

# **Young Australians Alcohol Reporting System (YAARS)**

**Report 2016/17**

**- Victorian main findings**

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# Young Australians Alcohol Reporting System

## 2016-17 team

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## 1. Introduction

The Young Australians' Alcohol Reporting System (YAARS) is a research project that aims to provide insight into the risky drinking patterns of young Australians.

The purpose of the research is twofold. Firstly, the project seeks to investigate event-specific alcohol consumption amongst young high-risk drinkers who are overrepresented in alcohol-related harms, but are underrepresented in general population health surveys. Secondly, YAARS aims to investigate trends in alcohol use among young people over time and thus, as successive years of data accrue, to enable emergent trends and to detect developing patterns of problematic alcohol use and associated harms. This information on patterns of use and related problems will be used to inform policy, prevention and treatment initiatives (1).

In 2016 and 2017, YAARS was conducted in all eight capital cities of Australia. It combined information from existing data sources with interviews and surveys targeting young people aged 14-19 who regularly engaged in risky drinking. This report documents the Victorian component of YAARS.

## 2. Site background

### *Population*

Melbourne is the largest city and capital of the state of Victoria, with a population of 3,999,982 people (2). There are 253,093 persons in Melbourne aged 15-19 comprising 6.3% of the city's population, and 18,025 (0.5%) persons who identify as Aboriginal or Torres Strait Islander.

### *Schooling*

Nineteen percent of the Greater Melbourne area residents attend a secondary school (11.1% government, 4.8% Catholic, 4.6% other non-Government), 7.2% a technical or further education institution, and 17.4% a university or tertiary institution (2).

In Victoria the majority of students complete 13 years of formal education (3). It is a legal requirement for students to complete Year 10 and that they remain in some form of education or training until 17 years of age (4).

### *General population youth alcohol and other drug use in 2016*

Australia's National Health and Medical Research Council (NHMRC) recommends that for people under the age of 18, not drinking alcohol is the safest option. The National Drug Strategy Household Survey (NDSHS) reported that in 2016, the majority (55.8%) of 14-19 year old Australians did not consume alcohol in the past 12 months. However, almost a fifth (18.0%) of 14-19 year olds drank more than four standard drinks (defined as any drink containing 10 or more grams of alcohol) at least once a month.

The NHMRC describes the consumption of more than four standard drinks as increasing the risk of injury arising from that drinking occasion (5). Risky consumption increases with age – in 2016 it was estimated to occur in less than 1% of 12-15 year olds, 14.6% of 16-17 year olds and 36.9% of 18-19 year olds (6). Drinking at even higher levels (11+ standard drinks) at least once a month was estimated at 5.9% for 14-19 year olds; ranging from 4.6% of 16-17 year olds to 12.7% of 18-19 year



olds. A sixth (15.9%) of 14-19 year old Australians were estimated to have used an illicit drug in the past 12 months in 2016. The most common illicit drug used by 14-19 year olds was cannabis (12.2%), followed by pharmaceuticals used for non-medical purposes (3.7%), and ecstasy (3.2%). Data from the 2016 NDSHS was available on a national level at the time of writing this report and jurisdiction-specific data is presented below with the 2013 dataset.

### Alcohol and other drug use in Victoria

The 2013 National Drug Strategy Household survey (NDSHS) reports that 84.1% of Victorians aged 14 and over have used alcohol in the past year (86.2% nationally), with 36.2% drinking on a weekly basis (37.3% nationally). Of those that drank in the past year, 35.7% were consuming their alcohol at levels which put them at risk of single occasion injury (37.8% nationally)(7). In Victoria, 14.3% of those aged 14 and above had used an illicit drug in the past year, which was similar with the national average (15.0%). On average rates of illicit and pharmaceutical drug use in Victoria were similar to the national average(7).

### Youth alcohol and other drug use trends across Australia

In recent years, most Australian teenagers have abstained from alcohol. As shown with Figure 1's blue dotted line, half of Australian high school students aged 16-17 drank alcohol in the past seven days in 1984, whereas less than a third had done so in 2014 (8). The age at which Australians consume their first full standard drink has risen from 14.8 years in 1995 to 16.1 years in 2016 (6).

In contrast, there has also been a slight increase in the proportion of current drinkers who report consuming risky quantities (5+ standard drinks; see red line in figure) (6-9). This group may be drinking in higher quantities and contributing to some of the recently elevated rates of alcohol related harm in certain Australian jurisdictions (9). The YAARS project investigated this group of young risky drinkers who are overrepresented in the experience of alcohol-related harms, and underrepresented the current general population surveys such as the NDSHS and Australian School Student Alcohol and Drug (ASSAD) (1, 8).

