



Adolescent drinking, social identity, and parenting for safety: Perspectives from Australian adolescents and parents



Lynda Berends*, Sandra C. Jones, Kelly Andrews

Centre for Health and Social Research, Australian Catholic University, 5/215 Spring Street, Melbourne, VIC 3000, Australia

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ABSTRACT

We explored young people and parents' views on adolescent drinking and safety in the locations where drinking may occur. Focus groups with adolescents and parents showed that many believed adolescent drinking and drunkenness is normative. Younger adolescents had more negative views of adolescent drinkers than their older peers. Adolescent drinking occurred in private settings and parents made decisions about allowing their adolescent children to attend social events based on the level of safety attributed to the location. If adolescent drinking was likely then home was the preferred location as it provided scope for risk minimisation. Positive portrayals of non-drinking adolescents and information to assist parents' decision-making are needed.

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1. Introduction

While drinking alcohol in adolescence is shaped by different factors in familial and social settings (Rolando et al., 2012) research has tended to focus on parental roles and responsibilities along with age of initiation to alcohol and subsequent problematic drinking (e.g., Velleman, 2009). In this paper, our focus is on how young people and parents view adolescent drinking and their perceptions of safety in the locations where adolescent drinking may occur.

1.1. Adolescent drinking in Australia

Alcohol consumption is declining in Australia, with fewer people drinking on a daily basis and the average age of drinking initiation increasing from 14.4 to 15.7 years from 1998 to 2013 (Australian Institute of Health and Welfare, 2015). While these trends are encouraging, there is evidence of concerning patterns of consumption among some adolescents. The 2011 national secondary school survey showed that 37% of 17 year olds had consumed alcohol in the past week and 45% of current drinkers aged 16–17 years intended to get drunk most or every time they drank alcohol (White and Bariola, 2012).

The national guidelines state that for those aged less than 18 years of age, not drinking is the safest option. Given that children

aged less than 15 years are at the greatest risk of harm from drinking, any consumption during this period is considered problematic. Those aged 15–17 years are also at elevated risk of harm and refraining from consumption, or delaying the initiation of drinking for as long as possible, is recommended (National Health and Medical Research Council, 2009). Consistent with this perspective, in Australia it is illegal for people aged less than 18 years to purchase alcohol or to have it supplied to them in a licensed venue or public place (Australian Government, Department of Health, n.d.). However, unlike the US (National Institute of America on Alcohol and Alcoholism, 2015), it is not illegal for someone under the age of 18 to consume alcohol or for their parent or guardian to provide them with alcohol.

Consequently, given that a substantial proportion of young people in Australia report having consumed alcohol, both the supply of and locations for consumption are likely to involve family or friends and occur in private settings. In 2013, the most common place for alcohol consumption among young people was at private parties (62%), with their alcohol usually being provided by a friend (45%) or a parent (25%) (Australian Institute of Health and Welfare, 2015).

1.2. Defining adolescence

The start and endpoints of adolescence are not well defined. The WHO (2015) definition of adolescence is the period “that occurs after childhood and before adulthood, from ages 10 to 19” – with puberty being the key marker of change. Some researchers have referred to a period of ‘middle adolescence’, which is generally around 16 years of age (e.g., Humensky, 2010; Jenks, 2005).

* Corresponding author.

E-mail addresses: lynda.berends@acu.edu.au (L. Berends), sandra.jones@acu.edu.au (S.C. Jones), kelly.andrews@acu.edu.au (K. Andrews).

In their integration of evidence to develop a summary of strategies for prevention and harm reduction from adolescent drinking, [Toumbourou et al. \(2007, p. 1391\)](#) defined adolescence as the “period before puberty (around 10 years) to achievement of financial independence in emerging adulthood (around late 20 s)”. This journey toward emerging adulthood is marked by changes in maturation that occur as personal, social, and economic tasks are explored and realised ([Marschall-Levesque et al., 2014](#)). For the purpose of this study, we defined ‘adolescents’ as those aged 12 years to 17 years – that is from the commencement of secondary school to the year prior to the legal alcohol purchase age in Australia.

1.3. Social identity and drinking in adolescence

Social identity theory posits that a person's sense of who they are is based in part on their membership or sense of belonging to one or more social groups. This understanding of self both reflects and is shaped by how we categorise ourselves in relation to others, with our social identity emphasising the “uniformity of perception and action among group members” ([Stets and Burke, 2000, p. 226](#)) and how we differ from those who are not considered to be part of the group. While our attitudes and behaviours are also shaped by personal goals and desires, situational factors influence the extent to which we align ourselves with actions that are symbolic of our understandings regarding group norms.

