

Demon Drink?

A study of alcohol and youth offending in London



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Introduction

Alcohol misuse and youth crime are commonly perceived to be closely associated. Both issues trigger public concern. Yet basic gaps exist in our understanding of how the issues relate. Remarkably little empirical study has looked in detail at the drinking levels of wider offending cohorts and the influence of excessive use on offending behaviour. Young offenders drink more than the wider population^{1,2} but the legal status of alcohol and the social sanctioning of underage drinking may result in it being overshadowed by illegal substances in a criminal justice context.

Alcohol Concern is the leading national charity working to reduce the harms caused by alcohol, and Mentor is the UK's only national drug and alcohol prevention charity. Working in partnership with funding from Trust for London and under the academic governance of Middlesex University, this study has sought to shine a light on the alcohol use of vulnerable young people in the criminal justice system in London.

Alcohol affects cognitive and physical function. After drinking, young people, less accustomed than adults to the effects of alcohol, may be more likely to engage in risk taking and criminal behaviour. Evidence shows that early experience of drunkenness is strongly linked to later problem behaviours, including fights.³ The relationship between alcohol and crime is complex; causality is hard to define, but wider study has often linked violence and excessive drinking, particularly amongst prison populations.⁴

In London, 9,542 young people were involved in the youth justice system in 2011-12 and over 20,000 offences were recorded.⁵ The extent of the influence of alcohol on

London's youth offending rates is unknown. Nationally it is estimated that alcohol consumption amongst young people aged 10 to 17 years is responsible for 80,640 violent offences per year⁶ and for criminal activity costing in excess of £5 million annually to the criminal justice service.⁷ Excessive consumption is often dismissed as a 'rite of passage' and the potentially damaging effects, both short-term and longer-term, overlooked.

A clear and established pathway from Youth Offending Services (YOSs) to specialist support exists for young people who reach the threshold for referral. Identification and intervention for the wider population of young offenders who drink in risky ways or at risky levels is less clear.

Young offenders are a vulnerable cohort often with complex psychosocial and physical needs. As this study underlines, alcohol misuse is likely to cluster with other related risks such as poor mental health and negative educational outcomes, increasing the likelihood that misuse may be overlooked. Young people themselves may not feel they have a problem which requires intervention as most are not 'addicted': fortunately, dependence amongst under-18s is rare, but addressing risky alcohol use within this particular cohort at an early stage would be of enormous potential benefit to individuals and families, whilst helping reduce the burden on criminal justice agencies and the NHS.

First-time entry to the youth justice system is now a public health outcome against which local government is measured. Universal services such as schools, and targeted services such as Pupil Referral Units (PRUs) and YOSs need to be much more informed about the poor health and life outcomes related to early alcohol use. A young person's journey through the criminal justice system is both socially and financially wasteful.

1 McMurrin, M. & Hollin, C. (1989) The Short Alcohol Dependence Data (SADD Questionnaire: norms and reliability data for male young offenders *British Journal of Addiction* 84 315-318

2 Audit Commission (1996), *Misspent Youth ... Young people and crime*, London

3 Kuntsche, E. et al. (2013) Not Early Drinking but Early Drunkenness Is a Risk Factor for Problem Behaviours Among Adolescents from 38 European and North American Countries, *Alcoholism Clinical & Experimental Research*, 37 (2)

4 The Scottish Centre for Crime and Justice Research, *Alcohol and violence amongst male offenders in Scotland (1979-2009)*, Briefing No.01/2009

5 Youth Justice Board, *Youth Justice Statistics Regional Data* (2013)

6 Budd, T. Sharp, C. Weir, G. Wilson, D. and Owen, N. (2005) *Young people and crime: Findings from the 2004 Offending, Crime and Justice Survey*. London: Home Office

7 Belis, M. et al (2007) *Alcohol and Schools – Addendum on additional economic evidence, A review of the effectiveness and cost-effectiveness of interventions delivered in primary and secondary schools to prevent and/or reduce alcohol use by young people under 18 years old*, Centre for Public Health, Liverpool John Moores University, Centre for Health and Planning Management, University of Keele

Summary recommendations

- 1) Youth justice case workers need to be confident in addressing risky alcohol use as well as making referrals to specialist support when necessary. Case workers should be trained in Identification and Brief Advice (IBA) and motivational interviewing techniques that are shown to be effective.
- 2) All those working with children and young people, particularly those working with vulnerable groups such as young offenders, need to be aware of and to implement National Institute for Health and Care Excellence (NICE) guidance around alcohol and substance misuse.
- 3) Risky alcohol use often presents as one of a cluster of risks. Workers in both universal services (such as schools) and targeted services (such as youth offending teams) need to be aware of the heightened likelihood of alcohol use amongst 'at risk' young people.
- 4) London has a consistently low-drinking culture with lower levels of use than all other regions of the country. The findings of this study cannot be considered to be representative nationally, and further research is needed in other areas to better understand alcohol use amongst offender cohorts.

Background

Alcohol

Alcohol is popularly consumed in the UK and widely available. Alcohol is illegal to purchase under the age of 18 years, although not to consume. By the age of 15 years, 74% of school children have tried alcohol.⁸ Newburn and Shiner identify several stages in young people's drinking behaviour, which changes with increasing age – typically moving from experimentation as a 12-13 year old; to testing limits in a more secretive fashion as a 14-15 year old; then seeing oneself as a more responsible drinker during the transition to young adulthood aged 17 years plus.⁹

In recent years, fewer school-age children have started to drink, but the amount consumed by those who do is high: over one in four 11 to 15 year olds who drink consume 15 or more units per week.¹⁰ However, this is likely to under-represent the problem. National surveys that target school-age children fail to capture those absent from school, truanting or excluded – a cohort at high risk of alcohol use, as this study shows. The UK also has high rates of teenage drunkenness compared with most other European countries.¹¹

Alcohol and offending

Alcohol use directly affects cognitive and physical function. Excessive drinking can reduce self-control and the capacity to process incoming information and assess risks. Alcohol can also increase impulsivity, making certain drinkers more likely to resort to violence in confrontation, reducing both physical control and the ability to recognise warning signs in potentially dangerous situations.¹² Evidence suggests that vulnerable young people are more likely to drink, and alcohol use amongst young offenders is known to be high.¹³ Disengagement from, or the absence of, parental support, escapism and a greater importance placed on social networks

may all increase the likelihood of alcohol use.¹⁴ It is also likely that similar factors in personality, development and environment predispose young people to different forms of risk-taking behaviour including alcohol use.¹⁵ However, research into the alcohol use of young people under 18 years in the justice system is limited and empirical data weak. Existing research has tended to focus on young people in detention, typically more serious offenders with the greatest vulnerabilities, and has often not differentiated between ethnicities.

Alcohol use and violent crime are commonly perceived to be closely associated. The most direct element of the relationship is when crime is actually carried out under the influence of alcohol. Half of all victims of violent crime believe their attacker was under the influence of alcohol at the time.¹⁶ Based on data from the 2004 Offending, Crime and Justice Survey, young people's drinking behaviour between the ages of 10 and 17 years is associated with 80,640 violent offences per year, of which 34,560 are cases of assault resulting in injury, and 27,200 property offences, including 15,360 cases of criminal damage.¹⁷ In the UK, more than one in five young males aged 15 to 16 years expect to get into trouble with the police after drinking.¹⁸ However, identifying the extent of alcohol as a causal factor in criminal behaviour is extremely complex. Tolerance and perceptions of excess vary. Just because alcohol and crime are found together, this does not necessarily mean a causal relationship. There is evidence to suggest that drinking alcohol can itself predispose young people to criminal activity, but a causal correlation is difficult to prove.¹⁹

8 NHS Information Centre, (2013) Smoking, drinking and drug use among young people in England 2012, London

9 Newburn, T. Shiner, M. (2001) Teenage Kicks? Young people and alcohol: a review of the literature, York, Joseph Rowntree Foundation

10 NHS Information Centre, (2013) Smoking, drinking and drug use among young people in England 2012, London

11 Social determinants of health and well-being among young people, Health Behaviour in School-aged Children (HSBC) study: International report from the 2009/10 survey. Copenhagen, WHO Regional Office for Europe, 2012 (Health Policy for Children and Adolescents, No.6)

