



Research paper

Learning to drink: How Chinese adolescents make decisions about the consumption (or not) of alcohol



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ABSTRACT

Background: The aim of the study was to provide in-depth understanding of how Chinese adolescents learn to drink and how they make decisions about the consumption (or not) of alcohol. This study explored the ways in which social and cultural factors shape the drinking trajectories of Chinese underage young people.

Methods: The study used a qualitative design to collect and analyse the data. We recruited adolescents aged between 14 and 17 from a range of secondary schools in Hong Kong. Focus group interviews were undertaken with 22 groups encompassing 111 participants. A thematic analysis based upon grounded theory was performed using NVivo 10.

Results: The traditional Chinese drinking culture, characterised by the coming together of friends and relatives for celebrations, signifies the Chinese adolescents' first alcohol experiment. The adolescents' motivations for drinking essentially reflect the value placed upon alcohol within the Chinese culture – promoting conviviality, sociability and camaraderie. Whereas a sense of commonality encouraged alcohol use among them, there was little indication that drinkers and non-drinkers separately clustered around friendship networks. A high degree of self-regulation was exercised when drinking and this emerged as an acceptable social norm amongst young drinkers within social and cultural contexts. Most respondents saw underage drinking as an entirely normal and accepted part of social lives provided that it is kept under control.

Conclusions: This study sheds light on the Chinese adolescents' own understandings and interpretations of their drinking. Our findings suggest that interventions aimed to curtail underage drinking need to reflect social and cultural contexts within which alcohol comes into play and importantly, consider social environments that are conducive to underage drinking.

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Introduction

Alcohol consumption is responsible for 5.1% of the global burden of disease and injury (World Health Organisation, 2014). Worldwide, 3.3 million deaths in 2012 were estimated to have been caused by alcohol consumption equating to 5.9% of all deaths. Despite much of the chronic burden of alcohol-related disease afflicting adults, the foundations of such damage are often established during adolescence. Evidence indicates that early onset of drinking and consuming larger quantities in adolescence

are associated with a wide range of high-risk behaviours (Henry, Slater, & Oetting, 2005; Hughes & Bellis, 2006). Such patterns of consumption also increase the risks of developing chronic health and other problems in later life.

Unlike many developed countries in the West, where high rates of alcohol consumption and intoxication amongst underage youths are reported (Huckle, Pledger, & Casswell, 2006), alcohol consumption among Chinese adolescents is less common. A study conducted in mainland China shows that 17.8% of adolescents had an experience of alcohol use during the past month (Hao, Chen, & Su, 2005). Similarly, the underage alcohol use in Hong Kong (where this study took place) is relatively low with 24.2% of the secondary school students reportedly to have consumed alcoholic beverages in the past 30 days (Narcotic Division of Security Bureau, 2009). The corresponding figures in the UK and US are 65% and 39% respectively (Hibell et al., 2012). However, alcohol consumption in Hong Kong has been gaining popularity in recent years,

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particularly among younger age groups as exemplified by the increase in prevalence of the past-30-day alcohol use among secondary school students from 14.5% in 1992 to 24.2% in 2009 (Narcotic Division of Security Bureau, 1992, 2009).

Studies on risk-taking behaviours among Chinese adolescents suggest that alcohol consumption is associated with the development of other problem behaviours such as psychotropic substance abuse (Lau, Kim, et al. 2005, Lau, Tsui, & Tsui, 2005; Xing, Ji, & Zhang, 2006), unsafe sex (Adullah, Fielding, & Hedley, 2003; Ong, Wong, Lee, Holroyd, & Huang, 2013), and suicide attempts (Lee et al., 2009). Although these studies provide an insight into the effects of alcohol use among youth in general, they are almost exclusively problem-focused (i.e. risky behaviours associated with 'out of control' drinking). This emphasis has resulted in a lack of understanding of the actual circumstances under which alcohol use is initiated and the meaning of alcohol drinking among adolescents. Moreover, past analyses of Chinese adolescents' drinking patterns had primarily relied on quantitative evidence, often of a largely aggregate and summative nature. While quantitative sources are important for identifying the prevalence of alcohol use, they provide much less in-depth evidence when it comes to understanding the context of alcohol drinking initiation and how drinking is conceptualised by adolescents.

