



# Get Me Home

Socialising, drinking and  
safer car travel for young adults

Executive Summary

Wendy Sykes, Jean Hopkin & Carola Groom  
Independent Social Research  
June 2014



RAC  
Foundation

**ROADSAFE**

**This report has been commissioned by the Royal Automobile Club Foundation for Motoring Ltd and RoadSafe.**



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**Published by:**

RAC Foundation, 89–91 Pall Mall, London, SW1Y 5HS

Tel no: 020 7747 3445  
[www.racfoundation.org](http://www.racfoundation.org)

Registered Charity No. 1002705

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# About the Authors

This report was prepared by Wendy Sykes, Jean Hopkin and Carola Groom from Independent Social Research (ISR).

**Wendy Sykes** has been conducting social research since 1988. Much of her research over the past 20 years has been qualitative and concerned with attitudes, values and motivations and their links with behaviour. She was co-author with Jean Hopkin, Carola Groom and John Kelly of a qualitative research report for the Department for Transport (TfT) on drinking and driving.

**Jean Hopkin** is a social researcher specialising in transport. She has a broad background in road safety issues, is knowledgeable about road accident statistics and experienced in their analysis. She has carried out reviews of research into the safety of young drivers in order to identify options for reducing casualties, and took the lead in conducting the extensive literature review that was part of ISR's research on drinking and driving for the DfT, mentioned above.

**Carola Groom** has a background in law and is a former probation officer. She is a skilled qualitative researcher and a key member of ISR where she has worked for eight years on most of ISR's main research projects. With the other authors of this report she was an important contributor to earlier research on drink driving.

# Acknowledgements

This research was carried out with the kind cooperation of focus group respondents who contributed their time to this project. The authors are grateful to the Steering Committee for their suggestions throughout this study. Particular thanks go to Elizabeth Box at the RAC Foundation for her efforts in the development, preparation and design of this report. Thanks are also due to various individuals and organisations whose input was important to the completion of the study. These include: Brunel University London; DfT; DrinkAware; Integrated Transport Planning Ltd and The Portman Group.

The members of the Steering Committee were:

Elizabeth Box, RAC Foundation  
Neil Grieg, IAM  
Emma Reynolds, AB InBev  
Adrian Walsh, RoadSafe

# Disclaimer

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# Executive Summary

## About the report

This report, commissioned by the RAC Foundation and RoadSafe, and funded by the RAC Foundation and AB InBev, takes a fresh look at car travel among young adults aged 17–25 years on social occasions involving the consumption of alcohol.<sup>1</sup> The purpose of the research was to inform the development of effective communications and interventions aimed at making car travel safer for young adults on such occasions. The report covers findings from a focused review of literature and small-scale qualitative research with young adults.

## Key findings from the research

Some important findings from the research are as follows.

### **Drink-driving casualties have declined among young adults but are still a cause for concern**

Deaths and serious injuries in the UK from drink-driving have halved since 2000, including among young adults aged 17–24. However, drink-driving still accounts for 1 in 6 deaths and 1 in 20 serious injuries on the road. Drink-driving is a problem seen across the driving population, although the risks are particularly high for younger drivers. In 2011, 25% of young people killed in collisions were over the legal limit for driving, compared with 15% of those in older age groups.

### **Drinking remains an important feature of social occasions for young adults, although recent data show that levels of alcohol consumption among young adults have declined**

Socialising is important to young adults, and social occasions frequently involve the consumption of alcohol, with certain types of occasion more likely to feature drinking than others. However, since 2005, the average weekly consumption of alcohol among young adults aged 16–24 has declined by about a third and is now less than the average for the population as a whole.

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<sup>1</sup> The youngest age at which it is legal to hold a driving licence in the UK is 17 years old.

**The car is still a common and popular method of travel on social occasions; for a variety of reasons, young adults prefer car journeys to other alternatives (which can be limited)**

The car is the most important method of travel in the UK; around two thirds of all journeys made are by car, either as a passenger or a driver. This is true for social occasions as well as trips made for other purposes. Although car travel is less important for younger people than for the population as a whole, it is still the dominant mode of transport, and this looks set to continue for the foreseeable future.

