



Ipsos-Eureka
Social Research Institute

**National Binge Drinking Campaign
– Evaluation Survey
April 2009**

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This section provides an overview of the research context, design and findings

EXECUTIVE SUMMARY

1.1 Background and objectives

The Australian Government, as part of a National Binge Drinking Strategy, announced the funding of a \$20 million harm minimisation and behavioural change campaign aimed at confronting 15–25 year-olds with the “costs and consequences of binge drinking”. The overall goal of the campaign is to increase the likelihood that 15–25 year-olds who choose to drink alcohol do so at a low risk level for short-term harm. As a secondary audience, the campaign will target the parents of 13–17 year-olds, primarily utilising focused public relations activities, and also a brochure.

1.2 Research design

An online survey was conducted in November 2008, prior to the campaign launch, and again in April 2009, subsequent to the first burst of media activity. The fieldwork for the baseline wave ran from 13 to 23 of November, during which time 4,363 interviews were conducted: 807 with 15–17 year-olds, 2,231 with 18–25 year-olds and 1,325 with parents of 13–17 year-olds. The fieldwork for the April 2009 evaluation wave ran from 27 March to 13 April, during which time 4,200 interviews were conducted: 1,023 with 15–17 year-olds, 2,112 with 18–25 year-olds and 1,065 with parents of 13–17 year-olds. Two further evaluation waves are planned for October/November 2009 and March/April 2010.

1.3 Impact of campaign on behaviours

In the following summary tables, green shading indicates significant improvement and red shading indicates significant deterioration in the indicator across survey waves. Where the improvement or detriment relates to a change in a specific proportion, the baseline and evaluation proportions are reported. Where the improvement or detriment relates to a significant overall shift along a scale, the terms 'shift down' or 'shift up' indicate the direction of the change. A dash ('-') signifies no change from one wave to the next and 'NA' signifies the indicator is not relevant to that audience.

The key behavioural changes from November 2008 to April 2009 are summarised in Table 1, below.

Table 1. Summary of behavioural changes

Behaviour categories	15–17 years	18–21 years	22–25 years	Parents
Recent drinking behaviour				
• proportion consuming RTDs on last occasion	-	✓ 53% to 48%	-	NA
• number of standard drinks consumed on last occasion	✓ Shift down	-	-	NA
• risk level of last occasion among those who have drunk in last three months	-	-	✓ Shift down	NA
• risk level of highest drinking occasion in last three months among those who have drunk in last three months	✗ Shift up	-	-	-
Obtaining alcohol				
• sourced through friend or acquaintance	✓ 56% to 39%	-	-	NA
Controlled drinking strategies				
• deliberately alternating between alcoholic and non-alcoholic drinks	-	-	✗ current 51% to 47%	NA
• asking someone who has had too much alcohol to stop drinking	✗ current 48% to 40%	-	✗ current 36% to 30% ✗ intended 52% to 46%	NA
• switching to drinking more low-alcoholic drinks	✗ current 23% to 16%	-	-	NA
• make sure you don't get drunk when you go out	-	✓ intended 63% to 72%	-	NA
• refuse an alcoholic drink you are offered	-	✓ intended 61% to 68%	-	NA

Behaviour categories	15–17 years	18–21 years	22–25 years	Parents
• only drink low-alcohol drinks or non-alcohol drinks (on a night out)	-	✓ intended 42% to 48%	-	NA
• stop drinking altogether	-	✓ intended 25% to 35%	✓ intended 27% to 31%	NA
• make a point of eating while or before consuming alcohol	-	-	✗ intended 83% to 78%	NA
Negative drinking strategies				
• drinking to get drunk	-	✓ intended 49% to 42%	✓ current 46% to 40% ✓ intended 41% to 35%	NA
Frequency of negative experiences				
• seeing violence by someone who was drunk and aggressive	✓ Shift down	-	-	NA
• doing something after drinking too much that you regretted or later wished you hadn't done	-	-	✓ Shift down	NA
• seriously hurting or injuring yourself after drinking too much	-	✓ Shift down	-	NA
Discussions about alcohol				
• incidence of discussions	✗ 70% to 63%	-	-	✗ 69% to 64%
• discussions prompted by advertising	-	-	-	✓ 19% to 25%

The results in this table show that there were some pleasing improvements in behaviour and intentions between November 2008 and April 2009 on a number of indicators:

- last occasion drinking;
- supply of alcohol by friends and acquaintances;
- intended use of certain controlled drinking strategies;
- current and intended drinking to get drunk;
- reduced frequency of certain negative alcohol-related experiences; and
- parents' reporting of discussions prompted by advertising.

However, none of these improvements were found in more than two of the three age categories for those measures which applied only to 15–25 year-olds, or to more than two of the four categories, for those measures which applied to 15–25 year-olds and to parents.

Further, there was also some deterioration in behaviour and intentions between November 2008 and April 2009 on three indicators:

- risk level of the highest drinking occasion in the last three months;
- current and intended use of some controlled drinking strategies; and
- the incidence of discussions about alcohol.

As with the improvements, these deteriorations were not found across more than two of the age categories. For the incidence of discussions, in particular, it does seem plausible that a time-of-year effect may be responsible for the deterioration, given that November is a time that many students are preparing for end-of-year celebrations, whereas April is firmly within the school year.

1.4 Impact of campaign on knowledge

The key changes in knowledge from November 2008 to April 2009 are summarised in Table 2, below.

Table 2. Summary of knowledge changes

Knowledge categories	15–17 years	18–21 years	22–25 years	Parents
• alcohol as primary cause of hospitalisations compared with other categories of drugs	-	✓ 57% to 62%	✓ 52% to 60%	NA
• ranking of alcohol as cause of hospitalisations	-	✓ Shift up	✓ Shift up	NA
• estimated incidence of peer drunkenness	✓ 55% to 51%	✓ 67% to 64%	✓ 66% to 64%	-

The results in this table show that there were some pleasing improvements in knowledge between November 2008 and April 2009, and no deteriorations. These improvements were more widespread, being observed in either two or three of the three age categories for 15–25 year-olds. Given the close link between the first two of these improvements and the content of the campaign creative material, it seems likely that these two improvements are due to the campaign. It is less clear how the campaign might have affected the estimated incidence of peer drunkenness, though it is worth noting that the estimates have not decreased greatly.

1.5 Impact of campaign on attitudes

The key attitudinal changes from November 2008 to April 2009 are summarised in Table 3.

Table 3. Summary of attitudinal changes

Attitude categories	15–17 years	18–21 years	22–25 years	Parents
Acceptability of getting drunk				
• among one's closest friends	-	✓ Shift down	-	NA
Acknowledgement of consequences of drinking too much				
• you are more vulnerable to being physically hurt by others when you are drunk	-	-	✓ Shift up	NA
• you are more likely to have unsafe sex if you've drunk too much	-	✓ 48% to 55% agree	✓ Shift up	NA
• drinking too much when you are out gets you into trouble or danger	-	-	✓ Shift up	NA
Perceived susceptibility to consequences of drinking too much				
• likelihood of getting into a serious argument	✓ Shift up	-	-	NA
• likelihood of becoming more violent and aggressive	✓ Shift up	-	-	NA
• likelihood of accidental pregnancy	✓ Shift up	-	-	NA
• likelihood of being photographed in an embarrassing situation	-	✗ Shift down	-	NA
• doing things that make them feel embarrassed or humiliated	-	-	✗ Shift down	NA
Parental attitudes				
• permissiveness towards their 13–17 year-old child drinking at their age	NA	NA	NA	✓ Shift down

The results in this table show that there were some pleasing improvements in attitudes between November 2008 and April 2009, though all of them were observed in only one or two of the relevant age categories.

It is somewhat surprising to observe a decrease in perceived susceptibility in the likelihood of being photographed in an embarrassing situation, even if only among 18–21 year-olds, given that this consequence featured in the campaign materials. There is some possibility that this

consequence is felt to be more likely in November, during end-of-year celebrations, a hypothesis that will be tested in the remaining two waves of the evaluation research.

1.6 Campaign awareness and reactions

Awareness of advertising about young people and the risks when drinking alcohol:

The key changes in unprompted advertising awareness from November 2008 to April 2009 are summarised in Table 4.

Table 4. Summary of changes in awareness of advertising about young people and alcohol

Campaign categories	15–17 years	18–21 years	22–25 years	Parents
• Awareness of advertising	✓ 26% to 41%	✓ 33% to 50%	✓ 31% to 44%	-
• Advertising message of negative effects of drinking	✓ 39% to 59%	✓ 27% to 51%	✓ 27% to 50%	✓ 18% to 29%
• Advertising message of association of drinking with violence and crime	✓ 5% to 21%	✓ 7% to 20%	✓ 7% to 26%	✓ 14% to 23%

In this evaluation survey, unprompted awareness of advertising about young people and the risks when drinking alcohol has increased among all three age categories of 15–25 year-olds, and there has been an across-the-board increase in the proportion of 15–25 year-olds who saw advertising on television, in newspapers and magazines. Recall of the negative effects of drinking and the association of drinking with violence and crime as advertising messages are up across all three age categories of 15–25 year-olds, and also among the secondary target audience of parents of 13–17 year-olds.

Campaign reach and diagnostics: Net campaign reach was high, at between 84% and 86% of the three age categories of 15–25 year-olds.

The reach of the campaign television advertising was generally high among all age categories of the primary target audience, with 78% of 15–17 year-olds and 18–21 year-olds, 76% of 22–25 year-olds. For the 'Pedestrian accident/Party bushes' TVC, designed to appeal particularly to 15–17 year-olds, reach varied from 64% of 22–25 year-olds to 68% of 15–17 year-olds. For the 'Coffee table/Pub fight' TVC, designed to appeal particularly to 18–25 year-olds, reach was slightly lower for all age groups, varying from 62% of 22–25 year-olds to 65% of 18–21 year-olds.

Participants aged 15–25 years generally agreed that the television advertising was attention-grabbing, believable, informative and confronting, with levels of agreement ranging from 85% to 96% for those attributes. Perceived relevance was rated more moderately by 15–25 year-

olds for both executions, ranging from 45% to 64%, with ratings the highest among 18–21 year-olds. The television advertisements were seen as more personally relevant as the risk level of one's consumption on the last drinking occasion increased, with between 38% and 45% of those who had never had an alcoholic drink, and between 60% and 66% of those who drank at high risk levels on their last drinking occasion, agreeing that each was personally relevant.

The net reach of radio advertising varied from 16% to 19% across age categories of the primary target audience, with reach inversely related to age among 15–25 year-olds. The net reach of print advertising varied from 42% to 47% among 15–25 year-olds. Print executions were most commonly recalled in poster and magazine formats. The online banner advertisement had greater reach among 15–17 year-olds and 18–21 year-olds (35%) and lower reach among 22–25 year-olds (26%).

While a secondary target audience, the results among parents of 13–17 year-olds are also positive. Their net campaign reach at 80% is only slightly lower than for the primary target audience, with 7% recalling the information brochure designed specifically for that audience. Results on the applicable diagnostics for the television ad were higher among parents than 15–25 year-olds, with between 92% and 98% agreement. Perceived relevance was not asked of parents.

Reported impact: Participants among the primary target audience were highly likely to agree with several impact statements about the campaign, with at least three quarters of 15–25 year-olds agreeing that the advertisements made them think about certain possibilities:

- the negative things that can happen if I drink too much;
- the choices I make about drinking;
- the harm to others that could result from drinking too much;
- the chances of me being hurt if I drink too much;
- the acceptability of drinking too much; and
- how drinking too much can ruin a good night out.

For each of these statements, agreement decreased with age among 15–25 year-olds.

The campaign had some impact on 15–25 year-olds' consideration of their current drinking patterns, with the majority of those who recalled seeing any of the campaign advertisements agreeing that they made them think about how much they are drinking and just under half agreeing that the campaign advertisements made them think about how often they are drinking

too much. The proportion of 15–25 year-olds who said that they had reduced their drinking in response to the advertisements varied from 27% to 31%.

The proportion of 15–25 year-olds prompted by the campaign to talk about various negative consequences of drinking ranged from 31% to 56% who were prompted to talk to friends, and from 17% to 52% who were prompted to talk to parents (with 15–17 year-olds more than twice as likely as 18–25 year-olds to do so).

In terms of the secondary target audience of parents of 13–17 year-olds, they reported a greater level of agreement than 15–25 year-olds with all but one of the analogous impact statements asked of both target audiences. The exception was whether they had reduced their own consumption in response to the campaign, and even on this measure, 19% of parents reported the campaign had an effect on them. Finally, parents reported that the campaign had prompted them to undertake a range of protective strategies related to their children's drinking ranging from 'keeping an eye on them and knowing who they go out with and where they go' (83%) and 'setting a good example and demonstrating responsible drinking' (83%) to 'preventing them from going to places where there will be alcohol' (50%).

1.7 Conclusions

The results provide preliminary evidence that the campaign has had a positive, though modest, impact on the primary and secondary target audiences. Data from the next two waves of the evaluation will help to determine the extent to which the campaign is likely to have contributed to these improvements and also the extent to which these improvements can be sustained and improved upon with further campaign activity. As time of year is likely to have some impact on results, particularly with regard to drinking behaviours, changes from one year to the same time of the year twelve months later will provide more robust evidence of the residual effect of the first wave of communication activity. Comparing April 2009 to April 2010 will also show the cumulative effect of two waves of communication activity, and the incremental effect of the second wave of communication activity.

This section outlines the background to the project, and specifies our understanding of the research objectives

RESEARCH CONTEXT

2.1 Background

'Binge drinking' as a term is "vague and often hard to define", and its meaning is therefore difficult to quantify. The National Health and Medical Research Council (NHMRC), in the 2001 Australian Alcohol Guidelines (AAGs), points out that 'binge drinking' is "not a preferred term due to its lack of consistent and specific meaning [and] can refer to either a) occasional bouts of heavy drinking by young and/or non-dependent people, or b) a 'bender' engaged in by an alcohol-dependent person which may last for days or weeks".¹ The 2001 AAGs instead laid out a framework for categorising adult 'low risk', 'risky' and 'high risk' drinking for short-term and long-term harm, as outlined in Table 5, overleaf.

While the NHMRC guidelines have recently been updated, the 2001 guidelines were current for the November 2008 research wave and remain the standard for research on risky drinking. The previous guidelines are also likely to remain better known and accepted in the general community than the 2009 alcohol consumption guidelines for the immediate future.

Notably there are no specific quantities in either guidelines relating to alcohol consumption for those aged 15–17 years. Both the 2009 and 2001 AAGs emphasise that not drinking is the safest option for young people under 18 years of age, and if drinking occurs it should be delayed as long as possible and then only at a low risk level and in a safe environment. In the

¹ Available at: [http://www.alcohol.gov.au/internet/alcohol/publishing.nsf/Content/AAG01/\\$FILE/ds9.pdf](http://www.alcohol.gov.au/internet/alcohol/publishing.nsf/Content/AAG01/$FILE/ds9.pdf). Accessed: 15/01/09.

absence of guidelines relating to the specific quantities of alcohol that can be consumed by this age group safely, this report has applied the 2001 guidelines for adults relating to low risk of harm in the short-term as the framework for the analysis of teenagers' drinking behaviour (i.e. the low risk episodic drinking guidelines for adults). While it is acknowledged that the 2001 guidelines relating to short term risk of harm overestimate the recommended maximum levels of alcohol teenagers should consume, these guidelines were used as the framework of analysis as they reflect the harms associated with single occasion patterns of drinking typical of young drinkers.

Table 5. Australian Alcohol Guidelines 2001 – Risk of harm from alcohol

Type of risk	Risky alcohol use	High risk alcohol use
Short-term harms		
<i>Males</i>	7–10 drinks on any one day	11+ drinks on any one day
<i>Females</i>	5–6 drinks on any one day	7+ drinks on any one day
Long-term harms		
<i>Males</i>		
- on an average day	5–6 drinks on any one day	7+ drinks on any one day
- overall weekly level	29–42 drinks per week	43+ drinks per week
<i>Females</i>		
- on an average day	3–4 drinks on any one day	5+ drinks on any one day
- overall weekly level	15–28 drinks per week	29+ drinks per week

There have been several short-term campaigns in the past two decades aimed at reducing the levels of harm associated with alcohol use among the population, and young people in particular. While awareness of these campaigns has been high, and young people have understood and thought about the messages, the level and frequency of risky alcohol consumption have remained high. The results of the 2007 National Drug Strategy Household Survey showed that young adults, aged 20–29 years, were the age category most likely to consume alcohol at risky or high risk levels for short-term harm at least monthly, with 40% of them doing so. Further, the age category next most likely to consume alcohol at risky or high

risk levels for short-term harm at least monthly was the 14–19 year-old group, with 26% drinking at risky or high risk levels for short-term harm.²

This seems to indicate that, while previous communication campaigns have been successful in ‘cutting through’ to their target audiences, young people’s tendency to drink at risky levels remains deeply ingrained. This is likely due to the fact that, as stated in the National Alcohol Strategy 2006-2009, “alcohol retains deep-rooted cultural significance”.³ This is not to say, however, that campaigns aimed at addressing drinking behaviour are unsuccessful *per se*. Instead, a long-term adequately funded campaign is likely to be an effective way of maximising gradual behaviour change in alcohol consumption, in addition to positively building on the behaviour change effects engendered through previous campaigns.

It is within this context that, in March 2008, the Australian Government, as part of a National Binge Drinking Strategy, announced the funding of a \$20 million harm minimisation and behavioural change campaign aimed at confronting 15 to 25 year-olds with the “costs and consequences of binge drinking”.⁴ The overall goal of the campaign is to increase the likelihood that 15–25 year-olds who choose to drink alcohol do so at a low risk level for short-term harm. The objectives of the communication strategy to achieve this overall goal include:

- increasing awareness of potential harms (physical and social) associated with excessive alcohol consumption, the serious nature of these potential harms, and strategies to avoid alcohol-related harm;
- changing attitudes towards excessive alcohol consumption by reducing the perceived acceptability of intoxicated behaviour and reinforcing the unacceptability of the harms associated with excessive alcohol consumption and intoxication; and
- generating and reinforcing intentions to avoid drinking to intoxication and to adopt strategies to avoid alcohol-related harm, and generating intentions among those who experience alcohol-related problems to seek help.

² Evidence on the pattern of change over recent years is not consistent, with both increases and decreases identified in prevalence of consumption at risky and high risk levels for short-term harm, depending on the age band and the time period chosen. Available trend data is discussed in detail on pp.39-45 of Roche, A.M., Bywood, P., Borlagdan, J., Lunnay, B., Freeman, T., Lawton, L. Tovell, A. and Nicholas, R. (2007). *Young people and alcohol: The Role of Cultural Influences*. National Centre for Education and Training on Addiction, Adelaide. This covers the 2001 and 2004, but not 2007, National Drug Strategy Household Surveys, as well as other data.

³ Available at:

[http://www.alcohol.gov.au/internet/alcohol/publishing.nsf/Content/B83AD1F91AA632ADCA25718E0081F1C3/\\$File/nas-06-09.pdf](http://www.alcohol.gov.au/internet/alcohol/publishing.nsf/Content/B83AD1F91AA632ADCA25718E0081F1C3/$File/nas-06-09.pdf). Accessed: 15/01/09.

⁴ Available at: http://www.pm.gov.au/media/Release/2008/media_release_0126.cfm. Accessed: 15/01/09.

The campaign, expected to run for an initial two years, uses a mix of television, cinema, radio, print, online and out-of-home advertising, brochures, as well as public relations and online and innovative media activities. The mainstream campaign tagline is "Don't turn a night out into a nightmare".

The television, cinema, print and out-of-home advertising all show a happy scene of young people drinking alcohol followed by a scene illustrating a serious negative consequence of intoxication for those same young people and a statistic describing that situation. The situations, actors and consequences illustrated were chosen to ensure maximum relevance for both genders and for younger and older drinkers within the 15–25 year age range. Four pairs of scenes were used:

- 'Party bushes', in which a couple are photographed having sex at a party in the bushes, coupled with the statistic "one in two Australians aged 15–17 who get drunk will do something they regret" (designed for maximum relevance for females and 15–17 year-olds);
- 'Pedestrian accident', in which a male pedestrian is hit by a car, coupled with the statistic "four Australians under 25 die due to alcohol related injuries in an average week" (designed for maximum relevance for males and 15–17 year-olds);
- 'Coffee table', in which a female is injured by falling through a glass table, coupled with the statistic "on average, 1 in 4 hospitalisations of people aged 15–24 happen because of alcohol" (designed for maximum relevance for females and 18–25 year-olds); and
- 'Pub fight', in which two males exchange blows, coupled with the statistic "70 Australians under 25 will be hospitalised due to alcohol-caused assault in an average week" (designed for maximum relevance for males and 18–25 year-olds).

Two 60-second advertisements were used on television and in the cinema. The first, which featured 'Party bushes' and 'Pedestrian accident', was designed to appeal to the younger members of the target audience. The second featured 'Coffee table' and 'Pub fight' for maximum relevance to older members of the primary target audience.

The online advertising featured a moving image of a beer glass being raised as if to the viewer's mouth and one of the statistics mentioned above.

There were two radio commercials, one in which a policeman arrests a drunk young man, whose friend has been killed in an accident, and one in which a young man rings his friend's mother in the middle of the night to urge her to come to the hospital in a hurry⁵.

The brochure was entitled *Alcohol and young people: A guide for parents* and used a question-and-answer format.

Stills from the television advertisements, transcripts of radio advertisements and images of print and online executions, as well as the brochure, are included in Section 7.

The first television commercial for the campaign aired on 23rd November, 2008. The media plan for November 2008 to April 2009 is shown in Table 6, below.

Table 6. Media plan (November 2008 to April 2009)

	November			December			January			February			March			April		
Television																		
Magazine/Print																		
Radio																		
Digital/Internet																		
Cinema																		
Out-of-home⁶																		

As a secondary audience, the campaign targets parents of 13–17 year-olds, primarily utilising focused public relations activities, and also a brochure. The overall goal with this target audience is to increase the likelihood that these parents will talk with their children about the harms associated with excessive alcohol consumption and actively discourage drinking to intoxication, including through the modelling influence of their own drinking behaviour.

⁵ The second radio advertisement was translated into eight languages for non-English speaking background parents of 13–17 year-olds.

⁶ The out-of-home category includes bus interiors, Avant Cards, street furniture, washroom mirrors in nightclubs, street posters and stencil chalking.

2.2 Research objectives

The Department of Health and Ageing commissioned the Ipsos-Eureka Social Research Institute to conduct research to evaluate the success of the National Binge Drinking Campaign. The overall aim of the research is to evaluate the success of the campaign among the key target audiences of teenagers aged 15–17 years and young adults aged 18–25 years, and the secondary audience of parents of 13–17 year-olds.

Specifically, the research will assess the extent to which the advertising campaign delivers against the communication objectives. The key measures are illustrated below.

Evaluate effectiveness of National Binge Drinking Campaign



Measure campaign awareness and reactions

Assess attitudes and knowledge regarding binge drinking,
including changes over time

Gauge prevention intentions and behaviour,
including changes over time

The research methodology used to address these issues is detailed in the following section.

This section details our research design, as well as our rationale for using this methodology

RESEARCH DESIGN

3.1 Methodology

The National Binge Drinking Campaign is to be evaluated in four waves of online research over the two years of the campaign's life. The research program includes one baseline survey, which was conducted prior to the launch of the campaign in November 2008, and three post-launch evaluation surveys. The second survey, the results of which are outlined in this report, was conducted in April 2009, following the conclusion of the initial media buy for the campaign.

The methodology for the survey completed in April 2009 is detailed below. The survey mirrored the scope and structure of the November 2008 baseline survey, with some revisions, and then included additional evaluation questions focusing on the campaign materials.

Online survey

An online survey methodology was considered most appropriate for evaluating the campaign for a number of reasons:

- A very large sample could be accessed cost-effectively. The research required sampling 15–17 year-olds, 18–25 year-olds and parents of 13–17 year-olds. A methodology which involved random telephone sampling would have been prohibitively expensive due to the costs involved in trying to find suitable participants. This problem is compounded by the fact that young people often are not at home, many do not have landlines and response rates tend to be poorer among younger age groups. With an online research panel, demographic data are held on each member, allowing for a targeted sampling approach. Online surveying therefore represented a much cheaper and more efficient data collection method than other options.

- Participants could be presented with visual and audio stimulus material. This allowed images of different types of alcohol, and their different containers and sizes, to be presented allowing for more accurate measurement of consumption. In evaluation waves, campaign materials were also able to be presented to participants. These visual prompts ensure more accurate prompted recall measures than in telephone interviewing where alcohol volumes and campaign materials can only be verbally described.
- Online surveying provides an environment where the participant is free to 'speak their mind' anonymously and without fear of being overheard, as might be the case with telephone interviewing. This is particularly important when researching a sensitive topic such as underage alcohol consumption.
- An online survey offers convenience and better access to participants. It arrives at the participant's desk top and can be completed any time of day or night, at their convenience.
- There are no interviewer, data-entry or data-editing errors or biases as may be introduced when third parties are required to interview, code or process survey responses.

Questionnaire development

Separate youth and parent questionnaires were developed by the Department and Ipsos-Eureka for the baseline wave, drawing on tools that have been used in previous research, and taking advantage of the unique question presentation opportunities provided by online surveying. These questionnaires were revised for the April 2009 survey, with campaign evaluation questions added. The April 2009 questionnaires for 15–25 year-olds and parents are included as appendices to this report (see Appendix A: Youth questionnaire April 2009 and B

Appendix B: Parent questionnaire April 2009).

The most notable change to the survey questions in April 2009 was the addition of a 'recap' question. Given the high levels of consumption reported in the benchmark survey, a recap option was introduced to reduce the possibility of young people misinterpreting consumption questions, or making mistakes when entering data. After being asked to indicate how many containers (of a range of types and sizes) of alcoholic drinks they had consumed on their last drinking occasion, participants were provided with a recap of the total amount of each type of alcohol they had indicated that they had drunk on their last drinking occasion, and were given the opportunity to edit their response if they required. This option was not available to participants in the November 2008 baseline survey.

Both questionnaires were subject to pre-testing using cognitive interviews. The cognitive interview process involves a researcher interviewing a participant, taking them through the proposed questionnaire and asking specific questions:

- what the participant interprets as the meaning of each question;
- what the participant understands key words or phrases to mean;
- where discrepancies exist between a question's intended meaning and the meaning perceived by the participant, which words the participant believes would more accurately convey the intended meaning;
- the feelings evoked by the question;
- whether the participant feels that their intended answer is adequately captured by the response options available; and
- whether the participant believes there are important topics that have not been adequately covered by the questionnaire.

A total of 22 cognitive interviews were conducted with 15–25 year-olds prior to November 2008 fieldwork, as shown in Table 7, below. In addition, five cognitive interviews were conducted with parents of 13–17 year-olds.

Table 7. Cognitive interview structure for November 2008 survey

		Age			
		15–17 years		18–25 years	
		Male	Female	Male	Female
Alcohol consumption	High risk	1 interview	1 interview	2 interview	2 interview
	Risky	2 interviews	2 interviews	2 interviews	2 interviews
	Low risk	2 interviews	2 interviews	2 interviews	2 interviews

Ten cognitive interviews were conducted with 15–25 year-olds prior to the April 2009 fieldwork (see Table 8, below). In addition, two cognitive interviews were conducted with parents of 13–17 year-olds. These cognitive interviews ensured interpretation of questions had not changed between November 2008 and April 2009. They also tested new questions and changes to existing questions.

Table 8. Cognitive interview structure for April 2009 survey

		Age			
		15–17 years		18–25 years	
		Male	Female	Male	Female
Alcohol consumption	High risk	1 interview	-	1 interview	1 interview
	Risky	1 interview	1 interview	1 interview	1 interview
	Low risk	1 interview	1 interview	-	1 interview

Fieldwork

The online surveys were hosted and managed by I-view.

The research was conducted with 15–25 year-olds, who represent the primary target audience for the campaign, and parents of 13–17 year-olds, who represent the secondary target audience. Those who qualified and completed the survey received an incentive of ‘e-points’ for their participation⁷.

For all 15–17 year-olds, parental consent was required for them to participate in the research, as stipulated in the Australian Market and Social Research Society Code of Professional Behaviour. Parents who were known to have children aged 15–17 years were approached via email and encouraged to allow their children to participate in the survey. In some households, both a parent and a 15–17 year-old were interviewed.

The average evaluation survey length for 15–25 year-olds was 14 minutes for the baseline survey conducted in November 2008 and 22 minutes for the evaluation survey in April 2009. For parents, the average survey lengths were 9 minutes in November 2008 and 20 minutes in April 2009. This increased survey length was primarily due to the introduction of campaign

⁷ ‘E-points’ can be accrued over time and redeemed for cash, vouchers or merchandise.

evaluation questions, although other improvements made to the questionnaire are also likely to have added to the length.

The fieldwork for the November 2008 baseline wave was conducted from 13 to 23 November, and the fieldwork for the April 2009 evaluation wave was conducted from 27 March to 13 April. Both waves of research were conducted in accordance with the requirements of the International Standard covering social and market research, AS ISO 20252.

Sample

In total, 4,363 interviews were conducted in November 2008 and 4,200 in April 2009. The final sample breakdown for both waves is shown in Table 9.

Table 9. Sample breakdown

		15–17 year-olds		18–25 year-olds		Parents of 13–17 year olds	
		Nov 08	April 09	Nov 08	April 09	Nov 08	April 09
Gender	Males	410	530	688	1,071	415	490
	Females	397	493	1,543	1,041	910	575
Location	NSW/ACT	302	358	760	777	458	365
	VIC/TAS	199	302	631	598	353	312
	QLD	164	196	458	387	251	195
	SA/NT	76	89	184	152	143	93
	WA	66	78	198	198	120	100
Cultural background	Language other than English spoken at home	60	97	384	450	NA	NA
	English only spoken at home	747	926	1,847	1,662	NA	NA
	ATSI	41	32	69	47	NA	NA
	Non-ATSI	766	991	2,162	2,065	NA	NA
TOTAL		807	1,023	2,231	2,112	1,325	1,065

The demographic characteristics of the survey sample across waves are included at Appendix E.

3.2 Data analysis

Weighting

The youth sample for each wave was weighted by age, gender and location to match the Australian population. Weights were calculated based on the latest population demographic statistics available from the Australian Bureau of Statistics⁸. Thus, for young people in each wave, an individual weight was calculated for each cell of the gender x age x location matrix by dividing the proportion of the actual population in that cell by the proportion in that cell obtained by the survey. For example, the actual proportion of Australian 15–17 year-olds who are male and residing in Victoria was divided by the proportion of the surveyed 15–17 year-old sample that was male and residing in Victoria to obtain the weight to be applied to this sub-group of the sample. This weight was applied to all results analysed by age and survey wave.

A separate weight was calculated for the combined sample (all age groups) that corrected the imbalance caused by the intentional over-sampling of younger drinkers. This weight was applied to all results not analysed by age, for example those represented by risk level.

Statistical analyses

The survey results for November 2008 and April 2009 are presented in Sections 4 to 8. Throughout these sections, significant differences between survey waves are reported. Where questions were only asked in one survey wave (for example, campaign evaluation questions), significant differences between age categories are reported. In all cases, a two-sided test has been used, which is generally considered to be conservative. A significance level of $p < 0.050$ has been adopted throughout⁹.

Non-ordinal categorical data have been compared using chi-square tests. Statistical comparisons throughout this report based on ordinal data, such as age, consumption level, risk level and agreement level have been analysed using the Kendall's tau-b test. A comparison of means (ANOVA) has been conducted on ratio data, such as number of standard drinks consumed on last drinking occasion.

⁸ Excel spreadsheets available at <http://www.censusdata.abs.gov.au/ABSNavigation/prenav/PopularAreas?&collection=Census&period=2006&&navmapdisplayed=true&textversion=false>. Accessed 14/05/09.

⁹ A glossary of statistical terms is included in Appendix D.

Test type and p-values for all significant test results are reported, with p-values reported to three decimal places.

Significant differences are indicated in the charts using arrows. Arrows positioned on top or within columns indicate that the specific proportion has altered significantly in the direction of the arrow (a significant chi-square result). Arrows positioned to the right of a series of columns indicates a significant trend across the series in the direction of the arrow (a significant Kendall's tau-b result).

Please note that combined figures in the text (for example, the total percentage of people who agree and agree strongly) may appear to be different to the figures shown in the charts, as a result of rounding.

Calculation of alcohol consumption

To assess alcohol consumption patterns, 15–25 year-olds were asked whether they had consumed more than ten alcoholic drinks within their life, and those who had done so were then asked how often in the last three months they drank an alcoholic drink.

The alcohol consumed on the last drinking occasion by 15–25 year-olds who had consumed alcohol in the last three months was analysed according to the type and amount of alcohol consumed. To increase accuracy of consumption estimations, respondents were asked to report on the container size and the number of each of these containers they drank for each alcoholic beverage they had consumed on this most recent drinking occasion (For reference, the questionnaire is included in Appendix A). Data for each respondent was then computed to generate the equivalent number of standard drinks of alcohol consumed. Standard drink conversion formulas for different alcohol types and container sizes were provided by the Department of Health and Ageing (included in Appendix C). Responses coded as 'other' were back coded to the most reasonable drink type and size, where possible. Where this was not possible, the responses were treated as missing data.

When calculating the average number of standard drinks consumed and the total share of consumption by beverage category, respondents who reported consuming 26¹⁰ or more standard drinks on their last drinking occasion were excluded from all analyses based on last occasion consumption. As a conservative measure, these extreme cases have been deemed, on the balance of probabilities, to be more likely due to incorrect answers than coma inducing or potentially life-threatening levels of consumption. Hence, they were excluded from the analyses because of their potential to erroneously skew results.

In this report, low risk drinking is defined as the equivalent of less than seven standard drinks for males, and less than five standard drinks for females on their last drinking occasion. Risky drinking is defined as the equivalent of seven to ten standard drinks for males and five to six standard drinks for females on their last drinking occasion. High risk drinking is defined as the equivalent of 11 or more standard drinks for males and seven or more standard drinks for females on their last drinking occasion.

¹⁰ Twenty-six standard drinks are approximately:

- 1.5 750ml bottles of spirits (e.g. whiskey, gin, vodka, rum, or tequila)
- 3.5 bottles of wine (750ml)
- 17 cans or stubbies of full strength beer (4.9%)
- 26 shots or nips of spirits (e.g. whiskey, gin, vodka, rum, or tequila)
- 26 cans or stubbies of mid strength beer (3.5%)
- 33 cans or stubbies of light beer (2.7%)

IMPACT OF CAMPAIGN ON BEHAVIOUR

Young people aged 15–25 years were asked a range of questions about aspects of their drinking behaviour, including:

- their age at initiation and experience of drunkenness;
- the volume and typicality of their alcohol consumption on the last occasion they were drinking; and
- their estimated alcohol consumption over the last three months.

Parents were asked about their children's drinking and experience of drunkenness, as well as their own drinking behaviour. Responses to these survey questions are discussed in this section.

4.1 Drinking experience

Young people aged 15–17 years were asked if they had ever had an alcoholic drink or even part of an alcoholic drink in their life, or if they had ever gotten drunk. Parents of 13–17 year-olds were asked if their 13–17 year-old children had ever had an alcoholic drink, or if they had ever been drunk. The results of these questions are illustrated in Figure 1 and Figure 2, overleaf.

Figure 1. Teenage drinking incidence (15–17 year-olds)

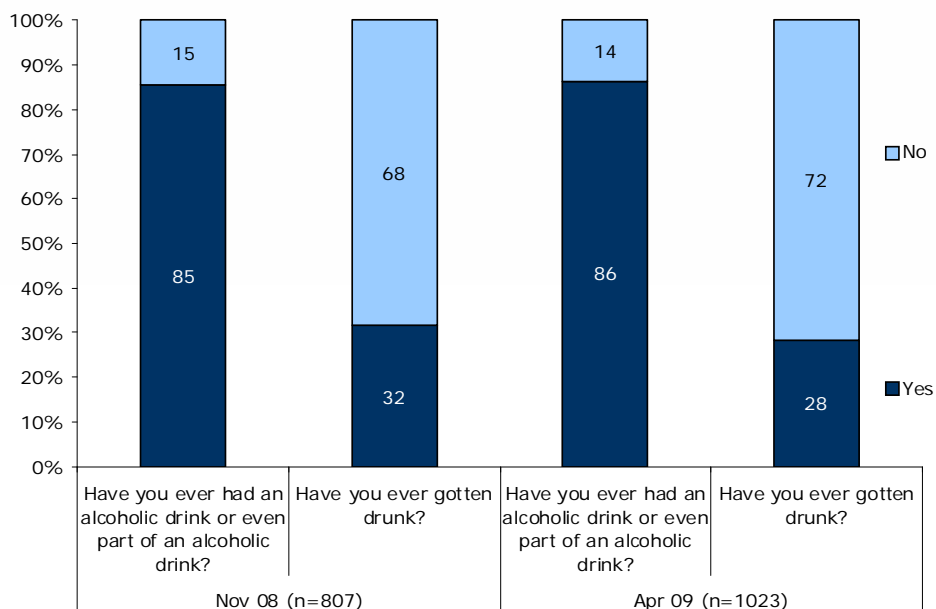


Figure 2. Impression of own child's drinking experience (Parents)

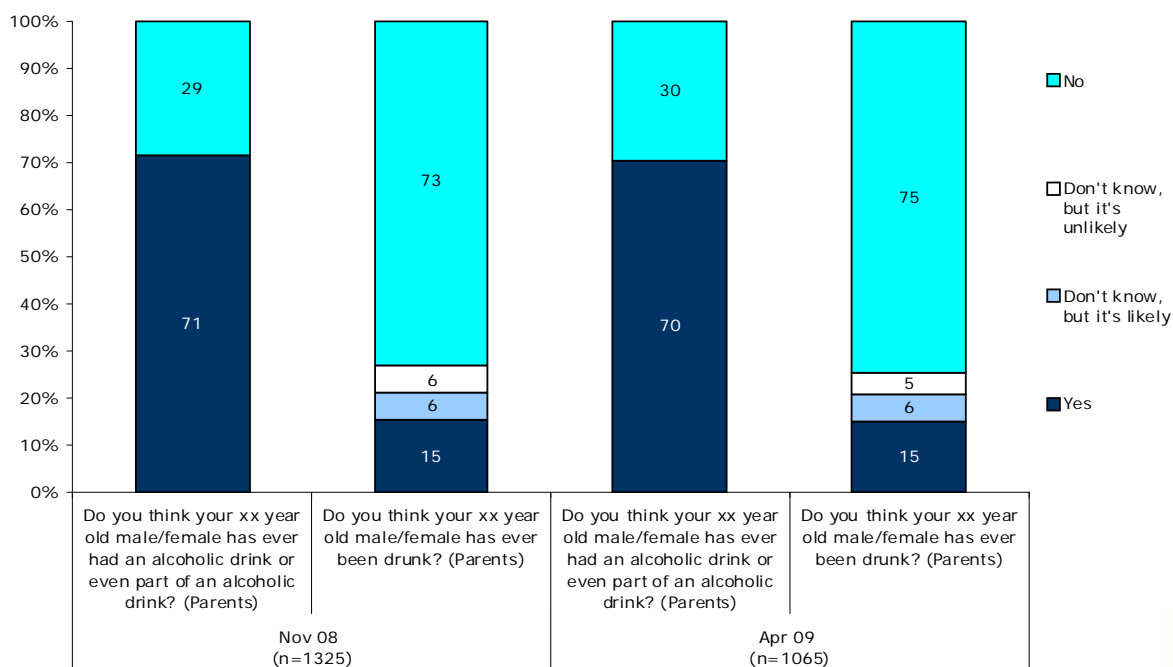


Figure 1 and Figure 2 show there were no significant differences in teenage drinking incidence or parent's impressions of their child's drinking between November 2008 and April 2009.

In the latest survey wave, 86% of 15–17 year-olds responded that they had ever had an alcoholic drink or part of an alcoholic drink in their lives and 28% indicated that they had ever been drunk. In this survey wave, 70% of parents indicated that they believed their child had consumed alcohol and 21% believed or thought it likely that their child had been drunk. It appears that parents surveyed in April 2009 slightly underestimated the extent to which their children had consumed alcohol (by 16%) and the extent to which they had gotten drunk (by 7%).

Young people aged 15–17 years were also asked to indicate how many alcoholic drinks they had consumed in their life, with the results displayed in Figure 3, below.

Figure 3. Drinking history (15–17 year-olds)

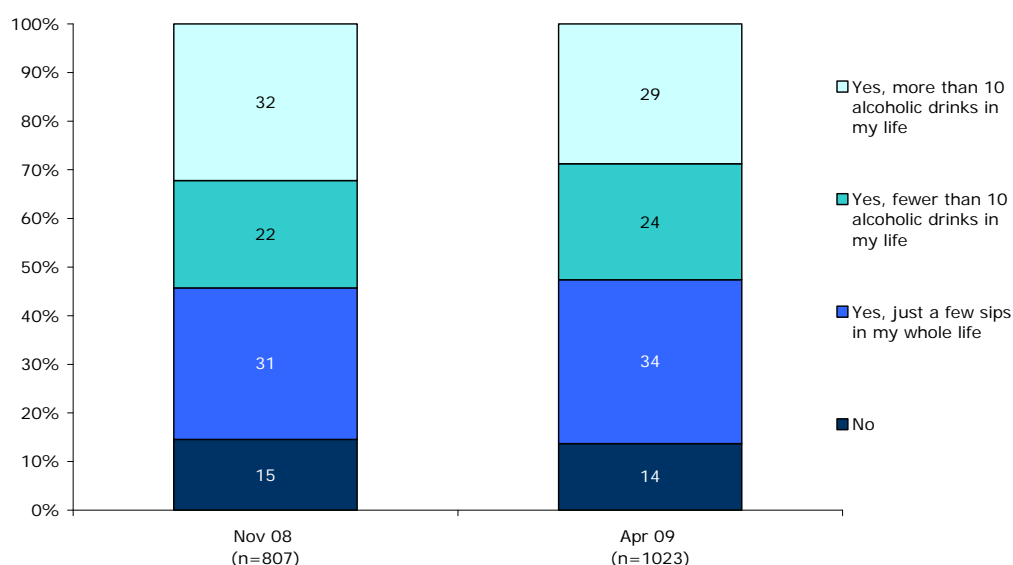


Figure 3 shows that drinking history among 15–17 year-olds did not change significantly between November 2008 and April 2009. In April 2009 the largest proportion of 15–17 year-olds (34%) said they had consumed just a few sips of alcohol in their life, 29% had consumed more than 10 drinks, 24% had consumed fewer than 10 drinks, and 14% had never had an alcoholic drink or even part of an alcoholic drink in their lives.

Young people aged 15–17 years who indicated that they had consumed more than just a few sips of alcohol in their life were asked at what age they had their first full drink of alcohol. The results are shown in Figure 4, below.

Figure 4. Age at first drink (15–17 year-olds)

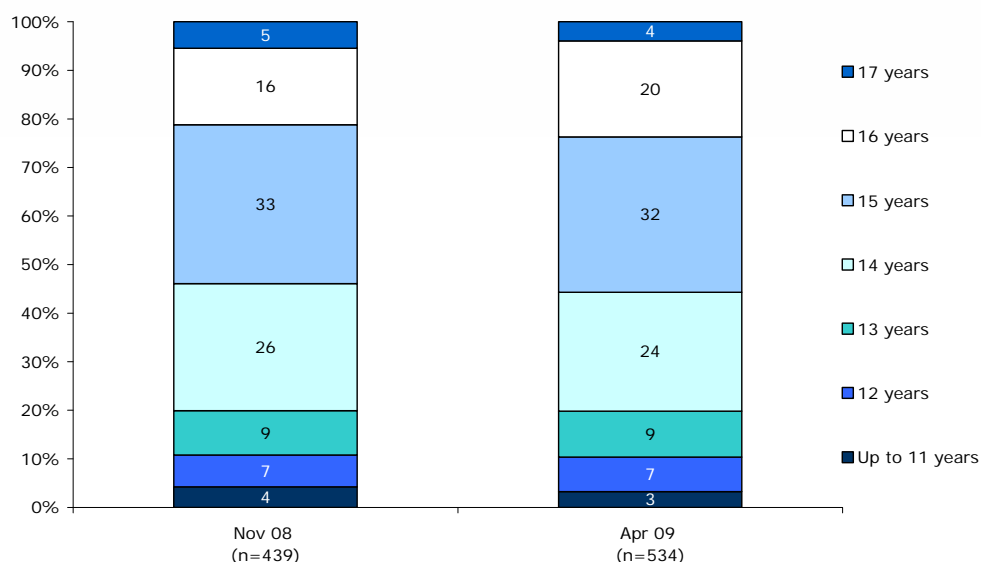
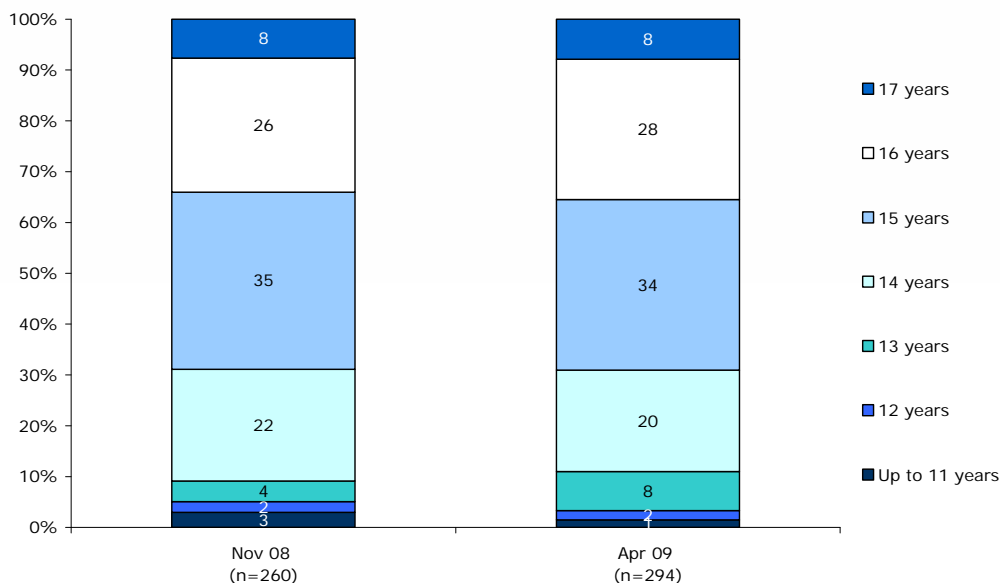


Figure 4 shows that, in April 2009, more than half (56%) of 15–17 year-olds who had consumed more than just a few sips of alcohol in their life had their first full drink at 14 or 15, with 19% having had their first drink at a younger age and 24% having had their first drink at an older age. These results did not vary significantly from those found in November 2008.

Young people aged 15–17 years who indicated they had ever been drunk in their life were asked at what age this first occurred. The results of this question are shown in Figure 5, overleaf.

Figure 5. Age of first intoxication (15–17 year-olds)



As illustrated in Figure 5, there was no significant difference between the age of first intoxication reported by 15–17 year-olds in November 2008 and in April 2009. The largest proportion (34%) of participants indicated that the first time they were drunk occurred at the age of 15. More than one third (36%) of 15–17 year-olds were first intoxicated at 16 or 17 years of age and almost one third (31%) first experienced being drunk before they were 15 years old. Comparing Figure 4 and Figure 5 suggests that the age at which teenagers first drink alcohol is often the same or similar to the age at which they first become intoxicated.

Of course, the absence of significant differences on these measures of drinking history is not surprising. Even if the campaign has had some effect on delaying the commencement of drinking and drinking to intoxication, it is still too early to pick up any such effect in the survey.

4.2 Recent drinking behaviour

Young people aged 15–25 years who had consumed more than a few sips of alcohol in their life were asked how often in the last three months they drank an alcoholic drink. The results are illustrated in Figure 6, below.

Figure 6. Drinking frequency (15–25 year-olds who have ever consumed alcohol)

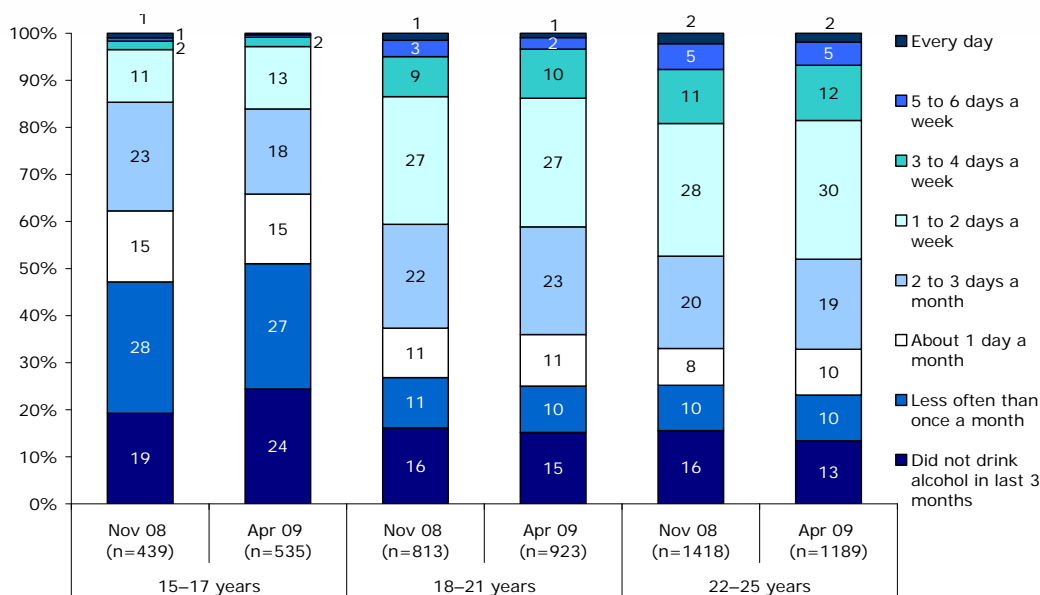


Figure 6 indicates that, as per November 2008, drinking frequency in April 2009 increased with age, with the largest percentage (27%) of 15–17 year-olds indicating that, in the last three months, they drank less often than once a month, while the largest proportion of 18–21 year-olds and 22–25 year-olds (27% and 30%, respectively) drank alcohol on one to two days per week. Nearly one quarter (24%) of 15–17 year-olds, 15% of 18–21 year-olds and 13% of 22–25 year-olds surveyed in April 2009 indicated that they had not had an alcoholic drink in the last three months. There were no significant differences in results between November 2008 and April 2009.

Young people aged 15–25 years who had consumed more than a few sips of alcohol in their life were presented with a list of 10 different alcoholic drinks and asked to indicate which ones they consumed on their last drinking occasion. The results of this question are shown by age group in Figure 7, below.

Figure 7. Drink types consumed (15–25 year-olds who drank alcohol in the last three months)

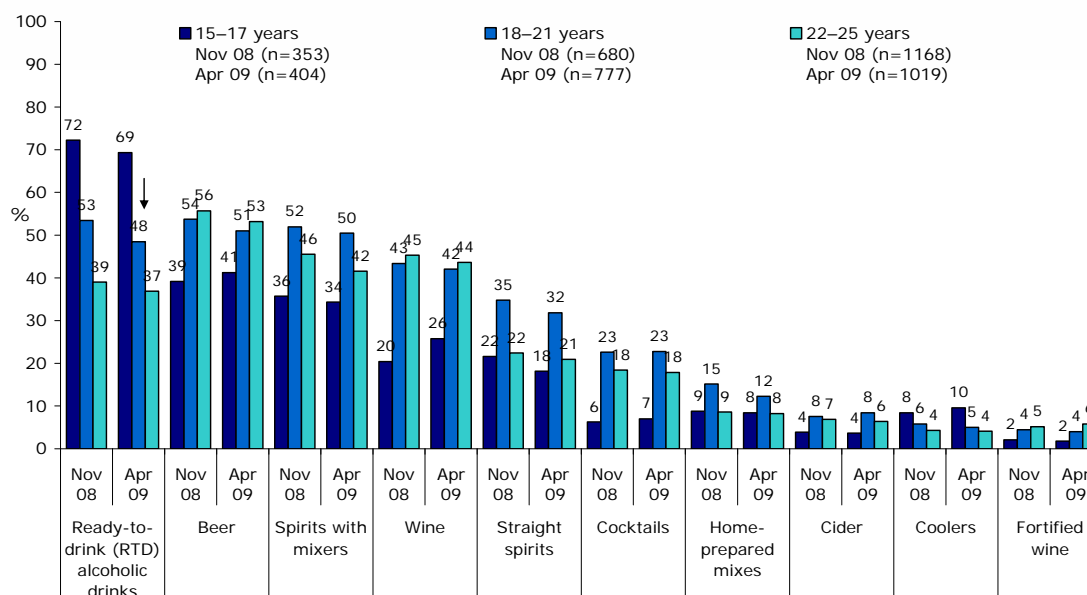


Figure 7 shows that the top four drink types consumed by 15–17 year-olds, 18–21 year-olds and 22–25 year-olds on their last drinking occasion¹¹ were the same for each age group, although the order of preference differed. Young people aged 15–17 years most commonly drank RTDs the last time they were drinking alcohol (selected by 69% in April 2009), followed by beer (41%), spirits with mixers (34%) and wine (26%). Among 18–21 year-olds, beer was most commonly consumed (51%), followed by spirits with mixers (50%), RTDs (48%) and wine (42%). Among 22–25 year-olds, beer was also the most commonly consumed alcohol type (53%), followed by wine (44%), spirits with mixers (42%) and RTDs (37%).

The only significant change between November 2008 and April 2009 was within the 18–21 year age group, where the proportion drinking RTDs on their last drinking occasion decreased from 53% to 48% (chi-square, $p=0.040$).

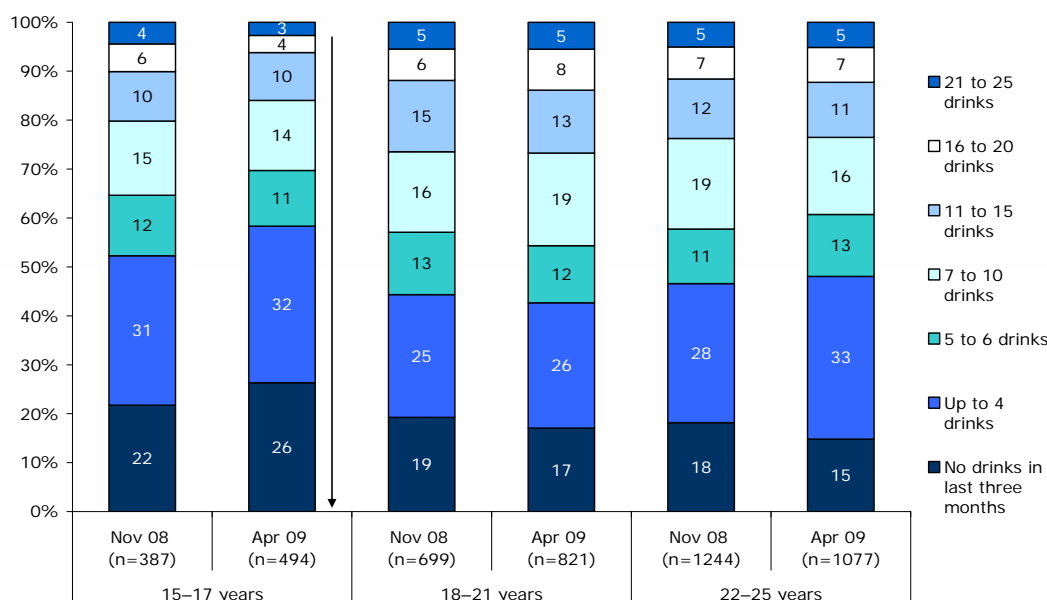
¹¹ A drinking occasion refers to a single session of drinking. This might include a drink at home at the end of the day or over dinner, or at a specific event, such as a party or a 'Friday night out'.

After indicating the types of alcohol consumed on their last drinking occasion, 15–25 year-olds who had consumed alcohol in the last three months were asked to record how many containers (glasses, bottles, cans and casks of different relevant sizes) of each of these types alcohol they consumed on this particular occasion. (For reference, the questionnaire is attached at Appendix A: Youth questionnaire April 2009.) These numbers were then converted into standard drinks based on standard drink conversion formulas for different alcohol types and container sizes provided by the Department of Health and Ageing. Responses coded as 'other' were back coded to the most reasonable drink type and size, where possible. Where this was not possible, the responses were treated as missing data.

In November 2008 and April 2009, those who reported consuming 26 or more standard drinks on their last drinking occasion were excluded from all analyses based on last occasion consumption. This was due to the implausibly high level of consumption reported by 15–25 year-olds for this occasion. In the November 2008 survey, 12% of 15–17 year-olds, 18% of 18–21 year-olds and 15% of 22–25 year-olds who drank alcohol in the last three months indicated drinking 26 or more standard drinks the last time they consumed alcohol. The corresponding figures in the April 2009 survey were 4%, 11% and 9%, with the lower figures due to the inclusion of the recap option. The calculated number of standard drinks for the majority of this portion of the sample in both waves was above the amount that could possibly have been consumed in one sitting. Therefore, those indicating they consumed 26 or more drinks the last time they consumed alcohol were excluded from the relevant analyses (reported in Figure 8, overleaf, and Figure 9, page 39).

Following these transformations, the total number of standard drinks for each respondent's last drinking occasion was calculated. The results are shown for all 15–25 year-olds who have ever had an alcoholic drink in Figure 8 and for only those who drank alcohol in the last three months in Figure 9.

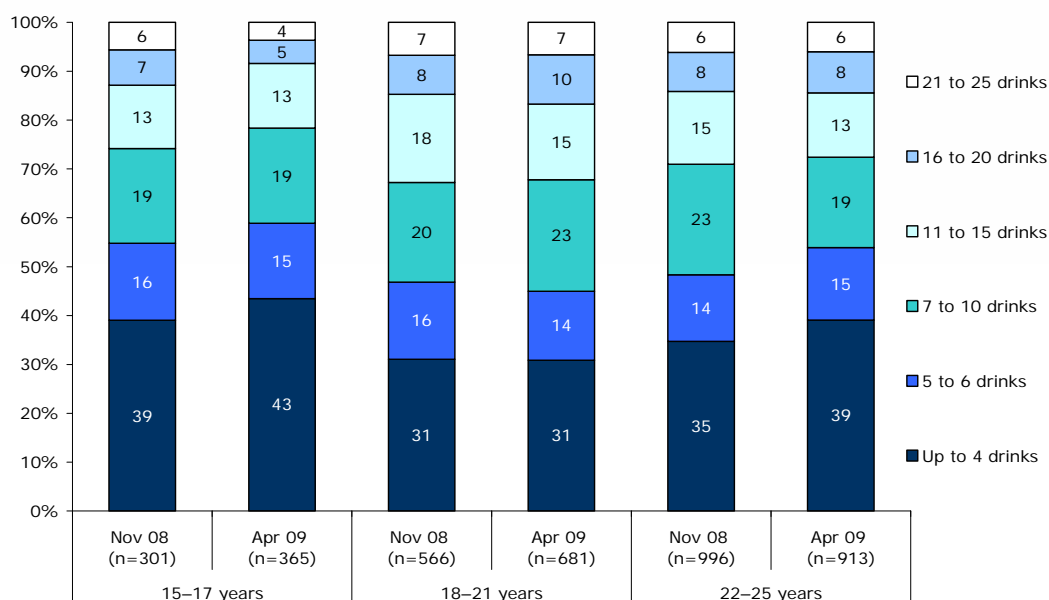
Figure 8. Number of standard drinks consumed on last occasion (15–25 year-olds who have ever had an alcoholic drink)



A significant difference was found between the number of standard drinks consumed on the last drinking occasion by 15–17 year-olds who have ever had an alcoholic drink in November 2008 and April 2009, as shown in Figure 8. There was a significant trend towards lower consumption in the latter wave among this group, with an increase from 22% to 26% among those who reported having no drinks in the past three months, and decreases in those who had had 21–25 standard drinks, 16–20 drinks, 7–10 drinks and 5–6 drinks (Kendall's tau-b, $p=0.028$). This finding may reflect the time of year in which the surveys were conducted. The November 2008 survey was conducted towards the end of the school year, a time of many celebrations for people this age, while the April 2009 survey was conducted towards the end of Term 1.

Among the other age groups, no significant differences were observed between November 2008 and April 2009.

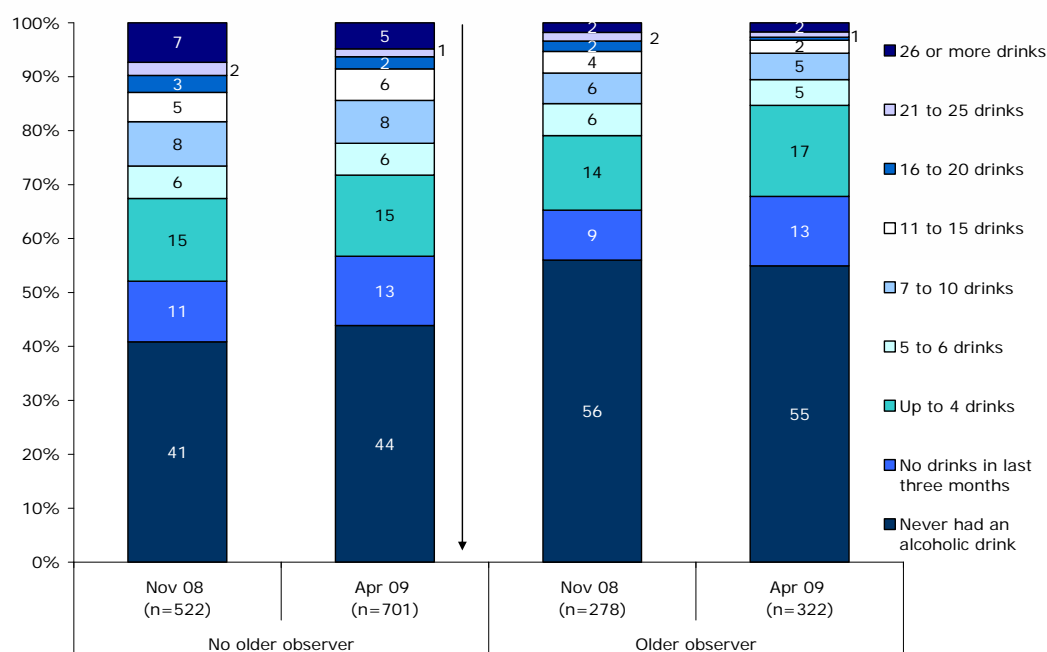
Figure 9. Number of standard drinks consumed on last occasion (15–25 year-olds who drank alcohol in last three months)



Among those who drank alcohol in the last three months, no significant differences in level of consumption were found between November 2008 and April 2009 (see Figure 9). The largest proportion within each age group reported drinking up to four standard drinks on their last drinking occasion in April 2009 (43% of 15–17 year-olds, 31% of 18–21 year-olds and 39% of 22–25 year-olds).

Young people aged 15–17 years were asked whether or not an observer was present when they completed the survey, and if so, whether this observer was younger or older than them, or about the same age. The number of standard drinks consumed on participants' last drinking occasion was analysed by whether or not participants were viewed by an older observer while completing the survey. The results are presented in Figure 10, overleaf.

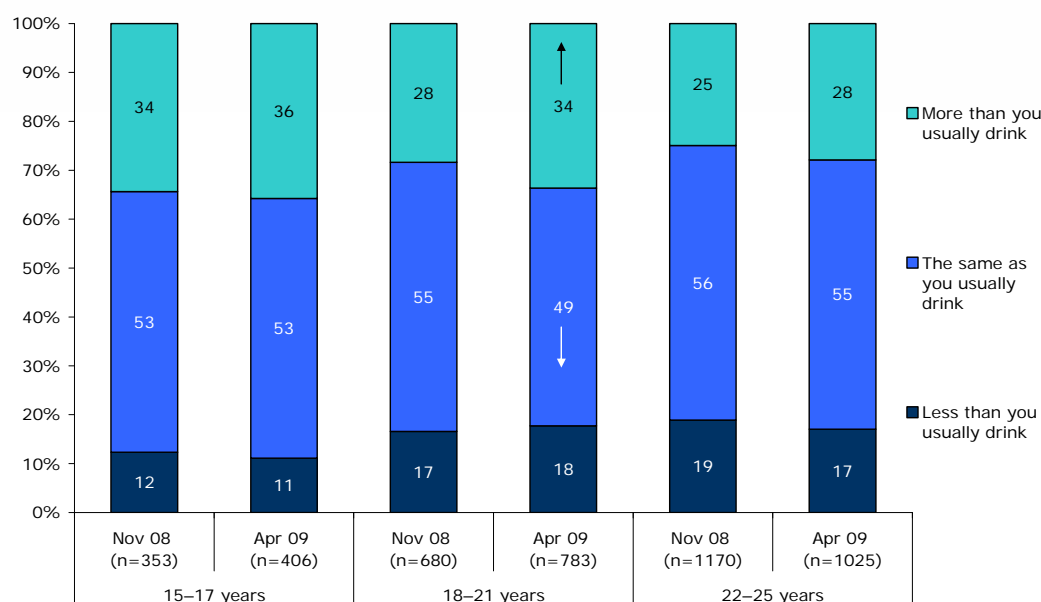
Figure 10. Standard drinks consumed on last occasion by whether or not observed by older person while completing the survey (15–17 year-olds)



As shown in Figure 10, in April 2009, 15–17 year-olds who were observed by an older person while completing the survey were more likely to report in April 2009 drinking fewer standard drinks on their last drinking occasion than those who were not observed (Kendall's tau-b, $p < 0.001$). These differences were primarily apparent at the extremes, with 28% of young people who were not observed reporting drinking more than four drinks the last time they were drinking, compared with 15% of those who were observed. Over half (55%) of 15–17 year-olds who were observed while completing the survey reported never having had an alcoholic drink compared with 44% of those who were not observed. There was a greater overall tendency for those who were not observed to report drinking at lower levels in April 2009 than in November 2008 (Kendall's tau-b, $p < 0.001$).

Young people aged 15–25 years who had consumed alcohol in the last three months were asked to indicate how the amount of alcohol they consumed on their last drinking occasion compares with the amount they usually drink. The results are illustrated in Figure 11, below.

Figure 11. Last occasion compared to usual consumption (15–25 year-olds who drank alcohol in last three months)

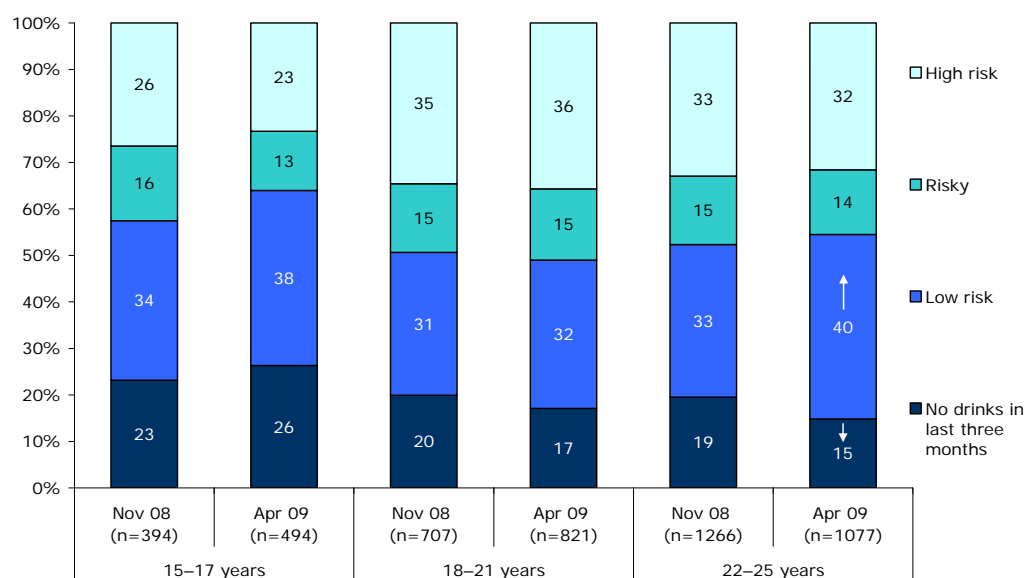


As evident in Figure 11, the largest proportions of young people who drank alcohol in the last three months within each age group reported that the amount of alcohol they consumed the last time they were drinking was the same as the amount that they usually drink, with around half of 15–17 year-olds (53%), 18–21 year-olds (49%) and 22–25 year-olds (55%) indicating this in April 2009. The only significant differences recorded between November 2008 and April 2009 were within the 18–21 year age group, with a significant decrease in the proportion reporting that the amount they drank on their last drinking occasion was the same as they usually drink (decreasing from 55% in November 2008 to 49% in April 2009, chi-square, $p=0.039$), and a corresponding increase in the proportion indicating that the amount they drank on their last drinking occasion was more than usual (increasing from 28% in November 2008 to 34% in April 2009, chi-square, $p=0.039$).

The short-term harm risk levels for males and females set out in the 2001 Australian Alcohol Guidelines (see page 17) were used to categorise the risk level of each participant's alcohol consumption. Low risk level drinking was defined as one to four drinks per drinking session for females and one to six drinks for males, risky drinking was between five and six drinks per session for females and seven and 10 drinks for males, high risk drinking was seven or more drinks per session for females and 11 or more drinks for males.

The risk level of the amount of alcohol consumed on 15–25 year-olds' last drinking occasion is shown by age group in Figure 12 (below). This figure includes all 15–25 year-olds who have ever had an alcoholic drink. The results for 15–25 year-olds who drank alcohol in the last three months are shown by age group in Figure 13 (overleaf).

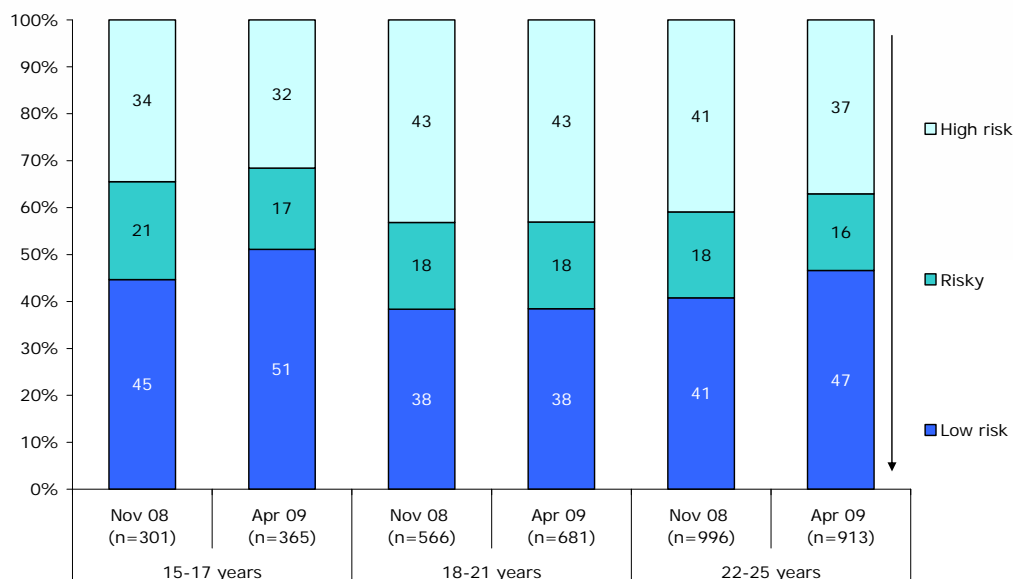
Figure 12. Risk level of last drinking occasion (15–25 year-olds who have ever had an alcoholic drink)



As shown in Figure 12, no significant differences were found between November 2008 and April 2009 in the risk level of alcohol consumed by 15–17 year-olds and 18–21 year-olds on their last drinking occasion. The largest proportions of 15–17 year-olds (38%) and 22–25 year-olds (40%) drank at low risk levels the last time they consumed alcohol, while the largest proportion of 18–21 year-olds (36%) drank at a high risk level, followed closely by low risk drinking (32%).

