so'*. Thus many participants saw little need for concern over student drinking as it was a temporary phase that would not translate into longer term patterns.

Whilst this was the majority view some students showed some understanding that the anticipated reduction in alcohol use after graduating might not be the case for all individuals - that having acquired the habit of drinking heavily at university some might find it difficult to stop for either physiological or psychological reasons once they'd left. Indeed, some students reported knowledge of graduates who had started working but who hadn't changed their heavy drinking pattern - on the contrary, working meant that they had more money to spend on alcohol and so they were drinking more heavily. Here, they saw the university as instrumental in initiating the drinking habit '*they've built up the habit of drinking*' and that it was a habit that continued and perhaps became more extreme once they'd left '*but it's definitely where they began to acquire the alcoholism was whilst they were studying at university*'. There was therefore more reason to address the pattern of alcohol use developed by some students at university, but this tended to be viewed as a problem specific to certain individuals which could be addressed on an individual basis, rather than as a general issue affecting the whole student body.

3.3.7.3 The role of the University

Some students who were conscious of the dangers of alcohol felt that the university should be more proactive in raising awareness amongst *students* '*I think more of an effort should be made by the university by just basically, you know, making people aware of the dangers*'. Partly this was because they saw students learning to drink alcohol at university and so considered that the university had some responsibility for reducing the amount and the potential harm. They referred to expectations about alcohol use held by freshers on coming to the university and proposed that these apparent norms of drinking should be challenged. They felt that the university should take the lead in this, perhaps by mounting a campaign to make students more aware of the dangers of excessive alcohol use. Others considered that campaigns would not be very effective because the students wouldn't take any notice of them and a more appropriate approach might be to develop a module in which students could learn more broadly about the topic and its dangers. They referenced the '*money management module*' that was available in their first year and which could be used as a model for something similar on alcohol. They also raised the potential within freshers' week to emphasise that it is not '*all about going out and drinking*' and to provide a broader range of activities that were less dependent on alcohol.

This latter point also extended to university life generally, not just freshers week. Some participants argued that students went drinking because of a lack of alternatives and felt that many would rather do other things than drink '*I bet you if you gave half the people that go out drinking another kind of thing to do that's similar but like not to do with drinking and they would do that instead of going out*'. Some argued that the university should consider better how to provide support for activities that did not involve alcohol both in terms of developing and promoting them and in facilitating access to them. The students also pointed out the difficulties they experienced in getting to venues providing entertainments other than clubbing and drinking for which some transport was provided; they considered that less alcohol focused activities such as cinemas or ten-pin bowling in Northampton were much less accessible. A few participants pointed to double standards, suggesting that '*the university contradicts itself*' by ostensibly appearing to discourage students from drinking and yet promoting drinking through support for the nightclubs in the city centre (although here it was the student union that made the arrangements with the clubs, not the university).

3.3.7.4 University campaigns

Participants had a number of views of alcohol focussed health campaigns. Some felt that there should be more alcohol focused posters within the university that had themes similar to those available on promotional campaigns on television in order to raise awareness of the risks of alcohol use. They suggested that, for example, posters in the toilets would mean that they would have to look at them and it might just make them think about their own drinking and whether they should stop. They considered that the posters should be visual and have strong messages *'that showed the impact of what alcohol does'* and that this might encourage them to reflect on whether it could happen to them. Pictures rather than words were viewed as having more impact.

3.3.7.5 Alcohol health promotion campaigns

All respondents tended to have some awareness of general alcohol-related campaigns, though they reported being unclear whether the focus was alcohol or other drugs. They tended to recall those with high emotional or physically unpleasant content. They remembered incidences such as women vomiting or having vomit in their hair and a man's earring being ripped out, etc. and considered them *'very powerful'* but then questioned whether they would have any direct impact on young people's drinking behaviour. Others did think that campaigns that focused on these more social aspects, such as the one comparing the person at the end of the evening with how they had started out, would be more likely to have an impact, especially on younger people, than ones that emphasised the health consequences of drinking such as liver damage. Some spoke of how such an advert focusing on social aspects of alcohol use could affect their own drinking behaviour *'so you go out and its quite easy to get, to tip over that level, whereas having an advert like this makes you think 'oh I don't look good when I get that drunk' so maybe I should keep back a few [drinks]'*. Even here though this view was challenged, with some participants pointing out that at the end of the evening when people came out of the clubs there were usually incidences of people being sick and in a dishevelled state - suggesting that they were accustomed to seeing such sights without it affecting their behaviour or that as everyone was in the same state at the end of the evening it was not important. Here, peer norms seemed to be more influential than the degree to which they found the particular behaviours aversive. Others thought that much would depend on the individual watching the campaign, that some would be affected but others *'can see all those adverts but it don't affect them'* and drew the comparison with smoking. Still others had *'never seen someone in that state'* and they didn't identify with them *'because, that's the thing, I'm never sick in my hair, I never rip my tights, I never come back looking like that'* suggesting that they draw heavily on their own experiences when reviewing the appropriateness of the campaigns. However, other members of this participant's focus group were more positive about the campaign reporting *'But I think it is a good advert'*.

Some of the younger students were quite critical of the campaigns, especially those that emphasised safe drinking levels. There was a clear discrepancy between the students' views of an appropriate amount to drink and the consumption guidelines presented by the campaigns. Their response tended to be one of irritation such as is exemplified in the following quote *'I think they're so ridiculous those posters, I just think, what is it, they say something like half a glass of wine is like a woman's limit or something ridiculous and it just really annoys me'*. Many just rejected the campaigns out of hand, pointing to their own drinking behaviour as evidence that they didn't take any notice of them. Whilst the majority could recall campaigns focussing upon drinking in relation to units of alcohol, most felt they

lacked understanding of units as applied to their own alcohol consumption, and thus campaigns based on these were of limited utility. Thus there was considerable ambivalence about the campaigns, although the mature students tended to view them rather more positively than the younger ones.

3.3.7.6 Advertising strategies

Some participants pointed to the role of drink advertising in sport and the way in which the activity and the alcohol was juxtaposed, supporting the connection between, for example football and beer. They suggested that similar strategies should be used in relation to drinking safely and warnings of the adverse effects of alcohol. They noted that TV campaigns and other forms of advertising the dangers of excessive drinking, were usually distant from the situation in which people drank alcohol, and therefore less likely to be accessible when people were drinking. They proposed that posters and similar warnings on the dangers of alcohol could be placed in pubs and other establishments where drinking took place, so that they were more visible when people were ordering drinks and thus had greater potential to influence behaviour. They did note that publicans or licensees might not welcome such an approach if it reduced the amount that people drank.

3.3.7.7 Acting on concerns about excessive drinking

One sub-theme concerned the extent to which direct action should be taken with those seen to be drinking excessively or experiencing alcohol related problems, such as not turning up for lectures because of heavy drinking the previous night. Views here were quite mixed. In considering those who drank excessively, many students were of the view that *'no-one is forcing them to pick up the bottle'* and that people choose to get drunk. Thus they believed there was little that they could or should do to affect others drinking patterns; that the students were responsible for themselves, and if they chose to go drinking and neglect their studies then that was up to them. Others however thought that if the drinking was getting in the way of their education then some action should be taken, though who should take the action was not always made clear. Sometimes it seemed as though they were referring to action by fellow students, at other times to action by university personnel. The following extract reflects that rather ambiguous view *'I think someone should have a word with them because it's, it's unwise just to come to university environment just to drink constantly'*. Where respondents felt that they would take some action personally, they often expressed some ambiguity about the type and extent of the action. There was a tension between trying to persuade someone to reduce their drinking and an unwillingness to interfere, and a recognition that *'it's still up to them to make the decision to do something for themselves'*. Primarily they saw their role as one of raising the issue and drawing the person's attention to their heavy drinking and then being there for the individual if they needed some support. They extrapolated from themselves so that as they didn't like *'being told what I can and cannot do'* they assumed that others too would react like this and therefore didn't feel that they should tell others what to do about their drinking.

However, the students were more likely to feel they should take some action if the person was a close friend or family member, someone they knew very well - perhaps by having a quiet word with them expressing concern about the level of their drinking or even suggesting that they obtain some help from the counselling service or another professional who would be more able to help them cope. Here they thought they *'could probably like have a word with them and say "you are drinking excessively and you need to stop, or you know, not drink so*

much” but they also considered that if the drinking was excessive and *‘getting out of hand’* then the person might not take any notice of them and they would need to try to access more professional help for them. Here there was some recognition that perhaps the individual might not be in control of their drinking and might need support in order to reduce their level of consumption.

In relation to actions such as obtaining help and advice in addressing their own problems with alcohol, most did not feel that they would ever find themselves in a situation where they needed to do so. However, when asked who they would approach, healthcare professionals, such as doctors and counsellors, appeared to be the most favoured. Partly this was because they were seen as people with the expertise *‘because they’re qualified’* and who could deal effectively with the problem. Many reported that they would approach their parents for help and advice, but others took the opposite view and would not wish their parents to know *‘I think I’d be too ashamed to admit to my parents that I had a problem [with alcohol]’*

3.3.7.8 Learning from experience

Students drew on their own experiences when considering how attitudes and behaviours could be changed. They reflected on their experiences of alcohol and the changes that had occurred in their pattern of drinking over time. More mature students reflected upon the way that they’d gone out *‘to get just drunk’* but as they’d got older they had learned what they could and could not do. Their view was that they were more likely to change their behaviour as a consequence of their own actions than if they were informed of the dangers or if other people told them what they should and should not be doing. The general consensus was that *‘you will learn through experience’* rather than through responding to health promotion campaigns. As one participant put it, you *‘see all this advertising but it doesn’t stop people does it?’*.

In a somewhat different way students referred to their experiences of other people’s drinking as factors that might initiate change. Those who had seen others undergo serious adverse consequences were more likely to think about the effects of alcohol use and reflect on the implications for their own and other’s behaviour. They mentioned cases where someone close had died from suffocating on their own vomit in their sleep, or where a friend’s husband had *‘drank himself to death’*. They referred to hypothetical situations whereby if someone advised them that they were suffering from the adverse effects of alcohol such as liver damage, then they would change their behaviour and not drink so much, in the same way that they had seen it happen to other people. Here there was the belief that, just as their awareness of such occurrences had affected or would affect their own drinking, direct knowledge of such serious incidences would similarly influence other people’s views and use of alcohol.

3.3.7.9 Physiological tests

There was some discussion of the efficacy of using tests of physiological functioning, such as their liver function, to moderate people’s alcohol use. Some students thought that the university should be active in this way *‘the university should hold like liver screenings and stuff .. just to make, like to make students aware so people could go along and test how good their livers are’* and felt that this would be a good way to raise awareness and reduce alcohol use; others however considered that any immediate effects would be lost over time, particularly if their friends continued to drink. In the longer term they would be more likely to be influenced by their friends’ behaviour and attitudes than by the result of tests. The

students were also sometimes sceptical of such tests, pointing out that there were times when people were drinking heavily but the tests didn't show up any adverse physiological problems. In such situations the individual might be more likely to continue because they were reassured.

3.3.7.10 Changing the culture - individual versus group responsibility

The student culture was considered to play a role in drinking attitudes and behaviour and some students argued that there should be some changes. They pointed to the adverse impact on students who for reasons of ethnicity or religion didn't drink and the unfairness with which they were pressured into conforming to the drinking culture. Not only the peer culture was referred to but mention was also made of requirements of courses, particularly applied courses, which involved engaging with people who drank or abused alcohol. They noted that, where students' anti-alcohol views were strong, they could be forced to choose between their beliefs and their course, and reference was made to at least one incidence of someone having to leave their course because they wouldn't undertake a placement that involved alcohol.

Whilst many considered that there were broader systemic factors, such as culture and class, that determined students' drinking behaviour, others disagreed and felt that individual temperament and *'who they happen to be hanging around with at the time'* were more potent influences on a person's attitudes and drinking behaviour than age, culture or class. Here, any modifications to the context were seen as less relevant to changing excessive student drinking patterns than addressing individual factors.

3.3.7.11 The role of the student union

Participants considered the role of the student union in supporting or challenging drinking behaviour. They referred to the way in which the student union had changed its strategy with regard to alcohol *'the strategy he's tried to put in place with the union you know being a little bit more stringent on the drinks policy and everything ... it's all like sort of moderately priced, it's not like too cheap'*. It had stopped providing very cheap drinks and had changed the atmosphere through introducing a non-alcohol café on the ground floor and moving all alcohol consumption to the first floor. The union had also developed partnerships with the night clubs in town and agreements concerning the provision of transport to and from the venues on student nights. Whilst some thought that this was effective and a change for the better, others considered that it didn't change behaviour or reduce drinking; students who wished to drink just went elsewhere and didn't use the union facilities. Others commented that off campus venues could have increased the risk to students *'it's gonna be a little bit more dangerous coming in from town to campus'* despite the buses that were laid on.

3.3.7.12 Background influences

A theme that emerged as contributing to abstinence or moderation in student drinking concerned background factors such as those of religion and familial influences. Some students referenced their religion as not allowing them to drink alcohol and so they abstained, others that they drank very moderately because of their beliefs. Some noted how disappointed their parents would be if they knew they were drinking alcohol and so that tended to constrain them. Others stated or implied that their parents monitored or made judgements about their drinking behaviour which influenced how much they consumed at home, so students who lived at home during term time did not pre-load before going out and

others referred to a drinking pattern that was more restrained when they returned home during the vacations. Family background and parental control was therefore seen as relevant to alcohol consumption, affecting both attitudes and behaviour, and thus by implication could be relevant to changing them both.

3.3.7.13 Increasing the cost of alcohol

The cost of alcohol was raised as a contributory factor in drinking behaviour and some discussion occurred on the implications of raising the price of drinks, particularly on campus, as a way of reducing alcohol, especially excessive alcohol, consumption. Some students thought that it was inappropriate to raise the price because it stopped people enjoying themselves. Others considered that people who wanted to drink would do so anyway, irrespective of the price, and that *'people are gonna, still pay the money'*. They drew attention to the implications of raised prices on purchasing patterns, with some students suggesting that the students would just buy bottles of alcohol and drink at home rather than going out to socialise, or do more drinking at home before they went out. This possibility was viewed negatively, in isolating students and perhaps creating more potential for harm as students travelled to venues already intoxicated, although it is a pattern that already occurs. Some participants took a broader perspective and referred to proposals to increase the general price of alcohol based on a minimum price per unit. Here the common view was one of indignation, that people had the right to drink (excessively) if they wanted to, and that it was unfair to increase the costs for everyone else. They questioned why everyone else should be penalised or, as one participant put it *'increase[ing] the cost on everybody else just seems a bit like a scapegoat to be honest'*. The participants were also sceptical that increasing the unit price would reduce drinking amongst those with an alcohol problem; they considered that they would find the additional money in some way.

Thus, to summarise this theme, students tended to see changing attitudes and behaviour towards alcohol in a highly complex way involving individual, intra-personal and contextual factors. In general they seemed to be quite pessimistic about ways in which students' drinking could be moderated and many had quite negative views on a range of more formal means such as health promotion campaigns at local and national level. Whilst recognising that some strategies might be more effective than others at eliciting change many also questioned the need for change, viewing it as necessary only when people drank excessively over a longer period of time. For them, excessive drinking in students was seen as a temporary activity that would stop once they graduated. Others, however, were more aware of the problems of student alcohol use and spoke more supportively of current actions by the university and the student union to raise awareness of the risks and the need to take further steps.

3.4 Summary

In undertaking this part of the study we were aiming to both obtain an understanding of the way in which students perceive and use alcohol within the university context and to gain information that would enable us to determine the nature of the problems associated with drinking with a view to minimising such problems. Understanding how and why students drink and the problems associated with such consumption is a first step to attempting to change or modify those patterns which may be prejudicial to their well-being.

From the data that has emerged, it is noticeable that students have quite varied approaches to alcohol consumption, and that within the university and its partner colleges there is a spread of views and behaviours that reflect those within society more generally. Thus, student drinking spans the full range from total abstinence, through occasional and moderate consumption to patterns that involve excessive and potentially harmful amounts. However, perhaps two things stand out in the discussions with the students. One is that the culture of the university is universally seen to be a drinking culture, and a culture that is often interpreted as one of excessive consumption. Second is the extent to which those who adhere to this drinking culture perceive drinking large quantities and being intoxicated as normal.

The perception of the drinking culture predominates and those who do not drink, or only drink in moderation, often find themselves on the defensive. Whilst the mature students and those who are based in the family home appear more able to maintain their existing patterns of consumption, those living in student accommodation, either in halls of residence or in shared residential properties in the locality, often find themselves under considerable pressure to conform. First year students would seem to be particularly at risk of a pattern of socialisation involving heavy alcohol consumption as they attempt to integrate into university life. Expectations about alcohol fuelled socialisation are formed prior to transition to university and acted out on arrival. Factors such as their restricted experience of alcohol, more limited awareness of their own reactions and weaker self-management skills, higher levels of income and relatively inexperience of budgeting such sums, lack of familiarity with Northampton, especially the town centre, and the reduced monitoring of academic work which does not contribute to their degree classification, underpin this increased vulnerability of first year students. Those in the partner colleges are less affected by this culture because of more rigorous restrictions on alcohol on campus and closer monitoring of their academic attendance, but they are not immune from it.