Figure 1. Australian teenage drinking trends 1984 to 2014

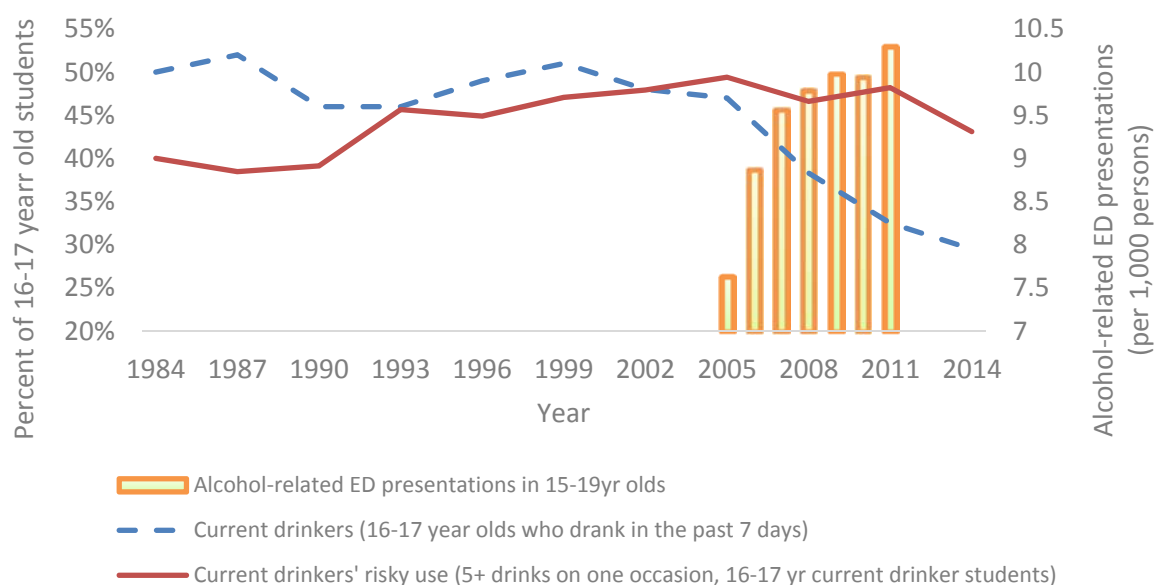


Figure note. Student consumption data from the Australian School Student Alcohol and Drug (ASSAD) Survey (8). Emergency department data from 2005-06 to 2011-12 includes all Australian jurisdictions excluding Tasmania (9).

### *Legislative considerations*

The legal purchasing age for alcohol is 18 in all jurisdictions in Australia. All Australian jurisdictions except one (SA) have 'secondary supply laws' prohibiting the supply of alcohol to an individual under the legal purchase age within a private premise, without permission from the adolescent's parents. Secondary supply legislation was introduced in Victoria in November 2011 (10).

## 3. Recruitment

Recruitment for the Victorian face-to-face (F2F) interviews occurred from January to March 2017.

### *Materials*

To maximise the project's appeal and relevance to the target population, advertising materials were professionally designed. These materials included: an A3 poster, postcards, a picture to accompany social media ads, and a banner that was used on multiple media forums including the project website, online survey, and the project's Facebook page.

### *Recruitment sources*

The most popular modes of recruitment for both survey modalities in Victoria were social media (Facebook and Instagram), and snowballing (referral through a friend). This was consistent among all screened participants and those who screened as being in the top 25% of risky drinkers for their age group (this distinction is explored further in section 7). Tables 1 and 2 contain data relating to both groups, however the majority of this report focuses on the higher risk drinkers who completed a F2F interview ( $n=73$ ) or the online survey ( $n=607$ ).

Table 1. Recruitment of all Victorian participants (both higher and lower risk)

	Survey modality		
	F2F	Self-administered	Total
Facebook advertisement	71.3%	91.6%	90.1%
Instagram advertisement	1.1%	1.4%	1.3%
A poster at university	0.0%	0.3%	0.3%
A poster in a shop	0.0%	0.1%	0.1%
A postcard	0.0%	0.2%	0.2%
Snowballing	33.3%	7.7%	9.6%
An electronic newsletter	0.0%	0.4%	0.3%
A service I use (e.g. youth health service)	0.0%	0.3%	0.3%
Other recruitment method	2.3%	0.8%	0.9%
Total	87	1104	1191

Table 2. Recruitment of Victorian participants screened as higher risk

	Survey modality		
	F2F	Self-administered	Total
Facebook advertisement	68.5%	91.3%	88.3%
Instagram advertisement	1.4%	1.2%	1.2%
A poster at university	0.0%	0.2%	0.2%
A poster in a shop	0.2%	0.0%	0.0%
A postcard	0.0%	0.0%	0.0%
Snowballing	37.0%	8.7%	12.4%
An electronic newsletter	0.0%	0.2%	0.2%
A service I use (e.g. youth health service)	0.0%	0.0%	0.0%
Other recruitment method	2.7%	0.8%	1.1%
Total	73	493	566

#### *Paid Facebook advertisements*

The paid ads were initially targeted at 14 to 19 year-olds within 40kms of Melbourne’s CBD, and were later expanded to capture all of Victoria. The ads appeared in the sidebar or newsfeed of pages with a brief description of the project, contact details for the Victorian site, and a link to the central project webpage for those completing the self-administered online survey.

#### *Project webpage*

The central project webpage included a description of the study, contact details for each site and a link to the self-administered online survey. WA, ACT and VIC paid Facebook ads were linked to this page.

#### *Unpaid Facebook ads*

A project page was established within the Facebook domain and poster-style images with project information were uploaded. Project staff updated the page, and moderated comments that were placed on it.