Significant differences between November 2008 and April 2009 were found in risk level results for 22–25 year-olds, with a significantly smaller proportion in April 2009 reporting having consumed no drinks in the three months prior to the survey than in November 2008 (decreasing from 19% to 15%, chi-square, $p=0.002$). There was a corresponding increase in the proportion of 22–25 year-olds reporting drinking at a low risk level the last time they were drinking (increasing from 33% to 40%, chi-square, $p=0.002$).

Figure 13. Risk level of last drinking occasion (15–25 year-olds that drank alcohol in last three months)



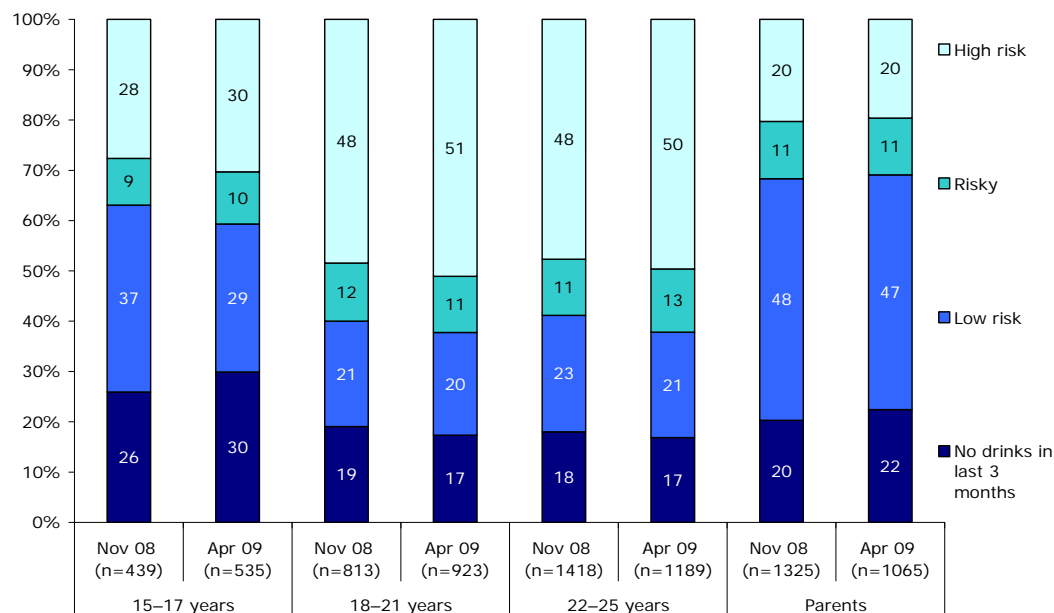
The risk level of last drinking occasion consumption is shown in Figure 13, for 15–25 year-olds who had an alcoholic drink in the last three months. Among 15–17 year-olds, the largest proportion of participants drank at a low risk level on that occasion, with 51% in April 2009 drinking at this level. Among 18–21 year-olds, the proportion drinking at a low risk level was 38%, while the proportion drinking at a high risk level was 43%. The risk level of last occasion drinking did not change significantly from November 2008 to April 2009 for 15–17 year-olds and 18–21 year-olds.

There was a significant shift observed among 22–25 year-olds towards drinking at a lower risk level on their last occasion in April 2009 than in November 2008 (Kendall's tau-b, $p=0.020$). The proportion drinking at a low risk level increased from 41% in November 2008 to 47% in April 2009, while the proportion drinking at a risky level decreased from 18% to 16% and the proportion drinking at a high risk level decreased from 41% to 37%.

Young people aged 15–25 years and parents of 13–17 year-olds who drank alcohol in the last three months were asked to indicate how often in this period they usually consumed one to four, five to six, seven to 10, 11 to 15 and 15 or more standard drinks of alcohol in a day. These results were used to determine the risk level of each young person and parent's alcohol consumption in the three months prior to being surveyed. An individual was classified as drinking at a risky level if they exceeded the risky level for their gender on one or more days in the last three months and high risk if they exceeded the high risk level on one or more days in the last three months. Figure 14 (overleaf) displays the risk level of last three months' alcohol

consumption by age group for 15–25 year-olds who have ever had an alcoholic drink and for parents.

Figure 14. Highest risk level of last three months' drinking (15–25 year-olds who have ever had an alcoholic drink and parents)



As shown in Figure 14, no significant differences were found between November 2008 and April 2009 in the risk level of the last three months' alcohol consumption of 15–25 year-olds who had consumed alcohol in the last three months and parents. In April 2009, the proportion of young people drinking at risky or high risk levels in the last three months varied from 40% among 15–17 year-olds to 63% among 22–25 year-olds. A smaller proportion of parents of 13–17 year-olds (31%) reported drinking at risky or high risk levels.

Figure 15. Highest risk level of last three months' drinking (15–25 year-olds that drank alcohol in last three months and parents)

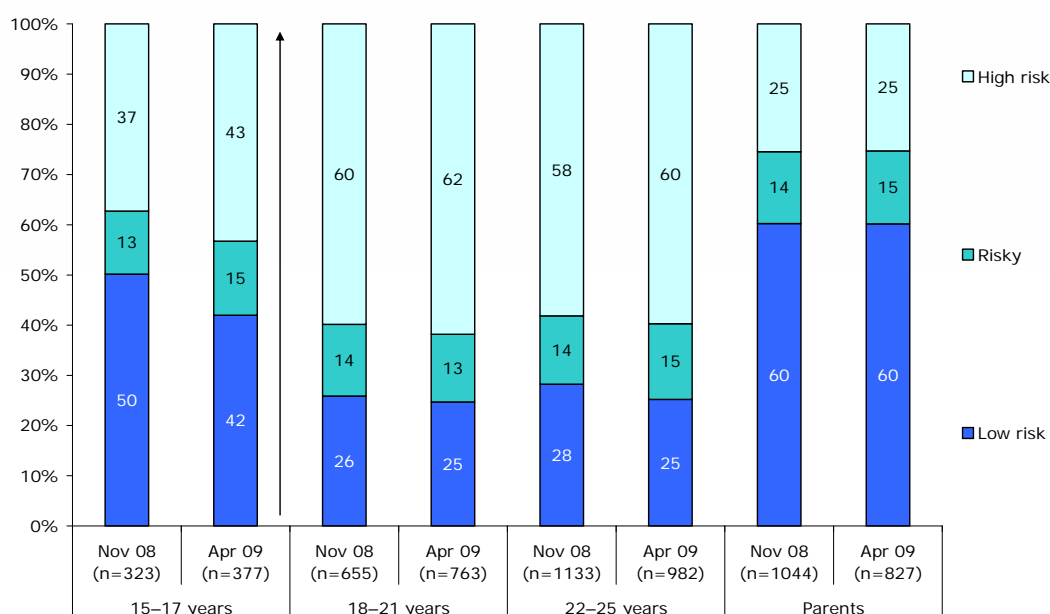


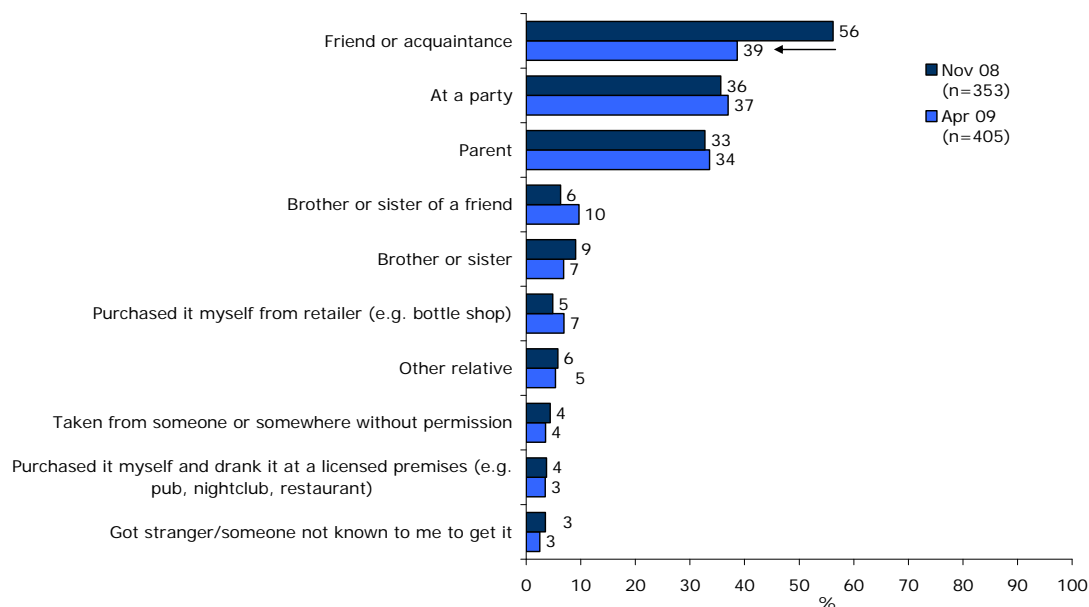
Figure 15 shows the risk level of the last three months' drinking for 15–25 year-olds who drank any alcohol in the last three months and parents of 13–17 year-olds. Among 15–17 year-olds who drank alcohol in the last three months, there was a significant shift towards a higher risk level of drinking between November 2008 and April 2009 (Kendall's tau-b, $p=0.041$). The proportion drinking at a low risk level in the three months prior to being surveyed dropped from 50% in November 2008 to 42% in April 2009, while the proportion drinking at a risky level increased from 13% to 15% and the proportion drinking at a high risk level increased from 37% to 43%.

Over half of 15–17 year-olds (58%), and three quarters of 18–21 year-olds (73%) and 22–25 (75%) year-olds drank at a risky or high risk level in the three months prior to being surveyed in April 2009. By comparison, 40% of parents drank at these levels in the three months prior to April 2009. The risk level of last three months' drinking did not change significantly between November 2008 and April 2009 for 18–21 year-olds, 22–25 year-olds and parents of 13–17 year-olds.

4.3 Obtaining alcohol

Young people aged 15–17 years who had consumed alcohol in the three months prior to the survey were asked how they obtained their alcohol the last time they were drinking. The results of this question are shown in Figure 16, below.

Figure 16. Sources through which alcohol was obtained on last drinking occasion (15–17 year-olds who drank alcohol in last three months)



As in November 2008, the method of obtaining alcohol most commonly reported by 15–17 year-olds in April 2009 who have consumed alcohol in the last three months was through a friend or acquaintance, as shown in Figure 16. However, the proportion indicating having done so in April 2009 was significantly smaller than the corresponding proportion in November 2008 (39%, compared to 56%, chi-square, $p < 0.001$). The next most common sources for alcohol in April 2009 remained parties (37%) and parents (34%).

Parents of 13–17 year-olds were asked to indicate under what circumstances they provided their 13–17 year-old teenager with alcohol in the three months prior to the survey. The proportion of parents indicating they provided alcohol to their children under different circumstances is illustrated in Figure 17, overleaf.

Figure 17. Circumstances in which alcohol was provided to 13–17 year-old children (Parents)

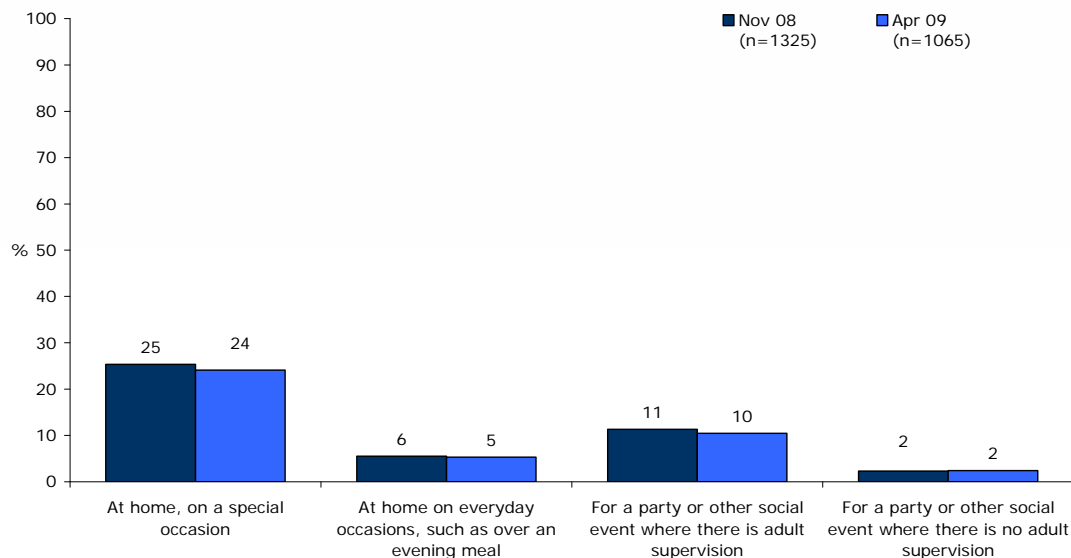


Figure 17 shows that there were no significant changes in responses to this question between November 2008 and April 2009, with the largest proportion of parents (24%) surveyed in April 2009 indicating they provided alcohol to their 13–17 year-old child to drink at home on a special occasion in the three months before the survey. Ten percent (10%) of parents surveyed in April 2009 gave their 13–17 year-old child alcohol to take to a party or other social event where there was adult supervision in the three months before the survey. Parents were less likely to have provided their children with alcohol at home on everyday occasions such as an evening meal (5%) or to take to parties where there is no adult supervision (2%).

4.4 Drinking strategies

Controlled drinking strategies

Young people aged 15–25 years who had consumed alcohol in the last three months were asked whether or not they had adopted certain alcohol-related behavioural strategies during this period. Nine different strategies were presented to participants. The results for the four more commonly adopted strategies are shown by age group in Figure 18 and the remaining five are shown by age group in Figure 19, both overleaf.

Figure 18. Most commonly adopted drinking strategies (15–25 year-olds who drank alcohol in last three months)

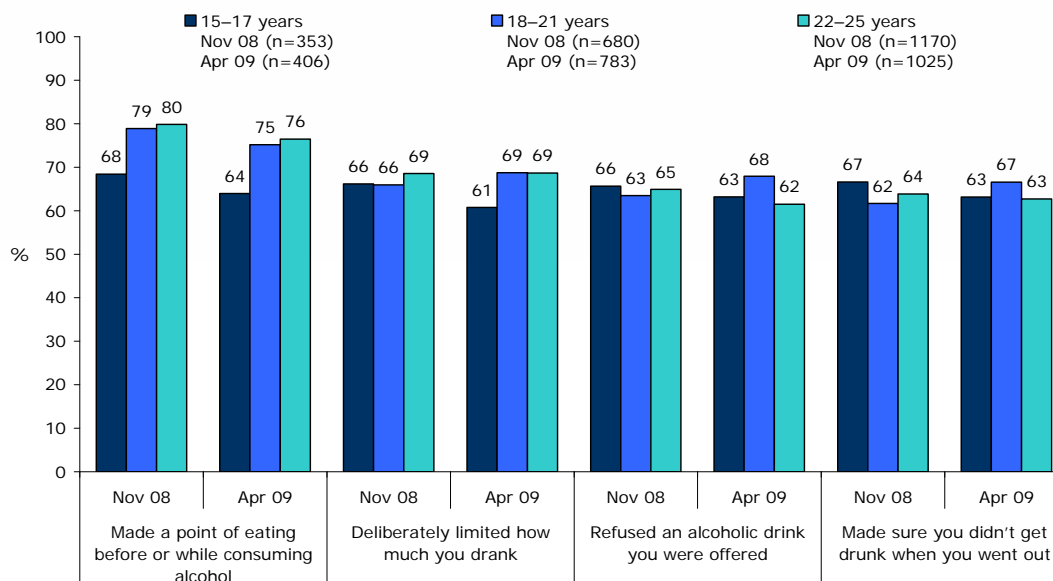


Figure 19. Less commonly adopted drinking strategies (15–25 year-olds who drank alcohol in last three months)

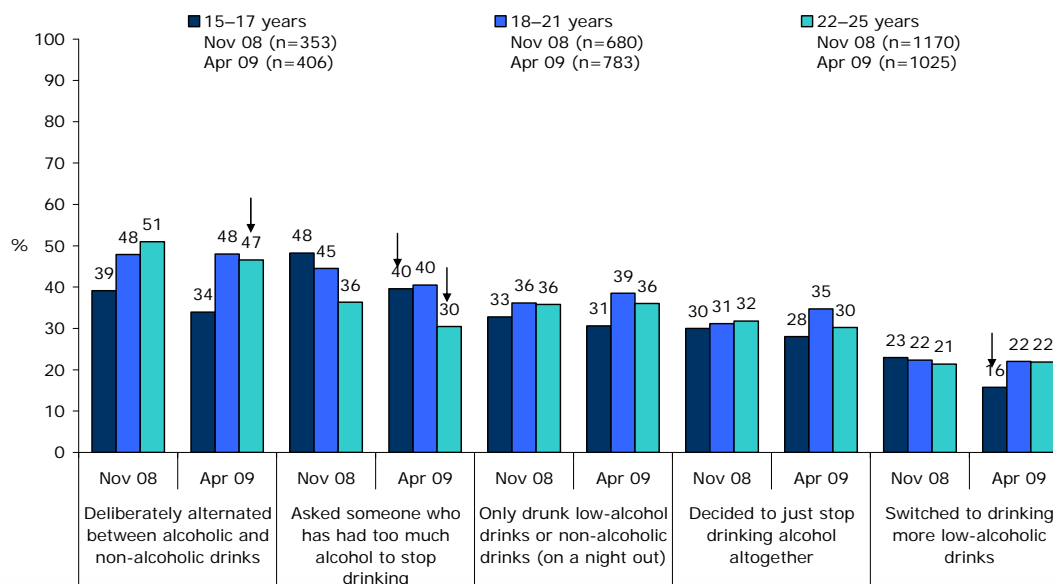


Figure 18 shows the strategy adopted by the largest proportion of 15–25 year-olds who drank alcohol in the last three months remained to make a point of eating before or while consuming alcohol, with the majority of 15–17 year-olds (64%), 18–21 year-olds (75%) and 22–25 year-olds (76%) indicating in April 2009 that they had done this in the three months prior to the survey. The next most commonly adopted strategies were deliberately limiting how much one

drank, refusing an alcoholic drink when it was offered and making sure one didn't get drunk when going out. There were no significant differences between November 2008 and April 2009 in responses to these four strategies.

Figure 19 (previous page) shows the five strategies less commonly adopted by 15–25 year-olds in April 2009. The strategy used by the smallest proportion of 15–25 year-olds was to switch to drinking more low-alcoholic drinks, practiced by one in six 15–17 year-olds (16%), and one in five 18–21 year-olds (22%), and 22–25 year-olds (22%) in the three months prior to the survey. Around one in three 15–25 year-olds who drank alcohol in the last three months (28% of 15–17 year-olds, 35% of 18–21 year-olds and 30% of 22–25 year-olds) reported deciding to stop drinking altogether.

There was a significant decrease between November 2008 and April 2009 in the proportion of 22–25 year-olds who indicated having deliberately alternated between alcoholic and non-alcoholic drinks (decreasing from 51% in November 2008 to 47% in April 2009, chi-square, $p=0.036$). There were also significant decreases in the proportion of 15–17 year-olds who had asked someone who had had too much alcohol to stop drinking (decreasing from 48% in November 2008 to 40% in April 2009, chi-square, $p=0.015$) and in the proportion of 22–25 year-olds who had adopted this strategy (decreasing from 36% in November 2008 to 30% in April 2009, chi-square, $p=0.004$). A significant decrease was also observed in the proportion of 15–17 year-olds who had switched to drinking more low-alcoholic drinks (decreasing from 23% in November 2008 to 16% in April 2009, chi-square, $p=0.012$). No significant differences were found between November 2008 and April 2009 in the proportion indicating that they had only drunk low-alcoholic or non-alcoholic beverages when they went out and the proportion that decided to stop drinking altogether.

Figure 20. Adoption of any drinking strategies (15–25 year-olds who drank alcohol in last three months)

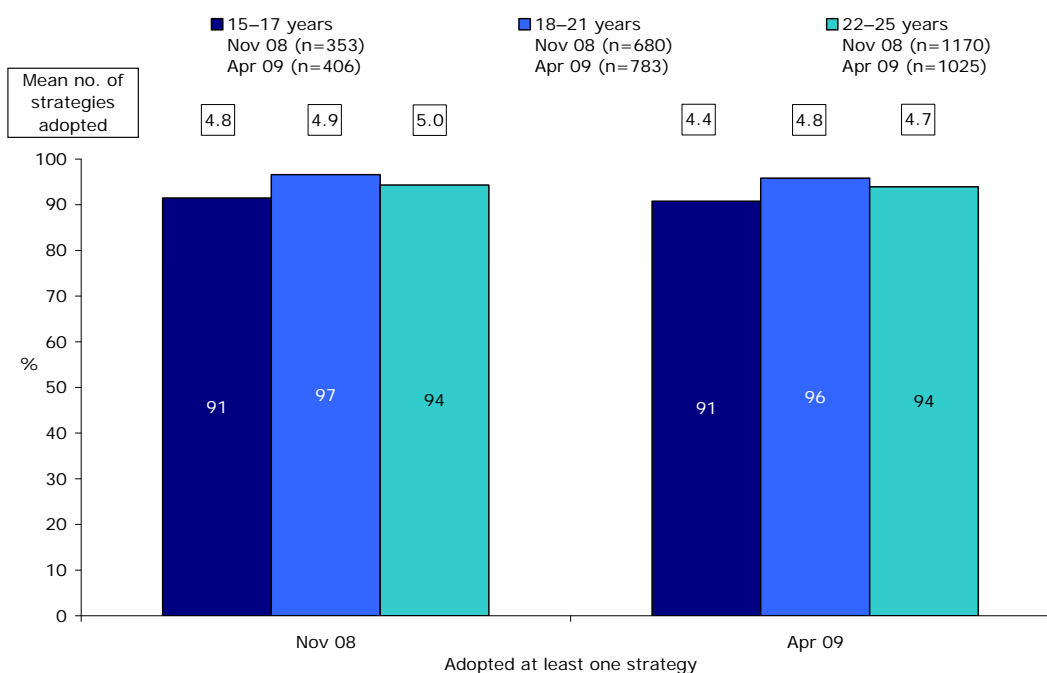
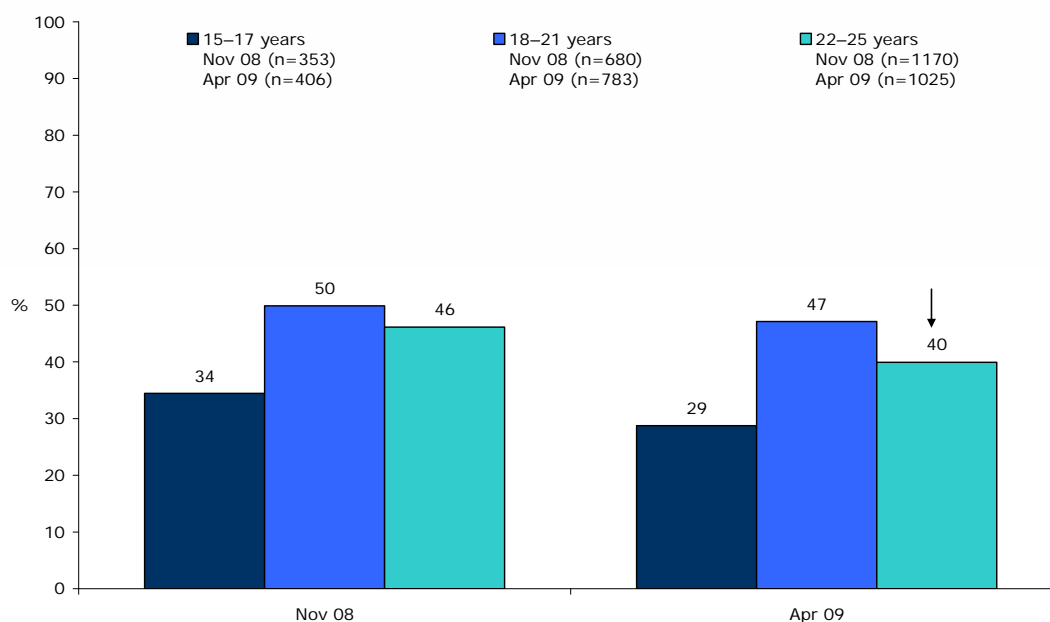


Figure 20 shows that in April 2009, 91% of 15–17 year-olds, 96% of 18–21 year-olds and 94% of 22–25 year-olds that drank alcohol in the last three months adopted within this period at least one of the nine alcohol-related behavioural strategies. This figure also shows that, in April 2009, 15–25 year-olds who drank alcohol in the three months prior to being surveyed adopted, on average, between four and five of the nine strategies during this period.

Negative drinking strategies

One negative behavioural strategy, drinking to get drunk, was presented to participants along with the nine more positive strategies displayed in Figure 18 and Figure 19. As for the other strategies, this was presented only to those who had consumed alcohol in the past three months. The proportion of 15–25 year-olds who indicated that they had deliberately drunk to get drunk in the three months prior to the survey is shown by age group in Figure 21, overleaf.

Figure 21. Drinking to get drunk (15–25 year-olds who drank alcohol in last three months)



As shown in Figure 21, there was a significant decrease across survey waves in the proportion of 22–25 year-olds who had consumed alcohol in the last three months that deliberately drank to get drunk at any time during that period, from 46% in November 2008 to 40% in April 2009 (chi-square, $p=0.003$). Across the other age groups, results in April 2009 were not significantly different from those obtained in November 2008, with more than a quarter of 15–17 year-olds (29%) and almost half of 18–21 year-olds (47%) indicating in April 2009 that they had drank to get drunk in the past three months.

Intended controlled drinking strategies

Young people aged 15–25 who had consumed alcohol in the past three months were then asked if they intended to adopt or at least try to adopt any of the strategies presented in the survey in the next three months. The results for the four strategies young people most commonly intend to adopt to reduce the likelihood of experiencing the negative effects of alcohol consumption are shown by age group in Figure 22 (overleaf) and the remaining five are shown by age group in Figure 23 (also overleaf).

Figure 22. Most popular intended drinking strategies (15–25 year-olds who have consumed alcohol in last three months)

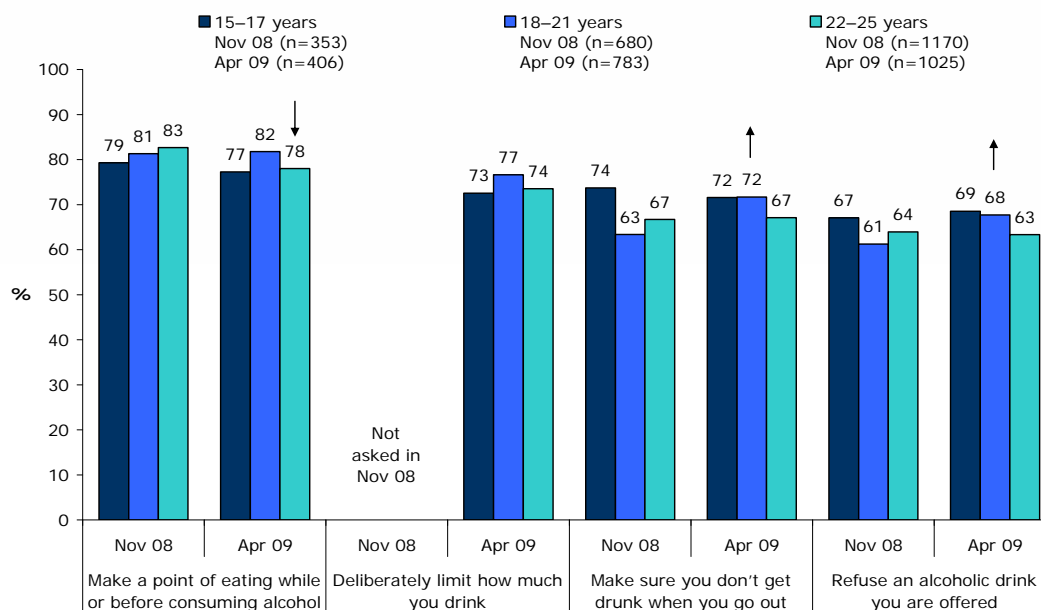
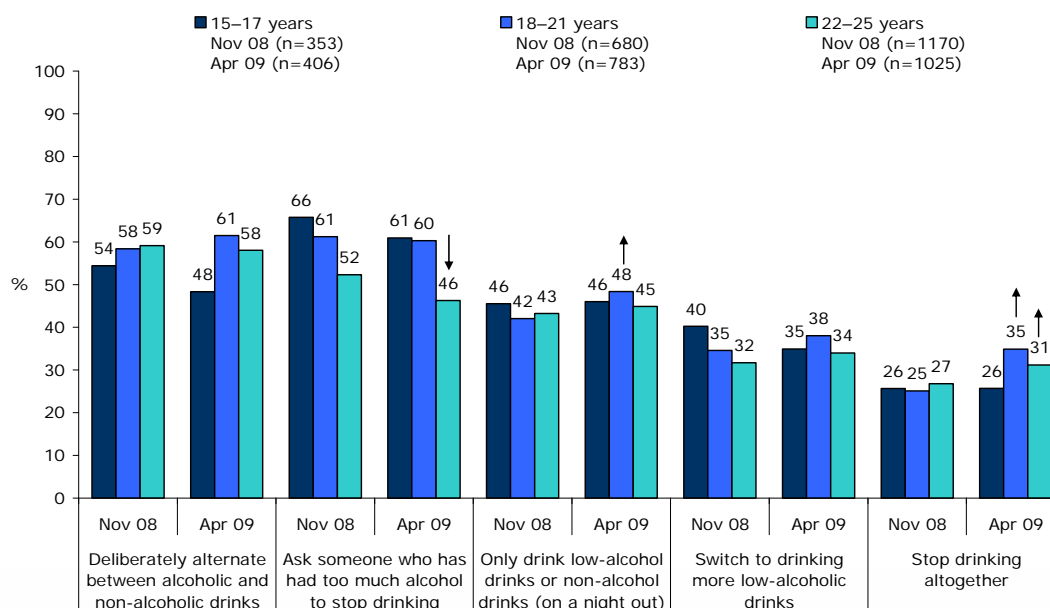


Figure 23. Less popular intended drinking strategies (15–25 year-olds who have consumed alcohol in last three months)



As illustrated in Figure 22, the most popular intended drinking strategy among 15–25 year-olds who drank alcohol in the last three months was to make a point of eating before consuming alcohol, with 77% of 15–17 year-olds, 82% of 18–21 year-olds, and 78% of 22–25 year-olds planning to do this over the next three months. There was a significant decrease from

November 2008 to April 2009 in the proportion of 22–25 year-olds who intend to make a point of eating before drinking alcohol (decreasing from 83% to 78%, chi-square, $p=0.005$). Significant increases were observed among 18–21 year-olds who intend to make sure they don't get drunk when they go out (increasing from 63% to 72%, chi-square, $p=0.001$), and among 18–21 year-olds who plan to refuse an alcoholic drink when it is offered (increasing from 61% to 68%, chi-square, $p=0.009$). One drinking strategy, 'deliberately limit how much you drink' was not asked in November 2008, but in April 2009, it was found that almost three quarters of 15–17 year-olds (73%), 18–21 year-olds (77%) and 22–25 (74%) year-olds intended to adopt or try to adopt this strategy in the next three months.

Figure 23 shows a significant decrease in the proportion of 22–25 year-olds who intend to ask someone who has had too much alcohol to stop drinking at some point in the next three months (decreasing from 52% in November 2008 to 46% in April 2009, chi-square, $p=0.005$), and an increase in the proportion of 18–21 year-olds who plan to only drink low-alcohol drinks or non-alcohol drinks when they go out (increasing from 42% in November 2008 to 48% in April 2009, chi-square, $p=0.013$). The proportions of 18–21 year-olds and 22–25 year-olds who intend to stop drinking altogether in the next three months increased significantly from November 2008 to April 2009 (from 25% to 35% among 18–21 year-olds and from 27% to 31% among 22–25 year-olds, chi-square, $p=0.013$).

No significant differences were observed between November 2008 and April 2009 in intentions to deliberately alternate between alcoholic and non-alcoholic drinks and to switch to drinking more low-alcoholic drinks.

Intended negative drinking strategies

Along with the nine positive strategies, 15–25 year-olds who drank alcohol in the last three months were asked whether they intended to drink to get drunk at all in the next three months. The proportions within each age group that intend to do this are illustrated in Figure 24, overleaf.

Figure 24. Intention to get drunk (15–25 year-olds who drank alcohol in last three months)

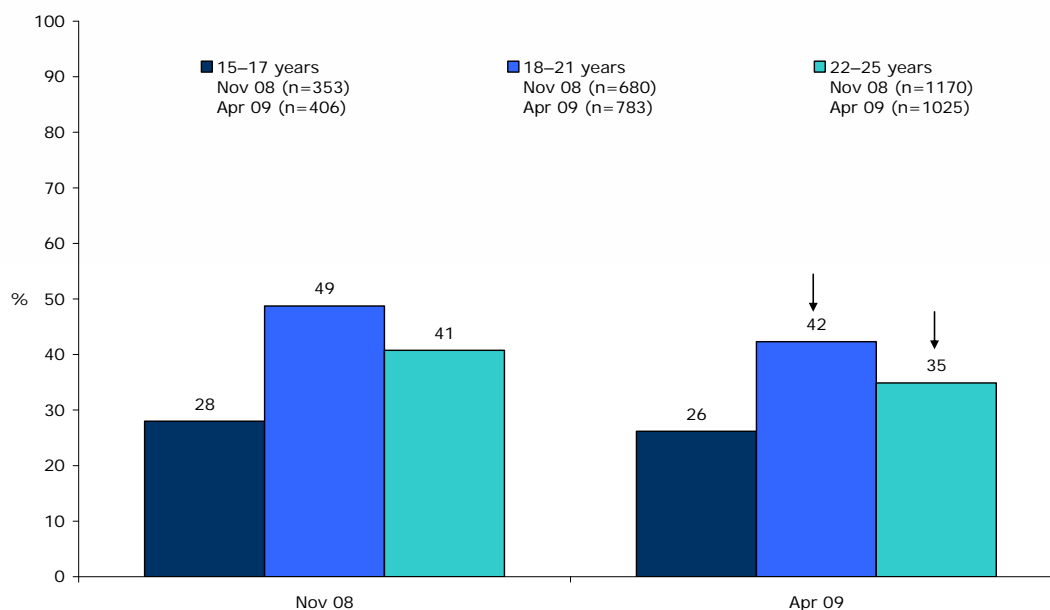


Figure 24 shows significant decreases in the proportions of 18–21 year-olds (from 49% in November 2008 to 42% in April 2009, chi-square, $p=0.012$) and 22–25 year-olds (from 41% in November 2008 to 35% in April 2009, chi-square, $p=0.005$) who indicated an intention to drink to get drunk in the next three months. The proportion of 15–17 year-olds who intended to get drunk did not change significantly between November 2008 and April 2009.

4.5 Frequency of negative experiences

All young people aged 15–25 years were asked to indicate how frequently each of 13 alcohol-related consequences (the result of the actions of others as well as their own actions as drinkers) had occurred to them within the three months prior to the survey. Consequences that are the result of the actions of others who have had too much to drink are shown by age and survey wave for all young people aged 15–25 years in Figure 25 to Figure 27 (pages 55 to 56), in order of frequency of experience. Consequences that are the result of one's own actions when drinking are shown by age and survey wave for 15–25 year-olds who drank alcohol in the last three months in Figure 28 to Figure 31 (pages 57 to 60), in order of frequency of experience.

Figure 25. Negative consequences of others' drinking (1st, 2nd) (15–25 year-olds)

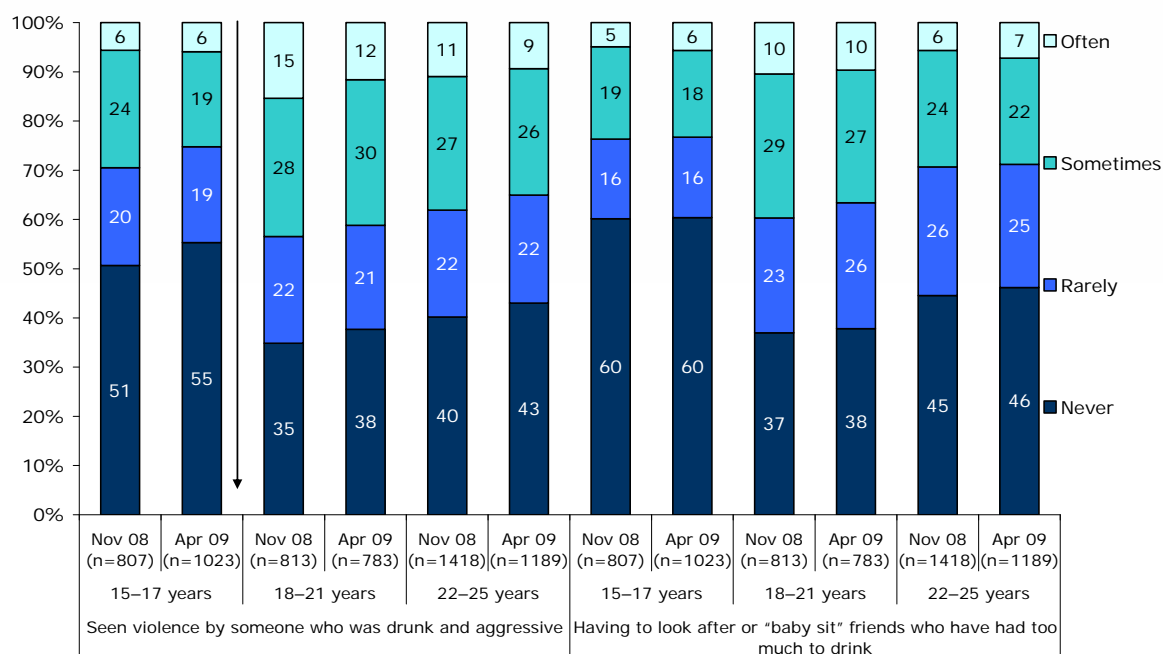


Figure 25 shows that, in April 2009, 25% of 15–17 year-olds, 42% of 18–21 year-olds and 35% of 22–25 year-olds had seen violence by someone who was drunk and aggressive sometimes or often in the three months prior to being surveyed. There was a significant overall decrease in the likelihood of having seen violence by someone who was drunk and aggressive from November 2008 to April 2009 among 15–17 year-olds (Kendall's tau-b, $p=0.039$)¹².

In April 2009, 24% of 15–17 year-olds, 37% of 18–21 year-olds and 29% of 22–25 year-olds had experienced having to look after or 'baby sit' friends who had too much to drink sometimes or often in the three months prior to being surveyed.

Figure 26 (overleaf) shows that, in April 2009, 14% of 15–17 year-olds and 23% of 18–21 year-olds and 22–25 year-olds received unwanted sexual advances from someone who was drunk sometimes or often in the three months prior to being surveyed. Similarly, 14% of 15–17 year-olds, 22% of 18–21 year-olds and 18% of 22–25 year-olds were verbally abused or threatened by someone who was drunk sometimes or often in this period.

¹² There was also a significant overall decrease in the likelihood of having seen violence by someone who was drunk and aggressive from November 2008 to April 2009 among 22–25 year-olds who drank alcohol in the last three months (Kendall's tau-b, $p=0.034$).

Figure 26. Negative consequences of others' drinking (3rd, 4th) (15–25 year-olds)

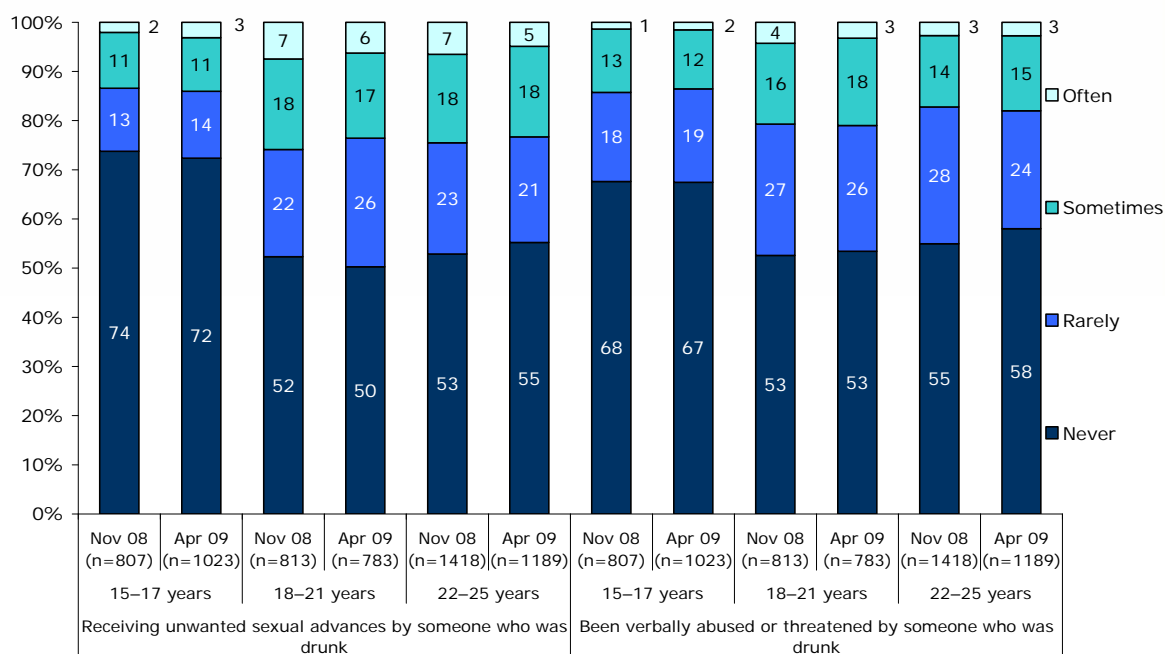
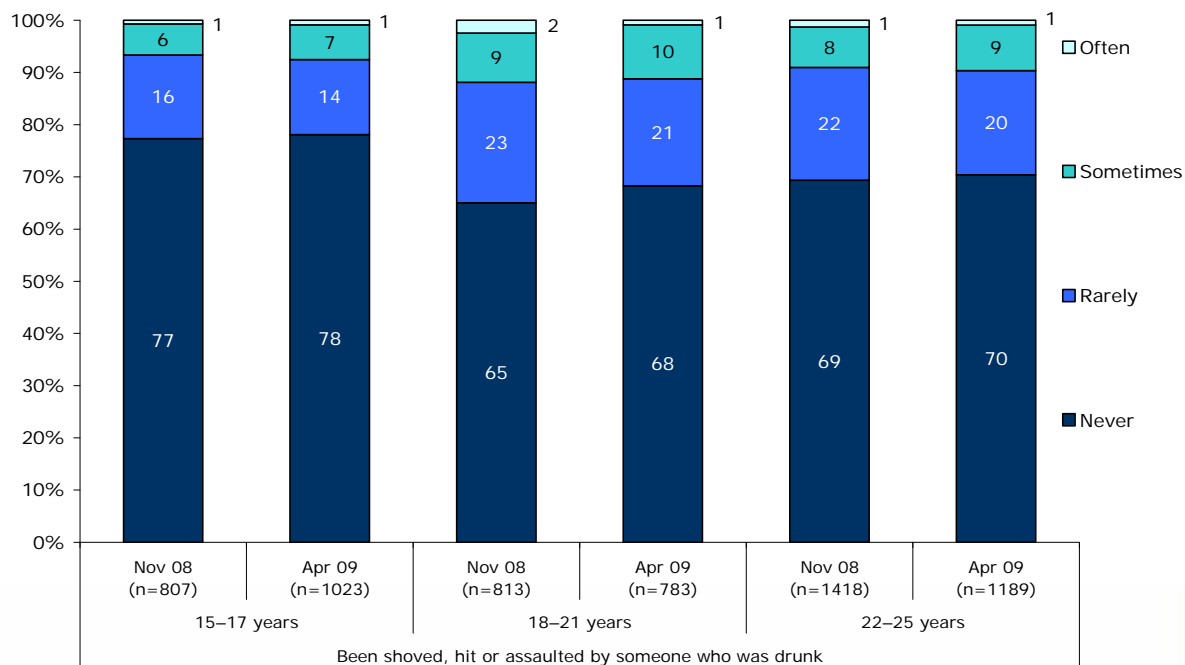


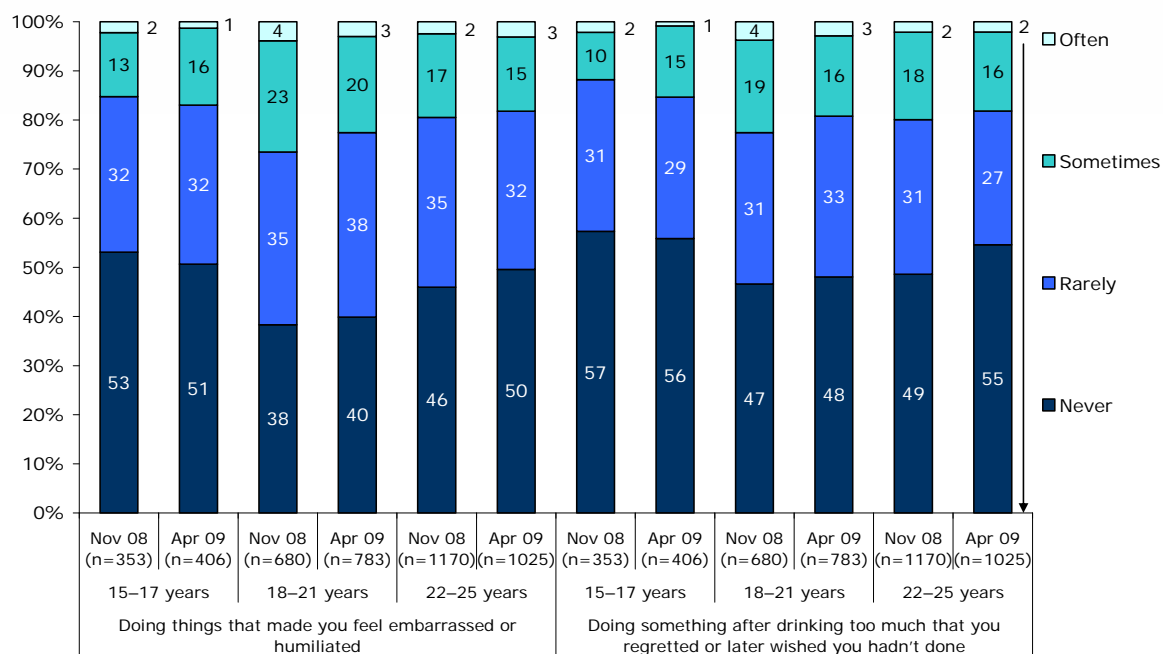
Figure 27. Negative consequences of others' drinking (5th) (15–25 year-olds)



In April 2009, 8% of 15–17 year-olds, 11% of 18–21 year-olds and 10% of 22–25 year-olds were shoved, hit or assaulted by someone who was drunk sometimes or often in the three months prior to being surveyed (see Figure 27).

The next series of Figures illustrate the frequency with which negative consequences of one's own drinking were experienced by 15–25 year-olds who drank alcohol in the last three months, ordered from most to least frequently experienced overall.

Figure 28. Negative consequences of own drinking (1st, 2nd) (15–25 year-olds who drank alcohol in last three months)



As illustrated in Figure 28, in April 2009, 17% of 15–17 year-olds, 23% of 18–21 year-olds and 18% of 22–25 year-olds who drank alcohol in the last three months sometimes or often in this period did things that made them feel embarrassed or humiliated as a result of drinking too much.

In April 2009, 16% of 15–17 year-olds, 19% of 18–21 year-olds and 18% of 22–25 year-olds who drank alcohol in the last three months sometimes or often did something after drinking too much that they regretted or later wished they hadn't done. There was a significant overall decrease from November 2008 to April 2009 in the frequency with which 22–25 year-olds who had consumed alcohol in the past three months experienced this consequence of their own drinking (Kendall's tau-b, $p=0.013$).

Figure 29. Negative consequences of own drinking (3rd, 4th) (15–25 year-olds who drank alcohol in last three months)

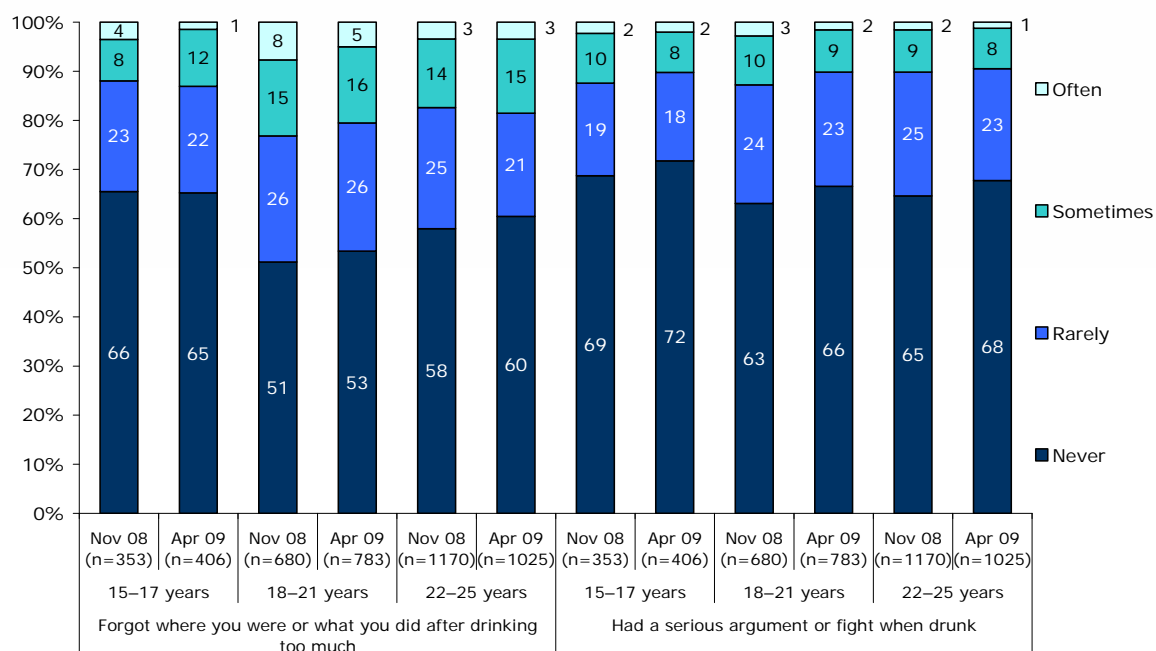
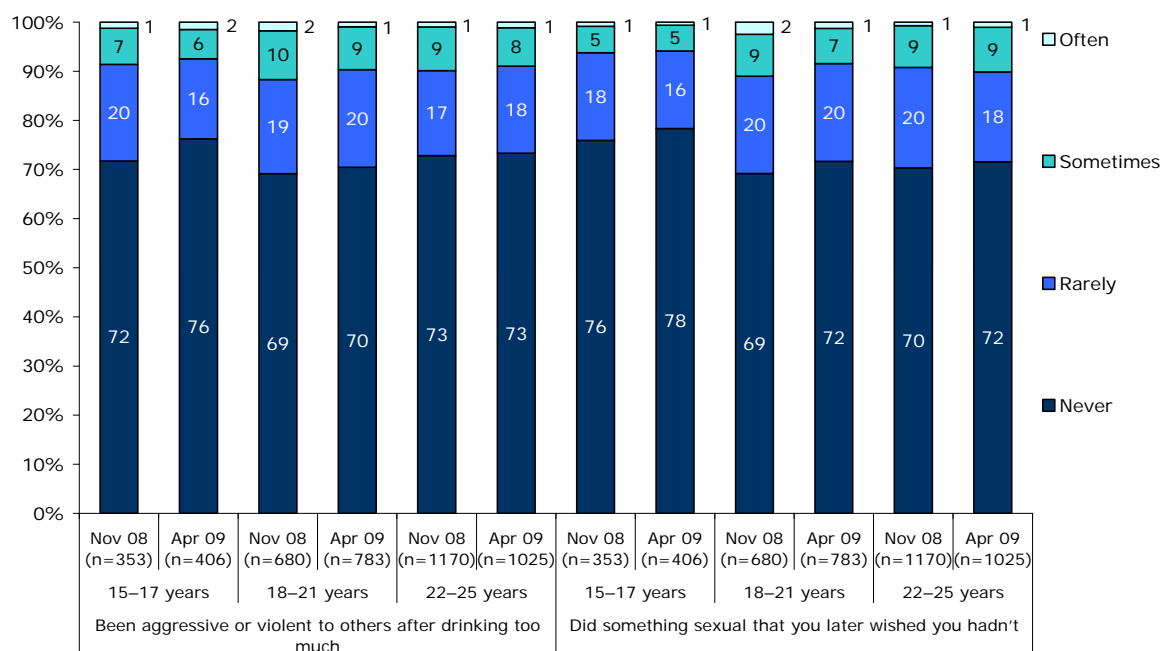


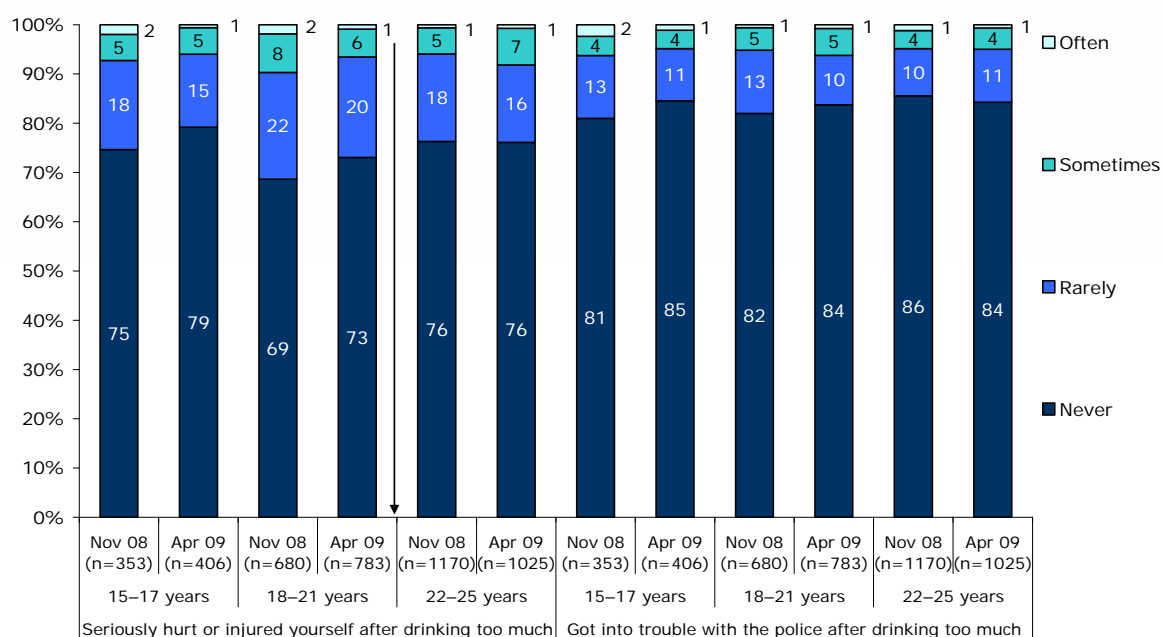
Figure 29 shows that, in April 2009, 13% of 15–17 year-olds, 21% of 18–21 year-olds and 18% of 22–25 year-olds who drank alcohol in the last three months sometimes or often in this period forgot where they were or what they did after drinking too much. Smaller proportions (10% of 15–17 year-olds, 11% of 18–21 year-olds and 9% of 22–25 year-olds who drank alcohol in the last three months) sometimes or often in the last three months had a serious argument or a fight when they were drunk.

Figure 30. Negative consequences of own drinking (5th, 6th) (15–25 year-olds who drank alcohol in last three months)



As shown in Figure 30, in April 2009, around one in ten 15–17 year-olds (8%), 18–21 year-olds (10%) and 22–25 year-olds (9%) who consumed alcohol in the last three months sometimes or often in this period were aggressive or violent to others after drinking too much. Similar proportions (6% of 15–17 year-olds, 8% of 18–21 year-olds and 10% of 22–25 year-olds who drank alcohol in the last three months) sometimes or often in the last three months did something sexual that they later wished they had not done.

Figure 31. Negative consequences of own drinking (7th, 8th) (15–25 year-olds who drank alcohol in last three months)



As shown in Figure 31, in April 2009, fewer than one in ten 15–17 year-olds (6%), 18–21 year-olds (7%) and 22–25 year-olds (8%) who consumed alcohol in the last three months sometimes or often in this period seriously hurt or injured themselves after drinking too much. There was a significant overall decrease from November 2008 to April 2009 in the frequency with which 18–21 year-olds who experienced this after drinking too much (Kendall's tau-b, $p=0.038$).

In April 2009, 15–25 year-olds that drank alcohol in the previous three months least frequently experienced getting into trouble with the police after drinking too much, with 5% of 15–17 year-olds, 6% of 18–21 year-olds and 5% of 22–25 year-olds experiencing this sometimes or often in the three months prior to being surveyed.

4.6 Discussions about alcohol

Young people aged 15–25 years were asked a series of questions to determine whether they had had any discussions about alcohol in the previous three months, what prompted these conversations, who participated in them, and what was discussed.

Parents of 13–17 year-olds were asked whether they had any discussions in the previous three months with their child about alcohol, what prompted these discussions and what was discussed.

Responses to these questions are discussed in this section.

Figure 32. Discussions about alcohol (Parents)

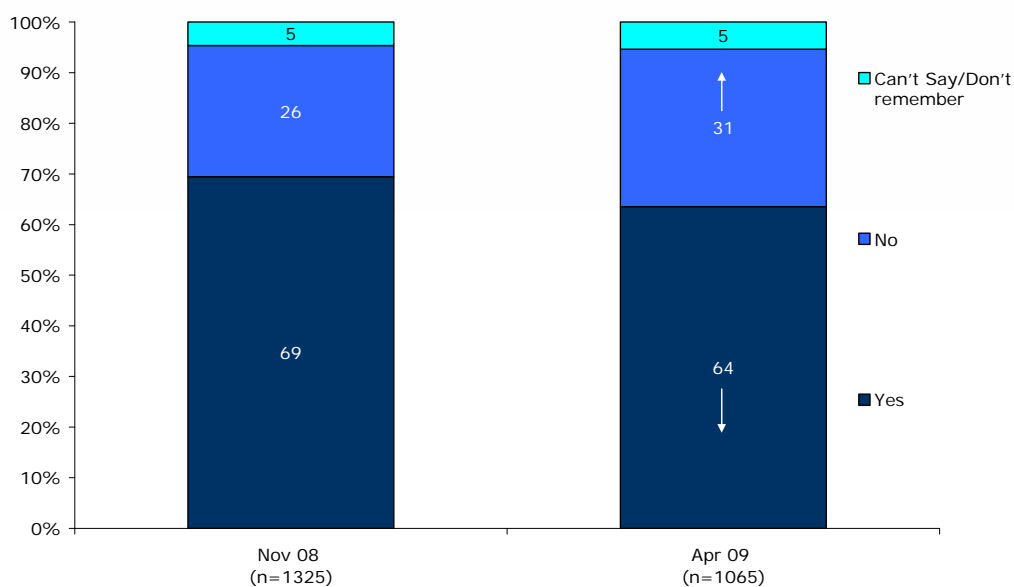
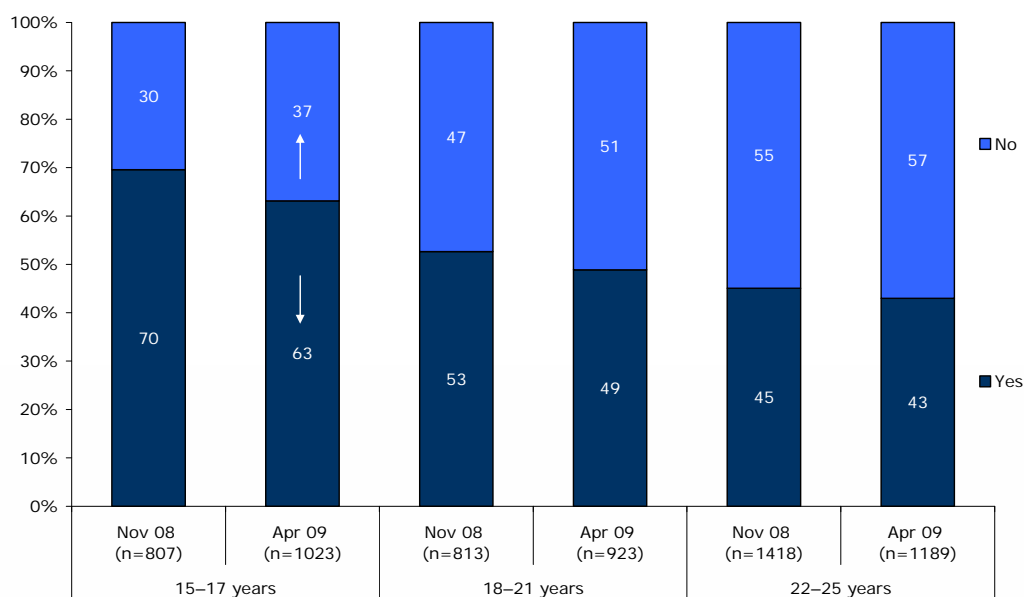


Figure 32 illustrates the proportions of parents in November 2008 and April 2009 having had conversations with their 13–17 year-old children about alcohol in the three months prior to being surveyed. In general, fewer parents reported having discussed alcohol with their children in April 2009 than in November 2008 (decreasing from 69% of parents in November 2008 to 64% in April 2009, chi-square, $p=0.010$).

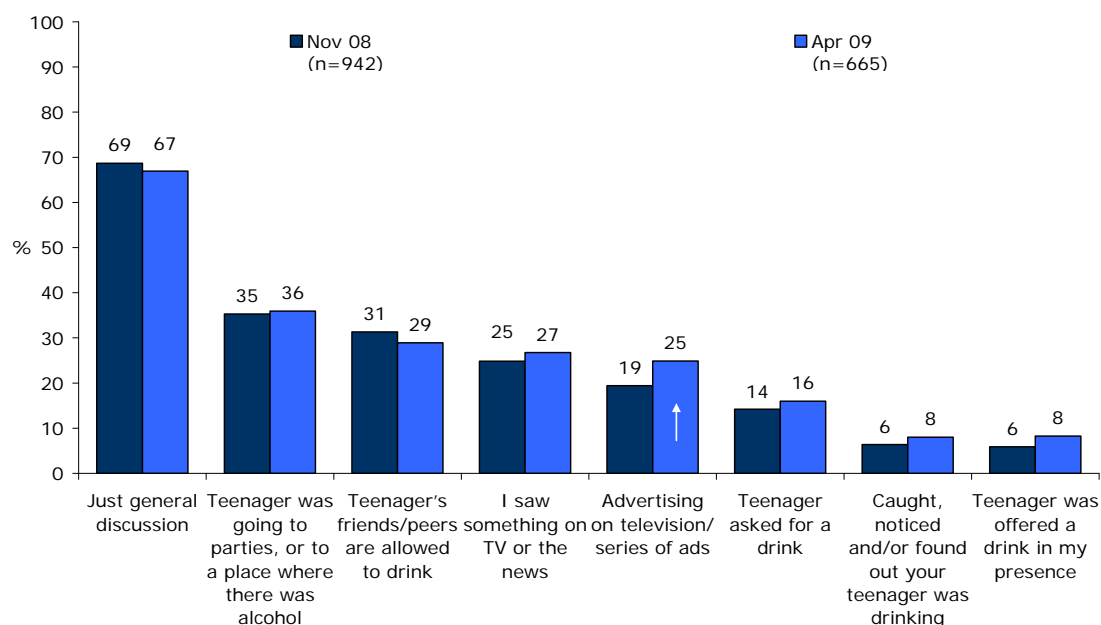
Figure 33. Discussions about alcohol (15–25 year-olds)



As shown in Figure 33 (previous page), in April 2009, almost two thirds of 15–17 year-olds (63%), half of those aged 18–21 years (49%) and around two in five 22–25 year-olds (43%) indicated they had had discussions in the last three months about the negative things that can happen when someone drinks alcohol. There was a significant decrease from November 2008 to April 2009 in the proportion of 15–17 year-olds that discussed the negative consequences of drinking alcohol with someone in the three months prior to being surveyed (decreasing from 70% in November 2008 to 63% in April 2009, chi-square, $p < 0.001$).

Parents who indicated that they had discussions with their teenager about alcohol in the three months prior to the survey were asked to indicate what prompted these discussions. Their responses are shown in Figure 34, below.

Figure 34. Discussion prompts (Parents who discussed alcohol)



The majority of discussions that parents had with their children about alcohol arose in the course of general discussion (67% in the April 2009) (see Figure 34). The child going to parties or to a place where there would be alcohol was the next most common prompt for parents to discuss alcohol with their children (36%), followed by the child's friends or peers being allowed to drink (29%), and seeing something on TV or the news (29%).

There was a significant increase in the proportion of parents indicating that advertising or a series of ads on television served as the prompt for a discussion about alcohol, increasing from 19% in November 2008 to 25% in April 2009 (chi-square, $p = 0.012$). No other significant differences were found between responses in November 2008 and April 2009.

Young people aged 15–25 years who indicated that they had discussions in the three months prior to the survey about the negative consequences of drinking alcohol were also asked to indicate what prompted these discussions. These results are shown by age group in Figure 35 and Figure 36 (both below), ordered from most to least common responses.

Figure 35. Most common discussion prompts (15–25 year-olds who discussed alcohol)

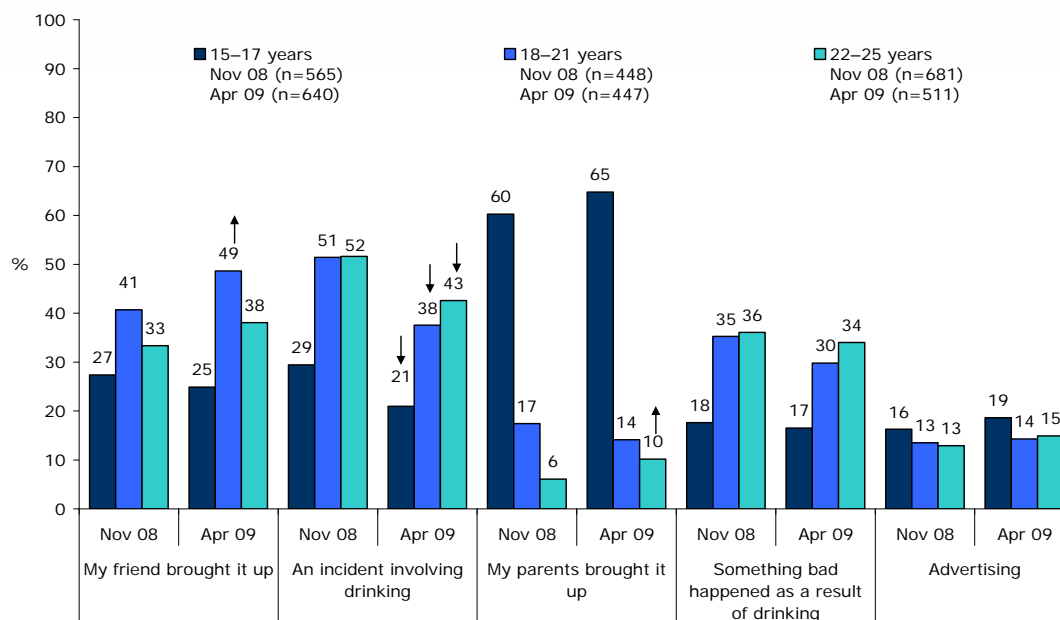
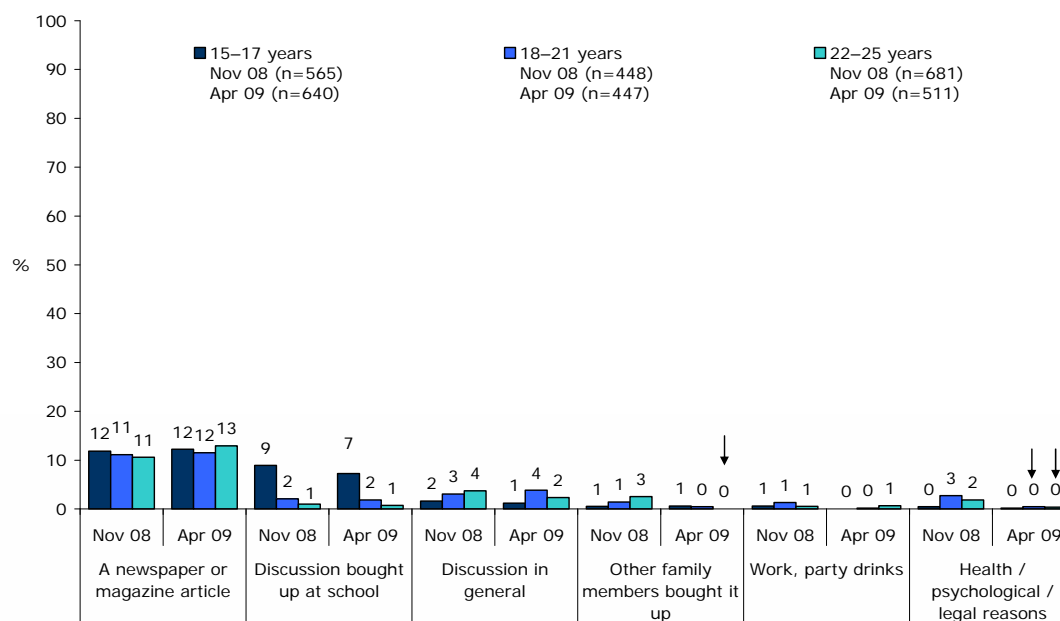


Figure 36. Less common discussion prompts (15–25 year-olds who discussed alcohol)



In April, 2009, the most common prompt for 15–17 year-olds to discuss the consequences of alcohol consumption was their parents (65%), as shown in Figure 35 (previous page). The most common discussion prompts for 18–21 year-olds were friends (49%), followed by an incident involving drinking (38%) and something bad happening as a result of drinking (30%). Among 22–25 year-olds, the most common prompts were an incident involving drinking (43%), friends (38%), and something bad happening as a result of drinking (34%).