Heavy consumption is rarely considered to be problematic by those students who do so. It is seen as an intrinsic part of their socialisation at university, a temporary phenomenon at a time when they have few responsibilities other than academic work, which they perceive as more amenable to high consumption than the obligations of work and family which will come later once they have graduated. On the whole, students are aware of the negative effects of drinking, but are more likely to see them in terms of immediate consequences rather than longer term ones. Thus they remark on its adverse effects on such factors as mood, relationships, finance, academic study and performance, and its associated increase in injuries, aggression and violence, anti-social behaviour, etc. Few perceive the longer term dangers to health, considering that only prolonged heavy and consistent use over decades will lead to health problems in later adulthood. The majority do not recognise the health implications of consuming large quantities in a short period as in the type of 'binge drinking' they undertake.

In dealing with the potentially adverse outcomes of drinking the students report taking steps to minimise harm through staying together in groups, using transport provided by the nightclubs or sharing taxis, etc. Despite this, many report risky behaviour and/or problems such as walking home alone, sexual activity with strangers, waking up not knowing where they are or how they got there, getting involved in group violence, etc. Whilst some reflect and modify their behaviour, many do not. What was noticeable in the focus group discussions was the often casual way in which many of the students referred to such behaviours and the perception, that for some, the occurrence and retelling of such exploits gained kudos amongst their peers.

In considering what could be done to modify the drinking culture and reduce excessive alcohol consumption and its associated harms, most were pessimistic about the possibility of success. Many questioned the need for change. Those drinking excessively did not see themselves at risk and challenged government guidelines on 'safe' levels of drinking, viewing them as unrealistic. Rather than considering excess in terms of units of alcohol, they perceived excess in terms of the impact of alcohol on the individual, either in terms of physiological effects such as passing out or in the experience of adverse consequences. However, in discussing ways of changing such behaviour, strategies considered more likely to succeed involved advertising and promotional campaigns based on social messages and 'shock tactics', the provision of additional activities to reduce the emphasis on social events linked to drink and/or licensed venues, and drawing on the direct experience of others to inform of the dangers.

Much of the data from the focus group discussions support the more recent findings of research examining excessive or binge drinking in the general youth population (Engineer, Phillips, Thompson and Nicholls, 2003; Coleman and Cator, 2007; van Wersch and Walker, 2009) and earlier work examining university drinking patterns such as Gill (2002). What is perhaps more noticeable here is the voice of the non-drinking and moderate drinker within the university context. Much of the existing emphasis is on the heavier consumer of alcohol. Here we see the full range of perspectives and the diversity of views reflecting both the varied nature of the student body and the changes in attitude and behaviour that occur as the students progress through their studies. It is tempting to focus all the concern on the drinkers in the desire to change behaviour, to reduce the harmful effects of excessive consumption and promote more sensible approaches to alcohol. However, the needs of those who do not drink or drink only moderately also need to be addressed if the university society is to be one of fairness and equality. More pragmatically however, the insights that they can offer and the nature of their experiences provide us with a rich body of material which can be drawn upon to provide an alternative perspective to use in attempts to change the culture and persuade those who drink to excess to act more safely and sensibly.

CHAPTER 4 - THE KEY INTERVIEWS

A third strand of the research involved interviews with key people in the educational institutions and in the locality. We describe the study and the findings below.

4.1 Method

4.1.1 Design

Qualitative methodology was employed to obtain in-depth information from a range of key informants who were engaged in roles or activities that were relevant to student's use of alcohol. We undertook semi-structured interviews with informants and coded the data using thematic analysis.

4.1.2 Participants

Individuals were selected on the basis of their likely involvement with students and alcohol issues. Purposive sampling was used to recruit participants with experience relevant to students' use of alcohol. Known contacts within each of the higher education institutions were asked for recommendations to those individuals who were likely to have an understanding of or view on student alcohol use. Members of the Steering Group and individuals from the community organisations who were already known to the researchers because of previous contacts concerning student alcohol use were approached and they were also asked for recommendations. During the progress of the research several interviewees also made recommendations and these were followed up if they did not duplicate the roles of those who had already participated. In total 28 interviews were carried out involving 29 participants, one interview comprising two interviewees from the same university department. In the university and colleges, interviewees were drawn from the following areas - administrative departments, student services, estates and facilities and a number of academic departments. In addition, a representative from the student union was interviewed. External interviewees were drawn from the public sector including the Northamptonshire constabulary, NHS, county council, a specialist alcohol service in the not-for-profit sector and representatives from the licensees in the private sector. A full list of the organisations and departments from which the interviewees were drawn can be seen in Appendix 7.8

4.1.3 The qualitative interview

Because of the diverse nature of the interviewees and their roles, the structure was kept to a minimum in order to allow for flexibility to follow up issues related to student use of alcohol relevant to their specific area of expertise. A number of key issues to be considered in the interviews were established by the researchers. The focus was two-fold, to obtain information related to student (mis)use of alcohol and to determine the interviewees' views on current approaches to student use of alcohol and how these might be addressed.

4.1.4 Procedure

Information on the nature of the study was provided to those individuals considered relevant to an understanding of student use of alcohol and/or working within the field of alcohol (mis)use. All those approached were informed of the aims and objectives of the study, the

nature of the interview and the resulting analysis and dissemination outcomes. They were assured of confidentiality and anonymity concerning the data and the resulting report. Those who agreed to take part were asked to give their written, informed consent. The interviews took place at venues convenient to the interviewee and which satisfied the criteria of being private and generally free from distraction. All interviews for staff in the HE establishments took place on their respective campuses; interviews with externals took place in a variety of locations, occasionally on campus. The interviews lasted approximately one hour and were undertaken by the researcher or the principal investigator. The interviewees were asked to identify the key elements of alcohol use by students as they related to their area of activity, including alcohol related policy and procedures if appropriate. They were asked to explore the implications of student use of alcohol and encouraged to consider intra-personal, inter-personal, university and community factors that might persuade students to adopt less risky approaches to alcohol use. Each session was audio recorded and subsequently transcribed verbatim.

4.1.5 Ethics

Details of the research project were submitted to the University's Research Ethics Committee and approval obtained.

4.1.6 Analysis

The more factual information on student use of alcohol was used to provide a context to the study. The more qualitative data from the interviews were analysed using thematic analysis, involving the identification of key themes across all the interviewees. The themes were generated by one of the researchers and moderated by a second. In the subsequent sections normal conventions concerning the presentation of extracts has been followed including the use of italics to present interviewees' comments verbatim, the use of a dotted line ... to denote material that has been excluded from the quote, and the use of square brackets [] to indicate where material has been included by the researcher to make the data more comprehensible to the reader. Because of the small number of interviewees and the often specialised nature of their role, specific attributions have not been made for extracts presented verbatim. We have normally indicated whether they were drawn from the HE sector or from one of the external agencies.

4.2 Results

The transcripts of the interviews were read and re-read until the researchers had a detailed understanding of the data. Data were indexed and initial codes were produced. The codes were then analysed and sorted into a number of themes which were then defined and refined. Seven main themes were identified relating to the perceptions of student alcohol use, general perspectives on alcohol related problems, problems associated with students' alcohol use, alcohol related issues of diversity and equality, the involvement of external agencies in student alcohol use, addressing alcohol related problems, supporting students with alcohol related problems, and changing drinking behaviour. These and their sub-themes where appropriate are outlined below.

4.2.1 Perceptions of student alcohol use

This section addresses themes that relate to the interviewees' perceptions of the students' use of alcohol. It includes views on the drinking habits of the students and the influences that affect student drinking. A common underlying theme is that of culture and diversity, reflected both in terms of the nature of the student population and the approaches to alcohol use. The university has a considerable mix of students both from home and abroad, international as well as European students. In addition, it is a relatively closed society with specific cultural expectations that centre around learning, personal development and a particular type of social life which, traditionally, has involved expectations about alcohol use. Interviewees viewed students' use of alcohol within the higher educational establishments in a number of ways that reflected all of these aspects - the particular nature of HE, society in general and the diversity of cultures or social norms relating to alcohol use that students brought with them.

4.2.1.1 The student drinking culture

On the whole, the predominant view of the interviewees was that students drank alcohol and often drank it immoderately. Interviewees considered that students had cultural expectations about drinking at university and that alcohol use was part of their youth or student culture. The university was viewed as a context in which drinking alcohol, and often excessive levels of alcohol, was expected. One interviewee spoke for many, when he said '*I just think it's part of the culture of being at uni*'. In addition they also noted the particular sub-culture associated with sports activities and sports teams, where excessive drinking was often assumed to be mandatory.

A common view of those academic and support staff who worked directly with students was that first years or 'freshers', particularly those who arrive directly from school and are living away from home for the first time, seemed to enter university with expectations about a social culture involving high levels of alcohol use and that their experiences in the first few weeks appeared to confirm this. Those students who did not share this view were seen to come under considerable pressure to develop this alcohol intensive form of sociability and this was especially the case for those living in halls who were considered particularly vulnerable to peer pressure to drink. '*We have noticed with first years, coming into halls they sort of seem under a lot of pressure to, you know, take part in that culture of very regular heavy drinking. It seems expected really and this is what, this is what we hear from the students*'. Often this view was expressed in a somewhat resigned or accepting way - that the student drinking culture was something that was not new, that there was a long tradition of student socialisation involving alcohol and that this was a temporary phase that would change once they graduated. Many drew similarities with their own experiences whilst students, although some pointed to the higher levels of alcohol that students now consumed compared to the amount drunk when they were studying at university. However, some HE institutional interviewees such as the counsellors or college nurses, who were more likely to interact with students experiencing alcohol related problems, tended to view this culture less sanguinely. They pointed to changes in the type of student drinking behaviour in more recent years such as the greater emphasis on drinking to get drunk, rather than alcohol as an adjunct to social life, and the broader social changes involving greater acceptability of excessive alcohol use. They were less likely to view it as a relatively harmless phase of life. These more concerned views were also held by many of the interviewees drawn from the external agencies, especially those involved in the provision of alcohol or health services, who were also more directly aware of the adverse consequences of excessive drinking.

There were occasional challenges to this predominant view of a culture of alcohol excess. Interviewees from the student union executive and some of the academic staff, considered that the transition to fees and the emphasis on graduate level jobs had shifted the student culture to a more responsible one, as the following extract illustrates *'but with the rising tuition fees ... the culture has changed quite a bit as well'*. Positive comparisons over disorder in the town centre were made by the police, the nightclubs and members of the student union. The club nights at the weekend were seen to be more problematic than the student nights. As one interviewee said *'it's a lot crazier and hectic than on the student nights'*. Domestic and support staff referred to the reduction in alcohol related incidents on campus in recent years.

Some other interviewees also questioned whether student drinking could be differentiated from that of other groups in society. They perceived an increase in alcohol consumption, and especially in binge drinking, within young people generally and considered that student patterns of drinking were representative of trends within the wider society. Reference was also made to young people entering university having already developed a pattern of excessive alcohol consumption during their time at school. Thus this was not so much a university culture but a young peoples' culture of alcohol consumption that was played out in the university environment. Interviewees' views on the factors that were supportive of such a culture are considered in the following section.

4.2.1.2 The social context

Interviewees discussed student drinking within the context of the wider society which seemed to encourage alcohol use and be more tolerant of alcohol misuse and excessive drinking. Students were not differentiated from other young people and were assumed to be influenced by those factors that were affecting the drinking behaviour of all young people. The increased use of alcohol in the media, in sport, etc. was seen to support the acceptability of drinking in social and celebratory settings as well as its therapeutic use in coping and dealing with stressful events. The generational changes whereby children are exposed to alcohol at an early age through being allowed in pubs and clubs were noted and considered to contribute to a situation in which young people drank alcohol more readily. As one external interviewee said *'we've had toddlers running about in the bar for the last 20 years and they're now 18 year olds running around in the bar and culturally that's been an OK thing to do'*. The effect of increased parental drinking in the home was also noted whereby young people were more exposed to alcohol, often drinking it at an earlier age, and parents were less able to guide youngsters in to drinking sensibly when their own behaviour was not always sensible. As one interviewee put it - *'I don't see how you can drink at home and say to people "don't go out and get drunk" if the kids have seen you drunk the night before'*.

The majority of interviewees drew attention to perceived changes in the public's view of drunkenness and excessive drinking typified by the following observation that getting drunk is *'more socially acceptable to some extent'*. In addition, changes to legislation governing licensing and the types of alcohol promotion such as 'happy hours' were also viewed as contributory factors to the increase in excessive drinking. Such changes were set against a background of general social change in terms of attitudes and acceptability of behaviours, especially in relation to intoxication in public, which would not have been accepted several decades previously. However, some interviewees considered that the UK had *'always been a binge drinking culture'* and didn't think that the amount of excessive drinking had increased that much over the years. Here the view was that the perceptions of increased alcohol use by

young people revolved around changes in the way in which the city centres were used and the increased visibility of young peoples' drinking as a consequence of the increased dominance of youth and students and the reduced presence of older adults in the town centres. However, there was some contradiction here, with references also being made to young people having more money available to spend and reduced prices for alcohol, especially in the supermarkets, that contributed to increased consumption, often at home.

4.2.1.3 Student diversity

Whilst interviewees referred to the prevailing culture of alcohol consumption within the University, they also pointed to exceptions from that culture arising from the changing nature of the student body. The increasingly diverse nature of undergraduates was noted and the alcohol related issues arising in consequence were raised. Such issues related to contrasts arising from differences in nationality, religion, ethnicity, age and place of residence. We examine each of those aspects in greater depth in the later section on problems where we explore interviewees' views of the difficulties inherent in reconciling the needs of the various groups. Here the point is raised that, within the university and its partner colleges, there are those students who, for a variety of reasons, abstain from drinking alcohol, or drink alcohol rarely.

Not all of this difference in consumption arises from personal choice on the part of the students. Some reflected differences in the institutions in which they were based. In the colleges, interviewees reported that the majority of students are not legally able to drink alcohol and those 18 year olds in HE are in the minority. The younger age of the main student body affects the institution's approach to alcohol, so the majority of the partner colleges ban alcohol consumption except in the bars or restaurant during specific times. Thus HE students living on-campus are not able to consume alcohol in their residences. Interviewees within the colleges therefore did not perceive the predominant culture to be a drinking culture. However, they did note that the students increasingly pressed for greater access to alcohol on site and were not immune from the pressures of the general youth culture of excessive drinking as this extract shows '*they want to sit in their rooms and have a drink before they go to town*'.

Interviewees noted the increasing variety in students attending university and its relevance to alcohol consumption. They noted that the proportion of mature students to traditional school leavers was rising and many younger students now chose to stay at home, rather than move away to attend university. Such differences were seen to affect the students' approach to alcohol and their patterns of consumption, and challenged the assumption of a unified drinking culture. Patterns of socialising for those living at home were less likely to change on entry to university and more likely to resemble those of young people in the community. Mature students, many with family responsibilities, were also likely to have patterns of socialisation and alcohol consumption that differed from those of the younger student.

Interviewees also referred to international students and students coming from different cultural and ethnic backgrounds who often had attitudes to alcohol that differed from the mainstream students and thus were more likely to abstain from drinking. Similarly they commented that different religious affiliations, whether to Christianity or other religions, also influenced the students' approach to alcohol and drinking behaviour and was associated with abstention or very moderate forms of consumption.

4.2.2 Perspectives on alcohol related problems

In the interviews a range of issues concerning alcohol related problems were raised. These problems were considered in various ways by the interviewees and could be categorised in terms of the nature of the problem, the location of the problem, the time of day and the type of personnel affected. The actual problems reported to be associated with alcohol are considered in the following section; here we consider more general aspects relating to those problems and the way in which they were contextualised by interviewees.

4.2.2.1 The general level of the alcohol problem

Problems with alcohol were viewed in terms of whether alcohol was seen as the primary, the secondary or the contributory problem for the person experiencing it. A primary problem would be when the individual expressed concerns of their actual consumption or abuse of alcohol but very few interviewees had experience where a student's use of alcohol was the presenting problem. Alcohol tended to emerge as a secondary or a contributory problem after further exploration of the presenting issues. Where, for example, academic problems were reported, interviewees might recognise that the student's use of alcohol was exacerbating the problem, or that the student might be using alcohol as a way of dealing with or avoiding their academic problems. Problems were often spoken of in terms of whether the issues arising were minor or major. On the whole most interviewees reported having very limited experience of serious incidents associated with student alcohol use and usually stressed that most of the alcohol related problems they encountered were relatively minor ones.

4.2.2.2 Location of the problem

Interviewees also spoke about alcohol matters in relation to the location in which incidents occurred and distinguished between issues on and off campus and between residential and educational venues. They reported that alcohol related incidences off campus were more difficult to determine and less visible. Incidences off campus tended to be brought to the attention of the university authorities and staff only when external agents such as the police, clubs or pub managers, or landlords informed them, and university staff commented on how seldom this occurred. Otherwise they were reliant upon the student or friends of the student reporting incidences and here the residential base of the student was also relevant. For example, where a student had been injured in town in an alcohol related incident, it was less likely that the university staff would know of it if s/he lived off campus. As one participant put it *'if they were in private accommodation we wouldn't necessarily know about it unless perhaps someone was making a complaint'*. Where a student lived in a hall of residence, then it was probable that the situation would come to the attention of the domestic staff and the hall wardens who would be able to support him or her. Thus location of the incident and the students' domicile not only seemed to affect knowledge of any incidents but also the extent to which students might obtain support from university personnel. Where the incident was known about, then the support services could liaise with academic staff and personal tutors; otherwise it was the student or their friends who were responsible for informing them, and unless the incident involved considerable absence from studies, this seldom appeared to happen. The situation was somewhat different in the partner colleges. Any problems related to alcohol use were more likely to be recognised in the college students who had more formal attendance requirements. This meant that any absence from class was noted and followed up, even to the extent of a tutor being responsible for going to the student's room to determine

why they were absent. However, off-site alcohol related incidences that did not affect attendance were still unlikely to be noted.