#### *Snowballing*

Potential participants were encouraged to recruit their friends for the project. Postcards were included in reimbursement packs with the instruction that they could be provided to friends if they were interested in participating.

#### *Posters*

A3 and A4 project posters with tear away sections listing contact details were posted around TAFEs and universities in communal pin board areas, student lunchrooms, on tables, and on the backs of toilet stall doors.

#### *Other sources*

Postcards and posters were also disseminated through music and clothing stores, and youth centres around Melbourne’s inner suburbs.

### *Screening of participants*

There was a two-stage screening process for the face-to-face interviews: initially through a brief telephone screen, and subsequently a face-to-face verification with the interviewer after booking. The self-administered online survey participants were screened via survey logic programming.

The majority of potential respondents made initial contact via SMS or email. Only a small proportion enquired directly through voice calls. The 14-15 year olds, 18-19 year old males who were not attending university, and those identifying as Aboriginal or Torres Strait Islander people were more difficult demographics to recruit compared to university students.

## **4. Interviewing**

Interviews in Victoria were conducted from 15 January – 15 March 2017.

Participants were offered one of several meeting locations for the face-to-face interviews. If one of the locations was not convenient for the respondents, an alternate location was arranged. The majority were conducted in large public cafés in the city centre ( $n=61$ ), and in the eastern ( $n=7$ ), northern ( $n=6$ ), and southern suburbs ( $n=5$ ). Interviews were also held at Turning Point ( $n=2$ ), a public library in the southern suburbs ( $n=1$ ), and other public outdoor areas and cafes in Melbourne's CBD ( $n=3$ ), North ( $n=1$ ) and South-East ( $n=1$ ).

## **5. YAARS Victoria participant sample**

A total of 1,336 14-19 year olds were interviewed or surveyed for YAARS in Victoria in 2017. Eighty seven face-to-face (F2F) interviews and 1,249 online surveys were conducted, and these young people were screened as either the 'top 25% of risky drinkers' or as 'lower risk drinkers' (see Table 3).

The survey eligibility criteria for the heaviest 25% of drinkers by age and gender were based on previous research with young Australians aged 14-19. The criteria were:

- 14-15 year olds who drank 1+ Standard Drinks (SD) in a single session, at least once a month
- 16-17 year olds who drank 5+ SD in a single session, at least twice a month
- 18-19 year old females who drank 7+ SD in a single session, at least twice a month
- 18-19 year old males who drank 9+ SD in a single session, at least twice a month

Young people screened as consuming less than these quantities ('lower risk' participants) provided demographic and past 12 month drinking responses, but will not be described further in this report. This report focuses on the 680 higher risk drinkers (73 who completed a F2F interview, and the 607 that completed an online survey), who from this point on, are simply referred to as 'the participants'.

Table 3. Face-to-face interviews and self-administered surveys conducted in Victoria by age, gender and screening status

Gender	Age	Face to face (F2F) interview			Self-administered online survey		
		Lower Risk	Top 25%' of risky drinkers	Total interviews	Lower Risk	Top 25%' of risky drinkers	Total surveys
Male	14-15	0	4	4	7	28	35
	16-17	1	17	18	85	94	179
	18-19	5	12	17	84	110	194
	Total	6	33	39	176	232	408
Female	14-15	1	6	7	11	51	62
	16-17	3	16	19	205	139	344
	18-19	4	18	22	238	172	410
	Total	8	40	48	454	362	816
Transgender	14-15	0	0	0	0	3	3
	16-17	0	0	0	1	1	2
	18-19	0	0	0	2	2	4
	Total	0	0	0	3	6	9
None of the above/ prefer not to say	14-15	0	0	0	2	1	3
	16-17	0	0	0	4	4	8
	18-19	0	0	0	3	2	5
	Total	0	0	0	9	7	16
Total	14-15	1	10	11	20	83	103
	16-17	4	33	37	295	238	533
	18-19	9	30	39	327	286	613
	Total	14	73	87	642	607	1249

As shown in Table 4, most participants were current students (52% school, 4% TAFE, and 36% university) and based in Greater Capital City areas (95%). More females (59%) than males (39%) participated in the survey, while 1% identified as transgender, and 1% did not identify as any of the gender categories provided. The majority of participants spoke only English at home (86%).

Table 4. Demographic characteristics of Victorian sample screened as eligible 'top 25%' of drinkers