From November 2008 to April 2009, there were significant decreases among all age groups in the proportions indicating their discussions were prompted by an incident involving drinking, decreasing from 29% to 21% for 15–17 year-olds (chi-square, $p=0.001$), from 51% to 38% for 18–21 year-olds (chi-square, $p<0.001$), and from 52% to 43% for 22–25 year-olds (chi-square, $p=0.002$). There was a significant increase from November 2008 to April 2009 in the proportion of 18–21 year-olds indicating their discussions about alcohol were prompted by a friend bringing it up (increasing from 41% to 49%, chi-square, $p=0.018$). There was also a significant increase in the proportion of 22–25 year-olds whose parents were the prompt for discussions about alcohol (increasing from 6% in November 2008 to 10% in April 2009, chi-square, $p=0.011$).

Figure 36 (previous page) shows the six least common discussion prompts. Among these, newspaper or magazine articles were mentioned by around one in ten 15–17 (12%), 18–21 year-olds (12%) and 22–25 year-olds (13%), while fewer than one in ten in each age group reported being prompted by any of the other events. Significant decreases were found in the proportions of 18–21 year-olds (3% to 0%, chi-square, $p=0.007$) and 22–25 year-olds (2% to 0%, chi-square, $p=0.020$) citing health/psychological/legal reasons as prompting discussions about alcohol. The proportion of 22–25 year-olds who reported other family members bringing alcohol up as the prompt for their discussion also decreased significantly from 3% in November 2008 to 0% in April 2009 (chi-square, $p<0.001$).

Young people aged 15–25 years who discussed alcohol with someone in the last three months were asked to indicate with whom they had this discussion. Their responses are shown in Figure 37, overleaf.

Figure 37. Discussion participants (15–25 year-olds who discussed alcohol)

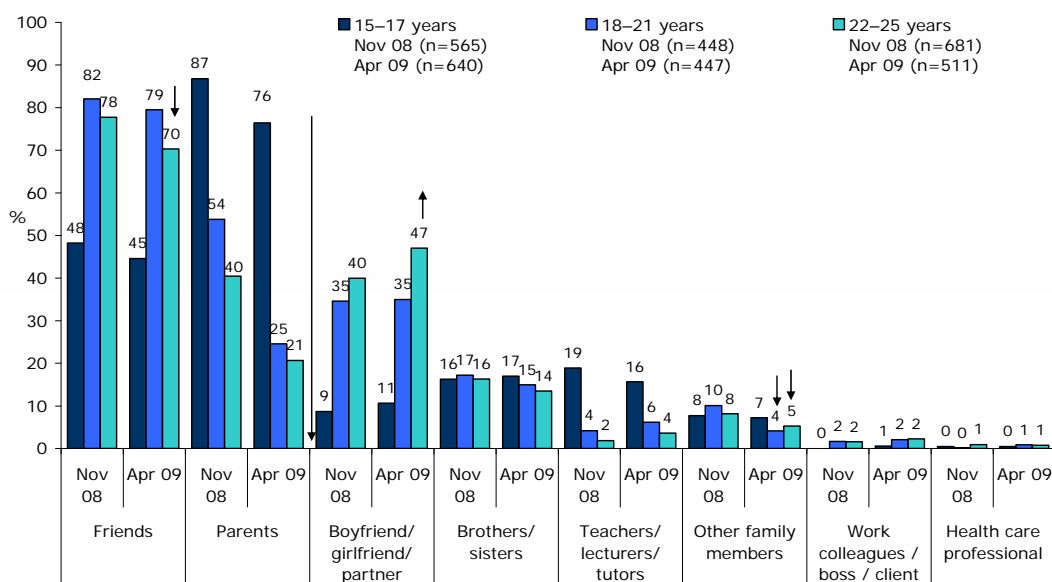


Figure 37 shows the people with whom young people aged 15–25 had discussed the negative consequences of alcohol in the last three months. As in November 2008, 15–17 year-olds most commonly had these discussions with their parents (76%), followed by their friends (45%). For 18–21 year-olds, discussions were most commonly held with friends (79%) followed by a boyfriend, girlfriend or partner (35%) and parents (25%). Among 22–25 year-olds, discussions were most commonly held with friends (70%), followed by a boyfriend/girlfriend/partner (47%).

Several significant changes between November 2008 and April 2009 were noted. There was a significant decline in the proportion of 22–25 year-olds who discussed alcohol with their friends (from 78% to 70%, chi-square, $p=0.005$), and a significant decline in all age groups in the proportion discussing alcohol with their parents (from 87% to 76% among 15–17 year-olds, chi-square, $p<0.001$; from 54% to 25% among 18–21 year-olds, chi-square, $p<0.001$; and from 40% to 21% among 22–25 year-olds, chi-square, $p<0.001$). In addition, there was a significant increase in the proportion of 22–25 year-olds who discussed alcohol with their boyfriend, girlfriend or partner, from 40% in November 2008 to 47% in April 2009 (chi-square, $p=0.019$), and a decrease in the proportion of 18–21 and 22–25 year-olds who discussed alcohol with other family members (from 10% to 4% for 18–21 year-olds, chi-square, $p<0.001$; and from 8% to 5% for 22–25 year-olds, chi-square, $p=0.035$).

Figure 38. Discussion content (Parents who discussed alcohol)

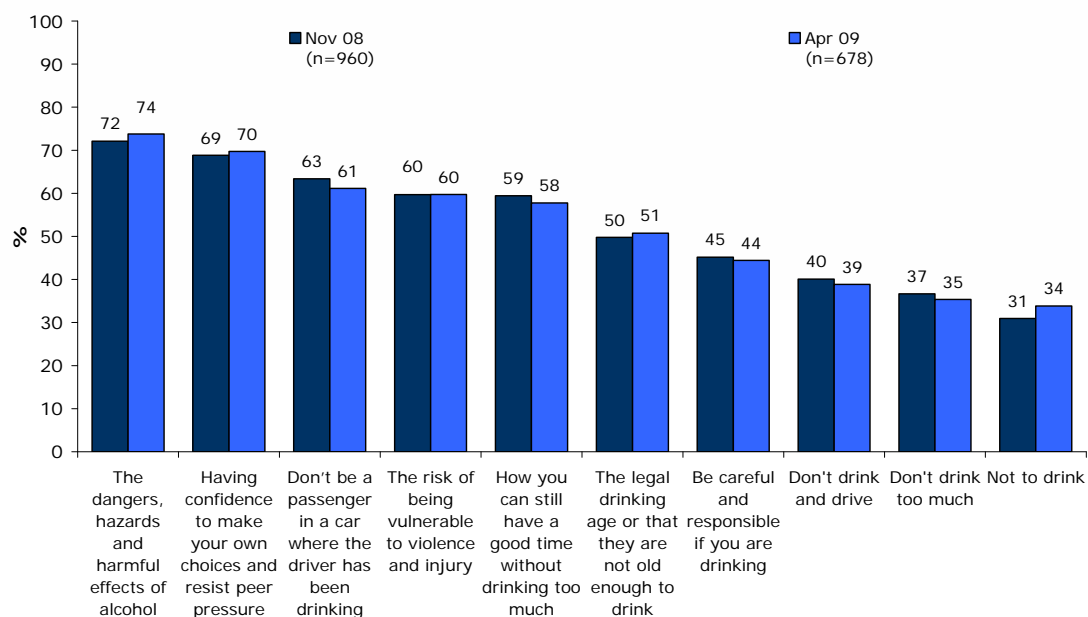


Figure 38 illustrates the main content of discussions about alcohol that parents had with their children aged 13–17 years in the three months prior to being surveyed. As in November 2008, the topics of discussion mentioned by the majority of parents were the dangers, hazards and harmful effects of alcohol (74%), having confidence to make your own choices and resist peer pressure (70%), avoiding being a passenger in a car where the driver has been drinking (61%), the risk of being vulnerable to violence and injury (60%), and how you can still have a good time without drinking too much (58%). There were no significant differences between November 2008 and April 2009 in the alcohol-related issues that parents discussed with their children.

Young people aged 15–25 years who indicated that they had discussed alcohol with others in the last three months were also asked what they spoke about. The results are shown in Figure 39 and Figure 40 (both overleaf), ordered from most to least commonly mentioned.

Figure 39. Most common discussion topics (15–25 year-olds who discussed alcohol)

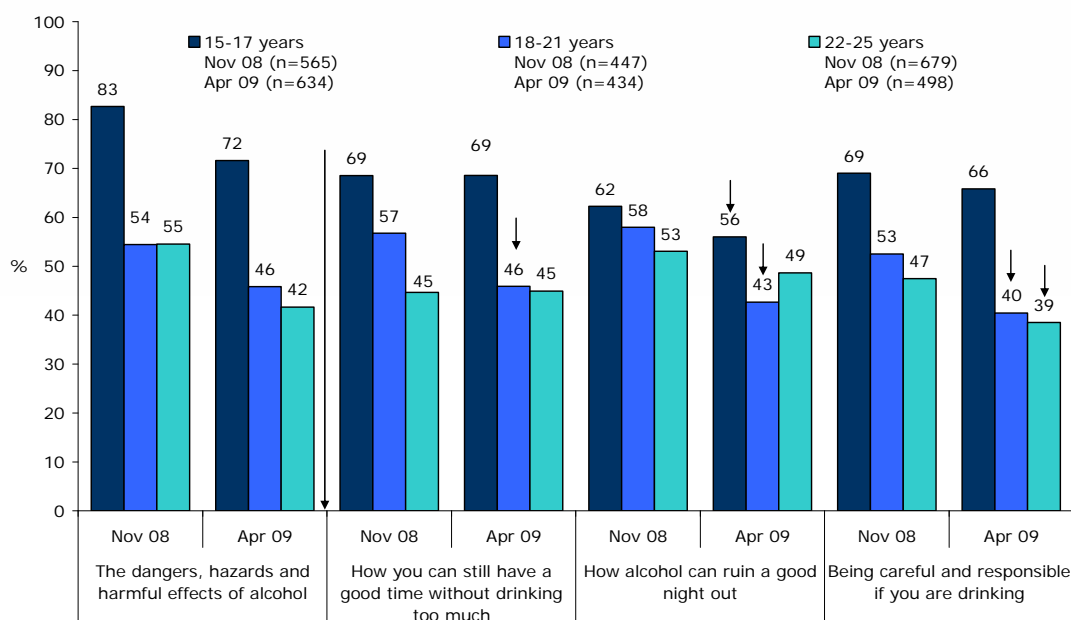


Figure 40. Less common discussion topics (15–25 year-olds who discussed alcohol)

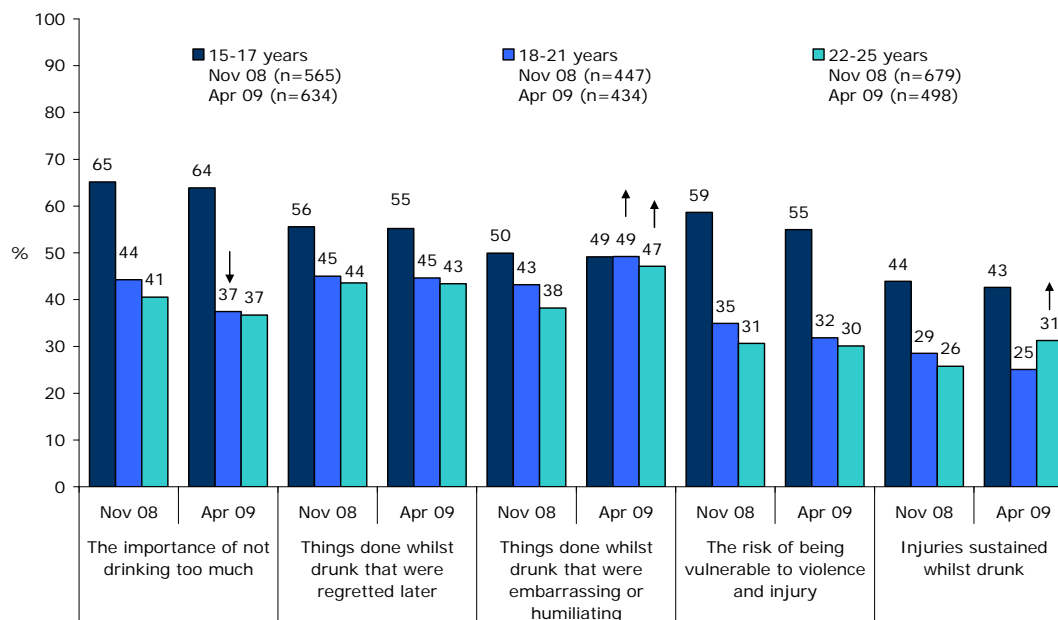


Figure 39 shows several significant changes in conversation topics between November 2008 and April 2009. There was a significant decrease across the two survey waves in the proportion within each age group discussing the dangers, hazards and harmful effects of alcohol, decreasing from 83% to 72% among 15–17 year-olds, from 55% to 46% among 18–21 year-olds, and from 55% to 42% among 22–25 year-olds (Kendall's tau-b, $p < 0.001$).

The proportion of 18–21 year-olds discussing how you can still have a good time without drinking too much decreased significantly from 57% in November 2008 to 46% in April 2009 (chi-square, $p=0.001$), as did the proportions of 15–17 and 18–21 year-olds discussing how alcohol can ruin a good night out (decreasing from 62% to 56% among 15–17 year-olds, chi-square, $p=0.028$; and from 58% to 43% among 18–21 year-olds (chi-square, $p<0.001$).

In addition, discussions about being careful and responsible if you are drinking decreased from November 2008 to April 2009 among 18–21 year-olds (from 53% to 40%, chi-square, $p<0.001$) and 22–25 year-olds (from 47% to 39%, chi-square, $p=0.002$).

Figure 40 (previous page) also shows some significant differences between November 2008 and April 2009 in the proportions discussing the five less common alcohol-related topics, with the proportion of 18–21 year-olds discussing the importance of not drinking too much decreasing from 44% to 37% (chi-square, $p=0.038$), and the proportion discussing things done whilst drunk that were embarrassing or humiliating increasing from 43% to 49% (chi-square, $p=0.002$). The proportions of 22–25 year-olds discussing things done whilst drunk that were embarrassing or humiliating, and injuries sustained whilst drunk increased significantly (from 38% to 47%, chi-square, $p=0.002$, for the former, and from 26% to 31%, chi-square, $p=0.036$, for the latter).

KNOWLEDGE

Young people aged 15–25 years were asked to rank a number of different drugs – alcohol, prescribed drugs used for non-medical purposes, tobacco, marijuana/cannabis and illegal drugs other than marijuana – according to the number of hospitalisations they believe each to cause among people of their own age, with the drug they believe to cause the most hospitalisations ranked first. The proportion within each age group ranking each drug first is displayed in Figure 41 (below) and the ranking (from first place to fifth place) given by each age group to alcohol as a cause of hospitalisations when compared with other drugs is shown in Figure 42 (overleaf).

Figure 41. Knowledge of the primary cause of hospitalisations (15–25 year-olds)

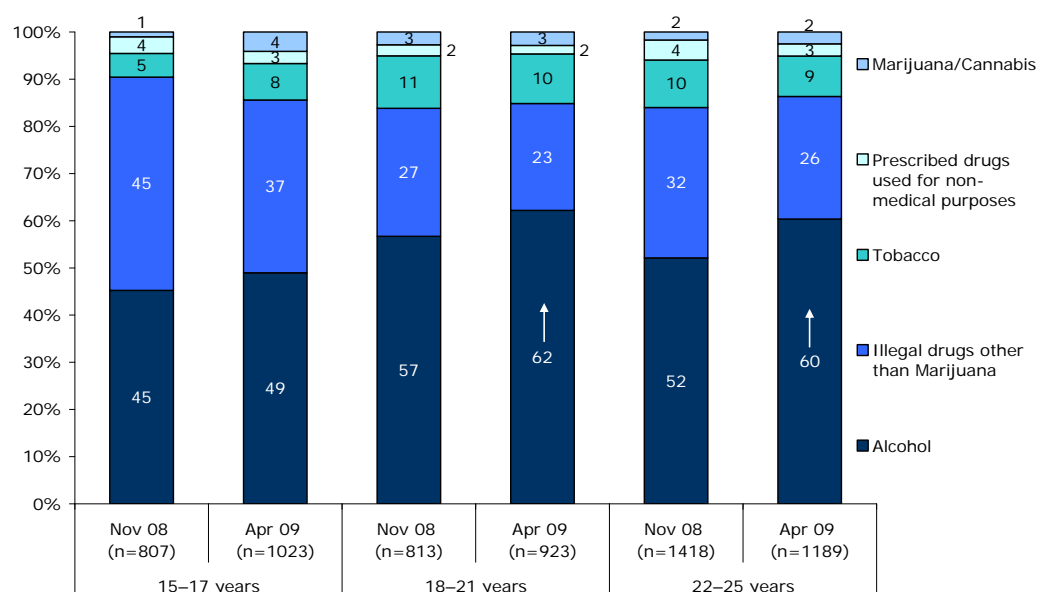


Figure 41 shows that in April 2009 alcohol continued to be considered the primary cause of hospitalisations among young people, with 49% of 15–17 year-olds, 62% of 18–21 year-olds and 60% of 22–25 year-olds ranking alcohol first of all the drugs listed according to the number of hospitalisations it causes among people their own age.

The proportions of 18–21 year-olds and 22–25 year-olds indicating alcohol as the primary cause of hospitalisations among young people increased significantly from November 2008 to April 2009 (from 57% to 62% among 18–21 year-olds, chi-square, $p=0.040$, and from 52% to 60% among 22–25 year-olds, chi-square, $p=0.002$).

Figure 42. Knowledge of alcohol as a cause of hospitalisations (15–25 year-olds)

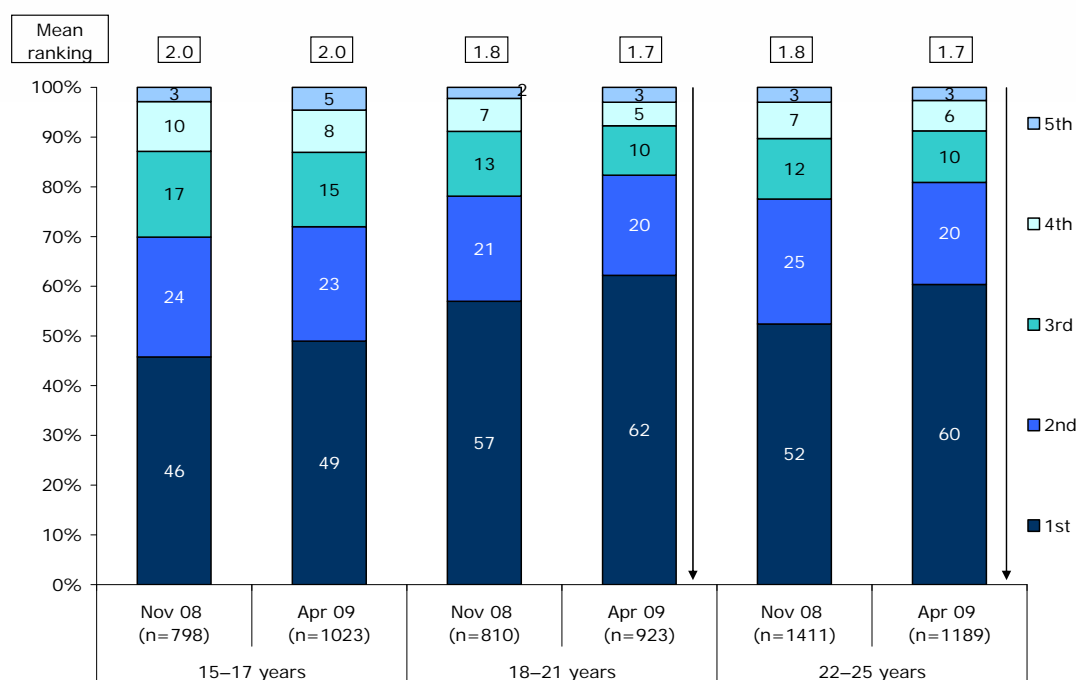


Figure 42 shows the ranking (from first place to fifth place) given by each age group to alcohol as a cause of hospitalisations, when compared with other drugs. As in November 2008, approximately half (49%) of 15–17 year-olds ranked alcohol as the primary cause of hospitalisations among young people of their own age. There was a significant overall trend towards 18–21 year-olds (Kendall's tau-b, $p=0.040$) and 22–25 year-olds (Kendall's tau-b, $p=0.002$) ranking alcohol higher in April 2009 than in November 2008.

The mean ranking of alcohol as a cause of hospitalisations among young people was calculated for each age group and is shown in Figure 42 (above). On average, 15–25 year-olds ranked alcohol as the second leading cause of hospitalisations, after illegal drugs other than marijuana. The mean ranking was slightly lower among 15–17 year-olds (mean ranking of 2.0), than among 18–21 year-olds and 21–25 year-olds (mean ranking of 1.7 for each age group) and did not change significantly from November 2008 to April 2009.

Parents of 13–17 year-olds were asked to estimate the proportion of young Australians of their child's age that got drunk in the previous two weeks. Similarly, 15–25 year-olds were asked to

estimate the proportion of Australians of their own age that got drunk over this period. The results for parents and 15–25 year-olds are displayed together in Figure 43, overleaf.

Figure 43. Estimated incidence of youth drunkenness (15–25 year-olds and parents)

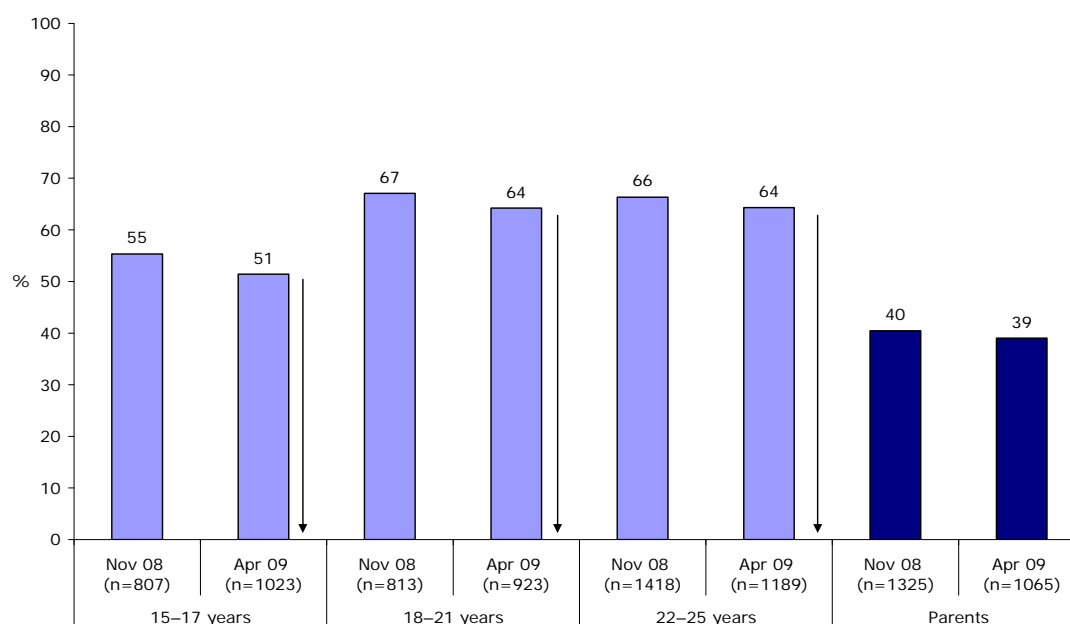


Figure 43 shows that, while 15–17, 18–21 and 22–25 year-olds surveyed in April 2009 thought more than half of people their age had been drunk in the previous two weeks (51% for 15–17 year-olds, 64% for 18–21 year-olds and 64% for 22–25 year-olds), these estimated proportions were significantly smaller than in November 2008. The proportion of young people that 15–17 year-olds believed were drunk in the last two weeks decreased from 55% in November 2008 to 51% in April 2009 (ANOVA, $p < 0.001$). Similarly 18–21 year-olds in November 2008 estimated that 67% of people their age had been drunk in the past two weeks, compared to 64% in April 2009 (ANOVA, $p = 0.003$) and 22–25 year-olds estimated that 66% of people their own age had been drunk in the past two weeks in November 2008, compared with 64% in April 2009 (ANOVA, $p = 0.010$).

Parents of 13–17 year-olds surveyed in April 2009 estimated that an average of 39% of people their child's age were drunk in the previous two weeks.

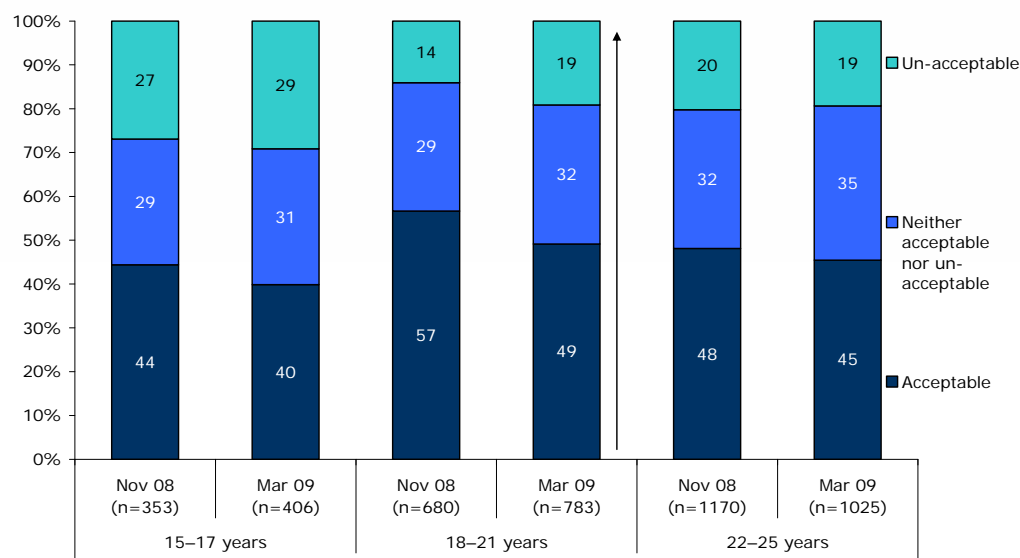
ATTITUDES

Young people aged 15–25 years were asked a range of questions to quantify their attitudes towards excessive alcohol consumption and its consequences. In general, 15–25 year-olds agree that drinking too much alcohol can lead to a variety of consequences and this agreement has remained high (and in some cases has increased) across the two survey waves. The extent to which young people believe that they would be susceptible to these consequences as a result of drinking is more variable, but has likewise remained relatively stable across the two survey waves.

6.1 Acceptability of drunkenness

Young people aged 15–25 years who drank alcohol in the previous three months were asked to indicate how acceptable they believed their closest friends, people to whom they are attracted, and their immediate family would find it if they got drunk. In general, 15–25 year olds indicated that their closest friends would be more accepting of their drunkenness than would people to whom they are attracted. Family members were not perceived to be accepting of drunkenness. Figure 44 to Figure 46 (overleaf and page 74), illustrate responses to these questions in greater detail.

Figure 44. Perceived acceptance of drunkenness by closest friends (15–25 year-olds who drank alcohol in last three months)



As Figure 44 shows, less than half of 15–17 year-olds (40%), 18–21 year-olds (49%) and 22–25 year-olds (45%) indicated in April 2009 that their closest friends would find it acceptable if they got very drunk. Young people aged 18–21 years were less inclined in April 2009 than in November 2008 to indicate that their own drunkenness would be acceptable to their closest friends (Kendall's tau-b, $p=0.019$).

Figure 45. Perceived acceptance of drunkenness by people to which one is attracted (15–25 year-olds who drank alcohol in last three months)

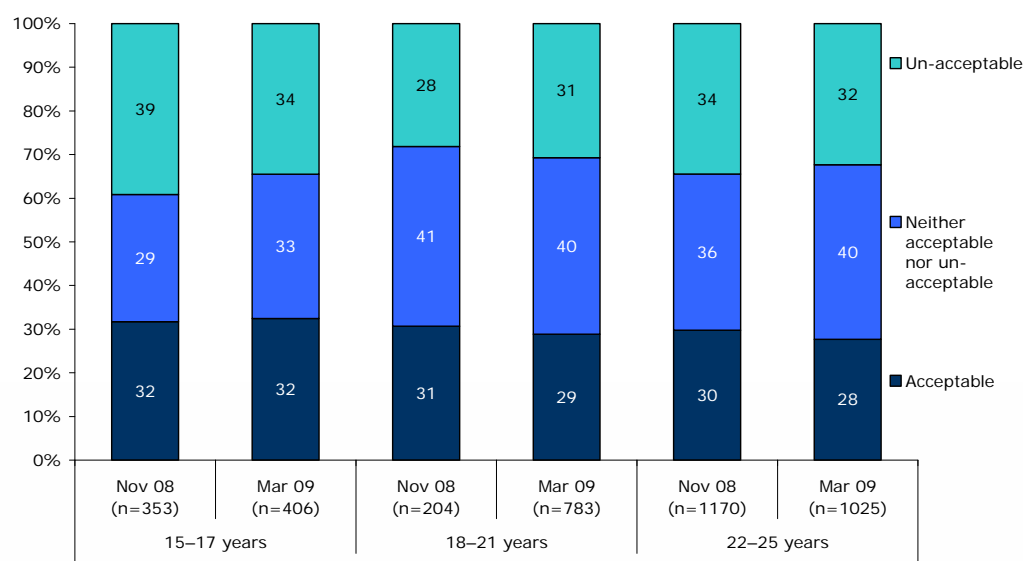
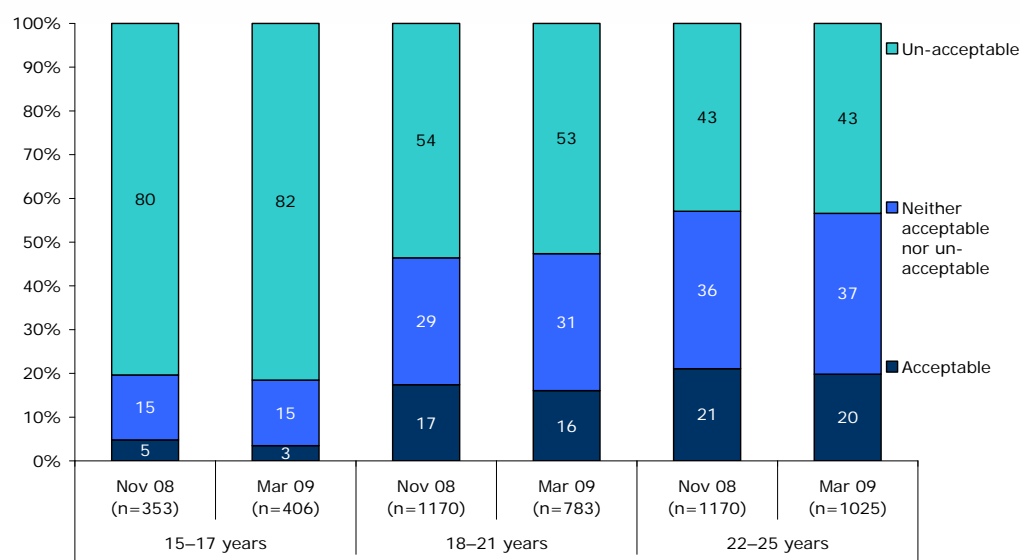


Figure 45 (previous page) shows that 15–25 year-olds who drank alcohol in the last three months believe that people to whom they are attracted would find their drunkenness less acceptable than their peers would. Around three in ten surveyed in April 2009 indicated that people to whom they were attracted would find it acceptable if they were drunk (32% of 15–17 year-olds, 29% of 18–21 year-olds and 28% of 21–25 year-olds).

Figure 46. Perceived acceptance of drunkenness by immediate family (15–25 year-olds who drank alcohol in last three months)

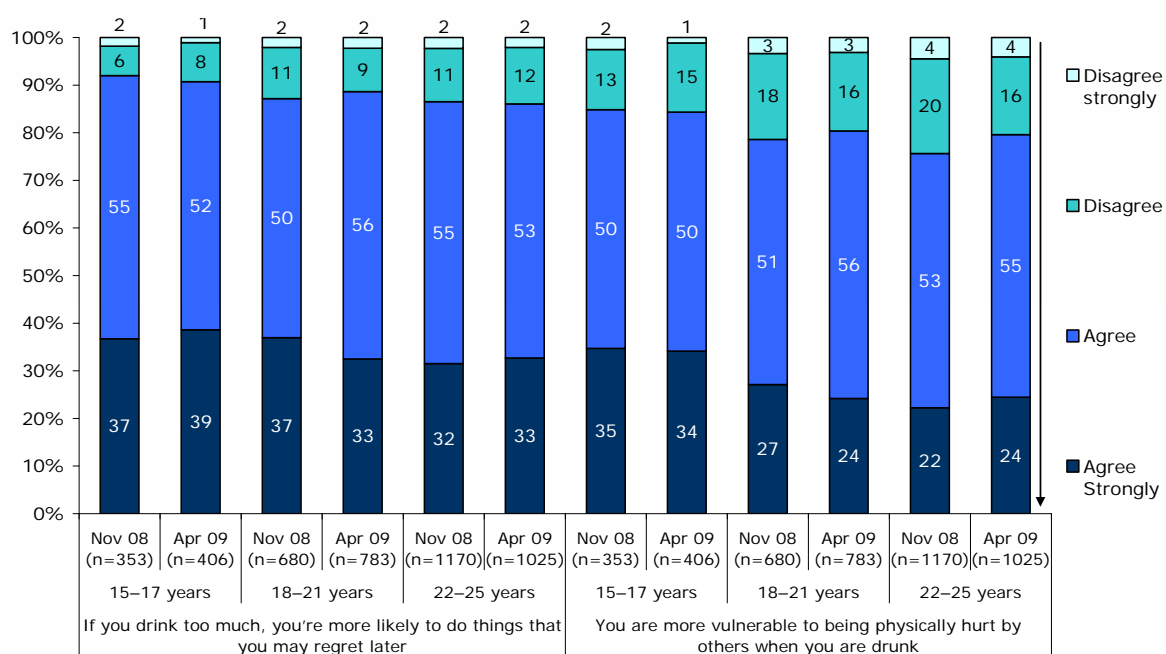


As Figure 46 shows that drunkenness is perceived to be far less acceptable among one's family members than among peers and people to whom one is attracted. The largest proportion of 15–25 year-olds who drank alcohol in the last three months surveyed in April 2009 indicated that their families would find it unacceptable if they were drunk, with 82% of 15–17 year-olds, 53% of 18–21 year-olds and 43% of 22–25 year-olds in April 2009 indicating this.

6.2 Acknowledgement of consequences of drinking too much

Young people aged 15–25 years were asked to indicate the extent to which they agreed or disagreed with a series of attitude statements regarding the consequences of getting drunk for people of their own age. Responses against each statement are displayed by age group and ranked according to overall level of agreement, from most to least, with the results displayed in Figure 47 to Figure 51 (overleaf, and pages 75 to 79).

Figure 47. Consequences of drinking too much alcohol (1st, 2nd) (15–25 year-olds)



As can be seen in Figure 47, the most commonly perceived consequence of getting drunk among 15–25 year-olds who have drunk alcohol in the last three months was the increased likelihood of doing things you may later regret. Around nine in ten 15–17 year-olds (91%), 18–21 year-olds (89%) and 22–25 year-olds (86%) who drank alcohol in the last three months agreed that this was a consequence of drinking too much alcohol. Young people who had consumed alcohol in the last three months also commonly perceived increased vulnerability to being physically hurt by others as a consequence of being drunk (with 84% of 15–17 year-olds, 80% of 18–21 year-olds and 79% of 22–25 year-olds in agreement).

There were no significant differences between November 2008 and April 2009 in level of agreement that if you drink too much, you are more likely to do things that you may regret later among 15–17 year-olds, 18–21 year-olds and 22–25 year-olds. Young people aged 22–25 years were significantly more likely to agree that you are more vulnerable to being physically hurt by others when you are drunk in April 2009 than in November 2008 (Kendall's tau-b, $p < 0.001$). Agreement with this statement did not significantly change between November 2008 and April 2009 among 15–17 year-olds and 18–21 year-olds.

Figure 48. Consequences of drinking too much alcohol (3rd, 4th) (15–25 year-olds)

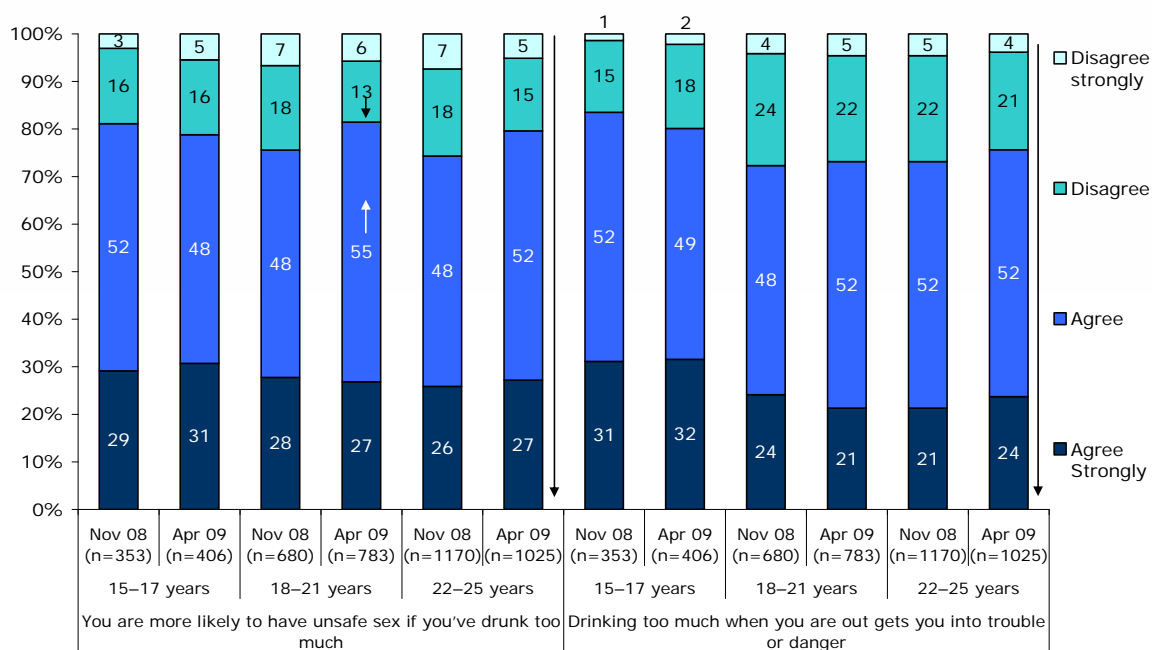


Figure 48 shows that, in April 2009, other commonly perceived consequences of drinking too much or being drunk among young people who had consumed alcohol in the last three months were being more likely to have unsafe sex (with 79% of 15–17 year-olds, 82% of 18–21 year-olds and 79% of 22–25 year-olds in agreement) and getting into trouble or danger when you are out (with 81% of 15–17 year-olds, 73% of 18–21 year-olds and 76% of 22–25 year-olds in agreement).

Young people aged 18–21 years who drank alcohol in the last three months were significantly more likely to agree in April 2009 (55%, compared to 48%, chi-square $p=0.020$) and significantly less likely to disagree (13%, compared to 18%, chi-square, $p=0.020$) that you are more likely to have unsafe sex if you've drunk too much than they were in November 2008. Overall, 22–25 year-olds who drank alcohol in the last three months tended more towards agreement with this statement in April 2009 than in November 2008 (Kendall's tau-b, $p=0.027$). Young people aged 22–25 years also tended more towards agreement that drinking too much when you are out gets you into trouble or danger in April 2009 than in November 2009 (Kendall's tau-b, $p<0.001$).

Figure 49. Consequences of drinking too much alcohol (5th, 6th) (15–25 year-olds)

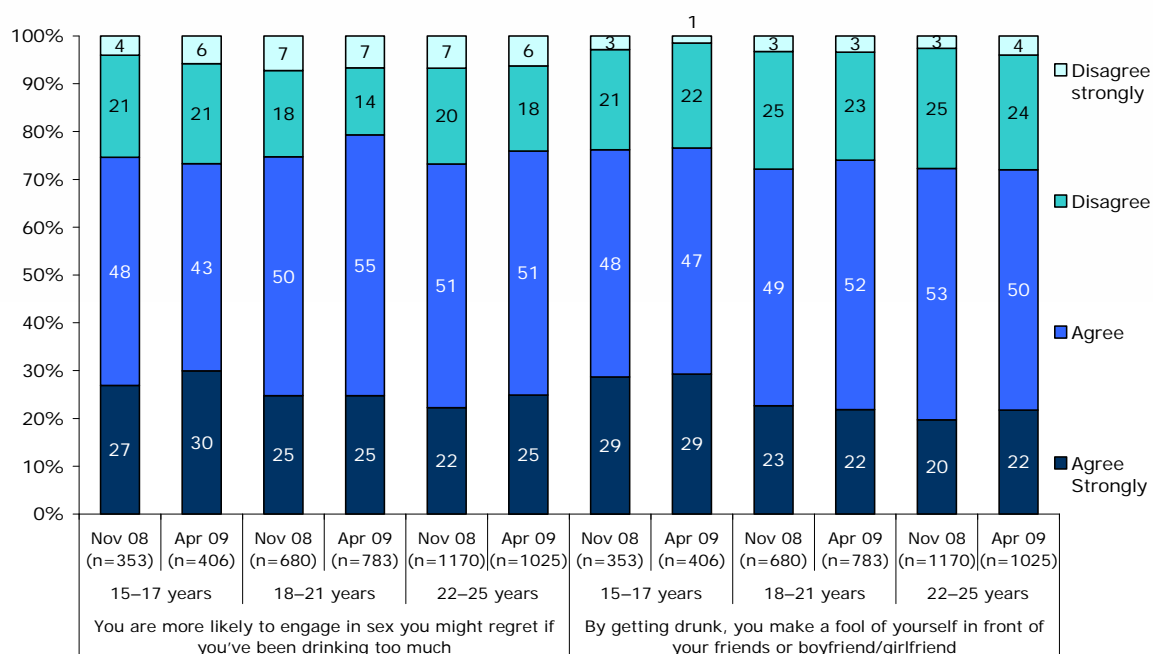
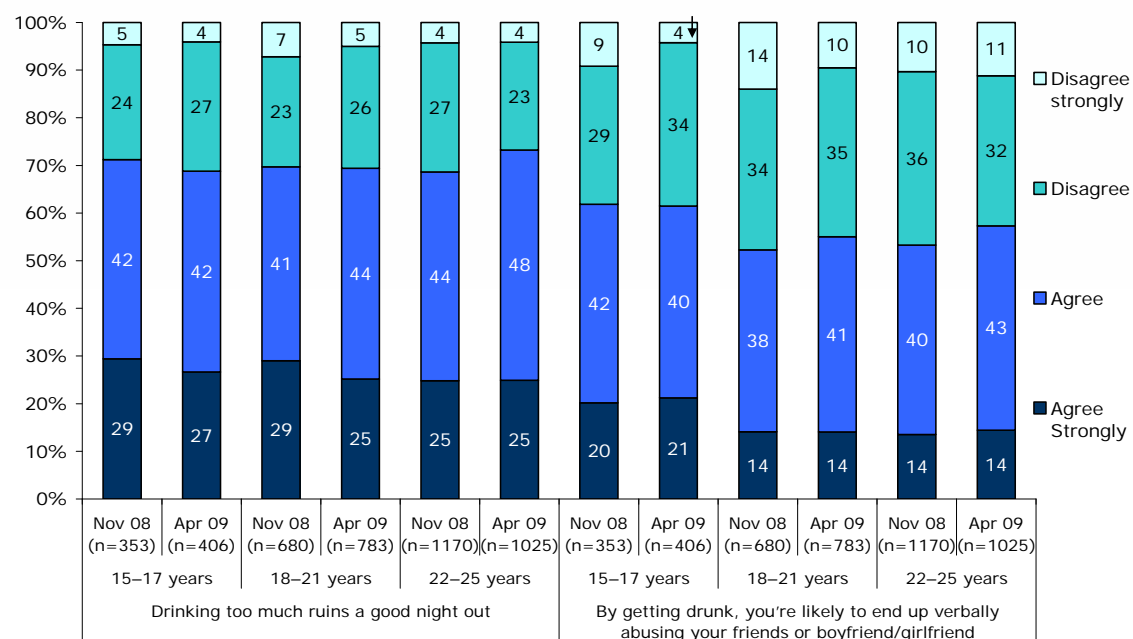


Figure 49 indicates that, in April 2009, more than seven in ten 15–25 year-olds agree that you are more likely to engage in sex you might regret (with 73% of 15–17 year-olds, 80% of 18–21 year-olds and 76% of 22–25 year-olds in agreement) or to make a fool of yourself in front of your friends or your boyfriend/girlfriend if you have been drinking too much (with 76% of 15–17 year-olds, 74% of 18–21 year-olds and 72% of 22–25 year-olds in agreement). Agreement with these statements remained unchanged between November 2008 and April 2009 among 15–17 year-olds, 18–21 year-olds and 22–25 year-olds.

Figure 50. Consequences of drinking too much alcohol (7th, 8th) (15–25 year-olds)



As shown in Figure 50, more than two-thirds of 15–25 year-olds surveyed in April 2009 agreed that drinking too much ruins a good night out (69% of 15–17 year-olds, 69% of 18–21 year-olds and 73% of 22–25 year-olds). Agreement with this statement did not significantly change between November 2008 and April 2009. A smaller majority of 15–25 year-olds agreed that, by getting drunk, you are likely to end up verbally abusing your friends or your boyfriend/girlfriend (61% of 15–17 year-olds, 55% of 18–21 year-olds and 57% of 22–25 year-olds).

The proportions of 18–21 and 22–25 year-olds agreeing that by getting drunk, you are likely to end up verbally abusing your friends or boyfriend/girlfriend did not change from November 2008 to April 2009. However, the proportion of 15–17 year-olds that strongly disagreed with this statement did decrease significantly from 9% in November 2008 to 4% in April 2009 (chi-square $p=0.032$).

Figure 51. Consequences of drinking too much alcohol (9th, 10th) (15–25 year-olds)

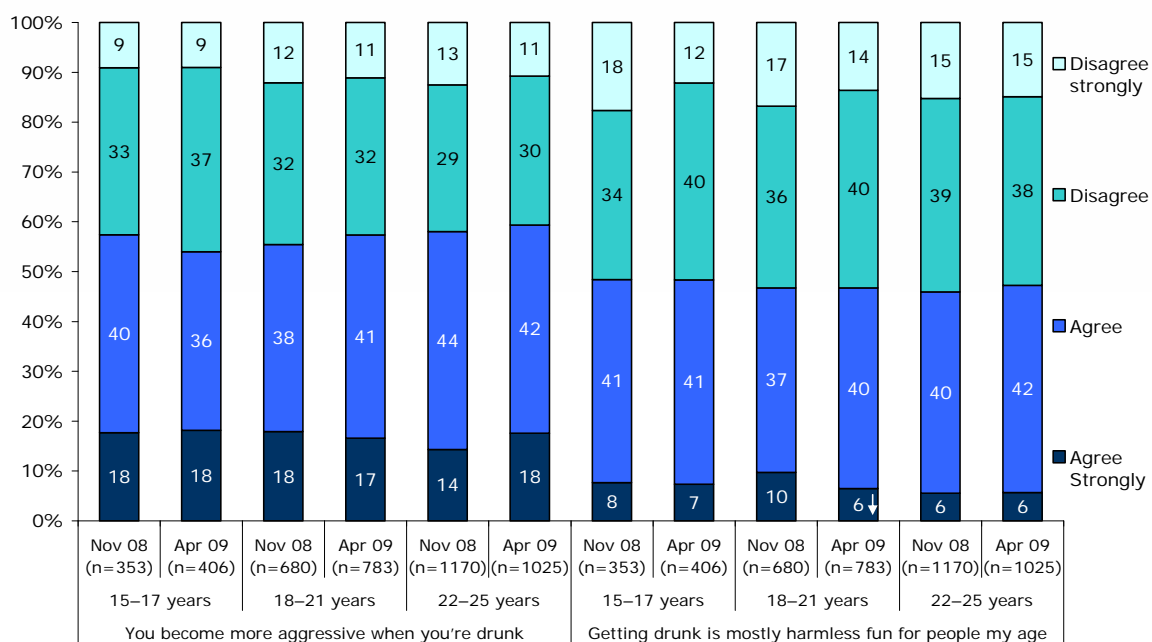


Figure 51 shows that, in April 2009, more than half of 15–25 year-olds agreed that you become more aggressive when you are drunk (54% of 15–17 year-olds, 58% of 18–21 year-olds and 60% of 22–25 year-olds). Agreement among 15–17 year-olds, 18–21 year-olds and 22–25 year-olds with this statement did not differ significantly in April 2009 from November 2008.

In April 2009, the majority of 15–25 year-olds disagreed that 'getting drunk is mostly harmless fun for people my age', with less than half agreeing or strongly agreeing with this statement (48% of 15–17 year-olds, 46% of 18–21 year-olds and 48% of 22–25 year-olds). There was a significant decrease in the proportion of 18–21 year-olds strongly agreeing that, from 10% in November 2008 to 6% in April 2009 (chi-square, $p=0.027$).

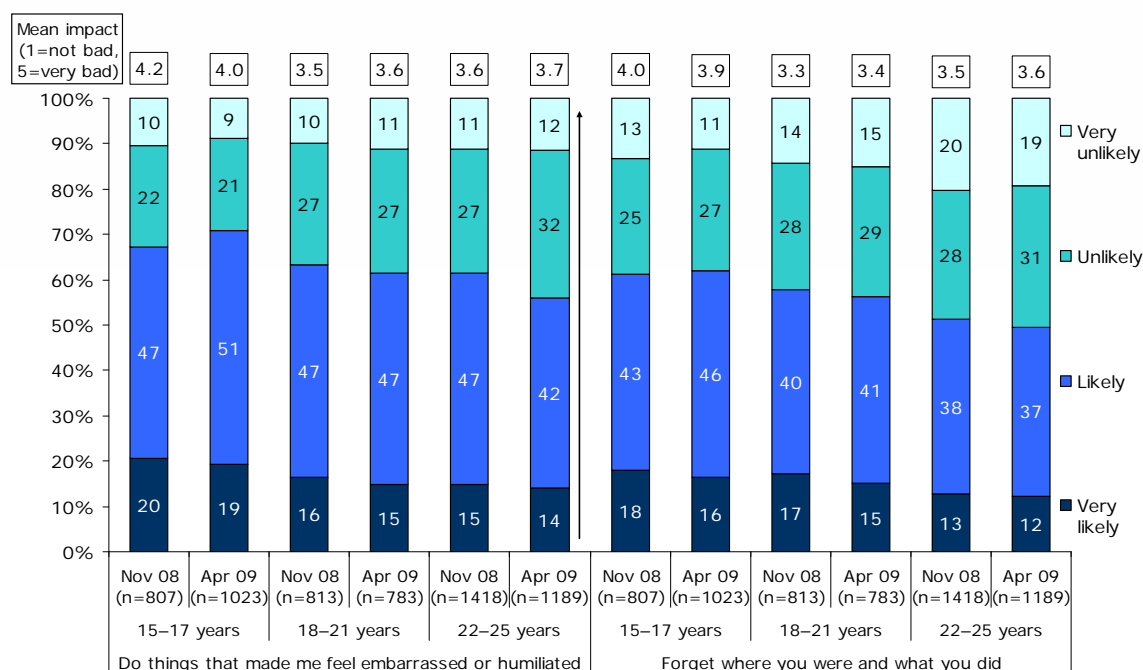
6.3 Perceived susceptibility to and severity of impact of consequences of getting drunk

Young people aged 15–25 years were asked to rate how likely or unlikely they felt they would be to experience each of a list of 13 possible consequences if they were to drink too much alcohol. Those who had not consumed alcohol before were encouraged to imagine how likely each of these things would be to occur to them based on what they know about themselves and alcohol. All 15–25 year-olds were then asked to rate how they would feel about each of these things, if they were to experience them. This perceived severity was rated on a scale from 1, “not bad”, to 5, “very bad” and the mean rating for each age group on each consequence was calculated.

As in November 2008, 15–25 year-olds surveyed in April 2009 perceived more extreme consequences of drunkenness as less likely to occur to them personally and, as a general trend, events perceived as more likely to occur had a lower mean impact. For all consequences, the mean negative impact tended also to be higher among those of younger ages than those of older ages.

The perceived personal susceptibility of young people and mean rating for each consequence is displayed in Figure 52 to Figure 58 (pages 81 to 87). Consequences are ordered from that perceived by the total sample of 15 to 25 year-olds to be most likely to occur to that perceived as least likely to occur.

Figure 52. Perceived susceptibility to and severity of impact of consequences of getting drunk (1st, 2nd) (15–25 year-olds)

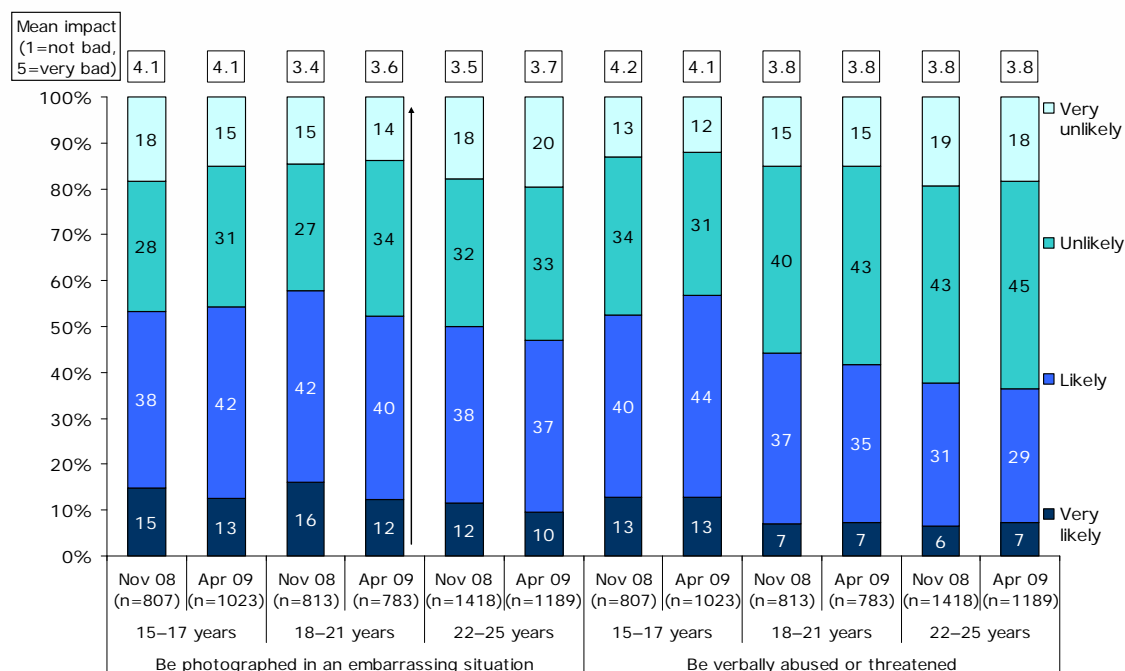


As illustrated in Figure 52, seven in ten 15–17 year-olds (70%), six in ten 18–21 year-olds (62%) and more than half of 22–25 year-olds (56%) surveyed in April 2009 perceived themselves as likely or very likely to do things that made them feel embarrassed as a result of drinking too much. Young people aged 15–17 years (62%), 18–21 years (56%) and 22–25 years (49%) surveyed in April 2009 considered themselves to be slightly less susceptible to forgetting where they were or what they did as a result of getting drunk.

Overall, 22–25 year-olds surveyed in April 2009 tended to perceive themselves as less susceptible to doing things that might make them feel embarrassed or humiliated as a result of drunkenness than those surveyed in November 2008 (Kendall's tau-b, $p=0.029$).

No significant differences were found between November 2008 and in April 2009 in the average ratings given by 15–17 year-olds, 18–21 year-olds and 22–25 year-olds to the severity of doing things that made them feel embarrassed or humiliated (with mean impact ratings ranging from 3.6 to 4.0) or forgetting where they are or what they did as a result of getting drunk (with mean impact ratings ranging from 3.4 to 3.9).

Figure 53. Perceived susceptibility to and severity of impact of consequences of getting drunk (3rd, 4th) (15–25 year-olds)

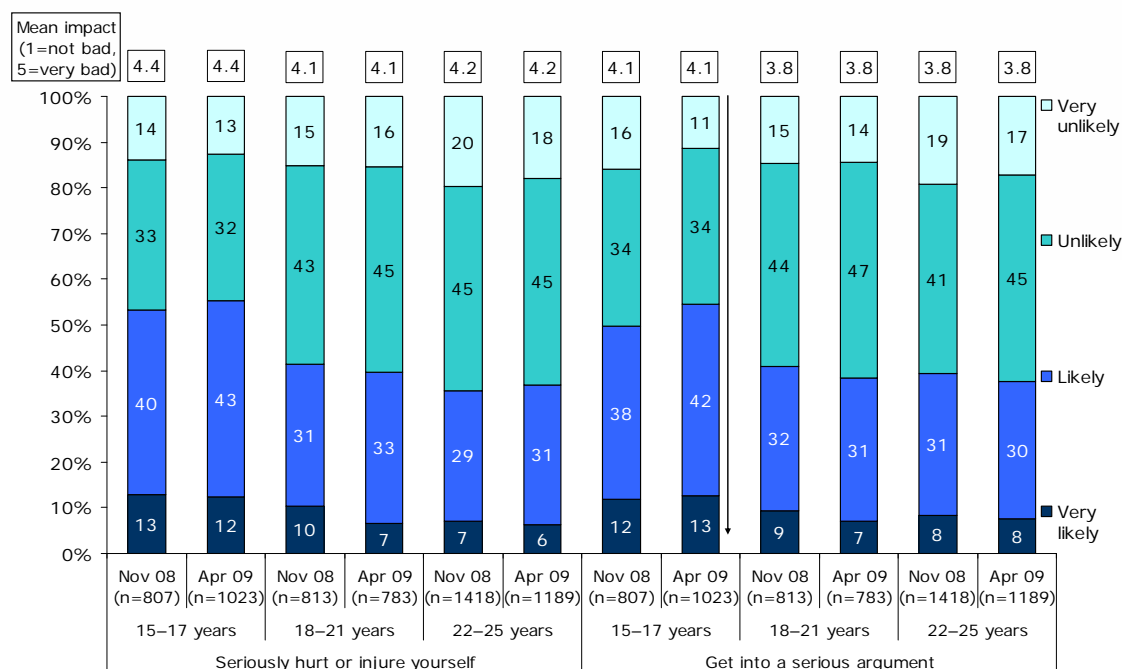


As Figure 53 illustrates, around half of 15–25 year-olds surveyed in April 2009 perceived themselves to be likely or very likely to be photographed in an embarrassing situation if they were to drink too much alcohol (55% of 15–17 year-olds, 52% of 18–21 year-olds and 47% of 22–25 year-olds). Young people aged 18–21 years surveyed in April 2009 were significantly less likely overall to consider themselves to be susceptible to this consequence of drunkenness than in November 2008 (Kendall's tau-b, $p=0.023$).

In April 2009, more than half of 15–17 year olds (57%), two-fifths of 18–21 year olds (42%) and one third of 22–25 year-olds (36%) perceived themselves as likely or very likely to be verbally abused or threatened as a result of drinking too much alcohol.

The mean perceived impact of being photographed in an embarrassing situation and being verbally abused or threatened also did not change significantly from November 2008 to April 2009, with the former ranging from 3.6 to 4.1, and the latter ranging from 3.8 to 4.1, in April 2009.

Figure 54. Perceived susceptibility to and severity of impact of consequences of getting drunk (5th, 6th) (15–25 year-olds)



As can be seen in Figure 54, in April 2009, 55% of 15–17 year-olds, 40% of 18–21 year-olds and 37% of 22–25 year olds perceived themselves to be likely of very likely to seriously hurt or injure themselves as a result of drinking too much. Similar proportions perceived themselves as likely or very likely to get into a serious argument as a result of drinking too much (55% of 15–17 year-olds, 38% of 18–21 year-olds and 38% of 22–25 year olds). Young people aged 15–17 years surveyed in April 2009 perceived themselves as significantly more likely to experience this consequence than did those surveyed in November 2008 (Kendall's tau-b, $p=0.021$).

In April 2009, the average perceived impact ratings of seriously hurting or injuring oneself ranged from 4.1 to 4.4 and from 3.8 to 4.1 for getting into a serious argument as a result of drinking too much.

Figure 55. Perceived susceptibility to and severity of impact of consequences of getting drunk (7th, 8th) (15–25 year-olds)

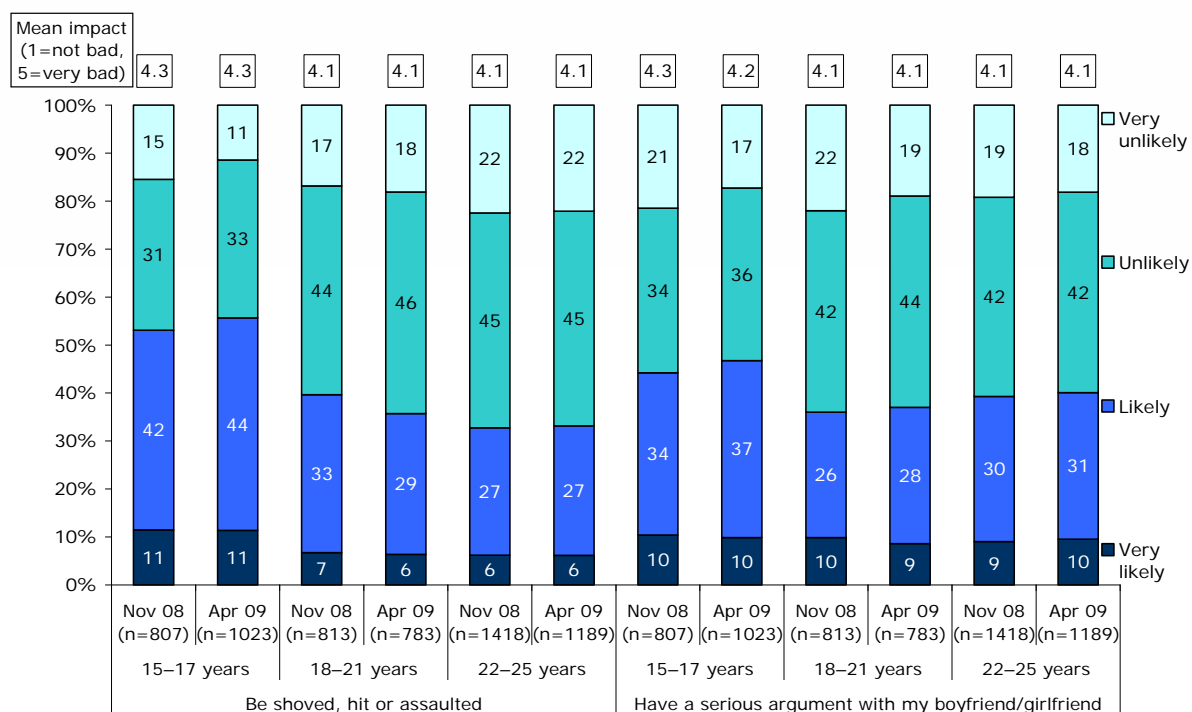
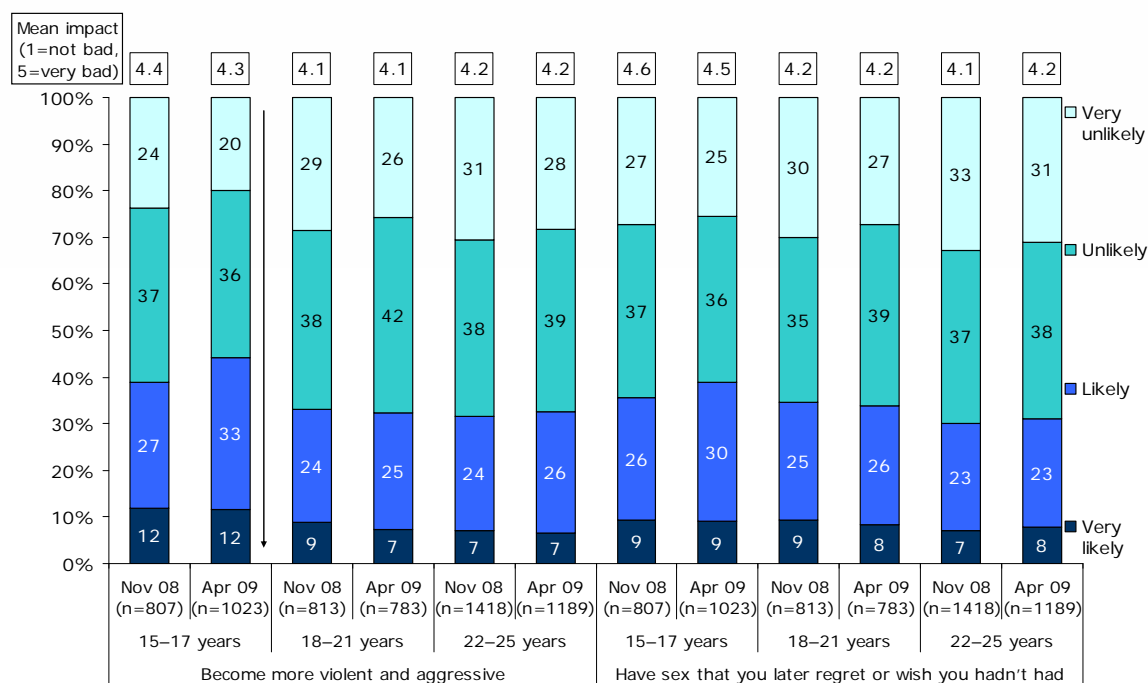


Figure 55 indicates that, in April 2009, over half of 15–17 year-olds (55%) and one third of 18–21 year olds (35%) and 22–25 year-olds (33%) perceived themselves to be likely or very likely to be hit, shoved or assaulted as a result of drinking too much alcohol.

In the latest survey wave, a minority of 15–17 year-olds (47%), 18–21 year olds (37%) and 22–25 year-olds (41%) perceived it likely or very likely that they would have a serious argument with their boyfriend or girlfriend if they were to drink too much alcohol.

In April 2009, the average severity rating of being shoved, hit or assaulted as a consequence of getting drunk ranged from 4.1 to 4.3, and the rating of having a serious argument with one's boyfriend or girlfriend ranged from 4.1 to 4.2.

Figure 56. Perceived susceptibility to and severity of impact of consequences of getting drunk (9th, 10th) (15–25 year-olds)

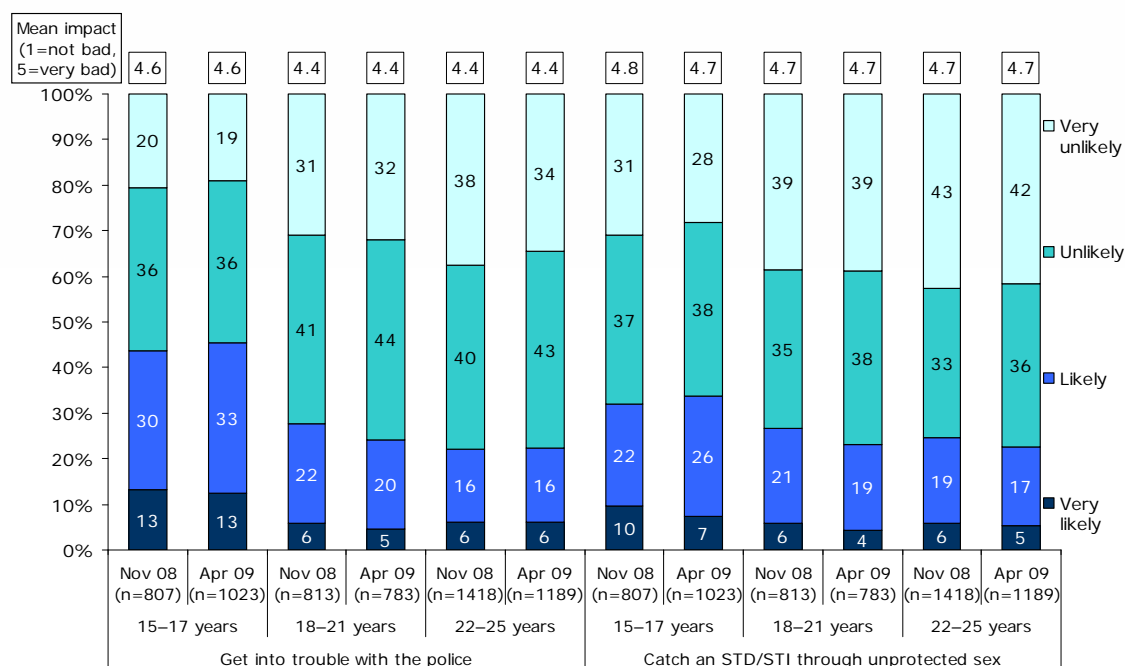


As is shown in Figure 56, close to half of 15–17 year-olds (45%), and one third of 18–21 year-olds (32%) and 21–25 year-olds (33%) surveyed in April 2009 believe themselves to be susceptible to becoming more violent and aggressive as a result of drinking too much alcohol. Young people aged 15–17 years surveyed in April 2009 were more likely to believe themselves to be susceptible to this consequence than did those surveyed in November 2008 (Kendall's tau-b, $p=0.028$).

Around one third of 15–17 year-olds (39%), 18–21 year-olds (34%) and 21–25 year-olds (31%) surveyed in April 2009 perceived themselves to be likely or very likely to have sex that they later regret or wish they hadn't as a result of drinking too much.

In the latest survey wave, the average impact rating of becoming more violent or aggressive ranged from 4.1 to 4.3 and from 4.2 to 4.5 for having sex that one later regrets or wishes they hadn't had.

