



Parental monitoring and alcohol use among Mexican students



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HIGHLIGHTS

- 85% of entering high school and university students completed the survey.
- Logistic regression models examined parental monitoring and alcohol related problems.
- Lower parental monitoring was associated with risky drinking behavior.
- Perceived parental monitoring and alcohol use was moderated by gender.
- Mexican cultural norms need to be examined in concert with parental monitoring.

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ABSTRACT

Parental monitoring has been described as a protective factor and useful strategy to prevent substance misuse among youths. The aim of this study was to examine whether perceived parental monitoring influences frequency of alcohol use, age of drinking onset and risky drinking among entering public high school and university students in Mexico City. The study is a cross-sectional survey of entering first year students in the high school and university school system of a large public university in Mexico City conducted during registration at the beginning of the school year. In 2008, of 34,840 students accepted to the affiliated high schools, 28,996 students (51.8% female) completed the alcohol survey and of 37,683 students accepted into university 30,084 students (51.5% female) completed the alcohol survey. The findings suggest that compared to students with higher perceived parental monitoring those reporting lower perceived parental monitoring were more likely to report risky behavior. They were more likely to be ever drinkers, frequent drinkers, have earlier age of onset and high AUDIT scores. Overall, higher parental monitoring was strongly associated with being female and lower parental monitoring with being male. Our findings suggest that more research on parental monitoring as a protective strategy against alcohol misuse is needed. Research focusing on cultural factors including gender and age-related norms and familismo would increase knowledge of the association of parental monitoring and alcohol use among Mexican youths, Mexican American youths and potentially youths from other Hispanic backgrounds.

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1. Introduction

Alcohol is the most widely used substance among adolescents and young adults in Mexico. Alcohol contributes to main causes of mortality and morbidity among young people including accidents, violence and homicides, and non-fatal injury and rates of heavy drinking are increasing among Mexican youths (Borges et al., 2008, 2006; Díaz-Martínez et al., 2011; Medina-Mora et al., 2004). The most recent 2008 National

Survey on Addictions (NSA), a household survey examining the prevalence of alcohol and drug use in Mexico, found that 11% of males and 7.1% of females ages 12–17 drank 5+ drinks (4+ for females) at least once in their lifetime (INEGI, 2008) while the 2001 NSA found 35.6% of 12–17 year olds reported lifetime alcohol use and 25.7% reported current drinking (INEGI, 2002). Among middle and high school students in Mexico City, 65.8% reported lifetime use, 35.2% reported current drinking and 23.8% consumed 5+ drinks on one occasion (Villatoro et al., 2005) and among entering first year university students in Mexico City, one third of males and one fifth of females reported drinking 5+ drinks on one occasion or drinking to intoxication (Quiroga et al., 2003).

Parental monitoring has been described as a protective factor and useful strategy to prevent substance misuse among youths but few studies have focused on this relationship in Mexico. Broadly defined, parental monitoring is a set of skills used by parents in order to remain informed and aware of their child's activities and share concerns (Dishion & McMahon, 1998). More specifically, the construct of parental monitoring includes parental knowledge and attitudes regarding the child's use of free time, activities, whereabouts and friends (Benjet et al., 2007; Bourdeau, Miller, Duke, & Ames, 2011; Moore, Rothwell, & Segrott, 2010; Romero & Ruiz, 2007; Ryan, Jorm, & Lubman, 2010). A review of 22 studies examining parental monitoring and alcohol use showed that increased parental monitoring is significantly associated with later alcohol initiation and decreased alcohol use (Ryan et al., 2010). Both cross-sectional (Chen, Grube, Nygaard, & Miller, 2008; Clark, Nguyen, Belgrave, & Tademy, 2011; Moore et al., 2010; Sessa, 2005) and prospective studies (Bourdeau et al., 2011; Stone, Becker, Huber, & Catalano, 2012; Walls, Fairlie, & Wood, 2009) conducted in the U.S. indicate that increased parental monitoring is associated with reduced alcohol use and the possible negative consequences of use among adolescents.

Studies in other countries show similar outcomes. In the U.K., higher levels of parental monitoring were associated with lower levels of violence and conflict, reduced history of alcohol misuse and less liberal attitudes towards alcohol (Moore et al., 2010). Studies examining parent–child relationship in France and the U.K. (Ledoux, Miller, Choquet, & Plant, 2002) and parental monitoring in Slovakia (Bobakova, Geckova, Klein, Reijneveld, & van Dijk, 2012) found an association between increased parental monitoring and decreased alcohol and drug use.

The aim of the study was to examine whether perceptions of parental monitoring influence frequency of alcohol use, age of drinking onset and risky drinking among entering public high school and university students in Mexico City. Expanding this area of research in Mexico is important for both Mexican youth and Mexican American youth prevention programs since substance use norms among Mexican American youths can reflect not only U.S. norms but also norms and other cultural factors in the country of origin or heritage.