		Survey modality					
		F2F		Self-administered		Total	
		n	%	n	%	n	%
Gender	Male	33	45%	232	38%	265	39%
	Female	40	55%	362	60%	402	59%
	Transgender	0	0%	6	1%	6	1%
	I do not identify as any of the above/ prefer not to say	0	0%	7	1%	7	1%
	Total	73	100%	607	100%	680	100%
Age	14-15	10	14%	83	14%	93	14%
	16-17	33	45%	238	39%	271	40%
	18-19	30	41%	286	47%	316	47%
	Total	73	100%	607	100%	680	100%
Occupation	School student (full time)	43	59%	309	51%	352	52%
	TAFE student (full time)	0	0%	15	3%	15	2%
	TAFE student (part time)	2	3%	12	2%	14	2%
	University student (full time)	22	30%	207	34%	229	34%
	University student (part time)	0	0%	10	2%	10	2%
	Trade apprentice (full time)	0	0%	8	1%	8	1%
	Trade apprentice (part time)	0	0%	2	0%	2	0.30%
	Employed (casual or part time)	46	63%	184	30%	230	34%
	Employed (full time)	1	1%	15	3%	16	2%
	Unemployed	2	3%	39	6%	41	6%
	Home duties (full time)	0	0%	8	1%	8	1%
	Other	1	1%	11	2%	12	2%
	Total	73	100%	607	100%	680	100%
Languages spoken in your home	English only	57	79%	505	87%	562	86%
	English and another language(s)	15	21%	79	14%	94	14%
	Total	72	100%	584	100%	656	100%
Aboriginal and or Torres Strait Islander	ATSI	0	0%	20	3%	20	3%
	Not ATSI	73	100%	587	97%	660	97%
	Total	73	100%	607	100%	680	100%
Location	Greater Capital City area	73	100%	573	94%	646	95%
	Non-capital city area	0	0%	34	6%	34	5%
	Total	73	100%	607	100%	680	100%
Weekly budget available for recreational use	≤\$10	1	1%	38	6%	39	6%
	\$10-3	14	19%	149	25%	163	24%
	\$40-79	26	36%	154	26%	180	27%
	80-119	16	22%	116	19%	132	20%
	\$120-159	7	10%	43	7%	50	7%
	≥ \$160	9	12%	85	14%	94	14%
	Do not know	0	0%	15	3%	15	2%
	Total	73	100%	600	100%	673	100%

### *Explanatory notes for the main findings section*

Data from this project were predominantly quantitative, however were also supplemented with a small number of open-ended qualitative items. The methodology focused on the most recent occasion when the young person drank more than recommended in the NHMRC low risk drinking guidelines for adults (or any drinking in the past month amongst 14-15 year olds). The use of event-level data allowed for a rich context to be described. This included linking of specific quantities of alcohol consumed, different locations, the presence of other drinking peers/adults, risks such as pre-drinking with alcohol before the event, and identification of protective factors in relation to subsequent experience of harm (e.g., such as physical assault).

Beyond the last risky drinking session, other outcomes such as drink driving in the past 12 months, indicators of dependence, and mental health issues are outlined in the national report.

In the following section, most tables present results separately by administration modality and/or by demographic. The interviewer administered surveys were conducted face to face and this modality has been abbreviated as 'F2F' in the tables. The self-administered online surveys are abbreviated as 'self-administered'. 'Both modalities' combines both the F2F and self-administered responses.

The term 'demographic' summarises age and gender information into four main categories: Males aged 14 to 17, Males aged 18 to 19, Females aged 14 to 17, and Females aged 18 to 19. In this report, the 'total' or 'all' groups are often larger than the sum of the male and female groups. Eligible respondents who were transgender or preferred not to disclose their gender have been included within the 'total' scores.

Alcohol quantity was reported via a number of standard drinks consumed, and using the beverage-specific response method. Respondents were provided with a visual prompt through a standard drink chart to facilitate recall. The upper alcohol quantity limit was set at 50 standard drinks.

Chi-square tests were used to compare categorical variables between groups, with results reported as significant where  $p < 0.05$ .

Some participants did not answer all the questions – the resulting 'missing values' were not included in the computation of descriptive percentages and statistics such as averages. The 'Total' or 'n' included in the tables reflect the number of participants who responded to the item.

## 6. Main findings from the last risky drinking session

Participants reported on the last time they consumed a minimum quantity of alcohol. This minimum quantity was determined by the respondents' age and gender:

- 14-15 year olds reported on the most recent occasion that they drank 1 or more standard drinks in a single sitting
- 16-17 year olds on last time they had 5+ standard drinks
- 18-19 year old females on the last time they had 7+ standard drinks
- 18-19 year old males on the last time they had 9+ standard drinks

### Recall period

Across both the F2F and self-administered survey modalities, more than half of the participants (62%) reported this last drinking session occurred seven or fewer days prior to completing the survey. The recall period was 14 days or less for 82%, and 28 or fewer days for 94% of respondents.

Note these percentages exclude 0.7% of outlier recall periods. Of 575 self-administered recall periods, four participants had drinking session dates after the survey date. All F2F recall periods were between 0 and 100 days.

### Drinking locations

Overall, the most popular drinking location was a friend or acquaintance's home (66%), followed by the respondents' own home (18%), a bar/pub/hotel (19%) or a nightclub (17%). Three quarters (79%) of the young people drank in at least one private location (friend's home, own home, or car) and a third (30%) drank at least one licensed venue such as a pub or club at the last risky drinking session (see Table 5).



