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# The Experience of Alcohol Use in Adolescence: A Hermeneutic Study

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**MASTERS IN SOCIAL WORK  
THESIS**

**Stacy O. Swenson**

**MSW  
Thesis**

**The Experience of Alcohol Use in Adolescence :  
A Hermeneutic Study**

Thesis  
Swenso

**2001**

The Experience of Alcohol Use in Adolescence: A Hermeneutic Study

Stacy O. Swenson

Submitted in partial fulfillment of  
the requirement for the degree of  
Master of Social Work

AUGSBURG COLLEGE  
MINNEAPOLIS, MN

2001

MASTER OF SOCIAL WORK  
AUGSBURG COLLEGE  
MINNEAPOLIS, MINNESOTA

CERTIFICATE OF APPROVAL

This is to certify that the Master's Thesis of:

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## ABSTRACT

## The Experience of Alcohol Use in Adolescence: A Hermeneutic Study

Hermeneutics

Stacy O. Swenson

July 27, 2001

Alcohol use among adolescents has been a long-standing problem in the United States. This study was undertaken to gain a better understanding of what the experience of using alcohol as a teenager is like. For this hermeneutic study, three participants took part in an in-depth interview that focused on their experiences with alcohol. The main theme that emerged from the experiences was *Maturing*. This theme and two sub-themes, Peer Influence and Risk Taking, were examined for deeper meaning. These findings suggest that professionals working with adolescents can further help their clients by keeping the door open for discussion of alcohol use. These finding also indicate that policies regarding prevention efforts may need to shift their focus from abstinence to responsible drinking.

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## CHAPTER ONE

### Introduction

The introductory chapter starts with a statement of the problem describing the current study. The purpose of the study and the research questions are presented. The significance of the current study and its applicability to social work are discussed. The chapter ends with a description of the researcher's interest in the problem in order to make as apparent as possible the lens through which this study is viewed.

### Background of the Problem

Alcohol use and misuse is a major health problem in the United States today. It is estimated that between 10-12 million American adults have drinking problems (Blume, 1981, as cited in Botvin, Baker, Botvin, Filazzola & Millman, 1984). The majority of adults with drinking problems started drinking during adolescence. Studies show that the majority of adolescents between the ages of 13 and 18 have consumed alcohol at some point in their lifetime (Johnston, O'Malley, & Bachman, 1998).

### Statement of the Problem

Although efforts, such as the "Just say no" campaign, have been made to decrease the number of youths who try drugs and alcohol, research indicates that they may not be enough to prevent youth from drinking (Botvin, et al., 1984). Bauman & Phongsavan (1999) found that there appears to be a decrease in regular alcohol consumption by adolescents. Other studies, however, indicate that there is an increase in binge drinking among youth, and that more youth report having tried alcohol (Johnston, Bachman, & O'Malley, 1979; Scheier, Botvin & Baker, 1996). These findings show that current efforts to decrease alcohol abuse among youth are not sufficient. The goal of this study is to gain a better understanding of the experience of alcohol use in adolescence.

### Purpose and Significance of the Research Study

The purpose of this study is to capture the experiences of three young adults who used alcohol as adolescents. The study utilized a hermeneutics approach, which

encourages involvement between the participants and the researcher. This method allowed the researcher to obtain detailed information. From the information that is gathered, a detailed picture of the participants' experiences evolves. This study attempts to understand the experience of drinking as an adolescent. The significance of this study is that social work practitioners, and others working with adolescents, will be better able to understand how alcohol use affects adolescents. Alcohol use and chemical dependency issues are present in many areas of social work practice, so insight into this issue is critical for practitioners.

### Research Question

The research question for this study was: "What is the experience of alcohol use during adolescence?" The first question that I asked of each participant was: "Tell me about your experience with using alcohol as an adolescent." I used a list of prompts during the interviews to gather more details and to help the participants expand on their responses. That list included: "What stands out for you?" "What does this mean to you?" "Tell me more about what that was like." "For instance?" "Can you give me an example?" and "Can you clarify that?"

### The Researcher's Location

As mentioned previously, the hermeneutic methodology used in this study involves the researcher as well as the participants. Both the history and background that I, as the researcher, bring to the study affected how I interpreted the experiences of the participants. Therefore it is important to let readers of this study know who I am and what I bring to this study in order to make my experiences and possible preconceptions known (Plager, 1994).

