

Two UK papers explore the influence of the family and parenting on young people and alcohol

The Joseph Rowntree Foundation has published two papers on alcohol and young people.

'Alcohol consumption and family life', examined how parents teach young children (aged 5 to 12) about alcohol. It explored parental attitudes towards alcohol, and family drinking practices, using a national survey and in-depth case studies.

Parental attitudes to alcohol, childhood and family life

The report notes that parents perceive that there has been a significant shift in public drinking cultures and the nature of young people's drinking since their own childhoods. While the findings from the quantitative element of this research suggest the dominant parental attitude is that children in general should not be introduced to alcohol at home until their mid-teens and ought not to be allowed to drink in public spaces until they reach adulthood, the qualitative element of the research suggests that parents are introducing their own children to alcohol at home at an earlier age than this. This may

be because they draw on experiences from their own childhoods (either repeating what they perceive as positive parenting strategies, or intentionally parenting in a completely different way from how they were brought up). In particular, parents want their children to appreciate the pleasures and benefits of alcohol, as well as the risks of excess consumption (particularly when drinking in public spaces) so that as adults of the future they will drink in moderation. This attitude towards alcohol is perceived to be best learnt at home – as part of 'growing up' – rather than at school. In this sense, the report finds that attitudes

about intra-familial parenting in relation to alcohol do not appear to have changed as much as parents' perceptions of extra-familial public drinking cultures.

Rules and guidance: Parental advice about the risks and benefits of alcohol consumption

Between the ages of 5 to 12 most parents did not have specific rules for their children about drinking because children at this age were not particularly interested in alcohol or indeed drink (just 3% of 11 year olds drink alcohol regularly in the UK). Most parents considered that there were other more pressing things that they needed to formulate guidance and rules about, although there was recognition that these were also readily transferable to alcohol. While some of the case study families adopted a traditional model of parenting establishing strict boundaries about general behaviours (e.g. bed time) others adopted a more flexible approach, inviting discussions and negotiating rules with their offspring. Differences were also evident in parenting styles between ex-

Table 1: Changes in drinking cultures since parents' own childhoods

Table 2: Average age at which respondents think it is acceptable for children to engage in alcohol-related activities

Acceptable for children to ...	Average age
Be given a taste of an alcoholic drink	13
Fetch, pour or serve alcoholic drinks for others at home	14
Have a watered down alcoholic drink with a family meal	14
Get away with having a sneaky sip of an alcoholic drink at a family event	15
Have an alcoholic drink at family events	16
Have an alcoholic drink with just their friends, in the family home under supervision	16
Drink unsupervised with their friends on Friday/Saturday nights	18

Source: Family Life and Alcohol Consumption questionnaire survey

partners who were co-parenting children following the break-up of a relationship, and there was recognition by many parents that each child was unique and therefore might require an individualised strategy when it came to alcohol.

Despite these differences in approaches to parenting about alcohol all of those interviewed were keen to develop open and close relationships with their children. There was also recognition of the potential limits to parental authority, particularly when children become subject to the influence of peers in their teenage years. Most of the interviewees argued that the best they could do as parents was to equip their children with the right personal qualities and skills (e.g. self-confidence and self-respect) to make sensible choices about alcohol once beyond the family and home. In doing so, parents acknowledged that it is the children themselves who ultimately will have to make their own choices about the role of alcohol in their lives.

Unintentional transmission of attitudes towards, and practices of, alcohol consumption through parental modelling

The research demonstrated that in line with their positive attitudes towards alcohol, parents who drink alcohol model its consumption as a pleasurable and hospitable activity at home. Parents generally disagreed that it was acceptable to be drunk when responsible for children although in practice they did allow their offspring limited glimpses of drunkenness (e.g. at parties and family events). At the same time, they try to exercise more control over their children's exposure to alcohol in public spaces, thus constructing home-based drinking as a safe and enjoyable practice in contrast to public consumption. The one exception to this is holidays, where parents seem unaware of the significance of the fact that they model specific, but often very different, drinking practices from their normal domestic patterns of consumption. As part of intra-familial home and holiday consumption practices, many families initiate their children into tasting alcohol and/or drinking rituals, yet are careful to try to limit the practices that children are exposed to by other parents/their children through the indirect strategy of attempting to influence their school friends (directly, or indirectly via choice of school).