Table 5. Drinking locations at the last risky drinking session by age, gender and survey modality

F2F	Males 14-17	Males 18-19	Males	Females 14-17	Females 18-19	Females	All F2F
Own home	14%	25%	18%	9%	17%	13%	15%
Friend's home	62%	58%	61%	86%	50%	70%	66%
Bar or pub or hotel	5%	42%	18%	5%	44%	23%	21%
Nightclub	10%	8%	9%	5%	33%	18%	14%
Music festival or concert	0%	0%	0%	0%	0%	0%	0%
Sporting event or club	5%	0%	3%	0%	0%	0%	1%
Restaurant	0%	0%	0%	0%	6%	3%	1%
Car	0%	0%	0%	0%	0%	0%	0%
School, TAFE, university	5%	0%	3%	0%	6%	3%	3%
Reception centre or function room	0%	0%	0%	5%	0%	3%	1%
Public or other place	48%	8%	33%	18%	22%	20%	26%
Drank in a private location (a home or car)	71%	75%	73%	96%	67%	83%	78%
Drank in a non-licensed location (home, car, park, beach etc.)	81%	83%	82%	96%	67%	83%	82%
Drank in a licensed venue (bar, pub, club, casino etc.)	14%	42%	24%	9%	67%	35%	30%
Total	21	12	33	22	18	40	73

Self-administered	Males 14-17	Males 18-19	Males	Females 14-17	Females 18-19	Females	All online
Own home	12%	21%	17%	17%	21%	19%	18%
Friend's home	73%	61%	67%	73%	59%	67%	66%
Bar or pub or hotel	7%	40%	23%	5%	29%	17%	19%
Nightclub	4%	28%	16%	3%	34%	18%	17%
Music festival or concert	3%	7%	5%	2%	9%	5%	5%
Sporting event or club	1%	2%	1%	1%	1%	1%	1%
Restaurant	1%	5%	3%	2%	1%	2%	2%
Car	2%	0%	1%	1%	3%	2%	1%
School, TAFE, university	0%	2%	1%	0%	1%	0.3%	1%
Reception centre or function room	0%	1%	0.4%	0%	2%	1%	1%
Public or other place	18%	9%	14%	21%	6%	14%	14%
Drank in a private location (a home or car)	83%	74%	79%	84%	74%	79%	79%
Drank in a non-licensed location (home, car, park, beach etc.)	93%	81%	87%	96%	75%	86%	86%
Drank in a licensed venue (bar, pub, club, casino etc.)	10%	56%	32%	6%	53%	28%	30%
Total	115	108	223	182	170	352	588

Both modalities	Males 14-17	Males 18-19	Males	Females 14-17	Females 18-19	Females	All both modalities
Own home	13%	22%	17%	16%	20%	18%	18%
Friend's home	71%	61%	66%	75%	59%	67%	66%
Bar or pub or hotel	7%	40%	22%	5%	31%	17%	19%
Nightclub	5%	26%	15%	3%	34%	18%	17%
Music festival or concert	2%	6%	4%	2%	9%	5%	5%
Sporting event or club	2%	2%	2%	1%	1%	1%	1%
Restaurant	1%	4%	2%	2%	2%	2%	2%
Car	2%	0%	1%	1%	3%	2%	1%
School, TAFE, university	1%	2%	1%	0%	1%	1%	1%
Reception centre or function room	0%	1%	0.4%	1%	2%	1%	1%
Public or other place	23%	9%	16%	21%	8%	15%	15%
Drank in a private location (a home or car)	81%	74%	78%	85%	73%	80%	79%
Drank in a non-licensed location (home, car, park, beach etc.)	91%	81%	86%	96%	75%	86%	86%
Drank in a licensed venue (bar, pub, club, casino etc.)	10%	54%	31%	6%	54%	29%	30%
Total	136	120	256	204	188	392	661

## Drinking days and average duration

Across the survey modalities, nearly two thirds of drinking sessions were held on Fridays (18%) or Saturdays (43%). The first alcoholic drink was most commonly consumed in the early evening (25% between 5-6.30pm, 37% between 7-8.30pm), and the last around midnight (28% 10-11.30, 30% midnight-1.30am, 22% 2-3.3am). The drinking session ran for an average of 6.7 hours (95% CI: 6.4, 7.0).

For F2F participants, Thursdays (19%) and Saturdays (38%) were the most common days when the drinking session commenced. The first drink was usually consumed in the evening (25% between 5-6.30pm, 36% between 7-8.30pm), and the last drink around midnight (34% 10-11.30pm, 36% midnight-1.30am, 18% 2-3.30am). The mean drinking session duration was 5.9 hours (95% CI for the mean: 5.7, 6.2, excluding 5 outliers beyond 0-24 hours, n=68).

For self-administered survey participants, Fridays (18%) and Saturdays (43%) were the most popular drinking session day. The first drink was most commonly consumed in the early evening (25% between 5-6.30pm, 37% between 7-8.30pm), and the last drink around midnight (27% 10-11.30pm, 30% midnight-1.30am, 23% 2-3.30am). The mean drinking session duration was 6.5 hours (95% CI for the mean: 6.3, 6.6, excluding 85 outliers beyond 0-24 hours, n=496).

## Beverage types

The most popular drink types across both online and F2F modalities were spirits (70%), beer (43%) and ready to drink beverages ('RTDs'; 43%). Females were more likely to report drinking spirits

( $p < .001$ ), RTDs ( $p < .01$ ), wine ( $p < .001$ ), cider ( $p < .05$ ), and liqueurs or cocktails ( $p < .05$ ) than males. Males were more likely than females to report drinking beer (71% and 25%,  $p < .001$ ).