I am a white, middle-class, married, twenty-nine-year-old female who is completing her Master's of Social Work degree. My interest in the topic of alcohol use stems from the fact that there is alcohol dependence in my family and the fact that I drank alcohol as an adolescent. I have experienced the pain of watching family members

struggle with the issues surrounding alcohol dependence. I also experienced the trauma of losing my older brother to an alcohol related car accident. Despite these experiences, I drank as an adolescent and continued drinking heavily into early adulthood. Currently I drink occasionally in social settings.

Many of the people I know started using alcohol in their adolescence, and their drinking got progressively worse as they got older. In watching both my family members and friends struggle to overcome alcohol dependence, it seemed to me that there is a component of treatment that is missing. There seems to be little focus on what the experience of drinking encompasses; what it provided for the person who drank. It was this knowledge and the fact that I plan to work with children and adolescents after graduation that secured my interest in the topic of this study. I am hopeful that I will be better able to understand the impact of alcohol use on adolescents, both those who are chemically dependent and those who are not. I am also looking to gain an understanding of what the experience of drinking provides for adolescents so that other ways of filling that aspect of their lives can be found.

#### Summary

This chapter addressed the background and statement of the problem of adolescent alcohol use and the purpose and significance of the research study. It stated the research question and outlined the researcher's background as it relates to the study. Chapter two reviews the literature related to alcohol use by adolescents. Chapter three discusses the theoretical framework for this study. Chapter four presents the methodology used for this study. Chapter five discusses the study's findings. Strengths and limitations of the study, implications for social work practice, and areas for future research are discussed in chapter six.

## CHAPTER TWO

### Literature Review

Alcohol use among youth has been an area of concern and research for decades. Several factors have been examined to determine their impact on alcohol use among adolescents. This literature review will focus on alcohol use among youth. It will review the history of alcohol use in the United States, discuss the concept of self-esteem as related to alcohol use, examine use and misuse, and review differences in alcohol use.

#### Definition of Alcohol Use

Alcohol use by youth has been a widely researched topic. Studies have examined youth attitudes toward drinking (Lowney, 1984), use patterns (Bailey, 1992), contributing factors (Biddle, Bank & Marlin, 1980; Corwyn, Brenda & Ballard, 1997; Finke & Bowman, 1997; Kinnier, et al., 1994; Rooney, 1982; Scheier, Botvin & Baker, 1996), and prevention (Botvin, et al., 1984; Dusenbury & Botvin, 1992). While some of the literature examines "problem drinking," that is not the focus of this literature review. For the purpose of this study, alcohol use will be defined as any alcohol consumption by persons under the legal drinking age (21 years old).

#### History of Alcohol Use in the United States

Alcohol has been around since prehistoric times. There is evidence suggesting that prehistoric people brewed a primitive beer and the Bible makes frequent reference to wine (Schlaadt, 1992). Throughout history, alcohol was common across the Western world and in particularly wide use in England at least from Elizabethan times, if not earlier (Schlaadt, 1992).

In the United States, the use of alcohol dates back to the colonial era. Cider, which was made from apples, was the most widely consumed alcoholic beverage until the 19<sup>th</sup> century (Schlaadt, 1992). Alcohol use was generally accepted and was seen as a part of the social fabric of the United States until the Revolutionary War (Mendelson & Mello, 1985). Because of the increase in industrialization after the Revolutionary War

and the changes in lifestyle that accompanied it, both drinking behaviors and attitudes about drinking began to change as well (Mendelson & Mello, 1985). Alcohol abuse pervaded American society by the end of the 18<sup>th</sup> century (Schlaadt, 1992).

In response to the increasing abuse of alcohol, the temperance movement was launched. This movement was led by America's Protestant churches (Schlaadt, 1992). Alcohol consumption did decline initially, and state laws aimed at curbing public drunkenness were passed. These laws were revoked shortly after their enactment, and by the 1860s, alcohol consumption was on the rise again (Schlaadt, 1992). A second wave of temperance laws were passed throughout the country during the 1880s and 1890s, but those laws were also quickly repealed or went unenforced (Schlaadt, 1992).

In 1920, the 18th Amendment was ratified, outlawing the consumption of alcohol (Mendelson & Mello, 1985). This amendment to the U.S. Constitution was largely considered a social failure because of a problem with enforcement and the resulting profitability of a black market for liquor (Mendelson & Mello, 1985). However, the law was a public health success. The lowest morbidity and mortality statistics on health matters were reported during the period the 18<sup>th</sup> Amendment was in place (Schlaadt, 1992). In 1933, the Eighteenth Amendment was repealed by the ratification of the 21<sup>st</sup> Amendment (Schlaadt, 1992).