Children's perceptions of alcohol and its effects

The children's narratives bore a close resemblance to their parents' accounts of how alcohol is introduced in the context of family life. All the children aged 5 to 12 were aware that alcohol is only for grown-ups although they had a relatively limited grasp of the legal and cultural frameworks that shape its consumption. There was strong evidence of the direct and indirect transmission of parental attitudes towards and patterns of drinking in the children's narratives, as well as a clear link between alcohol and supermarkets/family shopping, reflecting the significance of contemporary home-based patterns of alcohol consumption. While the children had a reasonable awareness of the social harms associated with alcohol they had a relatively poor grasp of potential health-related harms. However, the children imagine that as adults of the future they will only drink in moderation, an ambition that mirrors the model of sensible drinking that their parents aspired to teach them.

Implications of the authors findings:

'The former Chief Medical Officer's (2009) recommendation that children under 15 should avoid alcohol completely appears to be unrealistic given that alcohol is an unremarkable and taken for granted part of many families' everyday lives. There is a danger that such advice 'problematizes' what appear to be sensible parental attitudes and approaches to alcohol.

The role of families in advising and guiding young children in relation to alcohol At ages 5 to 12

It is parents who are the most important influences on children's attitudes towards alcohol. Contemporary parenting strategies appear to be largely successful at conveying the social pleasures and risks of drinking alcohol at home, and the message that alcohol should be consumed in moderation. Indeed, young children even appear to learn positive messages about moderation from witnessing their parents/relatives drinking to excess.

The role of education and/or other support services in advising and guiding younger children in relation to alcohol

it is important to recognise that not all young people have the familial support described in this report. For example, some may be over-exposed to 'problem'

drinking, others 'over-protected' from knowledge about alcohol, or not informed about alcohol for cultural or religious reasons given that there is some evidence of the presence of alcohol even in communities that abstain... Alcohol education is therefore one way to address the gaps in what children are learning about alcohol and the differential levels of education and support children receive at home. Indeed, the Department for Education states that children aged 7 to 11 will learn about the health and social risks associated with alcohol and the basic skills for making good choices about their health and recognising risky situations at school as part of the National Curriculum.

The majority of children who participated in this study stated that they had not been taught about alcohol at school, which suggests that this education is either not taking place, or is not being delivered in an effective manner. The findings of this study imply that it would be beneficial for the Department for Education to review the way alcohol education is currently delivered as part of the National Curriculum (for 7- to 11-year-olds) within primary schools in order to improve its efficacy.

As part of this, schools should be encouraged to involve parents in order that the same key messages about alcohol can be reinforced at both home and school. To maximise impact, any alcohol education in schools should be run in parallel with campaigns targeted at parents.'

The second report '**Pre-teens learning about alcohol**' examines the influence that family can have on how children in their pre-teen years learn about alcohol, and identifies the need for and approaches to providing parental guidance on the subject.

The report authors of the report state that much of the research on drinking alcohol and pre-adolescence has examined the impact of problem drinking within the family. This study addresses a significant gap in the literature by focusing on family settings where family members are not problem drinkers. The study aim was to explore how children learn about alcohol and to identify differences by socio-economic status, age, family structure, geographical locality and parental drinking behaviour. More specifically, the research aimed to provide insights into children's socialisation to alcohol during key transition stages in ages 7 to 12 years.

A qualitative methodology was used, comprising a mix of focus groups and family case studies, and using in-depth interviews. The sample represented a range of family structures from contrasting socio-economic backgrounds in four different community contexts (urban affluent, urban deprived, rural affluent and rural deprived).