4.2.2.3 The time of day

Interviewees also drew attention to the importance of the time of day which affected the ways in which perceptions of student alcohol use were viewed. There seemed to be a clear distinction between day-time and night-time. Night staff encountered more alcohol related problems and a general view from those who were involved on a 24-hour basis was that if you were only on campus during the day then you were not aware of the role of alcohol in the students' life. Here of course, interviewees are referring only to students who live on campus, but there was a perception that drinking was a night time activity and the campus very different at night. Interviewees who had an overview of the university and student life tended to refer to the security staff as being the group of people most familiar with this difference. Comments such as *'the security staff have a very different view of our student body to most of us who work Monday to Friday, 9-5'* and *'the evening security people say that it's a different place'* were common. Security staff confirmed this view.

4.2.3 Problems arising from students' use of alcohol

Interviewees referred to a wide range of problems associated with alcohol, whilst stressing that the proportion of the student body affected by them was limited. Problems differed according to whether they were ones that arose as a consequence of direct consumption of alcohol or ones that were associated with the diverse needs of different groups of students and often had implications for the institutions more generally. We have separated out these two elements. This section focuses upon problems that are largely attributable to the students' use of alcohol. Those relating to the diverse nature of the student body are presented in the subsequent section.

Overall, many interviewees found it difficult to recall instances of serious harm related to alcohol use, but often tended to talk in generalities, occasionally providing examples to illustrate a point. Partly this reticence was through a desire to maintain confidentiality, but it also seemed to be a genuine phenomenon, that serious alcohol related problems were not occurring or were not being brought to their attention. There were a number of routes by which problems could be ascertained - essentially they emerged through either the disciplinary channel or the student support route.

4.2.3.1 Alcohol abuse

Most interviewees reported apparent low levels of alcohol abuse amongst the student population. Difficulties in controlling alcohol consumption itself seemed to be a rare reason why students would come to the notice of either the academic or support staff. As one member of the academic administrative support staff said *'I don't think I have ever had an issue referred to me which is directly, which is identified as being, the result of alcohol'*. Even interviewees in the mental health, counselling and nursing services said that it was unlikely that students would list their own use of alcohol as the main concern. They recalled very few students approaching them directly with concerns about the amount of alcohol they were drinking or difficulties in handling it *'we very rarely see students... where we would say the main issue is an alcohol problem'*. When alcohol consumption emerged as a possible

problem in their discussions with the students, the students were usually referred to external agencies which specialised in dealing with alcohol problems which they considered to be better prepared to provide direct support to the students. They felt that *'we wouldn't be the experts to deal with that if it's the main problem'*. The agencies themselves confirmed that some students were referred or referred themselves to them because of problems with their drinking.

However, interviewees also reported that some students came to study as part of their recovery from alcohol abuse, that studying often acted as a mechanism to escape the consequences of a problematic lifestyle, enabling them to start afresh. Occasionally, students with a drinking problem did come to the attention of staff who often took pride in providing support to enable them to continue their studies whilst dealing with their alcoholism. Such support included finding more appropriate self contained accommodation, or helping to sort out financial difficulties, or just being available if they asked for help, particularly if the drinking had got out of control again.

In addition to considering students with their own alcohol problems, interviewees also reported that some students experienced problems arising directly from excessive alcohol consumption by family members. One reported *'very often the effects of alcohol or the effects on the students from the use of alcohol is not necessarily about the student's use but about what they've experienced when they've been growing up or what they experience when they have to think about going home for the break'*. Such problems may have been instrumental in the student moving away from home to study, especially where drinking problems concerned parents, but then crises would occur which drew them back to the family home, interfering with their studies. They also experienced difficulties in resolving conflicts arising from pressures from home and their wish to complete their studies. Others were dealing with partners with drinking problems and turned to the student support services for help. Whilst the numbers were not large, the issues were significant for the limited numbers of students concerned.

4.2.3.2 Physical health

The general consensus was that students were not aware of or disregarded the potential damage that heavy use of alcohol was doing to their physical well-being. Some interviewees noted the increased threat to female health through alcohol consumption on diseases such as cancer or neurological problems but reported that few of the young women they encountered appeared to be aware of it. The main health issues experienced by the students to emerge in the interviews related largely to injuries caused directly by their drinking or through injuries experienced via violent or aggressive encounters with others who had had too much to drink. Vulnerability in matters of sexual health was reported by interviewees, particularly in relation to females, as alcohol was viewed as a factor in reduced vigilance. In addition, alcohol was also mentioned as a factor that affected student's ability to maintain their chronic disorder effectively and for their subsequent admission to hospital. Thus panic attacks, problems with their diabetes or asthma attacks could be triggered through non compliance with their treatment arising through over use of alcohol. Whilst the external interviewee reporting such effects advised it was difficult to disaggregate the data for students from that of younger people generally, she did not see any reason to doubt her perception that students also experienced such problems, and HE interviewees also confirmed the exacerbation of students' existing health complaints through alcohol consumption.

4.2.3.3 Mental health

Most comments concerning the association of alcohol with mental health tended to focus on women or girls. Here interviewees saw alcohol being used as a means of coping, often with social or relationship issues. In some cases it was because the student experienced social anxiety in general, at other times because of specific relationship difficulties, the student having perhaps broken up with their boyfriend or fallen out with their girlfriends. A few also involved problems at home. Drinking and getting drunk was used as a way of helping them to deal with the unpleasant emotions, though often it created additional problems. In addition, interviewees reported that students who were vulnerable to self-harm or depression had these behaviours or states intensified by alcohol use, so that episodes tended to follow times when they had been drinking excessively. As one noted *'there's the odd student that self harms and ... that's exacerbated when they've had a drink'*. A member of the student support team also reported that they *'only injure themselves when they've had a lot to drink and the rest of the time they've got that under control ... obviously alcohol is a depressant as well so it brings their mood down'*. Often the student seemed unaware of the connection to alcohol until discussions with counselling or support staff helped them to see the link.

4.2.4.4 Pressure to drink alcohol

A number of the university and college interviewees, especially the mental health and counselling staff, noted that non-drinking students spoke of the pressures to drink that they often experienced. They reported that some more mature students appeared able to handle the pressure effectively and there was a view that once the student had made their non-drinking status very clear then the pressure to drink reduced. However, they also noted that some students had greater difficulty in dealing with such pressure and often reported feeling excluded from their peer group in consequence. Pressure to drink amongst the sport teams and the use of alcohol in their initiation ceremonies in particular tended to alienate and exclude the non-drinkers from taking part in sport.

Interviewees reported that some non-drinkers began to drink alcohol because of external pressures from other students and for internal reasons because they wished to challenge the orthodoxy of their religious or cultural norms. In such cases interviewees noted that this often created tensions and problems which the students found difficult to resolve. If they did not join in they felt isolated, but if they did join in they often felt that they were being deceitful *'that goes against their core kind of sense of what they've learned is right and wrong'*. Some found that they were living two different lives, and experienced difficulties when they went home during the vacations.

4.2.3.5 Crime

Reports of student crime associated with alcohol consumption were quite rare. Interviewees mentioned there had been occasional reports of theft or damage from local hostels, but given the size of the student body the consensus was that there was very little criminal behaviour arising out of alcohol. Running away from the pizza delivery without paying for the food or taking alcohol without paying for it in a local pub were the type of crimes reported by interviewees but all found it difficult to think of many examples. Incidences of violence and aggression were more common but these are addressed separately in the following section.

4.2.3.6 Aggression/violence

Interviewees discussed alcohol associated violence and aggression in relation to students as being both the perpetrators and the injured party. They referred to events on campus and those which occurred in town, especially on student nightclub nights.

Being in town, in the clubs, etc at night-time was seen to increase the possibility of harm, but interviewees pointed out that the risk was probably no more than many students would have already been exposed to in their home communities prior to university. The lack of familiarity with Northampton and their general inexperience in mixing with people drinking heavily as well as their own consumption of alcohol was seen as enhancing their susceptibility to violence and aggression, particularly for the first year students. However, whilst most were aware of the probability, interviewees could not recall many instances. How far this was because they did not happen very often, or because the incidences seldom came to the notice of the authorities or staff was not clear. One participant reported *'there have been incidences you know of a student being beaten up in town, on the Racecourse, in Kingsthorpe, but again, it's difficult to put a figure on it That might be just one incident a year'*. Overall, though one did not get a sense from the university interviewees that they thought students were a targeted group or that they were involved significantly in violence or aggression.

The police perspective was slightly different, although they could only talk in general about levels of violence and aggression as detailed records were not kept on whether the individuals involved were students unless they were charged with an offence and occupation was requested. They reported that on student nights at the clubs *'we have some disorder but nothing much'*. Here they noted the relatively low level of aggression and violence between the locals and the students. This was put down to students having specific student nights which meant a reduction in the time when students and locals were in the clubs and pubs together. Students tended not to go to town on Fridays and Saturdays, the key nights when locals went out drinking. However, on the limited occasions when students and locals attended the venue on the same night more problems were reported - *'it's a mixture between students and locals and they do not mix at all... and the locals antagonise the students and the students vice versa and you, and we've had some disorder through that.'* Where violence and aggression did happen, interviewees considered men to be more likely to be involved, especially when it took place on the streets. However, women too could be violent and interviewees considered that the type of aggression was similar for both sexes. As one police officer put it *'you can get hit round the back of the head as quickly by a woman as you can by a man'*.

Interviewees from the licensed establishments also reported less trouble at student events compared to general ones at the week-end. Those interviewees providing health services and dealing directly with injuries arising from alcohol consumption reported that the week-ends were busier than the weekdays, although there was always one week-day night that was the exception. Nonetheless, there did not appear to be any direct link with student nights in the clubs, as the heavier incident week-day varied from week to week. Again, the interviewees did make the case that unless the individual was asked for their occupation they could not distinguish the student from other young people. Those para-medics dealing with personal injuries in situ in the town centre would not obtain this information, although it might be asked for by A & E staff at the hospital.

Interviewees involved in the disciplinary processes in the university had an overview of the alcohol related aggression that manifested itself on campus. Thus incidences of verbal abuse to other students or estate, security and domestic staff, damage to property, setting off fire alarms and physical fights could result in the student being taken through the disciplinary process and staff involved reported that approximately 50% of the incidences were alcohol related. They reported that students explained their behaviour through recourse to alcohol saying *'I'd had too much to drink, I didn't know what I was doing, I'm very sorry'*. However, again the view was that such incidences were not common - that *'I wouldn't say that we have major disciplinary problems overall that are related to alcohol ... given that we have 1500 young people living on this campus it's not you know as bad as it could be. I think we have to put it into perspective'*.

4.2.3.7 Student halls of residence

Alcohol related problems affecting the on-campus halls of residence were seen to arise in two ways - one where the problem concerned those who drank, and two - where it concerned those who were affected by the drinkers. Most of the following relates to university halls of residences, in that alcohol consumption in student rooms was banned in the colleges. Problems here ranged from minor anti-social behaviour such noise and parties going on too long, a lack of cleanliness, or inappropriate behaviour towards staff or other students through to more major ones such as violent behaviour or indecent exposures fuelled by alcohol. Minor anti-social acts seemed to occur fairly regularly, so, for example, complaints about noise might happen two or three times a night, although some staff reported that whilst such complaints occurred it was not always easy to determine if these were directly attributable to drink. Sometimes interviewees reported that residents played practical jokes on each other after drinking, so that, for example, *'they will empty the whole of one student's bedroom in halls of residence, that's the wardrobe, the bed, you know, the study desk .. so the room is cleared of everything into the hall just to cause obstruction'*. Occasionally, alcohol use resulted in more serious situations so, for example, kitchen fires had occurred as a consequence of students returning to halls after a night out and attempting to cook. They had *'fallen asleep, or just lost track of time and that's resulted in a fire, in some cases, quite serious fires'*. More frequent than actual fires was the setting off of the fire alarms as a consequence of smoke from burning food in the kitchens which they'd left unattended. The advent of microwaveable chips seemed to have reduced the threat.

Residential staff members, such as the housekeeping team, were affected by the students alcohol use. They commented that kitchens tended to be messy where the residents were heavy alcohol users, that bottles were not being recycled, and that sometimes it was difficult to get students up so they could clean their rooms. On occasions where students vomited and left it, the domestic staff would try to determine who was responsible and then ask them to clean it up themselves *'if we do find out which student it is .. their door is knocked on and they're told to 'please go and clean your mess up', but as I say, that's not a lot of times'*. However, the general view was that on the whole student drinking didn't cause great problems. There were few abusive or violent students in the day when the domestic staff were in and, as one member of the housekeeping team put it *'overall, I can't say we have a really big problem in the halls with alcohol for students'*. There did seem to be variation over the years and whilst they had noted an increase in the amount of drinking in halls as opposed to going out to drink, the view was that recent years had been relatively quiet.

Where an individual student was found to be ill with drinking too much alcohol then the domestic staff would tend to alert the housekeeper or supervisor who would usually talk to the student and try to persuade them to talk to student services. If the problem was a continuous one then they would alert student services themselves.

Students in the halls of residence in the partner colleges were not allowed to drink alcohol there; because of the number of under-18s studying, alcohol was only allowed in the bar/restaurants. Interviewees from the colleges reported that this created additional pressures in that the HE students tended to challenge the ruling, arguing that as they were of an age when they could legally drink then they should be allowed to do so in their accommodation. They wanted to be able to have a drink prior to going out for the evening or have a small party in the common room or their shared kitchens. However, the college rules prevented this. A result was more drinking off site, and whilst that reduced the problems for the colleges in one way, the students return to the residences intoxicated and can be unruly or disturb other residents at 3 or 4 o'clock in the morning, *'they carry on with their disorderly behaviour'*, thus creating a different sort of problem. However, another member of staff reported a more positive view, suggesting that students did not drink to get drunk, but largely had only 2 or 3 pints when they did drink. The exception was when they celebrated a birthday when amounts of alcohol drunk increased and disco nights when there might be some slight damage to furniture such as chairs when they were messing about in the common room. Here, perhaps, we are seeing another example of the difference in perception between staff on campus or responsible for students welfare twenty-four hours of the day compared to those only on campus during the day.

4.2.3.8 Disturbance to neighbours

Interviewees reported that neighbours were disturbed in several ways. One way involved those students who did not drink alcohol or who drank very moderately, who were adversely affected by other students' use of alcohol. Members of flats who did not drink but who shared facilities with those who did, reported a number of problems including pressures to drink alcohol from their alcohol drinking flatmates and noise and inconvenience when flatmates had too much alcohol. Sometimes the difficulties related to religious prohibitions, where food kept with alcohol would be contaminated, and therefore posed problems for students sharing kitchens. Neighbouring students living in other flats in the halls could also be adversely affected by noise from students coming back in after a night out involving alcohol. Many students who attended the clubs in town did not get back to the residences until the early hours and could be disruptive to those already asleep. In addition, students also held parties in the residences and these too could disturb their neighbours.

The issue of neighbours was also mentioned in relation to those situations where students were living off campus. Here however, interviewees were far less certain of the impact that alcohol usage by students had, other than on the students sharing accommodation who might ask to change. Occasionally landlords might report receiving complaints from the neighbours to the university, but the general view was that students in the locality tended to live in areas where there was other multi-occupancy housing so that if there were any disturbances as a consequence of alcohol they tended to be overlooked. In addition, interviewees considered it to be difficult to distinguish between disturbances related to alcohol use and disturbances arising from other factors - that there was limited information about students' alcohol related behaviour when living off campus.

A third aspect of the theme of disturbance to neighbours involved those who lived near to the university. The general consensus was that any disturbances or problems related to alcohol in the neighbourhood would be undistinguishable from disturbances or problems caused by other young people. There was no direct evidence of neighbours complaining about alcohol related issues arising from the students. In previous years neighbours had raised concerns about the social events hosted in the student union, largely because of the loud music, rather than alcohol consumption directly. However, since the union had arranged with specific nightclubs for such events to be off campus, interviewees reported that the problems of noise disturbing local neighbours had been resolved.

4.2.3.9 Academic studies

Interviewees reported a range of problems that were related to excessive drinking. Students might not attend teaching sessions, especially early morning ones, or fall behind in their work or have difficulty completing assignments to time. Academic performance could be affected so that the student's level of achievement fell. Sport studies students seemed to be particularly vulnerable to alcohol related academic problems - with a view from interviewees dealing with them that *'socialising is almost as important as actually their ability on the field or court or wherever'*. Celebrating, particularly after a win, seemed almost mandatory and took precedence over academic studies.

Students who were not engaging with their studies consistently would be referred as 'cause for concern' to course or framework leaders and have to attend an interview with them. Interviewees reported that students were often reticent about their drinking and few seemed to acknowledge that the alcohol was directly responsible. However, members of staff were also aware from their discussions with the students that at times, the drinking was not the primary cause of their academic problems - that difficulties in other areas of their life led to higher levels of drinking which then impacted on their ability to study. Sometimes, perhaps the main problem concerned their academic work and going out and drinking were counter productive ways of coping with that.

Interviewees reported that students also put in mitigating circumstances requests if they were unable to meet deadlines for assignments and here alcohol seemed to be a distal cause of problems such as violence which resulted in injury to the student. The injury might have been a consequence of another person's drinking or the student's own drinking, but the resulting physical and/or mental trauma interfered with the student's ability to study and to put in assignments on time *'we often get students putting in the mitigating circumstances when they've encountered violence in the town or even on campus'*.