**Young adults understand the importance of not drinking and driving, but, like the rest of the adult population, do not always act on this knowledge**

Although young drivers are more lenient than other age groups in some of their attitudes towards drinking and driving (e.g. towards driving if someone is unsure if they are over the legal limit for driving), this is less the case when it comes to situations when drivers know they are over the limit. Some 85% of young people agree that it is dangerous to drive over the limit and 94% agree that it is extremely unacceptable to do so (compared with 90% and 95%, respectively, of all adults).

In terms of their propensity to drink and drive, young adult drivers can be loosely grouped into the following categories. Those who:

- never mix drinking and driving
- aim not to mix driving and drinking but, in practice, don't always stick to their plan; and
- regularly drive over the limit or make little or no conscious effort to avoid doing so.

Driving after drinking was recognised by focus group respondents as a habit that could form as new drivers gained confidence after passing their test. For this reason, focus group respondents thought it would be a good idea to intervene before new drivers start to drink and drive. Novice drivers who do not mix drinking and driving are, therefore, one group who could be targeted to prevent the later development of bad habits.

Young adults who broadly aim not to mix drinking and driving, but whose behaviour in practice is not always consistent with these objectives, make up another group of drivers for whom behavioural change interventions are likely to be most effective.

Drivers in this second category may decide to drink below the legal limit or may plan not to drink at all, but still end up driving over the limit. This value-action gap results from the interplay of a whole range of factors that can have an

impact on behaviour: for example, patchy or inaccurate information about the legal limit for driving and what affects blood alcohol levels; a clash on particular occasions between wanting to drive and wanting to drink (e.g. so as not to be left out, to be part of the fun); and having 'got away' with taking risks on previous occasions.

### **Passengers have an important part to play in the safety of car travel on social occasions involving alcohol**

Lifts are an important part of the travel behaviour of young people on social occasions involving alcohol. For passengers, 'getting a lift' means having the advantages of car travel but without the constraint of not being able to drink, and at lower cost than getting a taxi. On the other hand, 'giving lifts' is normal and may even be expected of drivers who decide to take their car. Not all lifts are arranged in advance; drivers often 'acquire' passengers while socialising. Drivers are sometimes reluctant to give lifts, but it can be difficult to refuse; there may be pressure from other people but they may also feel guilty if they refuse a lift and worried about how friends will get home otherwise.

Passengers can contribute to the risks of car travel on social occasions involving alcohol. The passenger load can be high, and on occasions even exceed the capacity of the car. A car full of people can feel like a social gathering in its own right, and loud conversation and music are a potential source of distraction for drivers. If passengers have been drinking, this effect may be amplified.

In the past, the behaviour of passengers has received much less attention than that of drivers, but interventions targeted at passengers also have the potential to improve the safety of car travel on social occasions involving the consumption of alcohol.

### **Interventions to change driver and passenger behaviour need to be based on detailed understanding of what underpins behaviour and what works to change it**

Behavioural decisions are often based on inadequate or wrong information and on low levels of deliberation rather than on careful reasoning. Attitudes may show little correlation with behaviour caused by intervening barriers. Social and personal norms can be important in affecting behaviour as well as bringing about change. Habit drives a lot of behaviour and can be hard to change, but interventions to prevent habits forming can be effective (and could be targeted at novice drivers, for example) as well as interventions that cause people to re-examine their habits. Emotions are powerful influencers of behaviour and can also be galvanised to help change behaviour, break habits and increase people's sense of ability to change. Cost and convenience are important in explaining certain patterns of behaviour, and can also be obstacles to change. Compulsion is very effective in some contexts, such as drink-driving, and



may bring about adjustments to attitudes and norms. Personal, social and environmental factors should be considered and the most effective approaches to behaviour change take all three levels into account.

### Designated driver interventions and campaigns have not delivered wholesale safer car travel

Existing designated driver schemes provide some important lessons about success factors for messages to drivers and passengers and for methods to encourage and influence behaviour. Key success factors identified by the research are outlined in the tables below.