12 World Health Organisation, Youth Violence and Alcohol Factsheet [accessed online on 13.11.13]

13 Audit Commission (1996), Misspent Youth ... Young people and crime, London

14 Clement, C. Thirlaway, K. Smith, A. & Williams, J. (May 2007) Vulnerable young people and alcohol use: a qualitative exploration, Journal of Substance Use

15 Department for Education (2011) Understanding vulnerable young people: analysis from the Longitudinal Study of Young People in England, Sheffield: Department for Education

16 Home Office, (July 2010), Crime in England and Wales 2009/10: Findings from the British Crime Survey and police recorded crime

17 Belis, M. et al, (2007) Alcohol and Schools – Addendum on additional economic evidence, A review of the effectiveness and cost-effectiveness of interventions delivered in primary and secondary schools to prevent and/or reduce alcohol use by young people under 18 years old., Centre for Public Health, Liverpool John Moores University, Centre for Health and Planning Management, University of Keele

18 The 2007 ESPAD report: substance use among students in 35 European Countries, Stockholm, Swedish Council for Information on Alcohol and Other Drugs (2009)

19 Green, R. and Ross, A. (2010) Young people's alcohol consumption and its relationship to other outcomes and behaviour. Department for Education

Youth offending

In 2011-12, 66,430 young people aged 11 to 17 years received a substantive outcome (a substantive outcome is one where young people have to engage with a Youth Offending Team, typically excluding reprimands and final warnings) from the courts.²⁰ Of this group, 59,335 were given court disposals (sentences) leading to engagement with Youth Offending Teams (YOTs). 3,925 young people received custodial sentences and a further 40,757 received an out of court sanction through the use of reprimands, final warnings, conditional cautions and fixed penalty notices not necessitating involvement with YOTs.

Asset recording

Addressing substance misuse is a Youth Justice Board (YJB) priority, with the aim of reducing the number of young people within the youth justice system who regularly use drugs and alcohol. All young offenders who come into formal contact with the criminal justice system are assessed by *Asset*, a structured assessment tool used by YOTs in England and Wales. *Asset* aims to look holistically at the young person's offence or offences, and to identify factors or circumstances which may have contributed to such behaviour, such as substance use. The information gathered from *Asset* can be used to inform court reports so that appropriate intervention programmes can be drawn up. It will also highlight any particular needs or difficulties the young person has, so that these may also be addressed.

Pathways to treatment

If a young person's *Asset* assessment indicates that their offending was linked to substance misuse, or that their use of substances is deemed to be affecting their health, relationships, and educational or employment chances, it must be assumed that they would be targeted for an appropriate intervention. The YOS is an established and effective pathway to substance misuse treatment for young people under 18 years. In 2011-12, YOTs were the most common source of referral, with 7,765 of a client total of 20,688 accessing treatment via this pathway (and a further 253 being referred from secure estates).²¹ Cannabis and alcohol are the most frequently reported drugs of misuse for young people accessing specialist substance misuse services: 92% of all clients aged under 18 cite one of these substances as the primary reason for

presentation. Alcohol was cited by 13,299 young people accessing treatment as a primary or adjunctive substance – slightly fewer than the 16,596 citing cannabis.²² Fortunately, alcohol dependence amongst young people under 18 is rare, although risky and excessive drinking is a significant problem. Outcomes for risky young drinkers who do not meet the threshold for referral are less clear, as is the consistency of identification. Risky drinkers may still receive interventions delivered by case workers and other practitioners, but the consistency and appropriateness of this work is unknown.

20 Ministry of Justice (2013,) Youth Justice Statistics 2011/12 England and Wales, Youth Justice Board/Ministry of Justice Statistics Bulletin

21 Dept of Health, (2012) Statistics from the National Drug Treatment Monitoring System (NDTMS) Statistics relating to young people England, 1 April – 31 March 2012

22 Ibid

Methodology

The purpose of this research was to contribute to an understanding of the levels of alcohol use by 11 to 17 year-olds in the justice system in London, together with predictive indicators of use and related risks. Study focused primarily on young offenders receiving non-custodial court disposals, the largest cohort in the justice system. Typically these young people will be engaged with a YOT and have a case worker. Vulnerabilities will range across the spectrum of risk. Some individuals may have previously experienced, or may go on to experience, detention; for others this will be their first and only engagement with the justice system.

Alcohol Concern and Mentor have undertaken this research under the academic governance of Middlesex University. The respected multi-disciplinary Drug and Alcohol Research Centre at Middlesex University has made important contributions to policy and practice since being established in 2002. Dr Lucy Neville and Professor Anthony Goodman provided advice on research methodology, and Dr Lucy Neville undertook the data and interview analysis. Research fellow Clare Choak from Middlesex's Crime and Conflict Research Centre contributed the literature review.

The research sought to triangulate information from two sources: *Asset* assessment data; and semi-structured interviews with young offenders.

Asset data analysis

Asset provides a standardised assessment framework of the factors contributing to a young person's offending. Assessment is an ongoing process during a young person's contact with the criminal justice service. However, *Asset* reports are typically completed at the beginning and end of all interventions and before reports for external audiences, i.e. Referral Order Panels. *Asset* information is recorded electronically and stored by individual YOTs locally. Most of this information is not collated or analysed nationally or pan-regionally.

This study was only able to use data from YOTs using the Youth Offending Information System (YOIS), a case management system employed by the majority of YOTs in London. A YOIS 'wizard' or query was developed to extract selected data fields. Twenty data fields were extracted from each client's *Asset* assessment: three demographic fields and 13

pertaining to client risks, with the remaining fields being related to the case offence and client/case tracking. Data were then entered into the statistical software package SPSS for analysis. Where multiple *Assets* were available, the first completed assessment was selected. The completeness and quality of data varied both within and between YOTs. After cleaning, full or partial data were analysed for 410 client records.

Interviews with young offenders

Interviewees were recruited from three YOTs in London, where they were invited to participate in the study by their case workers. Nineteen young people between the ages of 14 and 18 years were interviewed, with an average age of 16. Three females participated, reflecting the gender imbalance of offender cohorts. Interviews were semi-structured with a list of 24 questions divided into four areas: school experiences; local area/neighbour; alcohol use; and experience of alcohol interventions. Interviews were all conducted in private rooms on YOT premises. All discussions were recorded and transcribed verbatim after anonymisation. Transcriptions were then entered into NVivo, where they were analysed and coded thematically using a Constructivist Grounded Theory approach.²³

Case workers were sent a project brief to share with participants, and participant consent was sought in advance. Parental consent was sought for under-16s. Participants were asked whether there was anything they did not understand about what was expected of them. If so, this was explained by the researcher until full understanding was indicated. Feedback from participants was sought immediately post-interview about the process and feelings raised by the questions. Signposting information to support services was prepared in anticipation, although unused in practice. Young people were given a £10 voucher as a participation incentive. Interviews were conducted by employees of Alcohol Concern and Mentor with significant experience in youth work. Ethical approval was granted by Middlesex University Ethics Committee.

23 R. Thornberg (2012), Informed Grounded Theory, *Scandinavian Journal for Educational Research*, 56, 243-259

Reflections on the interviewing of young offenders

The interviews set out to explore in detail with young people the impact of choices made and the antecedents that may have influenced those choices; specifically, the role of alcohol and offending behaviour. All of the young people interviewed had committed crimes of varying degrees of seriousness, including violent crime. They had all had a negative experience of education and many had misused both legal and illegal substances, including alcohol and cannabis. All were able to offer an analysis of the factors that had influenced their decision-making, including their living environment, home life and educational experience.

We wanted to hear their stories. What we heard was remarkable. Young people readily recognised the impact of choices they had made and equally acknowledged both culpability and where they had been let down. It became apparent to us as interviewers that opportunities had been missed to influence young people in a way that could have diverted them from the paths they had taken. Often, this was within the education system.