In 1935, Bill Wilson and Dr. Bob Smith founded Alcoholics Anonymous, an organization that helped to change America's attitude about alcoholism (Schlaadt, 1992). Alcoholism began to be seen as a treatable disease rather than a moral downfall (Schlaadt, 1992). The American Medical Association recognized the disease theory of alcoholism in 1958, which helped to legitimize alcoholism as a disease (Schlaadt, 1992). The view of alcoholism as a disease continues today, and many treatment programs have been developed to assist alcoholics in their recovery.

### Self-esteem and Alcohol Use

The role self-esteem plays in the development of a child has been a central theme in adolescent research (Brooks, 1992; Coopersmith, 1967). Self-esteem has been shown to be a contributing factor in many facets of life for youth such as school performance, quality of peer relationships, resiliency and the abuse of alcohol and drugs (Brooks, 1992).

The concept of self-esteem has been used in the social science literature for decades, but until the late 1950s there was little research done on self-esteem (Coopersmith, 1967). Prior to this date, self-esteem was theorized to be simply one's attitude toward oneself. Many different terms have been used interchangeably with self-esteem, such as self-concept, self-competence and self-worth (Rosenberg, et al., 1995). Coopersmith (1967) defines self-esteem as "the evaluation which the individual makes and customarily maintains with regard to himself: it expresses an attitude of approval or disapproval, and indicates the extent to which the individual believes himself to be capable, significant, successful, and worthy" (pp.4-5).

More recently, the literature has defined two types of self-esteem: global self-esteem and specific self-esteem (Rosenberg et al., 1995). Global self-esteem refers to "the individual's positive or negative attitude toward the self as a totality" (Rosenberg et al., 1995). Specific self-esteem, on the other hand, refers to the perception of oneself in a specific area (Rosenberg et al., 1995). For example, a student may perceive herself to be a poor math student, but a good athlete. Therefore, she may have low specific self-esteem with regard to math, but not have overall low global self-esteem. For the purpose of this literature review global self-esteem will be discussed.

Studies have shown that youth with low global self-esteem are at greater risk for alcohol use and abuse than youth with healthy levels of self-esteem (Finke & Bowman, 1997; Thompson, 1989; Wasson & Anderson, 1995; Yanish & Battle, 1985). This finding corresponds with research done on adult alcoholics that found both male and

female alcoholics have lower self-esteem than non-alcoholic control groups (Allen, 1969; Beckman, 1978 as cited in Yanish & Battle, 1985). Chassin et al. (1985) found that alcohol use is a likely consequence of low self-esteem when a positive image of drinking is held by the youth (Thompson, 1989). Low self-esteem has been linked not only to involvement with alcohol for youth, but also in transitions in alcohol use over time (Scheier et al., 1996).

In addition to the effect of self-esteem on alcohol use, the reciprocal effect of alcohol use on adolescent self-esteem has been studied, though not as extensively (Thompson, 1989). Drinking is usually a social group activity for adolescents (Erickson & Jensen, 1977 as cited in Thompson, 1989), and whether involvement in drinking increases self-esteem as it improves peer relations has also been examined in the literature. One study found that only when youth hold a sophisticated image of drinking during early adolescence, does drinking boost self-esteem (Thompson, 1989).

#### Use and Misuse

Alcohol use and misuse is also a well-researched topic, and studies estimate that 10-12 million American adults have drinking problems (Blume, 1981 as cited in Botvin, Baker, Botvin, Filazzola & Millman, 1984). According to Deluca (1980), 65% of problem drinkers had their first drink by the time they were 13 years old (Finke & Bowman, 1997). This and similar findings have led to an increase in the study of adolescent alcohol use.

Although estimates vary depending on the definition of use utilized in the study (Donovan & Jessor, 1978), Sells and Blum (1996) state that nearly all students report some experience with alcohol prior to completing high school, and over a third report hazardous use at least once (Bauman & Phongsavan, 1999). Studies have shown also that though there appears to be a decrease in regular drinking, there is an increase among youth in binge drinking (Bauman & Phongsavan, 1999; Scheier et al., 1996), and more youth are reporting having tried alcohol (Scheier, 1996).

### Peer and Parental Influence

Much of the research on adolescent drinking focuses on why youth drink (Biddle et al., 1980; Corwyn et al., 1997; Finke & Bowman, 1997; Rooney, 1982; Scheier et al., 1996). Studies demonstrate that parental and peer influences have an impact on adolescent drinking (Biddle et al., 1980; Finke & Bowman, 1997; Rooney, 1982). Alcohol use by parents and peers is a determining factor in youth drinking patterns. Youth whose parents and peers use alcohol are more likely to use alcohol than those whose parents and friends do not (Biddle et al., 1980; Finke & Bowman, 1997; Rooney, 1982; Scheier et al., 1996). How parents influence drinking has been shown to be different from how peers influence alcohol use. Peers tend to influence drinking through behavior modeling, whereas parents influence drinking behavior through normative standards (Biddle, et al., 1980). However, Sarvella and McClendon (1988) found peer pressure was the strongest influence on an adolescent's alcohol use.