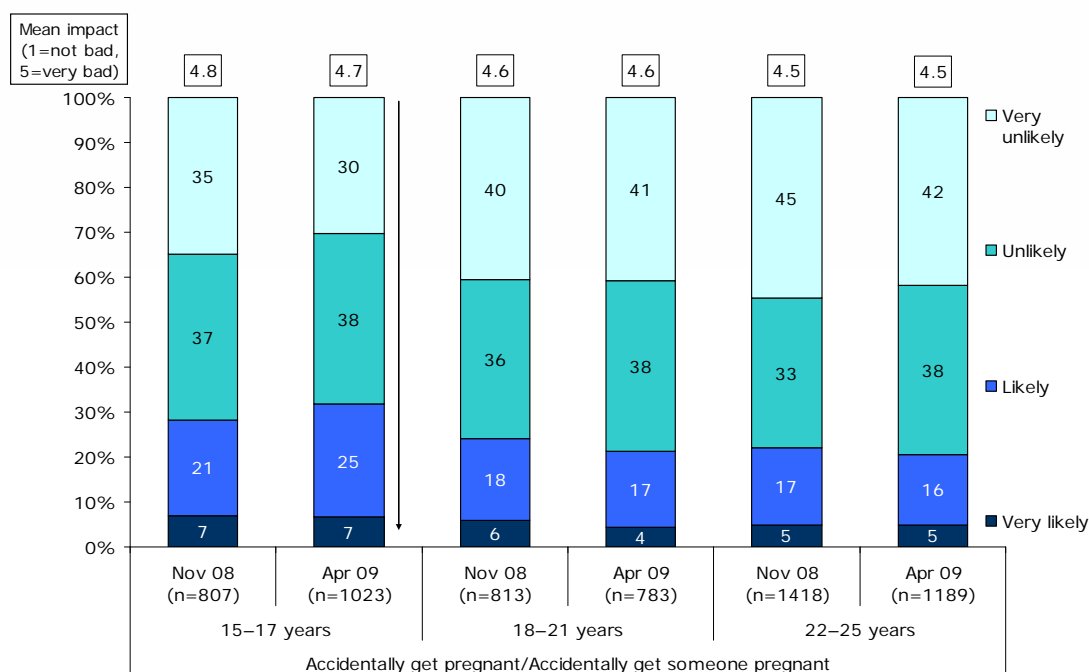
Figure 57. Perceived susceptibility to and severity of impact of consequences of getting drunk (11th, 12th) (15–25 year-olds)



As Figure 57 illustrates, the minority of 15–25 year olds perceive it likely or very likely that they will get into trouble with the police or catch an STD/STI through unprotected sex as a result of drinking too much alcohol. In April 2009, close to half of 15–17 year-olds (46%), one quarter of 18–21 year-olds (25%) and one fifth of 22–25 year-olds (22%) perceive themselves as susceptible to getting into trouble with the police, and one third of 15–17 year-olds (33%), one quarter of 18–21 year-olds (23%) and one fifth of 22–25 year-olds (22%) perceive themselves as susceptible to catching an STD or STI through unprotected sex.

The mean perceived impact of getting into trouble with the police ranged from 4.4 to 4.6 and catching an STD/STI through unprotected sex ranged from 4.7 to 4.8.

Figure 58. Perceived susceptibility to and severity of impact of consequences of getting drunk (13th) (15–25 year-olds)



As shown in Figure 58, 15–25 year-olds perceive themselves as least likely to accidentally get pregnant or get someone else pregnant as a result of drinking too much alcohol. In April 2009, one third of 15–17 year-olds (32%), and one fifth of 18–21 year olds (21%) and 22–25 year-olds (21%) indicated this as a likely or very likely consequence of drunkenness. Young people aged 15–17 years were significantly more likely to perceive themselves as susceptible to accidentally getting pregnant or getting someone else pregnant in April 2009 than in November 2008 (Kendall's tau-b, $p=0.044$).

The mean impact rating of getting pregnant or getting someone else pregnant remained high in April 2009, ranging from 4.5 to 4.7.

Perceived susceptibility to consequences of drunkenness and ratings of their impact were also analysed by the risk level of 15–25 year-olds' alcohol consumption over the three months prior to the survey. Figure 59 to Figure 71 (pages 88 to 100) show these analyses for both survey waves, ordered from those perceived most likely to occur to those perceived as least likely.

Figure 59. Perceived susceptibility to and severity of impact of consequences of getting drunk by risk level (1st) (15–25 year-olds)

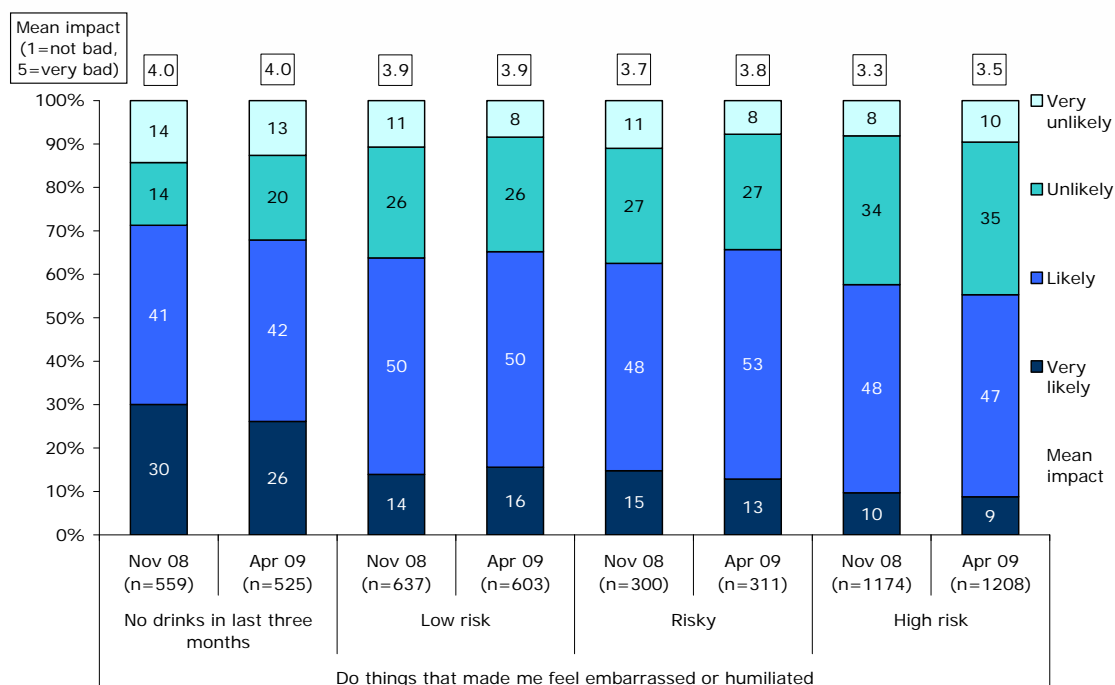
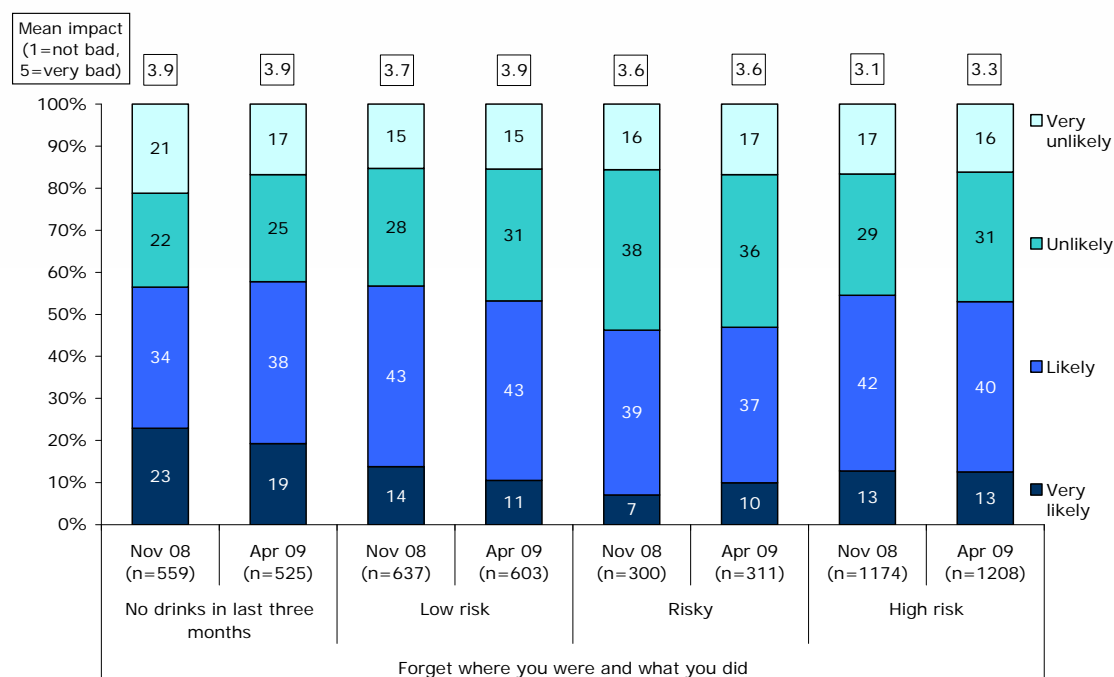


Figure 59 shows that, in April 2009, the majority of 15–25 year-olds that drank at low risk (65%), risky (66%) or high risk (55%) levels in the last three months perceived themselves as likely or very likely to do things that make them feel embarrassed or humiliated as a result of drinking too much. The majority of those that did not drink in the last three months (68%) also considered this a likely or very likely consequence of getting drunk.

In April 2009, the mean impact of being verbally abused or threatened varied from 3.5 for those who drank at a high risk level in the last three months to 4.0 for those who had no alcoholic drinks in this period.

Figure 60. Perceived susceptibility to and severity of impact of consequences of getting drunk by risk level (2nd) (15–25 year-olds)



As shown in Figure 60, in April 2009, around half of 15–25 year-olds who drank at low risk (53%), risky (47%) or high risk levels (53%), or did not drink at all (57%), over the last three months perceived themselves to be likely or very likely to forget where they were or what they did as a result of drinking too much.

In April 2009, forgetting where you were and what you did was rated as having the least impact of all of the consequences of consuming too much alcohol. The mean impact rating for this consequence varied from 3.3 for those who drank at a high risk level in the previous three months to 3.9 for those who drank at a low risk level or had no drinks in the last three months.

Figure 61. Perceived susceptibility to and severity of impact of consequences of getting drunk by risk level (3rd) (15–25 year-olds)

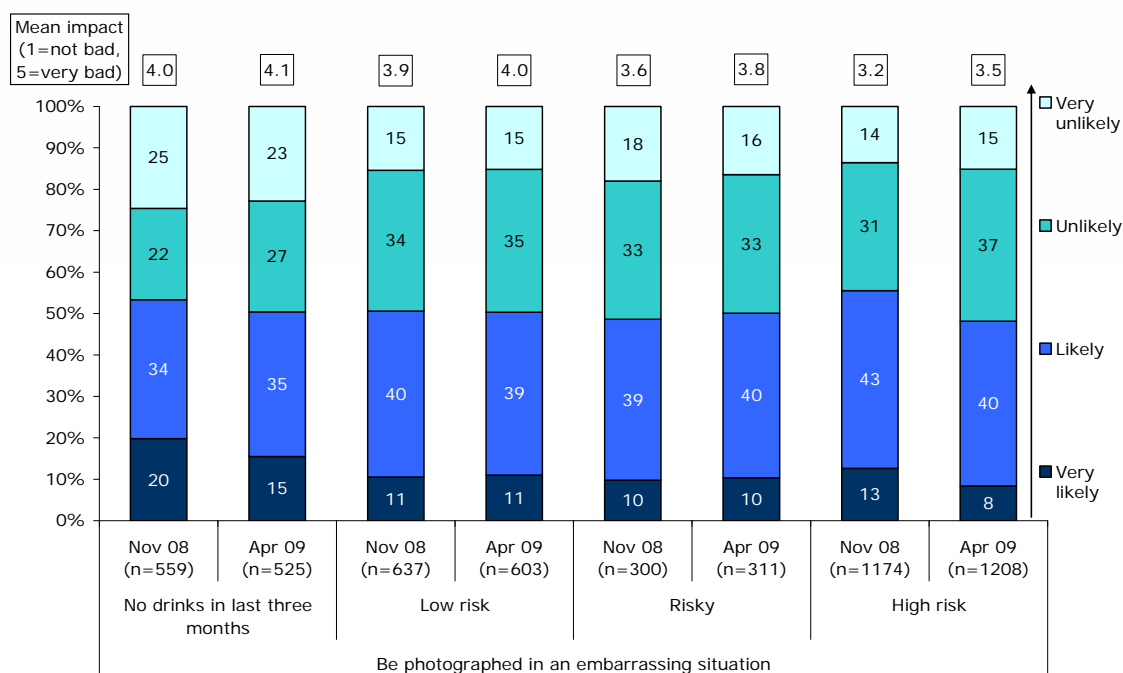
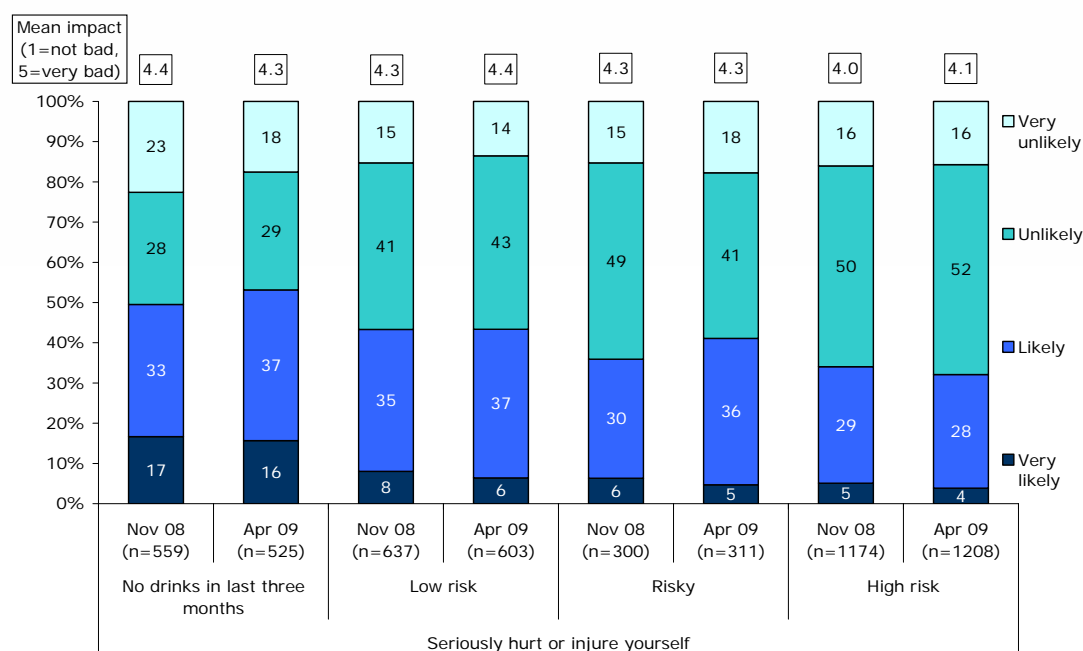


Figure 61 illustrates that, in April 2009, around half of 15–25 year-olds who drank at low risk (50%), risky (50%) or high risk levels (48%), or did not drink at all (50%), over the last three months perceived themselves to be likely or very likely to be photographed in an embarrassing situation as a result of drinking too much.

Young people aged 15–25 years surveyed in April 2009 who drank at high risk levels over the three months prior to being surveyed were less likely overall to perceive themselves as susceptible to being photographed in an embarrassing situation as a result of drinking too much than those surveyed in November 2008 (Kendall's tau-b, $p < 0.001$).

In April 2009, the mean impact of being photographed in an embarrassing situation varied from 3.5 for those who drank at a high risk level in the previous three months to 4.1 for those who had no alcoholic drinks in this period.

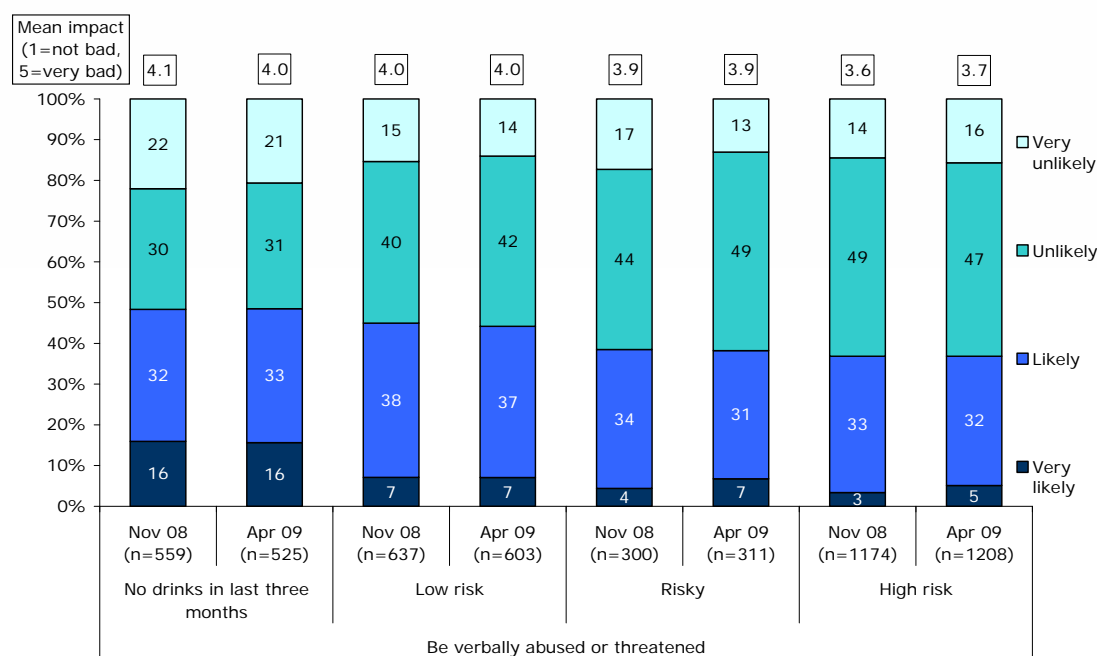
Figure 62. Perceived susceptibility to and severity of impact of consequences of getting drunk by risk level (4th) (15–25 year-olds)



In April 2009, between one third and one half of 15–25 year-olds who drank at low risk (43%), risky (41%) or high risk levels (32%), or did not drink at all (53%), in the three months prior to being surveyed perceived themselves to be likely or very likely to seriously hurt or injure themselves as a result of drinking too much (see Figure 62).

In April 2009, the mean impact of seriously hurting or injuring oneself varied from 4.1 for those who drank at a high risk level in the last three months, to 4.4 for those who drank at a low risk level in the last three months.

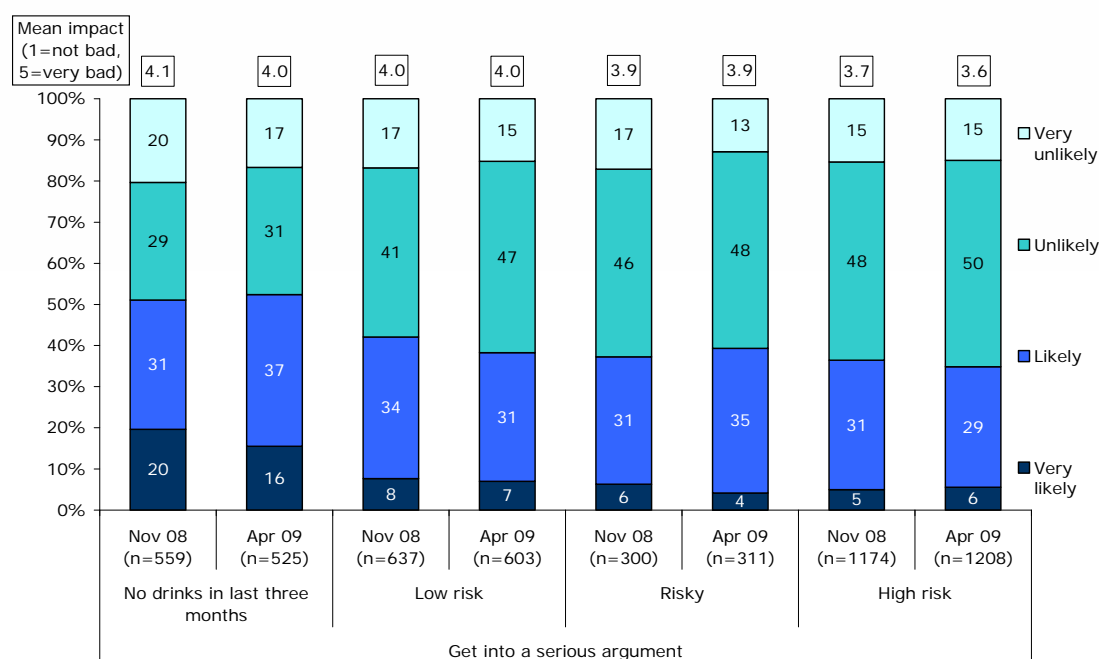
Figure 63. Perceived susceptibility to and severity of impact of consequences of getting drunk by risk level (5th) (15–25 year-olds)



In April 2009, around two fifths of 15–25 year-olds who drank at low risk (44%), risky (38%) or high risk levels (37%), or did not drink at all (49%), over the last three months perceived themselves to be likely or very likely to be verbally abused or threatened as a result of drinking too much (see Figure 63).

In April 2009, the mean impact of being verbally abused or threatened varied from 3.7 for those who drank at a high risk level in the previous three months to 4.0 for those who had no alcoholic drinks or drank at a low risk level in the same period.

Figure 64. Perceived susceptibility to and severity of impact of consequences of getting drunk by risk level (6th) (15–25 year-olds)



As shown in Figure 64, more than one third of 15–25 year-olds surveyed in April 2009 who drank at low risk (38%), risky (39%) or high risk levels (35%) over the three months prior to being surveyed perceived themselves as likely or very likely to get into a serious argument if they drank too much alcohol. More than half (53%) of young people aged 15–25 years who did not drink alcohol in the last three months perceived themselves as being likely or very likely to experience this consequence if they were to get drunk.

In April 2009, the mean impact of getting into a serious argument varied from 3.6 for those who drank at a high risk level in the three months prior to being surveyed to 4.0 for those who did not drink alcohol in this period or drank at a low risk level.

Figure 65. Perceived susceptibility to and severity of impact of consequences of getting drunk by risk level (7th) (15–25 year-olds)

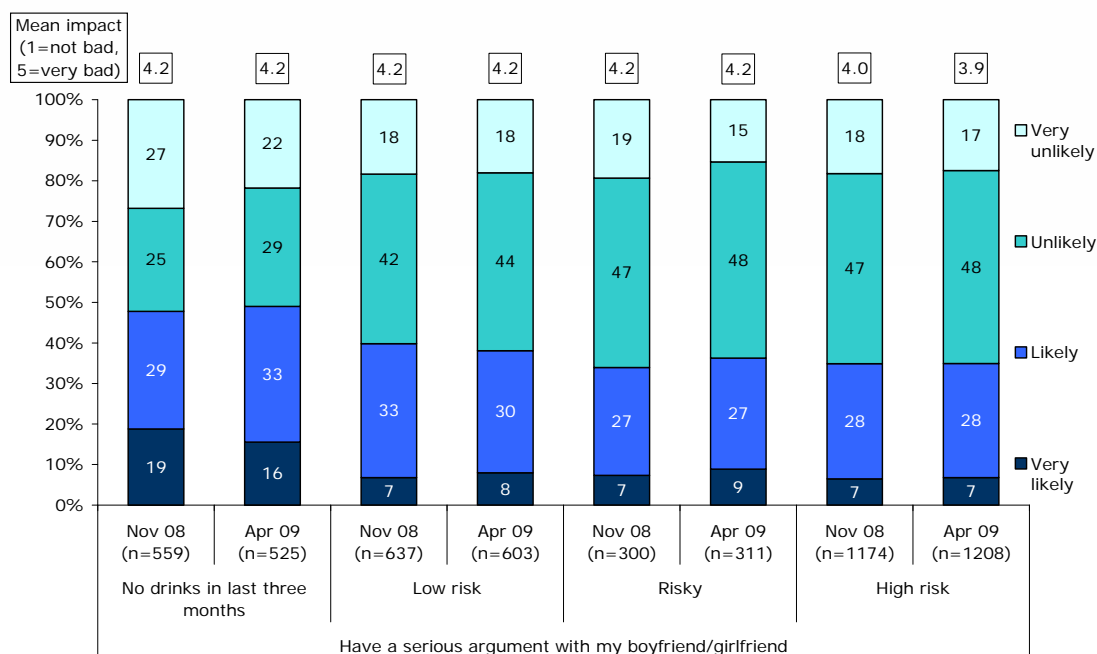


Figure 65 shows that around half of 15–25 year-olds surveyed in April 2009 who did not drink at all (51%), and three in five of those who drank at low risk (62%), risky (64%) or high risk levels (65%) over the three months prior to being surveyed perceived themselves as unlikely or very unlikely to have a serious argument with their boyfriend or girlfriend as a result of drinking too much alcohol.

The mean impact of having a serious argument with my boyfriend/girlfriend varied from 3.9 for those who drank at a high risk level in the last three months to 4.2 for those who had no drinks, or who drank at a low risk or risky level in the last three months, in April 2009.

Figure 66. Perceived susceptibility to and severity of impact of consequences of getting drunk by risk level (8th) (15–25 year-olds)

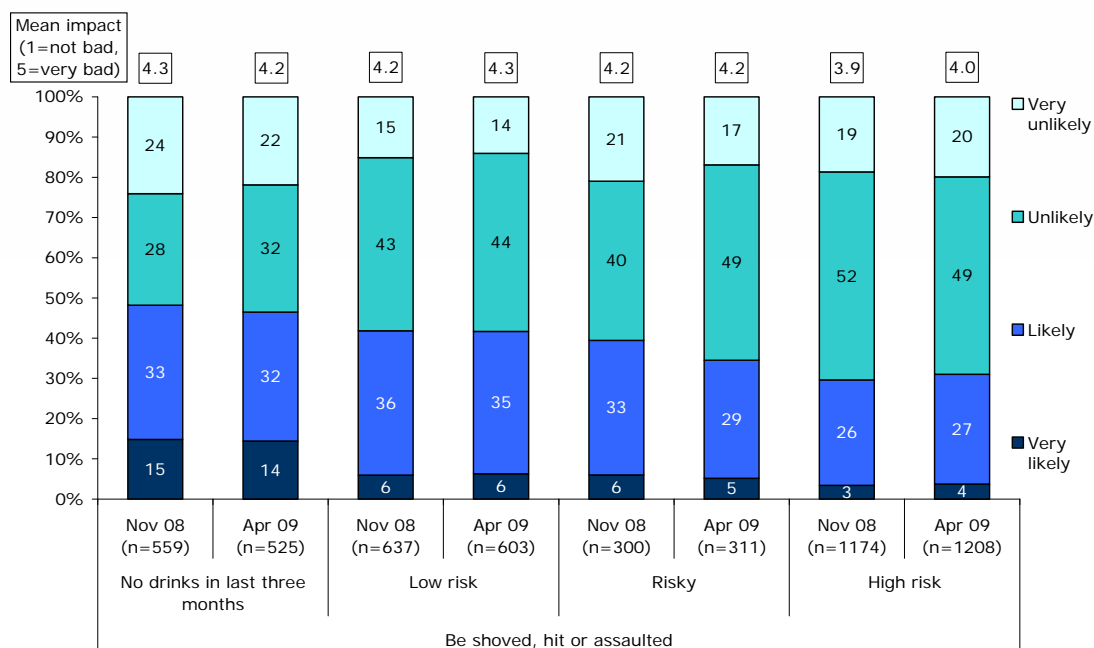
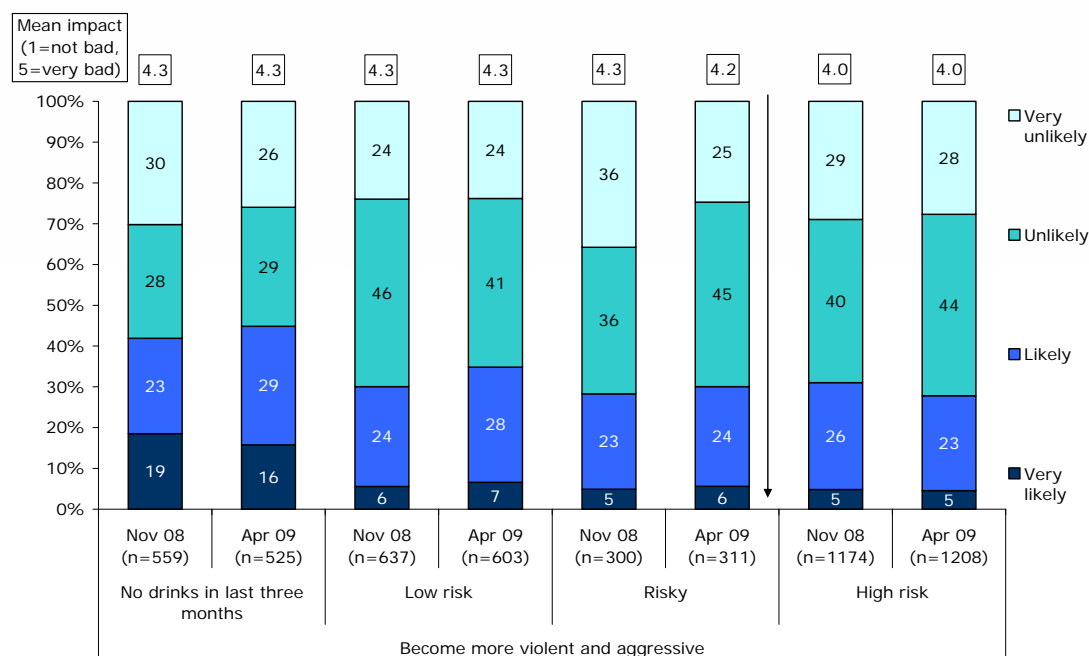


Figure 66 shows that around half of 15–25 year-olds surveyed in April 2009 who did not drink at all (54%) or drank at a low risk level (58%) in the three months prior to being surveyed, and two thirds of those who drank at risky (66%) or high risk levels (69%) over this period perceived themselves as unlikely to be shoved, hit or assaulted as a result of drinking too much alcohol (see).

In April 2009, the mean impact of being shoved, hit or assaulted varied from 4.0 for those who drank at a high risk level over the previous three months to 4.3 for those who drank at a low risk level in this period.

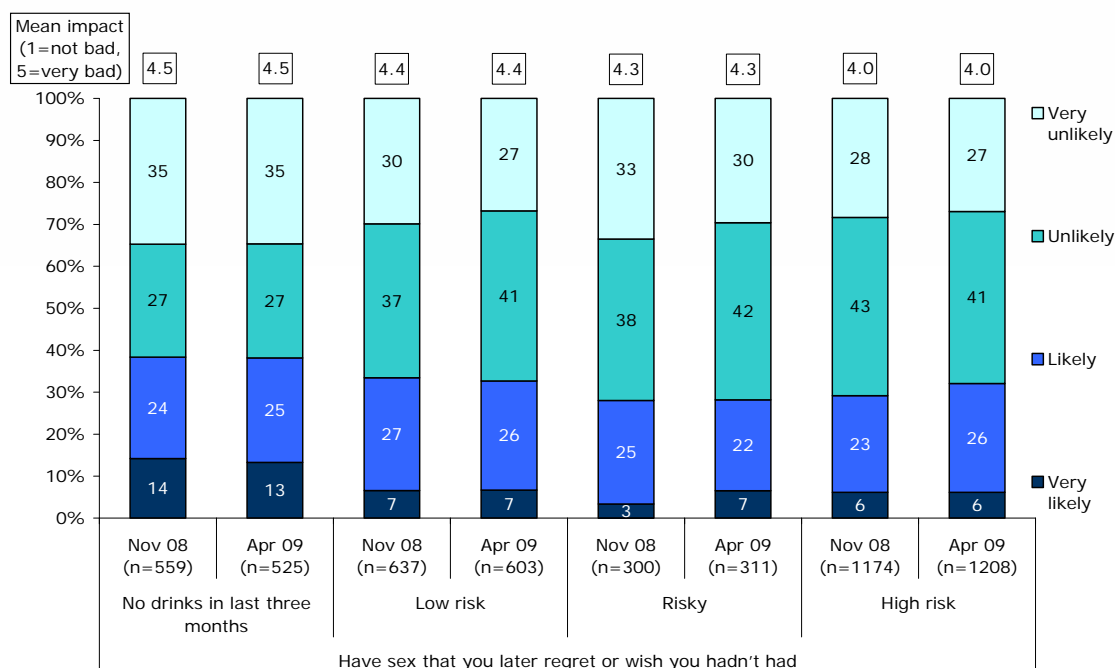
Figure 67. Perceived susceptibility to and severity of impact of consequences of getting drunk by risk level (9th) (15–25 year-olds)



As shown in Figure 67, 15–25 year-olds who drank at risky levels over the three months prior to being surveyed in April 2009 were more likely overall to perceive themselves as susceptible to becoming more violent and aggressive as a result of drinking too much than were those surveyed in November 2008 (Kendall's tau-b, $p=0.034$). Perceived susceptibility to this consequence did not change significantly from November 2008 to April 2009 among those that did not drink in the three months prior to the survey, or among those who drank at low risk or high risk levels over this period, with the majority of young people continuing to perceive this consequence as unlikely or very unlikely to occur to them if they were to drink too much (55% of those that did not drink in the last three months, 65% of those that drank at a low risk level, 70% of those that drank at a risky level and 72% of those that drank at a high risk level).

In April 2009, the mean impact of becoming more violent and aggressive varied from 4.0 for those who had drank at a high risk level to 4.3 for those who drank at a low risk levels or had no drinks in the last three months.

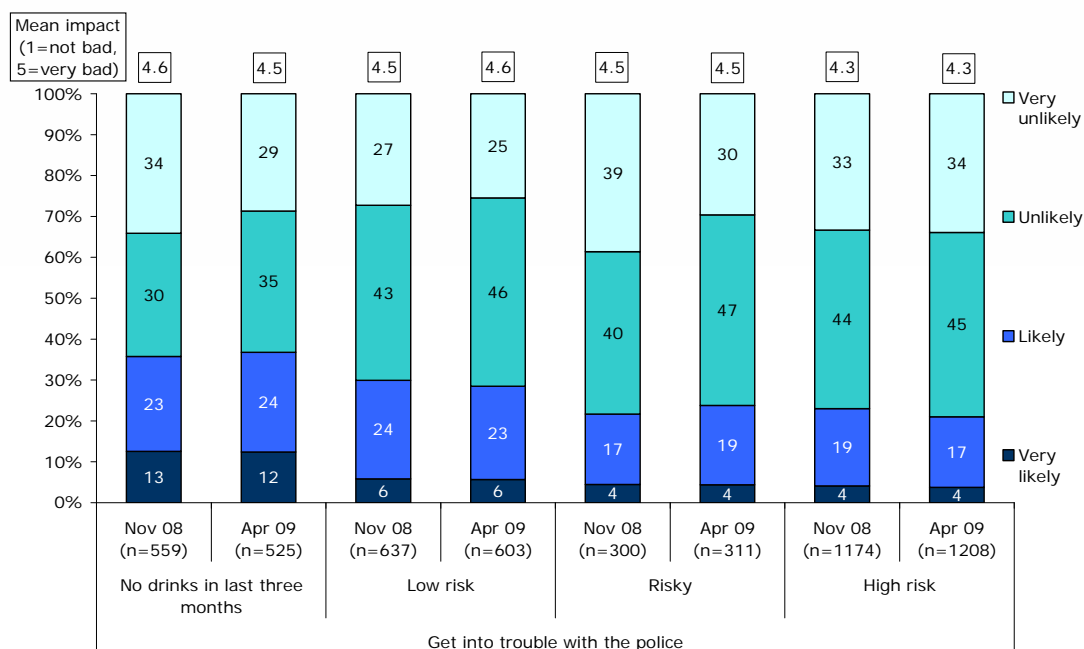
Figure 68. Perceived susceptibility to and severity of impact of consequences of getting drunk by risk level (10th) (15–25 year-olds)



As Figure 68 shows, that around two thirds of 15–25 year-olds surveyed in April 2009 who drank at low risk (68%), risky (72%) or high risk levels (68%), or did not drink at all (62%), in the three months prior to being surveyed perceived themselves to be unlikely or very unlikely to have sex that they later regretted or wished they hadn't had as a result of drinking too much.

In April 2009, the mean impact of having sex that you later regret or wish you hadn't had varied from 4.0 for those who had drunk at a high risk level in the last three months to 4.5 for those who had no drinks in last three months.

Figure 69. Perceived susceptibility to and severity of impact of consequences of getting drunk by risk level (11th) (15–25 year-olds)



As Figure 69 illustrates, in April 2009, more than six in ten 15–25 year-olds who did not drink at all (64%) in the three months prior to being surveyed, and between seven and eight in ten of those that drank at low risk (71%), risky (77%) or high risk levels (79%) over this period, perceived themselves as unlikely or very unlikely to get into trouble with the police as a result of drinking too much alcohol.

In April 2009, the mean impact of getting into trouble with the police varied from 4.3 for those who had drunk at a high risk level in the last three months, to 4.6 for those who drank at low risk levels.

Figure 70. Perceived susceptibility to and severity of impact of consequences of getting drunk by risk level (12th) (15–25 year-olds)

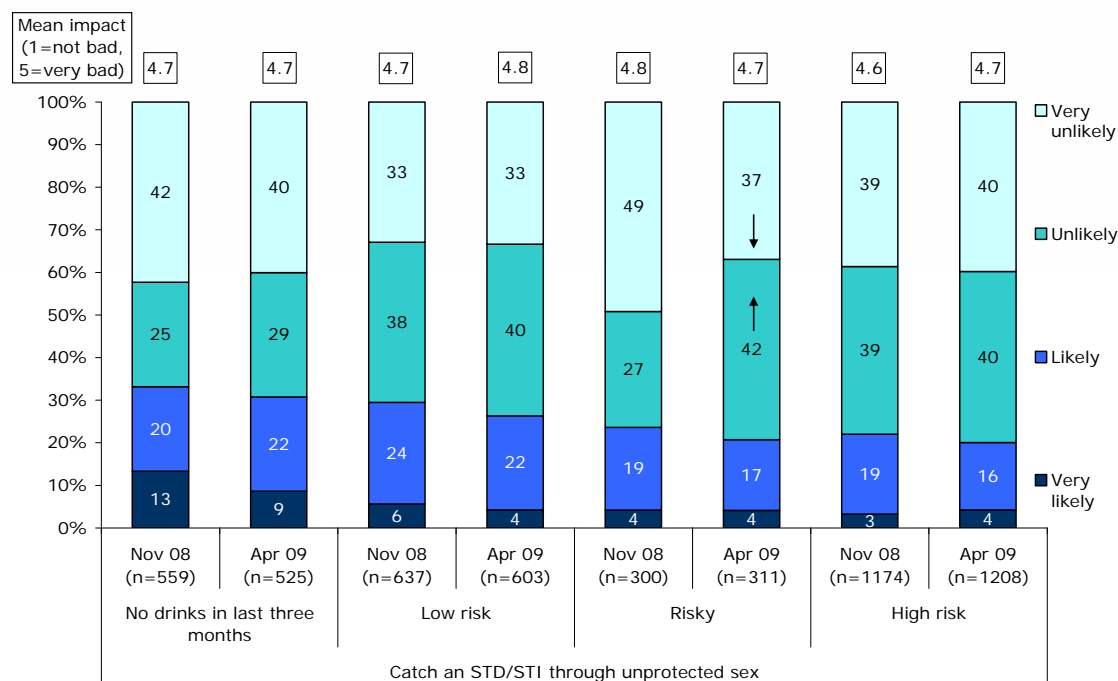


Figure 70 shows that around seven in ten 15–25 year-olds who did not drink at all (69%) or drank at a low risk level in the three months prior to being surveyed (73%), and around eight in ten of those that drank at a risky (79%) or high risk level (80%) over this period, perceived themselves as unlikely or very unlikely to catch an STD/STI through unprotected sex as a result of drinking too much alcohol. A larger proportion of those who drank at risky levels in the three months prior to being surveyed in April 2009 perceived themselves as unlikely to catch an STD/STI through unprotected sex as a result of drinking too much than in November 2008 (42% in April 2009, compared with 27% in November 2008, chi-square, $p=0.002$). This was accompanied by a significant decrease in the proportion of those who drank at risky levels believing this consequence to be very unlikely to happen (decreasing from 49% in November 2008 to 38% in April 2009, chi-square, $p=0.002$).

Catching an STD/STI through unprotected sex was rated the worst consequence of drinking too much by 15–25 year-olds, with an average impact rating of between 4.7 and 4.8 out of 5.

Figure 71. Perceived susceptibility to and severity of impact of consequences of getting drunk by risk level (13th) (15–25 year-olds)

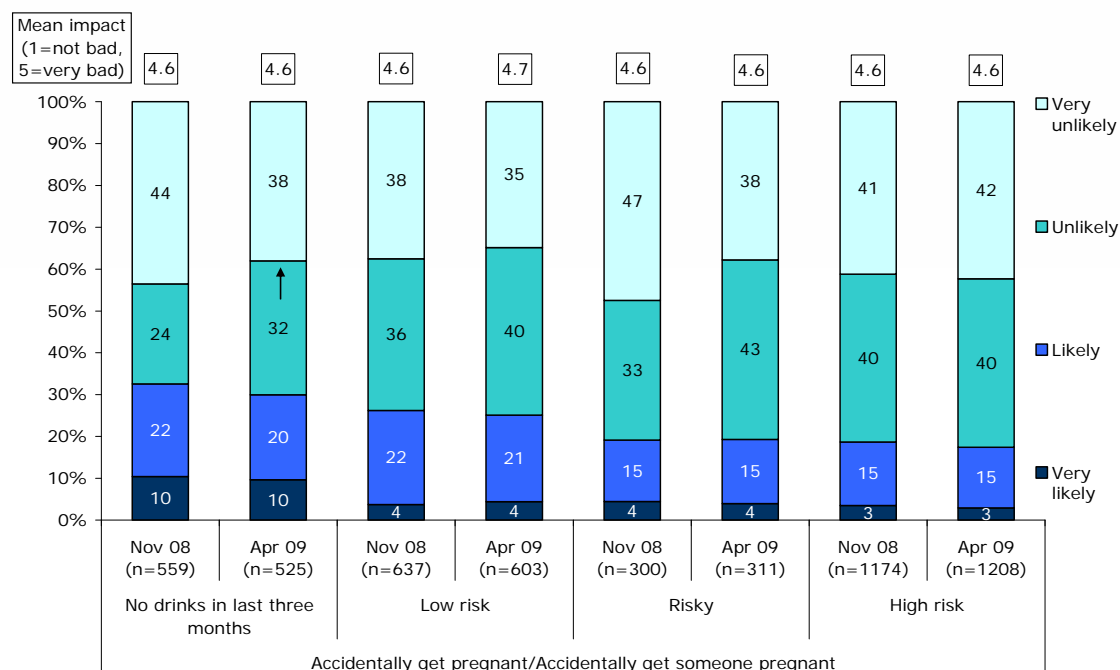
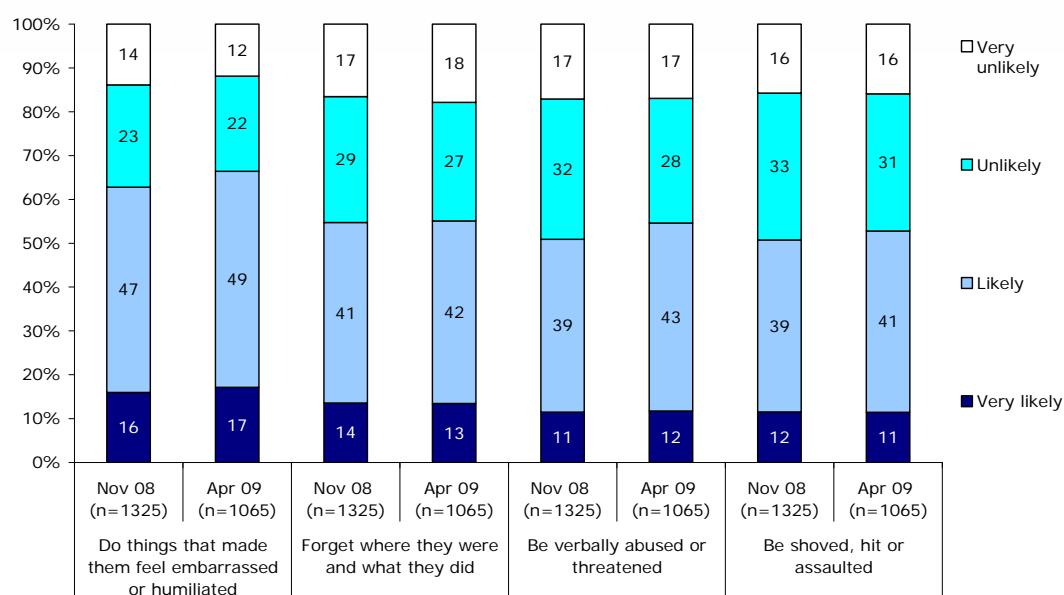


Figure 71 shows that in April 2009, 15–25 year-olds who did not drink alcohol in the last three months, or who drank at low risk, risky or high risk levels over this period perceived themselves as least likely to accidentally get pregnant or get someone else pregnant as a result of drinking too much, with between seven and eight in ten indicating this as unlikely or very unlikely to occur (70% of those that did not drink in the last three months, 75% of those that drank at a low risk level, 81% of those that drank at a risk level and 82% of those that drank at a high risk level).

In April 2009, the mean impact of accidentally getting pregnant or getting someone pregnant was 4.6 for those who had no drinks in the last three months and those who drank at a risky or high risk level in the past three months, and 4.7 for those who drank at low risk levels.

The list of negative consequences of consuming too much alcohol presented to 15–25 year-olds was also shown to parents of 13–17 year-olds, who were asked to indicate how likely they believed it was that their own child would experience these consequences as a result of drinking too much. The results of this question are shown in Figure 72 to Figure 74 (pages 101 to 103).

Figure 72. Child's susceptibility to consequences of getting drunk (1st-4th) (Parents)



As Figure 72 shows, in April 2009, the consequence parents of 13–17 year-olds predicted their children would most likely experience as a result of drinking too much was doing things that made them feel embarrassed or humiliated, with the two in three parents (66%) indicating it was very likely or likely. More than half of parents also believed it likely or very likely that their child would forget where they were or what they did (55%), be verbally abused or threatened (55%) or be shoved, hit or assaulted (52%) as a result of drinking too much alcohol. There were no significant differences in parents' rating of their children's susceptibility to these consequences between November 2008 and April 2009.

Figure 73. Child's susceptibility to consequences of getting drunk (5th-8th) (Parents)

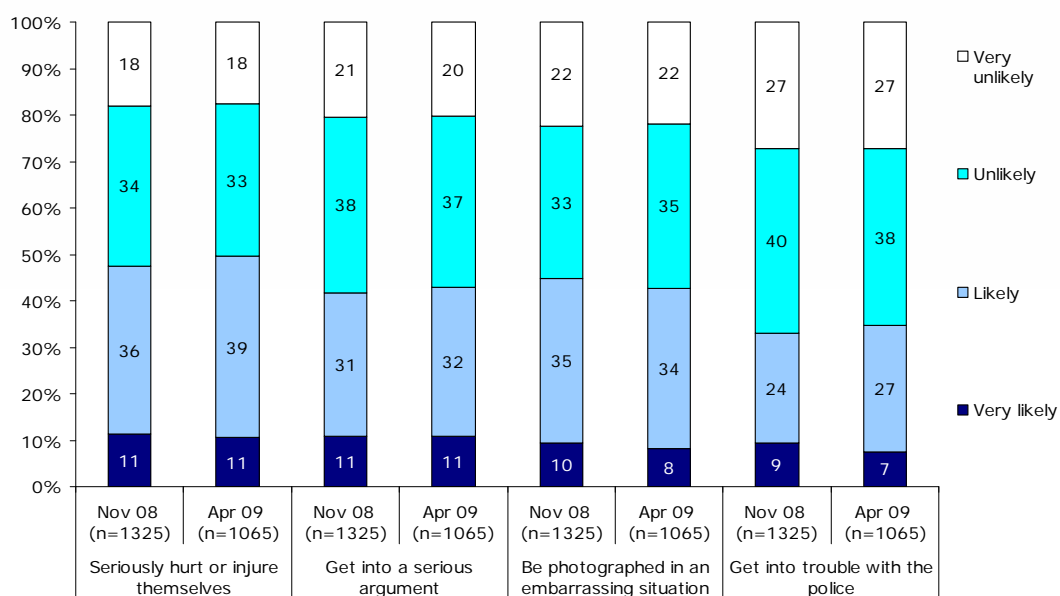


Figure 73 shows that in April 2009, half of parents 13–17 year-olds (50%) felt it was likely or very likely that their teenager would seriously hurt or injure themselves as a result of drinking too much. Around two in five parents thought it likely or very likely that their child would get into a serious argument (43%) or be photographed in an embarrassing situation (42%). Around one third (34%) of parents felt it was likely or very likely that their teenager would get into trouble with the police. There were no significant differences in parents' rating of their children's susceptibility to these consequences between November 2008 and April 2009.

Figure 74. Child's susceptibility to consequences of getting drunk (9th-12th) (Parents)

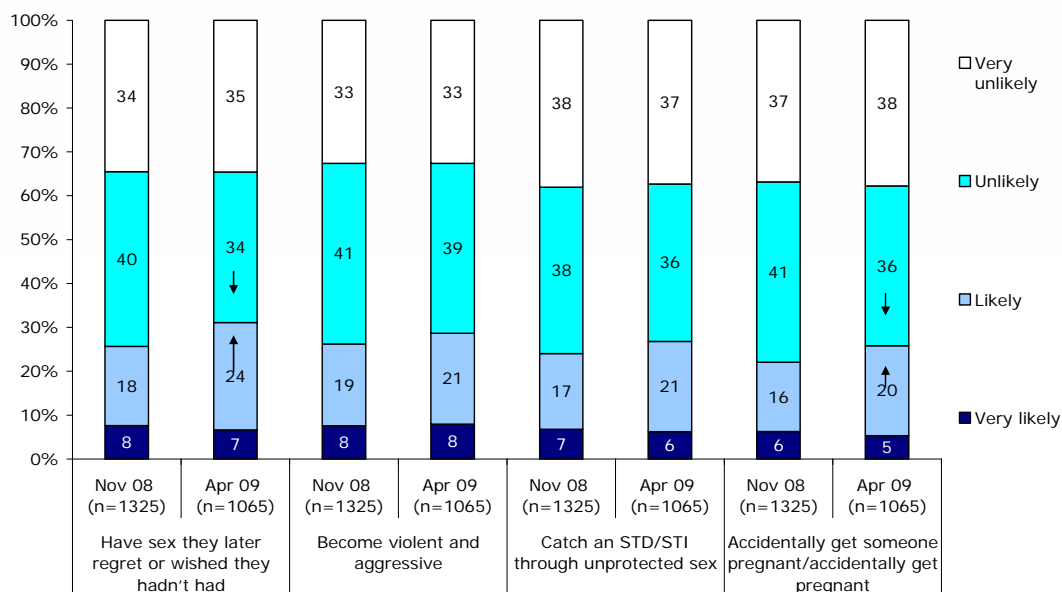
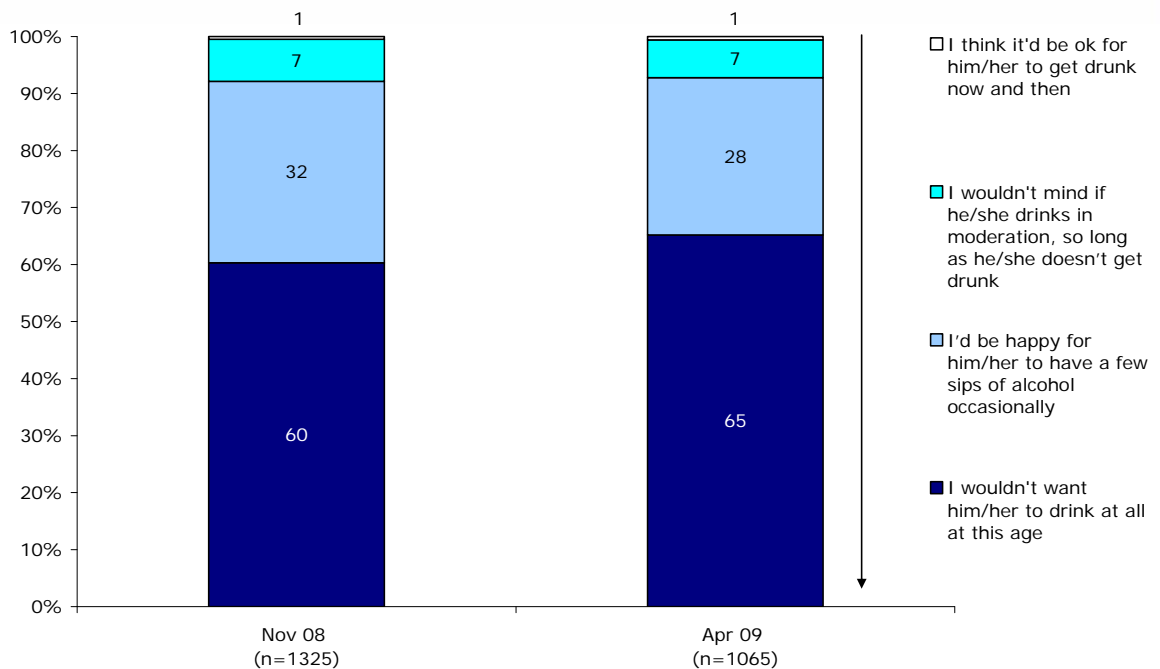


Figure 74 shows some significant differences between November 2008 and April 2009 in parents of 13–17 year-olds' estimation of their children's susceptibility to certain consequences of drinking. A significantly larger proportion of parents surveyed in April 2009 considered their children likely to have sex that they later regret or wished they hadn't had as a result of drinking too much, than in November 2008 (increasing from 18% to 24%, chi-square, $p < 0.001$). There was a corresponding decline in the proportion of parents indicating it unlikely that their child would experience this if drunk (decreasing from 40% to 34%, chi-square, $p < 0.001$). Similarly, the proportion of parents thinking it likely that their child would accidentally get pregnant or accidentally get someone pregnant increased significantly between November 2008 and April 2009 (from 16% to 20%), and this was mirrored by a decrease in the proportion thinking it unlikely (41% in November 2008, decreasing to 36% in April 2009, chi-square, $p = 0.009$). There were no significant changes between November 2008 and April 2009 in parents' estimation of the likelihood of their children becoming violent and aggressive or catching an STD through unprotected sex as a result of drinking too much.

6.4 Parental attitudes

Parents were asked to indicate how they would feel about their child drinking at various levels of consumption, from not drinking at all to getting drunk every now and then. Responses to this question are shown in Figure 75, below.

Figure 75. Attitudes towards own child's drinking (Parents)



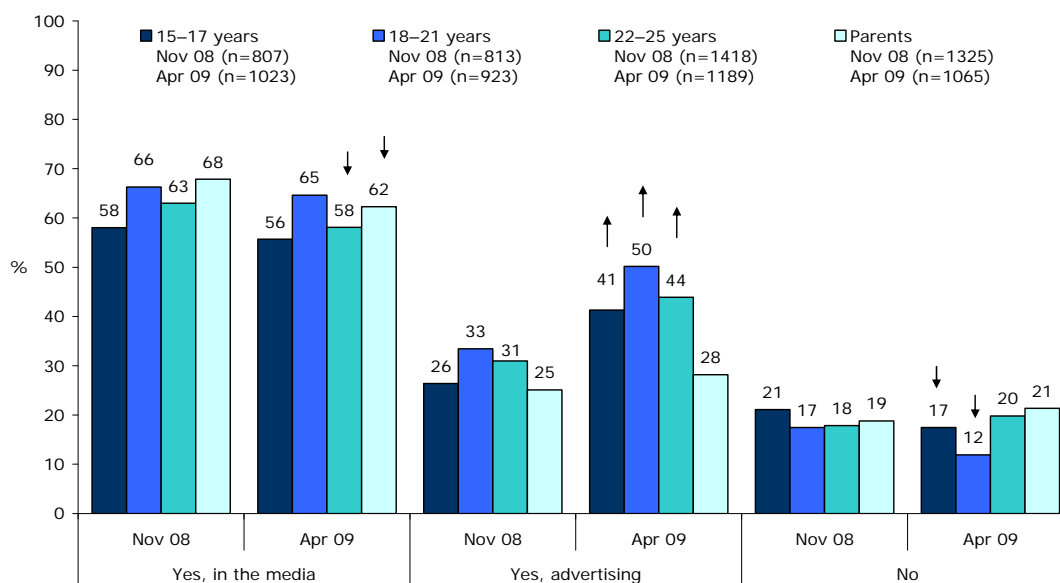
As shown in Figure 75, two thirds of parents surveyed in April 2009 (65%) wouldn't want their child to drink at all at his or her current age. A significant negative trend in permissiveness was observed across the two survey waves, with parents surveyed in April 2009 exhibiting a less permissive attitude towards their child's drinking than parents surveyed in November 2008 (Kendall's tau-b, $p=0.017$).

MEDIA AND ADVERTISING AWARENESS AND REACTIONS

7.1 Awareness of media and advertising about young people and alcohol

Young people aged 15–25 and parents of 13–17 year-olds were asked whether, in the month prior to the survey, they had seen, read or heard anything in the media or in any advertising about teenagers or young people and the risks when drinking alcohol. The results are shown in Figure 76, below.

Figure 76. Media and advertising awareness (15–25 year-olds and parents)



The majority of 15–17 year-olds (56%), 18–21 year-olds (65%), 22–25 year-olds (58%) and parents of 13–17 year-olds (62%) surveyed in April 2009 indicated seeing or hearing media coverage about young people and the risks of drinking alcohol (as shown in Figure 76).

There were significant differences in media and advertising awareness among participants surveyed in November 2008 and those surveyed in April 2009. There was a significant decline in the proportion of 22–25 year-olds that had seen, read or heard anything in the media about teenagers/young adults and the risks associated with drinking alcohol, (decreasing from 63% in November 2008 to 58% in April 2009, chi-square, $p=0.012$). A similar decline was observed among parents, with the proportion seeing or hearing anything in the media decreasing from 68% in November 2008 to 62% in April 2009 (chi-square, $p=0.004$). There was a significant increase in awareness of advertising about young people and the risks of alcohol from November 2008 to April 2009 among young people aged 15–25 years, increasing from 26% to 41% among 15–17 year-olds (chi-square, $p<0.001$), from 33% to 50% among 18–21 year-olds (chi-square, $p<0.001$), and from 31% to 44% among 22–25 year-olds (chi-square, $p<0.001$).

Parents' awareness of advertising did not change significantly across the two survey waves.

There was a significant decline in the proportions of 15–17 year-olds and 18–21 year-olds indicating that they had not seen or heard anything in the media or in advertising in the last month about young people and alcohol, decreasing from 21% in November 2008 to 17% in April 2009 among aged 15–17 year-olds (chi-square, $p=0.048$) and from 17% to 12% among 18–21 year-olds (chi-square, $p=0.001$).

Parents of 13–17 year-olds and 15–25 year-olds were then asked to indicate where they had seen, read or heard about young people and alcohol in the media or advertising. The results are illustrated in Figure 77 and Figure 78 (overleaf, and page 108). Both figures are based on the total samples of 15–25 year-olds and parents of 13–17 year-olds. Figure 77 shows the channels through which people saw, heard or read relevant messages in the media and Figure 78 shows the channels through which people saw, heard or read relevant messages in advertising. All sets of figures are ordered from most to least commonly mentioned channel.

Figure 77. Media channels (15–25 year-olds and parents)

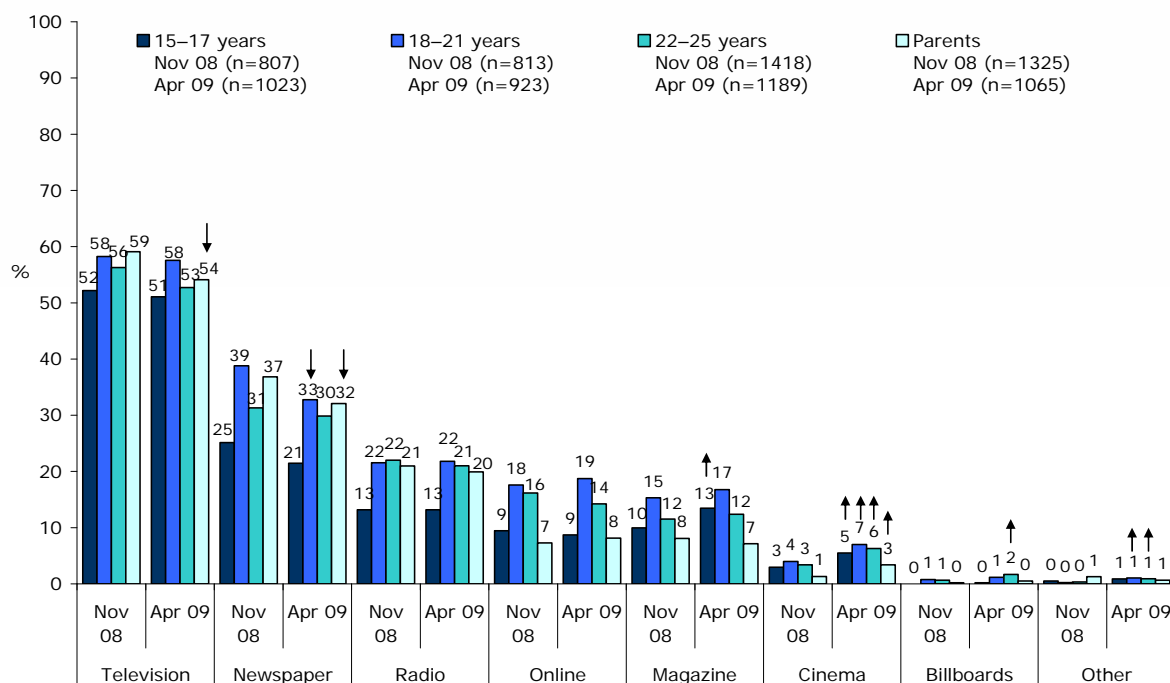


Figure 77 shows the proportions of 15–25 year-olds and parents of 13–17 year-olds that saw, read or heard media messages about young people and alcohol via different channels. The media channel with the highest reach was television, with more than half of each sample group (between 51% and 58%) exposed to media messages about alcohol and young people via this medium. There was a significant decline from November 2008 to April 2009 in the proportion of parents recalling seeing something in the media about young people and alcohol on television (decreasing from 59% to 54%, chi-square, $p=0.014$). There was also a significant decrease in the proportion of 18–21 year-olds and parents seeing media commentary about young people and alcohol in the newspaper (decreasing from 39% in November 2008 to 33% in April 2009 among 18–21 year-olds, chi-square, $p=0.010$; and from 37% to 32% among parents, chi-square, $p=0.015$).

The proportion of 15–17 year-olds who saw media messages about young people and alcohol in a magazine increased significantly from 10% in November 2008 to 13% in April 2009 (chi-square, $p=0.024$).

There were significant increases from November 2008 to April 2009 among all groups in the proportions that recalled media messages about young people and alcohol at the cinema, increasing from 3% to 5% of 15–17 year-olds (chi-square, $p=0.011$), from 4% to 7% of 18–21 year-olds (chi-square, $p=0.006$), from 3% to 6% of 22–25 year-olds (chi-square, $p=0.001$).

and from 1% to 3% of parents (chi-square, $p=0.001$). It is unclear whether these participants were referring to messages in films or to cinema advertising.

There was also a significant increase in the proportion of 22–25 year-olds indicating having seen media relating to alcohol and young people on billboards from 1% to 2% (chi-square, $p=0.001$).

Figure 78. Advertising channels (15–25 year-olds and parents)

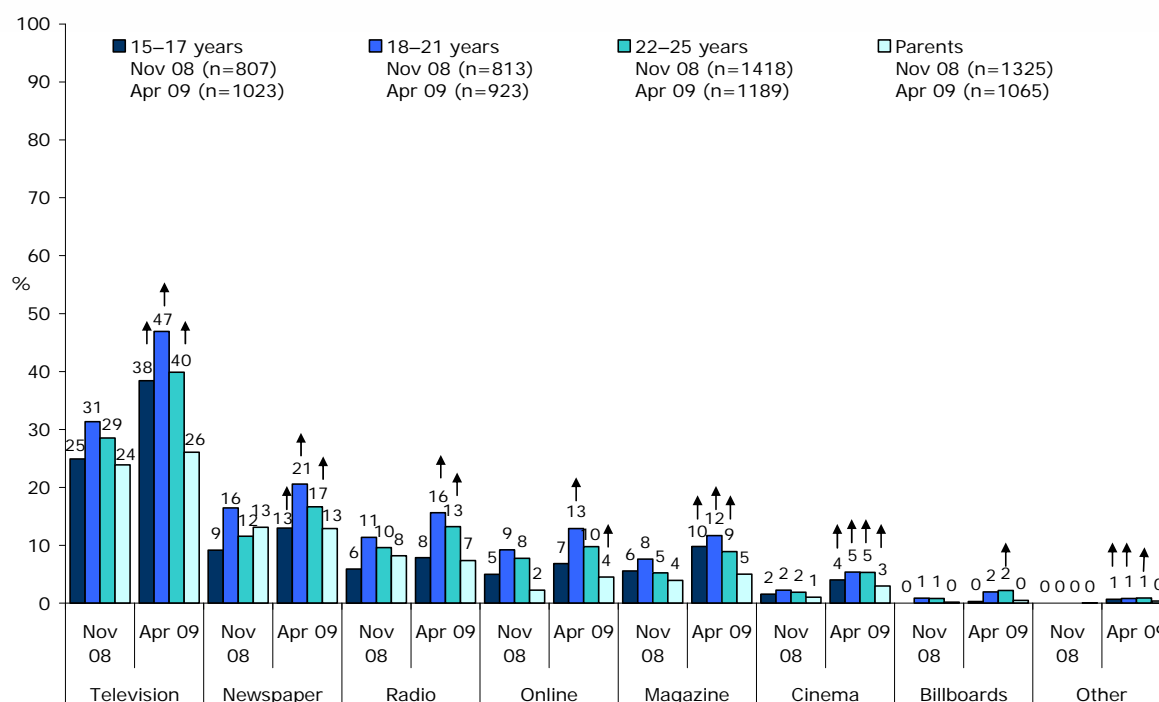


Figure 78 shows the proportions of 15–25 year-olds and parents of 13–17 year-olds that saw, read or heard advertising about young people and the risks associated with drinking alcohol through various channels. The largest proportions of 15–17 year-olds (38%), 18–21 year-olds (47%), 22–25 year-olds (40%) and parents (26%) recalled seeing advertising about young people and alcohol on television in April 2009.

There were significant increases from November 2008 to April 2009 in the proportions of 15–25 year-olds recalling seeing advertising about young people and alcohol on television (increasing from 25% to 38% among 15–17 year-olds, chi-square, $p<0.001$; from 31% to 47% among 18–21 year-olds, chi-square, $p<0.001$; and from 29% to 40% among 22–25 year-olds, chi-square, $p<0.001$). There were also significant increases in the proportions of 15–25 year-olds who saw advertising about young people and alcohol in the newspaper (increasing from 9% in November 2008 to 13% in April 2009 among 15–17 year-olds, chi-square, $p=0.011$; from 16% to 21% among 18–21 year-olds, chi-square, $p=0.027$; and from 12% to 17% among 22–25 year-olds, chi-square, $p<0.001$).

Young people aged 18–21 years and 22–25 years were more likely to recall hearing advertising about young people and alcohol on the radio in April 2009 than in November 2008, increasing from 11% to 16% among 18–21 year-olds (chi-square, $p=0.010$), and from 10% to 13% among 22–25 year-olds (chi-square, $p=0.004$).

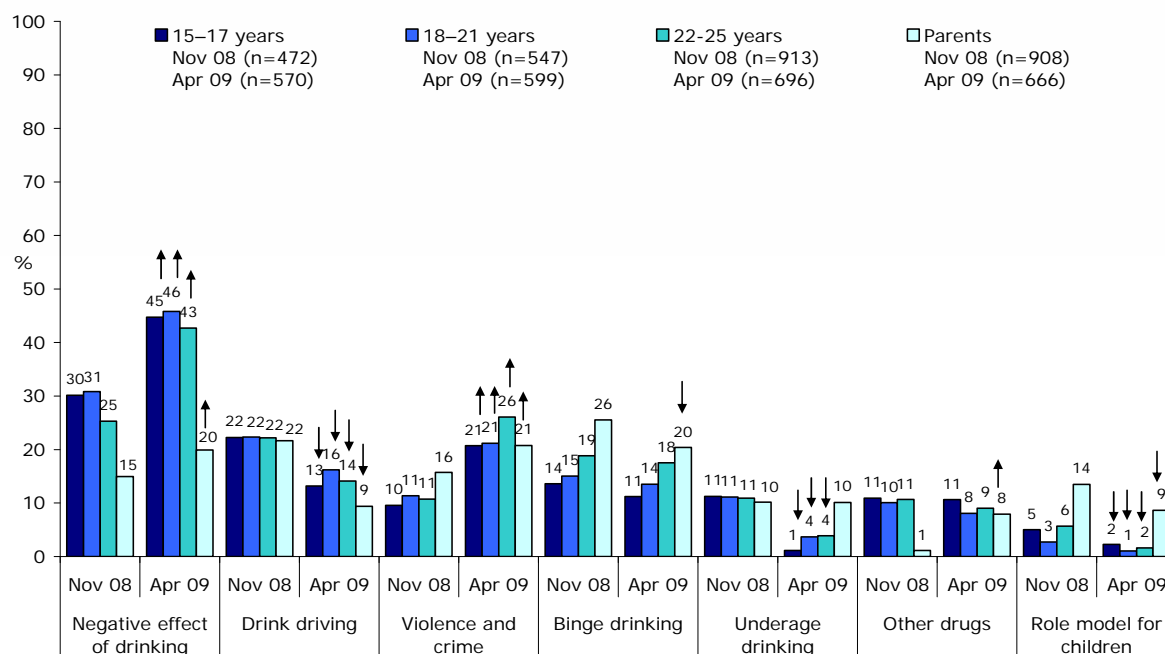
Young people aged 18–21 years and parents of 13–17 year-olds were more likely to recall seeing advertising about young people and alcohol online in April 2009 than in November 2008 (increasing from 9% to 13% among 18–21 year-olds, chi-square, $p=0.015$; and from 2% to 4% among parents, chi-square, $p=0.002$).

Significant increases were also found in the proportions of 15–25 year-olds seeing advertising about young people and alcohol in a magazine, increasing significantly from 6% in November 2008 to 10% in April 2009 among 15–17 year-olds (chi-square, $p=0.001$), from 8% to 12% among 18–21 year-olds (chi-square, $p=0.005$), and from 5% to 9% among 22–25 year-olds (chi-square, $p<0.001$).