The following limitations need to be borne in mind when interpreting the project findings:

- In line with the priorities of the funder, this study focused solely on London. London is something of an anomaly in terms of alcohol use; the alcohol use of young people and adults is consistently reported as lower than in other regions of the country. In 2012 less than a third (31%) of London school pupils aged 11 to 15 years had ever drunk alcohol compared with just over half (51%) in the North East. The amount consumed by those who drank within the last week was also lower in London, with 9.4 units consumed each week compared with 15.7 units in the North East and the North West.²⁴ Reasons for this are debated but immigration and religion are likely to be factors. London is a large, multi-cultural metropolis whose composition, influences, patterns and trends do not reflect the whole country. Results from this London study should not be considered representative of the national picture. Further study is required in other areas of the country

- Asset data is not developed for the research purposes of this study. Alcohol data available for analysis was limited to 'ever', 'recent', 'age of first use' and 'not known to have used' fields. Definition of what for the participants constituted 'recent' (last week, month, year) or 'use' (a sip, a whole drink, experience of being drunk) was lacking, and more detailed information on drinking frequency, unit consumption or experiences of being drunk was unavailable. Although the available data fails to provide a full or detailed picture of alcohol use, it is still a valuable source of primary information. The lack of depth to the alcohol information is in part why the project also sought to include the views of young people themselves
- The project had difficulty in securing the engagement of YOTs. Almost all YOTs approached expressed a high degree of interest in the study area but felt constrained by existing pressures in their capacity to contribute. Three further YOTs committed to providing data but did not possess the required Asset Analysis Tool to facilitate data extraction from the information system, meaning that it could not be included in the research
- Interviewees were selected by their case workers and invited to participate. Although the project sought participants from across the risk spectrum, interviewees cannot necessarily be considered representative of total offender populations. Self-reporting reliability always needs to be considered.²⁵

24 NHS Information Centre, (2013) Smoking, drinking and drug use among young people in England 2012, regional breakdown [accessed online at <http://www.hscic.gov.uk/catalogue/PUB11334>]

25 Midanik, L (1988) Validity of Self-Reported Alcohol Use; a literature review and assessment, British Journal of Addiction, 83, 1019-1029

Study results

Alcohol viewed by young offenders as a problematic substance

Cannabis and alcohol are the two most common problem substances for young offenders.²⁶ The dataset did not allow for comparison between the prevalence of alcohol use and other substances, but participant interviews questioned alcohol and cannabis use. All but two of the 19 young people interviewed for the project (89%) stated that they had 'ever' drunk alcohol, with an average drinking onset age of 14 years. Five of the 19 described themselves as current drinkers (mainly on special occasions) and only one as a regular drinker. Slightly more interviewees, 18 out of 19 (95%), had 'ever' smoked cannabis compared with 17 out of 19 who had 'ever' drunk alcohol. Sixteen young people disclosed that they currently smoked, albeit infrequently in some cases, a higher rate than current drinkers.

Young people tended to view alcohol more negatively than cannabis. Excessive drinking was associated with 'losing control'. Reflecting on this link, respondents spoke about how alcohol made them unaware of what they were doing, quick to 'jump in' to a violent or dangerous situation and easily irritated by things that would not normally annoy them, such as someone 'looking at [them] in the wrong way'. Anger and alcohol were strongly associated: 68% of the interviewees discussed how alcohol triggered 'violent' or 'aggressive' behaviour. All of these respondents felt that alcohol had historically had a negative effect on their own behaviour, making them short-tempered and impulsive. The tendency for alcohol to contribute to anger was a strong reason given by those who stated that they had given up drinking altogether, suggesting efforts to manage or control negative behaviours.

"[Alcohol] just changes me, makes me different, like, [more] physical and I get angry quickly and stuff." (#9, male, 14)

While participants were generally aware of the dangers of cannabis use (particularly skunk), none of them felt that it was *more* dangerous than alcohol use. In addition to the detrimental effect alcohol could have on behaviour,

a number also mentioned that they believed it was also more damaging to people's health than cannabis.

"You could be happy and stuff [when drinking] and something happens you can just turn and go angry and ... it's mad. I reckon it's worse than some drugs ... Cannabis, yeah, that puts you on a wanna go to sleep; alcohol, some people can drink certain alcohol and just wanna fight ... it controls your brain more than smoking I think." (#2, male, 16)

A number of participants expressed the feeling that alcohol had a much bigger influence than cannabis on offending behaviour (in both themselves and other young people). Three participants specifically felt that alcohol had played a role in them committing their own index offences.

"[I used to drink] vodka ... People call it evil juice ... Just used to ... turn me stupid. Doing silly things, it gets me angry. It just gets me angry [and] I want to fight people ... I reckon alcohol has a little bit to do with it [getting in trouble] coz it builds you up, doesn't it? I was tippy [when offending]." (#12, female, 17)

Other young people spoke of experiences of being drunk and having committed crimes, including acts of violence, for which they were not caught and/or which did not involve the police. As this study will discuss later, it is likely that many alcohol-related fights and other problematic behaviours take place out of the sight of authorities and never come to the attention of the police.

"If you met me when I'm drinking you'd think I was a happier guy, but if it gets aggro I can get angry. It's crazy, I've done lots of things when I was drunk and got away with it, not got caught by the police." (#14, male, 16)

Key insights

- Young people strongly associate alcohol with a loss of control, aggression and fights. In some instances alcohol has contributed to offending behaviour
- Compared with cannabis, young people view alcohol as a more problematic substance.

26 Dept of Health, (2012) Statistics from the National Drug Treatment Monitoring System (NDTMS) Statistics relating to young people England, 1 April – 31 March 2012

Risky drinkers may not be receiving appropriate intervention

YOSs have a clear and established relationship with specialist substance misuse services. For young people identified and reaching the threshold for referral, there is a pathway to support. Interventions for risky drinkers who do not meet the referral threshold are less clear, as is the consistency of identification. Four interviewees had 'ever' received some form of alcohol intervention – all in educational settings. None of the young offenders interviewed had 'ever' received any formal advice or interventions around alcohol in youth justice settings, although six said that alcohol played a part in them getting into trouble. It was noted that interventions following on from the index offence tended to focus on drugs, not alcohol. One young man described his arrest for drunkenly attacking someone with a brick as an act directly caused by his excessive drinking. Although arrested for GBH the young man had never received any advice or intervention around alcohol. He did however participate in a cannabis harm reduction group through the YOT, to address his smoking.

Interviewees were more likely to have received advice and interventions related to cannabis use in youth justice settings – in part explained by the higher proportion of 'current' cannabis users compared to 'current' drinkers. Interviewees described one-to-one and group sessions around cannabis-cessation and harm-reduction strategies. Several noted the value of these sessions and how participation had helped them to reduce smoking.

Dependency is rare amongst under-18s, so young people are unlikely to consider themselves to be 'addicted' to alcohol. The risks of early alcohol use are not widely understood, and underage drinking is commonly socially sanctioned. However, young people themselves were able to reflect on the problematic consequences of excessive drinking. Widespread recognition of cannabis-related risk and the substance's illegal status may mean intervention is a focus in youth justice contexts. In comparison, risky alcohol use and alcohol-related offending may be under-identified and under-addressed.

Key insight

- The criminal justice system may put greater emphasis on illegal acts, and hence focus on illegal drugs. Young people may be more likely to receive interventions for cannabis use than for that of alcohol in youth justice settings, although the pathway to specialist support for those who reach the referral threshold for both substances is strong.

Asset alcohol recording limited

The *Asset* dataset extracted from YOIS does not provide a sophisticated or complete picture of alcohol use. It is not a tool designed for research purposes. Alcohol data was available for 388 (95%) of the total 410 records analysed – information 'not known' was recorded for 22 (5%) of the total. Of the 388 complete records, 217 (56%) young offenders had 'ever' used alcohol and 171 (44%) are not known to have 'ever' drunk. Under half of 'ever' drinkers recorded 'recent' use – 95 of 217. 'Recent' drinkers therefore make up less than 25% of the total client cohort sampled (95 out of 388 records).