### Gender Differences

Some studies have examined the differences in alcohol use based on gender (Flannery, Vazsonyi, Torquati, & Fridrich, 1994; Lo & Globetti, 1999; Martin, Milich, Martin, Hartung, & Haigler, 1997). Numerous different factors in alcohol use between males and females have been found, including differences in age of initiation, frequency, and level of alcohol use. Females take their first drink at a later age than males, and females are more likely to be introduced to alcohol with parental knowledge (Lo & Globetti, 1999). Males use alcohol more frequently than females (Hawkins, et al., 1997; Johnston, O'Malley, & Bachman, 1992; Parker, Calhoun, & Weaver, 2000). Males are also more likely to drink heavily and to the point of intoxication (Beck & Summons, 1987; Lo & Globetti, 1999; Parker, et al., 2000). It is more likely that males will get drunk during their first experience with alcohol (Lo & Globetti, 1999). However, both males and females report that they drink in order to get drunk (Lo & Globetti, 1999).



Males also are more likely than females to experience problems with alcohol as young adults (Hawkins, et al., 1997).

#### Differences Based on Ethnicity

In addition to gender differences, recent studies have also examined the differences in alcohol use among various ethnicities. Research indicates that Caucasian adolescents are more likely to drink than are African-American or Hispanic adolescents (Bradizza, Reifman, & Barnes, 1999; Hawkins, et al., 1997; Parker, et al., 2000). One study found that Caucasian students drank heavily at a rate of nearly twice that of African-American students (Hawkins, et al., 1997). Hispanic students' heavy drinking rates were found to be between that of Caucasians and African-American students. Another study, in which alcohol use among American adolescents was compared to alcohol use among adolescents in Hong Kong, found that American youth are more likely to drink and to achieve higher drinking levels (Lo & Globetti, 1999). Adolescents from Hong Kong were more likely than American youth to have had their first drink at home with their parents, and to have had their first drink at a younger age. Hong Kong teenagers consumed less alcohol than American teens, and they were less likely to have gotten drunk (Lo & Globetti, 1999).

#### Risk Taking and Alcohol Use

Alcohol use has been linked in the literature to many risk-taking behaviors. A correlation between alcohol use and aggression has been found (Scott, Schafer, & Greenfield, 1999; White, Hansell, & Brick, 1993). A relationship between drinking and an increase in sexual risk taking has also emerged from the research (Clark, Lesnick, & Hegedus, 1997; Dermen, Cooper, & Agocha, 1998; Poulson, et al., 1998; Richter, et al., 1993; Staton, et al., 1999). Finally, adolescent alcohol use has been correlated with drinking and driving (Copeland, Shope, & Waller, 1996; Quigley & Marlatt, 1996).

The relationship between alcohol and violence has been an area of increasing interest for the past decade (Parker & Auerhahn, 1998). The fact that there is an

association between alcohol and aggression has been well documented (Scott, et al., 1999; White, et al., 1993). Many studies support the idea that people are more aggressive when they are drinking (White, et al., 1993). The level of aggression has been shown to be affected by the amount of alcohol used (Scott, et al., 1999). Individuals who are intoxicated have been shown to react more aggressively when provoked than individuals who are not under the influence of alcohol (Scott, et al., 1999). Although there is agreement that a relationship exists between alcohol and aggression, there is debate as to whether or not it is a causal relationship and, if it is, in what direction the causal effect runs (White, et al., 1993).

The use of alcohol has also been linked to increased sexual risk taking (Poulson, et al., 1998; Richter, et al., 1993). Sexual risk taking can be defined as an increased number of partners, no condom use, or putting oneself in a vulnerable position. One study found that the frequency and quantity of alcohol consumed had a significant impact on the number of sexual partners college students had (Poulson, et al., 1998). Adolescents and young adults are less likely to use a condom when they are under the influence of alcohol (Poulson, et al., 1998; Richter, et al., 1993). Alcohol use has also been found to increase the risk of sexual victimization (Clark, et al., 1997). Some studies indicate that adolescents who hold the belief that alcohol and sex co-occur are more likely to engage in risky sexual behavior than those who do not hold this belief (Dermen, et al., 1998).