4.2.4.10 Finance

Interviewees mentioned finance in association with alcohol in several ways. Academic staff noted that there was a tendency for some students to spend too much money on their social life and alcohol consumption so that they got into financial difficulties. Freshers were viewed as particularly vulnerable in that for many it was probably the first time they had had such a large sum to manage and to budget independently. Pressures to spend their income on having a good time, and *'manage on a tin of beans'* was seen to be quite high and *'there are quite a number of students that will spend quite a lot of money on socialising activities and then will put themselves in financial difficulties because of that'*. Interviewees acknowledged the variation in how much money students expended on alcohol as the following extract shows

'well it does vary from student to student but there is a sizeable chunk of budget that goes on what we could .. call kind of socialising' with the socialising tending to involved alcohol. Awareness of student patterns of expenditure led to the deliberate decision of the university to delay giving the bursary funding until the second half of the year in April, because of the perception that this was the time when most students were short of money 'and so we pay our bursaries then rather than before Christmas .. otherwise it would all be drunk possibly'.

Finance was also mentioned in relation to alcohol consumption and concerned issues such the choice of drink, the amount drunk and its effects on the students. Thus a club manager noted that during a 90p a drink promotion, they had to eject a lot of customers for being too intoxicated. Investigation of the sales mix revealed that sambuca was being drunk in considerable quantities. Once this was taken off sale there was an immediate reduction in the problems. For others, the cost influenced the pattern of drinking and interviewees drew attention to the adverse impact of drink promotions on student consumption. Interviewees also noted the effect of cheap alcohol on the level of drinking and the venue in which it was drunk. Most of the university and partner college staff referred to students' use of home drinking both to prime themselves for going out clubbing and partying and for home entertainment more generally. Clubs too noticed the change *'people are buying stuff from the supermarket, drinking in halls and then coming [to the clubs] later'*. Cost and the availability of cheap alcohol in local shops and supermarkets were seen to be the main motivators of this change in drinking pattern. Cost of drinks in licensed venues relative to student income also appeared to be an issue for pubs in that students would not always spend a lot of money in the pub. One landlord noted that they would come in *'to watch at the football which costs me an absolute fortune on Sky, and you know, there's nine of them sitting there, you know, and not even got a Coke between them'*.

4.2.4 Problems arising from equality and diversity issues

One theme that seemed to pervade much of the discussion of problems associated with alcohol related to equality and diversity issues in the face of increasing variation in the student body. Interviewees reported that differences between groups of students presented issues for the university systems, structures and procedures, as well as for the individual students. In this section we examine some of those differences and their implications for the university.

4.2.4.1 Clash of cultures for international students

Interviewees noted the differences in culture of the international students which influenced the way in which they viewed alcohol. Whilst many came from cultures that promoted abstinence from alcohol, not all did and interviewees were quick to point out the diversity of the group of international students and the need to be aware of this, and not to over-generalise. However, interviewees reported that many international students perceived UK students to drink a lot which they found strange. Even where the international students came from cultures where alcohol was permitted, their home universities *'do not have alcohol as part of the social life'*. Staff considered it important to prepare students for the difference and *'so therefore we incorporate into our orientation that that is part of the culture at a UK university and if they're living in halls of residence they may well deal with students who have had a few [drinks of alcohol]'*.

Interviewees also reported that international students often came from more formal cultures in which student behaviour is much more respectful generally and the exaggeration stimulated by alcohol makes the difference much difficult to deal with. They *'form a view of what they might see as loutish behaviour and I've noticed it create not just distress but quite a lot of anger in students, that they feel that some of the other students don't respect them or .they don't respect themselves'*. For some, this makes integration into the general student society more difficult and interviewees expressed some concerns about the potential insularity of international students. As one pointed out *'so they don't mix because a lot of the socialising [takes place around alcohol] ... and they don't play sport, the culture of the sporting teams was very much linked to drinking games and initiation ceremonies and things like that that were strongly related to drink, so therefore the international student, because they didn't have that culture, would not then engage in those, they would feel that that was a barrier to them taking part in those sports'*. Whilst induction procedures were developed to address these cultural differences and support the students in their transition to the university, the interviewees also drew attention to the need to find ways of facilitating international students' involvement in all aspects of university life.

4.2.4.2 Religion and ethnicity

Interviewees noted that religion played a part in students' willingness to drink alcohol and the problems that this could present. Some students practised religions that specifically forbade the use of alcohol, whilst others were able to drink, but only in moderation, and excessive drinking and the free behaviour often associated with it was frowned upon. Often interviewees viewed these students as feeling alienated or isolated from the general pattern of student socialising and commented upon the need for the university *'to be a safe place for all of those people'*. Similar comments were made in relation to ethnicity which was often associated with religion when alcohol use was considered. Thus ethnic groups with religious affiliations that supported abstinence tended to be mentioned as having more problems in socialising with the broader student population. Interviewees commented on the need to recognise the diversity and to ensure that the behaviour of one group of students did not adversely affect the experience of another.

4.2.4.3 Student sub-groups

HE staff interviewees reported the perceived tensions between meeting the needs of different groups of students. They focussed upon differences between drinkers and non-drinkers, mature and traditional students and home and university based students. Staff reported some tensions between the drinkers and the non-drinkers and the need to ensure that the activities of the former did not adversely affect the experience of the latter *'we all say to them that we are not here to police them in their drinking and to stop them having a good time ... but when it does start to cause problems and issues is when it affects others'*. Another, in talking of drinking on campus expressed the view that *'my strong view would be that one group of students behaviour mustn't adversely affect another's.....it's[alcohol] got to be controlled, it's got to be so that it doesn't affect, adversely affect, the experience of other students'*.

Similar issues arose through differences arising between the needs of the mature students and those of the traditional 18 -20 year olds straight from school, especially the latter ones who lived on campus. Events put on by the union and activities hosted particularly during Welcome Week tended to address the needs of the traditional students and live up to expectations of heavy socialising centred on alcohol. Despite attempts to develop more

inclusive and less alcohol focused experiences, interviewees noted that mature students and those who lived locally and travelled in on a daily basis, still reported feeling excluded from the activities and from the student union and the sports teams because of expectations concerning alcohol consumption.

4.2.4.4 The student union

A number of the interviewees noted that the student union had also experienced problems in catering for the diverse needs of those who drank alcohol and those who did not. The union was seen to be associated with alcohol use, both in terms of its facilities and the activities it supported, which according to the interviewees seemed to be largely directed at traditional students. They were concerned that international and mature students and younger ones who did not drink alcohol were put off by the emphasis on alcohol in the union itself and the particular types of social activities that they organised. As one interviewee said *'I think they'd tell you in no uncertain terms what they think of the student union and their non-provision for students who don't drink'*. Here, they noted that the union had the difficult role of balancing the needs of various groups and also the need to maintain their own viability and work effectively with the university. Some HE staff and representatives of the student union pointed to changes that had been made to develop a less alcohol focussed and more inclusive experience for all students. Attempts to de-emphasise alcohol and drinking resulted in the development and implementation of policies on alcohol as well as changes to the union facilities and to the creation of formal links with clubs in town. However, the reduction in usage of the union building as a consequence of these changes and the need to be economically viable meant that the recently instigated no-alcohol policy on the ground floor of the union was reversed during the academic year and alcohol, music and dances reintroduced. As well as traditional students, sabbatical members of the union pointed to an increase in mature and international students once the beer pumps had been restored in the ground floor, which seemed to indicate that there were non-traditional students who also appreciated the changed atmosphere. However, other staff members also related concerns they had received from other students who regretted the changed emphasis and thought that the student union did not do enough to encourage the inclusion of non-drinking students or those whose alcohol consumption and desire for partying and clubbing was restricted. Trying to balance the needs and wishes of the diverse student body was a particular issue for the union.

4.2.4.5 University facilities

Some interviewees drew attention to the limited range of university leisure facilities to meet the diverse needs of the students which they felt encouraged students to focus on the night club and alcohol based activities. They also noted the apparent reliance on the student union to provide such leisure opportunities for students which they felt emphasised the nightclubs, sports teams and alcohol based social activities. This view was expressed by at least one of the external interviewees as well as internal staff. Interviewees reported concerns from non-traditional students that there were too few alternatives to address the needs of those who did not use, or made only limited use of, alcohol, both within the union and separate from it. For example, it was noted that the union organised social activities such as nightclubs which included transport to and from the venue for students in the town centre, but there was less support for non-alcohol related activities such as trips to the theatre or cinema. However, some interviewees also referred to a range of non-alcohol related activities that were promoted within the university and which some students took advantage of. These included

the gym and the department set up to encourage student volunteering, etc. in addition to the union activities. They considered that the problem was one of the students not taking up the opportunities offered rather than one of availability. Overall though there was a view that the university should ensure the provision of alternative facilities and activities to meet the needs of a wider range of students and to discourage the perceived emphasis on alcohol related socialisation.

4.2.4.6 University operations

One matter raised concerned the implications of the diverse nature of the student body on the operations of the university and the extent to which the university could accommodate the range of views on alcohol. Some interviewees reported that alcohol was such a significant factor for some minority groups that its presence at university events would prevent them attending. Traditionally alcohol had been served at such events although soft drinks were also available. However, there was increasing awareness that some students and/or their families, usually for religious reasons, would not attend events where alcohol was served, and this raised the question as to whether the university '*was excluding them by serving alcohol*'. It also presented the university with the dilemma that if the event became alcohol free, then those students who wanted to celebrate with a glass of champagne would also be disadvantaged. Increasing diversity amongst the student body meant such dilemmas would become more salient; that, as one member of staff put it '*I think it's going to become more of an issue*'. Thus, the extent to which, for example, the university should adjust its traditional approach of allowing alcohol to be served at formal events such as graduation was raised as a matter that perhaps needed to be addressed if the university was to meet its obligations under equality and diversity legislation.

Some interviewees considered that such diversity issues needed to be dealt with explicitly in terms of policy and procedures. Others commented more generally on the need for the university to address the tensions associated with differing views on alcohol use between groups. Often this was viewed as a need for the university to ensure a culture in which the behaviours of one group of students did not adversely affect the experiences of others, and notably, that those who drank alcohol did not negatively impact on the experience of those who did not. Here, the university's responsibility to ensure equality and positive experiences for all groups of students is accepted but stops short of advocating specific policy and procedures to deal with the cultural diversity.

4.2.5 The involvement of external agencies in student alcohol use

Interviewees referred to a wide range of agencies and individuals involved in students' use of alcohol. The university and colleges were perceived as part of a larger network of organisations which both influenced and were affected by student alcohol use. Some of the agencies were seen to be directly connected with the students as students, whilst others were perceived to be involved because the students were members of the general public.

4.2.5.1 Licensed premises - clubs and pubs

Clubs and pubs and other drinking venues were referred to in both negative and positive terms. Some clubs in the town had developed specific relationships with the student union to support student nights. These were seen as beneficial to the students in that they offered a

more protective environment in which students could socialise and drink alcohol without clashing with the general youth of Northampton, they had some degree of responsibility to ensure the welfare of students so that they provided safe places for them whilst waiting for taxis or coaches to return to campus, and they tended to treat students more sympathetically when they had had too much to drink compared with how they dealt with attendees on non-student nights. As one club manager put it when speaking of handling students *'we do tell the door staff to be more tolerable to them and more kid gloves... generally and softly, softly with them, you know, instead of grabbing them by the scruff of their neck and marching them through the front door'*. However, some expressed concern that the provision of a student union arrangement with an organisation whose bottom line depended on the amount of alcohol drunk by its clientele reinforced the perception that drinking large quantities of alcohol whilst socialising was approved behaviour. In addition, there were concerns that events off campus were generally less safe than events on campus and opened up students to potential harm from members of the public and from mishaps resulting from their own and others excessive drinking in town or when travelling home. Whilst disturbances on campus had reduced in consequence, there was some concern that this was not the best way to deal with problems arising from excessive drinking and large scale social events.

However, external interviewees also pointed out that not all students drank excessively, and not all students who drank excessively did so all the time. Interviewees involved in pubs referred to students who would go for the facilities such as the games or go in for a meal and have very little alcohol if any. As one pub manager said *'and we get students, to be fair that come in here and will have a soft drink and socialise and have dinner'*. The same participant also mentioned those who went to the pub to watch the football and who drank very little. He talked of tolerating them knowing that often they'd have students in on other nights who would perhaps have rather too much alcohol to drink.

4.2.5.2 Supermarkets

Local shops and supermarkets were viewed negatively by both HE and external interviewees, largely because they provided opportunities for students to purchase alcohol cheaply. Staff commented on the campus shop which sold alcohol *'where quite a lot seems to walk out of the door'*, but noted the practical difficulties in changing this *'it's unlikely that we'd get a tenant in if we said "you're not allowed to have a licence or a licence opportunity"'*. The external interviewees who were involved in the drinks industry through clubs and pubs viewed the supermarkets as undercutting them, but all interviewees who mentioned them, including the externals, expressed concern that the cheap alcohol both encouraged students to drink more and, specifically, that they were encouraged to 'pre-load' before going out to licensed venues. Pre-loading was seen as a dangerous activity, whereby students drank quite large quantities of alcohol in a short space of time prior to going out in order to reduce the need to purchase alcohol at the licensed venues. Interviewees reported that the students often went out without realising the impact of the alcohol on their system and arrived at the clubs already intoxicated. For the clubs, this had a deleterious impact on the commercial wellbeing of the venue, but also created problems for the management in dealing with students who were intoxicated very early in the evening's entertainment. Other interviewees expressed disquiet about the increase in unsupervised drinking taking place in student accommodation with no-one to monitor their state of intoxication, as well as concern for the health and wellbeing of students who left the campus for a night out already intoxicated.

4.2.5.3 Transport

Transport was referred to in a number of ways. One main issue raised was that of the use of buses to take students to and from the nightclubs on designated student nights. They were viewed as enhancing students' safety, especially on the return journey. However, the provision of buses could also be viewed as giving approval for students to get drunk when out; the students could perhaps drink more than if they had to find their own way back to the campus. Comments were also made that this safety net was only available to students living on campus - those who lived in the community did not have access to the service. However, it was argued that the more vulnerable students - ie the first years whose experience of alcohol, clubs and Northampton was more limited - were more likely to live on campus. Those living in the community had perhaps more experience and were better able to look after themselves.

Interviewees also referred to taxis which students used after a night out and some expressive sympathy for the impact of excessive drinking on the taxi drivers. Occasional problems of non-payment which reached the university authorities were recalled but most of those interviewees who mentioned this form of transport viewed it positively and felt that it was not problematic.

4.2.5.4 Health services

Some interviewees were connected to the health services by their occupations but many others referred to them when considering the impact of student drinking. The overall view from both those engaged in the health provision and other interviewees who mentioned the services was that it was difficult to assess the extent to which students drew on the services as a consequence of alcohol use. Records were not normally kept of students separate to those of young people in general. For example, if a student was injured through their own drinking or that of another, and went to A&E it was unlikely that their status would be recorded. Thus obtaining specific data on students' use of services was seen as problematic.

Communication between the health services and the university was viewed as limited. Unless the student had a severe problem which affected their ability to carry out their studies, the view was that university personnel would be unlikely to hear of it. However, on occasions, university and college staff did refer students with issues related to alcohol to the various agencies, but again, their experience was that it was unlikely that they would hear the outcome of the referral unless the student advised them directly or gave permission for contact to be made with the health service. External service providers also expressed some concern that not all students were registered with a general practitioner (GP). GPs acted as the main referral agency for alcohol problems. For example, if a student attended A&E several times for alcohol related problems then the service would try to refer them to their GP who could then make referrals to the appropriate specialist agency. Unless students were registered with a GP they would be lost to the system and were unlikely to receive the help that they needed. Whilst the numbers needing to be referred were not considered large, perhaps *'half a dozen'* in the busier weeks, it was suggested that the referrals could perhaps be made directly to the university so that someone could raise the issues with the student and direct them to appropriate services.

4.2.5.5 Alcohol services

A number of external agencies specialised in alcohol problems locally. Whilst it was difficult for either the HE institutions or the agencies to be precise about the extent of the student alcohol related problems that were referred to them, interviewees from both sides spoke of working effectively with the other. Thus members of the university spoke of drawing on the services' expertise for staff development and training in relation to alcohol issues in their students. Interviewees from the agencies spoke of providing staff to support activities such as Welcome Week and other student oriented events in order to raise student awareness, to advise them on the issues associated with alcohol use and to try to deter them from excessive drinking. Agencies spoke of working with the students over a range of alcohol issues, both in terms of addressing student dependency on alcohol but also in connection with problems arising for the student in relation to a family or partner's dependency on alcohol. In addition, service providers spoke of referring clients who were dealing with their alcohol problems to the university, considering that educational courses often enabled the person to bridge the gap between their past alcohol abusive life and their future '. They provided support for their clients' attempts to move to education through referring people *'directly to the university and just our encouragement of people getting into HE'*.

4.2.5.6 Police

The police did discern differences relating to student drinking, but only in so far as there were fewer problems on the nights when it was just students drinking in town as opposed to nights when the general population and students were in the town centre pubs and clubs. The view of one of the police officers when talking of Monday nights which is a student club night, was it was *'no, not a major problem'*. Later in the week there was more trouble because of the broader demographic engaged in drinking in the town centre. Then they spoke of problems when policing the main area where the clubs and pubs were concentrated, especially if flashpoints arose elsewhere and all their resources were already committed. They spoke of difficulties in getting the balance right concerning keeping the peace and allowing people to enjoy themselves *'having enough visible presence there and letting people have a good night and enjoying themselves'*. However these were general concerns, not ones specifically related to the students. Apart from student club nights, when it was evident that they were students, they were perceived as members of the general public and considered as such.