Table 1: Breakdown of alcohol use from *Asset* records

Asset recording of alcohol use		
Ever drunk alcohol	217	56%
Not know to have used alcohol	171	44%
Total complete records	388	100%

These rates of alcohol use suggest lower levels than in any other national study of offender cohorts. National studies have suggested that nine in 10 young offenders have 'ever' drunk alcohol²⁷ and around half of young offenders get drunk at least once a week.²⁸ However, there is limited comparable data available for non-custodial young offenders, and London has a consistently low-drinking culture. For example, only 31% of school-age pupils aged 11 to 15 years in London have 'ever' drunk alcohol, and 7% have drunk in the last week - below national rates of 43% and 10% respectively.²⁹

Issues exist around the quality and depth of the data available, and conclusions need to be drawn cautiously as alcohol may be under-reported (even accounting for lower London consumption trends). Under-detection of alcohol amongst offender cohorts is a concern highlighted by the accompanying literature review. Drinking frequency, consumption volume, experience of drunkenness and the influence of alcohol on other risky behaviours all comprise important information for youth justice case workers to record. More detailed recording of alcohol via *Asset* could improve identification of misuse and further an understanding of related risks.

Key insight

- The dataset analysed may under-record alcohol use. *Asset* data suggests drinking levels considerably below other studies; however, directly comparable research with London offenders is limited.

27 Hammersley, R. Marsland, L. & Reid, M. (2003) Substance use by young offenders, Home Office 192

28 Audit Commission (1996), Misspent Youth ... Young people and crime, London

29 NHS Information Centre, (2013) Smoking, drinking and drug use among young people in England 2012

Alcohol linked to mental health and disaffection with education

Analysis of the dataset nevertheless indicates a significant relationship between alcohol use and mental health issues – a finding also supported by wider research linking substance misuse and mental health. Of 113 clients who had had contact with/been referred to mental health services, 71% had used alcohol in the past. Alcohol use is known to be more common amongst people with mental health issues. Drinking can contribute to mental health issues, increasing the risks of depression and anxiety, but many people also drink to deal with difficult feelings or symptoms of mental illness, using alcohol as a coping strategy. It is not possible to draw conclusions about causality from these findings.

The link between alcohol use and mental health may not be as well recognised as that between mental health and cannabis; there is greater awareness of cannabis' psychotropic properties. High rates of co-existence between alcohol and mental illness suggest that awareness is desirable, and YOSs need to consider alcohol risks when working with clients with mental health issues.

A strong correlation also emerges between alcohol use and poor educational experiences across a range of indicators: recent use is often associated with the poorest outcomes. Of the 223 participants for whom school attendance was known, 58% had used alcohol. Those who had 'ever' used alcohol were likely to have had issues with school attendance such as truancy and exclusion. Of the 43 participants known to have been excluded from school, 65% had used alcohol (35% had not) and 28% of those excluded were 'recent' users.

Almost all young people interviewed expressed disaffection with their educational experience. Twelve of the 19 interviewees stated that they had been permanently excluded, often multiple times and often starting in key stage 3. Eleven described consistently truanting from school. Those who had attended Pupil Referral Units (PRUs) often spoke negatively of the experience, describing the environment as unchallenging or unconstructive.

“I got kicked out in the middle of year 8, I wasn't really in main school [after that] ... and that's when I started going down the wrong path ... I haven't really learnt nothing from there [the PRU] the whole time I was there ... They're supposed to be [helpful], but they didn't really help me at all ... They just weren't teaching me nothing, so I didn't wanna go.” (#2, Male, 16)

Asset data suggests that recent users of alcohol are more likely to have or have had poor relationships with teachers: 54% of such users were 'recent' drinkers. 'Recent' drinkers were also more likely to have experienced other educational problems, such as frequent changes of school or finding school boring/unchallenging. A strong link exists between alcohol use and overall negative attitudes towards Education, Training and Employment (ETE). Again, 'recent' drinkers were more likely to have a negative attitude toward ETE than non-recent users (48% of those who had negative attitudes were 'recent' users, 28% had 'ever' used but not recently, and 24% had never used).

It is not possible to draw conclusions about the causality of alcohol in poor mental health or negative educational experiences based on these findings. Alcohol itself was not identified as a factor in educational disaffection and seems unlikely to have been a significant contributor to educational problems. However, experience of exclusions, truancy and attending a PRU may increase the likelihood of poor outcomes, including alcohol misuse. Positive school experiences may also act as a protective factor, increasing resilience. Alcohol may not represent the most significant vulnerability in the lives of many young people aged 11 to 17 years, but it does appear as a thread between other risk factors and vulnerabilities. It is highly likely that the data reflects the fact that, for many young people in the youth justice system, alcohol represents one of a cluster of risks contributing to poor life outcomes.

Both mental health services and schools – and PRUs in particular – need to be aware of the increased risk of alcohol use by the young people they work with. Practitioners should be aware that alcohol may be overlooked when multiple risks are present in a young person's life. Early identification is vital as early drunkenness and risky drinking patterns shape later relationships with alcohol and are linked to the increased likelihood of problematic behaviours.

Key insights

- Alcohol use is strongly linked to mental health issues
- Alcohol use is also strongly linked to negative educational experiences including exclusion and truancy. Recent use is often associated with the poorest outcomes
- Alcohol is likely to cluster with other risks in vulnerable young people's lives. Drinking may not be the greatest single risk but it threads between other vulnerabilities.

Alcohol use and violent offending: no clear relationship

Analysis of the offender dataset does not demonstrate a clear relationship between alcohol use and violent offending. The lack of a substantive correlation ran contrary to this study's expectations based on existing research into offending causes. A small relationship was found between those who have/use(d) alcohol, the subset of offenders whose offence was linked to substance misuse (not necessarily alcohol), and violent crimes against the person (e.g. GBH, ABH, assault). This link disappears if violent offences more generally (such as robbery and sexual assault) are included in the analysis. The relationship is thus very specifically tied in to offences centred around 'fighting'. This is an interesting trend in line with what the qualitative data reveals about alcohol making people more aggressive/likely to get into fights.

Fighting is strongly associated with alcohol use. Hazardous drinking is a risk factor both for being victimised and for perpetrating youth violence³⁰ and early drunkenness is linked to experience of fights, injuries and other problem behaviours.³¹ In England and Wales, males aged 18 to 24 years who report feeling very drunk at least monthly are more than twice as likely to have been involved in a fight in the previous year.³² The British Medical Association (BMA) estimates that in the UK, 78% of assaults are committed under the influence of alcohol.³³

Although evidence supporting the link between alcohol and fighting appears strong, that linking alcohol and violent recorded offences in under-18s appears less so. The YJB does not have statistics on the prevalence of alcohol on point of arrest. Limited existing research has tended to study higher-risk imprisoned young people, with research typically taking place in Youth Offending Institutes (YOIs) rather than amongst the wider young offender populations, many of whom are completing community sentences. Young people interviewed for the study strongly

associated excessive alcohol with losing control and involvement in fights, both in general assumption about behavioural consequence and in their personal experience. All interviewees who had drunk felt that alcohol had historically had a negative effect on their behaviour, characteristically making them short-tempered and impulsive. Six young people associated excessive alcohol with their own 'getting into trouble'. Others talked about committing acts of violence after drinking that they did not necessarily consider to be 'crimes' because the police were not involved. It becomes clear from the interviews that

for many young people, the definition of breaking the law or committing criminal offences may be linked to the act of getting caught.

It needs to be considered, given the strength of the link between alcohol and fights amongst boys and young men in particular, that alcohol-related violence may be under-recorded by criminal justice agencies. Such incidents are likely to take place in the same environments in which minors drink – often out of sight of the wider public or the authorities. Violence is likely to take the form of a fight, often without grave harm and involving someone known to them, reducing the likelihood of incidents coming to the attention of criminal justice agencies. As young adults graduate toward drinking in the managed night-time economy post-18 years, violence resulting in criminal justice outcomes may increase. In part this may be explained by an escalation in severity, greater likelihood of violence involving strangers, and because incidents are more likely to take place in controlled or supervised environments such as bars, clubs or town centres. The link therefore between alcohol, violence and criminal justice outcomes may become stronger once young people reach the legal drinking age of 18 years.

Key insights

- Analysis of the *Asset* dataset did not find a clear relationship between alcohol use and violent offending. A small link was found amongst a drinking sub-set of offenders, but the data was not sufficiently detailed to draw robust conclusions.
- Young people appear to strongly associate excessive drinking with fights, aggression and loss of control.