Children's understanding of drinking behaviours

The report demonstrates that children aged 7-12 develop a fairly nuanced understanding of alcohol and its effects (e.g. psychological, health, physical) and are also able to appraise different consumption styles. Their accounts of drinking behaviours revealed that they were able to identify different levels of intoxication in adults and many were able to differentiate between occasional and habitual drunkenness, indicating an understanding of addiction and problematic drinking.

Children expressed opinions about the extent to which drinking behaviour was 'good' or 'bad'. Initial responses were fairly simplistic, especially among younger children in the study group, so that they tended to view alcohol as 'bad'. Further discussion revealed more sophisticated knowledge, with some indication that girls were more likely than boys to identify with and relate to the social attributes of drinking.

Children's knowledge of alcohol products

Children in the study group appeared to have a relatively detailed knowledge of alcoholic drinks and brands, though they sometimes made mistakes when comparing the strength of different drinks. They were also readily able to recount the specific preferences of their parents, and there was some indication that these observations would impact on children's later drinking styles. The study data therefore suggests that children at this age can already anticipate modelling future drinking patterns on the drinking behaviour of adult family members, where marked gender differences in consumption styles could be identified.

Children's impact on drinking behaviours

Young children had an indirect modifying impact on parental drinking behaviours, because many parents felt they needed to act as a role model and adopt sensible drinking styles, particularly when in charge

of children. Although few in number, some children also had a more direct modifying impact on the alcohol consumption patterns of family members whom they actively challenged on the subject, especially fathers.

There were also indications that children were able to take advantage of their parents' (especially fathers') episodes of intoxication and might, for example, receive additional pocket money or be less closely supervised. These latter observations were more typical of families living in deprived communities where there was evidence of these behaviours being transmitted between generations.

Learning about alcohol

The family environment was seen to play a crucial role in children's learning about alcohol. Children exposed to normal, everyday consumption and many children were already aware of prevailing consumption styles in their home, in some cases including intoxication. Exposure to alcohol consumption and intoxicated behaviours through other routes (e.g. seeing people drunk on the street, at parties or at sleepovers) may be significant one-off events that serve as family discussion points, but it is the home environment where alcohol is understood by children in a normative manner and where children learn about its everyday use. In contrast, school-based education about alcohol was perceived differently from learning in the home: for example, it was less emotive and focussed upon conveying facts about alcohol and the effects of consumption, especially with regard to health. This indicates there is a danger that children are receiving mixed messages about alcohol and its acceptability, the authors warn.

While the home remains an important source of learning, dialogue between parents and children about alcohol consumption appeared fairly limited for the study age group; much of the learning was informal and based largely on observation. Relatively few parents sought to educate through proactive discussion and by providing information but they supported a supervised trial of alcohol, mainly on special occasions. This was seen as a means of socialising children to alcohol and removing mystique, and was sometimes undertaken in the hope that the unattractive taste would deter unsupervised experimentation.

Children often appeared to be relatively uninterested in trying alcohol, especially in the younger ages, and were indeed put off by taste.

Children's exposure to alcohol

Findings reveal that children in deprived and affluent areas are socialised to alcohol in markedly different ways. Children from affluent areas appear more likely to be exposed to alcohol consumption during meal times, they are also much less likely to witness drunkenness and are less involved in family celebrations where alcohol is consumed. Those from more affluent areas expected and received smaller amounts than those in deprived areas.

In this way, it is evident that certain types of alcohol consumption are more hidden in affluent communities, both within and outside the family. In contrast, consumption is more visible in deprived communities, where it is more integrated into home and family settings. These differences are likely to be perpetuated by the transmission of local cultural norms for alcohol consumption between generations.