In addition to aggression and sexual risk taking, drinking and driving is another risk-taking behavior adolescents engage in. Studies indicate that although young adults constitute approximately 15 percent of licensed drivers, they account for almost 30 percent of all drinking-driver fatalities (Campbell, Zobeck, & Bertolucci, 1995). Copeland, et al. (1996) reported that most high school seniors had ridden with a driver who had been drinking at least once in the past six months and that 30 percent recalled driving after drinking themselves. The literature also found that most teenage passengers

who die in car accidents are in vehicles being driven by another teen (Copeland, et al., 1996).

### Gaps in the Literature

The main limitation cited in the literature was the sample population used. Most of the research was done with public school populations, because they are the most accessible. Using a school population may not account for the homeless youth, youth attending private schools, or the youth not attending school for other reasons. Therefore, utilizing this public school population decreases the generalizability of the studies to non-school groups.

According to Rosenberg et al. (1995), another gap in the literature is the focus on global self-esteem and alcohol use rather than specific self-esteem. More information is needed about which areas of specific self-esteem may be correlated with alcohol use and the extent of the correlation.

A final area in which the research is lacking is in richness of information. Most of the studies that have been done are quantitative, using surveys to obtain numbers and statistics. While this is helpful in determining what the extent of the problem is with drinking among adolescents, it does little to help us determine either the effects of the drinking on their self-esteem or how to prevent them from drinking in the first place.

This study will examine, in depth, the effects that alcohol use has on young adults who drank as adolescents. The richness of the information obtained will add to the quantitative information already gathered.

### Summary

This chapter presented the literature on alcohol use during adolescence. Alcohol use was defined and the history of alcohol use in the United States was provided. The correlation between self-esteem and alcohol use was discussed. Adolescent use and misuse of alcohol as well as parental and peer influence were examined. Differences in alcohol use based on gender and ethnicity were also explored. The relationship between

risk taking and drinking was also discussed. Finally, gaps in the literature were presented.

## CHAPTER THREE

### Theoretical Framework

#### Overview

The theoretical framework, including a discussion of Neutralization theory, will be outlined in this chapter. The rationale for applying the selected theory to the study of the experience of alcohol use in adolescence will be explained.

The question of why some youth choose to engage in drinking and others choose not to has been asked and researched for many years. Numerous theories have been developed to help explain why youth engage in delinquent behavior such as drinking under age. Neutralization theory is one such theory. Neutralization theory, otherwise known as Drift theory, was introduced by David Matza and Gresham Sykes (Siegel & Senna, 1981).

#### Neutralization Theory

The basic premise of Neutralization theory is that youth, as well as adults, spend most of their lives behaving on a continuum between total restraint and total freedom. "Drift" is defined as the process by which individuals move from one end of the continuum to the other. People tend to "drift" from behaviors that are unconventional or deviant to behaviors that are constrained and sober (Siegel & Senna, 1981).

The fact that a subculture of delinquency exists in society in which criminal behavior is supported encourages young people to drift. Matza describes the subculture as an "inarticulate oral tradition" which does not have formal rules (Siegel & Senna, 1981, p.132). Members of this subculture learn what acceptable and expected behaviors are by following the behavior cues of their peers. Fun and adventure are emphasized in the delinquent subculture and members are frequently involved in offenses such as gambling, smoking, and drinking (Siegel & Senna, 1981).

The theory of neutralization is based on several observations made by Matza. The first observation is that youth often express some level of guilt over their delinquent acts.

Matza asserts that youth would not experience these feelings of guilt if they did not hold values similar to those of normative society. The second observation is that many delinquent youth admire and respect law-abiding people. Third, most delinquents have a definite distinction between those they can victimize and those they cannot. This distinction implies that delinquents are aware that their behaviors are wrong. As Matza asks, "Why else would they limit them?" (Siegel & Senna, 1981). The final observation is that delinquents "are not immune to the demands of conformity" (Siegel & Senna, 1981, p.132). An example of this is that many delinquent youth participate in the same social functions as non-delinquent youth such as church and school activities. Matza holds that these observations substantiate the fact that delinquent youth operate as part of the normative society and share its values. Delinquency, then, is the result of the neutralization of accepted social standards through a set of rationalizations for illegal behavior (Siegel & Senna, 1981).

Neutralization theory poses that juveniles develop a set of justifications for their delinquent behaviors. This set of "neutralization techniques" is what allows youth to drift from behaviors that are acceptable to normative society and into delinquent behaviors. Matza has identified five techniques that youth use to rationalize their delinquent behaviors. They are denial of responsibility, denial of injury, denial of victim, condemnation of the condemners, and appeal to higher loyalties (Siegel & Senna, 1981).