30 World Health Organisation, Youth Violence and Alcohol Factsheet [accessed online on 13.11.13]

31 Kuntsche, E. Rossow, I. Simons-Morton, B. Ter Bogt, T. Kokkevi, A. Godeau, E. (2013) Not Early Drinking but Early Drunkenness Is a Risk Factor for Problem Behaviors Among Adolescents from 38 European and North American Countries, *Alcoholism Clinical & Experimental Research*, 37 (2)

32 World Health Organisation, Youth Violence and Alcohol Factsheet [accessed online on 13.11.13]

33 Jones, G. & Hoffmann, N. (2006) Alcohol dependence: international policy implications for prison populations, *Substance Abuse Treatment, Prevention, and Policy* 1:33

Conclusion

Alcohol misuse by young people involved in the justice system is under-studied. Existing research tends to be restricted to detained young offenders or to adult offender populations. This limited study has sought to shed some light on drinking amongst young offenders in London, and the related risks. Findings should be interpreted cautiously, as the information analysed from *Asset* records is ecological data that is not collected for research purposes. Interviews with young people involved in the youth justice system provide qualitative detail for some but not all of the areas where the data is limited.

Strong relationships between mental health risks, educational disaffection and alcohol use emerge from the data. Early experience of exclusion and truanting are particularly linked to recent alcohol use. It is not possible to draw conclusions about causality, but the relationships align with existing evidence around clusters of risk in vulnerable offender sub-groups.

A clear, direct link between alcohol use and violent crime was not found in the data, although a small relationship was found amongst a sub-set of drinkers whose offending was influenced by substance misuse. Drinking associated with experiences of fighting and violence does emerge strongly from interviews with young offenders – a relationship supported by wider research. It is probable that alcohol-related violence involving under-18s frequently does not come to the attention of, or is not processed by, the police. Alcohol-related criminal outcomes are likely to become more severe with age.

Both the quantitative data and qualitative interviews suggest that young offenders in London are unlikely to be regular drinkers. It is important to note that London as a region consistently reflects a low drinking culture, so the study findings cannot be considered representative nationally. In comparison, cannabis appeared to be favoured as a more controlled way to relax, whilst alcohol was perceived as a problematic substance with negative influence on mood and self-control.

Cannabis and alcohol are the primary reasons for most referrals to young people's substance misuse services. The pathway from YOSs to treatment for young offenders is established, and appears to function effectively for those who meet the threshold for referral. Screening and delivering interventions for risky drinkers below

the threshold for referral – potentially a large cohort – is unclear. Interview findings suggest that alcohol-related offending may not be consistently identified nor alcohol interventions in youth justice settings consistently delivered. Competing vulnerabilities in the lives of young offenders may result in risky alcohol use being overshadowed by other concerns.

Recommendations

- 1) Youth justice case workers need to be confident in addressing risky alcohol use as well as making referrals to specialist support when necessary. Case workers should be trained in Identification and Brief Advice (IBA) and motivational interviewing techniques that are shown to be effective.
- 2) All those working with children and young people, particularly those working with vulnerable groups such as young offenders, need to be aware of and to implement National Institute for Health and Care Excellence (NICE) guidance around alcohol and substance misuse.
- 3) Risky alcohol use often presents as one of a cluster of risks. Workers in both universal services (such as schools) and targeted services (such as youth offending teams) need to be aware of the heightened likelihood of alcohol use amongst 'at risk' young people.
- 4) London has a consistently low-drinking culture with levels of use below that of other regions of the country. The findings of this study cannot be considered to be representative nationally, and further research is needed in other areas to better understand alcohol use amongst offender cohorts.

Bibliography

- Audit Commission (1996) *Misspent Youth ... Young people and crime*, London
- Belis, M. et al (2007) *Alcohol and Schools – Addendum on additional economic evidence, A review of the effectiveness and cost-effectiveness of interventions delivered in primary and secondary schools to prevent and/or reduce alcohol use by young people under 18 years old*, Centre for Public Health, Liverpool John Moores University, Centre for Health and Planning Management, University of Keele
- Budd, T. Sharp, C. Weir, G. Wilson, D. & Owen, N. (2005) *Young people and crime: Findings from the 2004 Offending, Crime and Justice Survey*. London: Home Office
- Clement, C. Thirlaway, K. Smith, A. & Williams, J. (May 2007) *Vulnerable young people and alcohol use: a qualitative exploration*, *Journal of Substance Use*
- Department for Education (2011) *Understanding vulnerable young people: analysis from the Longitudinal Study of Young People in England*. Sheffield: Department for Education
- Department of Health (2012) *Statistics from the National Drug Treatment Monitoring System (NDTMS) Statistics relating to young people England, 1 April – 31 March 2012*
- Green, R. & Ross, A. (2010) *Young people's alcohol consumption and its relationship to other outcomes and behaviour*, Department for Education
- Hammersley, R. Marsland, L. & Reid, M. (2003) *Substance use by young offenders*, Home Office 192
- Home Office (July 2010) *Crime in England and Wales 2009/10: Findings from the British Crime Survey and police recorded crime*
- Jones, G. & Hoffmann N. (2006) *Alcohol dependence: international policy implications for prison populations*, *Substance Abuse Treatment, Prevention, and Policy* 1:33
- Kuntsche, E. Rossow, I. Simons-Morton, B. Ter Bogt, T. Kokkevi, A. & Godeau, E. (2013) *Not Early Drinking but Early Drunkenness Is a Risk Factor for Problem Behaviors Among Adolescents from 38 European and North American Countries*, *Alcoholism Clinical & Experimental Research*, 37 (2)
- McMurrin, M. & Hollin, C. (1989) *The Short Alcohol Dependence Data (SADD) Questionnaire: norms and reliability data for male young offenders*, *British Journal of Addiction* 84 315-318
- Midanik, L (1988) *Validity of Self-Reported Alcohol Use; a literature review and assessment*, *British Journal of Addiction*, 83, 1019-1029
- Ministry of Justice (2013) *Youth Justice Statistics 2011/12 England and Wales*, Youth Justice Board/Ministry of Justice Statistics Bulletin
- Newburn, T. & Shiner, M. (2001) *Teenage Kicks? Young people and alcohol: a review of the literature*, York, Joseph Rowntree Foundation
- NHS Information Centre (2013) *Smoking, drinking and drug use among young people in England 2012*, London
- Social determinants of health and well-being among young people, *Health Behaviour in School-aged Children (HSBC) study: International report from the 2009/10 survey*. Copenhagen, WHO Regional Office for Europe, 2012 (Health Policy for Children and Adolescents, No.6)
- The 2007 ESPAD report: *substance use among students in 35 European Countries*, Stockholm, Swedish Council for Information on Alcohol and Other Drugs (2009)
- The Scottish Centre for Crime and Justice Research, *Alcohol and violence amongst male offenders in Scotland (1979-2009)*, Briefing No.01/2009
- Thornberg, R. (2012) *Informed Grounded Theory*, *Scandinavian Journal for Educational Research*, 56, 243-259
- Youth Justice Board, *Youth Justice Statistics Regional Data* (2013)
- World Health Organisation, *Youth Violence and Alcohol Factsheet*

Appendix

Literature Review

Introduction

Thirty years ago Hollin (1983) stated that research studies about the relationship between young offenders and alcohol were few and far between. Today very little empirical data remains available on this topic within the UK context. Furthermore, the literature that does exist relates primarily to young men and does not differentiate by ethnicity. Historically, the link between alcohol and offending has been presented as a problem and threat. The suggestion that so-called 'alcohol-fuelled' crime is on the increase is a common, but misinformed, public perception (Dingwall 2007).

The links between alcohol use, youth offending and socio-economic deprivation

Over 90% of adults in the UK drink alcohol (Cabinet Office 2003). Heavy alcohol consumption is not confined to the most deprived areas of the population and affects people from all social classes. However, alcohol misuse tends to be linked with socio-economic position as people from deprived areas will suffer greater social inequalities as a result of their drinking patterns (Batty et al. 2008). Furthermore, alcohol-related deaths are higher in areas of deprivation in the UK (Ersikine et al. 2010). In Scotland nearly two thirds of alcohol related deaths were amongst people who lived in deprived areas (Alcohol Focus Scotland 2005). The rise in hospital admissions for young people from areas of deprivation has risen, and a cut in youth services has been blamed for the trend (CYPNOW 2012).