There was only limited mention of police involvement on campus and the interviewees from the police and the university staff could recall very few incidents when the police had been involved in alcohol related incidents on campus. Whilst the interviewees expressed the view that drinking was part of the culture of university and what the students expected, the police were invited to activities such as 'Welcome Week' for new undergraduates. Their role was to deal with any adverse behaviour arising as a consequence of consumption and to try to reduce the level of disorder and harm associated with alcohol use. Thus they advised students on how to keep themselves safe and worked with members of the health promotion team to raise awareness of the dangers of excessive drinking.

4.2.5.7 Parents and guardians

Counselling and mental health teams and the alcohol agencies were more likely than other interviewees to refer to parents and guardians in their interviews. They spoke of students' concerns that parents or guardians might find out about their alcohol usage when they had

been brought up to see it as inappropriate behaviour. They talked of how the parents' culture and their negative views towards alcohol consumption led to conflicts and tensions within the student and put pressure on the student particularly when the academic term was drawing to a close and the student was expected back at home. However, they also perceived students experiencing problems because of parental dependency on alcohol, of how university could be an escape mechanism from dealing with such difficulties and the impact of the parental drinking on the family more generally. Very few interviewees spoke of parents and guardians in terms of their involvement in dealing with alcohol related problems experienced by the student.

4.2.6 Addressing alcohol related problems

The focus in this section is on the various current approaches to dealing with problems arising from students' use of alcohol. It can be distinguished from the following section through its emphasis on structural issues rather than on ways of working directly with students.

4.2.6.1 Institutional policies and guidelines

There was some uncertainty from internal interviewees in the university as to whether the institution had a policy specifically addressing student alcohol use. Interviewees from the colleges were more confident that their establishments had policies in relation to alcohol use but recognised this as a consequence of their need to deal with students under the legal age for drinking. However, the majority of interviewees from the university considered that there were existing policies and guidelines in place that would cover students whose behaviour was problematic because of alcohol use. Such policies and guidelines related to specific academic issues such as the 'fitness to study' policy as well as the student code of conduct which covered all behaviour across the learning experience, including any that might arise as a consequence of alcohol use. Accommodation contracts could encompass alcohol related inappropriate behaviour. Those involved in pre-admission contact and Welcome Week programmes for first year undergraduates and the orientation programmes for international students referred to sessions which addressed alcohol issues and attempted to both advise students on the kind of behaviour that might be encountered in relation to the use of alcohol and offer guidance on ensuring their own personal safety.

Interviewees referred to more local, informal, policies, so that for example, the counselling service would not undertake appointments with students who arrived under the influence of alcohol, largely because it would not be possible to work effectively with them. There was some mention of lecturing staff excluding students attending practical sessions when intoxicated, but again this was informal. Students living in the flats in halls were asked to negotiate and sign a 'community living agreement' which involved residents agreeing appropriate behaviour in the flat. Whilst it did not specifically relate to alcohol, this was something that could be included and the interviewee considered that it might be a way of reducing any alcohol related problems in halls. In general, however, it was unclear whether such local and/or informal policies affected student alcohol related behaviour.

Interestingly the university's student union had implemented a policy on alcohol which the union executive had recently drawn up and passed down to the bars in the union. The union executive's view was that *'this is what we decidedit's in the best interests of our students'*. Thus the executive had to explain to students why they were not providing cheap alcohol

which many expected. They presented it in terms of what else they offered to the students and justified it in terms of prioritising the students' welfare, both to the students and to the university. In particular, they referred to changes in managing alcohol sales, so they no longer had alcohol promotions such as 'buy one get one free' or sold cheap alcohol. They also took a stance on sports teams' initiations so that now the teams had to submit their plans for the initiation activities to the student union prior to the event and the outline had to have *'all the units [of alcohol] in it as well, so that the sports officer and bar manager could review them'*. The union executive would refuse to allow certain activities if they considered them to be unsafe.

4.2.6.2 Disciplinary procedures

Problems that were alcohol related were dealt with in the normal disciplinary procedures of the individual HE institutions. Interviewees reported that there were two levels of disciplinary procedure in the university which had been brought in two years previously. Level 1 dealt with minor incidents where the principal warden and head of student services met as a level 1 panel and met with the student normally within two days. The panel is *'empowered to impose penalties including a fine of up to a couple of hundred pounds and restrictions on what they can access, what the student can access'*. The panel often used what is termed a partially suspended sentence where the student is asked for the first half of the fine immediately and the second half would be required if they continued to be troublesome. University interviewees reported that more serious issues would go to a level 2 panel but the view was that since the change in the procedures then the number of cases at this level *'have reduced dramatically'* and that it would probably be a matter involving criminal charges before it got to a level 2.

Similar forms of disciplinary procedures were reported by interviewees in the colleges. Often, their more intensive relationship with the students meant that they became aware of individual issues, such as transgressing their alcohol ban in the student residences, at a stage when they felt they could intervene on a more personal level with the student, but repeat behaviour was not condoned. More serious problems would go directly to the disciplinary procedure.

The perception of staff involved in the disciplinary process across all institutions was that it was not necessarily about punishment but about changing behaviour to a more acceptable form. They reported that where problems had arisen in relation to alcohol then the first step might be to try to determine why the behaviour occurred and then to help the student deal with those issues. Where it was found that alcohol was being used as a coping mechanism for other difficulties related to the student's academic or personal life, support services would be called upon, and these might be internal or external agencies *'depending on what the individual felt most comfortable with'*. Talking was seen as the first stage in the process and only when that did not have an effect would the disciplinary process be implemented. Here though it was stressed that it was used to change behaviour *'so we make a lot of use of things like suspended penalties so "look, you know this is why you shouldn't do it and this is why you're impacting. Now go away, don't do it again, but if you do then you will be paying a large fine or you will be told that you have to leave halls...'*

4.2.6.3 Preventing problems through staff training and development

What came through from all institutional staff – front line as well as those involved in managing services - was the emphasis on trying to prevent problems from developing. This occurred in a number of different ways but ranged from building relationships with the students to creating a positive environment and trying to change the culture. Staff development was key here and there was evidence of training to help front line staff in particular deal with situations in a way that was non-confrontational and didn't encourage the problem to escalate. Thus staff had received training from external agencies, such as CAN³, the Suzy Lamplugh Trust, the Northampton Chamber etc. on topics such as the nature of alcohol and on managing conflict, as well as training from internal sources such as the counselling service into basic counselling skills

In addition, a system of red and yellow letters had been brought in to reduce the number of confrontational situations so that *'instead of actually standing there and arguing the toss with a drink you go away, you give them this thing and that allows you to exit ... and what this letter says [is that] you are now going to be called to a meeting the next day and so it allows that person to say "this is unacceptable, take this", and it allows them an exit from that situation'*. The emphasis was on ensuring that the staff were not put in danger and that if they considered that anyone else was in danger then they would call security or security would call the police.

For staff dealing with students in the halls of residences, procedures or protocols were in place concerning how to speak to students and how to behave in particular situations in order to defuse situations. There were clear guidelines and expectations for residents which were set out in the halls of residence contract and much of the staff training involved making sure that students were aware of that *'so in terms of not creating noise, behaving in an appropriate way, listening to instructions from staff, there's reinforcement that can be made that way'*. The view that pertained was largely one of support and recognition that students, especially the first years in halls, were still finding their way and that whilst they came to the university for an academic qualification they were also learning more general skills as well. The view was typified by one participant speaking of dealing with a student who had been abusive after drinking alcohol *'students are here to learn and that's not just academic, that could be life skills and that people sometimes do need a second chance, yes they need to take responsibility for their actions but we're not, you know, into making kind of you know, it's not necessarily a punishment, it's more about correction'*.

There was considerable emphasis on the importance of the housekeepers in providing guidance and support in halls and noting when students were experiencing problems that might be alcohol related. *'in cases where people are misusing alcohol in an extreme way that its getting to the stage of actually being damaging for their health, perhaps in an acute way, they can offer, you know, guidance and referral, either to the counselling mental health teams here on site or externally, and we've had a couple of instances where we have had students that have had quite significant alcohol problems that we've been able to refer in that way'*. As front line staff members were likely to be the first to be involved when problems occurred in the halls, their role in building relationships with the students was seen as critical. They were viewed as *'the eyes and ears really and a shoulder to cry on'* but their records of incidences and problems were key in determining whether there were ongoing issues with

³ CAN is the operating name of the Council of Northampton on Alcohol Addiction

specific students or flats which should be brought to the attention of the residential life team who would then go in to address the problem. If their intervention did not resolve the problem then the disciplinary procedures might be initiated but where possible it was hoped that the staff would note those students whose behaviour was causing concern and deal with it before it got out of hand and triggered disciplinary action.

4.2.6.4 Creating a positive environment

There was an emphasis on the importance on maintaining a positive environment in order to prevent problems emerging. This was referred to both in terms of student staff relationships and in relation to the more physical aspects of the campus environment. Thus interviewees commented on the impact of refurbishment of the common rooms in the halls on student behaviour related to keeping them clean and free from rubbish. Parties where alcohol was consumed were reported to be reasonably unproblematic and where problems did occur and rooms were left in an untidy state, the students responded well to the domestic team when they brought it to their attention the following day and asked them to clear it up.

4.2.6.5 Working with the Student Union

Whilst reference was made to changing the student culture in general, particular regard was paid to the role of the student union. One of the main issues concerned the need to address the traditional emphasis on alcohol in the social activities arranged for 'Welcome Week' for the first year students, where traditionally there seemed to be considerable emphasis on activities that involved meeting in the bar, and where drinks tokens had also been available. Interviewees reported trying to work with the student union to change their traditional approach and *'to put on a programme over Welcome Weekend and Welcome Week that is not alcohol focussed, not just because we have students who don't drink ... but because we also have students who live some distance away and drive'*. In addition, interviewees reported that management and the union had worked together to create a *'non-alcohol space'* in the student union building; an alcohol-free café had been installed on the ground floor and alcohol served only on the upper floor. All interviewees referring to this development regretted that the pressures on the union to be commercially viable meant that this had foundered and alcohol had been re-introduced to the ground floor venue.

Staff interviewees reported linking in with the student union and *'encouraging them about sensible behaviour in terms of the sports teams and their behaviour on campus'*. The view was that this co-operation was successful and the student union had been effective in implementing their recently developed 'sports initiations policy' and changing the culture of team initiations. Where an issue over drinking games had occurred recently, the residential life team had been able to refer to the initiations policy when liaising with the student union staff who had then investigated the matter.

In addition, the union had amended its alcohol prices and changed its approach to reductions in pricing to reduce excessive and harmful patterns of drinking. It had also reduced the number of big events on campus that were traditionally associated with heavy drinking. Instead they had worked with clubs in town to provide venues for such activities and offer weekly student nights over which they could have some control. Contracts were established and the clubs provided buses to and from the campus to the town centre. The union had tried to stand firm when price competition from another nightclub threatened the viability of these arrangements. However, here views were split in that whilst this had reduced the amount of

drinking on campus, the concern was that the drinking was being carried out in a less safe situation in the town. In addition some interviewees commented that the students complained that the drinks in the union were too expensive and, because they weren't prepared to pay the prices in the nightclubs they bought cheap spirit to drink before they went out, thereby drinking in unmonitored home situations. Thus there was concern that the changes in the student union to reduce risky alcohol consumption had not amended the harmful drinking behaviour but just relocated it.

All interviewees recognised that changing the drinking culture was difficult - that the student union was a key element in attempts to do so and that it had particular difficulties in trying to encourage students to drink alcohol safely and sensibly through changes in its policies and procedures. Such difficulties related to a number of factors including the expectation of the students that alcohol in the union would be available and cheaper than elsewhere, that the union was independent though supported by the university, that it should be commercially viable, and that the sabbatical staff was democratically elected to serve the students and personnel thus changed annually.

In summary a range of institutional departments and policies and procedures were involved in addressing alcohol related issues. The next section examines ways in which students with alcohol problems are supported.

4.2.7 Supporting students with alcohol related problems

Interviewees reported a range of facilities that were available to support students who had problems associated with alcohol use. The range included student services, medical services, academic structures, the student union and referrals to outside agencies such as CAN and Aquarius. Student services comprised the Residential Life Team, the mental health team and the counsellors. Some medical services were provided on campus from a local GP surgery and students would have recourse to their own medical practitioners. Members of academic staff were also available to provide support through contact with students during teaching sessions and via the personal tutor role. We look more closely at some of this provision below.

4.2.7.1 Academic staff

Interviewees who were lecturers and personal tutors noted that few students revealed alcohol-related problems. Individual members of staff might note a pattern of non-attendance at particular lectures, usually early morning ones, or that they attended but were, in the words of one member of staff '*useless to themselves*'. Discussion with the individual student usually revealed that they had had too much to drink the night before. However, the general view was that if alcohol played a part in incidents which resulted in absence from class or delay in handing in assignments, then the student was unlikely to disclose this; they were more likely to stress other more proximal factors such as, for example, the injury arising from the drinking. Interviewees acknowledged that the extent to which they recognised that a student's academic difficulties might be alcohol related was very limited; that the matter of alcohol consumption was seldom addressed directly in discussions with the student. On the occasions when the student acknowledged that alcohol was an issue, members of the academic staff were likely to refer them to the counselling services or to student services for alcohol awareness leaflets and advice. However, there seemed to be some reluctance to refer for alcohol issues and staff seemed only to refer if the student themselves believed that they

had a problem with alcohol. Where a student stated that they were having problems with alcohol then staff would be more likely to refer them to the relevant service directly, but the overall tendency would seem to be to make a recommendation to the student that they seek advice and support, usually from the university support services. Occasionally the student reported that they were already receiving support; however, unless they were using the university's services, staff had no way of checking whether this was the case. Students would not always take such advice, often preferring to continue to see the academic, even though the academic did not feel equipped to advise them appropriately.

4.2.7.2 Academic structures

Interviewees also referred to the academic structures which provided the possibility of support for students encountering alcohol related difficulties through direct contact with personal tutors and academic staff and through the mitigating circumstances procedures. In addition, staff reported that the 'cause for concern' procedures could be viewed as supportive in that students who were not engaging, evidenced by non-attendance and/or non submission of course work, were brought to the attention of the course leaders and had to attend an interview in which problems interfering with their work could emerge and be addressed. Thus alcohol related problems could be noted at this point, and appropriate referrals or steps for managing them taken. Interviewees involved in this process reported that lack of engagement brought to their attention in this way was more likely to reflect alcohol problems. However, even in this situation the student was not likely to attribute their problems directly to alcohol but to indicate the problem was staying out or getting up late. As one interviewee reported *'I don't think the actual issue of alcohol consumption is addressed directly, perhaps it's assumed that if they are out late that equates to drinking as opposed to actually saying "I've drunk too much" although she also reported that "I do get the occasional student who does say "I do have a problem with alcohol"'*. In such situations staff's initial reaction was to enquire whether they were getting support and where from, and to refer to the counselling service. They noted that students who acknowledged they had an alcohol problem were usually already obtaining help from the counselling service.

In addition, academic staff noted that alcohol problems were sometimes detected by the smell of alcohol when students were interviewed in their offices *'you can smell the alcohol, not just fresh alcohol'*. Again, staff would refer them to student services for leaflets or to suggest referral to the counselling service. The difficulty for staff here was when the student informed them they were attending an external service provider because *'I have no real way of checking that'*.

Those involved in the 'mitigating circumstances' procedure were also more familiar with alcohol related problems as students reported the consequences of excessive use of alcohol by themselves or others which resulted in injury, preventing attendance at classes or submission of assignments. Again, such structures provided the opportunity for staff to follow up by advising personal tutors and module leaders of the situation and ensuring that students obtained the necessary support to recover their academic position.

4.2.7.3 Student services - the mental health team

Whilst most of the academic staff tended to report that they referred students with alcohol related problems to the counselling or mental health team within the educational institution, the counsellors and mental health team spoke of referring students with drinking problems to

the external agencies dealing with alcohol issues, which they considered more equipped to deal with them as the following extracts show *'we would suggest that they contact CAN or Aquarius, the sort of the experts you know'*. As another interviewee said *'if they do come [to see us] because of excessive drinking and probably the use of drugs as well and by that time it definitely is, it's affecting theiracademic work, going to, attending lectures and things are falling to bits... so we would refer them to CAN .. or to Aquarius, more often CAN because CAN can do a lot more therapeutic work'*. Thus the view of internal staff was that they did not have the expertise to work with a student whose primary difficulty was alcohol misuse.

The staff would take steps to support the students in contacting the external agencies, perhaps by being with them whilst they made the appointment over the telephone, or even making the appointment for them in the student's presence. In addition, they would work with the student on problems incurred because of alcohol use, such as difficulties with their academic studies, or relationship issues. Helping students to develop strategies to cope with these issues was a key part of their service. The following extract from one of the team in talking of a student with alcohol problems makes the distinction very clear *'that doesn't mean that we couldn't work with them on, you know, managing their studies but the actual counselling related to the alcohol issues, we wouldn't do that'*. Interviewees also reported that the student mental health and counselling services tended to provide short term support to enable students to address problems related to alcohol use by others that were impacting upon their academic work and their mental well-being. They were confident of their ability to provide support for the students experiencing problems through their peers', friends' or family's drinking.

In general, students for whom alcohol was the primary problem were viewed as unlikely to contact the counsellors or mental health team, but that if they did so, the interviewees doubted that the student would follow through. They considered that the nature of the alcohol abuse would mean that the person affected would only want to attend when they were not under the influence of alcohol or had a crisis, but that the desire to do so would disappear when they had had a few drinks *'they tend to be quite chaotic .. and they react to crises and they make an appointment when there's a crisis ... and they don't attend for the appointment, usually'*.