The proportions of 15–25 year-olds and parents of 13–17 year-olds that had encountered advertising about young people and the risks when drinking alcohol at the cinema also increasing significantly, from 2% in November 2008 to 5% in April 2009 among 15–17 year-olds (chi-square, $p=0.003$), from 2% to 5% among 18–21 year-olds (chi-square, $p=0.001$), from 2% to 5% among 22–25 year-olds (chi-square, $p<0.001$) and from 1% to 3% among parents (chi-square, $p=0.001$). Young people aged 22–25 years were more likely to recall seeing relevant advertising messages on billboards in April 2009 than in November 2008 (2%, compared with 1%, chi-square, $p=0.008$).

Young people aged 15–25 years and parents of 13–17 year-olds who had seen, read or heard anything in the media or advertising about young people and alcohol were asked to recall the main message of this media or advertising. The results are illustrated in Figure 79 to Figure 82 (overleaf, and pages 111 to 115). Figure 79 and Figure 80 show the main recalled media messages and Figure 81 and Figure 82 show the main recalled advertising messages. Responses within charts are ordered from most to least commonly recalled message.

Figure 79. Most commonly recalled media messages (15–25 year-olds and parents who encountered media about young people and alcohol)



Young people aged 15–25 years surveyed in April 2009 most commonly recalled encountering media messages about the negative effect of drinking in the last month, with 45% of 15–17 year-olds, 46% of 18–21 year-olds and 43% of 22–25 year-olds who had seen relevant media recalling this as the message, as shown in Figure 79. The proportions of 15–25 year-olds and parents of 13–17 year olds who had seen relevant media recalling the negative effect of drinking as the main message increased significantly between November 2008 and April 2009, from 30% to 45% among 15–17 year-olds (chi-square, $p < 0.001$), from 31% to 46% among 18–21 year-olds (chi-square, $p < 0.001$), from 25% to 43% among 22–25 year-olds (chi-square, $p < 0.001$), and from 15% to 20% among parents (chi-square, $p = 0.012$).

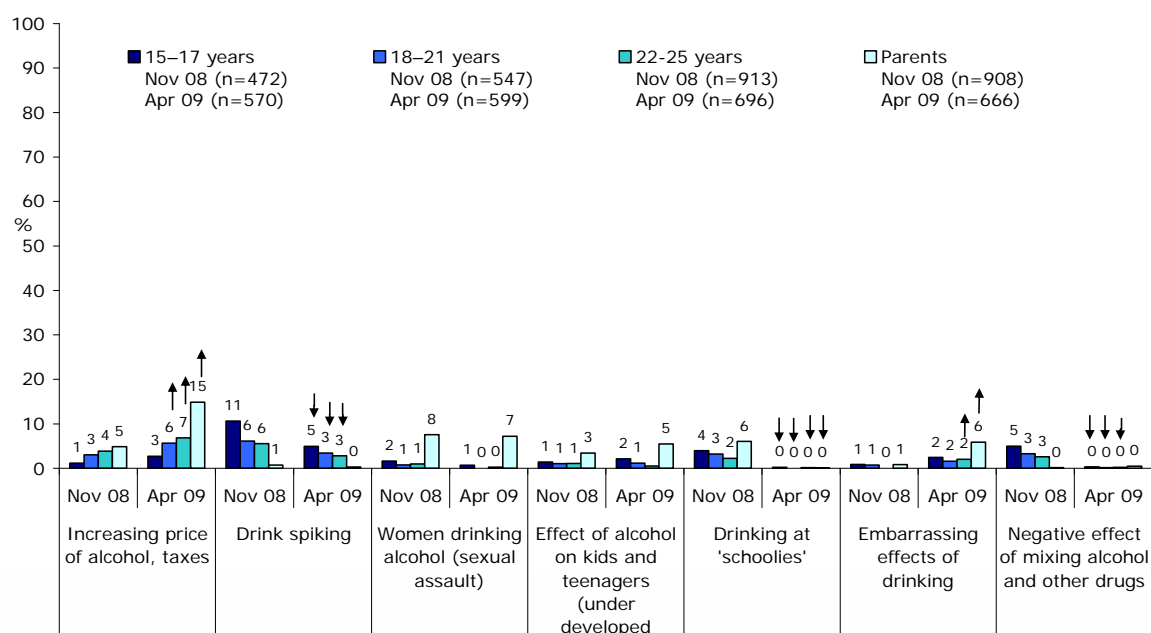
Recall of messages about drink driving decreased significantly, from 22% of those in each age group who had seen relevant media in November 2008, to 13% of 15–17 year-olds (chi-square, $p < 0.001$), 16% of 18–21 year-olds (chi-square, $p = 0.009$), 14% of 22–25 year-olds (chi-square, $p < 0.001$), and 9% of parents (chi-square, $p < 0.001$) who had seen such media in April 2009. The recall of media messages about violence and crime also increased significantly over the two survey waves, from 10% to 21% among 15–17 year-olds (chi-square, $p < 0.001$), 11% to 21% among 18–21 year-olds (chi-square, $p < 0.001$), 11% to 26% among 22–25 year-olds (chi-square, $p < 0.001$), and 16% to 21% among parents (chi-square, $p = 0.011$) who had seen media about young people and alcohol.

The proportion of parents who had encountered media about young people and alcohol recalling the main message of this media to be about binge drinking decreased significantly from 26% in November 2008 to 20% in April 2009 (chi-square, $p=0.018$). The proportion of 15–25 year-olds who had encountered relevant media recalling the message to be about underage drinking also decreased significantly from November 2008 to April 2009, from 11% to 1% among 15–17 year-olds (chi-square, $p<0.001$), from 11% to 4% among 18–21 year-olds (chi-square, $p<0.001$), and from 11% to 4% among 22–25 year-olds (chi-square, $p<0.001$).

There was a significant increase in the proportion of parents recalling media about young people and alcohol who then indicated the main message of this media to be about drugs other than alcohol, from 1% in November 2008 to 8% in April 2009 (chi-square, $p<0.001$).

Recall of messages about being a role model for children decreased significantly from November 2008 to April 2009, from 5% to 2% among 15–17 year-olds (chi-square, $p=0.026$), from 3% to 1% among 18–21 year-olds (chi-square, $p=0.045$), from 6% to 2% among 22–25 year-olds (chi-square, $p<0.001$), and from 14% to 9% among parents (chi-square, $p=0.003$) who had encountered media about young people and alcohol in the month prior to being surveyed.

Figure 80. Less commonly recalled media messages (15–25 year-olds and parents who encountered media about young people and alcohol)



As illustrated in Figure 80, there was a significant increase between November 2008 and April 2009 in the proportions of 18–21 year-olds, 22–25 year-olds and parents of 13–17 year-olds who encountered media relating to young people and alcohol in the month preceding the

survey recalling the main message of this media to be the increasing prices of alcohol or taxes. Among 18–21 year-olds, this proportion increased from 3% to 6% (chi-square, $p=0.032$); among 22–25 year-olds, this proportion increased from 4% to 7% (chi-square, $p=0.011$); and among parents this proportion increased from 5% to 15% (chi-square, $p<0.001$).

Among 15–17 year-olds encountering relevant media, recall of messages about drink spiking decreased significantly from 11% in November 2008 to 5% in April 2009 (chi-square, $p=0.001$). Likewise, recall of this media message among 18–21 year-olds decreased significantly from 6% to 3% (chi-square, $p=0.036$), and from 6% to 3% among 22–25 year-olds (chi-square, $p=0.012$).

Among 15–25 year-olds and parents of 13–17 year-olds encountering relevant media, recall of messages about drinking at 'schoolies' decreased significantly from November 2008 to April 2009, decreasing from 4% to 0% for 15–17 year-olds (chi-square, $p<0.001$), from 3% to 0% for 18–21 year-olds (chi-square, $p<0.001$), from 2% to 0% for 22–25 year-olds (chi-square, $p<0.001$), and from 6% to 0% for parents (chi-square, $p<0.001$).

Recall of media messages about the embarrassing effects of drinking alcohol increased significantly over the two survey waves from 0% to 2% among 22–25 year-olds (chi-square, $p<0.001$), and from 1% to 6% among parents (chi-square, $p<0.001$) who encountered relevant media in the month prior to being surveyed.

Young people aged 15–17 years, 18–21 years and 22–25 years who encountered media about young people and alcohol in April 2009 did not recall the main message to be about the negative effect of mixing alcohol and other drugs, a significant decrease for each of these age groups from November 2008 when 5% of 15–17 year-olds (chi-square, $p<0.001$), 3% of 18–21 year-olds (chi-square, $p<0.001$), and 3% of 22–25 year-olds (chi-square, $p<0.001$) who encountered relevant media recalled the message to be such.

Figure 81. Most commonly recalled advertising messages (15–25 year-olds and parents who encountered advertising about young people and alcohol)

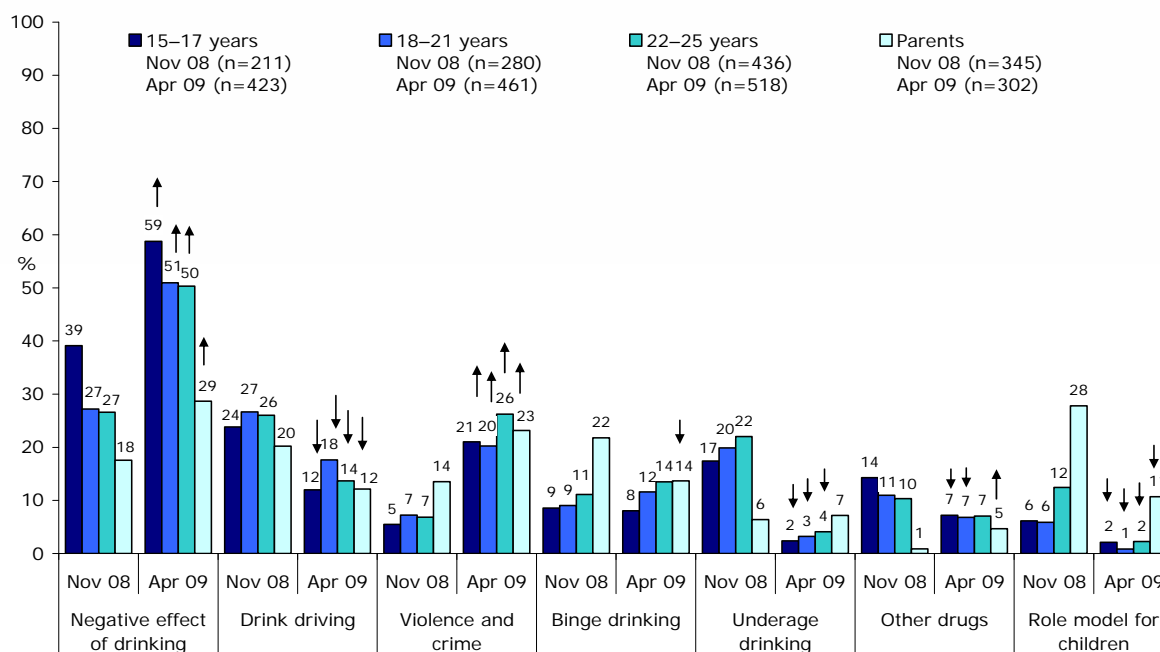


Figure 81 displays the seven advertising messages most frequently recalled by 15–25 year-olds and parents of 13–17 year-olds who indicated they had seen, read or heard advertisements about young people and the risks of drinking alcohol in the month prior to being surveyed. Among 15–17 year-olds, 18–21 year-olds, 22–25 year-olds and parents, the negative effect of drinking was the most commonly recalled advertising message encountered in the month prior to the April 2009 survey, with more than half of 15–17 year-olds, 18–21 year-olds and 22–25 year-olds, and three in ten parents who encountered relevant advertising recalling this as the message. The proportions within each group recalling this advertising message in April 2009 were significantly larger than the corresponding proportions in November 2009; increasing from 39% to 59% among 15–17 year-olds (chi-square, $p < 0.001$), from 27% to 51% among 18–21 year-olds (chi-square, $p < 0.001$), from 27% to 50% among 22–25 year-olds (chi-square, $p < 0.001$) and from 18% to 29% among parents (chi-square, $p = 0.001$).

Recall of advertising messages about violence and crime associated with young people and alcohol consumption increased significantly across survey waves, from 5% to 21% among 15–17 year-olds (chi-square, $p < 0.001$), from 7% to 20% among 18–21 year-olds (chi-square, $p < 0.001$), from 7% to 26% among 22–25 year-olds (chi-square, $p < 0.001$) and from 14% to 23% among parents (chi-square, $p = 0.002$) who encountered relevant advertising in the month prior to the survey.

There were significant decreases from November 2008 to April 2009 in the proportions of 15–25 year-olds and parents recalling advertisements involving drink driving, decreasing from 24%

to 12% of 15–17 year-olds (chi-square, $p<0.001$), from 27% to 18% of 18–21 year-olds (chi-square, $p=0.003$), from 26% to 14% of 22–25 year-olds (chi-square, $p<0.001$) and from 20% to 12% of parents (chi-square, $p=0.007$) who encountered relevant advertising.

Among parents of 13–17 year-olds who had seen, read or heard advertisements about young people and alcohol in the month prior to being surveyed, there was a significant decrease in the proportion mentioning binge drinking as the main message, from 22% in November 2008 to 14% in April 2009 (chi-square, $p=0.007$).

There was a significant decrease in recall of advertising messages about underage drinking amongst 15–25 year-olds who had encountered any relevant advertising in the last month, decreasing from 17% to 2% of 15–17 year-olds (chi-square, $p<0.001$), from 20% to 3% of 18–21 year-olds (chi-square, $p<0.001$), and from 22% to 4% of 22–25 year-olds (chi-square, $p<0.001$).

The proportions of 15–17 year-olds and 18–21 year-olds encountering relevant advertising that then recalled the message to be about drugs other than alcohol decreased significantly across survey waves, from 14% to 7% among 15–17 year-olds (chi-square, $p=0.010$), from 11% to 7% among 18–21 year-olds (chi-square, $p=0.041$), and increased significantly among parents, from 1% to 5% among parents (chi-square, $p=0.005$).

Recall of advertising messages about being a role model for children decreased significantly across survey waves, from 6% to 2% of 15–17 year-olds (chi-square, $p=0.019$), from 6% to 1% of 18–21 year-olds (chi-square, $p<0.001$), from 12% to 2% of 22–25 year-olds (chi-square, $p<0.001$) and from 28% to 11% of parents (chi-square, $p<0.001$) who had encountered advertising about young people and alcohol in the month prior to the survey.

Figure 82. Less commonly recalled advertising messages (15–25 year-olds and parents who encountered advertising about young people and alcohol)

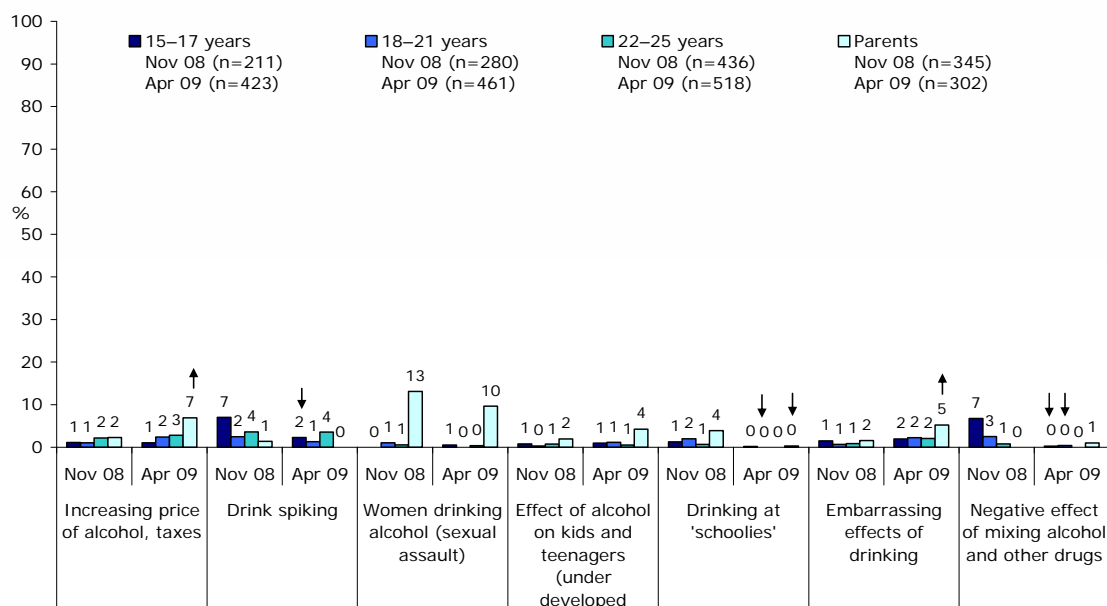


Figure 82 shows the seven least frequently recalled advertising messages by 15–25 year-olds and parents of 13–17 year-olds who recalled encountering any advertising about young people and alcohol in the month prior to being surveyed, and indicates some significant differences between responses in November 2008 and April 2009. Among parents, recall of advertising messages about the increasing prices of alcohol or taxes increased significantly, from 2% to 7% (chi-square, $p=0.007$). Fewer 15–17 year-olds in April 2009 recalled advertising messages about drink spiking, decreasing from 7% in November 2008 to 2% in April 2009 (chi-square, $p=0.008$). The proportions of 18–21 year-olds and parents recalling advertising messages about drinking at 'schoolies' decreased significantly between November 2008 and April 2009 (from 2% to 0% among 18–25 year-olds, chi-square, $p=0.003$; and from 4% to 0% among parents, chi-square, $p=0.002$). A larger proportion of parents recalled advertising messages about the embarrassing effects of drinking in April 2009 than in November 2008, (5%, compared with 2%, chi-square, $p=0.013$). Fewer 15–17 year-olds and 18–21 year-olds recalled advertising about the negative effect of mixing alcohol and other drugs in April 2009 than did so in November 2008, (0%, compared with 7% for 15–17 year-olds, chi-square, $p<0.001$; 0%, compared with 3% for 18–21 year-olds, chi-square, $p=0.031$).

7.2 National Binge Drinking Campaign executions

A battery of questions was added to the April 2009 survey questionnaire to evaluate the specific creative components of the National Binge Drinking Campaign. These questions explored awareness of and reactions to each of the campaign elements. Although the advertising did not target parents, the same evaluation questions were asked of both 15–25 year olds and parents of 13–17 year-olds.

Responses to this component of the April 2009 survey are detailed in this section of the report.

‘Party bushes/Pedestrian accident’ television advertisement

All participants in the April 2009 survey were shown the National Binge Drinking Campaign’s television commercial (TVC) depicting 15–17 year-olds experiencing negative consequences of drinking too much alcohol. A description of this commercial follows:

- The first scene is seen through the eyes of a teenage girl and starts with her drinking with friends and arriving at a party. At the party she drinks more and as the night progresses we see her and a guy getting closer. Later, they stumble outside, hands all over each other. The scene ends with the pair undressing and being photographed by others at the party. A statistic about regret is displayed.
- The next scene is seen through the eyes of a teenage boy and starts with him taking alcohol from his parents’ fridge. We then see him drinking and mucking around with his mates. Later in the night, he stumbles off the kerb and on to the road in front of a car. The scene ends with him being hit by a car and a statistic about alcohol related deaths.

For the purposes of this research, this advertisement was referred to as ‘Party bushes/Pedestrian accident’. The television stills are shown in Figure 83, overleaf.

Figure 83. 'Party bushes/Pedestrian accident' stills



Figure 84. Reach and frequency of 'Party bushes/Pedestrian accident' TVC (15–25 year-olds and parents)

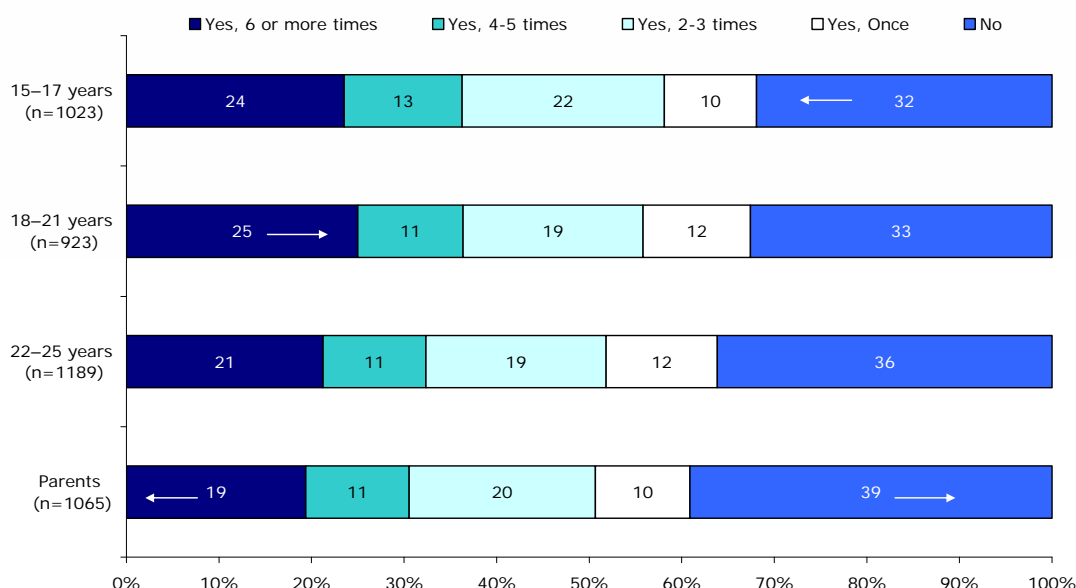


Figure 84 displays the reach of this advertisement by age group. Close to two-thirds of 15–17 (68%), 18–21 (67%) and 22–25 year-olds (64%) had seen the 'Party bushes/Pedestrian accident' advertisement at least once. Some significant differences were observed between the age groups (chi-square, $p=0.015$). In particular, 18–21 year-olds were more likely than others to have seen the advertisement six or more times (25%) and 15–17 year-olds were less likely than others to have never seen the advertisement (32%).

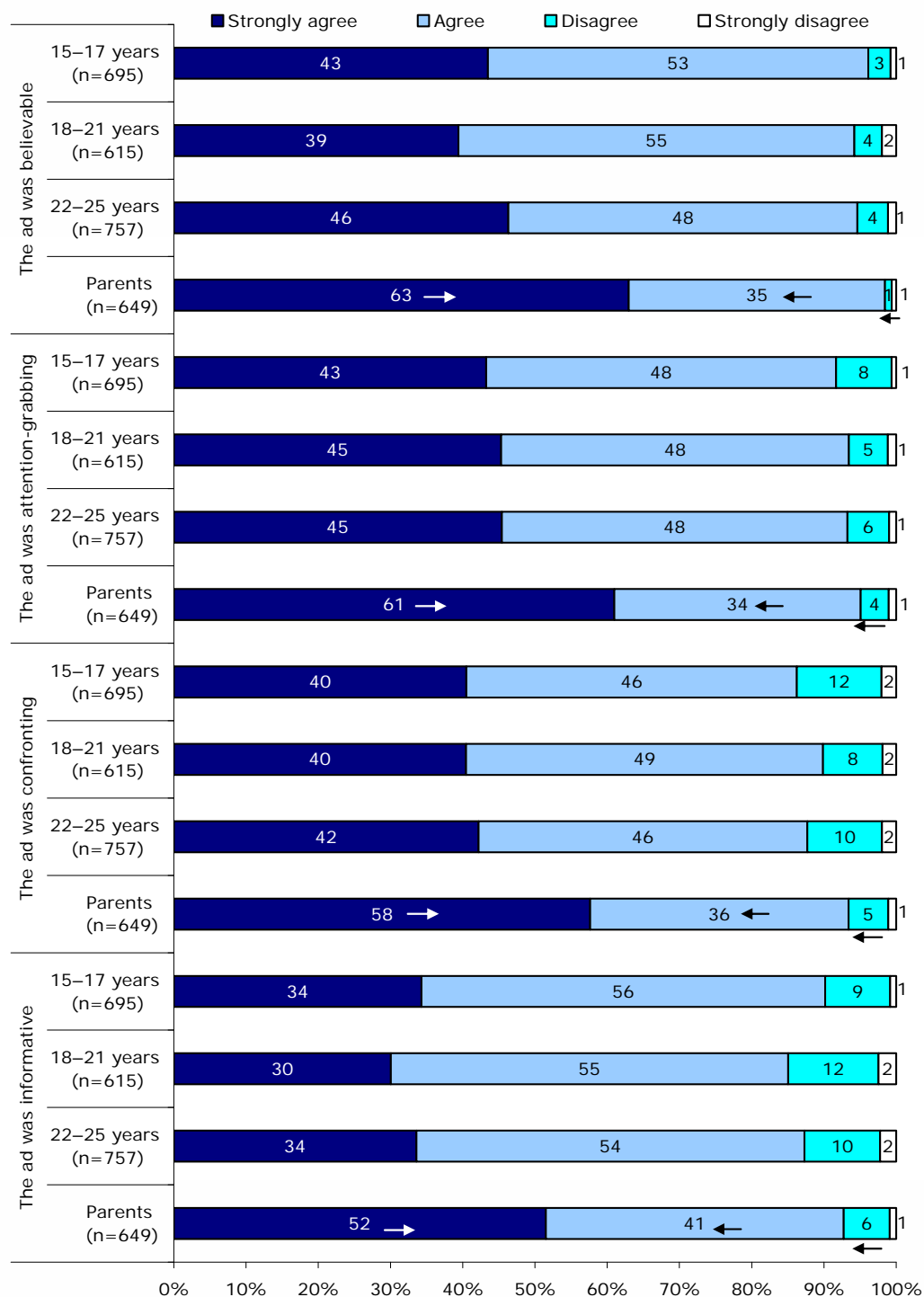
At least three-fifths of the secondary target audience, parents of 13–17 year-olds, had seen this advertisement at least once (61%).

Young people aged 15–25 years and parents of 13–17 year-olds were asked to indicate their level of agreement with four statements pertaining to the 'Party bushes/Pedestrian accident' TVC:

- the ad was believable;
- the ad was attention-grabbing;
- the ad was confronting; and
- the ad was informative.

The results are shown in Figure 85, overleaf.

Figure 85. Impressions of 'Party bushes/Pedestrian accident' TVC (15–25 year-olds and parents)



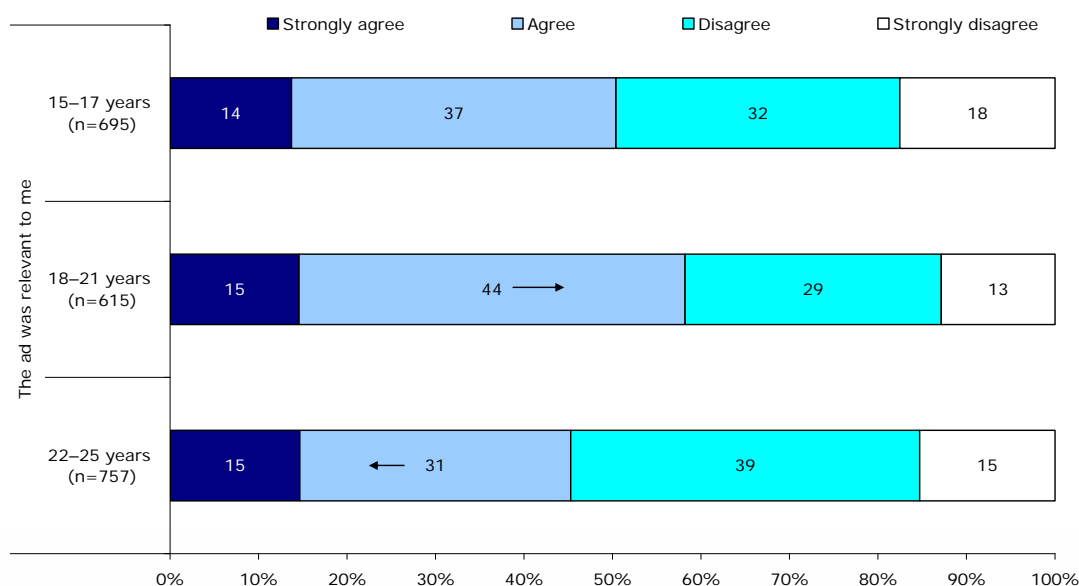
As shown in Figure 85, the overwhelming majority of 15–25 year-olds who had seen the 'Party bushes/Pedestrian accident' advertisement agreed that it was believable, attention-grabbing, confronting and informative.

Ninety-six percent (96%) of 15–17 year-olds, 94% of 18–21 year-olds and 94% of 22–25 year-olds agreed or strongly agreed that the advertisement was believable and 91%, 93% and 93%, respectively, agreed or strongly agreed that it was attention-grabbing. Eighty-six percent (86%) of 15–17 year-olds, 89% of 18–21 year-olds, 88% of 22–25 year-olds agreed or strongly agreed that it was confronting and 90% of 15–17 year-olds, 85% of 18–21 year-olds and 88% of 22–25 year-olds agreed or strongly agreed that it was informative.

Most parents of 15–17 year-olds agreed or strongly agreed that the advertisement was believable (98%), attention-grabbing (95%), confronting (94%) and informative (93%). Parents were also significantly more likely than 15–25 year-olds to strongly agree with each of these statements (chi-square, $p < 0.001$).

Young people aged 15–25 years were asked whether or not they agreed that the 'Party bushes/Pedestrian accident' television advertisement was relevant to them. Responses are shown by age group in Figure 86, below.

Figure 86. Perceived relevance of 'Party bushes/Pedestrian accident' TVC (15–25 year-olds)



As shown in Figure 86, among those who had seen this commercial, around half of 15–17 year-olds (51%) and 22–25 year-olds (46%), and three in five 18–21 year-olds (59%) agreed or strongly agreed that the advertisement was relevant to them.

Young people 18–21 years of age were more likely than others to agree (44%) that the 'Party bushes/Pedestrian accident' advertisement was relevant, while 22–25 year-olds were less likely to agree it was relevant to them (31%) (chi-square, $p < 0.001$).

Figure 87. Perceived relevance of 'Party bushes/Pedestrian accident' TVC by risk level (15–25 year-olds)

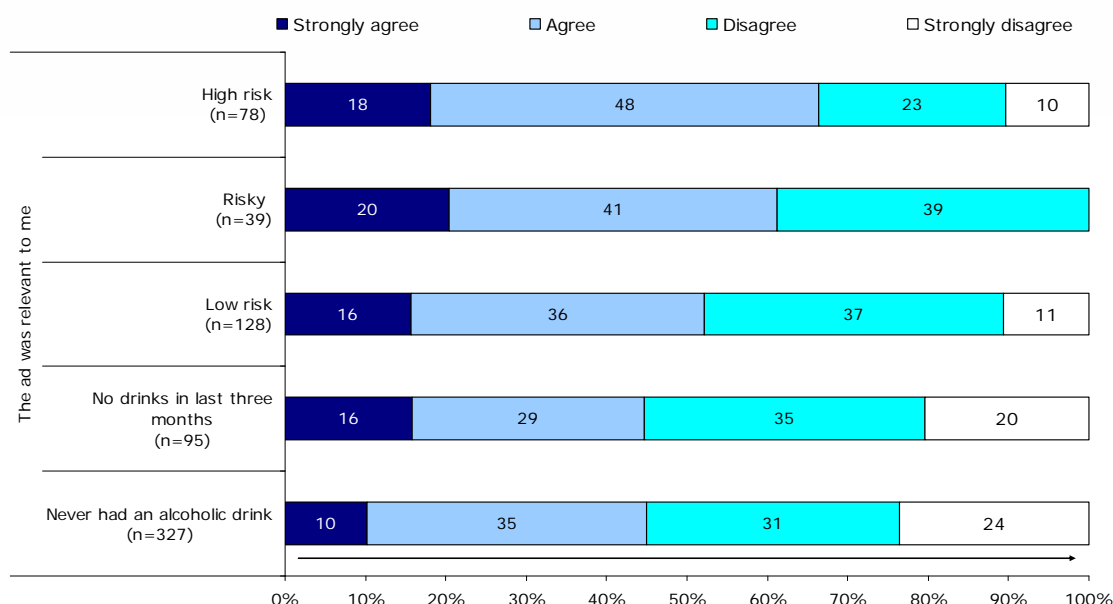


Figure 87 shows the perceived relevance of the 'Party bushes/Pedestrian accident' advertisement by the risk level of 15–25 year-olds' alcohol consumption the last time they were drinking alcohol. Perceptions of relevance increased significantly with risk level (Kendall's tau-b, $p < 0.001$). The proportion agreeing or strongly agreeing that the advertisement was relevant to them increased from 45% of those who had never had an alcoholic drink to 66% of those who drank at a high risk level on their last drinking occasion.

Parents and 15–25 year-olds who recalled seeing the 'Party bushes/Pedestrian accident' TVC were asked to indicate all of the channels through which they had seen this advertisement. The results are shown in Figure 88, overleaf.

Figure 88. 'Party bushes/Pedestrian accident' TVC channel (15–25 year-olds and parents)

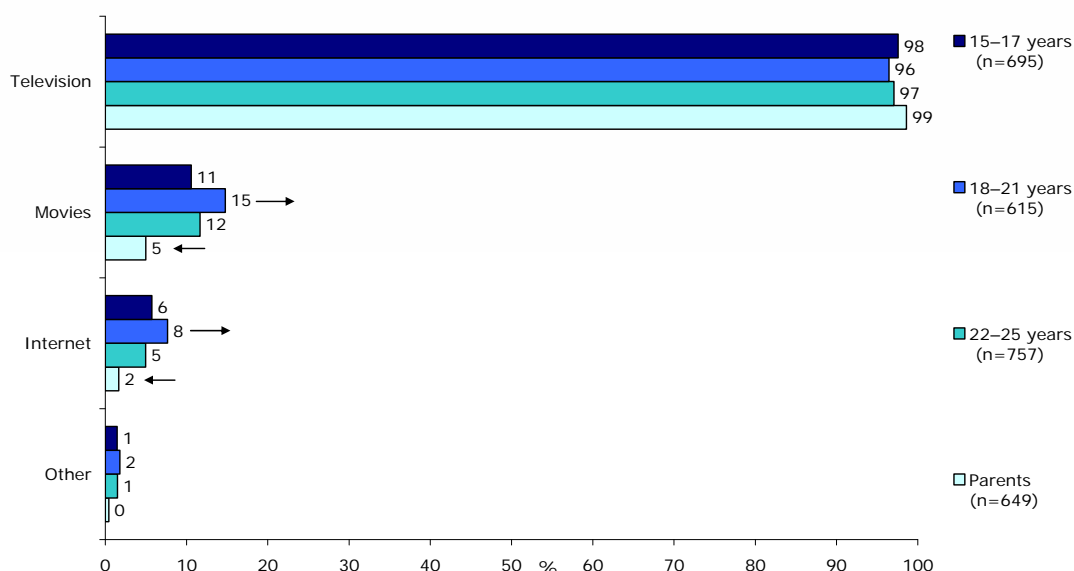


Figure 88 shows that almost all 15–25 year-olds and parents of 13–17 year-olds who recalled seeing the 'Party bushes/Pedestrian accident' commercial saw it on television (98% of 15–17 year-olds, 96% of 18–21 year-olds, 97% of 22–25 year-olds, and 99% of parents). Much smaller proportions recalled seeing it at the movies, on the internet or through some other medium (such as at school). A handful of those indicating having seen the advertisement before, when asked where they viewed the advertisement, recalled having seen the print version of the advertisement, for example on buses, billboards or in magazines.

Young people aged 18–21 years were more likely than other age groups to have seen the 'Party bushes/Pedestrian accident' commercial at the movies (15%, chi-square, $p < 0.001$) and on the internet (8%, chi-square, $p < 0.001$).

As the secondary target audience, parents 13–17 year-olds were significantly less likely than others to have seen this advertisement at the movies (5%, chi-square, $p < 0.001$) or on the internet (2%, chi-square, $p < 0.001$).

'Coffee table/Pub fight' television advertisement

A second television advertisement depicted 18–25 year-olds experiencing negative consequences of drinking too much alcohol. This advertisement also depicts a night out through the eyes of two people:

- This ad starts by showing a night out through the eyes of a 20-ish girl. It starts with the girl arriving at a friend's birthday party. The party progresses, they drink more, and the ad ends with the girl stumbling, crashing through a glass coffee table, and a statistic about alcohol related hospitalisations.
- The ad then cuts to a new scenario seen through the eyes of a young guy in his early 20s. It opens with him and his girlfriend meeting friends at a bar. As the night progresses, we see the young guy drink more and eventually push another guy and start a fight. The scene ends with the young guy accidentally hitting his girlfriend. A statistic about alcohol-caused assault is then displayed.

For the purposes of this research, this advertisement was referred to as 'Coffee table/Pub fight'. The television stills are shown in Figure 89, overleaf.

Figure 89. 'Coffee table/Pub fight' stills



Figure 90. Reach and frequency of 'Coffee table/Pub fight' TVC (15–25 year-olds and parents)

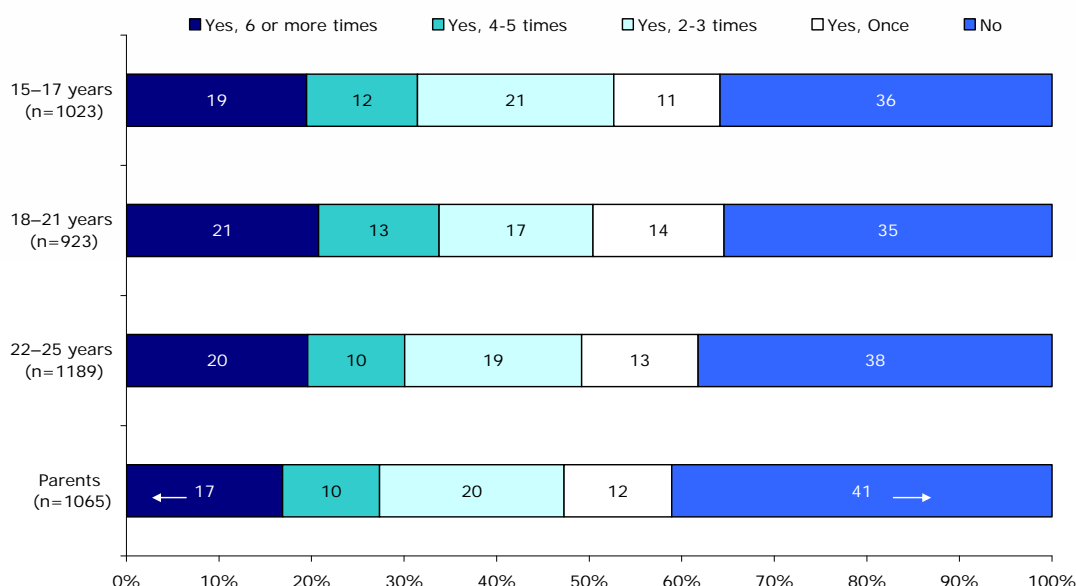


Figure 90 illustrates the reach and frequency of the 'Coffee table/Pub fight' television advertisement among 15–25 year-olds and parents of 13–17 year-olds. The majority of 15–17 year-olds (64%), 18–21 year-olds (65%) and 22–25 year-olds (62%) had seen this execution at least once, although these proportions were smaller than the corresponding proportions for the 'Party bushes/Pedestrian accident' execution.

More than half of the secondary target audience of parents of 13–17 year-olds (59%) had seen the 'Coffee table/Pub fight' advertisement. They were significantly more likely than 15–25 year-olds to indicate not having seen this advertisement (41%) and less likely to indicate having seen it six or more times (17%) (chi-square, $p=0.029$).

As for the 'Party bushes/Pedestrian accident' execution, 15–25 year-olds and parents of 13–17 year-olds were asked to indicate their level of agreement with four statements pertaining to the 'Coffee table/Pub fight' television advertisement:

- the ad was believable;
- the ad was attention-grabbing;
- the ad was confronting; and
- the ad was informative.

Responses to these statements are shown in Figure 91 (overleaf) in order of agreement.

Figure 91. Impressions of 'Coffee table/Pub fight' TVC (15–25 year-olds and parents)

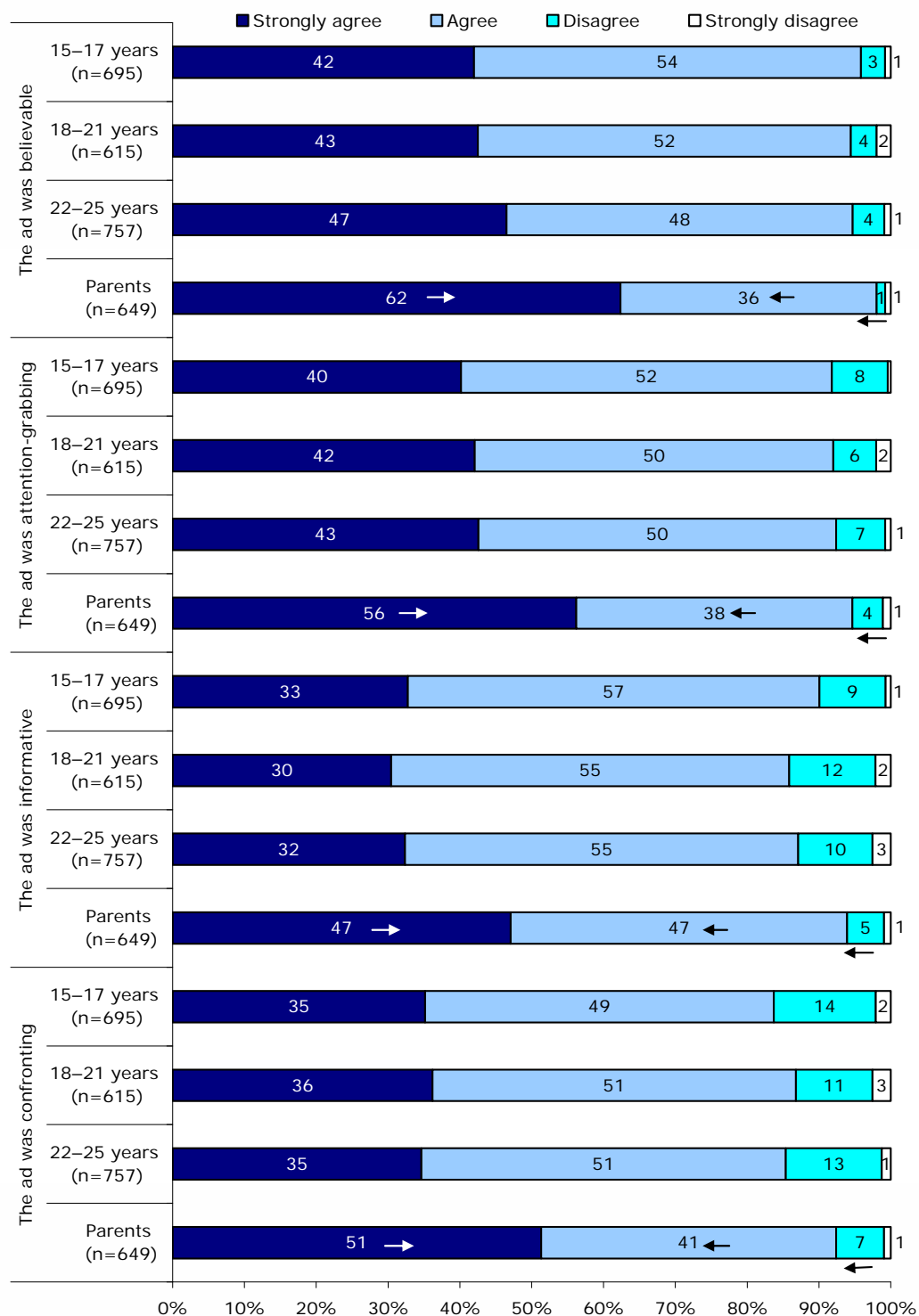


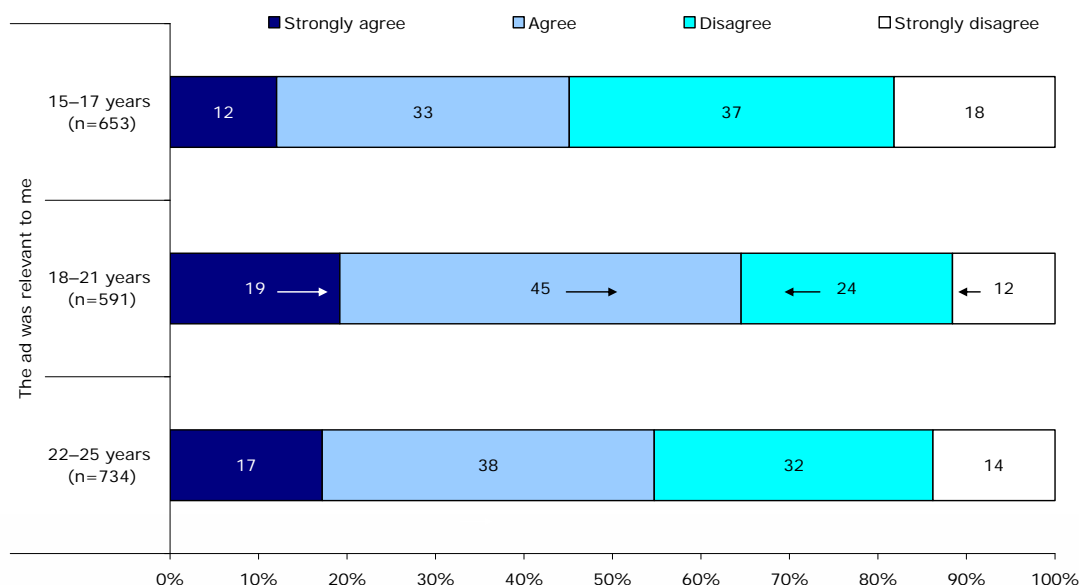
Figure 91 shows that, as for the 'Party bushes/Pedestrian accident' execution, almost all participants who had seen the 'Coffee table/Pub fight' advertisement agreed or strongly agreed that it was believable, attention-grabbing, informative and confronting.

Ninety-six percent (96%) of 15–17 year-olds, 95% of 18–21 year-olds and 95% of 22–25 year-olds agreed or strongly agreed that the 'Coffee table/Pub fight' advertisement was believable, and 92% of 15–17 year-olds, 92% of 18–21 year-olds and 93% of 22–25 year-olds agreed or strongly agreed that it was attention-grabbing. Ninety percent (90%) of 15–17 year-olds, 85% of 18–21 year-olds and 87% of 22–25 year-olds agreed or strongly agreed that it was informative, and 84% of 15–17 year-olds, 87% of 18–21 year-olds and 86% of 22–25 year-olds agreed or strongly agreed that the advertisement was confronting.

Almost all of the secondary target audience of parents agreed that the 'Coffee table/Pub fight' advertisement was believable (98%) attention-grabbing (95%), informative (94%) and confronting (92%). Parents were also more likely than 15–25 year-olds to strongly agree with each of the four statements (chi-square, $p < 0.001$).

Young people aged 15–25 years were asked whether or not they agreed that the 'Coffee table/Pub fight' advertisement was relevant to them. Responses are shown by age group in Figure 92, below.

Figure 92. Perceived relevance of 'Coffee table/Pub fight' TVC (15–25 year-olds)



Forty-five percent (45%) of 15–17 year-olds, 64% of 18–21 year-olds and 55% of 22–25 year-olds agreed or strongly agreed that 'Coffee table/Pub fight' advertisement was personally relevant (see Figure 92). Young people aged 18–21 years were significantly more likely to

agree and less likely to disagree than those in other age groups that the 'Coffee table/Pub fight' advertisement was relevant (chi-square, $p < 0.001$).

Figure 93. Perceived relevance of 'Coffee table/Pub fight' TVC by risk level (15–25 year-olds)

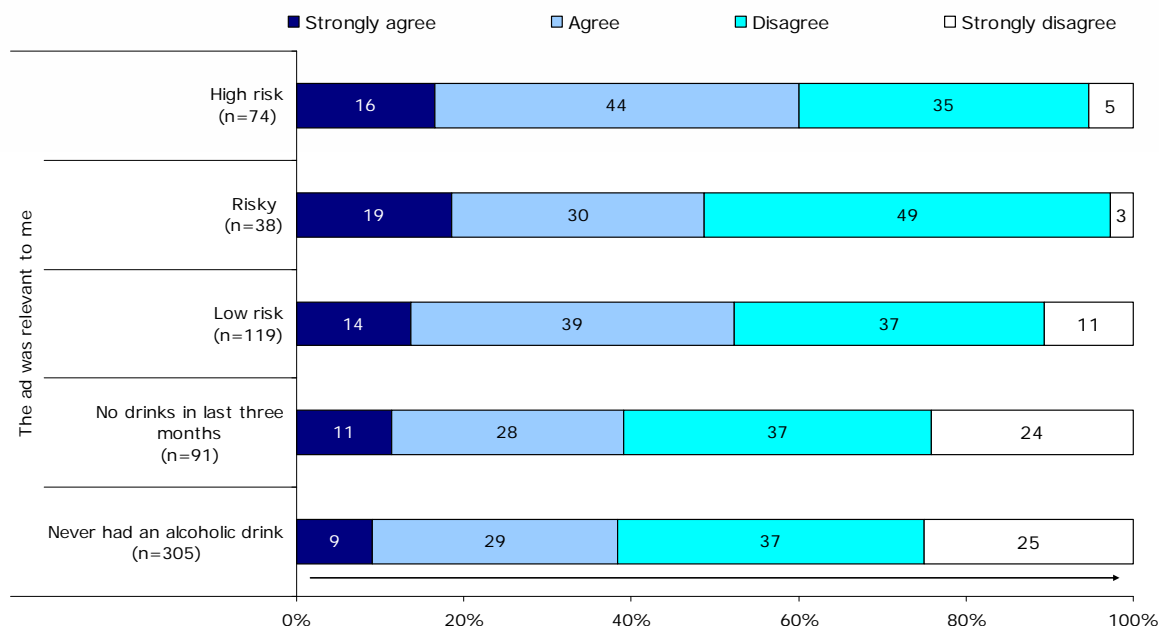
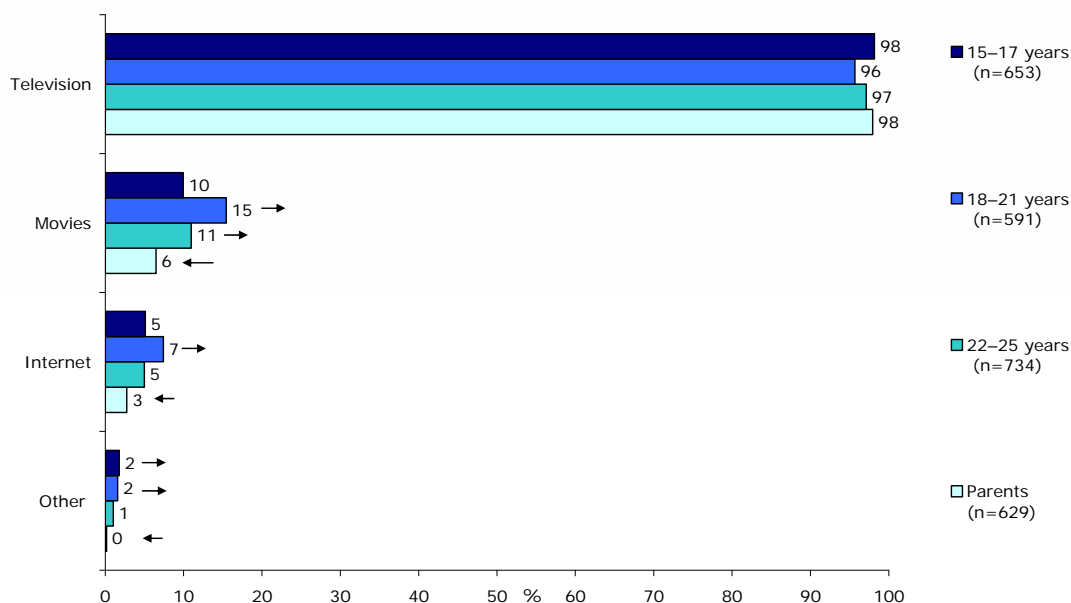


Figure 93 shows the perceived personal relevance of the 'Coffee table / Pub fight' advertisement by the risk level of 15–25 year-olds' alcohol consumption the last time they were drinking alcohol. The proportion agreeing or strongly agreeing that it ranged from 38% of those who had never had an alcoholic drink to 60% of those that drank at a high risk level the last time they consumed alcohol.

As for the 'Party bushes/Pedestrian accident' execution, there was a greater tendency to perceive the 'Coffee table / Pub fight' execution as relevant as the risk level of last occasion consumption increased (Kendall's tau-b, $p < 0.001$).

Young people aged 15–25 years and parents of 15–17 year-olds who recalled seeing the 'Coffee table/Pub fight' advertisement were asked to indicate all of the channels through which they had viewed the advertisement. These results are shown in Figure 94, overleaf.

Figure 94. 'Coffee table/Pub fight' TVC channel (15–25 year-olds and parents)



As for the 'Party bushes/Pedestrian accident' execution, almost all who had seen the 'Coffee table/Pub fight' advertisement saw it on television, with 98% of 15–17 year-olds, 96% of 18–21 year-olds, 97% of 22–25 year-olds and 98% parents viewing it through this medium. Smaller proportions viewed it at the movies or on the internet.

Young people aged 18–21 years (15%) and 22–25 year-olds (11%) were significantly more likely than others to have seen the 'Coffee table/Pub fight' advertisement at the movies (chi-square, $p < 0.001$), and 18–21 year-olds (7%) were also significantly more likely than others to have seen it on the internet (chi-square, $p < 0.001$).

Parents, as the secondary target audience for the campaign, were significantly less likely than 15–25 year-olds to have seen the advertisement at the cinema (6%) or on the internet (3%) (chi-square, $p < 0.001$).

Figure 95. Net reach of all TVCs (15–25 year-olds and parents)

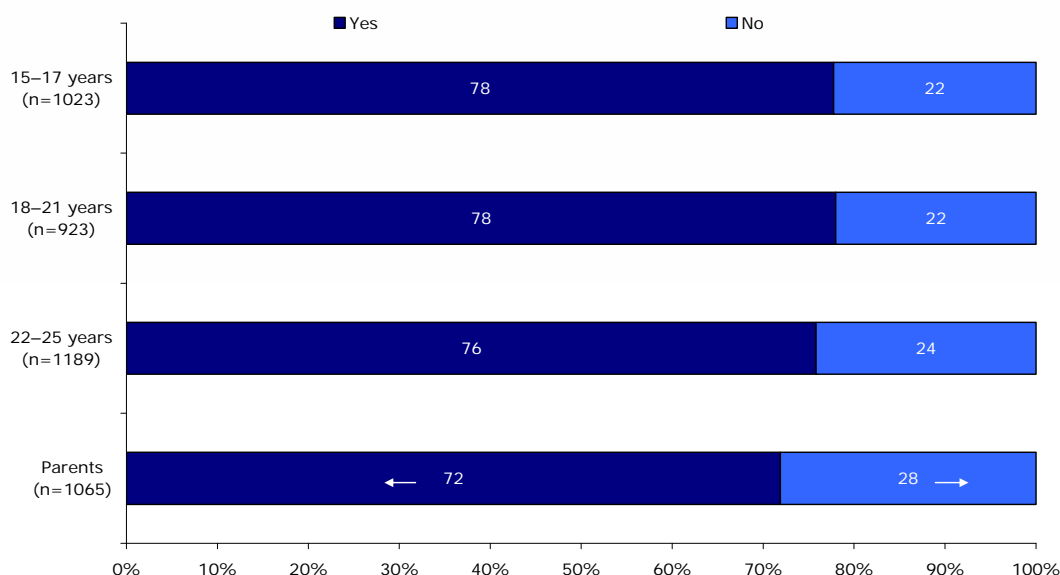


Figure 95 shows the net reach of the two campaign television advertisements. Around three quarters of 15–17 year-olds (78%), 18–21 year-olds (78%), 22–25 year-olds (76%) and parents (72%) saw at least one of the two creative executions.

As the secondary target audience, parents of 13–17 year-olds were significantly less likely than others to have seen either of the advertisements (chi-square, $p < 0.001$).

Radio advertisements

The National Binge Drinking Campaign featured two different radio advertisements, titled 'Arrest' and 'Emergency Room' for the purposes of this research. During the survey, 15–25 year-olds and parents of 13–17 year-olds listened to each of the executions in full and were asked to indicate whether or not they had previously heard the advertisement. If respondents were unable to hear the radio advertisements on their computer they were shown the following descriptions:

'Arrest'

A policeman is talking to a clearly drunk young man.

Policeman: "The Paramedics have just informed me that your mate Simon hasn't made it"

Young man: "[Drunken mumbling...] this can't be happening"

Policeman: "You're clearly under the influence of alcohol and you are going to have to come with me to the police station"

Young man: "What! Why?"

Policeman: "Because you are under arrest mate and I need you to listen to me very carefully"

Young man: "But it was an accident, we just had a few drinks, I didn't think I punched him that hard"

Policeman: "You don't have to say or do anything but I will..." (fades)

Voice over: **"Four Australians aged between 18–25 die due to alcohol related injuries in an average week. Don't turn a night out into a nightmare."**

'Emergency room'

A ring tone is heard through a telephone, and a middle-aged mother answers. The dialler is a clearly distressed young man.

Mother: "Hello?"

Young man: "Mrs Parker, it's Jack."

Mother: "Jack? Do you know what time it is?"

Young man: "Leo and me... we're at the hospital."

Mother: "Hospital? What do you mean?"

Young man: "We were just having a few drinks and..."

Mother: "What do you mean having a few drinks?"

Young man: "Doctor says you'd better come in."

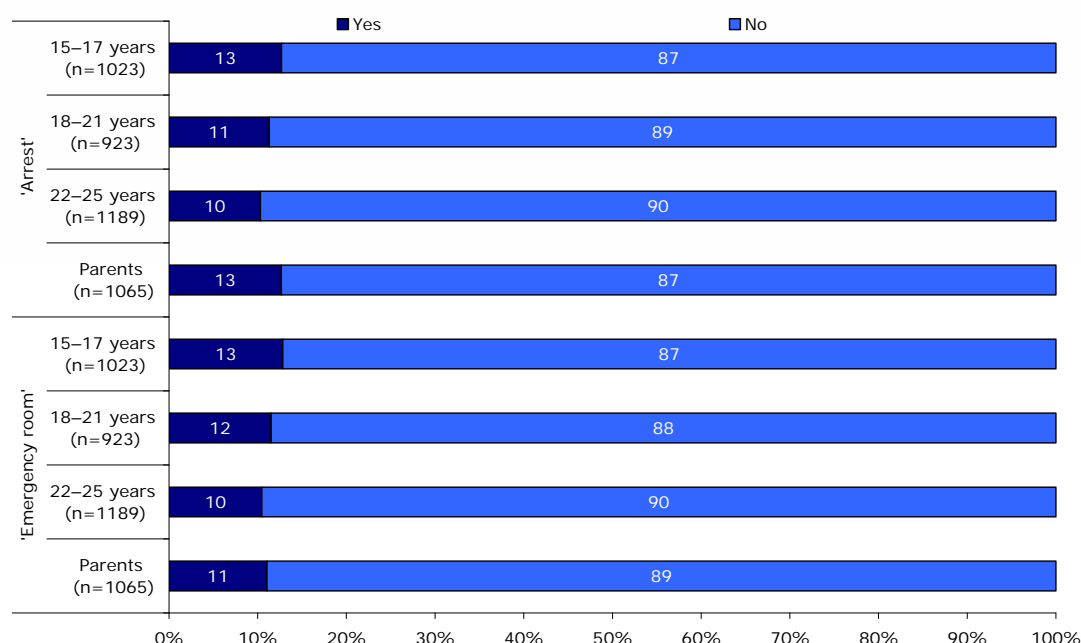
Mother: "Jack, what's happened to Leo?"

Young man: "Please just hurry."

Voice Over: **"Seventy Australians aged under 25 will be hospitalised due to alcohol caused assault in an average week, don't turn a night out into a nightmare."**

Figure 96 (overleaf) shows the proportions of 15–25 year-olds and parents recalling having heard the 'Arrest' and the 'Emergency Room' radio advertisements.

Figure 96. Reach of 'Arrest' and 'Emergency room' radio ads (15–25 year-olds and parents)



As shown in Figure 96, a minority of 15–25 year-olds had heard the 'Arrest' radio advertisement, with around one in ten recalling this execution (13% of 15–17 year-olds 12% of 18–21 year-olds and 10% of 22–25 year-olds). Similar proportions had heard the 'Emergency Room' radio advertisement (13% of 15–17 year-olds, 12% of 18–21 year-olds and 10% of 22–25 year-olds).

The reach of each of the radio advertisements among the secondary target audience mirrored that of the primary target audience, with 13% of parents of 13–15 year-olds recalling the 'Arrest' execution and 11% recalling the 'Emergency room' execution.

Figure 97. Net reach of all radio ads (15–25 year-olds and parents)

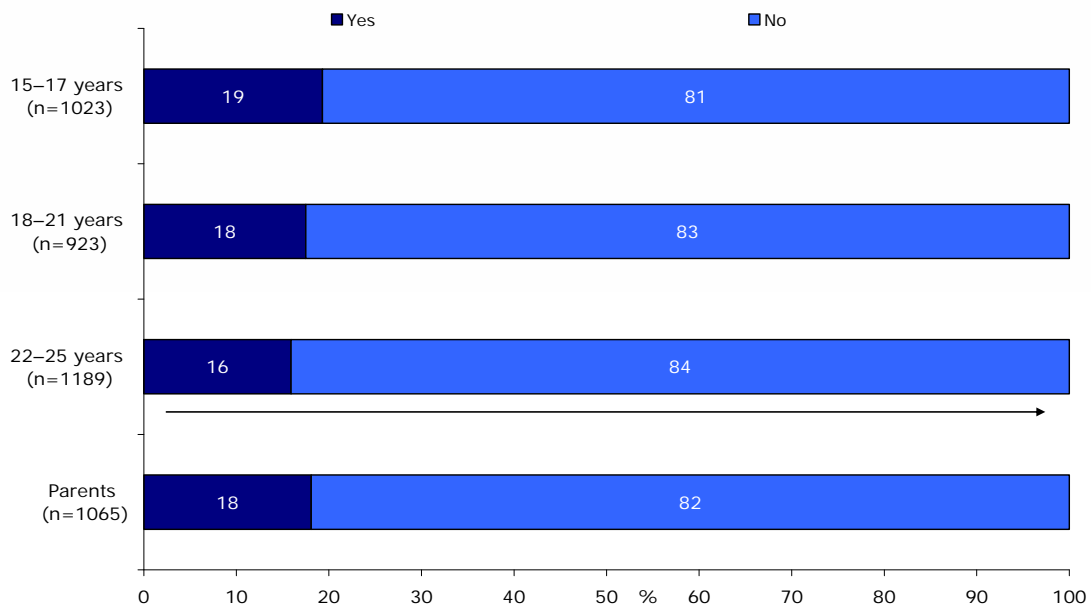


Figure 97 shows the net reach of the two radio advertisements. Around one in five 15–17 year-olds (19%) and 18–21 year-olds (18%), and one in six 22–25 year-olds (16%) recalled hearing either of the radio advertisements. Among 15–25 year-olds, the likelihood of having heard either of the radio advertisements decreased significantly with age (Kendall's tau-b, $p < 0.001$).

Among the secondary target audience, the net reach of the radio advertisements was similar to that of the primary audience, with close to one in five parents of 13–17 year-olds (18%) recalling either of the two executions.

Print advertisements

The National Binge Drinking Campaign features four print executions, designated 'Pedestrian accident', 'Party bushes', 'Pub fight' and 'Coffee table' for the purposes of this research.

- **'Pedestrian accident'** features an image of three young males drinking alcohol above a second image of one of the three males after having been hit by a car. The two images are separated by the statistic, "four Australians under 25 die due to alcohol related injuries in an average week" (designed for maximum relevance to males and 15–17 year-olds).
- **'Party bushes'** features an image of a young male approaching a young female at a party where both are drinking alcohol above a second image of the couple being photographed in the bushes. The two images are separated by the statistic, "one in two Australians aged 15–17 who get drunk will do something they regret" (designed for maximum relevance to females and 15–17 year-olds).
- **'Pub fight'**, features an image of a happy couple drinking at a bar above a second image of the male exchanging blows with another male. The two images are separated by the statistic, "70 Australians under 25 will be hospitalised due to alcohol-caused assault in an average week" (designed for maximum relevance to males and 18–25 year-olds).
- **'Coffee table'**, features an image of a young woman drinking alcohol at a party above a second image of the woman injured after falling through a glass coffee table. The two images are separated by the statistic, "on average, 1 in 4 hospitalisations of people aged 15–24 happen because of alcohol" (designed for maximum relevance to females and 18–25 year-olds).

The four executions are shown in their vertical and horizontal formats in

Figure 98, overleaf.

Figure 98. Print advertisement executions (vertical and horizontal)



Young people aged 15–25 years and parents of 13–17 year-olds were shown each of the print executions and asked to indicate which of the four they had seen previously.

Figure 99 (overleaf) displays the proportions recalling having seen the 'Pedestrian accident', 'Party bushes', 'Coffee table' and 'Pub fight' print advertisements, ordered from most to least frequently recalled.

Figure 99. Reach of print ads (15–25 year-olds and parents)

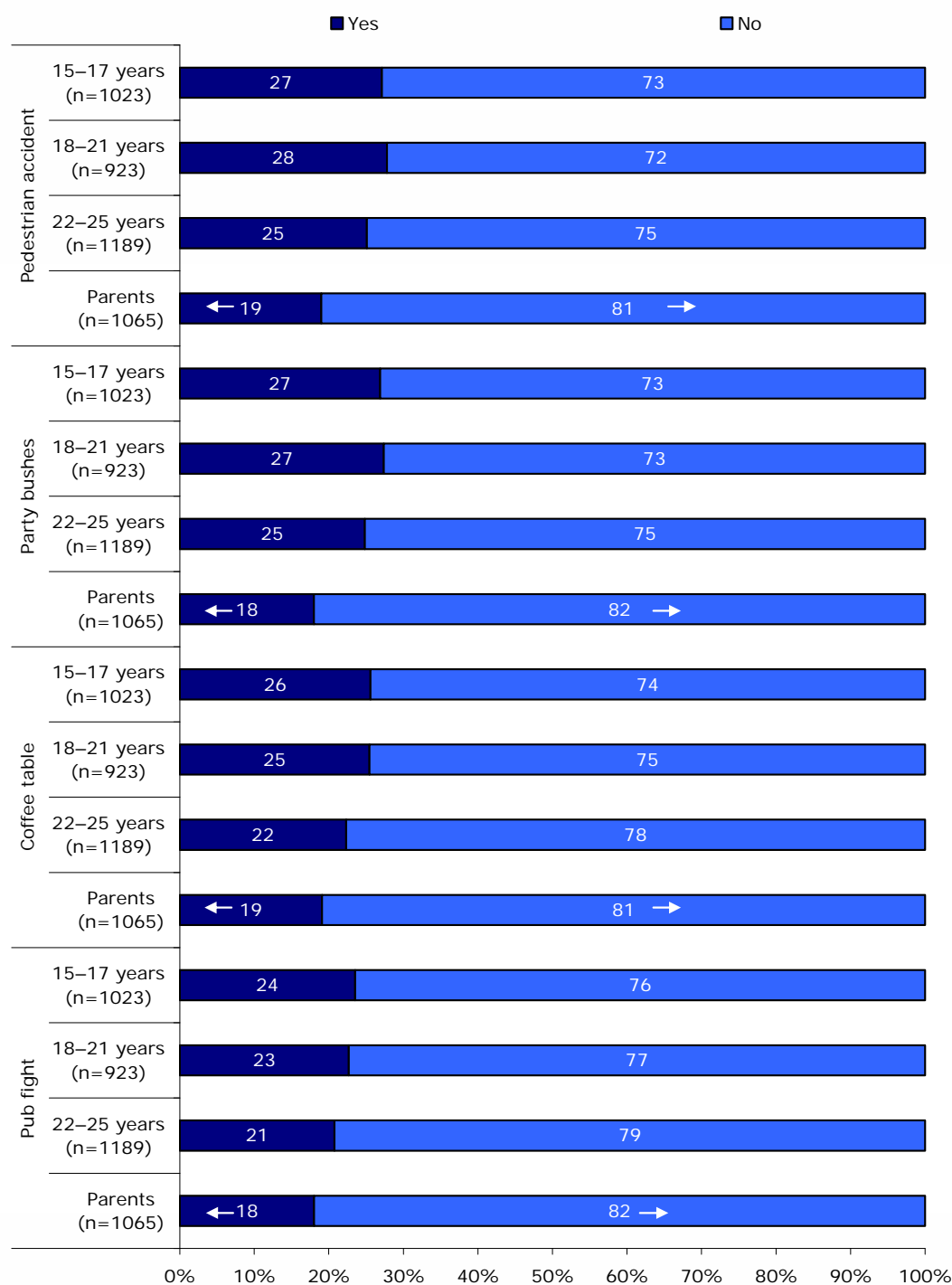


Figure 99 shows that around one quarter of 15–17 year-olds (27%), 18–21 year-olds (28%), and 22–25 year-olds (25%) recalled the 'Pedestrian accident' execution. Similar proportions recalled the 'Party bushes' execution, which was seen by 27% of 15–17 year-olds, 27% of

22–25 year-olds, and 25% of 22–25 year-olds. One quarter of 15–17 year-olds (26%), 18–21 year-olds (25%) and more than one fifth of 22–25 year-olds (22%) recalled seeing the 'Coffee table' print advertisement and similar proportions of 15–17 year-olds (24%), 18–21 year-olds (23%), 22–25 year-olds (21%) recalled seeing the 'Pub fight' execution.

As the secondary target audience, parents of 13–17 year-olds were less likely than 15–25 year-olds to recall having seen each of the print advertisements (chi-square, $p=0.001$). Close to one fifth of parents recalled each execution (19% recalled the 'Pedestrian accident' and 'Coffee table' advertisements and 18% recalled the 'Party bushes' and 'Pub fight' advertisements).

Young people aged 15–25 years and parents of 13–17 year-olds who recalled seeing any of the print advertisements were asked to indicate the locations in which each one had been seen. Figure 100 to Figure 103 (below, and pages 139 to 141) show the results of this question for each print execution.