The denial of responsibility occurs when delinquents claim that their illegal behaviors were not their fault. The delinquent acts were either accidents or due to factors outside their control.

Delinquent youth are able to rationalize their behavior by denying that what they are doing is illegal. This is denial of injury. An example of this technique would be viewing stealing as "borrowing." Society often reinforces this rationalization by labeling the delinquent behaviors as "pranks" and therefore acceptable behavior.

The denial of a victim takes place when the youth rationalize that the victim of the

crime deserved it. This is often why the delinquent acts are directed at someone who is disliked, such as a teacher or a neighbor, or someone who is part of a group that the youth finds offensive, such as a homosexual. Denial of the victim also occurs when the youth ignore the rights of the victim because the victim is unknown or absent. An example of an absent victim would be the owner of a department store. Stealing from, or vandalizing the department store would be viewed as victimless crimes.

Condemnation of the condemners is when delinquent youth view the world in a “dog-eat-dog” fashion. They believe that police and judges are on the take, parents take out their problems on their children, and teachers show favoritism. It is therefore unfair for these adult figures to condemn them for their illegal behaviors. This shift of blame helps the youth repress the feeling that their own behaviors are wrong.

With the rationalization, appeal to higher loyalties, youth argue that they are caught in the middle between the rules of greater society and those of their peer group. In this situation the youth adhere to the values and standards of their peer group because the demands of their peers are more immediate and localized.

#### Application of Neutralization Theory

Adolescents choose to drink alcohol for a number of different reasons. Neutralization theory would contend that youth drink because they are able to rationalize the behavior so as not to see it as an illegal or delinquent act. Four of the five techniques from Neutralization theory help to explain why some youth drink. These techniques also help explain how youth rationalize the delinquent behaviors that often accompany drinking. The four techniques are denial of responsibility, denial of injury, denial of victim, and appeal to higher loyalties.

Drinking often occurs in a social context during adolescence and much research has been done regarding peer influence on alcohol use (Biddle, et al., 1980; Finke & Bowman, 1997; Thompson, 1989). Because drinking is often done at the prompting of friends, it is easy and convenient for adolescents to deny responsibility for their drinking.

They blame their delinquent act (drinking) on the fact that “everyone was doing it,” so they did not have a choice. Therefore, it is not their fault. The same rationalization can be used with other delinquent acts that occur when the youth is drinking such as physical violence, sexual assault, and driving under the influence. Basically, they did not have a choice about whether or not to drink, or they did not mean to start the fight.

Despite the correlation of alcohol and violence (White, Hansell, & Brick, 1993), most of the time when adolescents drink, no one gets hurt and thus, there is a denial of injury. There is no identifiable “injury.” Adolescents may use the lack of obvious injury to decriminalize their drinking. Society also often affirms that the drinking adolescents do is acceptable by viewing it as simply part of “growing up.” Denying the fact that drinking is a delinquent act allows adolescents who drink to drift from being law-abiding to delinquent youth.

Along the same lines as denial of injury is the technique of denial of victim. Society does not see the drinking adolescent as a victim. Their drinking behavior is seen as simply part of the growing up process. Another way that this technique applies to adolescent drinking is with the behaviors that often accompany drinking, especially violent behaviors. An example of this would be a teenage girl being sexually victimized while under the influence and her peers viewing it as her fault because she put herself in a vulnerable situation. She, the victim, “had it coming” because she was drunk.

The fourth technique from Neutralization theory that allows adolescents to drift into delinquent behavior is “appeal to higher loyalties”. Adolescents are very influenced by their peers. Many studies have been done about the concept of peer pressure, especially as it relates to alcohol and drug use in adolescents. Appeal to higher loyalties is a similar concept. Neutralization theory, with this technique, would hold that adolescents drink because their peers drink and in order to be accepted, they need to behave the same as their peers. Adolescents see their illegal behavior, drinking underage, as acceptable because everyone else is doing it, too. Again, this rationalization allows



youth to drift between law-abiding behaviors and delinquent behaviors.

One of the techniques of Neutralization theory that did not seem to help explain adolescent drinking: condemnation of the condemners. Condemnation of the condemners does not seem to be useful in explaining adolescent drinking. This technique implies that adolescents engage in delinquent acts because no one else is moral, so why should they be. Most of the studies have indicated that adolescents do not view drinking as an immoral act, so this explanation does not seem to fit (Bradizza, Reifman & Barnes, 1999; O'Malley, Johnston, & Bachman, 1998; Thompson, 1989).

Although there are other theories that may also help to explain adolescent drinking, such as Cognitive Dissonance theory and Social Learning theory, Neutralization theory appeared to best explain the findings of this study.