Table 6. Types of beverages consumed at the last risky drinking session

F2F	Male 14-17	Male 18-19	Males	Female 14-17	Female 18-19	Females	All F2F
Spirits consumed straight or mixed	52%	75%	61%	77%	67%	73%	67%
Beer of any strength	43%	67%	52%	27%	33%	30%	40%
RTD of any strength	33%	8%	24%	32%	22%	28%	26%
Wine	43%	33%	39%	41%	39%	40%	40%
Cider	19%	17%	18%	27%	28%	28%	23%
Liqueur or cocktails	0%	17%	6%	0%	22%	10%	8%
Energy drinks packaged with alcohol	0%	0%	0%	0%	0%	0%	0%
Other	0%	0%	0%	0%	0%	0%	0%
Total	21	12	33	22	18	40	73

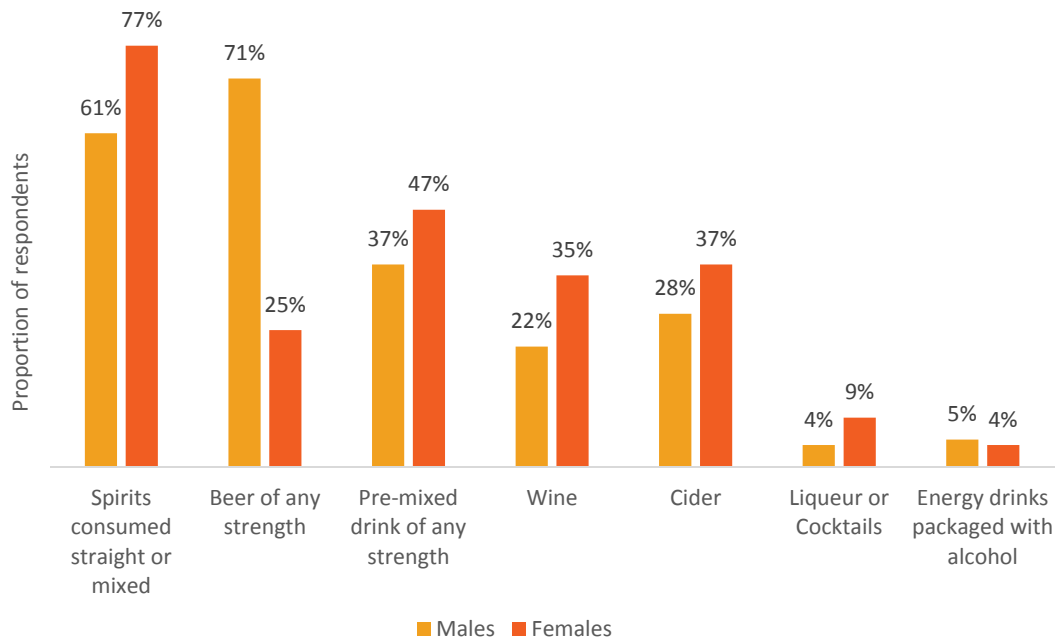
  

Self-administered	Male 14-17	Male 18-19	Males	Female 14-17	Female 18-19	Females	All online
Spirits consumed straight or mixed	61%	60%	61%	72%	82%	77%	71%
Beer of any strength	73%	76%	74%	27%	22%	25%	44%
RTD of any strength	45%	31%	38%	54%	44%	49%	45%
Wine	23%	15%	19%	30%	39%	35%	29%
Cider	35%	25%	30%	38%	39%	39%	35%
Liqueur or cocktails	4%	4%	4%	6%	13%	9%	7%
Energy drinks packaged with alcohol	5%	6%	6%	2%	7%	4%	5%
Other	0%	1%	1%	3%	2%	3%	2%
Total	113	106	219	181	170	351	583

Both modalities combined	Male 14-17	Male 18-19	Males	Female 14-17	Female 18-19	Females	All both modalities
Spirits consumed straight or mixed	60%	62%	61%	72%	81%	77%	70%
Beer of any strength	68%	75%	71%	27%	23%	25%	43%
RTD of any strength	43%	29%	37%	52%	42%	47%	43%
Wine	26%	17%	22%	32%	39%	35%	30%
Cider	32%	24%	28%	37%	38%	37%	34%
Liqueur or cocktails	4%	5%	4%	5%	14%	9%	8%
Energy drinks packaged with alcohol	5%	5%	5%	2%	6%	4%	4%
Other	0%	1%	0.4%	3%	2%	2%	2%
Total	134	118	252	203	188	391	656

Figure 1. Types of beverages consumed at the last risky drinking session (combined modalities), by gender