From this perspective, young people's views about drinking in their peer group may be shaped by misunderstandings about the prevalence of alcohol consumption among their peers and the importance of drinking as an indicator both of ‘fitting in’ and of rebelling against authority. Cross sectional survey research from Western USA with students from sixth to 12 grade found a positive relationship between misunderstandings about the prevalence of peer substance use and the likelihood of personal substance use ([Wambeam et al., 2014](#)). A longitudinal network data study with students from 6th to 9th grade in 28 rural communities from two US states found that students with a higher level of popularity were more likely to use substances, particularly as they grew older ([Moody et al., 2011](#)). Interestingly, students with different levels of popularity at each measurement point were also likely to have greater substance use, suggestive of consumption related to status-seeking ([Moody et al., 2011](#)). Taking this one step further, researchers surveying college students at a southern US university found that those placing higher importance on and commitment to their group were more likely to drink at higher levels ([Rinker and Neighbors, 2014](#)). Participants who exhibited a rebellious stance (represented by less deference to authority, defined as honouring the rules and leaders of the university) showed a stronger association between perceived norms and drinking ([Rinker and Neighbors, 2014](#)). From a contra perspective, [Fry \(2011\)](#) explored non/infrequent drinkers' sense of identity in reaction to perceptions of drinking as a typical behaviour in young adulthood, showing that an alternative, collective identity was constructed through having a sense of difference and not being connected with “that other world”, while taking a moral stance “where the consequences of behaviour are weighed against personal goals, social justice and respect” (p. 14). In each instance, group norms were significant in shaping young people's drinking behaviour.

Drinking in adolescence has also been described as part of the passage toward adulthood. [Beccaria and Sande \(2003\)](#) explained that in the modern global youth culture the “use of alcohol for intoxication purposes is the key symbol for ‘free flow’ in the phase of transition from childhood to...making one's social identity” (p. 116). Others have suggested that drinking represents a rite of passage that occurs within leisure time pursuits that involve peers

not parents, and where young people are not subject to heavy surveillance and regulation ([Northcote, 2006](#)). The nexus between high rates of alcohol consumption and youth is reflected in research involving young adults (18–25 years), where excessive drinking was explained as “part of being young, (and where) most looked to a future of responsibility where heavy drinking was less likely to feature” ([Demant and Jarvinen, 2006, p. 775](#)). Similarly, transitions such as entering the workforce and getting married typically involve adjusting one's pattern of substance use to support its compatibility with the expectations associated with these new roles ([Moos, 2006](#)). However, for some, substantial harms may be experienced in the short term and problems related to alcohol dependence and abuse that emerge in middle to late adulthood might have their beginning at this stage of life ([Babor et al., 2010](#)).

1.4. Parenting and adolescent alcohol consumption

There are substantial discrepancies between parents' views on underage drinking, their self-reported supply of alcohol to adolescents, and adolescents' self-reports of parental provision ([Jones et al., 2015](#)). Adolescents typically report higher levels of parental provision of alcohol than do parents; and parents experience dissonance due to the conflict between their desire to keep their children safe from physical harm and to protect them from ‘social’ harm ([Donovan and Molina, 2008; Kypri et al., 2005](#)).

The strong moralisation of alcohol and drug use may be involved in these conflicting reports and drivers, particularly “processes of social control and censure” that impact family and friends' consumption behaviours ([Room, 2005, p. 147](#)). Perhaps parents feel compelled to *portray* their role from the perspective of social control and responsible parenting, which involves not allowing their adolescent children to drink. Concurrently, however, parents may *act* from the view that adolescent drinking is common, that peer acceptance is paramount, and that they have limited control over their children's behaviour outside the family home. Consequently, providing alcohol in the home is perceived as “a way to reduce the impact of out-of-home influences” by modelling or teaching ‘responsible’ drinking ([Jones, 2015, p. 7](#)), driven by the belief that access to alcohol is somewhat inevitable and that parental supply is better than an ‘uncontrolled source’ ([Greenaway, 2010](#)).

The need to interpret parental views on adolescent drinking within understandings of social identity and social settings is borne out in a narrative review of studies on adolescent drinking. The authors found that research on parental influences on drinking in adolescence does not account for parental behaviours as social phenomena and, therefore, it is difficult to translate the findings into advice for parents ([Gilligan et al., 2012](#)). Research in this area needs to account for contextual factors impacting parents' decision-making about alcohol initiation and supply. Understanding the accuracy of parents' views regarding what other parents believe and how they act would allow an exploration of interventions targeting parent networks; to increase knowledge and inform decision-making about alcohol, adolescents and parenting ([Gilligan et al., 2012](#)).

1.5. Social and physical elements of the context for drinking

Aspects of the setting also appear to impact parents' decisions about their adolescent children's drinking. [Jayne et al. \(2012\)](#) emphasised the importance of place in the attribution of qualities of drinking practices; whether settings were considered problematic, sensible, safe or unsafe. In their work, injunctive norms about alcohol consumption at home were related to more general beliefs about alcohol related problems and public safety. These

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