Parents' expectations for children's future drinking

Regardless of socio-economic status, parents' expectations of their children's future alcohol behaviours were often characterised by a sense of helplessness in relation to the wider social forces that shape behaviours. Future experimentation with heavy alcohol use was perceived to be inevitable in the face of other influences and pressures.

While most parents considered their influence as role models to be significant, and the way in which they introduced their children to alcohol to be important, many expected their children to drink to excess at some stage. Parents' own recollections of growing up were frequently cited as evidence in support of parental limitations. One of the most pertinent findings to emerge from this research, therefore, was that while all parents wanted to teach their children to drink responsibly, they had a limited belief in their ability to do so reliably.

However, the report cites exceptional cases where parents set out to teach their children responsible consumption patterns, and expected their children to learn them. The effectiveness of the parenting styles in these case families, located in particularly deprived areas where heavy drinking was the norm,

was evident in the responsible alcohol behaviours displayed by older siblings. This suggests that there is a need to emphasise that parenting can make a difference, even when there are seemingly insurmountable barriers.

Alcohol compared with other issues

In comparison with other substances and behaviours, alcohol was almost a non-issue for parents with children in the study age range. Many parents of primary school children were more concerned about obesity, smoking and drug taking and these behaviours were consistently regarded as unequivocally damaging to health or highly addictive. Fear of these other risks did not always appear to be based on rational concerns, and seemed to be influenced by perceptions of what was covered in school (and possibly the wider media). Drugs were frequently singled out as the most serious threat to children's general wellbeing despite most parents saying they knew far less about drugs than they did about alcohol and with virtually none of the children having been knowingly exposed to illegal drugs. It is possible that these perceptions relate to the fact that alcohol consumption is a more normative behaviour than drug taking or smoking.

Many parents with young families had not considered issues surrounding alcohol to date, and said they would deal with them when they emerged and their children began to experiment with it independently. Overall, alcohol consumption was evaluated normatively. Parents took a firm stance on behaviours such as smoking or drug taking and a more nuanced or ambiguous position on alcohol.

The report lists the following implications for policy and practice:

'Targeting pre-teenage children

Children at this age appear to be receptive to parental advice and influence, and it is therefore a good time to provide information and guidance to encourage dialogue between parents and children about alcohol and to underline the importance of parents as role models. This would be particularly valuable given that parental influence diminishes as children reach their teenage years, the period when many begin to experiment with alcohol independently.

Advice and guidance for parents

The study findings indicate that initiatives designed to support parents must not only respond to the educational needs of their children; they must also be sensitive to adult drinking cultures and the wider social values surrounding alcohol use in order to engage parents in ways that are constructive and meaningful.

While heavy-handed approaches are likely to be dismissed by parents, parents in this study were unclear about the law and about recommended practice for deciding when, how and in what contexts it is permissible to introduce children to alcohol. Providing clarity on the law would offer a neutral platform from which to provide parenting guidance on introducing alcohol, and emphasise that parenting in this area can make a real difference. If parents are to respond appropriately, there is also a need to articulate clearly the rationale for current government advice that children should not be permitted to drink at all until the age of 15 years.

Findings also indicate that care needs to be taken to avoid stigmatising parents, particularly those living in socially disadvantaged circumstances who sometimes feel overwhelmed by information and advice. There may be value in providing alcohol advice through generic (as opposed to alcohol-specific) parenting initiatives, and through initiatives that focus on the broader family and community. Finally, findings suggest that young children are receiving mixed messages about alcohol in the home and at school, irrespective of social background, and that there is a need to encourage greater involvement of parents to help ensure consistency of message. This involvement is likely to depend on government taking a more proactive stance in guiding parents in order to harness the positive influence they can have on children's future drinking behaviour. To be effective, these actions need to form part of a wider multifaceted strategy designed to address the prevailing pro-drinking culture.'

Summary and full versions of the report are available from www.jrf.org.uk/publications/alcohol-consumption-family-life and www.jrf.org.uk/publications/pre-teens-alcohol-learning.