Figure 100. 'Pedestrian accident' print ad channel (15–25 year-olds and parents)

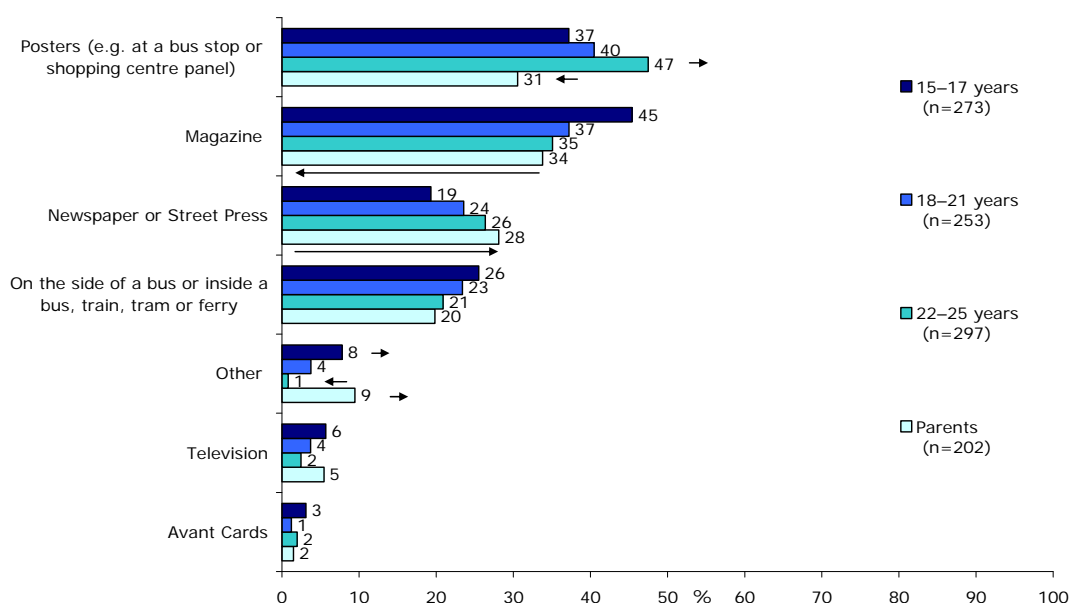


Figure 100 shows the places where 15–25 year-olds and parents reported seeing the print advertisement the 'Pedestrian accident'. Posters (for example at a bus stop or shopping centre) and magazines were the locations in which youth and parents recalled seeing the 'Pedestrian accident' advertisement most commonly. Approximately one-third to one-half of 15–17 year-olds (37%), 18–21 year-olds (40%), 22–25 year-olds (47%) and parents (31%) had seen this advertisement in poster form and a similar range (45%, 37%, 35% and 34%, respectively) had seen it in a magazine.

Poster advertisements of the 'Pedestrian accident' execution were significantly more likely to have been seen by 22–25 year-olds (47%) and less likely to have been seen by parents (31%, chi-square, $p=0.002$) than others. This execution was more likely to be seen in magazines by younger participants than older ones (from 45% of 15–17 year-olds to 34% of parents, Kendall's tau-b, $p=0.005$), and in newspapers or street press by older participants more frequently than younger ones (from 19% of 15–17 year-olds to 28% of parents, Kendall's tau-b, $p=0.015$).

A small proportion of 15–25 year-olds and parents (6% of 15–17 year-olds, 4% of 18–21 year-olds, 2% of 22–25 year-olds and 5% of parents) indicated having seen the 'Pedestrian accident' print advertisement, but when asked where they had seen this, indicated that they were actually recalling the TVC version of the advertisement. A similar result occurred for each of the print executions shown to participants, with small proportions actually recalling the TVC, rather than print, version of these advertisements.

Figure 101. 'Party Buses' print ad channel (15–25 year-olds and parents)

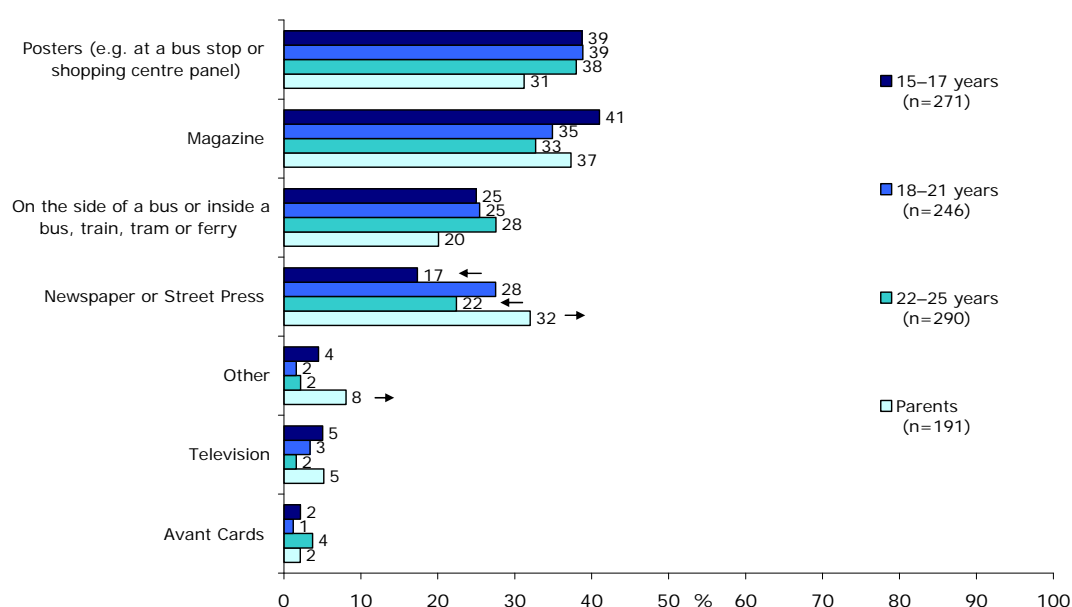


Figure 101 shows the places in which the 'Party bushes' print advertisement was seen. As for the 'Pedestrian accident' execution, 'Party bushes' was most commonly seen in poster form and in magazines. Between 31% and 39% of those who had seen this execution saw it as a poster and between 33% and 41% saw it in a magazine.

Parents were significantly more likely than others to have seen the 'Party bushes' print advertisement in newspapers or street press (32%), while 15–17 year-olds (17%) and 22–25 year-olds (22%) were less likely to have done so (chi-square, $p=0.003$).

Figure 102. 'Pub Fight' print ad channel (15–25 year-olds and parents)

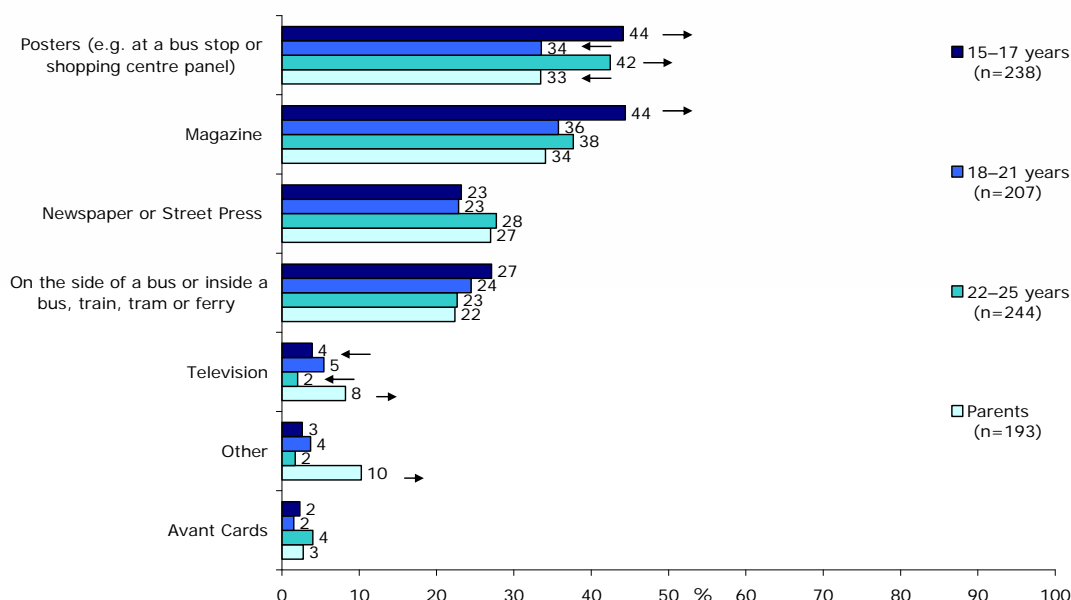


Figure 102 shows the places in which the 'Pub fight' print advertisement was seen. As for the other print executions, posters and magazines were the most common locations in which the print advertisement was viewed, with between 33% and 44% viewing it as a poster and between 34% and 44% viewing it in a magazine.

Posters of the 'Pub fight' execution were significantly more likely to have been seen by 15–17 year-olds (44%) and 22–25 year-olds (42%), and less likely to have been seen by 18–21 year-olds (34%) and parents (33%, chi-square, $p=0.039$).

Young people aged 15–17 years were more likely than those of other age groups to have seen the 'Pub fight' print advertisement in a magazine (chi-square, $p=0.039$).

Parents were significantly more likely than 15–17 year-olds (4%) and 22–25 year-olds (2%) to have actually recalled seeing the TVC when prompted with this print advertisement (8%) (chi-square, $p=0.019$).

Figure 103. 'Coffee table' print ad channel (15–25 year-olds and parents)

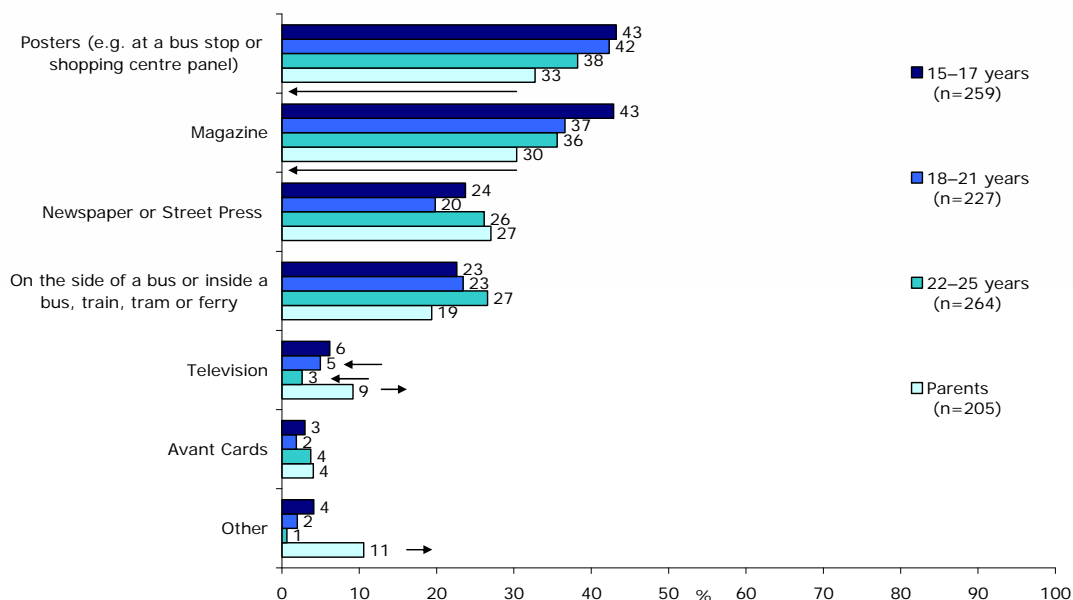
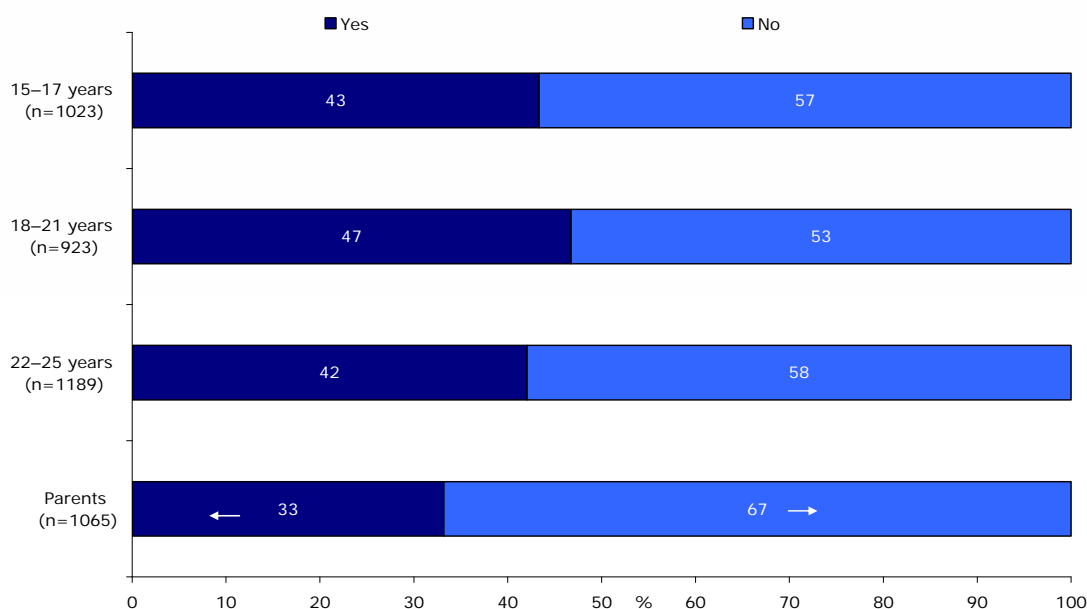


Figure 103 shows the places in which the 'Coffee table' print advertisement was most commonly seen. As for the other print executions, posters and magazines were the most common locations in which the print advertisement was viewed, with between 33% and 43% of those that had seen the advertisement viewing it as a poster and between 30% and 43% viewing it in a magazine.

Among those who viewed this print advertisement, the likelihood of having seen it in poster form and in magazines decreased significantly with age (Kendall's tau-b, $p=0.021$, for posters and Kendall's tau-b, $p=0.009$, for magazines).

Parents (9%) were significantly more likely than 18–21 year-olds (5%) and 22–25 year-olds (3%) to have actually recalled seeing the TVC when prompted with this print advertisement (chi-square, $p=0.017$).

Figure 104. Net reach of print ads (15–25 year-olds and parents)



The net reach of print advertisements is shown in Figure 104. Between four and five in ten 15–17 year-olds (43%), 18–21 year-olds (47%) and 22–25 year-olds (42%) recalled seeing at least one of the campaign print executions.

Despite being a secondary audience for the campaign, one third of parents of 13–17 year-olds (33%) recalled seeing at least one of the print executions. As would be expected, net reach was significantly lower among parents than among 15–25 year-olds (chi-square, $p=0.004$).

Online banner advertisements

The National Binge Drinking Campaign features two online banner advertisements, both featuring a moving image of a beer glass being raised as if to the viewer's mouth, coupled with one of two statistics:

- “One in two Australians aged 15–17 who get drunk will do something they regret.” (for relevance to 15–17 year-olds)
- “Four Australians under 25 die due to alcohol related injuries in an average week.” (for relevance to 15–25 year-olds)

Both advertisements were displayed on websites in either a square or a horizontal format.

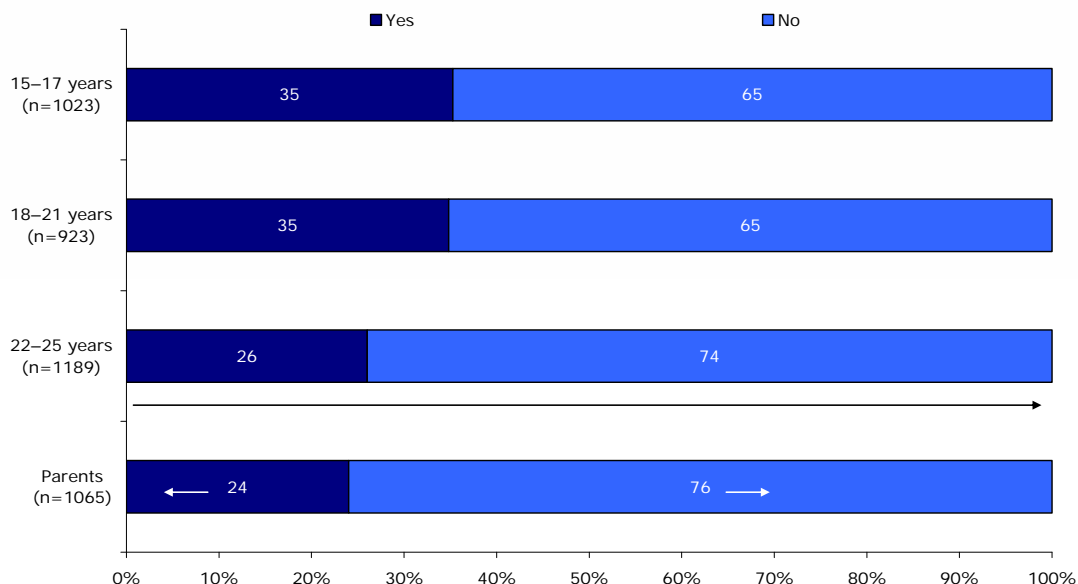
Figure 105 (overleaf) displays the stills from the two online banner ads in their vertical and horizontal formats.

Figure 105. Online banner stills (horizontal and square)



Parents and 15–25 year-olds were randomly shown either the square or horizontal version of the '15–17 year-old' advertisement and the opposite version of the 'under 25' banner ad, and asked whether they had seen either of the online advertisements. Figure 106 (overleaf) shows the reach of the online banners.

Figure 106. Reach of online banner ads (15–25 year-olds and parents)



As shown in Figure 106, approximately one quarter to one third of 15–17 year-olds (35%), 18–21 year-olds (35%) and 22–25 year-olds (26%) recalled seeing either of the online banner advertisements. Recall of the banner advertisements decreased significantly with age among 15–25 year-olds (Kendall's tau-b, $p=0.003$).

One quarter of parents of 13–17 year-olds (24%) recalled seeing either of the online banner ads. As the secondary target audience, parents were less likely to have seen the online banner ads than 15–17 year-olds and 18–21 year-olds (chi-square, $p<0.001$).

Parents' Brochure

A tri-fold, six panel information brochure for parents also forms part of the National Binge Drinking Campaign. The brochure is shown in Figure 107, overleaf.



Alcohol and young people: A guide for parents

On average, 1 in 6 teenagers aged 15 to 19 have had at least one drink in the last 12 months.

How many teenagers are drinking?

Alcohol consumption amongst teenagers is a concern. According to the 2007 National Drug Strategy Household Survey, more than 1 in 6 young people consume alcohol on a weekly basis.

How much are teenagers drinking?

Amongst teenagers drinking, 80% of males aged 15 to 19 had consumed alcohol in the last 12 months, and 60% of females in the same age group had consumed the same amount in the last 12 months. (The 2007 Australian Secondary Students' Alcohol and Drug Survey)

How harmful is it?

Alcohol is a potent drug that depresses the central nervous system and changes the way people think and feel. Teenagers can be more vulnerable to the effects of alcohol because they have not built up physical tolerance. They also lack drinking experience and are less able to judge their own levels of intoxication. Most young people are smaller than adults and so alcohol can have a greater effect on them.



There is some new evidence that drinking more and earlier may be more vulnerable to the negative effects of alcohol. The earlier a young person begins consuming alcohol, the greater the risk of alcohol-related problems in later life.

A recent study has found approximately 80% of 15 to 19 year olds drink at levels that risk harm to the adult brain. (The 2007 National Drug Strategy Household Survey)

The consequences of intoxication can include:

Alcohol-related harms experienced by teenagers in the short term are significant. The most common alcohol-attributable causes of death and hospitalisation among teenagers include road injury, suicide, assault, poisoning, road injury and other accidents such as falls and drowning.

What can I do?

As a parent, you play an important role in educating your teenager about alcohol and helping them to develop a responsible attitude towards drinking. It's never too early to start talking to your children about the effects of alcohol, and this helps to keep the focus of conversation open from the start.



What about peer pressure—how do I deal with that?

Alcoholism is a form of brain damage for young people, which can cause them to feel vulnerable.

You can help your teenager to develop confidence in dealing with things by being present. A good way to begin might be to role play some typical scenarios, so you can:

- Help your teenager to say 'no' to alcohol when they do not want to drink.
- Show the importance of never getting into a car with a driver who has been drinking. Agree on a plan if this situation ever arises, which may include paying for a taxi when they get home, picking them up, or allowing them to stay overnight at a friend's place if that is not possible.
- Talk about the dangers of drink driving and how they can protect themselves.
- Discuss what to do if a friend is intoxicated.

What can I do if my teenager is planning a party?

- Be involved in the planning—discuss the ground rules before the party is over.
- Agree on whether alcohol will be allowed.
- If alcohol is to be allowed, ensure you provide low alcohol and non-alcoholic alternatives, as well as plenty of food.
- Make sure there is some type of adult supervision.
- Explain that excessive drinking will not be tolerated and agree on a plan for dealing with someone who is drunk or sick.
- Invited guests (guests of honour) are a growing problem. Check and track any plans to bring your child or child away from your home to ensure they are safe.
- Plan how guests will get home.
- Talk to their parents about their teenager's plan for advice.

How do I talk to my teenager about alcohol?

Young people are generally most concerned about the short-term social consequences of drinking too much (embarrassment, doing something they wouldn't do alone) rather than the long-term health impacts.

- Choose an appropriate time and place to talk.
- Bring the topic up informally—perhaps after watching a TV show, a news item or a movie that acts as a conversation starter.
- Be open and honest and encourage your teenager to express their feelings, thoughts and opinions.
- Be clear about the rules and ensure your teenager knows that under-age drinking is against the law in most circumstances. Research shows that teenagers expect and want their parents to set boundaries, even if they do disagree them occasionally.
- Build your beliefs—young people are more likely to be persuaded by listening to a realistic presentation of the facts.
- Talk to your teenager about your concerns so they understand the potential consequences of drinking.

What if my teenager comes home drunk?

Although you might want to talk to them about it immediately, especially if you're upset or angry, wait until they're sober so you can have a rational discussion. At that time, reinforce the rules that have been broken, your disappointment and the consequences.

Your drinking, their drinking

From an early age, your child will be aware of alcohol drinks and patterns of drinking in your home. Let them observe you modelling sensible drinking habits, such as:

- Sometimes refusing to drink when offered.
- Not being using alcohol to celebrate occasions or 'cheering'.
- Not drinking to relaxation.
- Not drinking and driving.

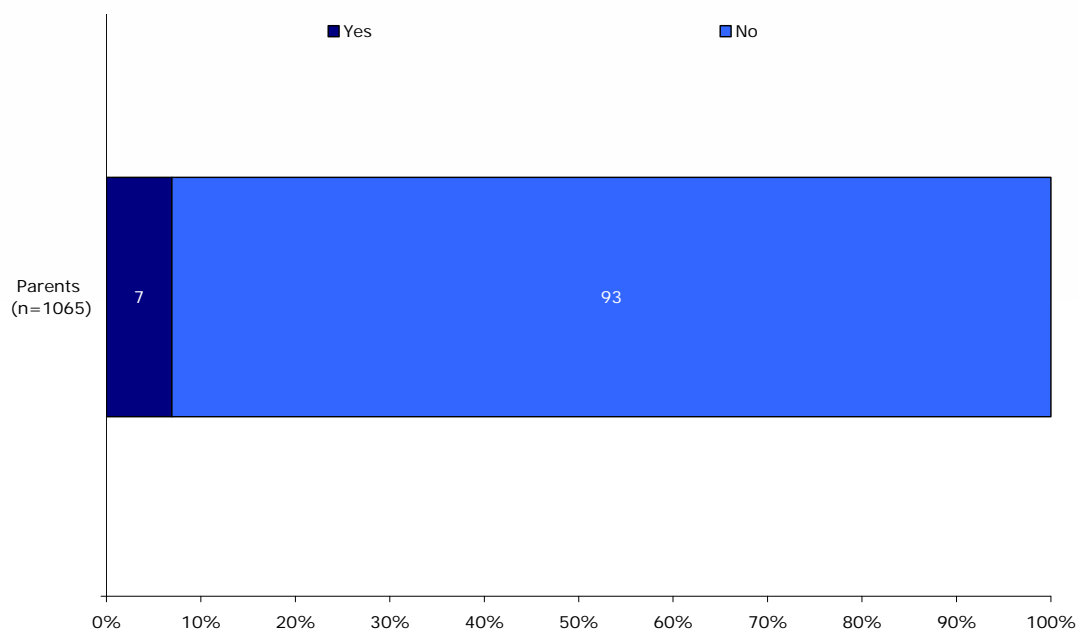
DON'T TURN A NIGHT OUT INTO A NIGHT MARE



Australian Government

For more information go to www.austlii.gov.au/drinkingnightmare

Figure 108. Reach of parents' brochure



As shown in Figure 108, fewer than one in ten parents (7%) recalled having seen the information brochure.

Figure 109, below, shows the net reach for the campaign as a whole, including TV, radio, print and online advertisement executions and the information brochure.

Figure 109. Net reach of all campaign elements (15–25 year-olds and parents)

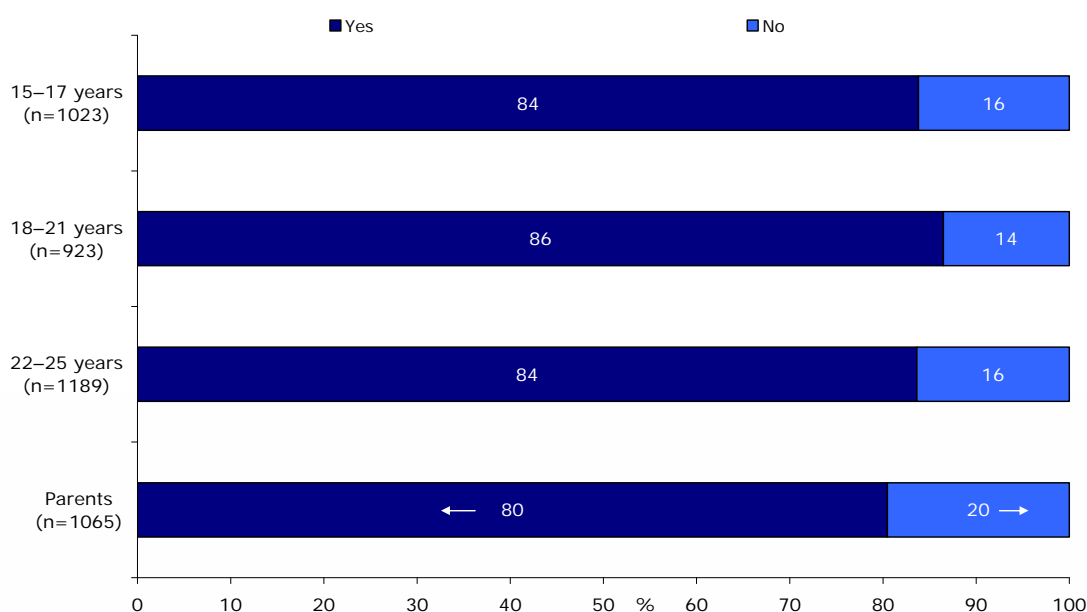


Figure 109 (previous page) illustrates that more than eight in ten 15–25 year-olds recalled seeing, hearing or reading at least one campaign advertisement (84% of 15–17 year-olds, 86% of 18–21 year-olds, 84% of 22–25 year-olds).

As the secondary target audience, parents of 13–17 year-olds were significantly less likely than 15–25 year-olds to have seen any element of the campaign (chi-square, $p=0.004$). However, campaign reach among this audience was still very high, with eight in ten parents (80%) recalling at least one element of the campaign.

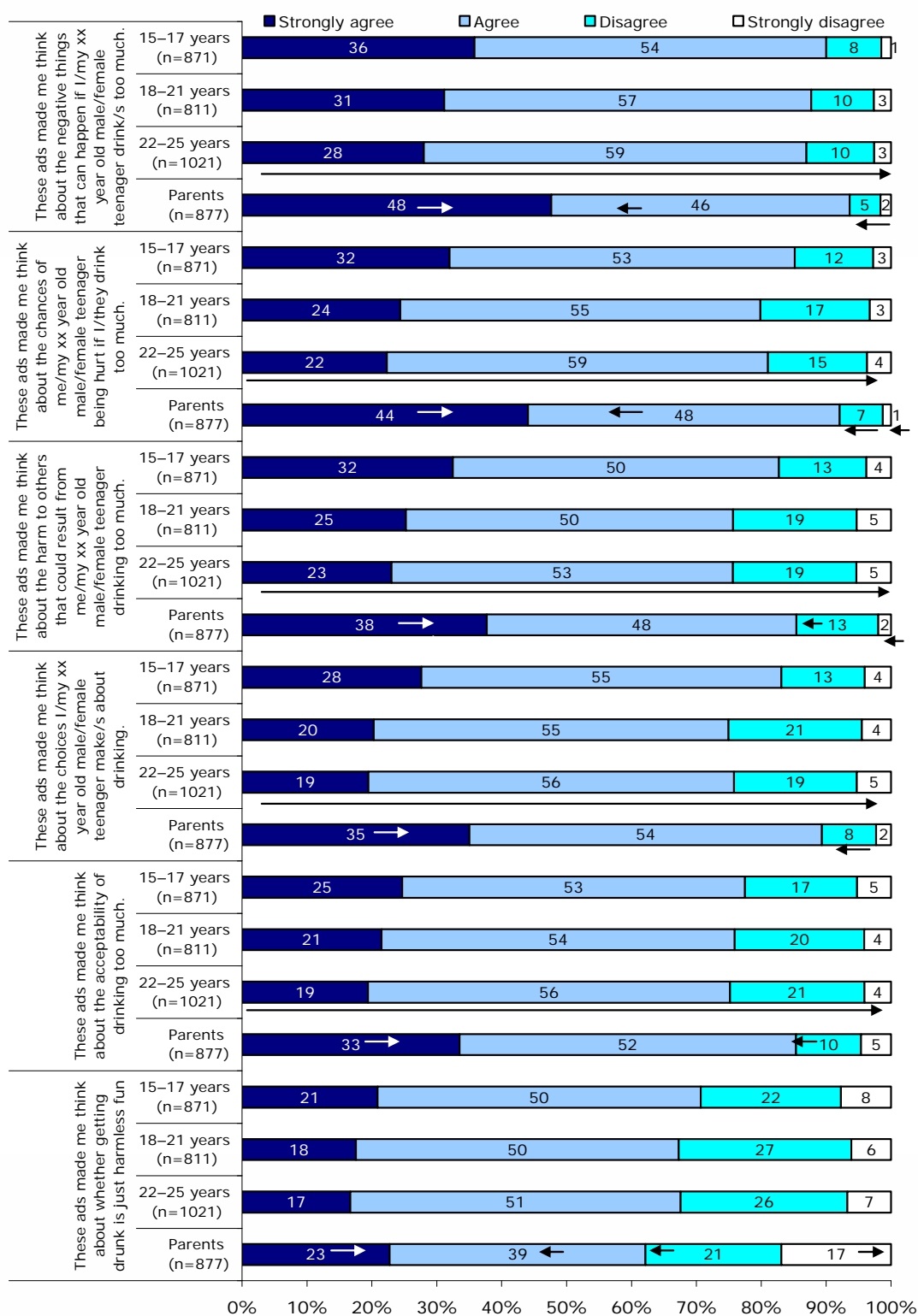
7.3 Reported campaign impact

After being shown each of the campaign elements, 15–25 year-olds and parents of 13–17 year-olds who recalled any of the advertisements were presented with a battery of statements regarding the impact of the campaign as a whole on their attitudes and asked to rate their level of agreement.

Six attitude statements were asked of 15–25 year-olds and parents of 13–17 year-olds, and responses to these are charted in Figure 110 (overleaf), ordered according to overall level of agreement (from most to least). The wording of these statements differed slightly between the parent and youth surveys, as some questions asked parents to think about their child's drinking while others asked parents to contemplate their own intentions.

One additional attitude statement was presented only to 15–25 year-olds; responses to this statement are shown in Figure 111 (page 150).

Figure 110. Whole of campaign impact on attitudes (15–25 year-olds and parents)



As shown in Figure 110 (previous page), the majority of 15–25 year-olds who recalled seeing any of the campaign advertisements agreed that these made them think about the negative things that can happen if they drink too much, with around nine in ten agreeing or strongly agreeing (90% of 15–17 year-olds, 88% of 18–21 year-olds and 87% of 22–25 year-olds).

Around eight in ten 15–25 year-olds who recalled seeing any of the campaign advertisements agreed that these made them think about the chances of being hurt if they drink too much, with 85% of 15–17 year-olds, 79% of 18–21 year-olds and 82% of 22–25 year-olds agreeing or strongly agreeing with this statement.

Four fifths of 15–17 year-olds (82%), and three quarters of 18–21 year-olds (75%) and 22–25 year-olds (76%) who saw any of the campaign advertisements agreed or strongly agreed that the campaign made them think about the harm to others that could result if they drank too much. Similar proportions agreed or strongly agreed that the advertisements made them think about the choices they make about drinking (83% of 15–17 year-olds, 75% of 18–21 year-olds and 75% of 22–25 year-olds).

Three quarters of 15–25 year-olds who recalled seeing any of the campaign advertisements agreed that these made them think about the acceptability of drinking too much, with 78% of 15–17 year-olds, 75% of 18–21 year-olds and 75% of 22–25 year-olds agreeing or strongly agreeing with this statement.

Around seven in ten 15–17 year-olds (71%), 18–21 year-olds (68%) and 22–25 year-olds (68%) who recalled seeing any of the campaign elements agreed or strongly agreed that the advertisements made them think about whether getting drunk was mostly harmless fun.

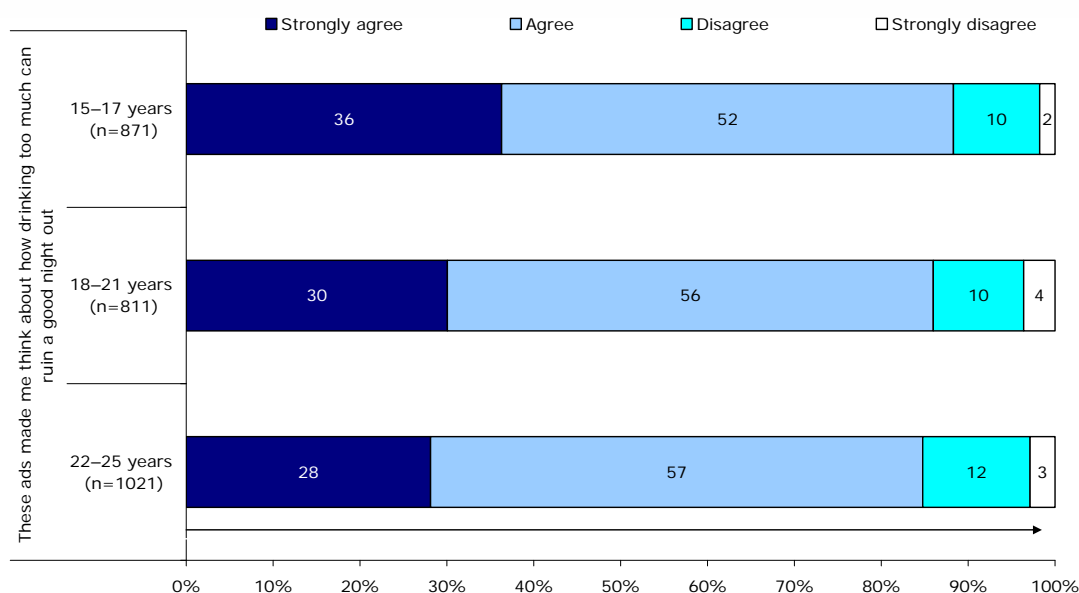
Among 15–25 year-olds, agreement with all statements was inversely related to age such that there was a tendency towards disagreement as age increased (Kendall's tau-b, $p < 0.001$, for both statements).

Among the secondary target audience, agreement with attitude statements was high. More than nine in ten parents of 13–17 year-olds who encountered any of the campaign advertisements agreed or strongly agreed that these ads made them think about the negative things that can happen to their child (94%) and about the chances of their child being hurt (92%) if their child drinks too much. Between eight and nine in ten agreed or strongly agreed that the ads made them think about the harm to others that could result if their child drinks too much (86%) the choices their child makes about drinking (89%) and about the acceptability of drinking too much (85%). Around six in ten parents who saw any of the campaign elements agreed or strongly agreed that the campaign made them think about whether getting drunk is mostly harmless fun (62%).

Parents were significantly more likely than 15–25 year-olds to strongly agree with each of the attitude statements (chi-square, $p < 0.001$).

Young people aged 15–25 years who recalled seeing any of the campaign elements were asked whether or not they agree that the campaign made them think about how drinking too much can ruin a good night out. Their responses are shown in Figure 111.

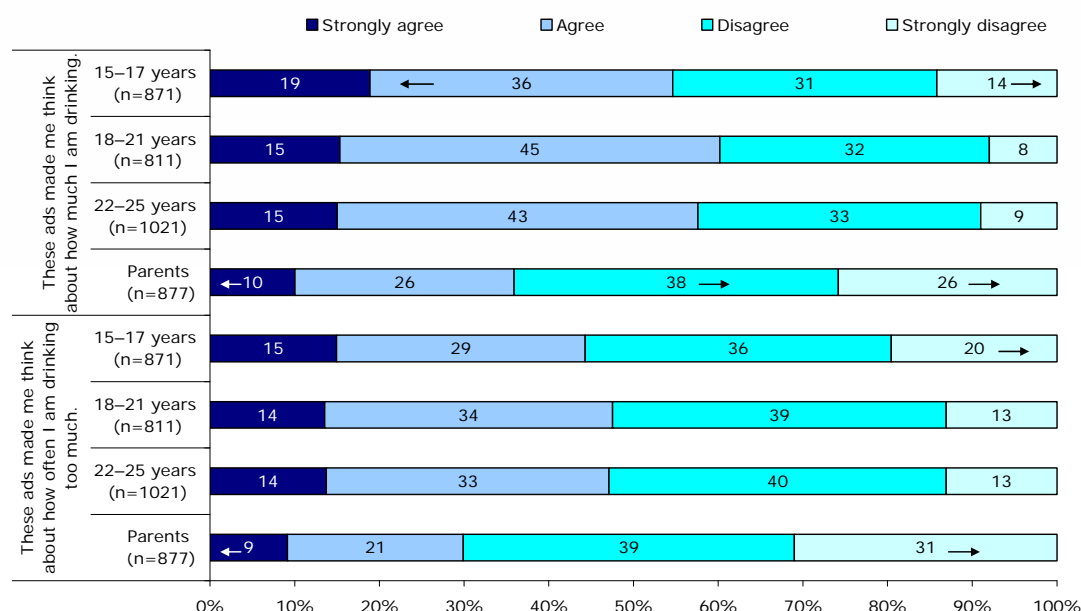
Figure 111. Whole of campaign impact on attitudes (15–25 year-olds)



As shown in Figure 111, the majority of 15–25 year-olds who saw any of the campaign advertisements agreed that the ads made them think about how drinking too much can ruin a good night out, with 89% of 15–17 year-olds, 86% of 18–25 year-olds and 85% of 22–25 year-olds agreeing or strongly agreeing. Agreement with this statement was inversely related to age, such that there was a tendency towards disagreement as age increased (Kendall's tau-b, $p < 0.001$).

Young people aged 15–25 years and parents of 13–15 year-olds who recalled seeing any of the campaign advertisements were asked to rate their level of agreement with two statements about the impact of the campaign on consideration of their current level of alcohol consumption. Responses to these statements are shown in Figure 112, overleaf.

Figure 112. Whole of campaign impact on consideration of own drinking (15–25 year-olds and parents)



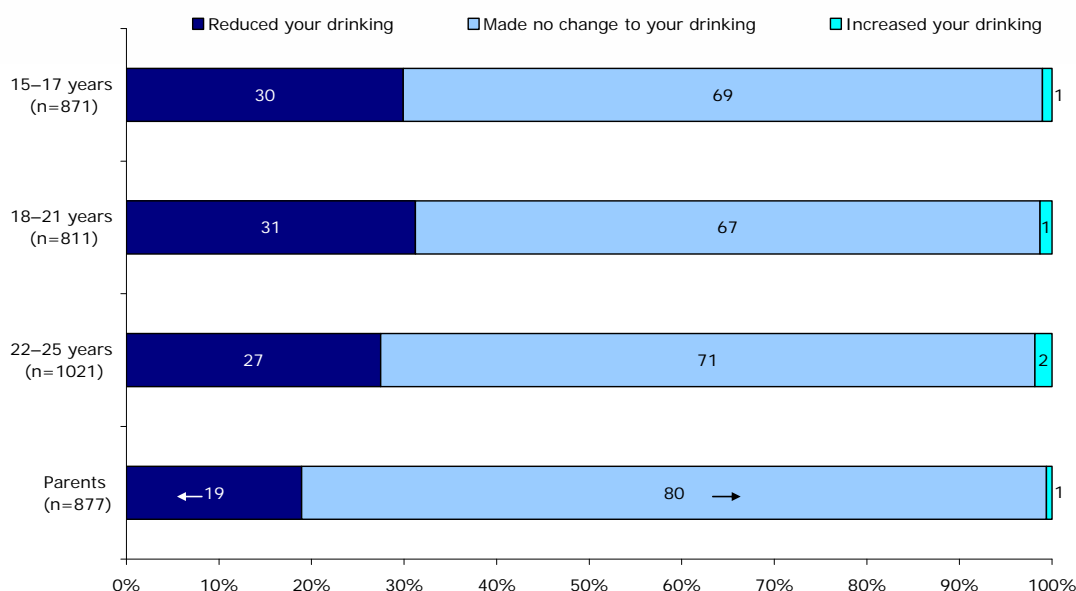
As Figure 112 shows, the campaign had an impact on 15–25 year-olds' consideration of their current drinking patterns, with between five and six in ten of those who recalled seeing any of the campaign advertisements agreeing that the ads made them think about how much they are drinking. Fifty-five percent (55%) of 15–17 year-olds, 60% of 18–21 year-olds, and 58% of 22–25 year-olds agreed or strongly agreed with this statement. Young people aged 15–17 years were significantly less likely to agree (36%, compared with 45% and 43%) and more likely to strongly disagree with this statement than 18–21 and 22–25 year-olds (14%, compared with 8% and 9%) (chi-square, $p < 0.001$).

Less than half of 15–17 year-olds (44%), 18–21 year-olds (48%), and 22–25 year-olds (47%) agreed or strongly agreed that the campaign advertisements made them think about how often they are drinking too much. Young people aged 15–17 years were significantly more likely to strongly disagree with this statement than 18–21 and 22–25 year-olds (20%, compared with 13% of 18–21 year-olds and 22–25 year-olds, chi-square, $p < 0.001$).

Among the secondary target audience of parents of 13–17 year-olds, more than one third of those who recalled any of the campaign elements (36%) agreed or strongly agreed that it made them think about how much they are drinking. This is an encouraging figure given the campaign does not target parental drinking. Furthermore, three in ten parents of 13–17 year-olds (30%) agreed or strongly agreed that the campaign advertisements made them think about how often they are drinking too much. Parents were significantly more likely to disagree with both of these statements than 15–25 year-olds (chi-square, $p < 0.001$).

Young people aged 15–25 years and parents of 13–17 year-olds who recalled seeing any of the campaign advertisements were asked to indicate what impact the campaign has had on their overall level of alcohol consumption. Responses to this question are shown in Figure 113, below.

Figure 113. Whole of campaign impact on consumption (15–25 year-olds and parents)



The campaign had a positive impact on one fifth to one third of 15–25 year-olds who saw any of the advertisements, with 30% of 15–17 year-olds, 31% of 18–21 year-olds and 27% of 22–25 year-olds indicating that exposure to the campaign reduced their drinking.

In addition, 19% of parents indicated that they reduced their drinking in response to the campaign. As the secondary target audience, parents were significantly less likely to have reported reducing their drinking and more likely to have made no change as a result of seeing any of the campaign advertisements than 15–25 year-olds (chi-square, $p < 0.001$).

Young people aged 15–25 years who recalled seeing any of the campaign advertisements were asked to indicate whether or not having seen the ads prompted them to discuss the negative consequences of drinking or strategies to avoid such consequences with their friends or with their parents. Responses to these questions are shown in Figure 114 (overleaf) and Figure 115 (page 154).

Figure 114. Whole of campaign impact on discussions with friends (15–25 year-olds)

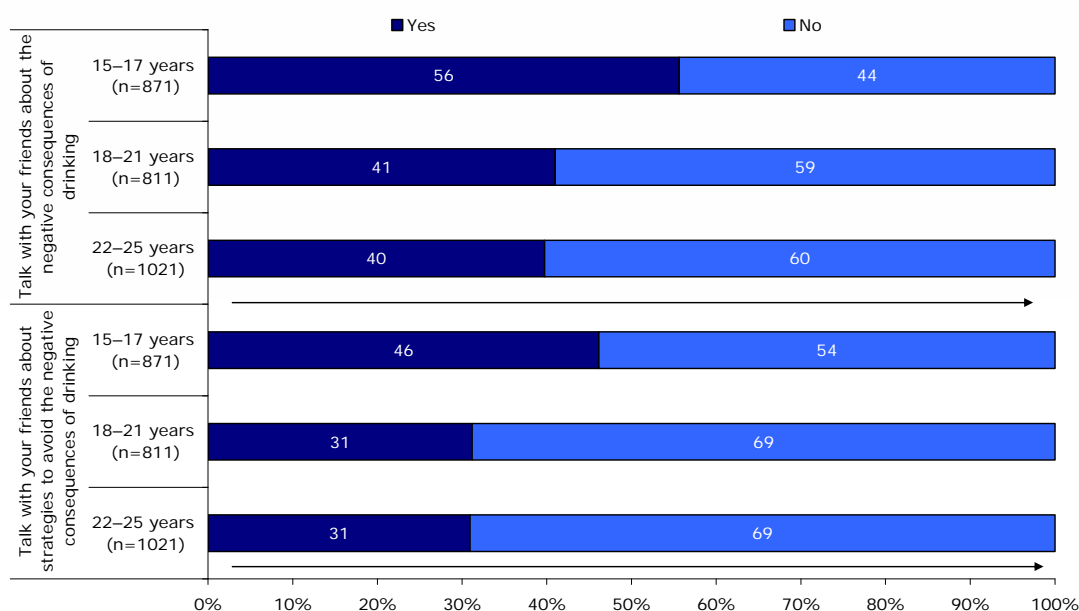


Figure 114 shows that the campaign advertisements had some impact on discussions with friends about the negative consequences of drinking and strategies to avoid such consequences. Over half of 15–17 year-olds (56%), and two in five 18–21 year-olds (41%) and 22–25 year-olds (40%), who had seen any of the campaign advertisements reported being prompted by these to talk with friends about negative consequences of drinking. The likelihood of having had such a discussion decreased significantly with age (Kendall's tau-b, $p < 0.001$).

Nearly half of 15–17 year-olds (46%) and nearly a third of 18–21 year-olds (31%) and 22–25 year-olds (31%) were prompted to discuss with their friends strategies to avoid negative consequences of drinking as a result of having seen campaign advertisements. The proportion having done so also decreased significantly with age (Kendall's tau-b, $p < 0.001$).

Figure 115. Whole of campaign impact on discussions with parents (15–25 year-olds)

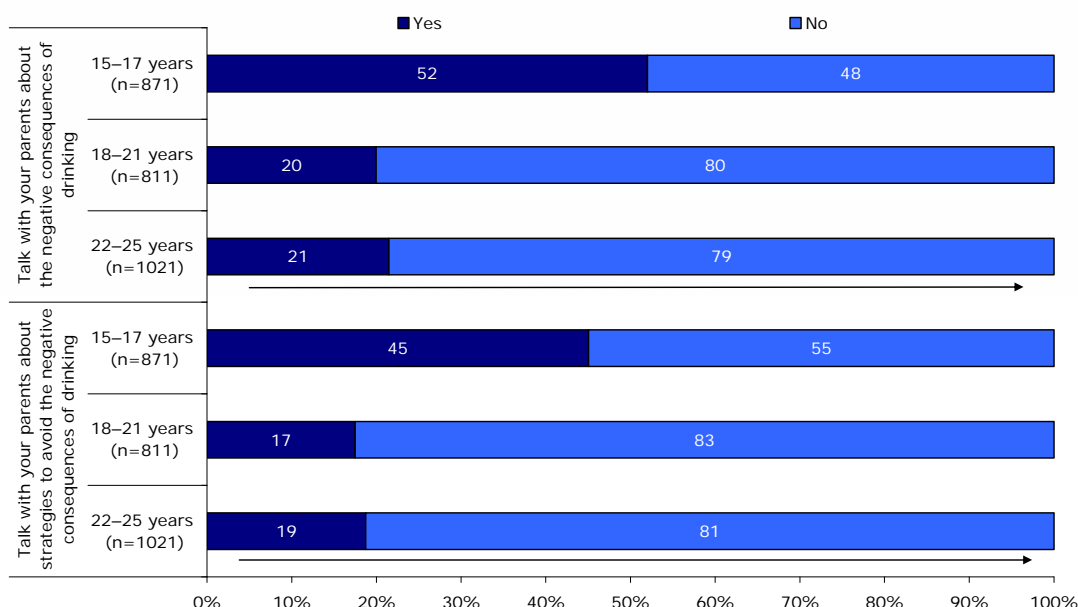


Figure 115 shows that the campaign had an impact, particularly among 15–17 year-olds, in prompting discussions with parents about the negative consequences of drinking and strategies to avoid these.

More than half of 15–17 year-olds (52%), and one in five 18–21 year-olds (20%) and 22–25 year-olds (21%) reported speaking with their parents about the negative consequences of drinking as a result of seeing the campaign advertisements. The likelihood of doing so decreased significantly with age (Kendall's tau-b, $p < 0.001$).

Slightly fewer 15–17 year-olds (45%), 18–21 year-olds (17%) and 22–25 year-olds (19%) who had seen campaign advertisements spoke with their parents about strategies to avoid the negative consequences of drinking, with the likelihood of having done so decreasing significantly with age (Kendall's tau-b, $p < 0.001$).

Parents of 13–17 year-olds who recalled any of the campaign elements were asked to indicate which, if any, of a range of ten behavioural impacts the campaign advertisements may have prompted. Responses are shown in Figure 116 (overleaf) and Figure 117 (page 156), ordered from most to least commonly undertaken.

Figure 116. Most common campaign impacts on behaviour (Parents)

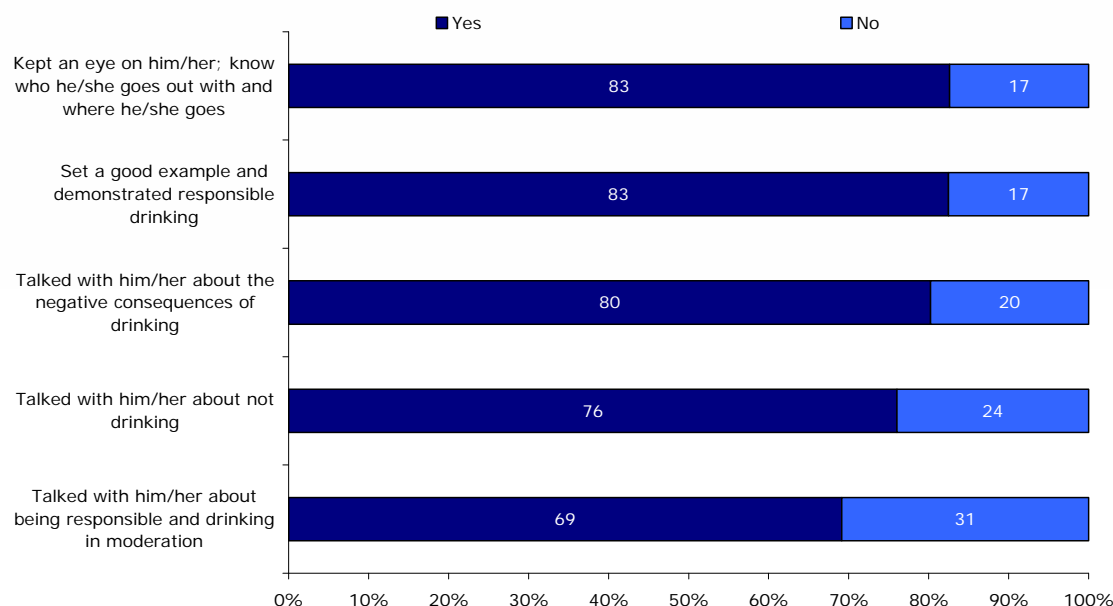


Figure 116 shows that the most common impact of the campaign on parents' behaviour was to prompt them to keep an eye on their child (to know who he or she goes out with and where he or she goes) and to set a good example by demonstrating responsible drinking, with more than four in five (83%) parents of 13–17 year-olds who had seen any of the advertisements indicating having done either of these. Four in five parents (80%) reported talking with their child about the negative consequences of drinking, three quarters (76%) talked with their child about not drinking and more than two thirds (69%) talked with their child about being responsible and drinking in moderation.

Figure 117. Less common campaign impacts on behaviour (Parents)

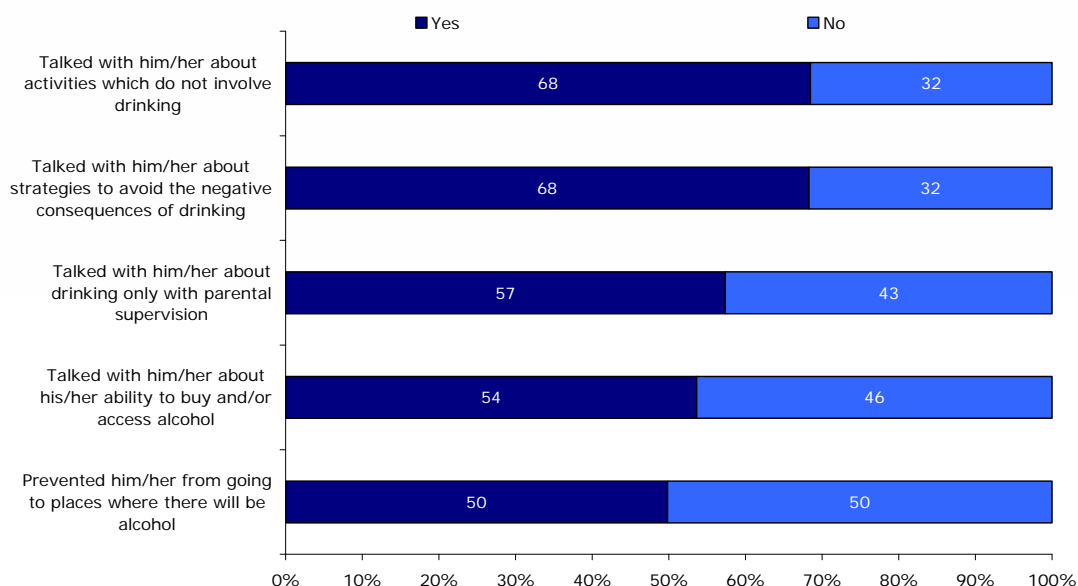
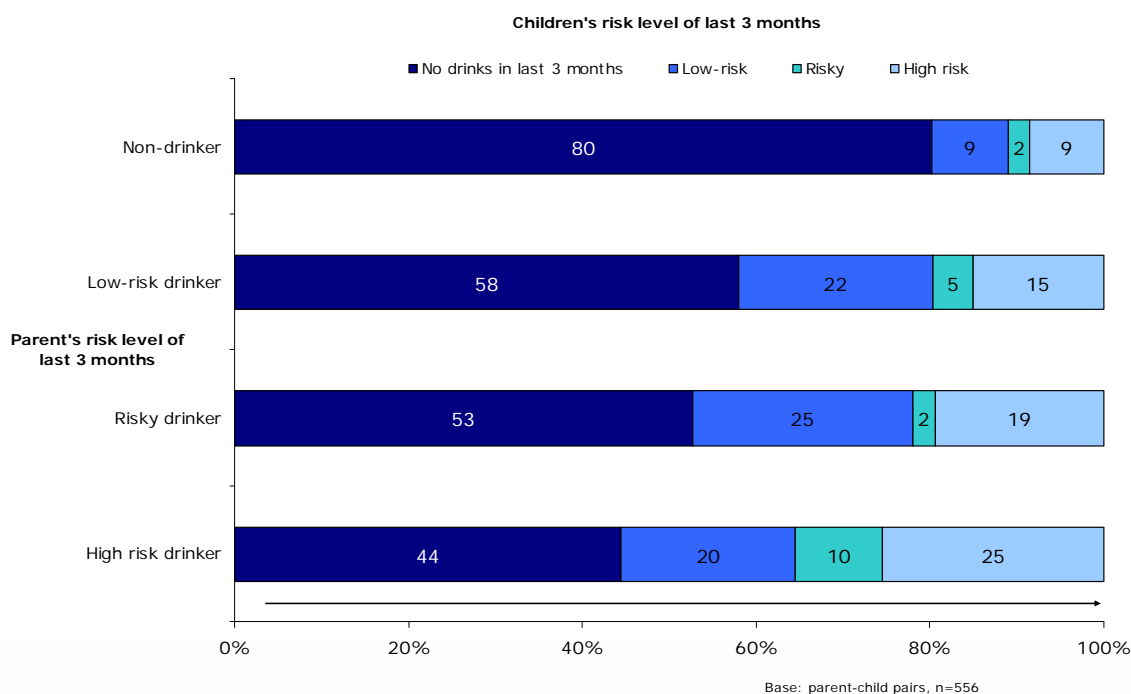


Figure 117 shows that more than two-thirds of parents of 13–17 year-olds (68%) who saw any of the campaign advertisements reported talking with their child about activities which do not involve drinking and strategies to avoid the negative consequences of drinking in response to the campaign. More than half of parents who saw campaign advertisements talked with their child about drinking only with parental supervision (57%) and about the child's ability to buy and/or access alcohol (54%). The least common response to the advertisements, to prevent one's child from going to places where there will be alcohol, was undertaken by half of parents (50%) who saw the campaign advertisements.

PARENT AND CHILD PAIRED ANALYSES

As described in the research methodology section, adults in the online sample who were known to have 15–17 year-old children were approached and encouraged to allow their children to participate in the survey. Across the November 2008 and April 2009 surveys, there were 556 households where both a parent and a 15–17 year-old child were interviewed, enabling some paired comparisons to be made. This section reports significant results between parents when compared with their own children.

Figure 118. Risk level of last three months' alcohol consumption (Paired parents and paired 15–17 year-olds)



The risk level of parents' drinking was compared with that of their own children (see Figure 118). Overall, as parent's risk level of drinking in the last three months increased, the risk level of their child's drinking in the last three months also increased (Kendall's tau-b, $p < 0.001$).

The ratings given by parents and their children regarding the child's likelihood of falling victim to a range of negative consequences should they drink too much alcohol were compared. A mean rating of likelihood (where a rating of 'very unlikely' was coded as 0, 'unlikely' was coded as 1, 'likely' was coded as 2 and a rating of 'very likely' was coded as 3) was computed for each paired parent and child on each consequence and the means compared using an ANOVA test.

The negative consequences compared were:

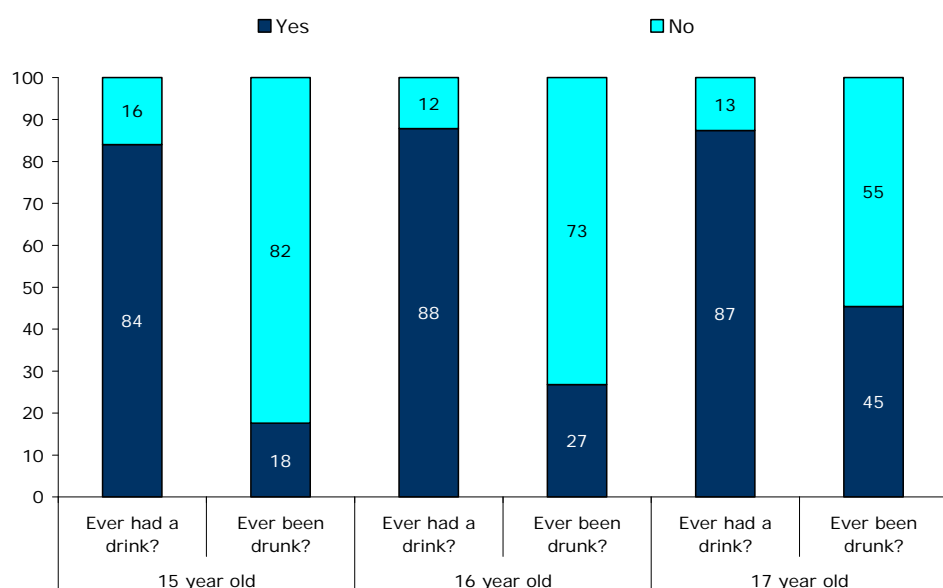
- become violent and aggressive;
- have sex they later regret or wished they hadn't had;
- forget where they were or what they did;
- seriously hurt or injure themselves;
- get into a serious argument;
- get into trouble with the police;
- be verbally abused or threatened;
- be shoved, hit or assaulted;
- accidentally get pregnant or get someone else pregnant;
- do things that make them feel embarrassed or humiliated;
- catch an STD/STI through unprotected sex; and
- be photographed in an embarrassing situation.

Paired t-tests were also conducted to test for the equality of the means between parents' responses and those of their children.

Teenagers aged 15–17 years rated the likelihood of themselves becoming violent and aggressive as a result of getting drunk significantly higher than their parents (2.61, compared with 2.32 for parents, $p < 0.001$). Teenagers also rated their likelihood of getting into a serious argument as higher than their parents (2.89 compared to 2.75, $p = 0.041$). For all other events, there was no significant difference between the rated likelihood of occurrence between parents and their children.

Figure 119, below, displays the proportions of paired teenagers aged 15–17 years that have ever had an alcoholic drink (more than a few sips) and that have been drunk, by age. For comparison, Figure 120 (overleaf) displays the proportions of paired parents of 15–17 year-olds indicating whether or not their child has ever had an alcoholic drink and whether or not their child has ever been drunk, shown by the age of their child. The distributions in each of these charts do not differ significantly from the total samples of 15–17 year-olds and parents of 15–17 year-olds that were surveyed. That is, the paired parents of 15–17 year-olds in the sample do not differ systematically from the rest of the parents surveyed in terms of their estimation of whether or not their child had ever had a drink or ever been drunk. This means that the trends observed for the whole sample can also be observed in the paired sub sample such that paired parents of 15–17 year-olds as a whole were reasonably accurate in indicating whether their children had had an alcoholic drink and had ever been drunk, only slightly underestimating whether or not their child had ever had a drink (by between 7% and 11%) and whether or not their child had ever been drunk (by 6% to 7%). Adding in the proportion of parents that did not know but suspected that their child had been drunk, paired parents' estimation was at most 2% off the actual proportion of children that had been drunk.

Figure 119. Paired children's drinking experience (Paired 15–17 year-olds)



Base: Paired 15 year old n=170, Paired 16 year old n=195, Paired 17 year old n=174

Figure 120. Paired parents' assessment of children's drinking experience (Paired parents)

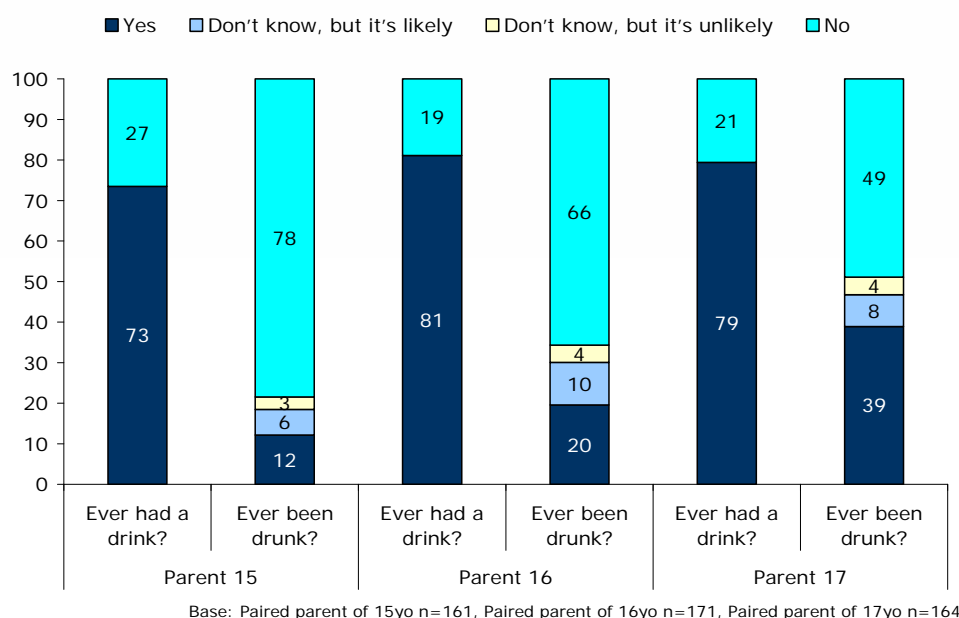
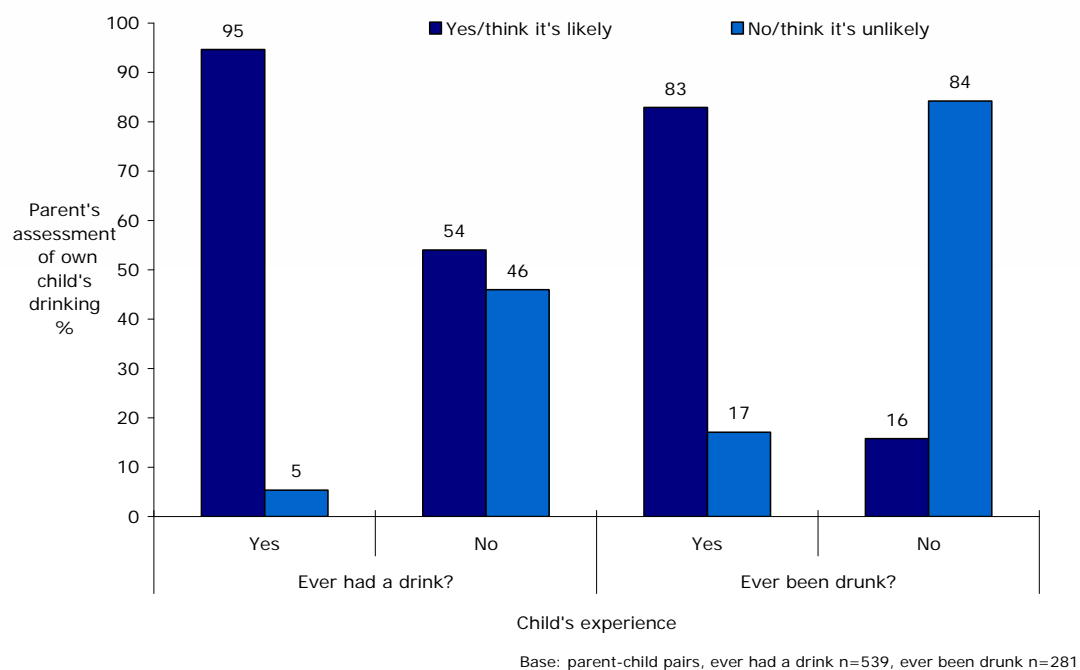


Figure 121 (overleaf) shows just how accurate paired parents were regarding their own child's drinking experiences. From this chart, it can be seen that 95% of parents whose children had ever had an alcoholic drink were correct in their estimation or knowledge of this. However, parents of children who had never had an alcoholic drink were less accurate in their estimation, with 54% of these believing or suspecting that their child had actually had an alcoholic drink. Parents were only slightly less accurate about their child ever having been drunk. Eighty-three percent (83%) of parents whose children had ever been drunk accurately indicated that they knew or suspected their child had been, with the remaining 17% believing their child to have been drunk when they had, in fact, not. A similar proportion of parents whose children had never been drunk (84%) were accurate in their assessment of this situation, while 16% of parents whose children had not ever been drunk believed or suspected that their child had.

Figure 121. Parental accuracy regarding own child's drinking (paired parents and paired 15–17 year-olds)



This section provides the conclusions drawn from the research findings

CONCLUSIONS

Observed impact

The results detailed in Sections 4 to 6 of this report, and summarised in tables in the executive summary, show that the changes observed in behaviour from November 2008 to April 2009 are generally positive (though not uniformly so, and all of the improvements apply to only some part of the target audience of 15–25 year-olds and/or to parents). The pattern of results is uniformly positive for knowledge, and more widespread, applying to two of three, or three of four, of the age categories asked each question. The results for attitudes fall in between those for behaviour and those for knowledge in terms of the proportion of changes which are positive, though no change is observed in more than one of the three age categories for those attitudes asked of 15–25 year-olds.

Awareness, reach and diagnostics

The results on awareness, reach and diagnostics are encouraging among the primary target audience of 15–25 year-olds. Awareness of advertising has increased. Recall of the negative effects of drinking and the association of drinking with violence and crime as advertising messages are up across all three age categories of 15–25 year-olds. These are the most widespread and consistent changes observed from November 2008 to April 2009.

Net campaign reach was high, at between 84% and 86% of the three age categories of 15–25 year-olds. Further, participants generally agreed that the television advertising was attention-grabbing, believable, informative and confronting, as all audience categories had levels of agreement between 85% and 96% for those attributes. Perceived relevance was more moderate among 15–25 year-olds for both executions, between 45% and 64%, with figures highest for 18–21 year-olds. Encouragingly, the TVCs were seen as more relevant as risk level of last occasion increased, ranging from 38% to 45% for those who had never had an alcoholic

drink and from 60% to 66% for those who drank at high risk levels on their last drinking occasion.

While a secondary target audience, the results among parents of 13–17 year-olds are also positive. Recall of the negative effects of drinking and the association of drinking with violence and crime as advertising messages are up among these parents, and their net campaign reach at 80% is only slightly lower than for the primary target audience. Results on the applicable diagnostics for the television ad were higher among parents than 15–25 year-olds, with between 92% and 98% agreement. Perceived relevance was not asked of parents.

Reported impact

Participants among the primary target audience were highly likely to agree with several impact statements regarding the campaign, with at least three-quarters of 15–25 year-olds agreeing that the advertisements made them think about various aspects of drinking.

Reported impact of the advertisements on consumption was weaker. Even so, the proportion of 15–25 year-olds who reported that they had reduced their drinking in response to the advertisements varied from 27% to 31% among 15–25 year-olds.

The proportion of 15–25 year-olds prompted to talk about various aspects of the negative consequences of drinking ranged from 31% to 56% with regard to talking to friends, and ranged from 17% to 52% with regard to talking to parents.

In terms of the secondary target audience of parents of 13–17 year-olds, they reported a greater level of agreement than 15–25 year-olds with all but one of the analogous impact statements asked of both target audiences. The exception was whether they had reduced their own consumption in response to the campaign, and even on this measure, 19% of parents reported the campaign had an effect on them. Finally, parents reported that the campaign had prompted them to undertake a range of protective strategies related to their children's drinking ranging from 'keeping an eye on them and knowing who they go out with and where they go' (83%) and 'setting a good example and demonstrating responsible drinking' (83%) to 'preventing them from going to places where there will be alcohol' (50%).

In sum, the self-reported impacts of the campaign are much larger and more consistent than changes observed by measuring differences between November 2008 and April 2009. As such, they provide a strong body of secondary evidence for the success of the campaign. It may be suggested that reported impact entails an element of flattery, while differences over time are reality. In a sense this is true, but it is rarely possible to have stable baseline measures, which are not being affected by time-of-year, seasonality and a range of other extraneous factors. The fact of the matter is that people did report that the campaign was having an impact on

them, and that does not happen for all campaigns. If the target audience did not think the campaign was effective, then they would have no hesitation in indicating this.