4.2.7.4 Medical services

Interviewees reported that students with alcohol problems might see their general practitioner who might deal with their alcohol problem directly or who would refer them on to the specialised services. Students are encouraged to enrol with local GP practitioners on arrival at the university and a local GP practice has a presence at the university for students who wish to join their list. Students living locally would maintain their existing GP. Thus information on student use of GPs for alcohol related problems is difficult to ascertain. Academic interviewees did report that they might suggest to a student presenting with alcohol problems that they go to their GP as well as to the mental health team.

Those in the colleges had a nurse on site and interviewees reported referring students to her when they encountered students under the influence of alcohol or ill from the effects of over consumption. They also reported that she would provide general sessions on alcohol and the dangers of excessive use. Interviewees noted that students sometimes approached the nurse directly after her general sessions to share information concerning their own, or more often, an alcohol problem with someone close to them.

4.2.7.5 Student union welfare staff

Interviewees reported that officers within the student union had roles that provided support from students with alcohol related problems. The student welfare officer in particular was used in this capacity, and usually worked closely with student services, but again, few references were made to students experiencing problem drinking. Rather the issues addressed tended to be related to other people's drinking which impacted on their academic work or well-being. However, it was noted that drinking was often a corollary of other mental health problems which the student was experiencing; alcohol consumption often exacerbated the problems and so played some role which needed to be addressed. The student union welfare officer would also contact the academic staff on behalf of the student to advise lecturers of the problems and enlist their support if applications for extensions or mitigating circumstances were perceived to be needed.

4.2.7.6 Community alcohol services

The community services did confirm receiving referrals for students and providing support for them. The interviewees from the agency reported that most of the referrals tended to come as self referrals or from GPs, and they noted that many of the students who did attend and whom they supported tended to be more mature students rather than the younger, more traditional ones. They also tended to be local or students who had moved to the university from elsewhere with existing drinking problems. The external agencies viewed the students as having problems similar to others, and therefore, apart from during the initial assessment process there was little to differentiate them from other young people. The exception perhaps was the timescale that they were working to with the client. With students they were conscious that they might '*disappear*' during the summer and thus had only a short time to work with them. In some cases they were able to refer them to the student's service in their home locality, but sometimes the students experienced difficulties with this, unwilling to admit to their families that they had a problem and fearing that they could be recognised and their problems get back to their families. Whilst this sometimes meant that they stayed in Northampton during this period and remained in touch with the agency, at other times it could mean a loss of support for the student. They also shared the view of the mental health team that the nature of alcohol abuse meant that student attendance would be limited, especially when the student was a younger one who '*would tend to come and not necessarily engage for very long*'.

Whilst there was overall a positive recognition of the strengths of the external agencies in working with those with alcohol problems, the situation was not unproblematic. Where both HE staff and an external agency were working with the student, communication could be difficult as the student had to give permission to both parties in order for them to speak to each other. Interviewees thought that where the student had a problem with misusing or abusing alcohol this might be too complex for them.

In summary, interviewees referred to a range of measures and support mechanisms available to support students in dealing with alcohol or alcohol-related problems. Some were internal to the university whilst others involved agencies in the community. Students' unwillingness to acknowledge the contribution of drinking to their problems and difficulties for internal staff in recognising the role of alcohol in student problems often affected the extent to which support was both offered and taken up. Whilst referral systems were in place, effective working

between internal and external agencies was often hampered by structural difficulties and characteristics of the students.

4.2.8 Changing drinking behaviour

A number of themes emerged from interviewees' considerations on how students could be encouraged to drink more sensibly. They ranged from thoughts about effecting change through university policy, raising awareness of both staff and students, changing the culture, presenting alcohol campaigns, the well-being programme and through the curriculum.

4.2.8.1 University policy on alcohol

Views of those interviewees who mentioned university policy in relation to changing drinking behaviour were mixed. Most thought that the university did not have a student policy on alcohol use, but considered that the general student code covered behaviour that would arise through the misuse of alcohol. Many tended to consider that a specific alcohol policy would not necessarily reduce the level of excessive drinking by students. In conjunction with the notion of an alcohol policy, there was some debate about the level of university responsibility re alcohol use by students with one view being that students were over 18 years of age and the university *'offers them a learning experience and it's down to them to take it'*. The alternative was that the university had a responsibility to guide students more generally and that this included in the use of alcohol. There was general agreement that it would not be appropriate to have a policy that banned alcohol use on campus, although the position of the partner colleges here was rather different to that of the university. Partner colleges, with their responsibility for students under the age of 18 years had to have an alcohol policy and these tended to proscribe the use of alcohol on campus except for those over 18 years and in specific venues.

There was though, general acknowledgement from interviewees that the university should be signalling that excessive use of alcohol was not appropriate. However, interviewees noted the difficulty of devising a policy to determine this when there was such variation in student response to excessive alcohol use. They commented on the problems in trying to legislate for a problem that was difficult to define and/or enforce *'you can't have a policy that says "if you drink to excess". What's "to excess"?''*. It was considered that students who just went to sleep after drinking constituted a different concern to those who became violent or aggressive with a view that perhaps the former would not create a problem for the university whilst the latter would. The implications of intoxication for the welfare of others would seem to be the primary consideration here; that for the individual student was perhaps of less salience, although it was clear from comments from interviewees that other staff and students were involved in ensuring the safety of students who had drunk too much. Thus wardens who had to deal with students who were drunk would try to ensure that flatmates or friends looked in on them occasionally through the night to ensure that they did not come to harm.

Other interviewees considered the possible differences in the university's role or responsibility for policy development in relation to the effect of alcohol use by students. There was some discussion around the differences between alcohol-related behaviour that affected learning and behaviour that affected other areas. Some considered that the university should perhaps be limiting its concern to the use of alcohol that impacted upon the learning experience of the student. As one interviewee from an external agency put it *'if the problems*

associated with their alcohol are coming into any of the learning environments, into lecture time or so on, or it's affecting academic performance, I think obviously that's.. that's something the university has to have a particular stand on and a fairly strong policy'. There was more uncertainty about the appropriateness of university policies and regulations concerning student alcohol use outside the learning environment. Here, greater emphasis was placed on the need to have a more adult to adult relationship with the students - and influencing students through the development of a sense of responsibility and community, for example 'influence is more...achieved by, I don't know, setting an example, encouraging students rather than making rules that if they break there are consequences'.

Interviewees' views about messages they felt that the university should be giving to students about alcohol use is exemplified by the following participant's comment *'the message about respect, other people's values and beliefs, the message about "yes you can have a few drinks and you can have some fun but it isn't, some behaviours, are not acceptable", and the message that we do protect people who experience the consequences of that and we don't cover it up and there is the follow-up support'.* Most university and college staff had views that the university should be encouraging students to consider the implications of their behaviour on others and that if any alcohol related policy were to be developed in the future, it should focus on the adverse consequences of drinking rather than alcohol consumption per se. There was sympathy for a view that students should be treated as adults and that they were responsible for the choices they made, including the use of alcohol. There was stress on the university's obligations to ensure that students were made aware of the need to respect the different views and approaches to alcohol of others and to respect those differences. Thus the consensus was that the university should provide guidelines and boundaries and be clear about the consequences of drinking - both in terms of the students' own well being, the consequences for others and the actions that the university would take if their behaviour was problematic for others or the university community.

There was some recognition that the university was part of the wider community and that excessive alcohol use by students could impact adversely on the general community. Here the university was seen as having at least a moral responsibility to address alcohol use by students and to ensure that it encouraged students to behave in a sensible way.

In addition, there was also some acknowledgement that a broader and more inclusive approach by the university might be needed if the excessive drinking culture was to be changed; that the university might need to rethink the way in which the physical environment was organised and how it operated outside of the largely 9-5 Monday to Friday academic timetable. There was a perception that young people who were away from home for the first time with probably a larger sum of money available to them at once and with limited alternatives to spend it on were vulnerable to socialising through excessive drinking. It might not be enough to just advise students of the risks and to be clear about the consequences; changing their excessive drinking behaviour might require a more comprehensive approach from the university.

4.2.8.2 Raising awareness

The theme of raising awareness was expressed in a number of ways. Interviewees talked of the need to raise students' awareness of the dangers of alcohol use. Both HE staff and interviewees within the community referred to this but within the context of raising awareness to enable students to make informed choices about alcohol use. As one put it *'it's*

awareness....it's, we're not trying to preach to them because at the end of the day now they're adults and they have got to try and become more responsible ... but it's just basically raising their awareness in relation to alcohol, drink spiking...'. They also acknowledged that any change had to be driven by the student; that, as one professional put it, 'at the end of the day it's informed choice and all we're doing is trying to support them and if they don't want to, if they're happy with their drinking habits, and don't want to change them, there's absolutely nothing we can do to change that.. all we can do is to raise the concerns and issues and the, you know, the dangers of that'. As these extracts also show, there was a sense that they needed to be careful about the way in which they attempted to raise awareness, that such attempts could fail if students perceived them as a means by which the older generation or authority tried to curtail their freedoms. Many interviewees therefore emphasised the role of the student union in being able to engage students and raise awareness of alcohol issues in a way that was more acceptable to the students.

Interviewees referred to current attempts to raise awareness. Mental health counsellors referenced the alcohol leaflets that they provided on the campus, in halls and in the student union, which focused on the ways in which it could affect mental and physical health. The student union mentioned leaflets and posters to help raise awareness, even pointing to posters that were available in the bar. Externals were also involved in activities to raise awareness. Reference was made to crime prevention officers working in partnership with the Primary Care Trust (PCT) who had a stall at Fresher' Week and advised the students of *'the effects of alcohol and the harm it can cause'*. The police also produced communications such as the 'Be Safe' free magazine and the leaflet 'Lock em in' which were aimed at young people to raise awareness of the adverse consequences of drinking alcohol. Whilst not designed specifically for students the materials were made available to the university and the informal view was that they were quite successful. However, such campaigns are rarely formally evaluated so determining their success, especially in terms of changing behaviour, is problematic.

Some interviewees spoke of raising awareness of support mechanisms to help those with alcohol-related problems. They referred to their knowledge that a small group of young people, including students, used alcohol for self-medication or as a coping strategy to deal with problems and that this group would be less likely to be influenced by general information about alcohol and would be more resistant to changing their pattern of drinking than the more socially oriented drinkers. Raising awareness of the existence of agencies that could provide help and support was considered to be important.

A further means of raising awareness that was mentioned related to helping the students understand the way in which they were being manipulated by various organisations and agencies, such as the drinks industry and the media, into assuming that high levels of alcohol use were common within society. For example, in considering possible health promotion strategies, one participant referred to the increased use of alcohol within television programmes over the years and the extent to which it appeared embedded within everyday life stating *'look at how much more alcohol there is on the television now than there was then. Getting them to think about what these messages are might work'*. Encouraging students to reflect on such media messages might increase awareness of the way in which they were being manipulated and lead them to reject the message.

4.2.8.3 Changing the culture

There was considerable reference to the need or desire to change behaviour by changing the university culture in relation to alcohol use. Interviewees considered it important to move away from an excessive drinking culture though most felt that it would be difficult to do so. They emphasised the need to develop a culture of moderation in drinking, where drinkers did not adversely affect the experience of non-drinkers and where non-drinking was acceptable. The majority would agree with the following view *'it's somehow about getting a culture where there's moderation ...'*. Whilst recognising that banning alcohol was not feasible or not necessarily appropriate, there was considerable uncertainty about how a more moderate drinking culture could be facilitated. Interestingly, for some respondents there was some sympathy for the dominant drinking culture - a perception that this pattern of behaviour was a short term phenomenon of long term standing and one which they themselves had experienced without enduring harm. However, this comparison was qualified by the statement that they didn't drink so much or drink to get drunk in the way in which students appeared to do so today.

Interviewees spoke of change not only in terms of the amount of alcohol being drunk but also the tendency to assume that alcohol was the only beverage that could (or should) be drunk in licensed venues. They considered how a student culture in which non-alcoholic beverages could become as acceptable as alcoholic ones could be developed, as the following extract from an external interviewee shows *'I mean the bigger issue is about how do you change the culture in the student bar? So how do you make it acceptable to have a pot of tea rather than ...buy a pint'*. Whilst recognition of the desirability of this was common, most respondents felt it would be difficult to effect this change. Some more optimistic interviewees drew comparisons with the way in which society's views on smoking had changed and therefore considered it feasible that the culture could be altered but were unclear how it could be done. Thus changing the current culture was seen as worthwhile, but the prevalent view was one of uncertainty as to how it could be achieved.

In discussing how drinking behaviour could be changed interviewees also referred to the culture in which getting drunk was seen to be associated with having a good night out; that the more embarrassing the situations the students got themselves into or the less they could remember the more indicative it was of having a good time and gaining peer approval. As one participant put it *'it's kind of like, you know, who's kind of embarrassed themselves the most had the best night... and it's about changing those kind of perceptions'*. Thus in order to change the pattern of irresponsible drinking behaviour, interviewees considered that student drinkers' values would also need to be addressed. One interviewee from an external agency expressed this view *'I think you've got to try and change the outlook on, it's not cool to get hammered, yeah .. and the only way that you can do that is to make it uncool from a student point of view'*. This view was expanded by another external participant who said *'this is the key cultural thing I think and this is what will affect your students is that you've got to get people saying not "are you having a good time?" but "are you drinking too much?" because if you're drinking too much then it's not cool, you need to go and talk to somebody'*. Despite this general consensus that there was a need to change the culture, there were few suggestions as to how such a change could be effected within the university whilst the broader social context and the general youth culture was unchanged.

4.2.8.4 Alcohol campaigns

Some interviewees spoke of the use of campaigns to reduce excessive drinking and encourage responsible drinking. A member of the student union executive referred to discussions concerning whether they should develop a campaign. There was recognition that any health promotional/educational campaign or attempts to influence students would be challenging the predominant culture and interviewees noted the difficulties of developing a viable campaign. The following quote given by one participant provides a typical view - *'I would venture to suggest that any sort of educational campaign is going to be fighting against an enormous peer culture'*.

The view was that it was important to develop a campaign that appealed to the students and so it couldn't be one where the message was that alcohol was bad for them or that the students considered that they were being *'preached at'* because they felt the students would switch off at that point. They referred to working with full- and part-time health professionals to promote student health, and student union personnel reported having campaigns on different topics at least twice a term in which alcohol would feature but spoke of the need to exercise caution saying *'we do try and advise on sort of healthy drinking, not too much of it ... because they just see us as their parent preaching again to them'*. Conveying messages where it was appropriate to just drink a couple of drinks *'there's no shame in just having one or two pints'* were seen to be more suitable. Thus whilst the value of campaigns was recognised there was a clear view that such campaigns needed to be sensitive to the student audience, otherwise they would be rejected.

There was also a belief that as students progressed through their course of study their familiarity with and their attitudes towards drinking alcohol changed, and that campaigns would need to reflect this. They considered that the increased experience of students in the later years of study could make them more sceptical of messages that said, for example, that anything more than two pints on a night out was bad for them, because they had seen other students drinking excessively without any obvious adverse effect and indeed that such drinking might be associated with positive outcomes. As the same union executive member said of later stage students *'there's people who've been doing it for four years .. who are, I wouldn't say fine, but ... you know they've survived through it and these are the ones who come out with the great stories'*.

Interviewees recognised that the majority of students were young people and therefore campaigns aimed at the general public in this age group would also be relevant, but this was also qualified by the view that students were also different. However, interviewees considered that the educational campaigns needed to be informed by the target audience; they needed to address the interests and needs of young people. Some considered that better data and information on young people's drinking behaviour and its consequences in a local context was needed. A few external interviewees referred to advances in this process which had provided a firmer evidence base for local health promotional literature. A consistent view from both internal and external interviewees was the need for campaigns to be focussed on matters that students perceived to be relevant to them and a view that health issues on the whole did not concern them. Some considered that the students, as with other people in their age group, would see themselves as invincible. Others considered that they were resilient and didn't yet see direct evidence of harm. Speaking of working with students one member of the teaching staff said *'They don't see that it does damage to their body. As far as they're concerned they drink it [alcohol], next day they're all right'*. Most considered that the

traditional students would not see the long term adverse health consequences such as liver damage, etc. as being relevant to themselves. One external interviewee remarked *'you can talk about what's going to affect them now, they don't think about what's going to happen in 20, 30 years time'*.

Alternatively some interviewees suggested that direct communications that focussed on what the student could do immediately to support their health rather than raising a general concern about long term health threats might be effective. Suggestions included providing simple messages such as *'a good rule of thumb is you give your liver a rest for at least two days each week'*. Others referred to using messages pointing out the immediate consequences in relation to a broader array of issues, including academic and social ones, suggesting, for example, that drinking more than a specific amount could adversely affect their results or that it would damage relationships. There was a view that the general public campaigns that focussed upon immediate social consequences such as accidents, vomiting, and being dishevelled, and the use of visual media that used real life clips of drunken young people in the town centres would be more effective than those which emphasised long term health implications of excessive drinking.