#### Summary

This chapter provided an explanation of Neutralization theory. The application of the theory to adolescent alcohol use was also presented.

## CHAPTER FOUR

### Methodology

This research study used the hermeneutics method to identify and interpret common themes from the participants' experiences. The chapter begins with the research question addressed in the study, followed by some background material on hermeneutics. The chapter continues with a description of the research design, participants, and criteria for determining quality research. The data collection, data analysis, and the protection of human subjects follow. A summary of the methodology concludes the chapter.

### Research Question

The research question is: "What is the experience of using alcohol as an adolescent?" Information was obtained using an initial interview question followed by prompts that encouraged the participants to expand on their responses. The initial interview question and prompts can be found in Appendix A.

### Philosophical Background

As stated previously, this study utilized hermeneutics methodology. Hermeneutics is a type of qualitative research. This approach is centered on interpretation of a person's life by examining his/her personal experiences and personal history (Widera-Wysoczanska, 1999). The goal is not just to gain knowledge, but to gain an understanding and to uncover both similarities and differences in lived experiences (Benner, 1994).

According to Heidegger, hermeneutic phenomenology is a way to "uncover the meaning of being of human beings" (Plager, 1994, p.65). Hermeneutic methodology fills gaps in understanding that are often left by empirical research (Plager, 1994). While empirical research views the subject as separate from the world, Heidegger viewed the subject as part of a world of shared background and familiarity (Plager, 1994). It is this view of "human being-in-the world" that is utilized in hermeneutics (Plager, 1994).

The focus of hermeneutic interpretation is on understanding, not explaining. This

focus shows a respect for the cultural and social nature of being human (Benner, 1994). Hermeneutics attempts both to hear and to understand the experiences of the participants. It seeks to make clearer their world and openly states meanings, habits, skills, practices and concerns that have been taken for granted (Benner, 1994). Because of our familiarity with our own cultures and societies, we may lose sight of the importance of understanding these shared experiences (Plager, 1994). Describing these shared experiences enhances and expands one's understanding of human experience.

According to Heidegger, the researcher using hermeneutics methodology has a circular relationship with the experience studied. The researcher is engaged in the process with the participant and both are affected by the interaction. The researcher brings his/her own background and experiences with him/her. The background of the researcher must be made explicit so that any effect it may have on the interpretation is clear (Benner, 1994). The background of this researcher was discussed in Chapter One. The experience makes the researcher's preunderstanding, or fore-having, clear and challenges it (Benner, 1994).

According to Heidegger, it is the fore-having, or the background practices that the researcher brings with him/her, that makes interpretation possible (Benner, 1994). A principle of hermeneutics is that interpretation allows being to come to the foreground. Through interpretation, patterns emerge, and these patterns express the relationship of themes. This is the highest level of hermeneutic analysis (Fitzpatrick, 1997).

### Design

The hermeneutic method of interpretive phenomenology was utilized in this research study in order to explore common themes in the experiences of alcohol use during adolescence. The focus of this research study was on meaning rather than on measurement.

A semi-structured interview format was used in this study. The interview question that was asked and the prompts used are listed in Appendix A. The prompts

were used to assist the participants to expand on their stories. The interviews provided a great amount of detailed information regarding the participants' experiences. Through interpretation of these stories, a better understanding of the significance of these experiences for the individual can be gained, which can broaden options and understanding of others (Plager, 1994). It was my hope to capture shared meanings in the stories of the participants about their experience of alcohol use as teenagers, and to find out how their experiences may have changed them.

The interviews were audiotaped and then transcribed. The written transcriptions were then read and interpreted. The transcribed interviews allowed the content and the context of the interview to remain intact, which allowed me and the research team to see the whole and the parts simultaneously.

Once my advisor, the research team, and I interpreted the transcribed stories, the interpretations were sent to the participants for their input so they could confirm, expand on, and/or challenge the analyses. The participants clarified their experiences and gave additional information through written comments on the interpretations.

### Participants

This study sought to understand the experiences of three young adults with regard to their alcohol use as adolescents by eliciting detailed information from them. The requirements for participation were that the participants were between 18-25 years of age and had used alcohol in the past. The participants did not need to be abstaining from alcohol use presently. Referrals were sought through Augsburg College and the University of Minnesota- Twin Cities campus. Recruitment bulletin board notices were posted at both campuses. Notices were also given to classmates asking for referrals. A \$20 honorarium was given to the participants prior to the interview as compensation for their time. The first three eligible participants who contacted the researcher were designated as the participants and interviews were arranged at times and locations convenient to the participants.