In conclusion

These results provide preliminary evidence that the campaign has had a positive, though modest, impact. Given that drinking to excess is so engrained in the Australian culture, this is perhaps as much as can be hoped for as the result of a first year of a communication campaign. Data from the next two waves of the evaluation will help to determine the extent to which the campaign is likely have contributed to these improvements and also the extent to which these improvements can be sustained and indeed improved upon with further campaign activity. This is particularly crucial given that time of year is likely to have some impact, particularly on drinking behaviours, in which case changes from one year to the same time of the year twelve months later will provide more robust evidence of the residual effect of the first wave of communication activity. Further, comparing April 2009 to April 2010 will also show the cumulative effect of two waves of communication activity, and the incremental effect of the second wave of communication activity.

A

APPENDIX A: YOUTH QUESTIONNAIRE APRIL 2009

INTRODUCTION

You are invited to participate in a survey on social issues and alcohol. The research is being conducted on behalf of the Australian Government.

As with all market and social research, the information and opinions provided will be used only for research purposes. All answers will remain anonymous and confidential. Individual responses will not be reported.

This survey will take approximately 25 minutes to complete. We would like to remind you that there are no right or wrong answers - it's your own thoughts and opinions that matter. Any comments you make will not be linked to you personally, but will be reported as a group. Please take your time in completing this questionnaire thoroughly. For most questions, you will only need to click in a tick box with your mouse. Other questions will require you to type in a response or a value.

Please read each question and follow the instructions to record your reply.

Please DO NOT USE the 'Back' and 'Forward' buttons in the browser.

Please use the buttons at the bottom of each screen.

If you would like to pause the survey to return to it later, simply close the window and click on your original link to return.

Privacy Statement

You should be aware that your name and contact details will be removed from your responses to this survey once all surveying is complete. When this has been done we will no longer be able to identify you with the responses you provided. However, for the period that your name and contact details remain with your survey responses, which will be approximately two to four weeks, you are able to contact us to request that we delete all of your information. If you wish to do this, please email surveys@ipsos.com.au

Q1 [ASK EVERYONE] What is your current age? (i.e. the age you turned at your last birthday)

[DROP DOWN BOX]

Less than 15 [TERMINATE]

15
16
17
18
19
20
21
22
23
24
25

Over 25 [TERMINATE]

[15 TO 17 YEAR OLDS] Your parent or guardian has already given permission for you to participate. Please be assured that your answers will remain private and anonymous.

The information and opinions you provide will be used only for research and will not be reported individually. Your answers will remain confidential.

Q2 Which of these regions best describes where you live?

Sydney	1
Other NSW	2
Melbourne	3
Other Victoria	4
Brisbane	5
Other QLD	6
Adelaide	7
Other SA	8
Perth	9
Other WA	10
Northern Territory	11
Tasmania	12
ACT	13
Other	14

[Terminate]

Q2a What is your postcode?

Not in Australia (TERMINATE)

LOGIC CHECK: PLEASE MATCH POSTCODE WITH ENTERED STATE AS PER BELOW.

(1000 thru 1999=NSW)
(2000 thru 2599=NSW)
(2619 thru 2898=NSW)
(2921 thru 2999=NSW)
(0200 thru 0299=ACT)
(2600 thru 2618=ACT)
(2900 thru 2920=ACT)
(3000 thru 3999=VIC)
(8000 thru 8999=VIC)

(4000 thru 4999=QLD)
 (9000 thru 9999=QLD)
 (5000 thru 5799=SA)
 (5800 thru 5999=SA)
 (6000 thru 6797=WA)
 (6800 thru 6999=WA)
 (7000 thru 7799=TAS)
 (7800 thru 7999=TAS)
 (0800 thru 0899=NT)
 (0900 thru 0999=NT)

POSTCODES ENCOMPASSING TWO STATES:

P/C	SUBURB	STATE FROM POSTCODE	ACTUAL STATE
0872	ERNABELLA	NT	SA
0872	FREGON	NT	SA
0872	INDULKANA	NT	SA
0872	MIMILI	NT	SA
0872	NGAANYATJARRA-GILES	NT	SA
0872	FGIBSON DESERT NORTH	NT	WA
0872	FGIBSON DESERT SOUTH	NT	WA
2611	BRINDABELLA	ACT	NSW
2611	URIARRA	ACT	NSW
2620	HUME	NSW	ACT
2620	KOWEN FOREST	NSW	ACT
2620	OAKS ESTATE	NSW	ACT
2620	THARWA	NSW	ACT
2620	TOP NAAS	NSW	ACT
3500	PARINGI	VIC	NSW
3585	MURRAY DOWNS	VIC	NSW
3586	MALLAN	VIC	NSW
3644	BAROOGA	VIC	NSW
3644	LALALTY	VIC	NSW
3707	BRINGENBRONG	VIC	NSW

[IF POSTCODE IS VALID AUSTRALIAN POSTCODE BUT DOES NOT MATCH Q2, REPEAT Q2 AND Q2a ON SAME PAGE WITH FOLLOWING INSTRUCTION/ERROR MESSAGE: "The postcode you have entered is not in the state you entered. Please review your answers carefully before hitting the >> button."]

[IF POSTCODE IS NOT A VALID AUSTRALIAN POSTCODE, REPEAT Q2 AND Q2a ON SAME PAGE WITH FOLLOWING INSTRUCTION/ERROR MESSAGE: "The postcode you have entered is not a valid Australian postcode. Please review your answers carefully before hitting the >> button."]

Q3 Are you male or female?

1. Male
2. Female

Q4 Thinking about people your age, please rank the following drugs according to the number of hospitalisations you think they cause. Put the drug that causes the most hospitalisations next to "1", and put the drug that is next besides the 2 and so on. (If your browser displays a series of boxes to the left of the drugs, please type "1" in the box to the left of the drug that causes most hospitalisations, "2" in the box to the left of the next drug, and so on up to "5")

[RANDOMISE PRESENTATION OF DRUGS. ALLOW PARTICIPANTS TO DRAG AND DROP INTO THE TABLE. IF PARTICIPANT FAILS ON FIRST ATTEMPT, PLEASE INCLUDE FOLLOWING INSTRUCTION: Please click and drag each box on the left across to a box on the right until the box on the right becomes highlighted. Alternatively, select each box on left and use the arrows on-screen or on your keyboard. (If your browser displays a series of boxes to the left of the drugs, please type "1" in the box to the left of the drug that causes most hospitalisations, "2" in the box to the left of the next drug, and so on up to "5")]

1. Alcohol
2. Prescribed drugs used for non-medical purposes (e.g. Pain-killers, Sleeping pills)
3. Tobacco (e.g. cigarettes, cigars)
4. Marijuana/Cannabis (e.g. dope, hash, joints, bongs)
5. Illegal drugs other than Marijuana (e.g. Heroin, Cocaine, Ecstasy)

Q5 In the **last month**, have you seen, read or heard anything **in the media**, or any **advertising** about (teenagers/ young adults) [INSERT RELEVANT TERM, DEPENDING ON AGE BAND] and the risks when drinking alcohol? *(Please tick all that apply)*

1. Yes, in the media (such as news reports, editorial in newspapers or magazines)
2. Yes, advertising
3. No [SKIP TO Q8]
4. Don't know

Q6 Where did you see, read or hear this? (Please tick all that apply) (Multiple Response)

1. Television
2. Radio

3. Newspaper
4. Magazine
5. Online
6. At school / college/ university
7. Cinema
8. Somewhere else, specify _____

Q7 Please describe what you remember seeing, reading or hearing, and what it was telling you? Write down as many details that you can think of. If you saw more than one item, please describe all the items you saw.

Open ended response

Q8 (15-17 YEARS ONLY) Have you **ever had an alcoholic drink** or even part of an alcoholic drink?

1. No (Go to Q32)
2. Yes, just a few sips in my whole life (Go to Q32)
3. Yes, fewer than 10 alcoholic drinks in my life
4. Yes, more than 10 alcoholic drinks in my life

Q9. (15-17 YEARS ONLY) About what age were you when you had your first full drink of alcohol? [IF AGE TOO HIGH, PLEASE SHOW ERROR MESSAGE: 'You've entered an age greater than your own.']

_____ Age in years

Q10 (15-17 YEARS ONLY) Have you **ever gotten drunk**?

1. Yes
2. No (GO TO Q12)

Q11 (15-17 YEARS ONLY) About what age were you when you first got drunk? [IF AGE TOO HIGH, PLEASE SHOW ERROR MESSAGE: 'You've entered an age greater than your own.' IF AGE TOO LOW]

_____ Age in years [PROGRAM A LOGIC CHECK TO ENSURE THIS IS NO YOUNGER THAN AGE OF FIRST DRINK]

Q12 **In the last 3 months**, about how often did you have an alcoholic drink of any kind? Do not include sips or tastes. (Please tick one response only)

1. Every day
2. 5 to 6 days a week







3. 3 to 4 days a week
4. 1 to 2 days a week
5. 2 to 3 days a month
6. About 1 day a month
7. Less often than once a month
8. I haven't drunk alcohol in the last three months (GO TO Q32)

CONSUMPTION






Q13 On the last occasion you were drinking alcohol, which of the following did you drink? (Please record an answer on every line.) [REQUIRE A YES/NO FOR EACH CATEGORY] [IF PARTICIPANT FAILS ON FIRST ATTEMPT BECAUSE THEY HADN'T RESPONDED TO EACH LINE, PLEASE INCLUDE FOLLOWING INSTRUCTION: Please record an answer for each line, please answer no if you didn't drink the alcohol type on the last occasion you were drinking alcohol]

1. Beer
2. Wine (still or sparkling, including champagne)
3. Pre-mixed spirits (including in cans, e.g. UDL, Jim Beam and Cola, or in bottles, e.g. Lemon Ruski, Stoli, Bacardi Breezer)
4. Straight spirits - not pre-mixed (including nips and shots)
5. Spirits with mixers (e.g. Vodka and orange, Scotch and coke, Midori and lemonade)
6. Fortified wine (e.g. port, vermouth, sherry)
7. Cider (e.g. Strongbow, Magners, Mercury)
8. Cocktails
9. Home-prepared mixes (e.g. punch, sangria, jungle juice)
10. Coolers (e.g. West Coast)
11. Alcoholic Sodas
12. Other (please specify)

Q14 [IF DRANK BEER AT Q13] On this last occasion you were drinking alcohol, how many bottles, cans, or glasses of beer did you drink? Please enter the number for each type of drink you consumed on this last occasion. [NEED TO ENTER AT LEAST ONE FIGURE SOMEWHERE IN THE GRID.]




	 Beer Cans (375-440mL)	 Small Beer Bottles (330-375mL)	 Large Beer Bottles (Approx-750mL)	 Small Beer Glass (210mL)	 Medium Beer Glass (285mL)	 Large Beer Glass (475mL)	Other size. Please write the type of container and the volume in mls. If unsure please estimate to the best of your ability. <input type="text"/>
Regular strength beer (greater than 4% AlcVol) (e.g. Victoria Bitter, Tooheys New, Pure Blond)	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Mid strength beer (3% to 3.9% AlcVol) (e.g. XXXX Gold, Carlton Mid Strength)	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Low alcohol beer (1% to 2.9% AlcVol) (e.g. Hahn Premium Light, Cascade Light)	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Home-brewed beer		<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

Q15 [IF DRANK WINE AT Q13] **On this last occasion you were drinking alcohol**, how many bottles or glasses of wine (still or sparkling, including champagne) did you drink? Please enter the number for each type of drink you consumed on this last occasion. [NEED TO ENTER AT LEAST ONE FIGURE SOMEWHERE IN THE GRID.]

	 Small Wine/Champagne Bottles (375mL)	 Large Wine/Champagne Bottles (750mL)	 Small Wine/champagne Glass (120mL)	 Medium Wine/champagne glass (180mL)	 Large Wine/champagne Glass (220mL)	Other size. Please write the type of container and the volume in mls. If unsure please estimate to the best of your ability. <input type="text"/>
Cask Wine			<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Bottled wine	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Home-made wine	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

Q16 [IF DRANK PRE-MIXED SPIRITS AT Q13] **On this last occasion you were drinking alcohol**, how many bottles or cans of pre-mixed spirits did you drink? Please enter

the number for each type of drink you consumed on this last occasion. [NEED TO ENTER AT LEAST ONE FIGURE SOMEWHERE IN THE GRID.]

	 Pre-mixed Spirit Cans (375-440mL)	 Pre-mixed Spirit Bottles (Approx. 300mL)	 Large pre-mixed Spirit Bottles (Approx. 650mL)	Other size. Please write the type of container and the volume in mls. If unsure please estimate to the best of your ability. <input type="text"/>
Pre-mixed spirits in cans(e.g.UDL,Jim Beam & Cola)	<input type="text"/>			<input type="text"/>
Pre-mixed spirits in bottles(e.g.Lemon Ruski,Stoli Bacardi Breezer)		<input type="text"/>	<input type="text"/>	<input type="text"/>

Q17 [IF DRANK STRAIGHT- SPIRITS AT Q13=4 or 5] **On this last occasion you were drinking alcohol**, how many measures, shots, nips or bottles of straight spirits did you drink? Please enter the number for each type of drink you consumed on this last occasion. [NEED TO ENTER AT LEAST ONE FIGURE SOMEWHERE IN THE GRID.]

SPIRITS – EITHER STRAIGHT OR WITH MIXERS (BUT NOT PREMIXED)

	 Mini Spirit Bottles (50mL)	 Small Spirit Bottles (Approx. 350mL)	 Large Spirit Bottles (700mL)	 Single measure, shot or one nip (30mL)	 Double measure, shot or two nips (60mL)	 Triple measure, shot or three nips (90mL)	Other size. Please write the type of container and the volume in mls. If unsure please estimate to the best of your ability. <input type="text"/>
Bottled spirits and liqueurs (e.g.gin,vodka,rum,Kahlua)	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

Q18 [IF DRANK FORTIFIED WINE AT Q13] **On this last occasion you were drinking alcohol**, how many glasses or bottles of fortified wine did you drink? Please enter the number for each type of drink you consumed on this last occasion. [NEED TO ENTER AT LEAST ONE FIGURE SOMEWHERE IN THE GRID.]

	Small Bottles (375mL)	Large Bottles (750mL)	Small Glass (60mL)	Medium Glass (120mL)	Large Glass (180mL)	Other size. Please write the type of container and the volume in mls. If unsure please estimate to the best of your ability.
Port, vermouth, sherry, etc.	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

Q19 [IF DRANK CIDER AT Q13] **On this last occasion you were drinking alcohol**, how many glasses or bottles of cider did you drink? Please enter the number for each type of drink you consumed on this last occasion. [NEED TO ENTER AT LEAST ONE FIGURE SOMEWHERE IN THE GRID.]

	Small Bottles (330-375mL)	Pint/ Bottles (568mL)	Large Bottles (Approx-750mL)	Small Beer Glass (210mL)	Medium Beer Glass (285mL)	Large Beer Glass (425mL)	Other size. Please write the type of container and the volume in mls. If unsure please estimate to the best of your ability.
Bottled	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Home made	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>






Q20 [IF DRANK COCKTAILS AT Q13] **On this last occasion you were drinking alcohol**, how many cocktails did you drink? [NEED TO ENTER AT LEAST ONE FIGURE SOMEWHERE IN THE GRID.]

☐






Q21 [IF DRANK PUNCH/SANGRIA/JUNGLE JUICE AT Q13] **On this last occasion you were drinking alcohol**, how many glasses of home-prepared mixes did you drink? [NEED TO ENTER AT LEAST ONE FIGURE SOMEWHERE IN THE GRID.]

☐

Q22 [IF DRANK COOLERS AT Q13] **On this last occasion you were drinking alcohol**, how many bottles or glasses of coolers did you drink? Please enter the number for each type of drink you consumed on this last occasion. [NEED TO ENTER AT LEAST ONE FIGURE SOMEWHERE IN THE GRID.]

	 Small Bottles (250mL)	 Large Bottles (Approx. 750mL)	 Small Wine Glass (120mL)	 Medium Wine Glass (180mL)	 Large Wine Glass (220mL)	Other size. Please write the type of container and the volume in mls. If unsure please estimate to the best of your ability. <input type="text"/>
Coolers (e.g. West Coast Cooler)	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

Q23 [IF DRANK ALCOHOLIC SODA AT Q13] **On this last occasion you were drinking alcohol**, how many bottles or glasses of alcoholic soda did you drink? Please enter the number for each type of drink you consumed on this last occasion. [NEED TO ENTER AT LEAST ONE FIGURE SOMEWHERE IN THE GRID.]

	 Very small bottles (250mL)	 Small Bottles (330mL)	 Small Beer Glass (210mL)	 Medium Beer Glass (285mL)	 Large Beer Glass (425mL)	Other size. Please write the type of container and the volume in mls. If unsure please estimate to the best of your ability. <input type="text"/>
Alcoholic Soda (e.g. Two Dogs)	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

Q24a [IF DRANK OTHER AT Q13] **On this last occasion you were drinking alcohol**, how many cans, glasses or bottles of other alcohol did you drink? Please enter the number for each type of drink you consumed on this last occasion. [NEED TO ENTER AT LEAST ONE FIGURE SOMEWHERE IN THE GRID.][INSERT DRINK FROM Q13=12]

Cans (375mL)	Small Bottles (375mL)	Large Bottles (750mL)	Small Glass (60mL)	Medium Glass (120mL)	Large Glass (180mL)	Other size. Please write the type of container and the volume in mls. If unsure please estimate to the best of your ability.
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

Q24b To recap, the table below shows what you have indicated that you drank **on this last occasion you were drinking alcohol**.

Here a drinking occasion refers to a single session of drinking. This might include a drink at home at the end of the day or over dinner, or at a specific event, such as a party or a 'Friday night out'.

On this last drinking occasion is it correct that you drank the following amounts of each alcohol type or would you like to make a change to any of these amounts:

(Please record an answer on every line)

	Correct	Change
<input type="checkbox"/> Beer Can (375-440mL) of regular strength beer	<input type="radio"/>	<input type="radio"/>
<input type="checkbox"/> Small Wine Glass (120mL) of Cask Wine	<input type="radio"/>	<input type="radio"/>
<input type="checkbox"/> Pre-Mixed Spirit Bottle (Approx,300mL) of Pre-mixed Spirits in Bottle	<input type="radio"/>	<input type="radio"/>
<input type="checkbox"/> Mini Spirit Bottle (50mL)	<input type="radio"/>	<input type="radio"/>
<input type="checkbox"/> Small Glass (60mL) of fortified wine	<input type="radio"/>	<input type="radio"/>
<input type="checkbox"/> Small Beer Glass (210mL) of Bottled Cider	<input type="radio"/>	<input type="radio"/>
<input type="checkbox"/> Cocktail	<input type="radio"/>	<input type="radio"/>
<input type="checkbox"/> Glass of home prepared mixes	<input type="radio"/>	<input type="radio"/>
<input type="checkbox"/> Small Bottle (250mL) of Coolers	<input type="radio"/>	<input type="radio"/>
<input type="checkbox"/> Very Small Bottle (250mL) of Alcoholic Soda	<input type="radio"/>	<input type="radio"/>

[FOR COCKTAILS AND HOME PREPARED MIXES, PLEASE ADD 'If you did not consume any of this type of alcohol on this last occasion you were drinking alcohol, please enter '0' in the box provided.' AS INSTRUCTION FOLLOWING CONSUMPTION QUESTION. ALSO INCLUDE THIS SENTENCE IN THE ERROR MESSAGE IF PARTICIPANT DOES NOT ENTER ANYTHING. FOR OTHER CORRECTIONS, PLEASE ADD 'If you did not consume any of this type of alcohol on this last occasion you were drinking alcohol, please enter '0' in any of the boxes provided.' AS INSTRUCTION FOLLOWING CONSUMPTION QUESTION. ALSO INCLUDE THIS SENTENCE IN THE ERROR MESSAGE IF PARTICIPANT DOES NOT ENTER ANYTHING.]

Q25a **On this last occasion you were drinking alcohol**, was this amount...

1. Less than you usually drink
2. The same as you usually drink
3. More than you usually drink

[USING DATA FROM Q13 SHOW PARTICIPANTS HOW MANY STANDARD DRINKS THEY HAD ON THIS OCCASION, ALONG WITH:]

[DISPLAY WITH Q27] On the last occasion you had an alcoholic drink, from the information you've provided, you had [INSERT RESULT OF CALCULATION, ROUNDED TO NEAREST WHOLE NUMBER] standard drinks.

The following shows the number of standard drinks for different types of alcohol, for different sized containers. Please scroll down and ensure that you answer each question on this page before hitting the >> button. [PLEASE DISPLAY Q26a-Q26e ON ONE PAGE AS PER CURRENT LOGIC CHECK PAGE.]



Q26a **In the last 3 months**, how often have you had **more than 15 standard drinks** in a single day? [ONLY INCLUDE FOLLOWING IN REALITY CHECK: (If you answer 'Every day' for one of the questions in this section, you must answer 'Not in the last three months' for the other questions)]

1. Not in the last 3 months
2. Less often than one day a month
3. About 1 day a month
4. 2-3 days a month
5. 1-2 days a week
6. 3-4 days a week
7. 5-6 days a week
8. Every day

Q26b **In the last 3 months**, how often have you had **11-15 standard drinks (but no more)** in a single day? [ONLY INCLUDE FOLLOWING IN REALITY CHECK: (If you answer 'Every day' for one of the questions in this section, you must answer 'Not in the last three months' for the other questions)]

1. Not in the last 3 months
2. Less often than one day a month

3. About 1 day a month
4. 2-3 days a month
5. 1-2 days a week
6. 3-4 days a week
7. 5-6 days a week
8. Every day

Q26c **In the last 3 months**, how often have you had **7-10 standard drinks (but no more)** in a single day? [ONLY INCLUDE FOLLOWING IN REALITY CHECK: (If you answer 'Every day' for one of the questions in this section, you must answer 'Not in the last three months' for the other questions)]

1. Not in the last 3 months
2. Less often than one day a month
3. About 1 day a month
4. 2-3 days a month
5. 1-2 days a week
6. 3-4 days a week
7. 5-6 days a week
8. Every day

Q26d **In the last 3 months**, how often have you had **5-6 standard drinks (but no more)** in a single day? [ONLY INCLUDE FOLLOWING IN REALITY CHECK: (If you answer 'Every day' for one of the questions in this section, you must answer 'Not in the last three months' for the other questions)]

1. Not in the last 3 months
2. Less often than one day a month
3. About 1 day a month
4. 2-3 days a month
5. 1-2 days a week
6. 3-4 days a week
7. 5-6 days a week
8. Every day

Q26e In the last 3 months, how often have you had **1-4 standard drinks (but no more)** in a single day? [ONLY INCLUDE FOLLOWING IN REALITY CHECK: (If you answer 'Every day' for one of the questions in this section, you must answer 'Not in the last three months' for the other questions)]

1. Not in the last 3 months
2. Less often than one day a month
3. About 1 day a month
4. 2-3 days a month
5. 1-2 days a week
6. 3-4 days a week
7. 5-6 days a week
8. Every day

[LOGIC CHECK FOR Q26a-Q26e: IF R8 IN ANY ONE QUESTION, THEN ONLY R1 SHOULD BE CHECKED IN ALL OTHERS. IF THIS IS NOT THE CASE, DISPLAY REPEAT OF QUESTIONS Q26a-Q26e ON ONE PAGE, PRECEDED BY THE FOLLOWING TEXT]

The combination of answers you have given is not possible. If you answer 'Every day' for one of the questions in this section, you must answer 'Not in the last three months' for the other questions in this section. Please review your answers carefully before hitting the next button.

Q27 (15-17 YEARS ONLY) On the last occasion you were drinking alcohol, where did you obtain your alcohol? (Please tick all that apply) [RANDOMISE]

1. Friend or acquaintance
2. Brother or sister
3. Parent
4. Other relative
5. Brother or sister of a friend
6. At a party
7. Taken from someone or somewhere without permission
8. Purchase it myself from retailer (e.g. bottle shop)
9. Purchased it myself and drank it at a licensed premises (e.g. pub, nightclub, restaurant)
10. Got stranger/someone not known to me to get it
11. Other

Q28 **In the last three months**, have you ever done each of the following? (Please record an answer on every line.). [REQUIRE A YES/NO FOR EACH CATEGORY]

RANDOMISE		
	YES	NO
Made sure you didn't get drunk when you went out.		
Deliberately alternated between alcoholic and non-alcoholic drinks.		
Made a point of eating before or while consuming alcohol.		
Refused an alcoholic drink you were offered.		
Only drunk low-alcohol drinks or non-alcoholic drinks (on a night out).		
Asked someone who has had too much alcohol to stop drinking.		
Drank to get drunk.		
Deliberately limited how much you drank.		
Switched to drinking more low-alcoholic drinks.		
Decided to just stop drinking alcohol altogether.		

Q29 And **in the next 3 months**, which of these things do you **intend doing** or **trying** to do at least once? This includes things you have already done which you intend to do again. (Please record an answer on every line)

[REQUIRE A YES/NO FOR EACH CATEGORY]

(Please record an answer on every line.)

RANDOMISE		
	YES	NO
Make sure you don't get drunk when you go out.		
Deliberately alternate between alcoholic and non-alcoholic drinks.		
Make a point of eating while or before consuming alcohol.		
Refuse an alcoholic drink you are offered.		
Only drink low-alcohol drinks or non-alcohol drinks (on a night out).		
Ask someone who has had too much alcohol to stop drinking.		

Drink to get drunk.		
Deliberately limit how much you drink.		
Switch to drinking more low-alcoholic drinks.		
Stop drinking altogether.		

Q30 Thinking about people your age, how much do you agree or disagree with the statement....

Randomise	Agree	Strongly	Agree	Disagree	Disagree strongly
Drinking too much ruins a good night out.					
If you drink too much, you're more likely to do things that you may regret later.					
You become more aggressive when you're drunk.					
You are more likely to have unsafe sex if you've drunk too much.					
By getting drunk, you're likely to end up verbally abusing your friends or boyfriend/girlfriend.					
You are more likely to engage in sex you might regret if you've been drinking too much.					
You are more vulnerable to being physically hurt by others when you are drunk.					
By getting drunk, you make a fool of yourself in front of your friends or boyfriend/girlfriend.					
Getting drunk is mostly harmless fun for people my age.					
Drinking too much when you are out gets you into trouble or danger.					

Q31

RANDOMISE	Acceptable	Un-acceptable	Neither acceptable nor un-acceptable
-----------	------------	---------------	---

If I got very drunk, my closest friends would think it was			
If I got very drunk, most girls or guys I'm attracted to would think it was			
If I got very drunk and my immediate family found out, they would think it was			

Q32 If you drank too much alcohol, how likely do you think it is that you would ... (Even if you're unsure or haven't drunk before, please think about how likely each of these things would be based on what you know about yourself and alcohol.)

RANDOMISE

	Very unlikely	Unlikely	Likely	Very likely
Become more violent and aggressive.				
Have sex that you later regret or wish you hadn't had.				
Forget where you were and what you did.				
Seriously hurt or injure yourself.				
Get into a serious argument.				
Get into trouble with the police.				
Be verbally abused or threatened.				
Be shoved, hit or assaulted.				
[IF FEMALE] Accidentally get pregnant. [IF MALE] Accidentally get someone pregnant.				
Do things that made me feel embarrassed or humiliated.				
Have a serious argument with my boyfriend/girlfriend.				
Catch an STD/STI through unprotected sex.				
Be photographed in an embarrassing situation.				

Q33 If you drank too much alcohol, how would you feel about each of these things, if they happened to you? [PRESENT IN SAME ORDER AS PREVIOUS QUESTION]

	1 - Not at all bad	2	3	4	5 - Very bad
Became more violent and aggressive.					
Had sex that you later regret or wish you hadn't had.					
Forgot where you were and what you did.					
Seriously hurt or injured yourself.					
Got into a serious argument.					
Got into trouble with the police.					
Were verbally abused or threatened.					
Were shoved, hit or assaulted.					
[IF FEMALE] Accidentally got pregnant [IF MALE] Accidentally got someone pregnant.					
Did things that made me feel embarrassed or humiliated.					
Had a serious argument with my boyfriend/girlfriend.					
Caught an STD/STI through unprotected sex.					
Be photographed in an embarrassing situation.					

Q34 How frequently in the last 3 months have you experienced any of the following...

RANDOMISE	NEVER	RARELY	SOMETIMES	OFTEN
Doing something after drinking too much that you regretted or later wished you hadn't done.				
Seen violence by someone who was drunk and aggressive.				
Been verbally abused or threatened by someone who was drunk.				

Been shoved, hit or assaulted by someone who was drunk.				
Been aggressive or violent to others after drinking too much.				
Receiving unwanted sexual advances by someone who was drunk.				
Having to look after or "baby sit" friends who have had too much to drink.				
Forgot where you were or what you did after drinking too much.				
Got into trouble with the police after drinking too much.				
Had a serious argument or fight when drunk.				
Seriously hurt or injured yourself after drinking too much.				
Did something sexual that you later wished you hadn't.				
Doing things that made me feel embarrassed or humiliated.				

Q35 In the last 3 months, have you had any discussions with anyone about the negative things that can happen when someone drinks alcohol?

1. Yes
2. No (GO TO Q39)

Q36 What prompted those discussions? (Please tick all that apply) (RANDOMISE. ACCEPT MULTIPLES)

1. An incident involving drinking
2. Something bad happened as a result of drinking
3. My parents brought it up
4. My friend brought it up
5. Advertising
6. A newspaper or magazine article
7. Other, specify

Q37 Who were those discussions with? (Please tick all that apply) (RANDOMISE. ACCEPT MULTIPLES)

[AUTO TICK CODE 1 IF CODE 4 AT Q36, AND AUTO TICK CODE 2 IF CODE 3 AT Q36].

1. Friends
2. Parents
3. Teachers/ lecturers/ tutors

4. Brothers/ sisters
5. Boyfriend/ girlfriend/ partner
6. Other family members
7. Other, specify

Q38 What did you talk about? *(Please tick all that apply)* (RANDOMISE. ACCEPT MULTIPLES)

1. The dangers, hazards and harmful effects of alcohol
2. How alcohol can ruin a good night out
3. The importance of not drinking too much
4. Being careful and responsible if you are drinking
5. The risk of being vulnerable to violence and injury
6. How you can still have a good time without drinking too much
7. Things done whilst drunk that were regretted later
8. Things done whilst drunk that were embarrassing or humiliating
9. Injuries sustained whilst drunk
10. Other, specify

Q39 Thinking about everyone in Australia your age, what percentage do you think would have got drunk in the last two weeks? (Please move the sliding bar across the line below. If your browser displays buttons, please select the appropriate button.) [SLIDE RULER]

0% 10 20 30 40 50 60 70 80 90 100%
 No one _____ Everyone

Campaign evaluation

ROTATE TVCs

Next we are going to show you a full advertisement.

[SHOW FLASH ID TVC1 – 15-17]

When the advertisement has finished please enter the 4 digit number on your screen and then click the >> button to continue. If you can't view the commercial enter 0000.

[IF 0000 ENTERED, SKIP TO QE4a. IF CODE OTHER THAN DEFINED CODE ENTERED SKIP TO QE4a]

QE1. Before today, had you seen this particular ad?

1. No [SKIP TO QE4]
2. Yes, once
3. Yes, 2-3 times
4. Yes, 4-5 times
5. Yes, 6 or more times
6. Unable to view advertisement on this computer

[IF 6 IN QE1, GO TO QE1a. ELSE GOT TO QE2]

QE1a. These images are still frames from an advertisement.
[SHOW STILLS FROM TVC1]



Before today, had you seen this particular ad?

1. No [SKIP TO QE4]
2. Yes, Once
3. Yes, 2-3 times

4. Yes, 4-5 times
5. Yes, 6 or more times

QE2. Please rate your agreement with the following...

RANDOMISE	Strongly agree	Agree	Disagree	Strongly disagree
The ad was believable				
The ad was relevant to me				
The ad was confronting				
The ad was attention-grabbing				
The ad was informative				

QE3. (ASK THOSE WHO HAVE SEEN TVC1) Where did you see this particular ad before today? (Please tick all that apply) (RANDOMISE. ACCEPT MULTIPLES)

1. Television
2. Movies
3. Internet
4. Other (Please specify) _____

ROTATE TVCs

Next we are going to show you a full advertisement.

[SHOW FLASH ID TVC2 – 18-25]

When the advertisement has finished please enter the 4 digit number on your screen and then click the >> button to continue. If you can't view the commercial enter 0000.

[IF 0000 ENTERED, SKIP TO QE4a. IF CODE OTHER THAN DEFINED CODE ENTERED SKIP TO QE4a]

QE4. Before today, had you seen this particular ad?

1. No [SKIP TO QE7]
2. Yes, Once
3. Yes, 2-3 times
4. Yes, 4-5 times
5. Yes, 6 or more times
6. Unable to view advertisement on this computer

[IF 6 IN QE1, GO TO QE1a. ELSE GOT TO QE2]

QE4a. These images are still frames from an advertisement.

[SHOW STILLS FROM TVC2]



Before today, had you seen this particular ad?

1. No [SKIP TO QE7]
2. Yes, Once

3. Yes, 2-3 times
4. Yes, 4-5 times
5. Yes, 6 or more times

QE5. Please rate your agreement with the following...

RANDOMISE	Strongly agree	Agree	Disagree	Strongly disagree
The ad was believable				
The ad was relevant to me				
The ad was confronting				
The ad was attention-grabbing				
The ad was informative				

QE6. (ASK THOSE WHO HAVE SEEN TVC2) Where did you see this particular ad? (Please tick all that apply) (RANDOMISE. ACCEPT MULTIPLES)

1. Television
2. Movies
3. Internet
4. Other (Please specify)_____

QE7. ROTATE RADIO EXECUTIONS

Please listen to this radio ad.

When the ad has finished please enter the 4 digit number on your screen and then click the >> button to continue. If you can't hear anything please enter the code 0000.

[FLASH ID FINISHED VERSION RADIO AD 1 – ARREST]

[FLASH – This sound file will only play ONCE. Please ensure your speakers are switched on and the volume turned up. When you are ready, please press the play button below.]

[IF 0000 ENTERED, SKIP TO QE7a. IF CODE OTHER THAN DEFINED CODE ENTERED SKIP TO QE7a]

Before today, had you heard this ad?

1. Yes
2. ...No
3. ...Unable to hear this ad on my computer.

[IF 3 in QE7, GO TO QE7a. ELSE, GO TO QE8

QE7a. The following is a description of a radio ad:

A policeman is talking to a clearly drunk young man.

Policeman: "The Paramedics have just informed me that your mate Simon hasn't made it"

Young man: "[Drunken mumbling...] this can't be happening"

Policeman: "You're clearly under the influence of alcohol and you are going to have to come with me to the police station"

Young man: "What! Why?"

Policeman: "Because you are under arrest mate and I need you to listen to me very carefully"

Young man: "But it was an accident, we just had a few drinks, I didn't think I punched him that hard"

Policeman: "You don't have to say or do anything but I will...(fades)"

Voice over: **"Four Australians aged between 18-25 die due to alcohol related injuries in an average week. Don't turn a night out into a nightmare."**

Before today, had you heard this ad?

1. Yes
2. No

QE8. ROTATE RADIO EXECUTIONS

Please listen to this radio ad.

When the ad has finished please enter the 4 digit number on your screen and then click the >> button to continue. If you can't hear anything please enter the code 0000.

[FLASH ID FINISHED VERSION RADIO AD 2 – EMERGENCY ROOM]

[FLASH – This sound file will only play ONCE. Please ensure your speakers are switched on and the volume turned up. When you are ready, please press the play button below.]

[IF 0000 ENTERED, SKIP TO QE8a. IF CODE OTHER THAN DEFINED CODE ENTERED SKIP TO QE8a]

Before today, had you heard this ad?

1. Yes
2. ...No
3. ...Unable to hear this ad on my computer.

[IF 3 in QE8, GO TO QE8a. ELSE, GO TO QE9

QE8a. The following is a transcript of a radio ad:

A ring tone is heard through a telephone, and a middle-aged mother answers. The dialler is a clearly distressed young man.

Mother: "Hello?"

Young man: "Mrs Parker, it's Jack."

Mother: "Jack? Do you know what time it is?"

Young man: "Leo and me... we're at hospital."

Mother: "Hospital? What do you mean?"

Young man: "We were just having a few drinks and..."

Mother: "What do you mean having a few drinks?"

Young man: "Doctor says you'd better come in."

Mother: "Jack, what's happened to Leo?"

Young man: "Please just hurry."

Voice Over: **"Seventy Australians aged under 25 will be hospitalised due to alcohol caused assault in an average week, don't turn a night out into a nightmare."**

Before today, had you heard this ad?

1. Yes
2. No

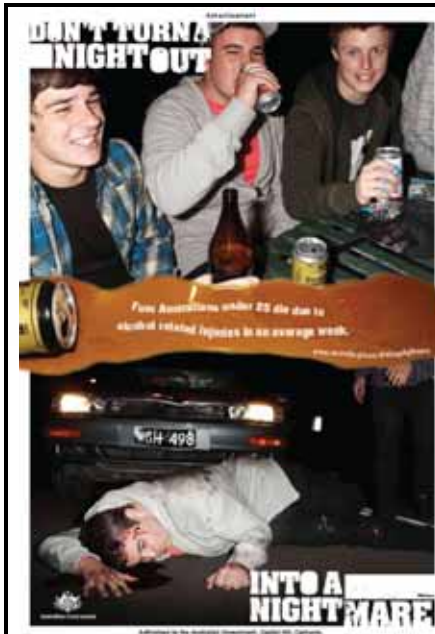
QE9. PRINT/AMBIENT/ONLINE

(Show all print/ambient ads)

There are four print ads, two on this page, and two on the next page Please scroll down to ensure you can see both ads on this page. Before today, which of these ads had you seen?

RANDOMISE ORDER

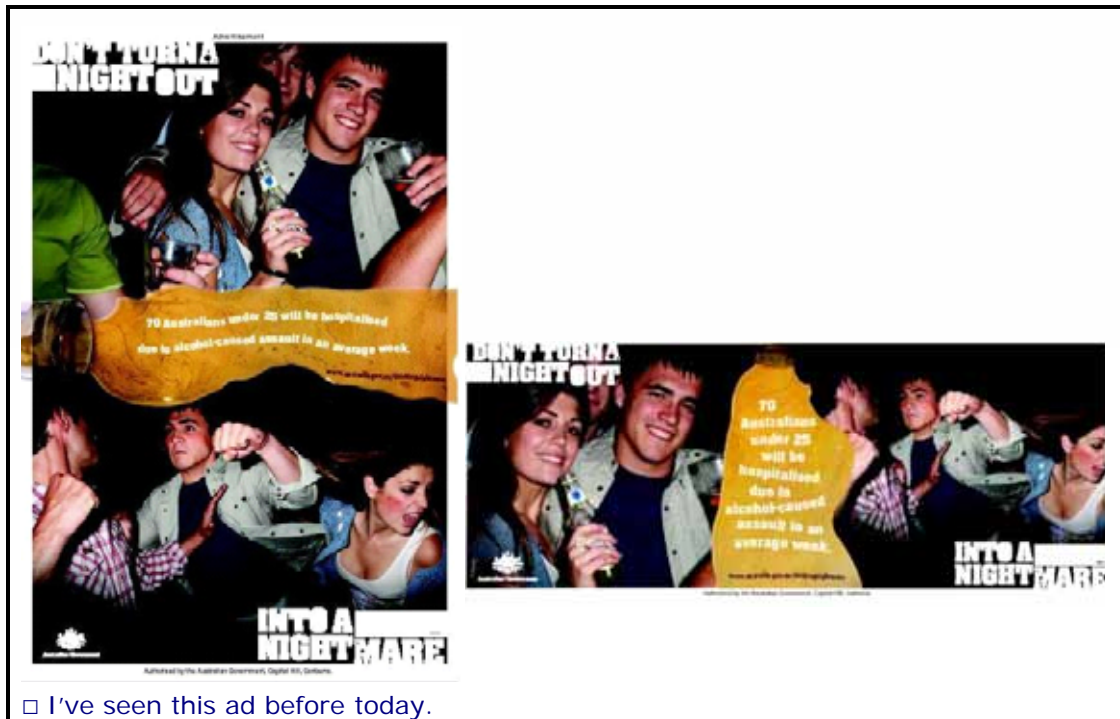
1. Pedestrian Accident (horizontal and vertical)
2. Party Bushes (horizontal and vertical)
3. Pub Fight (horizontal and vertical)
4. Coffee table (horizontal and vertical)



☐ I've seen this ad before today.



☐ I've seen this ad before today.



QE10. (FOR EACH SELECTED) Where did you see this ad? (Please tick all that apply)
(RANDOMISE. ACCEPT MULTIPLES)

1. Newspaper or Street Press

2. Magazine
3. Posters (e.g. at a bus stop or shopping centre panel)
4. On the side of a bus or inside a bus, train, tram or ferry
5. Avant Cards
6. Other (Please specify)

QE11. (SHOW ONE SQUARE AND ONE HORIZONTAL PRELEGAL ONLINE BANNER ADS.) Before today, had you seen either of these online banner ads?

1. Yes
2. No
3. Unable to view online banner ads

[IF 3 in QE11, GO TO QE11a. ELSE, GO TO QE12.]

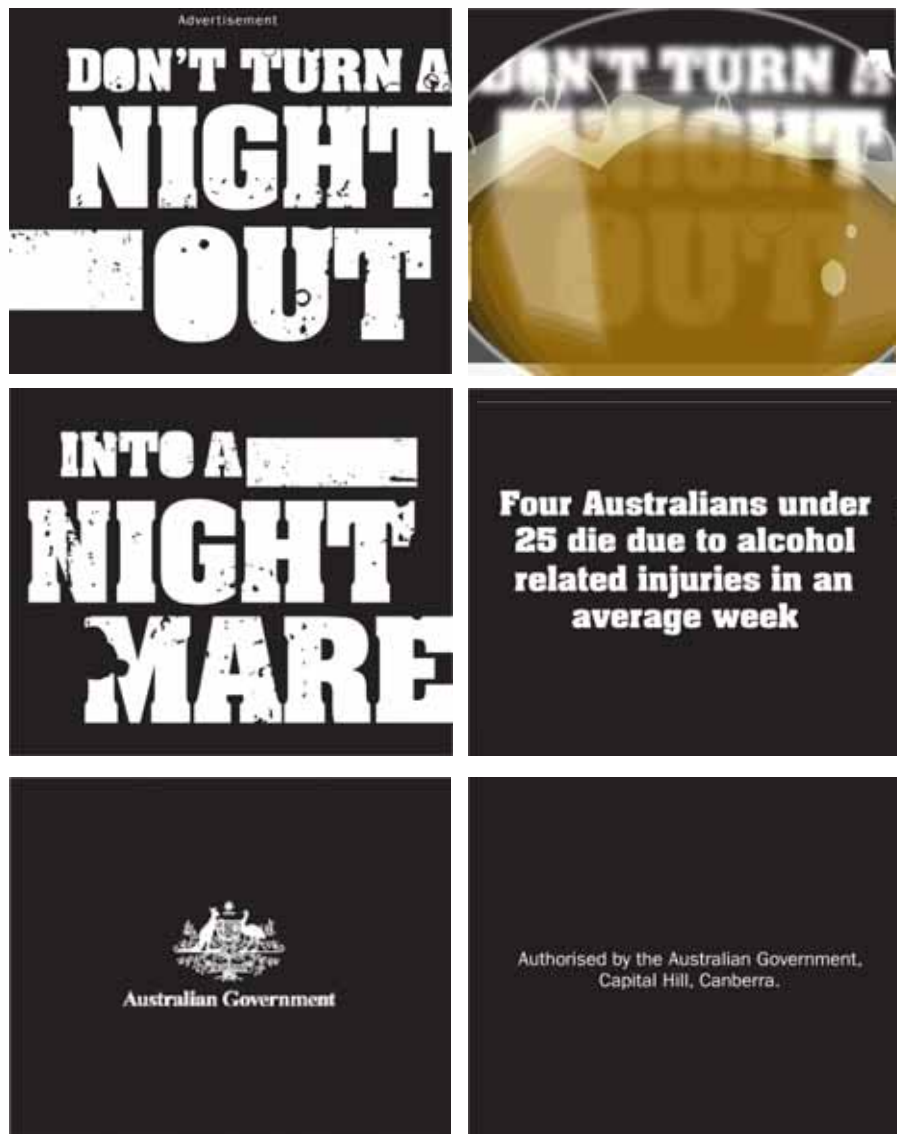
QE11a. The following are stills from two animated online ads.

[DISPLAY STILLS FROM ONE SQUARE AND ONE HORIZONTAL PRELEGAL ONLINE BANNER ADS
– EITHER SQUARE 1 AND HORIZONTAL 2, OR SQUARE 2 AND HORIZONTAL 1 - RANDOMISE]

Square ad 1:



Square ad 2:



Horizontal ad 1:



Horizontal ad 2:



Before today, had you seen either of these online banner ads?

1. Yes
2. No

QE13. (ASK OF THOSE WHO RECALL SEEING ANY ADS) Now, thinking about **all these ads you've seen or heard before today**, please rate your agreement with the following...

RANDOMISE	Strongly agree	Agree	Disagree	Strongly disagree
These ads made me think about the choices I make about drinking.				
These ads made me think about the negative things that can happen if I drink too much.				
These ads made me think about how drinking too much can ruin a good night out.				
These ads made me think about whether getting drunk is just harmless fun.				
These ads made me think about the acceptability of drinking too much.				
These ads made me think about the harm to others that could result from me drinking too much.				
These ads made me think about my chances of being hurt if I drink too much.				
These ads made me think about how much I am drinking.				
These ads made me think about how often I am drinking too much.				

QE14. (ASK OF THOSE WHO RECALL SEEING ANY ADS) Still, thinking about **all these ads you've seen before today**. In response to these ads, would you say you have:

1. Reduced your drinking
2. Increased your drinking
3. Made no change to your drinking

QE15 (ASK OF THOSE WHO RECALL SEEING ANY ADS) Has seeing these ads prompted you to...

RANDOMISE	YES	NO
Talk with your friends about the negative consequences of drinking.		
Talk with your friends about strategies to avoid the negative consequences of drinking.		

Talk with your parents about the negative consequences of drinking.		
Talk with your parents about strategies to avoid the negative consequences of drinking.		

DEMOGRAPHICS

Q40 Now some questions about you. Do you identify as **Aboriginal** or **Torres Strait Islander** descent?

1. No
2. Yes, Aboriginal
3. Yes, Torres Strait Islander
4. Yes, both Aboriginal and Torres Strait Islander

Q41 What is the main language spoken at home?

English	
Arabic (including Lebanese)	
Cantonese	
German	
Greek	
Italian	
Mandarin	
Serbian/Croatian	
Spanish	
Turkish	
Vietnamese	
Yugoslavian	
Other Asian Language	
Other European Language	
Other (Specify)	

Q42 Do you speak another language at home?

1. No (GO TO Q44)

2. Yes

Q43 [IF YES AT Q42] What other languages are spoken at home?

English	
Arabic (including Lebanese)	
Cantonese	
German	
Greek	
Italian	
Mandarin	
Serbian/Croatian	
Spanish	
Turkish	
Vietnamese	
Yugoslavian	
Other Asian Language	
Other European Language	
Other (Specify)	

Q44 Thinking about this year (2009), are you **studying** at school, university, TAFE or elsewhere?

1. Yes, full time
2. Yes, part time
3. No (GO TO Q46)

Q45 Where have you been studying this year?

1. Secondary school (years 7 to 12)
2. At technical school, commercial college or TAFE
3. At university or Institute of Technology
4. Other (specify)_____

Q46 What is the highest qualification that you have obtained?

1. No formal schooling
2. Year 9 or below
3. Year 10 or equivalent
4. Year 12 or equivalent
5. Trade certificate
6. Non-trade certificate
7. Associate Diploma

8. Undergraduate Diploma
9. Bachelor Degree
10. Master's Degree, Postgraduate Degree or Postgraduate Diploma
11. Doctorate

Q47 Are you currently in paid employment?

1. Yes, full time
2. Yes, part time
3. Yes, casual
4. No, I'm looking for work full time
5. No, I'm looking for work part time
6. No, I'm not looking for a paid job
7. No, I'm unable to work

Q48 Which of the following would best describe your household?

1. I live with my parent/s
2. I live alone
3. I live alone with my partner
4. I live with my partner and child(ren)
5. I am a single parent and live with my child(ren)
6. I share a house/apartment with friends/ others
7. Other household type

Q49 Was anyone else present at all when you were completing this questionnaire? *(Please tick that apply)*

1. No (CLOSE)
2. Yes, spouse or partner
3. Yes, parent(s)
4. Yes, older relative (e.g. aunt, grandparent)
5. Yes, child(ren) aged 0 – 5
6. Yes, child(ren) aged 6 – 17
7. Yes, child(ren) aged 18 or more
8. Yes, friend/peer/close-age sibling (brother or sister)

9. Yes, neighbour

10. Other

Thank you for completing this survey.

Please click on the >> button below to submit your answers, and receive xx points.

Please allow up to 7 days from our survey completion for points to be added to your account.

B

APPENDIX B: PARENT QUESTIONNAIRE APRIL 2009

INTRODUCTION

You are invited to participate in a survey on social issues and alcohol. The research is being conducted on behalf of the Australian Government.

As with all market and social research, the information and opinions provided will be used only for research purposes. All answers will remain anonymous and confidential. Individual responses will not be reported.

This survey will take approximately 15 minutes to complete. We would like to remind you that there are no right or wrong answers - it's your own thoughts and opinions that matter. Any comments you make will not be linked to you personally, but will be reported as a group.

Please take your time in completing this questionnaire thoroughly. For most questions, you will only need to click in a tick box with your mouse. Other questions will require you to type in a response or a value.

Please read each question and follow the instructions to record your reply.

Please DO NOT USE the 'Back' and 'Forward' buttons in the browser.

Please use the buttons at the bottom of each screen.

If you would like to pause the survey to return to it later, simply close the window and click on your original link to return.

Privacy Statement

You should be aware that your name and contact details will be removed from your responses to this survey once all surveying is complete. When this has been done we will no longer be able to identify you with the responses you provided. However, for the period that your name and contact details remain with your survey responses, which will be approximately two to four weeks, you are able to contact us to request that we delete all of your information. If you wish to do this, please email surveys@ipsos.com.au

Q1 Are you the parent or guardian of any teenagers aged 13-17 living in your household?

1. Yes

2. No (Terminate)

Q2 How many children aged 13-17 years are you the parent or guardian of? [RECORD NUMBER. IF ZERO, TERMINATE.]

☐

Q3 [IF ONLY ONE CHILD, THEY AUTOMATICALLY BECOME REFERENCE CHILD THROUGHOUT REST OF SURVEY.] What is the age and gender of this teenager? [BOX TO ENTER AGE AND A DROP DOWN TO SELECT MALE OR FEMALE]

Q4 [IF MORE THAN ONE CHILD] What is the age and gender of these teenagers aged 13-17?

[BOX TO ENTER AGE AND GENDER OF EACH CHILD]

Q5 [WHERE THERE IS AT LEAST ONE CHILD AGED 15-17 YEARS, AND FOR THOSE CASES WHERE WE ARE EITHER INVITING JUST THE CHILD TO PARTICIPATE, OR WHERE BOTH THE CHILD AND PARENT WILL PARTICIPATE] As part of this study on social issues and alcohol, the Australian Government is conducting an online survey with teenagers aged 15-17 years. The survey explores young people's attitudes and experiences with respect to alcohol, and it will take them roughly 20 to 25 minutes to complete. It will be used to evaluate health messages on this topic. It is important that we include the views of a wide range of teenagers.

Your [INSERT age of REFERENCE CHILD] year old [INSERT gender of REFERENCE CHILD male/female] has been randomly selected to take part in this research. Would you be willing to permit your [INSERT REFERENCE CHILD] year old teenager to participate in this research? Their answers will remain anonymous and confidential.

1. I allow my child to participate in the survey

2. I do not allow my child to participate in the survey

Q6a [IF ALLOWS] Thankyou. What is your [insert REFERENCE CHILDS age] year old [INSERT gender of REFERENCE CHILD male/female] teenager's first name?

Q7 Thank you. Please enter an email address for your child. The email address will only be used to provide a link to the survey and then will be deleted.

[BOX TO ENTER EMAIL ADDRESS, AND SECOND BOX TO CONFIRM EMAIL ADDRESS.]

Great, thanks. An email inviting your child to participant in this research will be sent to your child within the next few days. We will now begin the survey with you.

[REMAINING QUESTIONS ARE FOR THOSE PARENTS WHO ARE BEING INTERVIEWED]

Q8a Which of these regions best describes where you live?

Sydney	1	
Other NSW	2	
Melbourne	3	
Other Victoria	4	
Brisbane	5	
Other QLD	6	
Adelaide	7	
Other SA	8	
Perth	9	
Other WA	10	
Northern Territory	11	
Tasmania	12	
ACT	13	
Other	14	[Terminate]

Q9 What is your postcode?

■ ■ ■ ■ Not in Australia (Terminate)

LOGIC CHECK: PLEASE MATCH POSTCODE WITH ENTERED STATE AS PER BELOW.

(1000 thru 1999=NSW)
 (2000 thru 2599=NSW)
 (2619 thru 2898=NSW)
 (2921 thru 2999=NSW)
 (0200 thru 0299=ACT)
 (2600 thru 2618=ACT)
 (2900 thru 2920=ACT)
 (3000 thru 3999=VIC)
 (8000 thru 8999=VIC)
 (4000 thru 4999=QLD)
 (9000 thru 9999=QLD)
 (5000 thru 5799=SA)
 (5800 thru 5999=SA)
 (6000 thru 6797=WA)
 (6800 thru 6999=WA)
 (7000 thru 7799=TAS)
 (7800 thru 7999=TAS)
 (0800 thru 0899=NT)
 (0900 thru 0999=NT)

POSTCODES ENCOMPASSING TWO STATES:

P/C	SUBURB	STATE FROM POSTCODE	ACTUAL STATE
0872	ERNABELLA	NT	SA
0872	FREGON	NT	SA
0872	INDULKANA	NT	SA
0872	MIMILI	NT	SA
0872	NGAANYATJARRA-GILES	NT	SA
0872	FGIBSON DESERT NORTH	NT	WA
0872	FGIBSON DESERT SOUTH	NT	WA

2611	BRINDABELLA	ACT	NSW
2611	URIARRA	ACT	NSW
2620	HUME	NSW	ACT
2620	KOWEN FOREST	NSW	ACT
2620	OAKS ESTATE	NSW	ACT
2620	THARWA	NSW	ACT
2620	TOP NAAS	NSW	ACT
3500	PARINGI	VIC	NSW
3585	MURRAY DOWNS	VIC	NSW
3586	MALLAN	VIC	NSW
3644	BAROOGA	VIC	NSW
3644	LALALTY	VIC	NSW
3707	BRINGENBRONG	VIC	NSW

[IF POSTCODE IS VALID AUSTRALIAN POSTCODE BUT DOES NOT MATCH Q8a, REPEAT Q8a AND Q9 ON SAME PAGE WITH FOLLOWING INSTRUCTION/ERROR MESSAGE: "The postcode you have entered is not in the state you entered. Please review your answers carefully before hitting the >> button."]

[IF POSTCODE IS NOT A VALID AUSTRALIAN POSTCODE, REPEAT Q8a AND Q9 ON SAME PAGE WITH FOLLOWING INSTRUCTION/ERROR MESSAGE: "The postcode you have entered is not a valid Australian postcode. Please review your answers carefully before hitting the >> button."]

Q10 In the **last month**, have you seen, read or heard anything **in the media**, or any **advertising**, about teenagers and the risks when drinking alcohol? (Please tick all that apply)

1. Yes, in the media (such as news reports, editorial in newspapers or magazines)
2. Yes, advertising
3. No [SKIP TO Q13]
4. Don't know [SKIP TO Q13]

Q11 In the **last month**, where did you see, read or hear about teenagers and the risks when drinking alcohol? (Please tick all that apply) [MULTIPLE RESPONSE]

1. Television
2. Radio
3. Newspaper
4. Magazine
5. Online
6. Cinema
7. Somewhere else, specify _____

Q12 Please describe what you remember seeing, reading or hearing, and what was it telling you? Write down as many details as you can remember. If you saw more than one item, please describe all the items you saw.

Open ended response

- Q13 [IF Q2>1, PLEASE INCLUDE FOLLOWING TEXT. IF Q2=1, PLEASE EXCLUDE FOLLOWING TEXT: 'Your [age REFERENCE CHILD] year old [INSERT gender of REFERENCE CHILD male/female] has been randomly selected. Please think of this teenager when completing the survey.

For my [age of REFERENCE CHILD] year old [INSERT gender of REFERENCE CHILD male/female]...[SINGLE RESPONSE]

1. I wouldn't want [INSERT gender of REFERENCE CHILD him/her] to drink at all at this age
2. I'd be happy for [INSERT gender of REFERENCE CHILD him/her] to have a few sips of alcohol occasionally
3. I wouldn't mind if [INSERT gender of REFERENCE CHILD he/she] drinks in moderation, so long as he/she doesn't get drunk
4. I think it'd be ok for [INSERT gender of REFERENCE CHILD him/her] to get drunk now and then

- Q14 Do you think your [age of REFERENCE CHILD] year old [INSERT gender of REFERENCE CHILD male/female] teenager has ever had an alcoholic drink or even part of an alcoholic drink?

1. Yes
2. No [GO TO Q16]

- Q15 Do you think your [age of REFERENCE CHILD] year old [INSERT gender of REFERENCE CHILD male/female] teenager has ever been drunk?

1. Yes
2. No
3. Don't know, but it's likely
4. Don't know, but it's unlikely

- Q16 Thinking about Australian teenagers aged [reference child age], what percentage do you think would have got drunk in the last two weeks? (Please move the sliding bar across the line below. If your browser displays buttons, please select the appropriate button.)

0% 10 20 30 40 50 60 70 80 90 100%

No one _____ Everyone

- Q17 In the **last 3 months**, have you had any discussions with your [INSERT AGE OF REFERENCE CHILD] year old [INSERT gender of REFERENCE CHILD male/female] teenager about alcohol?

1. Yes
2. No [SKIP TO Q20]

3. Can't Say/Don't remember [SKIP TO Q20]

Q18 [IF YES AT Q17] What in particular prompted that/those discussion/s with your [insert age of REFERENCE CHILD] year old [insert gender of reference child male/female] teenager? Please tick all that apply (RANDOMISE. ACCEPT MULTIPLES)

1. Teenager was going to parties, or to a place where there was alcohol
2. Just general discussion
3. Teenager's friends/peers are allowed to drink
4. I saw something on TV or the news
5. Caught, noticed and/or found out your teenager was drinking
6. Teenager asked for a drink
7. Teenager was offered a drink in my presence
8. Advertising on television/ series of ads
9. Other (specify)

Q19 In this/these discussion/s, what did you talk about with your [insert age of reference person] year old [insert gender reference child male/female] teenager? Please tick all that apply (RANDOMISE. ACCEPT MULTIPLES)

1. The dangers, hazards and harmful effects of alcohol
2. The legal drinking age or that they are not old enough to drink
3. Don't drink too much
4. Be careful and responsible if you are drinking
5. Not to drink
6. Don't drink and drive
7. Don't be a passenger in a car where the driver has been drinking
8. The risk of being vulnerable to violence and injury
9. How you can still have a good time without drinking too much
10. Having confidence to make your own choices and resist peer pressure
11. Other (specify)

Q20 Over the last 3 months, have you provided your [INSERT AGE OF REF CHILD] year old [INSERT gender of REFERENCE CHILD male/female]] teenager with... (Please record an answer on every line.)

[RANDOMISE]

	Yes	No
alcohol at home, on a special occasion?	1	2
alcohol at home on everyday occasions, such as over an evening meal?	1	2
alcohol for a party or other social event where there is adult supervision?	1	2

alcohol for a party or other social event where there is **no** 1 2
adult supervision?

Q21 If your [age of REFERENCE CHILD] year old [INSERT gender of REFERENCE CHILD male/female] teenager drank too much alcohol, how likely or unlikely do you think it is that they would ...(randomise)

	Very unlikely	Unlikely	Likely	Very likely
1. become violent and aggressive				
2. have sex they later regret or wished they hadn't had				
3. forget where they were and what they did				
4. seriously hurt or injure themselves				
5. get into a serious argument				
6. get into trouble with the police				
7. be verbally abused or threatened				
8. be shoved, hit or assaulted				
9. [IF REFERENCE CHILD FEMALE] accidentally get pregnant [IF REFERENCE CHILD MALE] accidentally get someone pregnant				
10. do things that made them feel embarrassed or humiliated				
11. catch an STD/STI through unprotected sex				
12. be photographed in an embarrassing situation				

Q22 We would now like to ask you some questions about yourself. The following shows the number of standard drinks for different types of alcohol, for different sized containers.



Q23a In the **last 3 months**, how often have you had **11 or more standard drinks** in a single day? (If you answer 'Every day' for one of the questions in this section, you must answer 'Not in the last three months' for the other questions in this section.)

1. Not in the last 3 months
2. Less often than one day a month
3. About 1 day a month
4. 2-3 days a month
5. 1-2 days a week
6. 3-4 days a week
7. 5-6 days a week
8. Every day

Q23b In the **last 3 months**, how often have you had **7-10 standard drinks (but no more)** in a single day? (If you answer 'Every day' for one of the questions in this section, you must answer 'Not in the last three months' for the other questions in this section.)

1. Not in the last 3 months
2. Less often than one day a month
3. About 1 day a month
4. 2-3 days a month
5. 1-2 days a week

6. 3-4 days a week
7. 5-6 days a week
8. Every day

Q23c In the **last 3 months**, how often have you had **5-6 standard drinks (but no more)** in a single day? (If you answer 'Every day' for one of the questions in this section, you must answer 'Not in the last three months' for the other questions in this section.)

1. Not in the last 3 months
2. Less often than one day a month
3. About 1 day a month
4. 2-3 days a month
5. 1-2 days a week
6. 3-4 days a week
7. 5-6 days a week
8. Every day

Q23d In the **last 3 months**, how often have you had **3-4 standard drinks (but no more)** in a single day? (If you answer 'Every day' for one of the questions in this section, you must answer 'Not in the last three months' for the other questions in this section.)

1. Not in the last 3 months
2. Less often than one day a month
3. About 1 day a month
4. 2-3 days a month
5. 1-2 days a week
6. 3-4 days a week
7. 5-6 days a week
8. Every day

Q23e In the **last 3 months**, how often have you had **1-2 standard drinks (but no more)** in a single day? (If you answer 'Every day' for one of the questions in this section, you must answer 'Not in the last three months' for the other questions in this section.)

1. Not in the last 3 months
2. Less often than one day a month
3. About 1 day a month
4. 2-3 days a month
5. 1-2 days a week
6. 3-4 days a week
7. 5-6 days a week
8. Every day

[LOGIC CHECK FOR Q23a-Q23e: IF R8 IN ANY ONE QUESTION, THEN ONLY R1 SHOULD BE CHECKED IN ALL OTHERS. IF THIS IS NOT THE CASE, DISPLAY REPEAT OF QUESTIONS Q23a-Q23e ON ONE PAGE, PRECEDED BY THE FOLLOWING TEXT]

The combination of answers you have given is not possible. If you answer 'Every day' for one of the questions in this section, you must answer 'Not in the last three months' for the other questions in this section. Please review your answers carefully before hitting the next button.

Campaign evaluation

ROTATE TVCs

Next we are going to show you a full television commercial.

[SHOW FLASH ID TVC1 – 15–17]

When the commercial has finished please enter the 4 digit number on your screen and then click the >> button to continue. If you can't view the commercial enter 0000.

[IF 0000 ENTERED, SKIP TO QE4a. IF CODE OTHER THAN DEFINED CODE ENTERED SKIP TO QE4a]

QE1. Before today, had you seen this particular ad?

1. No [SKIP TO QE4]
2. Yes, once
3. Yes, 2-3 times
4. Yes, 4-5 times
5. Yes, 6 or more times
6. Unable to view TV Commercial on this computer

[IF 6 IN QE1, GO TO QE1a. ELSE GOT TO QE2]

QE1a. These images are still frames from a TV commercial.

[SHOW STILLS FROM TVC1]



Before today, had you seen this particular ad?

1. No [SKIP TO QE4]
2. Yes, Once
3. Yes, 2-3 times
4. Yes, 4-5 times

5. Yes, 6 or more times

QE2. Please rate your agreement with the following...

RANDOMISE	Strongly agree	Agree	Disagree	Strongly disagree
The ad was believable				
The ad was confronting				
The ad was attention-grabbing				
The ad was informative				

QE3. (ASK THOSE WHO HAVE SEEN TVC1) Where did you see this particular ad before today? Please tick all that apply. (RANDOMISE. ACCEPT MULTIPLES)

1. Television
2. Movies
3. Internet
4. Other (Please specify)_____

ROTATE TVCs

Next we are going to show you a full television commercial.

[FLASH ID FINISHED VERSION TVC2 – 18-25]

When the commercial has finished please enter the 4 digit number on your screen and then click the >> button to continue. If you can't view the commercial enter 0000.

[IF 0000 ENTERED, SKIP TO QE4a. IF CODE OTHER THAN DEFINED CODE ENTERED SKIP TO QE4a]

QE4. Before today, had you seen this particular ad?

1. No [SKIP TO QE7]
2. Yes, Once
3. Yes, 2-3 times
4. Yes, 4-5 times
5. Yes, 6 or more times
6. Unable to view TV Commercial on this computer

[IF 6 IN QE1, GO TO QE1a. ELSE GOT TO QE2]

QE4a. These images are still frames from a TV commercial.

[SHOW STILLs FROM TVC2]



Before today, had you seen this particular ad?

1. No [SKIP TO QE7]
2. Yes, Once
3. Yes, 2-3 times
4. Yes, 4-5 times

5. Yes, 6 or more times

QE5. Please rate your agreement with the following...

RANDOMISE	Strongly agree	Agree	Disagree	Strongly disagree
The ad was believable				
The ad was confronting				
The ad was attention-grabbing				
The ad was informative				

QE6. (ASK THOSE WHO HAVE SEEN TVC2) Where did you see this particular ad before today? Please tick all that apply. (RANDOMISE. ACCEPT MULTIPLES)

1. Television
2. Movies
3. Internet
4. Other (Please specify)_____

QE7. ROTATE RADIO EXECUTIONS

Please listen to this radio ad.

When the ad has finished please enter the 4 digit number on your screen and then click the >> button to continue. If you can't hear anything please enter the code 0000.

[FLASH ID FINISHED VERSION RADIO AD 1 – ARREST]

[FLASH – This sound file will only play ONCE. Please ensure your speakers are switched on and the volume turned up. When you are ready, please press the play button below.]

[IF 0000 ENTERED, SKIP TO QE7a. IF CODE OTHER THAN DEFINED CODE ENTERED SKIP TO QE7a]

Before today, had you heard this ad?

1. Yes
2. No
3. Unable to hear this ad on my computer.

[IF 3 in QE7, GO TO QE7a. ELSE, GO TO QE8]

QE7a. The following is a description of a radio ad:

A policeman is talking to a clearly drunk young man.

Policeman: "The Paramedics have just informed me that your mate Simon hasn't made it"

Young man: "[Drunken mumbling...] this can't be happening"

Policeman: "You're clearly under the influence of alcohol and you are going to have to come with me to the police station"

Young man: "What! Why?"

Policeman: "Because you are under arrest mate and I need you to listen to me very carefully"

Young man: "But it was an accident, we just had a few drinks, I didn't think I punched him that hard"

Policeman: "You don't have to say or do anything but I will...(fades)"

Voice over: **"Four Australians aged between 18-25 die due to alcohol related injuries in an average week. Don't turn a night out into a nightmare."**

Before today, had you heard this ad?

1. Yes
2. No

QE8. ROTATE RADIO EXECUTIONS

Please listen to this radio ad.

When the ad has finished please enter the 4 digit number on your screen and then click the >> button to continue. If you can't hear anything please enter the code 0000.

[FLASH ID FINISHED VERSION RADIO AD 2 – EMERGENCY ROOM]

[FLASH – This sound file will only play ONCE. Please ensure your speakers are switched on and the volume turned up. When you are ready, please press the play button below.]

[IF 0000 ENTERED, SKIP TO QE8a. IF CODE OTHER THAN DEFINED CODE ENTERED SKIP TO QE8a]

Before today, had you heard this ad?

1. Yes
2. No
3. Unable to hear this ad on my computer.

[IF 3 in QE8, GO TO QE8a. ELSE, GO TO QE9]

QE8a. The following is a transcript of a radio ad:

A ring tone is heard through a telephone, and a middle-aged mother answers. The dialler is a clearly distressed young man.

Mother: "Hello?"

Young man: "Mrs Parker, it's Jack."

Mother: "Jack? Do you know what time it is?"

Young man: "Leo and me... we're at hospital."

Mother: "Hospital? What do you mean?"

Young man: "We were just having a few drinks and..."

Mother: "What do you mean having a few drinks?"

Young man: "Doctor says you'd better come in."

Mother: "Jack, what's happened to Leo?"

Young man: "Please just hurry."

Voice Over: **"Seventy Australians aged under 25 will be hospitalised due to alcohol caused assault in an average week, don't turn a night out into a nightmare."**

Before today, had you heard this ad?

1. Yes
2. No

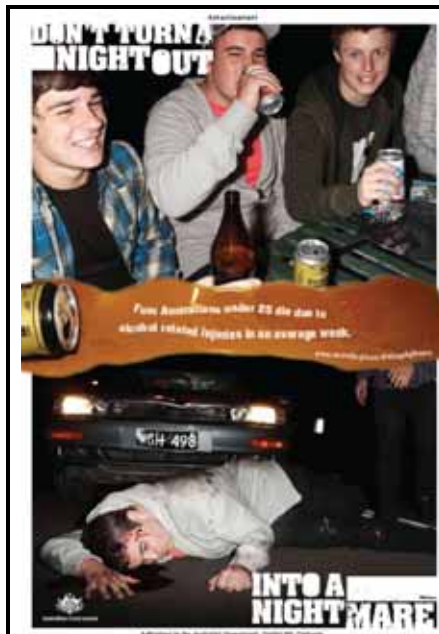
QE9. PRINT/AMBIENT/ONLINE

(Show all print/ambient ads)

There are four print ads, two on this page, and two on the next page Please scroll down to ensure you can see both ads on this page. Before today, which of these ads had you seen?