#### Messages for designated drivers should...

Personal	Social	Environmental
<ul style="list-style-type: none"> <li>• Be positive and respectful</li> <li>• Highlight benefits to the driver and others</li> <li>• Demonstrate the ease with which safe travel behaviour can be adopted</li> <li>• Be firmly linked to the context in which behaviour change is sought (i.e. focus on drinking on social occasion, relaxing and celebrating)</li> <li>• Reinforce the message that those who plan to drive should not drink any alcohol</li> </ul>	<ul style="list-style-type: none"> <li>• Reinforce that the objective of safe travel is to get everyone home safely</li> <li>• Stress that everyone should contribute to making safe travel work</li> <li>• Emphasise the principles of fairness (e.g. turn-taking if driving is involved)</li> <li>• Remind that past experience of incident-free travel after drinking is no guarantee of future safety – it takes only one false move for an accident to happen</li> <li>• Counter unsafe cultural norms (e.g. stress that if the driver drinks too much it is socially acceptable for others to intervene, and for the driver to disappoint people’s expectations of a lift home)</li> <li>• Include positive messages about the ‘normalness’ of not drinking and driving</li> </ul>	<ul style="list-style-type: none"> <li>• Publicise the effects of safe travel arrangements</li> </ul>

## Methods to encourage and influence behaviour include...

Personal	Social	Environmental
<ul style="list-style-type: none"> <li>Rewards and recognition (e.g. free soft drinks for driver abstaining from drinking alcohol)</li> </ul>	<ul style="list-style-type: none"> <li>Using clear, simple messages that are delivered by peers</li> </ul>	<ul style="list-style-type: none"> <li>Multiple positive messages aimed at different segments and the surrounding population so the entire social environment communicates and supports the messages</li> <li>Consistent, concerted promotion to maintain improvement</li> <li>Mass media activity combined with actions on the ground to promote safe travel, especially at drinking venues, and integrated with enforcement of the law</li> <li>Partnerships between road safety organisations, social responsibility organisations from the drinks industry, and other stakeholders such as local authorities</li> </ul>

## Reactions of young adults who took part in focus groups

The focus group respondents:

- were concerned about negative stereotyping of young people. They were sceptical about being at higher risk than older drivers who had consumed equivalent amounts of alcohol, and thought differences between individuals were likely to be greater than differences between age groups;
- showed strong interest in information provided about alcohol limits for driving, blood alcohol concentration (BAC), alcohol units, the relative strength of different drinks and the links between all of these. They thought it was important as a component of interventions aimed at safer travel and that it would enable them to make responsible decisions. However, they would be unlikely actively to seek out such information, so it would need to enter their orbit in other ways;
- stated resistance to messages about not drink-driving being the norm among young adults because they believed that their personal experience provided evidence to the contrary;
- welcomed a focus on passengers, as well as drivers. This was seen as novel, interesting and fair. For example, messages about how passengers should behave towards drivers, and how they should conduct themselves

to make car travel safer. Principles such as reciprocity, friendship, loyalty and looking after one another were seen as a good basis on which to build such messages;

- thought that if messages emphasise the consequences of being caught, these need to be credible and salient to the target group. For example, losing their licence because of drink-driving is highly pertinent to young adults, potentially embarrassing and generally seen as a more likely outcome than being involved in a crash; and
- said that friends and parents were both important and influential sources of information and messages about safer car travel.

### **Overall lessons for improving the safety of car travel for young adults on social occasions involving alcohol**

These lessons include:

- reinforcing the need to separate drinking and driving;
- focusing more on the role of passengers (e.g. by discouraging passengers from travelling with drivers who have been drinking and by promoting responsible behaviour by passengers);
- encouraging and incentivising positive behaviour change;
- having targeted, clear and impactful information and messages, developed in collaboration with young people;
- implementing packages of inter-related measures and combined approaches through a wide range of stakeholders in the public and private sector at local and national level; and
- careful evaluation of initiatives in order to assess what works and what does not work to change behaviour.

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RAC Foundation  
89–91 Pall Mall  
London  
SW1Y 5HS

Tel no: 020 7747 3445  
[www.racfoundation.org](http://www.racfoundation.org)

Registered Charity No. 1002705

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The Javelin Partnership Ltd.  
Tel: 0118 907 3494

Produced on paper from a managed  
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as containing 50% recycled waste.