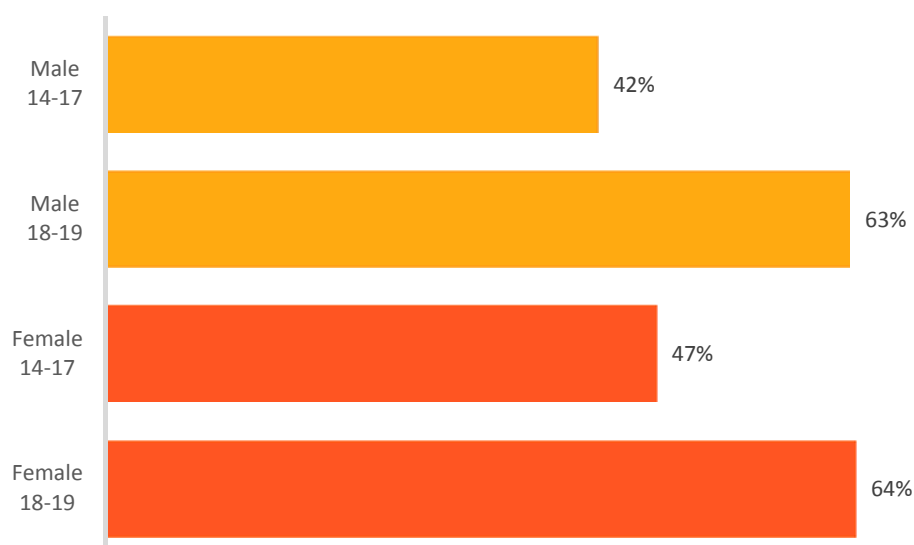
## Pre-drinking

Participants referred to ‘pre-drinking’ as the consumption of alcohol before ‘going out’ (also known as having ‘pre’s’ or ‘pre-loading’). A lower proportion of the F2F sample reported pre-drinking at their last risky drinking session than self-administered survey respondents (26% and 56% respectively). Though there were no significant differences in pre-drinking by gender, participants aged 18-19 years were significantly more likely to pre-drink than those aged 14-17 years (63% vs. 44%,  $p < .001$ ).

Table 7. Pre-drinking at the last risky drinking session

		Male 14-17	Male 18-19	Male	Female 14-17	Female 18-19	Female	Total
F2F	No	81%	83%	82%	82%	50%	68%	74%
	Yes	19%	17%	18%	18%	50%	33%	26%
	Unsure	0%	0%	0%	0%	0%	0%	0%
	Total	21	12	33	22	18	40	73
Self-administered	No	54%	32%	43%	46%	33%	40%	42%
	Yes	46%	68%	57%	50%	65%	57%	56%
	Unsure	0%	1%	0.4%	4%	2%	3%	2%
	Total	115	108	223	182	170	352	588
Both modalities	No	58%	37%	48%	50%	35%	43%	45%
	Yes	42%	63%	52%	47%	64%	55%	53%
	Unsure	0%	1%	0.4%	3%	2%	3%	2%
	Total	136	120	256	204	188	392	661

Figure 2. Pre-drinking at the last drinking session (combined modalities), by demographic



## Quantity consumed

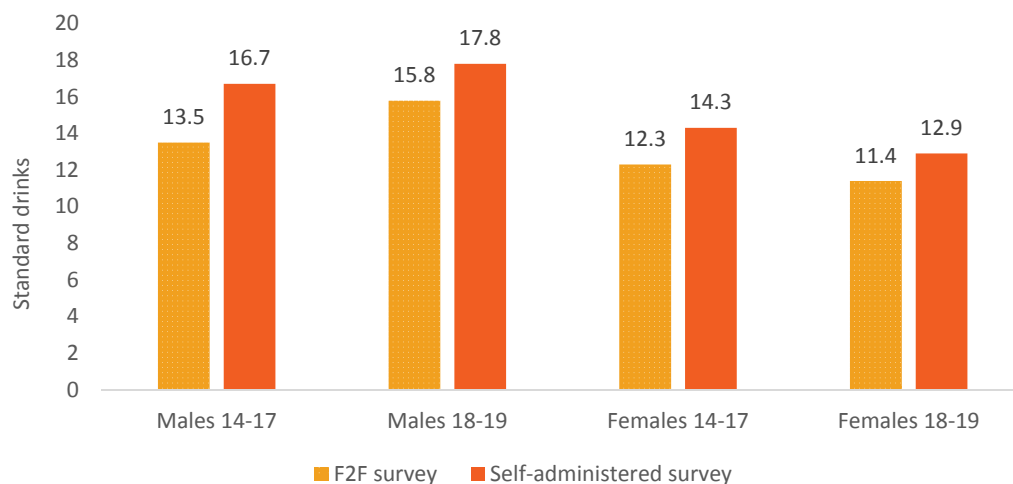
Respondents reported how much alcohol they drank at their last risky drinking session using the beverage specific response method (Table 8). Mean alcohol consumed at the last drinking session was consistently higher among self-administered survey respondents than the F2F sample (Figure 3 and Table 8).

Table 8. Mean alcohol consumption at the last risky drinking session

	Survey modality											
	F2F				Self-administered				Both modalities			
	Mean	95% CI for mean		n	Mean	95% CI for mean		n	Mean	95% CI for mean		n
LB		UB	LB			UB	LB			UB		
Male 14-17	13.5	9.9	17.0	21	16.7	14.5	18.9	95	16.1	14.2	18.0	116
Male 18-19	15.8	13.3	18.4	12	17.8	16.2	19.5	98	17.6	16.1	19.1	110
Male 14-19	14.3	11.9	16.7	33	17.3	15.9	18.6	193	16.8	15.6	18.1	226
Female 14-17	12.3	9.3	15.3	22	14.3	12.6	16.0	150	14.1	12.6	15.6	172
Female 18-19	11.4	9.3	13.6	18	12.9	11.8	14.1	150	12.8	11.7	13.8	168
Female 14-19	11.9	10.1	13.8	40	13.6	12.6	14.6	300	13.4	12.5	14.3	340
Total	13.0	11.5	14.5	73	15.1	14.3	15.9	503	14.8	14.1	15.6	576

Note: responses above 50 standard drinks were excluded from analyses. LB=lower bound, UB= upper bound, n= number of participants

Figure 3. Mean alcohol consumed at the last risky drinking session, by demographic and modality



The majority (89%) reported that they usually drank ‘a little less’, ‘a similar amount’, or ‘a little more’ compared to the last risky drinking session they described in the survey. More specifically, 8% said they usually drank a lot less, 29% usually drank a little less, 47% usually drank a similar amount, 13% usually drank a little more, and 3% usually drank a lot more alcohol (n=543).