RANDOMISE ORDER

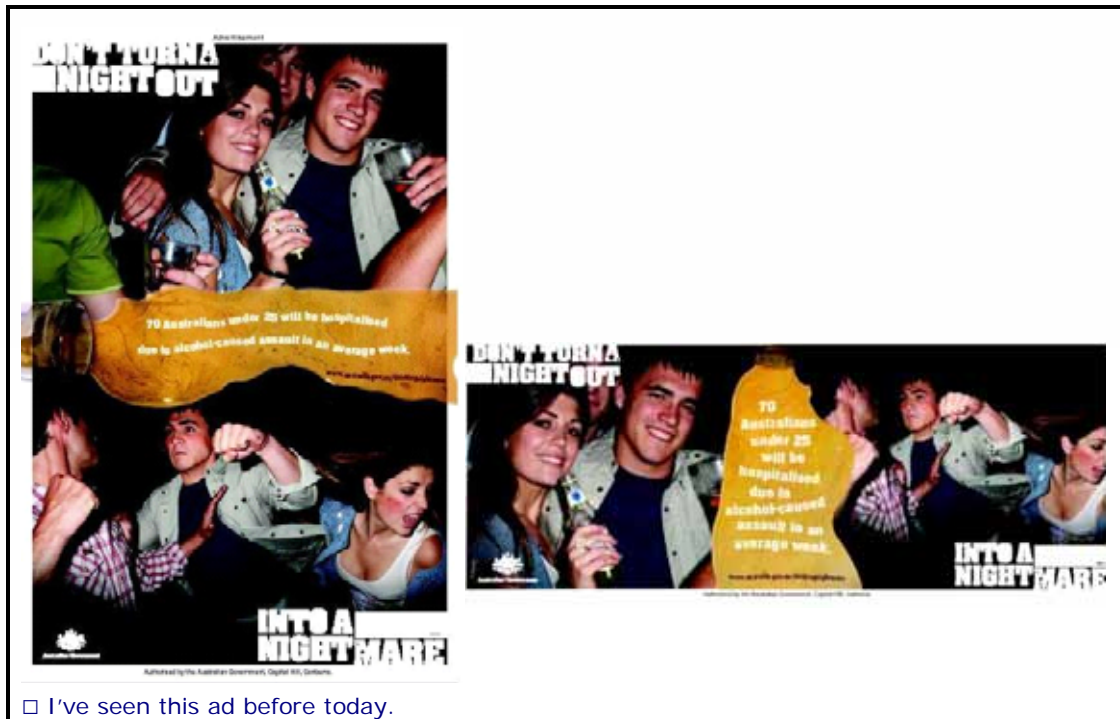
1. Pedestrian Accident (horizontal and vertical)
2. Party Bushes (horizontal and vertical)
3. Pub Fight (horizontal and vertical)
4. Coffee table (horizontal and vertical)



☐ I've seen this ad before today.



☐ I've seen this ad before today.



☐ I've seen this ad before today.



☐ I've seen this ad before today.

QE10. (FOR EACH SELECTED) Where did you see this ad? Please tick all that apply
(RANDOMISE. ACCEPT MULTIPLES)

1. Newspaper or Street Press
2. Magazine
3. Posters (e.g. at a bus stop or shopping centre panel)
4. On the side of a bus or inside a bus, train, tram or ferry
5. Avant Cards
6. Other (Please specify)

QE11. (SHOW ONE SQUARE AND ONE HORIZONTAL PRELEGAL ONLINE BANNER ADS.) Before today, had you seen either of these online banner ads?

1. Yes
2. No
3. Unable to view online banner ads

[IF 3 in QE11, GO TO QE11a. ELSE, GO TO QE12.]

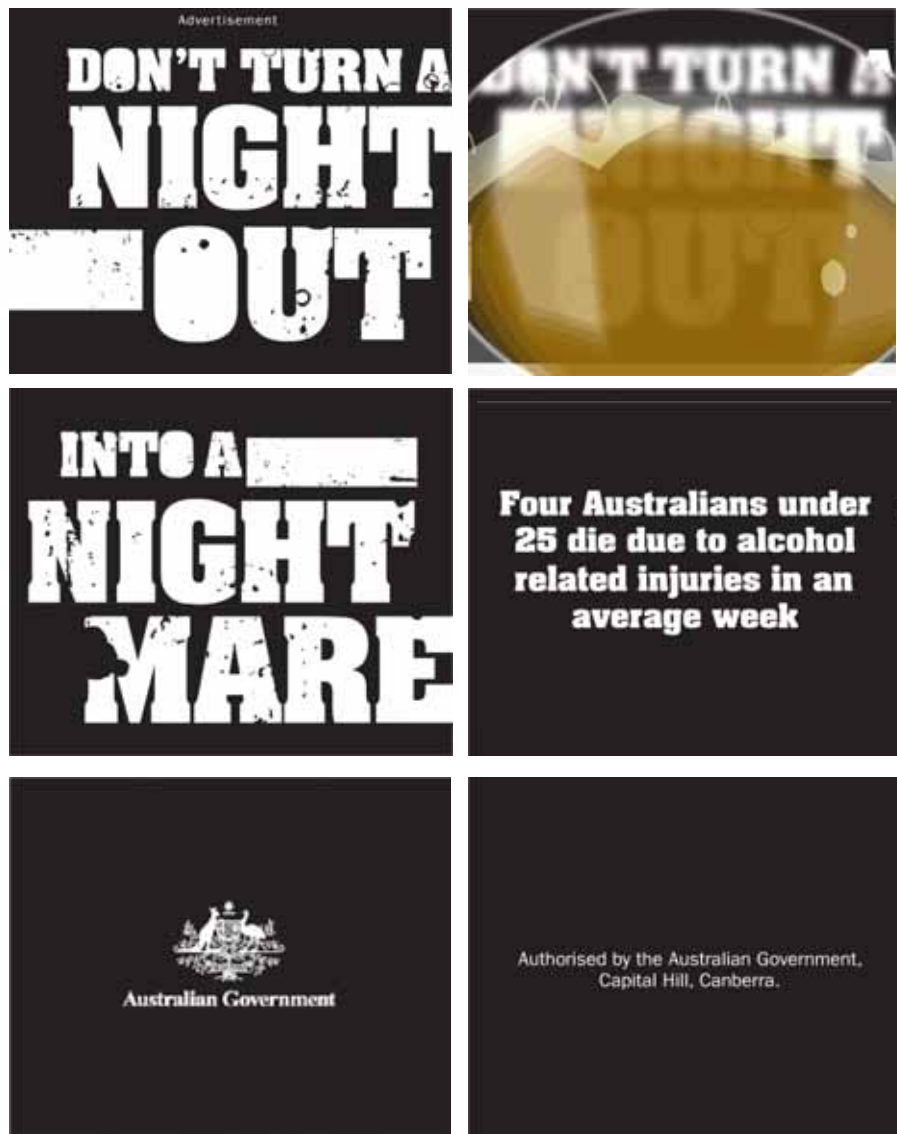
QE11a. The following are stills from two animated online ads.

[DISPLAY STILLS FROM ONE SQUARE AND ONE HORIZONTAL PRELEGAL ONLINE BANNER ADS
– EITHER SQUARE 1 AND HORIZONTAL 2, OR SQUARE 2 AND HORIZONTAL 1 - RANDOMISE]

Square ad 1:



Square ad 2:



Horizontal ad 1:



Horizontal ad 2:



Before today, had you seen either of these online banner ads?

1. Yes
2. No

QE12 (Show brochure) Before today, had you seen this brochure?

Alcohol and young people: A guide for parents

On average, 1 in 4 teenagers consume 10 or more drinks on one occasion, or 10 or more drinks on one occasion (the every National Drug Strategy Household Survey, 2007).

How many teenagers are drinking?

Alcohol consumption amongst teenagers is a concern. According to the every National Drug Strategy Household Survey, over 10% of 14 to 19 year olds consume alcohol on a weekly basis.

How much are teenagers drinking?

Amongst teenagers drinking, 10% of males aged 14 to 19 had consumed 10 or more drinks on one occasion, and 10% of females in the same age group had consumed 10 or more drinks on one occasion (the every National Drug Strategy Household Survey, 2007).

How harmful is it?

Alcohol is a potent drug that depresses the central nervous system and changes the way people think and feel. Teenagers can be more vulnerable to the effects of alcohol because they have not built up physical tolerance. They also lack drinking experience and are less able to judge their own levels of intoxication. Most young people are smaller than adults and so alcohol can have a greater effect. There is some new evidence that developing minds and bodies may be more vulnerable to the negative effects of alcohol. The earlier a young person begins unsupervised drinking, the greater the risk of alcohol-related problems in later life.

A recent study has shown approximately 10% of 14 to 19 year olds drink at levels that risk harm to the short term (the every National Drug Strategy Household Survey).

The consequences of intoxication can include:

Alcohol-related harm experienced by teenagers in the short term are significant. The most common alcohol attributable causes of death and hospitalisations among teenagers include road injury, suicide, assault, pedestrian road injury and other accidents such as falls and drowning.

What can I do?

As a parent you play an important role in educating your teenager about alcohol and helping them to develop a responsible attitude towards drinking. It's never too early to start talking to your children about the effects of alcohol, and this helps to keep the lines of communication open down the track.

What about peer pressure—how do I deal with that?

Adolescence is a time of huge change for young people, which can leave them feeling vulnerable.

You can help your teenager to develop confidence in dealing with things. The peer pressure is a good way to begin might be to talk play some typical scenarios, or you can:

- Help your teenager to say 'no' to alcohol when there is pressure to drink.
- Stress the importance of never getting into a car with a driver who has been drinking. Agree on a plan if this situation ever arises, which may include paying for a taxi when they get home, picking them up, or allowing them to stay overnight at a friend's place if that is not possible.
- Talk about the dangers of drink driving and how they can protect themselves.
- Discuss what to do if a friend is intoxicated.

What if my teenager comes home drunk?

Although you might want to talk to them about it immediately, especially if you're upset or angry, wait until they're sober so you can have a rational discussion. At that time, reinforce the rules that have been broken, your disappointment and the consequences.

Your drinking, their drinking

From an early age your child will be aware of alcoholic drinks and patterns of drinking in your home. Let them observe you modelling sensible drinking habits, such as:

- Sometimes refusing a drink when offered.
- Not always using alcohol to celebrate occasions or occasions, "I need a drink" when you're dealing with a stressful period.
- Not drinking to intoxication.
- Not drinking and driving.

What can I do if my teenager is planning a party?

- Be involved in the planning—discuss the ground rules before the party is announced.
- Agree on whether alcohol will be allowed.
- If alcohol is to be allowed, ensure you provide low alcohol and non-alcoholic alternatives, as well as plenty of food.
- Make sure there is some type of adult supervision.
- Emphasise that excessive drinking will not be tolerated and agree on a plan for dealing with someone who is drunk or sick.
- Uninvited guests (gatecrashers) are a growing problem. Check out Party Safe programs in your State or visit www.australia.gov.au/drinkingnightmare for more information on safe partying.
- Plan how guests will get home.
- Talk to other parents about their teenager's parties for advice.

DON'T TURN A NIGHT OUT INTO A NIGHTMARE

Australian Government

For more information go to www.australia.gov.au/drinkingnightmare

1. Yes
2. No

QE13. (ASK OF THOSE WHO RECALL SEEING ANY ADS) Now, thinking about **the ads you've seen or heard before today**, please rate your agreement with the following...

RANDOMISE	Strongly agree	Agree	Disagree	Strongly disagree
These ads made me think about the choices my [INSERT AGE OF REFERENCE CHILD] year old [INSERT gender of REFERENCE CHILD male/female] teenager makes about drinking.				
These ads made me think about the negative things that can happen if my [INSERT AGE OF REFERENCE CHILD] year old [INSERT gender of REFERENCE CHILD male/female] teenager drinks too much.				
These ads made me think about whether getting drunk is just harmless fun.				
These ads made me think about the acceptability of drinking too much.				
These ads made me think about the harm to others that could result from my [INSERT AGE OF REFERENCE CHILD] year old [INSERT gender of REFERENCE CHILD male/female] teenager drinking too much.				
These ads made me think about the chances of my [INSERT AGE OF REFERENCE CHILD] year old [INSERT gender of REFERENCE CHILD male/female] teenager being hurt if they drink too much.				
These ads made me think about how much I am drinking.				
These ads made me think about how often I am drinking too much.				

QE14. (ASK OF THOSE WHO RECALL SEEING ANY ADS) Still, thinking about **the ads you've seen or heard before today**. In response to these ads, would you say you have:

1. Reduced your drinking
2. Increased your drinking
3. Made no change to your drinking

QE15. (IF SEEN ANY ADS) And what, if any, of these things have you done in response to these ads? Please answer in respect of your [INSERT AGE OF REFERENCE CHILD] year old [INSERT GENDER OF REFERENCE CHILD male/female] teenager. [PROVIDE SPACE FOR YES/NO FOR EACH] (Randomise)

1. Talked with [INSERT GENDER OF REFERENCE CHILD him/her] about the negative consequences of drinking
2. Talked with [INSERT GENDER OF CHILD him/her] about not drinking
3. Talked with [INSERT GENDER OF REFERENCE CHILD him/her] about strategies to avoid the negative consequences of drinking
4. Talked with [INSERT GENDER OF REFERENCE CHILD him/her] about drinking only with parental supervision
5. Set a good example and demonstrated responsible drinking
6. Talked with [INSERT GENDER OF REFERENCE CHILD him/her] about being responsible and drinking in moderation
7. Kept an eye on [INSERT GENDER OF REFERENCE CHILD him/her]; know who [INSERT GENDER OF REFERENCE CHILD he/she] goes out with and where [INSERT GENDER OF REFERENCE CHILD he/she] goes
8. Prevented [INSERT GENDER OF REFERENCE CHILD him/her] from going to places where there will be alcohol
9. Talked with [INSERT GENDER OF REFERENCE CHILD him/her] about INSERT GENDER OF REFERENCE CHILD his/her] ability to buy and/or access alcohol
10. Talked with [INSERT GENDER OF REFERENCE CHILD him/her] about activities which do not involve drinking

Q24 What is your current age? (i.e. the age you turned at your last birthday)

Q25 Are you ...

1. Male
2. Female

Q26 Which of the following would best describe your household?

1. Couple with children/child
2. Single parent with children/child
3. Sharing house/apartment with friends (non related adults)
4. Other household type, please specify

Q27 What is the highest qualification that you have obtained? (Mark one response only)

1. Year 9 or below
2. Year 10 or equivalent
3. Year 12 or equivalent
4. Trade certificate
5. Non-trade certificate
6. Associate Diploma
7. Undergraduate
8. Bachelor Degree
9. Master's Degree, Postgraduate Degree or Postgraduate Diploma
10. Doctorate

Q28 Are you now in paid employment?

1. Yes, full time
2. Yes, part time
3. Yes, casual
4. No, I'm looking for work full time
5. No, I'm looking for part time work
6. No, I'm not looking for a paid job
7. No, I'm unable to work

Q29 What is the combined annual income for your household, before tax, from all sources?
(Mark one response only)

1. \$145,600 or more (\$2,800 or more/week)
2. \$104,000 – \$145,599 (\$2,000 – \$2,799/week)
3. \$83,200 – \$103,999 (\$1,600 – \$1,999/week)
4. \$67,600 – \$83,199 (\$1,300 – \$1,599/week)
5. \$52,000 – \$67,599 (\$1,000 – \$1,299/week)
6. \$41,600 – \$51,999 (\$800 – \$999/week)
7. \$31,200 – \$41,599 (\$600 – \$799/week)
8. \$20,800 – \$31,199 (\$400 – \$599/week)
9. \$13,000 – \$20,799 (\$250 – \$399/week)
10. \$7,800 – \$12,999 (\$150 – \$249/week)
11. \$1 – \$7,799 (\$1 – \$149/week)
12. Nil Income
13. Negative Income
97. Prefer not to say
99. Don't know

Q30. [Ask if reference child is aged 13-14 years AND parent has at least one child 15-17 yrs].
As part of this study on social issues and alcohol, the Australian Government is conducting an online survey with teenagers aged 15-17 years. The survey explores young people's attitudes and experiences with respect to alcohol, and it will take them roughly 20 to 25 minutes to

complete. It will be used to evaluate health messages on this topic. It is important that we include the views of a wide range of teenagers.

[RANDOMLY SELECT CHILD 15-17 yrs FROM INFORMATION PROVIDED IN Q3].

Your (insert age of selected 15-17 year old) year old [insert gender of selected 15-17 year old male/female] has been randomly selected to take part in this research. Would you be willing to permit your (insert randomly selected 15-17 yr old) to participate in this research? Their answers will remain anonymous and confidential. **[IF PARENT HAS MORE THAN ONE CHILD THIS AGE AND GENDER ASK TO THINK OF THE ELDEST OF THESE CHILDREN].**

1. I allow my child to participate in the survey
2. I do not allow my child to participate in the survey

Q31 [IF ALLOWS] Thankyou. What is your [insert of selected 15-17 year olds age] year old [INSERT gender of selected 15-17 year old male/female] teenager's first name?

Q32 Thank you. Please enter an email address for your child. The email address will only be used to provide a link to the survey and then will be deleted.

[PROVIDE BOX TO ENTER EMAIL ADDRESS, AND SECOND BOX TO CONFIRM EMAIL ADDRESS.]

Thanks, an email inviting your child to participate in this research will be sent to your child within the next few days.

That's the end of the survey. Thank you for participating. Your answers will assist the Australian Government to evaluate its alcohol and young people campaign.

ALTERNATIVE INTRODUCTION

Your family is invited to participate in a survey on social issues and alcohol. The research is being conducted on behalf of the Australian Government.

As with all market and social research, the information and opinions provided will be used only for research purposes. All answers will remain anonymous and confidential. Individual responses will not be reported.

Your part in this survey will take no more than a minute to complete. We have already spoken to a number of parents of teenagers aged 15-17 and now wish to obtain parental approval to send a survey link to teenagers directly.

Please read each question and follow the instructions to record your reply.

Please DO NOT USE the 'Back' and 'Forward' buttons in the browser.

Please use the buttons at the bottom of each screen.

If you would like to pause the survey to return to it later, simply close the window and click on your original link to return.

Privacy Statement

You should be aware that your name and contact details will be removed from your responses to this survey once all surveying is complete. When this has been done we will no longer be able to identify you with the responses you provided. However, for the period that your name and contact details remain with your survey responses, which will be approximately two to four weeks, you are able to contact us to request that we delete all of your information. If you wish to do this, please email surveys@ipsos.com.au

Q1 Are you the parent or guardian of any teenagers aged 15-17 living in your household?

1. Yes
2. No (Terminate)

Q2 How many children aged 15-17 years are you the parent or guardian of? [RECORD NUMBER. IF ZERO, TERMINATE.]

Q3 [IF ONLY ONE CHILD, THEY AUTOMATICALLY BECOME REFERENCE CHILD THROUGHOUT REST OF SURVEY.] What is the age and gender of this teenager? [PROVIDE A BOX TO ENTER AGE AND A DROP DOWN TO SELECT MALE OR FEMALE]

1. Male
2. Female

Q4 [IF MORE THAN ONE CHILD] What is the age and gender of these teenagers aged 15-17?

[PROVIDE BOX TO ENTER AGE AND GENDER OF EACH CHILD]

Q5 [WHERE THERE IS AT LEAST ONE CHILD AGED 15-17 YEARS, AND FOR THOSE CASES WHERE WE ARE EITHER INVITING JUST THE CHILD TO PARTICIPATE, OR WHERE BOTH THE CHILD AND PARENT WILL PARTICIPATE] As part of this study on social issues and alcohol, the Australian Government is conducting an online survey with teenagers aged 15-17 years. The survey explores young people's attitudes and experiences with respect to alcohol, and it will take them roughly 20 to 25 minutes to complete. It will be used to evaluate health messages on this topic. It is important that we include the views of a wide range of teenagers.

Your [INSERT age of REFERENCE CHILD] year old [INSERT gender of REFERENCE CHILD male/female] has been randomly selected to take part in this research. Would you be willing to permit your [INSERT REFERENCE CHILD] year old teenager to participate in this research? Their answers will remain anonymous and confidential.

I allow my child to participate in the survey

I do not allow my child to participate in the survey

Q6a [IF ALLOWS] Thankyou. What is your [insert REFERENCE CHILDS age] year old [INSERT gender of REFERENCE CHILD male/female] teenager's first name?

Q7 Thank you. Please enter an email address for your child. The email address will only be used to provide a link to the survey and then will be deleted.

[PROVIDE BOX TO ENTER EMAIL ADDRESS, AND SECOND BOX TO CONFIRM EMAIL ADDRESS.]

Great, thanks. An email inviting your child to participant in this research will be sent to your child within the next few days. We will now begin the survey with you.

C

APPENDIX C: STANDARD DRINK CONVERSION FORMULAS

The formula for calculating standard drinks:

$$\text{Volume of container in litres} * \% \text{ alcohol by volume (ml/100ml)} * 0.789 = \text{The number of standard drinks}$$

Note: The specific gravity of ethyl alcohol is:

0.79

BEER		Beer cans (375-440ml)	Small beer bottle (330- 375ml)	Large beer bottle (approx 750ml)	Small beer glass (210ml)	Medium beer glass (285 ml)		Large Beer glass (425 ml)	
% alc/vol assumed		0.38	0.38	0.75	head 0.21	no head 0.18	head 0.29	no head 0.26	head 0.43
4.9	Home-brewed	1.45	1.45	2.90	0.81	0.70	1.10	1.00	1.64
4.9	Regular Strength	1.45	1.45	2.90	0.81	0.70	1.10	1.00	1.64
3.35	Mid Strength	0.99	0.99	1.98	0.56	0.48	0.75	0.68	1.12
2.65	Low alcohol	0.78	0.78	1.57	0.44	0.38	0.60	0.54	0.89

WINE		Small wine bottle (375ml)	Large wine bottle (750ml)	Small wine glass (120ml)	Medium Wine Glass (180ml)	Large Wine Glass (220ml)
% alc/vol assumed		0.38	0.75	0.12	0.18	0.22
12.95	Home made	3.83	7.66	1.23	1.84	2.25
11.35	Cask	3.36	6.72	1.07	1.61	1.97
12.95	Bottle	3.83	7.66	1.23	1.84	2.25

WINE COOLER		Small bottle (250ml)	Large bottle (750ml)	Small wine glass (120ml)	Medium Wine Glass (180ml)	Large Wine Glass (220ml)
% alc/vol assumed		0.25	0.75	0.12	0.18	0.22
3.5	Coolers	0.69	2.07	0.33	0.50	0.61

PRE-MIXED Spirits		Cans (375 ml)	Bottles (300ml)	Large bottle (650ml)
% alc/vol assumed		0.38	0.30	0.65
5	Pre mixed Spirits	1.48	1.18	2.56

SPIRITS (straight)		Mini bottle (50ml)	Small bottle (350ml)	Large bottle (700ml)	One Nip (30ml)	Two nips (60ml)	Three nips (90ml)
% alc/vol assumed		0.05	0.35	0.70	0.03	0.06	0.09
41.7	Bottle spirits/liquers	1.65	11.52	23.03	0.99	1.97	2.96

ALCOHOLIC SODA		Small bottle (250ml)	Small bottle (330ml)	Small beer glass (210ml)	Medium beer glass (285 ml)	Large Beer glass (425 ml)
% alc/vol assumed		0.25	0.33	0.21	0.29	0.43
5	Alcoholic Soda	0.99	1.30	0.83	1.12	1.68

D

APPENDIX D: SUMMARY OF STATISTICAL TERMS

Analysis of Variance (ANOVA) is a statistical technique used to measure and test differences between the mean scores of three or more groups of respondents responding to questions which require interval or ratio data.

Categorical data sets contain pieces of information (i.e. values or observations) that can be sorted into discrete groups. An example of categorical data is whether a respondent is female (group 1) or male (group 2).

Chi-square tests are used to measure and test differences between proportions of respondents in different groups in how they have answered questions which generate categorical or ordinal data.

Interval data are pieces of information measured by asking respondents to rank concepts on a numerical scale with equal intervals, and where the scale does not have a natural zero. Examples of interval data are those gathered in questions which ask respondents to rate on a scale of 1 to 5 how bad they would feel if they were to experience certain alcohol-related consequences.

Kendall's tau-b is a measure of correlation for ordinal or ranked variables; or, in other words, is a form of significance testing for testing the relationship between ordinal data generated by various groups of respondents. In this report, it is used to measure correlation between waves of research and ordinal data. Where data is only available for one wave, Kendall's tau-b is used to measure correlation between age (across three ordinal categories, 15-17 years, 18-21 years and 22-25 years) and ordinal data. Significant relationships are reported where appropriate.

Mean is the average score given to scores derived through gathering interval or ratio data. Means are derived by adding all scores given by respondents (excluding those who did not answer), then dividing them by the total number of respondents who answered.

Ordinal data are pieces of information measured by asking respondents to respond to questions which ask for rankings which have a logical order, but are not separated by equal intervals. Examples of ordinal data are those gathered in questions which ask whether respondents strongly disagree, disagree just a little, agree just a little or strongly agree with a statement.

Ratio data sets contain pieces of information that lie along a continuous scale which has a natural zero and where differences and ratios are interpretable. Examples of ratio data are those gathered in questions asking respondents to indicate how many glasses or bottles of different types of alcohol were consumed the last time they drank alcohol.

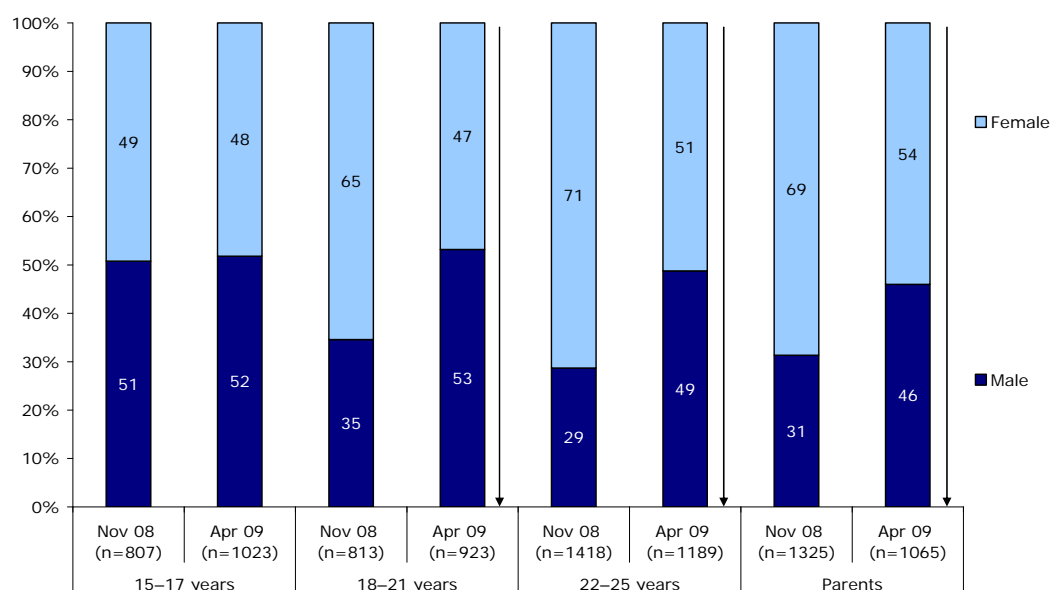
Statistical significance is the term used to describe differences between groups where the likelihood of those differences occurring purely by chance is low. In most cases, statistical significance is reported when the likelihood of differences occurring as a result of chance is less than 5% (p for probability <0.050), and cases in which the likelihood are lower (e.g., either lower than 1%, $p < 0.010$ or lower than 0.1%, $p < 0.001$) are reported where appropriate.

APPENDIX E: SAMPLE PROFILE

Demographic characteristics of the youth and parent samples are presented in this section.

Gender

Figure 122. Gender unweighted distribution (15–25 year-olds and parents)



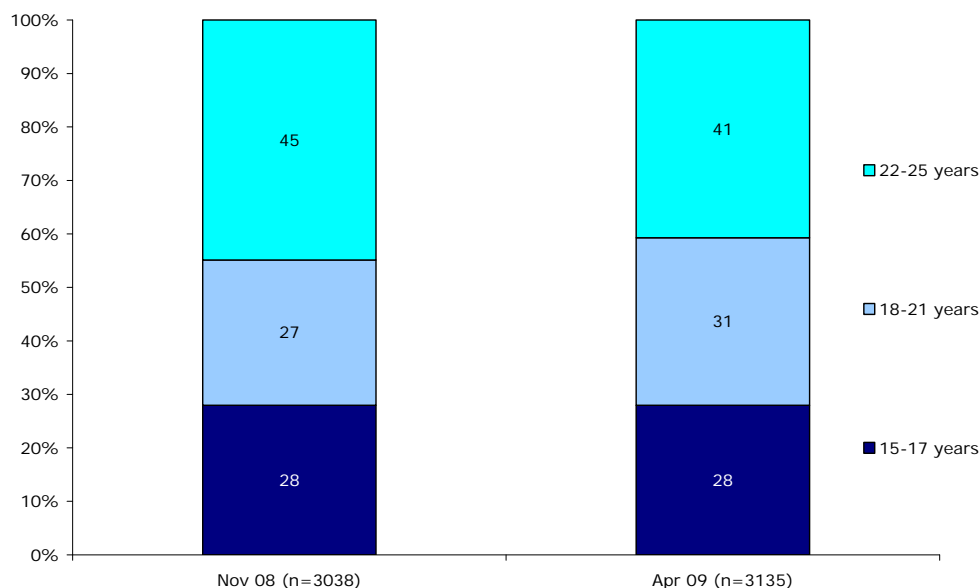
As shown in Figure 122, a more representative distribution of males and females was obtained in the April 2009 survey than in the November 2008 survey. Significantly larger proportions of males aged 18–21 years and 22–25 years and male parents participated in April 2009 than in November 2008. Among young people aged 18–21 years, the proportion of males increased from 35% to 53% (Kendall's tau-b, $p < .001$); in the 22–25 year age group it increased from 29% to 49% (Kendall's tau-b, $p < .001$); and among parents it increased from 31% to 46% (Kendall's tau-b, $p < .001$). The proportions of male and female 15–17 year-olds surveyed in April 2009 were not significantly different from those surveyed in November 2008, when the gender distribution was in line with proportions in the general population (51% male and 49% female).

In April 2009, the gender distributions of 18–21 year-olds and 22–25 year olds were not significantly different from the general population.

The gender distribution of the survey sample within each age and location category was matched to its true proportion in the population via weighting, as described in Section 3.2.

Age

Figure 123. Age unweighted distribution (15–25 year-olds)



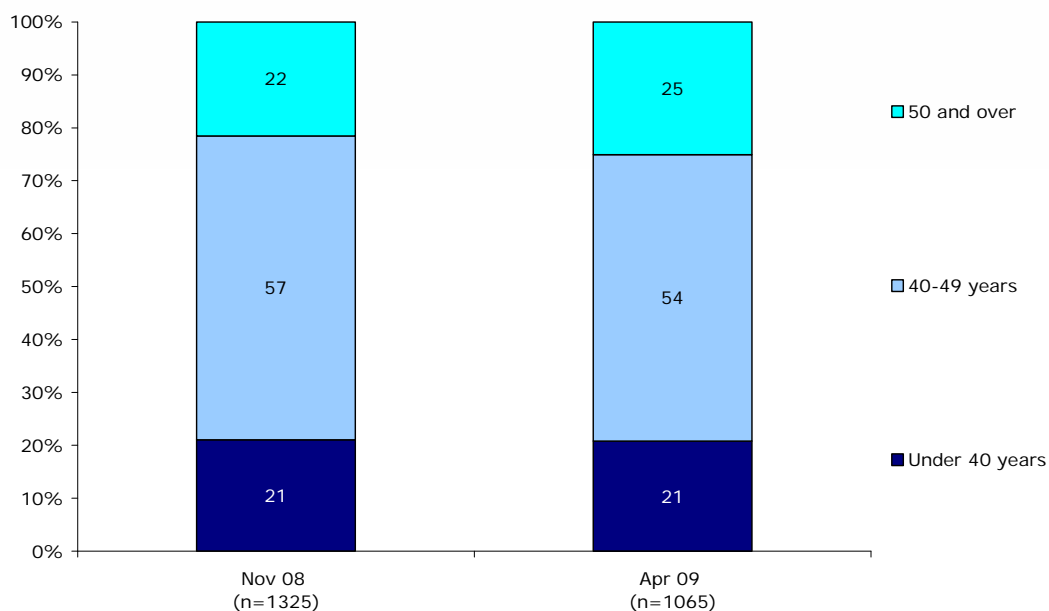
The age distribution of participants aged 15–25 years surveyed in April 2009 was not significantly different from that obtained in November 2008, as shown in Figure 123. In April 2009, 28% of the sample was aged 15–17 years, 31% aged 18–21 years and 41% aged 22–25 years. This is significantly different from the age distribution of 15–25 year olds amongst the population (27% aged 15–17 years, 36% aged 18–21 years and 37% aged 22–25 years, chi-square, $p < .001$). Weighting corrected for this over-representation of people in the older age categories.

Figure 124, overleaf, displays the distribution of age within the parent sample in November 2008 and April 2009. There was no significant change in the proportions aged under 40, 40–49 and 50 and over from November 2008 to April 2009. The majority of surveyed parents in April 2009 were 40–49 years of age (54%), with 21% under 40 years and 25% aged 50 years and over.

Weighting was applied to the survey sample to match the age distribution of parents to the true distribution within the population as at the 2006 census, when 18% of parents of 13–17 year

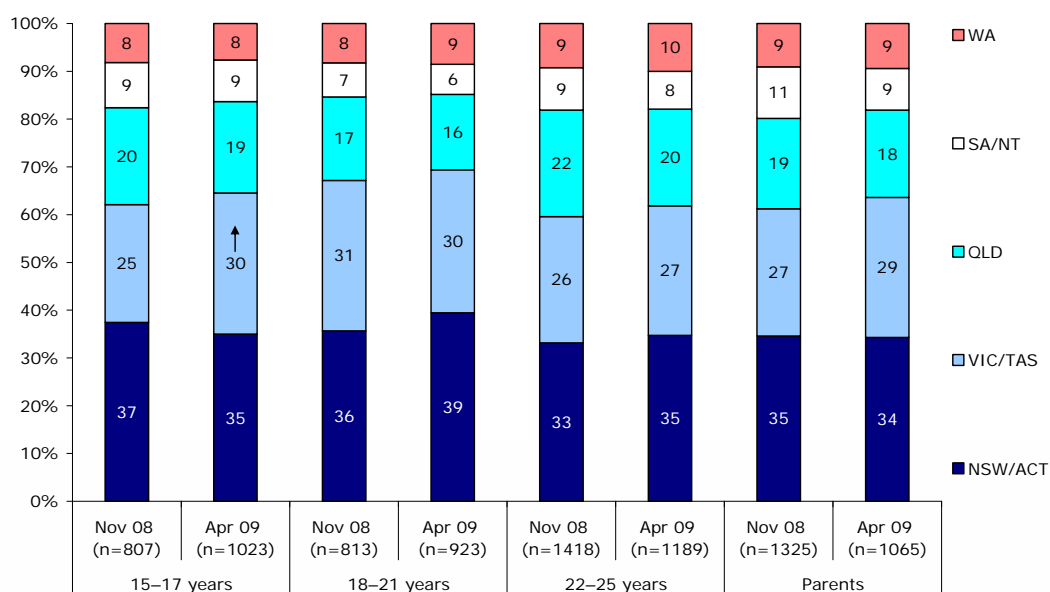
old children were aged under 40 years, 61% were aged between 40-49 years, and 21% were aged 50 years and over.

Figure 124. Age unweighted distribution (Parents)



Location

Figure 125. Location unweighted distribution (15–25 year-olds and parents)

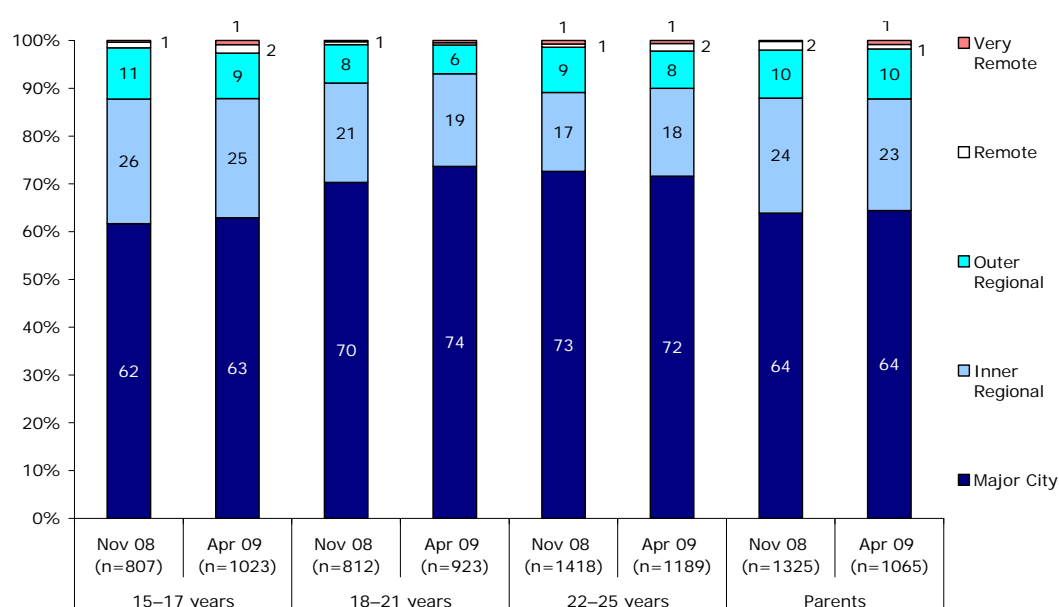


As shown in Figure 125, there was no significant difference between November 2008 and April 2009 in the geographical distribution of participants. In April 2009, between 34% and 39% of each sample group resided in NSW/ACT, between 27% and 30% in Victoria/Tasmania, between 16% and 20% in Queensland, between 6% and 9% in South Australia/Northern Territory and between 8% and 10% in Western Australia.

Differences between the geographical distribution of the survey sample and the actual population were corrected for via weighting.

All subsequent charts contain data weighted by age, gender and location to the true proportions in the population.

Figure 126. ARIA + Categories (15–25 year-olds and parents)



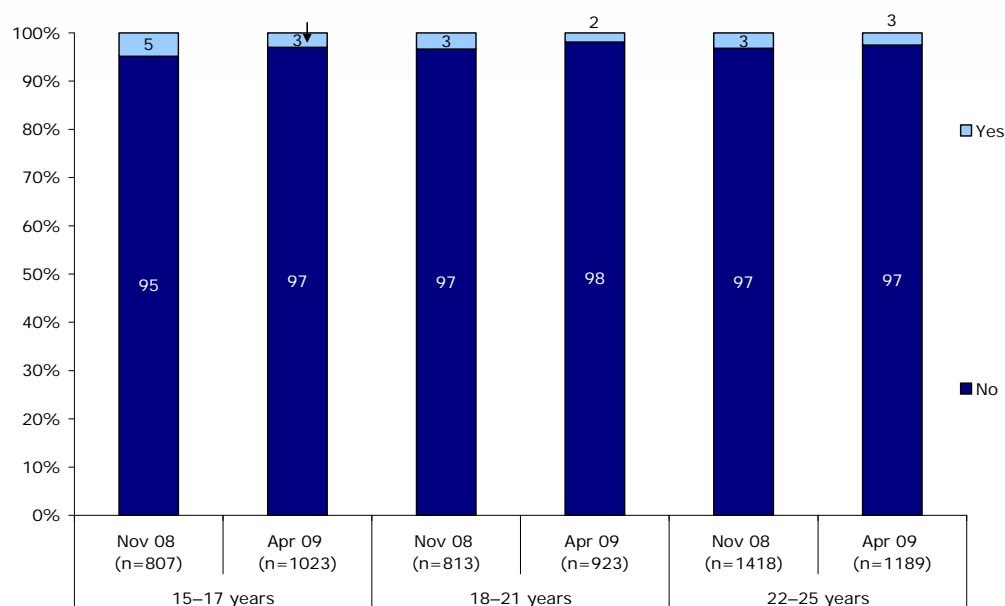
Participant postcodes were classified according to the ARIA+ measure of remoteness¹³. Figure 126 shows the proportion of participants within each sample group whose location falls into each ARIA+ category of remoteness. The distributions of proportions for the two survey waves

¹³ ARIA+ is the standard Australian Bureau of Statistics (ABS) endorsed measure of remoteness. The classification is derived from measures of road distance between populated localities and service centres. These road distance measures are then used to generate a remoteness score for any location in Australia. Remoteness scores are classified into five categories, 'Major City', 'Inner Regional', 'Outer Regional', 'Remote' and 'Very Remote'.
See: http://www.gisca.adelaide.edu.au/products_services/ariav2_about.htm.

were almost identical, with the majority of participants in each wave located in major cities (between 63% and 74% of sample group in April 2009). No significant differences were observed between November 2008 and April 2009.

Cultural background

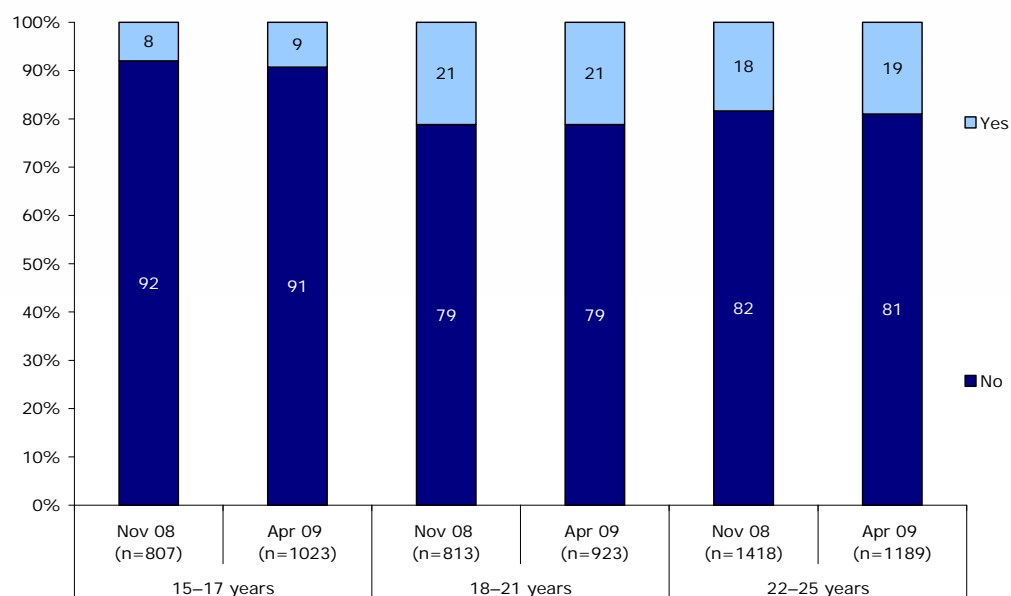
Figure 127. Identification as Aboriginal or Torres Strait Islander (15–25 year-olds)



As shown in Figure 127, the proportion of young people identifying as Aboriginal or Torres Strait Islander within each age group remained relatively stable between November 2008 and April 2009, with a small but significant decrease in the proportion of 15–17 year-olds identifying as Aboriginal or Torres Strait Islander (5% in November 2008, decreasing to 3% in April 2009, chi-square, $p=0.023$). There were no significant differences when compared to the proportions in the population.

Figure 128 (overleaf) displays the proportion of young people within each age group that speaks a language other than English at home. In April 2009, 9% of 15–17 year-olds, 21% of 18–21 year-olds and 19% of 22–25 year-olds spoke a language other than English at home. These proportions did not differ significantly from those obtained in November 2008. The proportion of those speaking a language other than English at home was lower in the sample for 15-17 year olds (9%) than the population (18%, t-test, $p<0.001$), and for 22-25 year olds (19% compared to 27% in the population, t-test, $p<0.001$).

Figure 128. Language other than English spoken at home (15–25 year-olds)



Cultural background questions were only asked of 15–25 year-olds.

Household structure and income

Figure 129. Household structure (Parents)

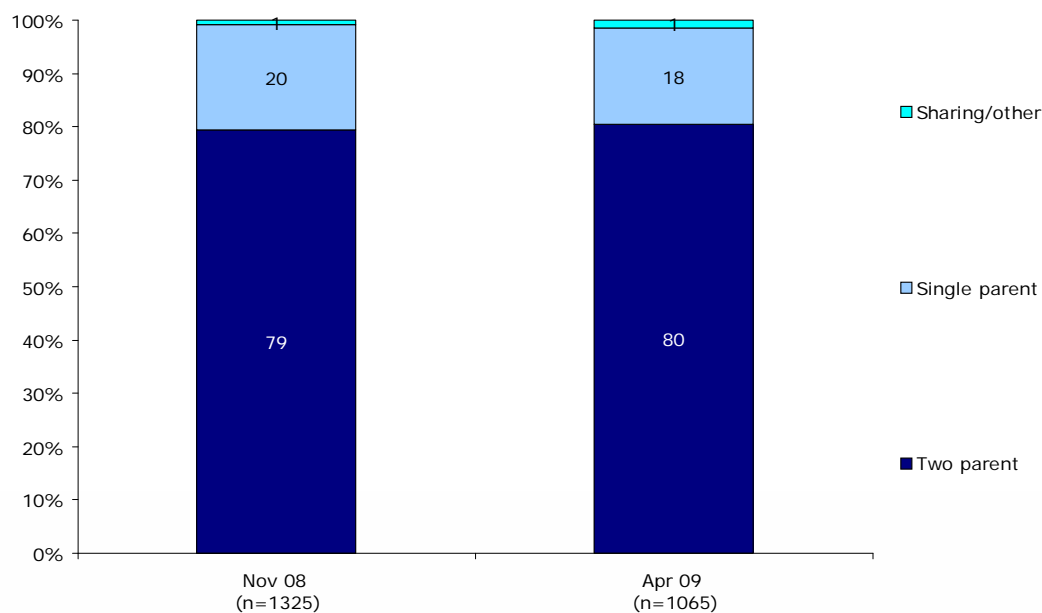
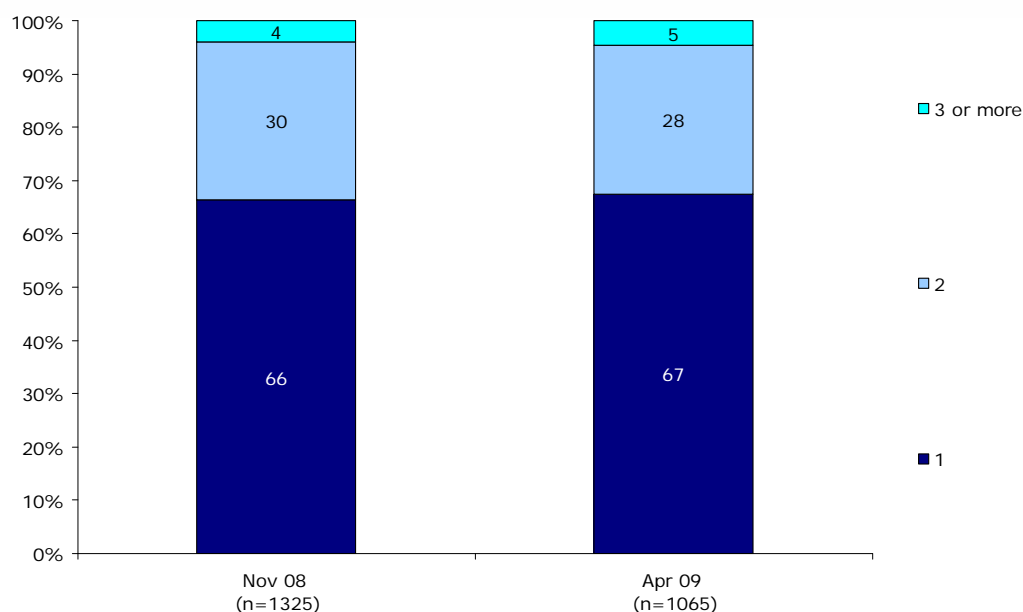


Figure 129 displays the proportion of parents within each wave who live in a single parent, two parent, or other type of household. In April 2009, 80% of parents lived in two parent

households, 18% were single parents, and 1% of parents were living in a shared or other type of household. There were fewer two-parent households (80%) represented in the sample than in the population (86%, t-test, $p < 0.001$), and a greater representation of single parent households (18% compared to 14% in the population, t-test, $p < 0.001$).

This was not significantly different from proportions obtained in November 2008.

Figure 130. Number of children aged 13–17 (Parents)



Parents were asked to indicate how many of their children are aged between 13 and 17 years of age. Responses are shown in Figure 130. No significant differences were observed between November 2008 and April 2009, with two-thirds (67%) of parents having one child, 28% having two children, and 5% having three or more children between the ages of 13 and 17 in the most recent survey wave. The proportion of one child households in the sample in April 2009 (67%) was fewer than the corresponding figure in the population (72%, t-test, $p < 0.001$), while there was a greater representation of parents with two children (28% compared to 25% in the population, t-test, $p < 0.001$), and parents with three or more children (5% compared to 3% in the population, t-test, $p < 0.001$).

As shown in Figure 131 (overleaf), there were some significant differences between the November 2008 and April 2009 samples in terms of household structure. Among 22–25 year-olds, there was an increase in the proportion living alone with their partner (from 22% in November 2008 to 25% in April 2009, chi-square, $p < 0.001$), and decreases in the proportions living with their partner and child(ren) (from 18% in November 2008 to 15% in April 2009, chi-

square $p < 0.001$), living with their child(ren) as a single parent (from 4% to 2%, chi-square, $p < 0.001$) and living in some other type of household (from 3% to 1%, chi-square, $p < 0.001$).

In the sample of April 2009, the proportion of 15-17 year olds living with their parents (96%) was higher than that found in the population (87%, t-test, $p < 0.001$). The sample proportion of 22-25 year olds living with their parents (28%) was lower than that found in the population (30%, t-test, $p < 0.001$).

The proportion of 18-21 year olds sampled living alone (5%) was higher than that found in the population (3%, t-test, $p < 0.001$), as was the proportion of 22-25 year olds (8% compared to 7%, t-test, $p < 0.001$).

The sampled proportion of those living alone with their partner was lower than the population for 18-21 year olds (9% compared to 6%, t-test, $p < 0.001$) and for 22-25 year olds (22% compared to 8%, t-test, $p < 0.001$).

The sample over-represented those living with partner and their children among 18-21 year olds (3% compared to 2% in the population, t-test, $p < 0.001$), and among 22-25 year olds (15% compared to 8% in the population, t-test, $p < 0.001$).

Figure 131. Household structure (15–25 year-olds)

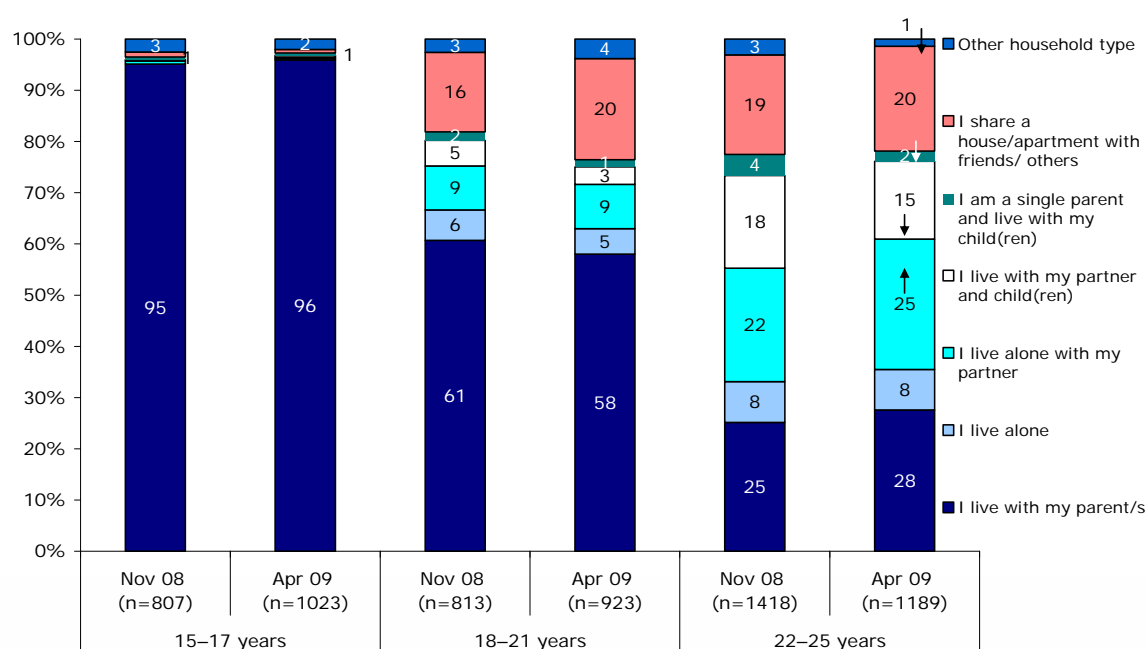
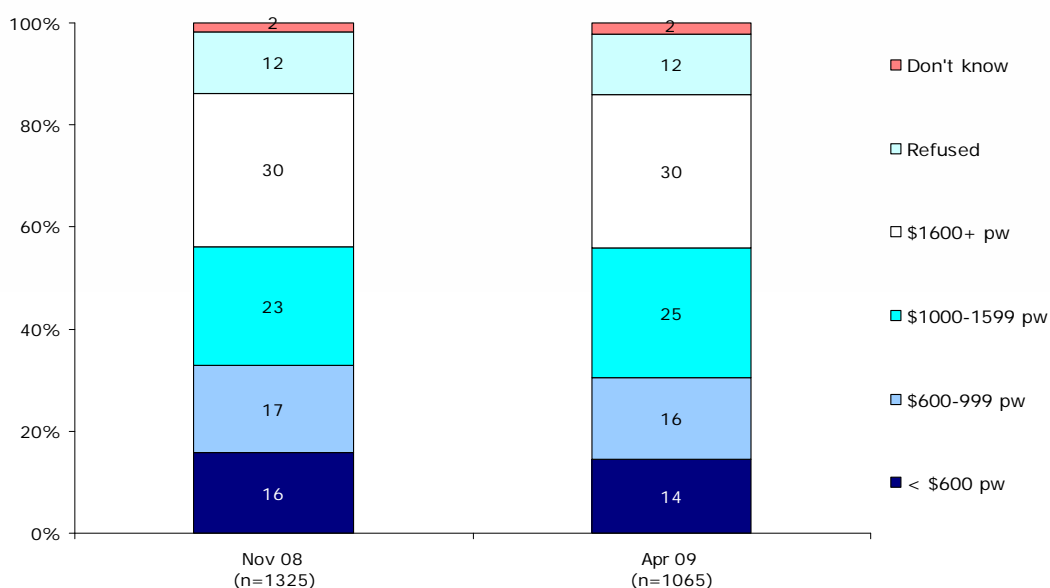


Figure 132. Pre-tax household income (Parents)

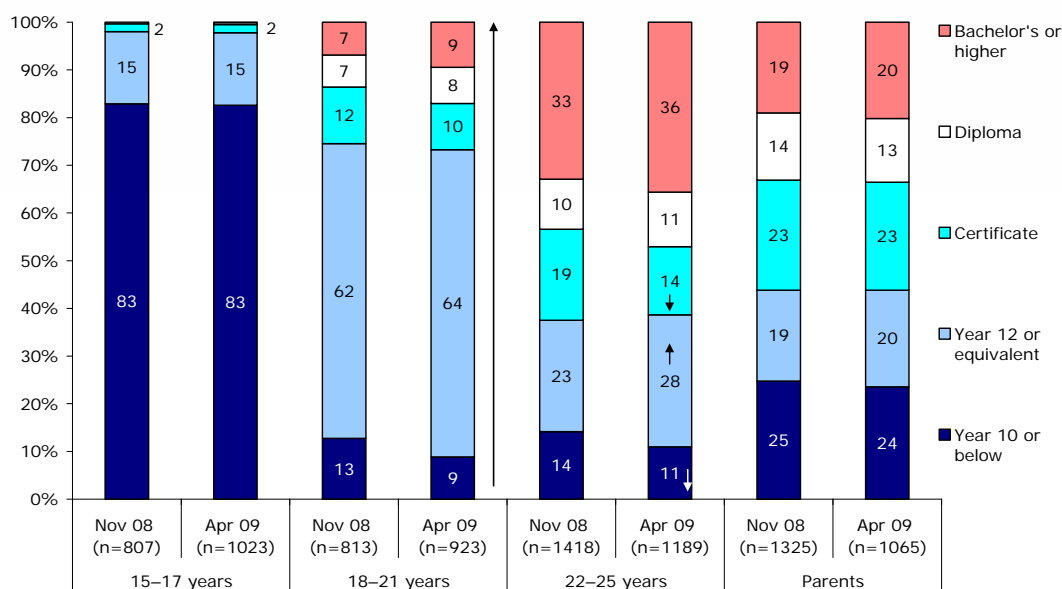


There were no significant differences in the distributions of parents' household income between November 2008 and April 2009, as shown in Figure 132. As in November 2008, the largest proportion of parents (30%) reported having a household income of over \$1600 per week.

The April 2009 sample had a lower proportion of those in the highest income bracket (30%) than the population (38%, t-test, $p < 0.001$). There was a greater proportion of those in the 'less than \$600 per week' income bracket (14% compared to 10% in the population, t-test, $p < 0.001$) and of those in the '\$600-999 per week' income bracket (16% compared to 12% in the population, t-test, $p < 0.001$).

Education and employment

Figure 133. Highest educational qualification completed (15–25 year-olds and parents)



The highest level of educational attainment by 15–25 year-olds and parents is displayed in Figure 133. Some significant differences between the November 2008 and April 2009 survey samples were noted. Among young people aged 18–21 years, those in the latter survey wave were more likely overall to have completed higher levels of education than those in the baseline survey (Kendall's tau-b, $p=0.035$). In the 22–25 year age group, there was a significant increase in the proportion that had finished year 12 (from 23% in November 2008 to 28% in April 2009, $p=0.006$) and a significant decrease in the proportion that had completed a certificate (from 19% in November 2008 to 14% in April 2009, chi-square, $p=0.006$).

The survey sample over represents the proportion of parents of 13–17 year olds within the population that have completed Year 12 or its equivalent (13%) and a Diploma (9%) (t-test, $p<0.001$, for both comparisons).

The survey sample had fewer 15–17 year olds who had attained year 10 or below than the general population (83% compared to 89%, t-test, $p<0.001$). The sample over represents the proportion of 15–17 year olds who have completed Year 12 or its equivalent (15% compared to 10%) or completed a Certificate (2% compared to 1%, t-test, $p<0.001$).

Significantly fewer 18–21 year olds in the survey sample had completed year 10 or below than in the general population (9% compared to 24%, t-test, $p<0.001$), and the survey sample over represented 18–21 year olds in all other categories (t-test, $p<0.001$ for all comparisons).

Significantly more 22-25 year olds in the survey sample had completed a diploma than in the general population (11% compared to 8%, t-test, $p < 0.001$) or completed a bachelor's degree or higher (36% compared to 25%, t-test, $p < 0.001$). The survey sample under represented 22-25 year olds in all other categories (t-test, $p < 0.001$ for all comparisons).

Figure 134. Studying (15–25 year-olds)

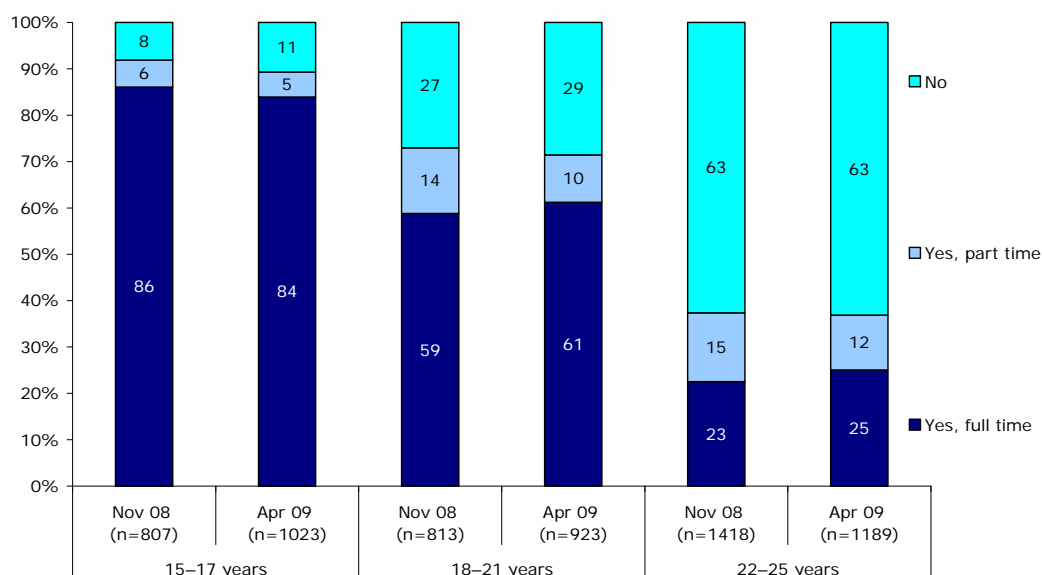
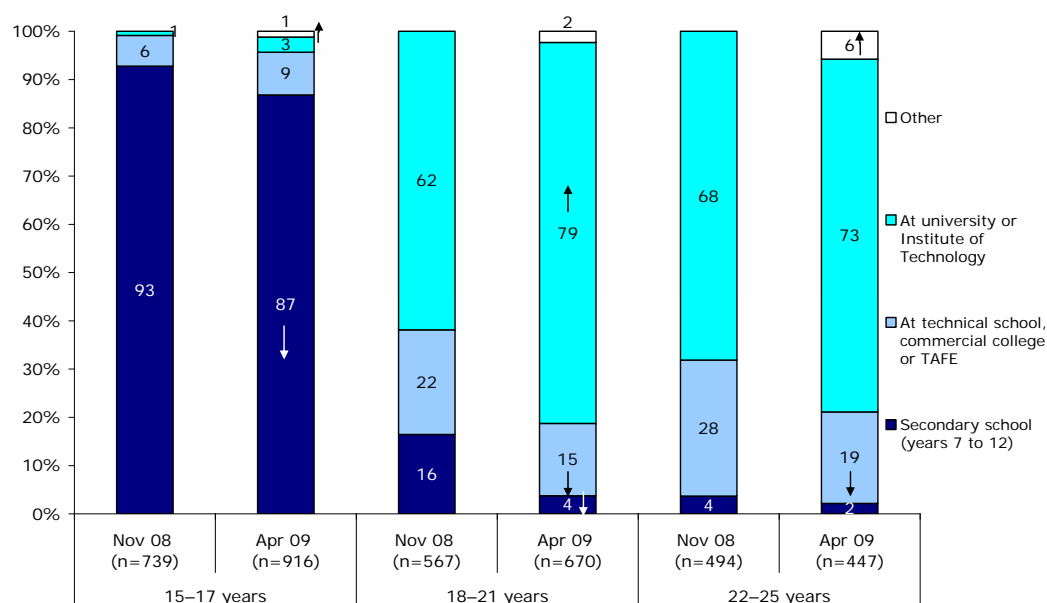


Figure 134, above, displays the proportions studying full-time, part-time or not at all at the time of survey. In April 2009, the majority of 15–17 year-olds (84%) were studying full time, while 5% were studying part time and 11% were not studying at all. The majority (61%) of 18–21 year-olds were also studying full time, while 10% were studying part time and 29% not at all. Among 22–25 year-olds, the majority (63%) were not studying at all, while 25% were studying full time and 12% were studying part time. These proportions were not significantly different from those obtained in November 2008.

The survey sample over represents the proportion of 18-21 year olds in the population (55%) that are currently studying full-time (t-test, $p < 0.001$).

Figure 135. Study location (15–25 year-olds)

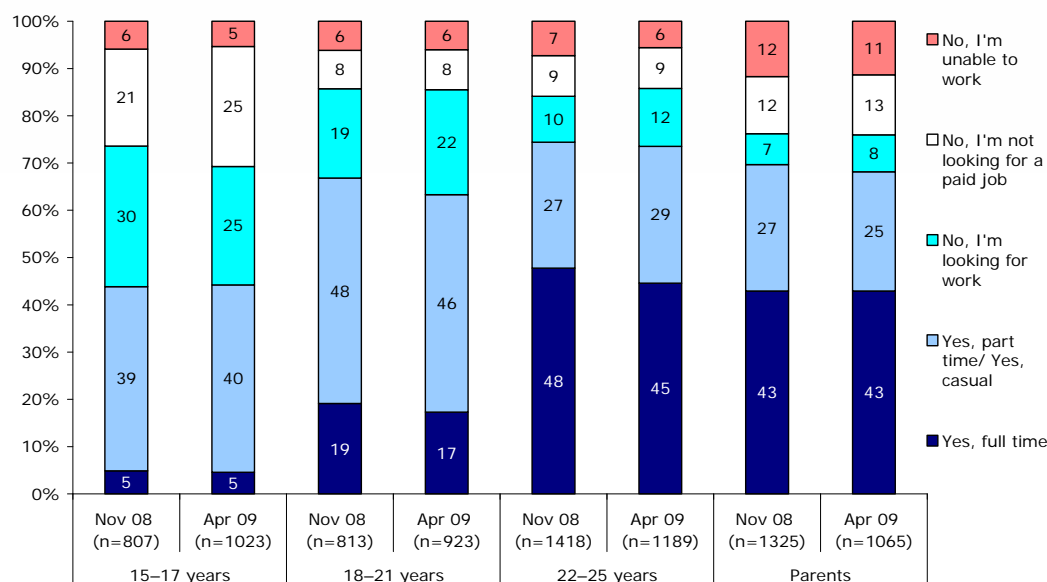


The proportion of people aged 15–17 years, 18–21 years and 22–25 years currently studying at different types of institutions is shown in Figure 135. Among all age groups, significant differences were observed from November 2008 to April 2009 in the proportions studying in certain locations. Among the 15–17 year age group, there was a significant decrease in the proportion studying at secondary school (from 93% in November 2008 to 87% in April 2009, chi-square, $p < 0.001$) and a significant increase in the proportion studying at ‘other’ locations (from 0% to 1%, chi-square, $p < 0.001$). In the 18–21 year group, the proportion studying at a university or an Institute of Technology increased significantly (from 62% to 79%, chi-square, $p < 0.001$), while the proportions studying at a technical school, commercial college or TAFE, and at secondary school decreased significantly (from 22% to 15% for technical school, college or TAFE and from 16% to 4% for secondary school, chi-square, $p < 0.001$, for each comparison). Among 22–25 year-olds, there was a significant decrease in the proportion studying at a technical school, commercial college or TAFE (from 28% to 19%, chi-square, $p < 0.001$) and a significant increase in the proportion studying at ‘other’ locations (from 0% to 6%, chi-square, $p < 0.001$). The significant decrease in the number of 18–21 year-olds who were studying at secondary school in April 2009 may reflect the fact that few students in year 12 would have turned 18 at this early stage in the year.

Significantly fewer 18-21 year olds in the survey sample in April 2009 were currently studying at secondary school (4%, compared with 11%, t-test, $p < 0.001$) or TAFE (15% compared to 28%, t-test, $p < 0.001$) than among 18-21 year olds in the general population, and the sample over represented 18-21 year olds studying at a University or Institute of Technology (3% compared to 1%, t-test, $p < 0.001$).

Fewer 15–17 year-olds were currently studying at secondary school than in the general population (87% compared with 94%, t-test, $p < 0.001$).

Figure 136. Employment (15–25 year-olds and parents)



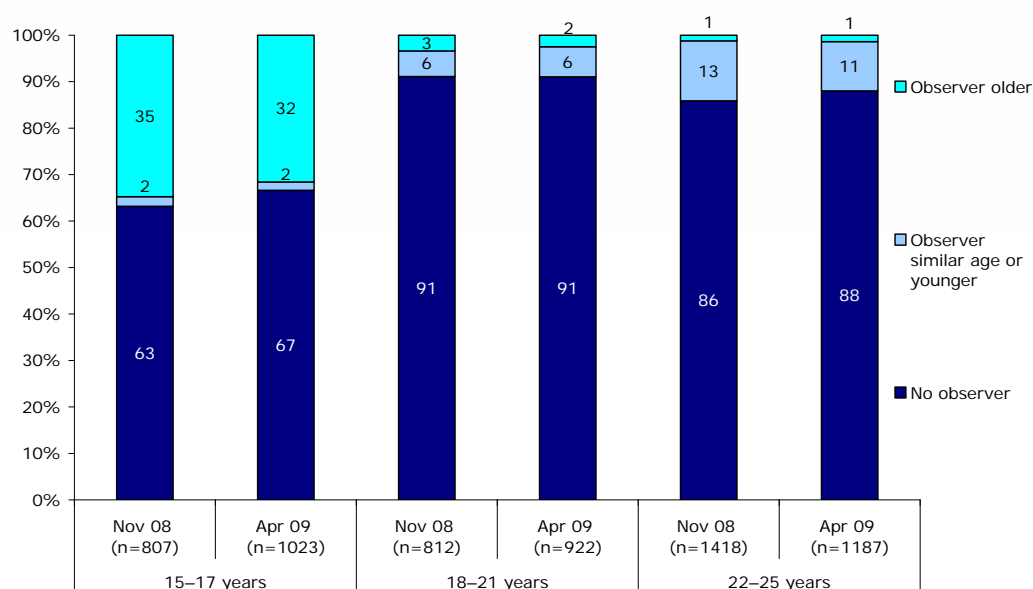
As shown in Figure 136, the largest proportion of 15–17 year-olds (40%) and 18–21 year-olds (46%) were employed in part time or casual work in April 2009, while the largest proportion of 22–25 year-olds (45%) and parents (43%) were employed full time. These and all other proportions did not differ significantly from the corresponding proportions in November 2008.

The survey sample in April 2009 significantly over represents the proportions of 15-17 (25% compared to 6%), 18-21 (22% compared to 8%) and 22-25 year olds (8% compared to 6%) in the population that are currently looking for work (t-test, $p < 0.001$, for all three comparisons) and the proportions of 15-17 year olds (40% compared to 29%) and 18-21 year olds (46% compared to 36%) that are employed in part time or casual work (t-test, $p < 0.001$, for both comparisons). The survey sample under represents the proportions of 18-21 year olds (17% compared to 32%) and 22-25 year olds (45% compared to 53%) that are currently employed in full time work (t-test, $p < 0.001$, for both comparisons).

The survey sample in April 2009 significantly over represents the proportions of parents looking for work (8% compared to 3%, t-test, $p < 0.001$), and not in labour force, i.e. not looking for work or unable to work (24% compared to 18%, t-test, $p < 0.001$). The sample under represents the proportion of parents working full-time (43% compared to 50%, t-test, $p < 0.001$).

Observation of survey completion

Figure 137. Observer present while responding (15–25 year-olds)



Young people aged 15–25 years were asked whether or not they had been observed by anyone while completing the survey and, if they had, to indicate whether this observer was older, younger or about the same age. Answers to this question are shown in Figure 137. The overall majority of participants (67% of 15–17 year-olds, 91% of 18–21 year-olds and 88% of 22–25 year-olds) did not have an observer present while they completed the survey. As in November 2008, young people aged 15–17 years were most likely to have completed the survey with an observer present, with 32% responding in April 2009 that an older observer was present, and 2% completing the survey with an observer of similar age or younger. Among 22–25 year-olds, 11% were observed by someone of similar age or younger and 1% had an older responder present. Six percent (6%) of 18–21 year-olds were observed by someone of similar age or younger and 2% had an older observer present. These results are not significantly different from those recorded in November 2008.