4.2.8.5 Well-being programmes

Several interviewees spoke about the possible development of programmes designed to increase understanding of health and well-being amongst students in which alcohol could be included. Some thought in terms of programmes that could be embedded within the course curriculum and which could be accredited. Others thought in more general terms such as ones being made available as part of the Freshers' Week/Welcome Week programme. However, whilst acknowledging that programmes could be developed many were sceptical of their impact on the student group most at risk. As one interviewee said *'I don't think they believe, young people believe it will affect them. They don't believe anything will affect them and I certainly don't think they think they're all going to die of cirrhosis of the liver'*. In addition, there was a recognition that the prevailing drinking culture would operate against them *'they [the students] see it as normal behaviour so our students don't see anything wrong in what they're doing'*. An alternative suggestion was that the university should work with the student union to develop an overall package that included a broad array of health concerns as well as alcohol and perhaps consider the appointment of a health professional *'to drive those campaigns'*.

4.2.8.6 The curriculum

Some interviewees spoke of elements in the current course curricula where students already encountered alcohol related issues. Whilst one might have expected this to occur in professional courses, such as health, social work and education, it was not confined to such courses. For example, one set of students taking media studies had projects in which they engaged with issues related to alcohol use. Thus at one level, some students were already aware of problematic effects of alcohol use. However, staff drew the distinction between learning within the course and applying such learning to their own circumstances. Students appeared aware of the issues within the course context but it was questionable whether this understanding transferred to drinking in the evening or weekends when they were in more social situations. Whilst acknowledging that some students seemed to be influenced by what they had learnt, some interviewees were doubtful that increased knowledge on its own would

lead to behavioural change in all students. However, they concluded that increasing the visibility of alcohol related issues within their academic courses might have some impact.

4.3 Summary

The aim of this element of the research was to determine the views of those within the university and the partner colleges and those in external organisations who we considered would be knowledgeable about students' use of alcohol. It is possible that the way in which we selected our informants might not have enabled us to include all those with something to contribute to the discussion. For example, we are aware that we were unable to access the GPs involved with student health and therefore may have missed a crucial perspective. Similarly we did not have full access to a representative from the off-licenses - independent or in supermarkets - although we had a contribution from the campus shop. However, the nature of such qualitative work is to draw together a range of views, and the data generated by the existing interviewees was considerable. In this chapter, we chose to focus and report upon the broader dimensions of the data rather than the specifics although the more specific information provided by interviewees will provide a valuable resource for subsequent developments within the university.

In this summary we focus on a number of key issues that arose out of the interviews and subsequent analysis. We noted that many interviewees thought primarily in terms of younger students living on campus when considering student alcohol related issues. The references to other more mature students, international students or those from ethnic minorities tended to arise in relation to exceptions to the prevailing perception that students were young, in full-time education and living away from home independently for the first time. How much this is a reaction to the cultural stereotype of a student and how much of it results from alcohol related contact with this group is uncertain. Those in higher education were more aware of the diversity of the student body; those in the agencies and external organisations tended to be far less aware of the different groups. Again, it is difficult to determine how much the externals' perception is founded upon a cultural concept of university students and how much of it relates to their knowledge of, and experience in dealing with, alcohol related issues, where much of the emphasis and often activity, such as in the town centre on club nights, has largely related to young people. For the majority of our interviewees then, student drinking relates to the visible world of young people drinking excessively, both off campus in licensed venues and on campus in the student union and residential accommodation, normally at night.

We noted a considerable degree of congruence between the views of those within the university and its partner colleges and those in the external organisations. The majority spoke sympathetically of a culture predicated upon alcohol based socialisation, with students taking advantage of a time without responsibilities, other than their academic studies, when they could fully participate in leisure activities. They identified that many of the students had recently left school and were living away from home and their parents for the first time. Their concern was not to stop them drinking alcohol or adversely impact on their ability to enjoy themselves, but to reduce excessive alcohol consumption and the problems, both for themselves and others, associated with it. The view expressed by the majority was that the students are still learning how to be an adult, that they are likely to make mistakes and that the role of staff and others in the community was to be supportive, providing that the student stayed within acceptable boundaries and did not cause harm to others.

All recognised the potential harms to students of excessive consumption and referred variously to a range of problems, including poor academic performance, health issues, finance, relationships, crime and violence and aggression associated with it. Staff from the university and those in alcohol-focussed services drew attention to the level of individual harm experienced by those who drank alcohol excessively and from incidents arising from others' drinking. In relation to broader issues such as abusive, aggressive and disruptive behaviour arising from alcohol consumption and affecting the university and its locality more generally, both internals and externals reported that problems were not usually serious, would seem to have reduced on campus in recent years, and compared favourably to the scale of disorder and injury seen in the town centre when the general populace went out drinking at the weekend. The exception seemed to be when events or night-clubs involved both locals and students. How far this is because the personnel involved take a more supportive approach to students who are drunk, and how much of it is due to the more limited numbers in the town centre venues on student nights or that students themselves see the environment as less threatening when there are only other students there and thus respond accordingly, is not clear.

Some interviewees drew attention to the harm that the drinking culture had for those who did not consume alcohol, raising issues of equality and diversity for the university, its partner colleges and the student union. Thus they highlighted that alcohol related problems are not restricted to alcohol abuse that can be addressed on an individual basis, but encompass alcohol-related issues that involve a much broader base and have implications for strategic, procedural and operational issues within the HE community. In addition, many of the matters they raise in conjunction with student alcohol use confirm the need to focus on environmental and structural factors within the local community and society at large. Issues of alcohol use within the university cannot be separated from the issues that affect alcohol use within society more broadly. The university is embedded within the community, not separate from it, and thus attempts to deal with the adverse aspects of student alcohol use require a more integrated approach.

CHAPTER FIVE - CONCLUSIONS AND IMPLICATIONS

The following chapter draws together what we have learnt about student alcohol (mis)use from the study and considers the policy and practice implications. Drawing together the three strands of the research is quite complex. Our participants have provided us with a great deal of data, and in bringing it together we run the risk of focussing on particular facets to the exclusion of others. We apologise in advance if we have not addressed aspects that readers might consider noteworthy.

There was a general consensus that the university culture is a drinking culture, often typified by excessive alcohol consumption. This view emerged from all three aspects of the research and was the case even for the three partner colleges where alcohol consumption on campus is constrained because of the presence of students who are not legally eligible to drink alcohol. Their higher education students were perceived to be aggrieved that they did not have the same privileges/flexibility to drink alcohol on campus as that enjoyed by their university based peers. The perception of a drinking culture was also common amongst those students who did not drink alcohol, or who drank alcohol in moderation. They expressed a concern that they often felt under pressure to drink, a view shared by members of the academic and support staff. This cultural perspective of excessive alcohol consumption tended to centre on a traditional view of university students as young people, living in university accommodation, and enjoying their independence for the first time. This view was borne out by the data from the students themselves in both the online survey and the focus groups, as well as by many of the internal and external informants.

Alcohol was seen to facilitate social interaction and assist entry into the university community, as well as provide a positive experience in terms of altered states of consciousness. The social affiliation aspects were considered especially relevant in the initial stages of higher education, so that first year students were considered to be particularly vulnerable both to the pressure to drink and the adverse consequences of heavy alcohol consumption, a view offered by both students and staff. Expectations of alcohol based socialisation at university were said to be formed prior to entry, and confirmed by aspects of the Welcome Week programme and the activities organised by the student union. Social normative data from the online survey, and data from the focus group discussions, indicated that students had global expectations of students' drinking behaviour and the organisation of activities around it.

For some students, alcohol was seen to offer a way of coping with other aspects of university life and dealing with negative emotions. Both students and internal and external interviewees referenced that alcohol could be used to distract from personal problems that might relate to relationship difficulties or academic problems, and to ameliorate negative emotions such as anxiety and depression. Alcohol use was also reported to cause such difficulties, and interviewees, especially those engaged in student welfare, were aware of the connections between alcohol consumption and the exacerbation of physical and/or mental health problems and tried to help students recognise that pattern.

Reports of drinking activity via the online survey and the focus groups revealed that a significant proportion of the student body was drinking at levels outside the government's recommended daily and weekly guidelines. Binge- or heavy sessional drinking was clearly evident, especially for the more traditional younger student who attended night-clubs and a range of social events. Despite reporting an array of problems associated with drinking

alcohol, students did not consider that their drinking was excessive. They made judgements based on how they felt, rather than in relation to alcohol units, and government guidelines were largely viewed as irrelevant. They also tended to think of alcohol related harm or abuse as occurring over a long period, and considered that their drinking was a temporary phase which would stop once they graduated and gained work and family responsibilities. Alcohol was viewed as problematic for the person who drank heavily over decades. In addition, many of the key informants also expressed views that were similar to those of the students - that their drinking was part of growing up and enjoying themselves at a time when their responsibilities were limited. They were however, more conscious of the direct harm that could arise from excessive consumption and were more concerned about the risks that students were taking with their health and education. They were also more aware of the effect on the wider community, in respect of alcohol fuelled anti-social behaviour, disorder and aggression. Costs to the university in relation to making good any damage to the environment, and to society in general, in terms of calls on the health and police services also figured more highly in their discourse. In addition, both non-drinking and moderate student drinkers drew attention to the adverse effect of alcohol consumption on fellow students, and some were also aware of the harm, in terms of health and educational achievement, that excessive drinkers were incurring.

The university, as evidenced in the interviews with staff in both the university and the partner colleges, was aware of problems implicit in student alcohol use and had taken steps to reduce the amount of harm and deal with issues as they arose. Whilst only the partner colleges had specific alcohol policies, most university staff considered that currently there were non-specific policies that could be employed to address alcohol related issues when they arose. There was some debate as to whether the university needed a dedicated alcohol policy. Support staff especially the residential team, domestic and security staff, considered that they had clear guidelines on dealing with alcohol problem behaviour, and the disciplinary processes supported them. The university had worked with the student union to reduce the focus on alcohol in their general activities with some success, although the tension between the student union's desire to act responsibly over alcohol sales and the need to ensure the union's financial viability created some difficulties. The importance of developing and maintaining good levels of communication and liaison with organisations involved with students' alcohol related issues was noted, although there were areas which some externals in particular, felt could be enhanced.

Most interviewees, both internal and external, reported that whilst some problem behaviour was associated with students' alcohol use, there were very few of what they termed 'serious incidents' and the level of disorder or anti-social behaviour compared favourably with that of young people generally who went drinking in the town centre. However, the information provided by the students themselves in both the online survey and the focus groups suggested that many problems, especially those of an individual nature, did not come to the attention of the university or colleges. Student support services were more likely to be aware of personal and emotional problems but these were largely brought to them by the students, or on occasion via the domestic and residential staff. Academic staff could pick up on problems related to the student's studies but often it was only when the student had neglected them to the extent that they became involved in the 'cause for concern' procedure or applied for 'mitigating circumstances' in relation to their assignments that any alcohol related aspects could be recognised. Underperformance, unless accompanied by lack of attendance and/or failure to submit assignments, would not necessarily be noticed.

There was concern over the impact of alcohol consumption on students' educational performance and achievement. Students in both the online survey and the focus groups, and interviewees mentioned problems with academic work, such as the short term effects of excessive drinking on attendance at teaching sessions, their ability to engage with activities when they did attend and the effect on completing assignments. In addition, longer term consequences relating to the acquisition of academic skills or knowledge important for study in subsequent stages of their qualification, and of reduced levels of attainment were raised. However, the impact of excessive consumption was not restricted to those who drank heavily. Moderate and non-drinkers drew attention to the adverse effect on their own learning and educational experience, through the reduced engagement of the drinkers in teaching activities or the poorer quality of social interactions. All drew attention to the importance of the first year, especially the first few weeks, in determining the pattern of drinking and the balance between socialisation and academic work, and many mentioned the difficulty of resisting peer pressure to drink. Differences in attitude to attendance were evident between the university and college based students, and those in the colleges with their more rigorous alcohol and attendance policies experienced less disruption to teaching and learning through alcohol misuse. This suggests the importance of contextual factors in shaping student behaviour.

There was considerable discussion about the degree of responsibility that the university should have for students' behaviour and well-being generally, as opposed to their learning and academic work. In relation to drinking, many mentioned that students were adults and thus responsible for their own actions. However, there seemed to be a common view that the university had at least a moral responsibility to ensure there were clear guidelines on what was, and what was not, acceptable alcohol related behaviour, and to support those students who encountered problems as a consequence of their own or others' actions. Staff and externals perceived the students as learning to become responsible adults as well as acquiring an educational qualification whilst they were at university. That view coloured their expectations so that they were inclined to be tolerant of alcohol related behaviour unless it transgressed boundaries and adversely affected others. Students were relatively clear that they did not consider the university should be acting as a substitute parent or authority figure, but did consider that it had a responsibility to protect non-drinkers from the adverse consequences of student drinking and to provide a range of facilities and opportunities that reduced the emphasis on alcohol activities to ensure that the needs of non-drinkers were met and to lessen the dependence on alcohol based socialisation.

One of the interesting factors to emerge was the place of home drinking in the students' alcohol consumption. Whilst much of student drinking is assumed to take place in the students' union and other licensed premises in town, the evidence from the students and domestic and security staff shows that a considerable proportion takes place at home, in student accommodation on campus or in town. Some of this is pre-loading, drinking before going out, fuelled by cheap alcohol from the off-licenses and consumed with the intention of getting drunk before going out to the night-clubs, pubs and parties. This pattern was confirmed by staff in the licensed venues who expressed concern about students arriving at their premises already intoxicated. Some reflects socialising at home, often with same sex friends or more general parties, but this form of alcohol consumption can also be heavy. Interviewees' concerns raised by such drinking relate to the lack of monitoring so increasing the risk from excessive patterns of consumption leading to problematic outcomes. Informal attempts to educate students on how to deal with drunken peers in ways that minimise harm were evident through comments from residence based staff, and those in the residences were more able to call on support from wardens and security if serious problems arose during the

evening and night. However, direct support for those in student accommodation in town was less likely and students were largely reliant on their peers. Home based students still living with their family, were less likely to drink before going out and less likely to drink excessively at home. They had patterns of consumption that more closely reflected those of the general youth population.

One aspect that came through from the data obtained in the focus groups and the interviews was the potential for attempts aimed at reducing harm to do the reverse. Here we think of the outsourcing of the regular student entertainment from the student union which means that campus based students are now also drunk and possibly disorderly in town. Contracts with the night-clubs to provide student nights and supply transport to their venues could be construed as encouraging students to indulge in alcohol without having to take responsibility for ensuring their own safety. Not lowering the cost of drinks in the students' union and disallowing price reduction promotions has meant that students have tended to drink elsewhere and possibly led to an increase in pre-loading in an attempt to avoid what they see as high prices in the venues in town. Instructions to bar staff and police colleagues to deal gently with intoxicated students might lead students to think that getting drunk is unproblematic. Thus, it could also be said of such decisions that just as the entertainment is being outsourced, so too are the problems. Alternatively such interventions can be seen as supportive of students undergoing a transition to adulthood and learning both how to socialise and how to drink alcohol in a way that enables them to make mistakes without undue risk and/or dire consequences. The assumption underpinning such decisions is that students will socialise with alcohol, often drinking excessively, irrespective of the university's approach. Therefore there is some onus on the university, often working through the student union, to ensure that such needs are met in a way that minimises harm to the community as well as to the individual student.

Such dilemmas would seem to be a fundamental aspect of dealing with a problem that the wider society has not yet been able to resolve. Whilst the university and colleges are independent communities, and perceived as such by those within and outside the institutions, they are not separate from society. As such their students bring with them the values they have developed in the broader society and enact them within this educational context. Thus some students bring religious and familial restrictions on alcohol to the institution, whilst others come from backgrounds where drinking is an accepted, if not fundamental, part of social life and bring those pro-drinking attitudes with them. Experiences within the university context may potentiate or change those values. For a proportion, the relative freedom from responsibility and parental control mean they are able to consume high levels of alcohol, with potentially damaging effects. However, such harm does not seem that dissimilar to that in the population as a whole. As with young people generally, those in the university who consume disproportionate amounts of alcohol are usually visible. The ones who drink in moderation do so far less publicly. For universities, this research has shown that issues associated with student drinking run deeper than problematic behaviour of the individual student due to excessive alcohol consumption. They reach to the core of university life and raise questions about the nature of a university education, its mission and purpose.

Implications and recommendations

Whilst this research has shown that not all students misuse or abuse alcohol, a significant proportion do, at potentially significant costs to their health, education and finances both in the short and the long term. Such behaviour also incurs costs for the university and society as

represented by the local community. These costs may be direct, tangible ones, such as those associated with making good damage to the environment or employing staff specifically to deal with problems arising from excessive use of alcohol. For the university, such costs include a higher estates bill to repair damage to halls or the campus or those incurred in employing additional security staff to ensure appropriate cover during the night. They include the additional workload on domestic and residential staff, student services counselling and welfare staff, academic and administrative staff as they deal with a variety of student personal, health, educational and disciplinary problems associated with excessive alcohol consumption. Less overt or immediate ones include the financial and reputational loss incurred through enhanced student drop-out and withdrawal rates, underperformance and lower levels of academic achievement associated with alcohol misuse. This also conflicts with a university mission of education as a positive transformative experience. Costs also include the potential damage to its reputation incurred through alcohol related student behaviour adversely affecting the local community especially in the immediate environs of the university, the town centre and in neighbourhoods with student accommodation. Additional costs to the community include the increased level of disturbance, especially in the town centre near to night-clubs and licensed premises, engendering a greater need for security personnel for the businesses, police surveillance and paramedic cover. Further costs are associated with any subsequent activity arising from alcohol related behaviour, such as those attached to an increased use of medical services and criminal justice proceedings. Whilst the general view of both the internals and externals that we interviewed is that these community costs are no more, and may be less, than are associated with other young people's alcohol consumption, nonetheless they are real and concerning.

