Parental Communication and Risk Behavior – Data Brief Vermont 2011 Youth Risk Behavior Survey

Background

A growing body of research suggests that parent¹ adolescent connectedness reduces the likelihood of adolescent participation in risk behaviors.² In this analysis, we used communication and perceived parental approval/disapproval as proxies for parent-adolescent relationships and assessed their association with risk behaviors. The 2011 Vermont Youth Risk Behavior Survey (YRBS) asked several questions to teens designed to measure communication about risk behaviors (defined in this context as binge drinking, smoking marijuana, and smoking cigarettes), parental perception of this behavior, and frequency of discussions about school with parents.

Parental Communication

Overall, of the students surveyed in grades 9-12, 6% report smoking at least 20 cigarettes in the past 30 days, 21% report binge drinking five days or more in the past 30 days, and 25% report experimenting with marijuana at least once in the past 30 days. They were also asked, "How often does one of your parent's talk with you about what you are doing in school?" Twice as many students who reported rarely discussing school with their parents smoke cigarettes regularly compared to those who discuss school at least weekly. Similarly, decreased binge drinking and marijuana use are both associated with discussing school with parents.

Parental Perception

To gauge parental perception, students were asked "how wrong do your parents or guardians feel it would be for you to" drink alcohol, smoke marijuana, and smoke cigarettes. Sixty two percent of students who did not think their parents would disapprove of marijuana use reported smoking marijuana at least once in the past 30 days compared to only 17% who thought their parents would disapprove. Similar discrepancies were found for both regular cigarette smoking and binge drinking.



Age of First Use

In each instance of substance use, we see that students who talk with their parents about school use substances significantly less than those who do not discuss school regularly with their parents. Students who perceive that their parents disapprove of substance use were significantly less likely to use substances compared to those who thought their parents did not care whether they used substances.

January 28, 2014, Page 1 of 2 Vermont 2011 Youth Risk Behavior Survey



The age at which respondents first reported engaging in substance use is also related to parent-adolescent connectedness. Hingson, Heeren, and Winter (2006) reported that those drinking prior to 14 years of age were more likely to report alcohol dependence later in life.³ Similarly, an early start to smoking cigarettes was found to influence future dependence.^{4,5} For the comparisons below, prevalence before 13 years of age was used. Overall, of the students surveyed, 8% reported smoking cigarettes, 16% reported drinking alcohol, and 7% reported marijuana use, before 13 years for each.

With each type of substance use, students who talk with their parents about school reported significantly less substance use before the age of 13 than those who do not discuss school regularly with their parents. Students who think their parents disapprove of substance use were also significantly less likely to use substances before the age of 13 compared to those who thought their parents did not care whether they used substances.



Early subtance use by frequency of

Early substance use by perceived parental disapproval



Conclusion

While YRBS data cannot be used to demonstrate a causal relationship, the associations found in the Vermont YRBS 2011 data support past research indicating that frequent parental engagement in students' lives and strong relationships can impact the degree of substance use and delay the onset of experimentation with these substances.

References

1) We define parent as any individual whom assumes primary care responsibility of a youth

2)Resnick MD, Bearman PS, Blum RW, Bauman KE, Harris KM, Jones J, et al. Protecting adolescents from harm. Findings from the National Longitudinal Study on Adolescent Health. Journal of the American Medical Association 1997;278(10):823-832.

3) Ralph W. Hingson, ScD, MPH; Timothy Heeren, PhD; Michael R. Winter, MPH, "Age at Drinking Onset and Alcohol DependenceAge at Onset, Duration, and Severity," Arch Pediatr Adolesc Med. 2006;160(7):739-746. doi:10.1001/archpedi.160.7.739.

4) Khuder, SA, et al., "Age at Smoking Onset and its Effect on Smoking Cessation," Addictive Behavior 24(5):673-7, September-October 1999

5) Everett, Ph.D., et al. "Initiation of Cigarette Smoking and Subsequent Smoking Behavior among U.S. High School Students," Preventive Medicine, 29(5):327-33, November 1999

For more information, contact Shayla Livingston, MPH or Frank Galusha, Jr. (shayla.livingston@state.vt.us; 802-863-6337, Frank.Galusha@state.vt.us).

For the YRBS Data Brief Archive, visit: http://www.healthvermont.gov/research/yrbs/data briefs.aspx