## Outcomes of alcohol use from last session

Alcohol-related outcomes were assessed over two time periods: the 'last risky drinking session' and the past 12 months. These 32 outcomes covered a range of areas and included the items from the Brief Young Adult Alcohol Consequences Questionnaire (11). The 10 most frequently endorsed outcomes experienced in association with the last risky drinking session are presented in Table 9.

Table 9. Outcomes experienced in association with the last risky drinking session

	F2F			Self-administered			Both modalities		
	Male	Female	All	Male	Female	All	Male	Female	All
I found it easier to talk to people due to my drinking	52%	68%	60%	74%	73%	73%	71%	72%	72%
While drinking, I have said or done embarrassing things	24%	28%	26%	32%	35%	34%	31%	34%	33%
I had a hangover (headache, sick stomach) the morning after I had been drinking	15%	33%	25%	36%	34%	35%	33%	33%	34%
I have felt very sick to my stomach or thrown up after drinking	15%	18%	16%	19%	18%	19%	18%	18%	18%
I have found that I needed larger amounts of alcohol to feel any effect, or that I could no longer get high or drunk on the amount that used to get me high or drunk	6%	3%	4%	27%	25%	26%	24%	22%	23%
When drinking, I have done impulsive things I regretted later	9%	13%	11%	16%	15%	16%	15%	14%	15%
I've not been able to remember large stretches of time while drinking heavily	3%	10%	7%	19%	17%	18%	17%	16%	17%
I have often found it difficult to limit how much I drink	6%	5%	6%	17%	21%	20%	16%	19%	18%
I have had less energy or felt tired because of my drinking	3%	23%	14%	30%	29%	29%	26%	28%	27%
I have been injured due to my drinking (incl. cuts & bruises)	9%	15%	12%	15%	21%	19%	14%	20%	18%
Total	33	40	73	200	314	527	233	354	600

## Use of safety strategies while drinking

Use of safety (harm reduction) strategies during the past 12 months was assessed using Martens' et al Protective Behavioral Strategies Scale (12). These behavioural strategies can limit alcohol-related problems even after controlling for the quantity of alcohol consumed. Table 10 lists the safety strategies 'always' or 'usually' engaged in while drinking by gender and survey administration modality.

Table 10. Safety strategies usually or always engaged in while drinking in the past 12 months

	F2F			Self-administered			Both modalities		
	Male	Female	All	Male	Female	All	Male	Female	All
<b>Subscale 1: Stopping/ Limiting Drinking</b>									
Determine not to exceed a set number of drinks	12%	13%	12%	11%	18%	15%	11%	17%	15%
Alternate alcoholic and non-alcoholic drinks	27%	38%	33%	23%	22%	23%	24%	24%	24%
Have a friend let you know when you have had enough to drink	15%	18%	16%	18%	27%	24%	17%	26%	23%
Leave the bar or party at a predetermined time	30%	45%	38%	19%	27%	24%	21%	29%	26%
Stop drinking at a predetermined time	3%	15%	10%	10%	12%	11%	9%	12%	11%
Drink water while drinking alcohol	61%	65%	63%	50%	46%	48%	51%	48%	50%
Put extra ice in your drink	0%	5%	3%	12%	14%	14%	10%	13%	13%
<b>Subscale 2: Manner of Drinking</b>									
Avoid drinking games	6%	20%	14%	13%	9%	11%	12%	10%	11%
Drink shots of spirits (risk behaviour)	39%	48%	44%	48%	58%	54%	46%	57%	52%
Avoid mixing different types of alcohol	6%	10%	8%	17%	19%	18%	15%	18%	17%
Drink slowly, rather than gulp or scull	18%	33%	26%	16%	21%	18%	16%	22%	19%
Avoided trying to keep up or out-drink others	33%	53%	44%	23%	32%	29%	25%	35%	31%
<b>Subscale 3: Serious Negative Consequences</b>									
Use a designated driver	15%	28%	22%	30%	42%	38%	28%	40%	36%
Made sure that you go home with a friend	58%	93%	77%	64%	80%	74%	63%	81%	74%
Know where your drink has been at all times	67%	80%	74%	68%	80%	75%	68%	80%	75%
<b>Total</b>	<b>33</b>	<b>40</b>	<b>73</b>	<b>181</b>	<b>307</b>	<b>501</b>	<b>214</b>	<b>347</b>	<b>574</b>

Table note: Response options presented in the survey were: never, rarely, occasionally, sometimes, usually and always. These six options were dichotomised for summary purposes and this table represents individuals who selected usually or always.



## 7. References

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