The research has also shown that student alcohol (mis)use cannot be considered in isolation from the community in which the university sits. It adds support to the need for a multi-level approach to dealing with alcohol (mis)use involving action at the level of the student, the university and the community. Drawing on the research provided by this case study we would make the following recommendations for action by higher education institutions. We have categorised them into areas that address specific sectors of the internal and external community as follows:

We recommend that universities and colleges should:

- reflect on their current student focussed policies to ensure that the matter of alcohol (mis) use and abuse is addressed directly and the institution's position on the matter is explicit
- take a strategic lead on addressing student alcohol consumption and combine with relevant organisations within their community to develop policy and practice designed to reduce the level of alcohol (mis)use. Such a combination should include representatives from the drinks trade and the supermarkets as well as from public organisations such as the police and health services and the not-for profit alcohol services
- establish appropriate research related to the institution and its local community to determine and monitor the nature of student alcohol related (mis)use and to assess the effectiveness of interventions to reduce associated harm
- consider the implications of having a significant proportion of students who do not consume alcohol and may have fundamental objections to its presence on campus. They

should review their policies, procedures and practices to ensure that such students are not being disadvantaged in terms of their learning and leisure experiences

- reflect on their relationship with the student union to ensure that attempts to reduce the quantity of harmful drinking and to promote safe and sensible drinking are implemented and supported, and to make sure that any requirements to maintain financial viability do not threaten the successful implementation of those attempts
- review their relationship with the student union to further promote and enhance efforts to reduce the emphasis on social activities that provide opportunities for students to drink excessively and to strengthen the range of leisure activities available that do not depend on alcohol as a facilitator
- reconsider the structure of final awards to ensure that current regulations do not implicitly promote a pattern which enables students to perceive that they can socialise and drink heavily in their first year without such behaviour having adverse long term effects on their academic outcomes

The community

- develop their links with the community organisations and agencies (police, PCTs, not-for-profit sector, etc) to put in place programmes to monitor the incidence of student alcohol related problems arising both on and off campus
- make clear to those dealing with alcohol sales on campus and in the locality, either through licensed premises such as pubs and clubs or via off-licences including independent outlets and supermarkets, the university's attitude to sales promotions that encourage excessive alcohol consumption by students. They should remind them of their responsibilities concerning serving those already under the influence of alcohol.
- work with those in the community and in the institution who are knowledgeable in the field of health promotion and behavioural change to develop alcohol focussed programmes and materials designed to engage and positively influence higher education students' alcohol related attitudes and behaviour
- work more closely with the alcohol related agencies in the community to share knowledge and good practice in recognising and working with students with alcohol related issues in order to better support them

The staff

- raise staff awareness of the impact and consequences of excessive drinking on the personal and academic well-being of students.
- devise and implement staff training to enable staff to recognise when excessive use of alcohol may be contributing to the range of students' academic problems, such as poor attendance, late or non-submitted work, etc., and to support the development of skills that enable staff to take appropriate steps to ensure that such students obtain the help and support they require.

- encourage staff to consider ways in which they could provide learning experiences that satisfy the social and integrative needs of students as well as educational ones, especially in their first year
- encourage staff to consider how they could include evidence based alcohol related subjects into their curriculum in order to facilitate student engagement with the issues arising from excessive consumption
- consider the development of a well-being programme that addresses the dangers of alcohol, is accredited by the university and contributes to the overall academic profile of the students
- support the further development of counselling and mental health services in dealing with alcohol related issues affecting the students and in promoting the development of pre-emptive packages designed to reduce alcohol consumption and prevent such problems from occurring

The students

- include relevant information on alcohol use in pre-enrolment documentation for first year students to counter misperceptions of the predominant drinking culture and raise awareness of the potential harm of excessive consumption
- address the often biased perceptions of students that excessive drinking is an accepted norm of university life
- address the misperceptions of both students and staff that current patterns of excessive drinking by students have only limited and short term effects on their well-being
- recognise that their limited experience with drinking and the freedoms associated with increased income and lack of parental supervision make first year students in halls of residence particularly vulnerable to the pressures and adverse consequences of heavy alcohol use and consider how the range of social and leisure alternatives that might help to reduce this risk can be increased
- recognise that the development of a pattern of reliance on alcohol in the early weeks of university education is likely to be maintained by students throughout their university career unless the issues that underpin such a pattern are addressed
- develop and implement a programme of voluntary, possibly web-based, screening for students on their use of alcohol which provides a link to support such as a brief intervention programme or access to student service personnel for those wishing to change their behaviour.

The student union:

- should develop and implement clear policies over excessive alcohol consumption, especially in relation to initiation ceremonies and other events associated with sporting activities

- should address equally the social and leisure needs of all their students and ensure that those activities linked to alcohol use do not predominate.
- provide clear messages that excessive alcohol consumption is harmful and make available a range of materials that students can access and links to other relevant other bodies and organisations that raise awareness of the dangers of alcohol and advise on steps that can be taken to protect themselves
- provide welfare services that work effectively in conjunction with university services and community to ensure that students affected by alcohol consumption are supported

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APPENDIX 7.1

‘Student Choice and Alcohol Matters’ Steering Group membership

Dr Gillian Penny, Project Principal Investigator, University of Northampton

Sarah Armstrong-Hallam, Project Researcher, University of Northampton

Professor Hugh Matthews, Director, Centre for Children and Youth, University of Northampton

Alan T Burns, Local Area Agreement Policy and Performance Manager, Northamptonshire L.A.A. Partnership

Lesley Anne Hamilton, Associate Director for Partnerships and Relationships, NHS Northamptonshire

Jamie Allerton, Student Union Vice President for Education and Welfare, University of Northampton

Peter Bush, University Pro-Vice Chancellor, University of Northampton

Terry Pearson, Alcohol Strategy Co-ordinator, Northamptonshire Drug and Alcohol Action Team

Caroline Perry, Deputy Registrar, University of Northampton

Stewart Slinn, Nightsafe Co-ordinator, Northamptonshire Police

Mark Worthington, Community Safety Sergeant, Northamptonshire Police,

Robin Chapman, Deputy Principal (Curriculum & Quality), Moulton College

Barry Hansford, Director of Learning Support, Northampton College

Richard Irons, Learning Centres and Inclusion Manager, Tresham Institute

APPENDIX 7.2



'STUDENT CHOICE AND ALCOHOL MATTERS'

WORKSHOP

To consider the preliminary findings of the above project and to develop recommendations for policy and strategy to promote 'Safe, Sensible and Social' drinking in students

Supported by
The Alcohol Education & Research Council

AGENDA

10.00 - 10.30	<i>Arrival and Registration</i>	
10.30 - 10.45	Welcome, introductions and scene setting	Gill Penny Sarah Armstrong
10.45 - 11.00	The nature of the research project	Gill Penny
11.00 - 11.45	Findings from the student online survey	Gill Penny
11.45 - 12.30	Findings from the student focus groups	Sarah Armstrong
12.30 - 12.40	Pre-lunch round-up	Gill Penny
12.40 - 1.30	<i>Lunch</i>	
1.30 - 2.15	Findings from the interviews with key personnel	Gill Penny
2.15 - 3.45	Developing a strategy	Attendees
3.45 - 4.00	Closing points and next steps	Gill Penny Sarah Armstrong

APPENDIX 7.3



CONFERENCE ON 'STUDENT ALCOHOL MIS(USE)' Tuesday 30th March 2010

The Sunley Management Centre, The University of Northampton,
Boughton Green Road, Northampton NN2 7AL

CONFERENCE PROGRAMME

- 9.15 **Registration**
- 9.45 **Welcome and introduction** - Gillian N Penny (University of Northampton)
- 10.00 **Student Choices and Alcohol Matters - Students' alcohol (mis)use**
Dr Gillian Penny and Sarah Armstrong (School of Social Sciences, University of Northampton)
- 10.30 **Binge drinking and the Theory of Planned Behaviour in students**
Laura D. Maguire & Dr. Lisa Woolfson (Law, Arts and Social Sciences, University of Strathclyde)
- 11.00 **Impulsivity and student alcohol use**
Dr Gillian Bruce (School of Social Sciences, University of the West of Scotland)
- 11.30 *COFFEE*
- 11.45 **"I felt like I had to go there": social expectations and student drinking**
Dr James Nicholls (Media and Cultural Studies, Bath Spa University)
- 12.15 **What Influences Binge Drinking in College Students?**
Dougie Marks, (University of the West of Scotland) Professor Rory O'Connor (Department of Psychology, University of Stirling) and Dr Suzy O'Conner (NHS Ayrshire & Arran)
- 12.45 **The staff training scheme of the National Licensed Trade Association (NLTA) -**
Andy Richardson (National Licensed Trade Association)
- 1.00 *LUNCH*

- 1.45 **Under the influence? Will government guidelines and policies aimed at promoting responsible drinking shape my practice?**
Dr Jan Gill and Fiona O'May, F (School of Health Sciences, Queen Margaret University)
- 2.15 **The promotion of sensible drinking amongst students in Higher Education Institutions in the South West Region: A snapshot of current practice**
Dr Nikki Coghill and Judy Orme (Health and Policy Studies, University of the West of England)
- 2.45 **A theory-based intervention to reduce alcohol drinking in excess of guideline limits in undergraduate students using online and pen-and-paper communication methods**
Professor Martin S. Hagger and Adam Lonsdale (School of Psychology, University of Nottingham), Nikos Chatzisarantis (National Institute of Education, Nanyang Technical University, Singapore)
- 3.15 **TEA**
- 3.30 **Evaluation of a health psychology group intervention for binge drinking students**
Dougie Marks, (University of the West of Scotland) Professor Rory O'Connor (Department of Psychology, University of Stirling) and Dr Suzy O'Conner (NHS Ayrshire & Arran)
- 4.00 **An intervention to reduce alcohol consumption in undergraduate students using implementation intentions and mental simulations: A cross-national study**
Professor Martin S. Hagger and Adam Lonsdale (School of Psychology, University of Nottingham), Nikos Chatzisarantis (National Institute of Education, Nanyang Technical University, Singapore)
- 4.30 **Youth, drink and the city; 1950s to the 2000s**
Jane McGregor (School of Nursing, University of Nottingham)
- 5.00 **Closing thoughts**

APPENDIX 7.4

To show the conversion of the Online Survey response codes to the original responses codes of the AUDIT

Revised AUDIT response codes used in the online survey	AUDIT response codes
For AUDIT question 1:	
Never	Never
Less than once a month	Monthly or less
About once a month	
2-3 times a month	2 to 4 times a month
3-4 times a week	2 or 3 times a week
1-2 times a week	
Nearly every day	4 or more times a week
For AUDIT questions 3-8:	
Never	Never
Less than once a month	Less than monthly
About once a month	Monthly
2 - 3 times a month	
Once or twice a week	Weekly
3 or 4 times a week	
Nearly every day	Daily or almost daily

APPENDIX 7.5

Factors of the Modified Drinking Motives Questionnaire - Revised (for undergraduates)

(Grant, VV, Stewart, SH, O'Connor, RM, Blackwell, E. Conrod, PJ., 2007)

Social motives

- As a way to celebrate
- Because it is what most of my friends do when we get together
- To be sociable
- Because it is customary on special occasions
- Because it makes a social gathering more enjoyable

Enhancement motives

- Because I like the feeling
- Because it is exciting
- To get a high
- Because it's fun
- Because it makes me feel good

Coping-anxiety motives

- To relax
- Because I feel more self-confident or sure of myself
- To reduce my anxiety
- It helps me when I'm feeling nervous

Coping-depression motives

- To forget my worries
- To cheer me up when I'm in a bad mood
- To numb my pain
- Because it helps me when I'm feeling depressed
- To stop me from dwelling on things
- To turn off negative thoughts
- To help me feel more positive about things in my life
- To stop me from feeling so hopeless about the future
- To forget painful memories

Conformity motives

- To be liked
- So that others won't kid me about not using
- Because my friends pressure me to use
- To fit in with a group I like
- So I won't feel left out

Source: Grant, VV, Stewart, SH, O'Connor, RM, Blackwell, E. Conrod, PJ. (2007) Psychometric evaluation of the five-factor Modified Drinking Motives Questionnaire - Revised in undergraduates. *Addictive Behaviours*, 32, 2611-2632.

APPENDIX 7.6

Frequency data of drinkers responses to the 'Alcohol Effects Questionnaire' (Rohsenow, 1983)

	Total % agreeing	N
Having drinks is a nice way for me to celebrate special occasions	87.7	535
I'm more clumsy after I drink	79.1	535
Drinking makes me feel less shy	78.6	535
I can't act as quickly when I've been drinking	71.0	535
I'm more likely to say embarrassing things after drinking	70.7	535
I can't think as quickly after I drink	67.3	535
When I'm drinking, it is easier to open up and express my feelings	67.1	535
Drinking is pleasurable because it's enjoyable for me to join in with other people	67.1	535
Alcohol decreases muscular tension in my body	65.2	535
Alcohol makes it easier for me to talk to people	63.0	535
Alcohol makes me more irresponsible	61.8	535
Drinking makes me feel good	61.3	535
Drinking adds a certain warmth to social occasions for me	60.4	535
Drinking gives me more confidence in myself	59.4	535
If I have alcohol it is easier for me to express my feelings	57.6	535
Alcohol makes it hard for me to concentrate	57.0	535
Drinking makes me feel flushed	56.3	524
I often feel sexier after I've been drinking	47.3	535
Alcohol makes me careless about my actions	46.9	535
Alcohol helps me sleep better	45.4	535
Drinking makes me inefficient	44.1	535
I'm more romantic when I drink	40.0	535
Alcohol makes me less concerned about doing things well	38.5	535
Alcohol has a pleasant, cleansing, tingly taste to me	37.2	535
Alcohol makes me worry less	37.0	535
I'm more likely to get into an argument if I've had alcohol	36.3	535
After drinking, I am more sexually responsive	34.5	535
If I have had alcohol it is easier for me to tell someone off	30.3	535
If I'm feeling restricted in any way, drinking makes me feel better	29.7	535
Drinking increases my aggressiveness	25.6	535
Alcohol can act as an anaesthetic for me; that is, it can deaden the pain	25.0	535
I enjoy having sex more if I've had alcohol	21.7	535
After drinking it is easier for me to pick a fight	20.9	535
Alcohol makes me more interesting	18.1	535
After drinking, I'm a better lover	17.9	535
I feel powerful when I drink, as if I can really influence others to do what I want	16.6	535
Drinking makes the future seem brighter to me	15.9	535
Alcohol seems like magic to me	9.3	535
I feel more coordinated after I drink	5.5	535

Rohsenow, D. (1983) Drinking habits and expectancies about alcohol's effects for self versus others. *Journal of Consulting and Clinical Psychology*, 51, 5, 752-756

APPENDIX 7.7

Sub-scales of 'The Alcohol Effects Questionnaire' (Rohsenow, 1983)

Global positive

- Drinking makes the future seem brighter to me
- Alcohol seems like magic to me
- If I'm feeling restricted in any way, drinking makes me feel better
- I feel more co-ordinated after I drink
- Alcohol makes me more interesting

Social & physical pleasure

- Drinking makes me feel good
- Alcohol has a pleasant, cleansing, tingly taste to me
- Drinking adds a certain warmth to social occasions for me
- Having drinks is a nice way for me to celebrate special
- Drinking is pleasurable because it's enjoyable for me to join in with other people who are enjoying themselves

Sexual enhancement

- I'm more romantic when I drink
- After drinking, I'm a better lover
- I often feel sexier after I've been drinking
- After drinking, I am more sexually responsive
- I enjoy having sex more if I've had alcohol

Aggression & power

- Drinking makes me feel flushed
- I feel powerful when I drink, as if I can really influence others to do what I want
- If I have had alcohol it is easier for me to tell someone off
- Drinking increases my aggressiveness
- If I'm feeling restricted in any way, drinking makes me feel better
- I'm more likely to get into an argument if I've had alcohol
- After drinking it is easier for me to pick a fight

Social expressiveness

- Drinking makes me feel less shy
- When I'm drinking, it is easier to open up and express my feelings
- Alcohol gives me more confidence in myself
- Alcohol makes it easier for me to talk to people
- If I have alcohol it is easier for me to express my feelings

Relaxation

- Alcohol decreases muscular tension in my body
- Alcohol enables me to fall asleep much more easily
- Alcohol can act as an anaesthetic for me; that is, it can deaden the pain
- Alcohol makes me worry less
- Alcohol helps me sleep better

Impairment

- I'm more clumsy after I drink
- I can't act as quickly when I've been drinking
- Alcohol makes it hard for me to concentrate
- I can't think as quickly after I drink
- Drinking makes me inefficient

Careless/unconcern

- Alcohol makes me careless about my actions
- I'm more likely to say embarrassing things after drinking
- Alcohol makes me less concerned about doing things well
- Alcohol makes me more irresponsible

Rohsenow, D. (1983) Drinking habits and expectancies about alcohol's effects for self versus others. *Journal of Consulting and Clinical Psychology*, 51, 5, 752-756

APPENDIX 7.8

Organisations from which key informants were drawn

University and partner colleges

- International Office
- Registrar's Office
- Academic Administration - Framework Office
- Academic staff
- Student support - Management
- Student support - Mental health and counselling
- Student support - Residential life team
- Student support - Medical team
- Estates services - Security
- Student Union executive
- Campus shop

External organisations

- Northants Teaching PCT
- Northants Ambulance Paramedic Service
- Northamptonshire General Hospital NHS Trust A&E service
- Northants Drug and Alcohol Team
- Northants Police
- Lava Ignite Nightclub
- Publican
- Pubwatch
- CAN - Northampton Council on Alcohol Addiction