A body of past qualitative studies acknowledge that alcohol drinking among adolescents does not occur uniformly and that cultures of alcohol consumption and regulation are socio-culturally differentiated practices (Coleman & Cater, 2005; Griffin, Bengry-Howell, Hackley, Mistral, & Szmigin, 2009; Heimisdottir, Vilhjalmsson, Kristjansdottir, & Meyrowitsch, 2010; Percy, Wilson, & McCartan, 2011). In addition, underage drinking is often embedded in a context of values, attitudes and other norms (Heath, 1987). Building on existing literature, this study aims to investigate the social and cultural contexts that shape the drinking trajectories of Chinese adolescents. Specifically, it explores how underage young people learn to drink, how they perceive their own alcohol use and ultimately what factors influence how they make decisions about the consumption (or not) of alcohol. In so doing, the study sheds light on Chinese adolescents and their own perspectives of alcohol consumption, which have so far received very limited attention from scholars in alcohol research. In the present study, we included both drinkers and non-drinkers to explore both groups' attitudes to and decisions about alcohol use.

Methods

Participants

We recruited adolescents aged between 14 and 17 years from a range of secondary schools in Hong Kong. The principals of the randomly selected schools in three geographical areas of Hong Kong were sent a letter informing them of the study purpose. After 1 week of the letter being sent, the research team contacted the schools by telephone. Out of the 44 schools contacted, 13 schools agreed to participate. Upon obtaining written consent from parents/guardians, a one-page screening questionnaire on drinking behaviour (e.g. age of one's first drink; use of alcohol in the past 30 days, 1 year and one's lifetime; age; gender; grade) was distributed to classes by the research staff (student assent was obtained at the time of questionnaire distribution). At the end of the questionnaire, students were invited to leave their contact details if they were willing to share their views on alcohol through the means of confidential but informal group discussion. Each questionnaire was returned in a sealed envelope. Of the 2744 questionnaires distributed, 2271 were returned and 538 students provided their contact details.

Procedure

While the one-page screening questionnaire was used to check the eligibility and interest for interview participation, we purposively selected participants of different age, gender and drinking status (both drinkers and non-drinkers) to garner diverse views and perspectives. A total of 131 students were contacted by our research staff and 111 students agreed to participate in the focus group discussion. Reasons for refusal included being too busy or unavailable, feeling uncomfortable and lost interest in study participation. Those who agreed to participate were told that all responses would be confidential. Consent forms that described the study were sent to parents/guardians, and participants were required to return the signed consent forms in order to participate. In the consent form, parents/guardians were informed that the aim of the study was to understand their child's acceptance of and attitudes towards alcohol drinking irrespective of his/her alcohol use. In this way, we were able to recruit adolescents who drank without disclosing sensitive information to their parents/guardians. Appointments were made with the participants for interviews. Prior to the interview, written consent was sought from participants. Most interviews were conducted in a classroom of participants' schools while two interviews were carried out in a small conference room of a youth community centre.

As underage drinking is a sensitive topic and confidentiality is not possible in group settings, we sought to ensure a degree of commonality among participants in each group to create a permissive and relaxing atmosphere and to avoid feelings of social constraint. Focus groups were therefore composed accounting for the similarity of participants' characteristics and circumstances (i.e. gender, school, and year at school). An interview guideline with open-ended questions was used to solicit participants' perspectives and experience relating to alcohol consumption. Confidentiality of all personal information was emphasized. Each interview lasted approximately 60–90 min and was conducted by research staff experienced in qualitative interviews. A total of 22 focus groups each involving three to six participants were undertaken (Table 1). All interviews were conducted in Cantonese and audio-recorded. Ethics approval was obtained from the University of Hong Kong/Hospital Authority Hong Kong West Cluster.

Table 1
Focus group composition.

Number of focus group	Number of participants	Age range	Sex
1	4	17	Girls only
2	6	16–17	Girls only
3	6	15–17	Girls only
4	6	16–17	Girls only
5	5	15–17	Girls only
6	6	15–17	Girls only
7	5	17	Girls only
8	3	15–17	Girls only
9	5	14–16	Girls only
10	3	15–16	Boys only
11	5	15–17	Boys only
12	6	15–18	Boys only
13	7	13–17	Boys only
14	6	16–18	Boys only
15	4	15–16	Boys only
16	4	17	Boys only
17	5	16–17	Boys only
18	5	16–17	Boys only
19	5	16–17	Mixed
20	6	15–18	Mixed
21	6	15–16	Mixed
22	3	15	Mixed
<i>n</i> = 22	<i>n</i> = 111		

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