2. Material and methods

The study design is a cross-sectional survey of entering first year students in the high school and university school system of a large public university in Mexico City conducted at the beginning of the school year during the registration period. During registration the university Medical Services routinely administers a self-administered general health survey to all entering high school and university students. In 2008 an additional survey was administered at registration to collect more detailed information regarding alcohol use and perceptions of parental monitoring.

2.1. Sample

In 2008, of 34,840 students accepted to university affiliated high schools, 28,996 students (51.8% female) completed the alcohol survey and of 37,683 students accepted into university at the nine commuter

campuses in the Mexico City metropolitan area 30,084 students (51.5% female) completed the alcohol survey.

In the high school sample we excluded 1950 students (7%) from the analysis due to incomplete or inconsistent data. In the university sample we excluded 2013 students (7%) from the analysis due to incomplete or inconsistent data and we excluded 5654 students (20%) because they were over 19 years old. We chose to keep the age of entry into university consistent with the age students from high school would enter university. A total of 27,046 high school students and 22,417 university students were included in the data set for this study (Table 1).

2.2. Measures

The alcohol survey included the Alcohol Use Disorders Identification Test (AUDIT) to examine past-year prevalence of hazardous and harmful drinking (http://whqlibdoc.who.int/hq/2001/WHO_MSD_MSB_01_6a.pdf). The AUDIT includes 10 items examining frequency and intensity of drinking, the presence of alcohol dependence symptoms and negative consequences of drinking. The AUDIT yields a total possible score of 40 points. The general health survey includes questions about lifetime and current alcohol use and age of drinking onset. It also included the Silverberg Parental Monitoring Scale that (Silverberg & Small, 1991) uses a 5-point Likert scale from “never” to “always” for the following six items: My parents know where I am after school; If I am going to be home late, I am expected to call my parents; I tell my parent(s) who I am going to be with before I go out; When I go out at night, my parent(s) knows where I am; I talk with my parent(s) about the plans I have with my friends; When I go out, my parent(s) asks me where I am going. The scale has been used in previous research (Borawski, Ievers-Landis, Lovegreen, & Trapl, 2003; Li, Stanton, & Feigelman, 2000) and found to yield a single-factor structure with factor loadings greater than 0.65 for all six items.

High school and university students were categorized into drinking groups using the AUDIT, frequency of alcohol use, and age of onset

Table 1
Demographics and drinking characteristics.^a

	Overall	Parental monitoring tertile		
		Low	Medium	High
High school sample	N = 27,046 N (%)	N = 9,644 N (%)	N = 6,254 N (%)	N = 11,148 N (%)
Sex				
Male	12,654 (46.8)	5,867 (60.8)	2,804 (44.8)	3,983 (35.7)
Female	14,392 (53.2)	3,777 (39.2)	3,450 (55.2)	7,165 (64.3)
Age				
14	5,915 (21.9)	2,017 (20.9)	1,352 (21.6)	2,546 (22.8)
15	18,261 (67.5)	6,373 (66.1)	4,246 (67.9)	7,642 (68.6)
16	2,870 (10.6)	1,254 (13.0)	656 (10.5)	960 (8.6)
Frequency of use				
Never drinker	7,634 (28.2)	1,879 (19.5)	1,691 (27.0)	4,064 (36.5)
Ever drinker	19,412 (71.8)	7,765 (80.5)	4,563 (73.0)	7,084 (63.6)
2+ times/month	2,527 (13.0)	1,543 (19.9)	484 (10.6)	500 (7.1)
University sample	N = 22,417 N (%)	N = 8,035 N (%)	N = 7,209 N (%)	N = 7,173 N (%)
Sex				
Male	9,843 (43.9)	4,636 (57.7)	2,883 (40.0)	2,324 (32.4)
Female	12,574 (56.1)	3,399 (42.3)	4,326 (60.0)	4,849 (67.6)
Age				
17	4,642 (20.7)	1,497 (18.6)	1,535 (21.3)	1,610 (22.4)
18	12,549 (56.0)	4,375 (54.5)	4,077 (56.6)	4,097 (57.1)
19	5,226 (23.3)	2,163 (26.9)	1,597 (22.2)	1,466 (20.4)
Frequency of use				
Never drinker	3,075 (13.7)	633 (7.9)	978 (13.6)	1,464 (20.4)
Ever drinker	19,342 (86.3)	7,402 (92.1)	6,231 (86.4)	5,709 (79.6)
2+ times/month	5,597 (28.9)	2,833 (38.3)	1,676 (26.9)	1,088 (19.1)

^a p < 0.0001 for all differences.

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