It is also well established that young men drink more than any other group, and that young offenders drink more than non-offenders (McMurran & Hollin 1989). The 18-24 age group of a young offender is linked to the heaviest drinking in the population (McMurran 1991). Drunkenness, as a crime, crosses all age categories but is associated predominantly with young men (Deehan 1999). A study of young people noted that 28% of 18-24 year old men and 19% of women had drunk more than the weekly recommended amount and overall blamed alcohol rather than drugs as a precursor to crime (Richardson & Budd 2003). Around one in six prisoners in England reported an alcohol problem on arrival in prison while one in five younger prisoners who claimed not to misuse alcohol were consuming over 50 units a week (double the government's recommended 21 units) (HM

Inspectorate of Prisons 2010). At 32%, the proportion of hazardous drinkers in UK prisons was nearly twice as high as within the general population (Parkes et al. 2010). In Scotland 45% of prisoners are estimated to have an alcohol problem – compared to 16% of the general population (NHS Health Scotland 2012). In England 37% of offenders under probation supervision have a problem with alcohol use (NOMS 2006) while 61% considered there to be a link between their alcohol consumption and offending patterns (McMurran & Hollin 1989). The link between substance misuse and youth offending has long been established (YJB 2013). NOMS (2006) for example suggests that alcohol misuse contributes significantly to crime. However, the relationship between alcohol, crime, and offending is a complex rather than causal one.

Unlike gender, age, and ethnicity, the socio-economic status of an offender is not recorded at point of arrest or on entry to prison – however the majority do come from lower class backgrounds (Coleman & Moynihan 1996). For example, one in ten young men from deprived communities will have spent time in prison by the age of 23. Furthermore, male imprisonment from the 27 most deprived wards was 953 per 100,000 compared to a national average of 237 (Croall 2011). In Scotland 28% of prisoners came from the poorest council estates while only 10% of the population live in these environments (Houchin 2005). According to Dingwall (2005:43) those with increased rates of offending and increased rates of alcohol consumption '...do share common characteristics as young people who are socially disadvantaged come from dysfunctional families and whose own parents have a history of deviancy having increased rates both of offending and of drinking more than average'. With that in mind, it is also worth remembering that the law is less likely to be used against the powerful – while the least powerful are more likely to experience criminalisation through their visibility in the public rather than private domain, i.e. on the streets. As Muncie (2004) rightly points out, middle class youth are just as likely to commit crime; however, they are less likely to be arrested for it. The criminality of certain youth groups has been exaggerated and consequently working class young people have a much higher risk of arrest than their middle class counterparts.

Whilst it is difficult to demonstrate a causal correlation between alcohol and crime, the British Medical Association has estimated that in the UK 78% of assaults are committed under the influence of alcohol (Jones & Hoffman 2006). Collins (1982) concluded

that alcohol is sometimes causally implicated in the incidents of crime, while it is also widely assumed that there is a direct relationship between alcohol and crime (Bennett & Holloway 2005). But what constitutes misuse is open for debate, as tolerance varies greatly and perceptions of excess also differ. Just because alcohol and crime are found together does not necessarily indicate a causal relationship. People may have been drunk on arrest but alcohol may not have influenced their offence. The relationship between alcohol and crime then is not as straightforward as is commonly assumed; it is far more fluid and complex.

A subjective determination has to be made in terms of what actually constitutes being under the influence of alcohol (Dingwall 2005). If young offenders are not aware of exceeding government drinking guidelines, how can levels of drinking be monitored in terms of establishing a direct link between crime and alcohol? This leads to the question of how realistic the suggested government guidelines are and how they are interpreted by the population. In tandem, it is also worth considering the reliability of self-reporting by offenders in custody in terms of their drinking habits. As Dingwall (2005:35) cogently argues,

If anything negative happens after alcohol has been consumed it is assumed alcohol was the direct cause, therefore, one cannot assume that an offence occurred because of the presence of alcohol if the offender has been drinking prior to these incidents. It may have happened anyway. There is also the possibility, and this is almost invariably forgotten, that alcohol may stop some offences from taking place. The individual, for example, may have become too intoxicated to carry out offence that would otherwise have occurred ... Whilst studies consistently document that a very high proportion of offenders had drunk alcohol prior to offending, it remains difficult to find any direct link between alcohol and crime

The prevalence of alcohol and drug³⁴ use by young people at point of arrest

The YJB does not have statistics on the prevalence of alcohol on point of arrest and the literature available is extremely limited. A high proportion of offenders serving custodial sentences report having been drinking prior to their arrest, with 38% of young offenders admitting to

being drunk while they committed their offence and 10% claiming to be alcoholics (Hollin 1983). Jeff & Saunders (1983) attempted to ascertain the proportion of offenders who had been drunk in the four hours prior to arrest, and broke down the findings into crimes: criminal damage 88%, breach of the peace 83%, assault 78%, theft 41%, and burglary 26%. In Cookson's (1992) study, 25% said they had been drunk at the time of the current offence and 16% said they had been drinking but were not drunk. Alcohol was self-reported to be a factor in the offence by 40% of offenders according to Parkes et al. (2010). Alcohol had been consumed prior to the offence in 73% of domestic violence cases (NOMS 2006). In a Scottish study 57% of offenders stated that their actions had been caused by alcohol, compared with 40% in 1996 and 29.5% in 1979. 66% of young offenders were drunk at the time of their offence, with 52% reporting that their drinking is a problem outside of prison compared with 30% of adult prisoners (Alcohol Focus Scotland 2005). Respondents suggested that 'if they were sober they would not have got caught – not that they would have been deterred from offending' (Telegraph 2008).

Recent studies indicate that 50% of prisoners in Scotland reported being drunk at the time of their offence (SPS 2009), and 77% of young offenders (SPS 2010). Furthermore 66% of young offenders were drunk at the point of their arrest compared to 35% of adult offenders. Dingwall (2005) points out that the self-reporting method is very popular in terms of assessing alcohol use at point of arrest; however, it is subjective and relies on the memory and truthfulness of the offender. Asking whether someone has drunk alcohol does not differentiate between somebody who has drunk a little or a lot, so again the link between offending and crime becomes complex if levels of alcohol are not taken into consideration and notions of what is considered excessive are constructed by the individual.

It is accepted that drug use and offending are linked but, as with alcohol, this is a complex debate. In terms of the prevalence of substance use amongst young offenders 91% had drunk alcohol, 44% had taken ecstasy, 41% amphetamines, 25% cocaine and LSD, 18% crack cocaine and 11% heroin (Hammersley et al. 2003). Offenders at the police station often tested positively for drugs with 69% positive for at least one drug (excluding alcohol), 29% for opiates and 20% for cocaine (Bennett & Sibbitt 2000). In another study heroin and cocaine were tested with rates of offenders in London totalling 63%, in Nottingham 58% and in Stafford and Cannock

34 A separate review is required to look at drug use

47% (Bean 2008). As drug misuse is illegal this makes it more difficult to measure. It is not possible to determine crimes which were caused by drug taking and those which were not. But as with alcohol it is problematic to state a causal link between crime and drug use. Multiple drug use is common, in addition to the simultaneous use of alcohol. In these cases how can it be determined which drug caused the crime to occur, if at all?

The efficacy of alcohol screening and interventions in youth justice settings

As yet, little is known about the effectiveness of UK interventions/programmes in reducing alcohol-related crime. However, given the large number of offenders under statutory supervision who have an alcohol related criminogenic need, reducing the alcohol consumption of this group to low risk levels through evidence based and appropriately targeted interventions should have a significant impact in reducing their likelihood of re-offending (NOMS 2005:25)

Alcohol dependence is the most prevalent substance disorder in UK prisons – despite the emphasis on drugs in custodial settings (Jones & Hoffman 2006). There is very limited evidence available on the effectiveness of alcohol treatment for offenders within UK prisons (Alcohol Concern 2007). Specific literature around young offenders and intervention is particularly sparse. In terms of screening for alcohol only half of the assessments were determined to have been of sufficient quality (HMI Probation 2010). According to Newbury-Birch et al. (2009 cited in Parkes et al. 2010) ‘... current methods of identifying offenders with alcohol-related need in probation are flawed and as such many people go undetected’. The lack of evidence on alcohol assessments has been identified by Barton et al. (2009) who highlight that large scale screening is required, in addition to more information on the most effective methods of targeted screening and interventions in custodial settings. However, Parkes et al. (2010) provide a comprehensive overview, noting that while no one screening tool was superior, AUDIT was found to be the most promising (the tool can be accessed here <http://pubs.niaaa.nih.gov/publications/aa65/aa65.htm>). AUDIT screening in prison settings can notably improve the detection and understanding of alcohol problems according to MacAskill et al. (2001). UNCOPE was regarded as having potential but more evidence was required in order to evaluate its effectiveness. They also acknowledge that more than

one screening tool is required to cater for a diverse population and that the voice of the prisoner is virtually unheard in the review of literature which was carried out.

