

Contents lists available at ScienceDirect

Addictive Behaviors

journal homepage: www.elsevier.com/locate/addictbeh



A systematic review of the salient role of feminine norms on substance use among women



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HIGHLIGHTS

- First systematic review of feminine norms and substance use outcomes.
- Feminine norms help explain variability in substance use behaviors among women.
- Majority of studies suggest feminine norms confer risk for substance use.

ARTICLE INFO

Article history: Received 13 November 2015 Received in revised form 7 May 2016 Accepted 6 June 2016 Available online 7 June 2016

Keywords: Alcohol use Tobacco use Feminine norms Women

ABSTRACT

Aims: Substance use among women is a growing and significant public health concern. Given women's vulnerability to substance-use related consequences, it is essential to understand the factors that explain within-group variability in substance use and related problems. Feminine norms, or the beliefs and expectations of what it means to be a woman, appear to be a promising and theoretically-important social determinant of substance use. The present systematic review identifies the current trends and limitations of research examining feminine norms and substance use outcomes among women.

Methods: A systematic review was conducted for peer-reviewed, full-text journal articles written in English published between 2000–2015. Articles that fit the following inclusion criteria: a) use of a feminine norms/ideology or feminine role conflict measure, b) sampling women with a mean age of 15 or higher, and c) quantitative, were included.

Results: Twenty-three eligible studies were identified. Many women engaged in heavy episodic drinking or were classified as high-risk drinkers. Seventy-four percent of the studies detected a significant relationship between feminine norms and substance use, of which 52% of the studies reviewed reported the harmful role of feminine norms as conferring risk for alcohol use. In addition to substance use risk, women who more strongly endorsed traditional feminine norms were more likely to report concomitant chronic diseases and eating disorder behavior. Conclusion: The systematic review highlights that femininity appears to play a distinct and significant role in explaining within-group differences and patterns of substance use among women.

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1. Introduction

Substance use among women is a significant public health concern. Evidence suggests the biological sex gap in substance use rates has considerably narrowed (National Center on Addiction and Substance Abuse, 2003; Wagner & Anthony, 2007), such that women's substance use, particularly alcohol use, is converging with that of men's (Grucza, Bucholz, Rice, & Bierut, 2008; Keyes, Grant, & Hasin, 2008; Wilsnack & Wilsnack, 2014). This is especially problematic, as women are likely to reach intoxication more rapidly due to biological differences, and are more likely to be targeted in acts of interpersonal violence and sexual assault while using substances (Parks & Fals-Stewart, 2004; Vik & Ross, 2003). Women who use substances at similar rates as men are also at greater risk for developing dependence, polysubstance use, and health problems later in life (Nolen-Hoeksema, 2004). Given women's increasing substance use, and their vulnerability to substance-use related consequences, it is essential to identify the sociocultural factors that may differentially influence women's substance use patterns and behaviors.

One promising theoretical and gender-relevant factor that may elucidate within-group variability in substance use patterns among women is adherence to feminine norms, or the beliefs and expectations of what it means to be a woman. There is a growing body of research investigating the relationship between femininity and substance use behaviors (Iwamoto, Grivel, Cheng, Clinton, & Kaya, 2016; Peralta, 2008; Young, Morales, McCabe, Boyd, & D'Arcy, 2005). In an effort to comprehend the conceptual trends and limitations of research relating femininity to substance use, this systematic review aims to: 1) advance theoretical understanding of the complex associations between femininity and substance use among women; 2) identify trends, themes, and gaps in the literature; and 3) propose recommendations for future research and clinical practice.

1.1. Deconstructing femininity

Femininity describes the attributes, behaviors, roles, and expectations associated with being a woman that provide guidance for how women should think, feel, and act (Mahalik et al., 2005). According to gender social learning theory, gendered behaviors are maintained through modeling and reinforcement (Addis & Cohane, 2005), which encourage women to regulate their behaviors to conform to the cultural definitions of femininity (Bem, 1981).

Similar to masculinity theories, femininity can be compared with a dominant or hegemonic ideal (Griffith, Gunter, & Watkins, 2012). In the United States, normative femininity is conceptualized by race (White), socioeconomic status (middle and upper class), sexual orientation (heterosexual), and adherence to particular feminine roles including preferences for child rearing and nurturance (Hoffman & Fidell, 1979), valuing thinness and appearance (Hurt et al., 2007; Mahalik et al., 2005), and expressive emotionality (Levant, Richmond, Cook, House, & Aupont, 2007; Shields, 2013). While Western-based feminine norms can be idealized benchmarks for what it means to be a woman,

individuals often differ in their adherence to these feminine norms. That is, women's other social identities (e.g., racial identities) may influence their endorsement of feminine norms that are valued within their cultural contexts. For instance, Marianismo describes the culturally idealized belief of Latina gender role expectations, such that women are expected to be virtuous, chaste, subordinate, self-sacrificing, and spiritual (Castillo, Perez, Castillo, & Ghosheh, 2010; Piña-Watson, Castillo, Jung, Ojeda, & Castillo-Reyes, 2014). African American women are often expected to embody the 'strong-black woman' femininity stereotype (Harris-Perry, 2011) while Asian American women are expected to be hyperfeminine, dutiful, and doll-like (Pyke & Johnson, 2003). Some research has supported the differential role of these gender norms in conferring risk for substance use (Kulis, Marsiglia, Linegard, Nieri, & Nagoshi, 2008), therefore it is crucial to investigate the intersection of culture, race, and feminine norms in understanding substance use behavior.

1.2. Substance use as a gendered activity

Although substance use has been historically connected to traditional expressions of masculinity (Lemle & Mishkind, 1989; Van Gundy, Schieman, Kelley, & Rebellion, 2005), contemporary research suggests that adherence to feminine norms is also linked to substance use behaviors (Iwamoto et al., 2016). Women now occupy multiple social roles that enable them to more freely participate in stereotypical masculine activities including substance use (Keyes et al., 2008; Lyons & Willott, 2008). Prior studies have suggested that heavy alcohol use in women is associated with empowerment, pleasure seeking, and independence (Hutton, 2004; Lyons & Willott, 2008) and is a way to acquire positive attention from male peers (Young et al., 2005). Other studies have asserted that tobacco use can be a way to enhance femininity and sexual appeal, or to encourage rebellion among women (Toll & Toll & Ling, 2005). Even though femininity has been traditionally associated with health-promoting behaviors, including help-seeking and caring for others (Lee & Owens, 2002), more recent studies suggest certain aspects of femininity can place women's health at risk (Kaya, Iwamoto, Grivel, Clinton, & Brady, 2016). Understanding the complex relationship between femininity and women's substance use requires an integrated, intersectionality framework that synthesizes individual level protective and risk factors with the larger contextual structures that influence substance use behaviors.

1.3. Femininity and women's health

It is essential to investigate how feminine constructs influence substance use behaviors given women's vulnerability to drinking to regulate emotional distress (Dragan, 2015) and their potential to experience gender role stress. Adhering to distinct gender norms may be restricting, and leave women unfulfilled, devalued, and limited to endorse stereotypic expectations of femininity (Hoffman, 2001); this may be especially heightened when intoxicated (Anderson, Stevens, & Pfost, 2001). These narrow gender roles may contribute to gender role strain

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