In the 80's and 90's Alcohol Education Courses (AECs) were provided in the UK as part of a Social Work response to treatment focusing on health and education. These were based on the rationale that provision of educational packages will impact on drinking and offending behaviours. This was underpinned by the understanding that AECs would focus on the ‘... acquisition of behavioural skills, and the progressive “shaping” and refinement of these techniques, via feedback sessions’ (Baldwin et al. 1991:327). In England, the implementation of alcohol education programmes was variable despite the lack of suitable alternatives – although even very brief screening interviews may have a positive impact on young adult offender-drinkers according to Balwin et al. (1996). NOMS (2006) and Parkes et al. (2010) concur, noting that Alcohol Brief Interventions (ABIs) are effective but this has not been established yet in the custodial setting.

Alcohol treatments vary greatly, suggesting a lack of consensus over the problem of appropriate intervention according to Harrison et al. (2003). Findings from the 2010 HMP Inspectorate of Prisons concluded that despite nearly one in five prisoners entering prison with an alcohol problem, very few prisons had alcohol interventions. A number prioritised the detection of alcohol in prison over treatment, and half of prisons used no screening tool at all. 40% of all alcohol interventions had still not commenced 4-6 months after supervision had begun. Alcohol Treatment Requirements (ATRs) were requested but only 8% were receiving them in 2007/8. Alcohol Arrest Referral (AAR), a brief intervention, was introduced with the intent of tackling the link between alcohol and offending. The aim was to see if it would work in a criminal justice setting, but it is considered to be ineffective in terms of reducing re-offending (Home Office 2012).

There is a lack of targeted funding around interventions in criminal justice settings, despite the links between alcohol and offending behaviour (HMP Inspectorate of Prisons 2010)³⁵. It is even more challenging to locate evidence which pertains solely to youth offenders. The availability of alcohol treatment services tailored for young people needs to be examined

35 For a list of interventions for the general offending population, please refer to the appendix

(Hogg 1999). Consequently young female offenders are completely sidelined from the literature. As an EDC at a youth offending institution remarks:

The number of young offenders with alcohol related offending is steadily increasing and these issues need to be addressed to reduce re-offending behaviour. Locally there are many good initiatives with dedicated staff stretched to capacity due to underfunding. Readdressing the balance of funding between drugs and alcohol would go some way to alleviating this.

The impact of different community sentencing on re-offending and alcohol/substance misuse

'Research has tended to consider the effect of conditional sentences for offender populations generally. There is very little work that considers the effectiveness of such sentences by types of offences...and alcohol issues' (Armstrong et al. 2013:13)

Both the Community Order (CO) and Suspended Sentence Order (SSO) allow the courts to impose an Alcohol Treatment Requirement. However, while it is established that more emphasis should be placed on treatment in the community, only around 4.5% of all community orders involve an ATR. This is due, in part, to the lack of alcohol services available in the community (Prison Reform Trust 2012/2013). In Scotland, a scheme called Structured Deferred Sentencing (SDS) addresses underlying issues such as alcohol dependence. The initiatives evaluation suggested that there was strong support for this deferred sentence (Armstrong et al. 2013).

In regards to compulsory sobriety, the government is piloting alcohol abstinence and monitoring requirements for community orders and suspended sentence orders. They have already piloted a sobriety scheme whereby if offenders admit they carried out the offence, 'they will be given the choice of accepting sobriety conditions or being prosecuted and facing the prospect of a drinking banning order if convicted' (Ministry of Justice 2012:10). That said, both the compliance and testing of sobriety has been questioned given that this requires the offender to attend the police station twice a day. An electronic system, Secure Continuous Remote Alcohol Monitoring (SCRAM), is used, via an ankle bracelet which will alert the monitors if the offender drinks alcohol. Following the period of sobriety, low units of alcohol may then be

introduced if appropriate. Currently this scheme has been used in the USA but not in the UK. The main objection is the infringement of the offender's human rights, but such claims are unlikely to succeed (Shaw et al. 2012).

In terms of intensive community punishment, alcohol abstinence and monitoring requirements have been reviewed in order to provide sentencers more discretion to impose treatment requirements for offenders with issues such as alcohol abuse (Ministry of Justice 2012). Currently, there is also a surprising lack of knowledge amongst sentencers in terms of what treatment is available locally. Furthermore, specialist services for young adults both in the community and in prison that address alcohol misuse as drivers to crime are required to be implemented (Prison Reform Trust 2012/13).

Questions about alcohol treatment and the impact on re-offending remains unclear. There is little evidence available on the effectiveness in reducing offending through the implementation of alcohol treatment for offenders. This suggests the need for 'more rigorous research – especially randomised trials – into the requirements that constitute community orders' (Davis et al. 2008). Furthermore, this is not differentiated by offenders and young offenders so empirical research focusing solely on young offenders is also required to gain an insight into this group.

Conclusions and recommendations

Very little literature exists around youth offenders, crime and alcohol. This is surprising, given the commonly held belief that 'alcohol-fuelled crime' is on the increase. The lack of evidence is also unexpected in light of the attention given to working class young men in debates around crime – at the expense of their middle and upper class counterparts. Key findings reveal that:

- Despite alcohol being widely used, alcohol misuse tends to be linked with socio-economic position of people in deprived areas
- Young offenders are more likely to have a drinking problem than those in the general population but this tends to be under-detected and under-treated
- The availability of alcohol treatment services tailored for young offenders needs to be examined

- Government drinking guidelines should be reviewed in terms of how they are interpreted by the offending (and wider) population
- A subjective determination has to be made in terms of what actually constitutes being under the influence of alcohol in relation to the impact of offending habits
- Literature on the prevalence of alcohol on point of arrest is very limited for young offenders – however 4 out of 10 offenders self-reported that alcohol was a factor in their crimes
- In terms of intervention and alcohol screening, literature focusing on young offenders is also sparse and what little that does exist tends to focus on adults – although it has been established that even very brief screening interviews may have a positive impact on young adult offender-drinkers
- AUDIT is regarded as the most promising alcohol screening tool within criminal justice settings
- Only 4.5% of all community orders involve an Alcohol Treatment Requirement
- The area of community sentencing and alcohol recidivism remains extremely underdeveloped – especially with regard to young offenders

This clear lack of empirical evidence perhaps illustrates the difficulty in assessing and evidencing the link between young people, crime and alcohol, and points to the need for more empirical research in this area in addition to a review of the methodological issues around collecting such information from offenders. It also points to a lack of targeting funding in terms of not only providing such services to young offenders, but also of a robust evaluation of these services. In addition to uncovering new knowledge in these areas, a central toolkit should be developed so that those working in the field can access information about what is being carried out and piloted and how this is impacting on recidivism rates. Evaluations of these initiatives could work as a starting point for this toolkit of best practice. At the moment the sense is that we just do not know what works best, and this information needs to be made available (and centralised) to improve practice and advance the support which young offenders have access to.

References

Alcohol Concern (2007) Tackling alcohol misuse in prison: a window of opportunity or a lost opportunity? (<http://www.alcoholconcern.org.uk/publications/factsheets/tackling-alcohol-misuse-in-prison-factsheet>) – last accessed 5.3.13

Alcohol Focus Scotland (2005) Response to *Tackling poverty, inequality and deprivation in Scotland* (<http://www.scotland.gov.uk/Resource/Doc/241165/0066994.pdf>) – last accessed 5.3.13

Armstrong, S., McIvor, G., McNeill, F. & McGuinness, P. (2013) *International Evidence Review of Conditional (suspended) Sentences FINAL REPORT* The Scottish Centre for Crime & Justice Research
Baldwin, S, Heather, N., Lawson, M, Ward, E, Robb, A., Williams, C., Greer, S., Gamba, S. & Robertson, I. (1991) Effectiveness of Pre-release Alcohol Education Courses for Young Offenders in a Penal Institution *Behavioural Psychotherapy* 19 321-331

Baldwin, S., Soares, D., Watts, J., Colyer, R., Maxwell, D., Deacon, K. & Dwyer, J. (1996) At the crossroads: offending and drinking *Journal of Substance Misuse* 1 13-19

Barton, A., Squire, G. & Patterson, M. (2009) Screening and Brief Intervention for alcohol use in a custody suite: the shape of things to come? *Social Policy & Society* 8(4) 463-473

Batty, D., Lewars, H., Emslie, C., Benzeval, M. & Hunt, K. (2008) Problem drinking and exceeding guidelines for 'sensible' alcohol consumption in Scottish men: associations with life course socioeconomic disadvantage in a population-based cohort study *BMC Public Health* 8:302

Bean, T. (2008) *Drugs and crime* Willan Publishing: Cullompton

Bennett, T. & Sibbitt, R. (2000) *Drug use amongst arrestees* Home office research findings 119 Home Office: London

Bennett, T. & Holloway, K. (2005) *Understanding drugs, alcohol and crime* OU Press: Buckingham

- Cabinet Office (2003) *Interim Analytical Report. Strategy Unit Alcohol Harm Reduction project* Cabinet Office: London
- Coleman, C. & Moynihan, J. (1996) *Understanding crime data: haunted by the dark figure* Open University Press: Buckingham
- Croall, H. (2011) *Crime and society in Britain* Pearson Education: Essex
- Collins, J. (1982) *Drinking and Crime: Perspectives on the Relationship between Alcohol Consumption and Criminal Behaviour* London: Tavistock.
- CYPNOW (2012) *Cuts to youth services have been blamed for an increase in alcohol-related hospital admissions among young people from England's poorest families* 17 July 2012 (<http://www.cypnow.co.uk/cyp/news/1073960/alcohol-related-hospital-admissions-rise-deprived-people>) – last accessed 5.3.13
- Davis, R., Rubin, J., Rabinovich, L., Kilmer, B. & Heaton, P. (2008) *A synthesis of literature on the effectiveness of community orders* RAND
- Deehan, A. (1999) *Alcohol and crime: Taking stock. Crime Reduction Series Paper 3* Home Office: London
- Dingwall, G. (2005) *Alcohol and crime* Willan Publishing: Cullompton
- Dingwall, C. (2007) Responding to alcohol related crime and disorder in England and Wales *Security Journal* 20(4) 284-292
- Erskine, S., Maheswaran, R., Pearson, T. & Gleeson, D. (2010) Socioeconomic deprivation, urban-rural location and alcohol-related mortality in England and Wales *BMC Public Health* 10:99
- Hammersley, R., Marsland, L. & Reid, M. (2003) *Substance use by young offenders* Home Office 192
- Harrison, L., Cappello, R., Alaszewski, A., Appleton, S. & Cooke, G. (2003) *The effectiveness of treatment for substance dependence within the prison system in England: a review* University of Kent
- Hogg, K. (1999) *Youth Crime in Scotland* A Scottish Executive Policy Review
- Home Office (2012) *Evaluation of Alcohol Arrest Referral Pilot Schemes (Phase 2)* Home office Occasional paper 102
- HM Inspectorate of Prisons (2010) *Thematic report by HM Inspectorate of Prisons Alcohol services in prisons: an unmet need*
- HMI Probation (2010) There was an inspection report entitled 'Message in a Bottle' focusing on alcohol
- Hollin, C. (1983) Young offenders and alcohol: a survey of the drinking behavior of a borstal population *Journal of Adolescence* 6(2) 161-174
- Houchin, R. (2005) *Social Exclusion and Imprisonment in Scotland: a report* Glasgow Caledonian University
- Jones, G. & Hoffmann, N. (2006) Alcohol dependence: international policy implications for prison populations *Substance Abuse Treatment, Prevention, and Policy* 1:33
- Jeffs, W. & Saunders, W. (1983) Minimising alcohol-related offences by enforcement of the existing licensing legislation *British Journal of Addiction* 78, 66-77
- MacAskill, S., Parkes, T., Brook, O., Graham, L., McAuley, A. & Brown, A. (2011) Assessment of alcohol problems using AUDIT in a prison setting: more than an 'aye or no' question *BMC Public Health* 11 865
- McMurrin, M. (1991) Young offenders and alcohol-related crime: what interventions will address the issues? *Journal of Adolescence* 14:3
- McMurrin, M. & Hollin, C. (1989) The Short Alcohol Dependence Data (SADD Questionnaire: norms and reliability data for male young offenders) *British Journal of Addiction* 84 315-318
- Ministry of Justice (2012) *Punishment & Reform: Effective Community Sentences* Government Response
- Ministry of Justice (2013) Alcohol intervention programmes (<http://www.justice.gov.uk/offenders/before-after-release/obp>) – last accessed 3.3.13

Muncie, J. (2004) *Youth and Crime*.
(2nd ed) Sage: London

NHS Health Scotland (2012) *Summary of the Alcohol & Offenders Criminal Justice research program* (<http://www.healthscotland.com/topics/health/alcohol/offenders.aspx>) – last accessed 3.3.13

NOMS (2005) *Alcohol Interventions Guidance* including revised guidance on *Managing the Alcohol Treatment Requirement (ATR)*
National Offender Management Service

NOMS (2006) *Working with alcohol misusing offenders: a strategy for delivery* National Offender Management Service

Parkes, T., MacAskill, S., Brooks, O., Jepson, R., Atherton, I., Doi, L., McGhee, S. & Eadie, D. (2010) *Prison health needs assessment for alcohol problems* University of Stirling

Prison Reform Trust (2012/13) *Response to the Ministry of Justice consultation, Punishment and reform: effective community sentences*

Richardson, A. & Budd, T. (2003) *Alcohol, crime and disorder: a study of young adults*
Home Office Research Study 263

Telegraph (2008) More than half of young offenders blame alcohol for their crimes (<http://www.telegraph.co.uk/news/uknews/scotland/3146193/More-than-half-of-young-offenders-in-Scotland-blame-alcohol-for-their-crimes.html>) – last accessed 3.3.13

Shaw, D., McClusky, K., Linden, W. & Goodhall, C. (2012) Reducing the harmful effects of alcohol misuse: the ethics of sobriety testing in criminal justice *J Med Ethics*
SPS (2005) *Thematic Report 8th Prisoner Survey* Scottish Prison Service: Edinburgh

SPS (2009) *Prisoner Survey 12th Survey Bulletin*
Scottish Prison Service: Edinburgh

SPS (2010) *Young Offenders 12th Survey Bulletin* Scottish Prison Service: Edinburgh

YJB (2013) Substance misuse (<http://www.justice.gov.uk/youth-justice/health/substance-misuse>) – last accessed 5.3.13

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About Alcohol Concern

Alcohol Concern is the leading national charity working on alcohol issues. Our goal is to improve people's lives through reducing the harm caused by alcohol. We have an ambitious long-term aim to change the drinking culture of this country. We raise awareness of the problems caused by alcohol misuse through policy, research and campaigns. We support frontline professionals working in the alcohol sector through training and we provide advice to organisations such as local authorities and NHS organisations on how to deal with alcohol effectively.

For more information about Alcohol Concern, visit our website www.alcoholconcern.org.uk and follow us on Twitter @AlcoholConcern

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About Mentor

Mentor is the UK's leading charity dedicated to protecting young people from drug and alcohol harms. Bridging the worlds of academic research, policy and on the ground practice, we review research from around the world, test promising approaches and work to translate best policy and practice into evidence based national and local services.

Mentor has been working in the UK since 1998 and is the strategic partner of government in England and Scotland. For more information about Mentor, visit our website www.mentoruk.org.uk and follow us on Twitter @mentortweets.

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