### Criteria for Determining Quality Research

Interpretive research posits that “understanding is more powerful than explanation for prediction in the human sciences” (Benner, 1994, p. xv). It also holds that prediction is possible only in limited ways in the human sciences as human beings are self-defining. Benner (1994) also states that in hermeneutic research, the researcher’s views need to be extended, challenged, or turned around, or the quality of his/her research is questioned. Lincoln (1995) proposes emerging criteria for quality in interpretive research, since objectivity and other existing criteria for quantitative research do not apply. The criteria given by Lincoln (1995) are: (1) standards for judging quality in the inquiry community; (2) positionality; (3) community as arbiter of quality; (4) voice; (5) critical subjectivity; (6) reciprocity; (7) sacredness; and, (8) sharing the perquisites of privilege.

*Standards for judging quality in the inquiry community* applies to the formal research community: those who are submitting their research for publication. Because this research study is being done for the sole purpose of completing a Master’s of Social Work degree, this criterion has limited application to this study.

*Positionality* refers to the acknowledgment that texts are always incomplete, and can never represent any truth other than a truth with the same characteristics (Lincoln, 1995). This criterion also recognizes that the location, or position, of the researcher must be stated in order for the text to be authentic (Lincoln, 1995). The position of this researcher was discussed in Chapter One. My personal experience with alcohol dependence was described in order to disclose my position. I recognize that the texts and interpretations from this study cannot be generalized to other similar individuals or groups.

*Community as arbiter of quality* recognizes that research takes place in a community and the knowledge gained from the research should first and foremost benefit the community from which it is derived (Lincoln, 1995). This research study serves the community of adolescents who use alcohol as well as the professionals who work with

them. The written interpretations were given back to the participants so they could correct any misinterpretations.

*Voice* refers to the researcher's responsibility to speak for those who may be silenced without dominating their stories. According to Lincoln (1995), it is equally important for interpretive research to give a voice to those who are silenced as it is to seek to change the conditions that silence them. By actively listening to the stories of the participants and by using excerpts from the texts in this study, I have provided a platform for the participants to speak in their own words.

*Critical subjectivity* is "the ability to enter an altered state of consciousness...for the purpose of understanding with great discrimination subtle differences in the personal and psychological states of others" (Lincoln, 1995, p. 283). Without this understanding, it is nearly impossible for the researcher to understand his/her own psychological and emotional transformations that take place as a result of his/her involvement with the study (Lincoln, 1995). Prior to beginning each interview, I explained where my interest in the topic for this study came from. The similarities between the experiences of the participants and my own experience were enlightening.

*Reciprocity* is central to interpretive research. It refers to the relationship between the participants and the researcher, because that relationship becomes part of the study. The participants act as co-researchers, providing the essential information needed to conduct the study. Without collaboration between the participants and the researcher, this study could not have been done.

*Sacredness* refers to that quality which emerges through the interaction between the researcher and the participant. It is the quality that emerges when the researcher maintains the awareness that this is a joint process and it is dependent upon trust and mutual respect, as well as a deep concern for human dignity (Lincoln, 1995). The participants shared personal information about their experiences with me. I truly appreciate that, and I have respect for the ways in which they have integrated the lessons

they learned from their experiences into their lives.

*Sharing the perquisites of privilege* is the final of Lincoln's (1995) criteria. It involves the researcher acknowledging the debt they owe the participants for their involvement, and the acknowledgment that the researcher frequently reaps benefits and recognition that are often not shared with the participant. I will share my interpretations with the participants. I hope the readers of this study will gain a deeper understanding of how alcohol use impacts adolescents, and possible ways to combat the effects.

#### Data Collection

The first three eligible young adults who responded by contacting me were designated as the study participants. A mutually agreeable time and place to meet was established between each participant and myself. Prior to beginning the interview, the consent forms were reviewed with the participant and signed. The participants also consented to the audiotaping of the interview for the purpose of transcription. A copy of the release form can be found in Appendix B.

Data collection was done through 60-90 minute interviews. The interviews were minimally structured to allow the participants to tell their stories in their own language, so that their stories could be examined in depth to uncover the similarities and differences.

Because of equipment failure, the third participant was interviewed twice. She received the \$20 honorarium for each interview.

#### Data Analysis

The transcribed interviews were read by me, my thesis advisor, and the research team to identify dominant themes. Discussion of these themes between my thesis advisor and me took place. Reviewing the identified themes in this manner helped to reduce the chance of including interpretations that were not supported by the text. A concern, according to Heidegger, is that interpretations can lose their context and temporality, which can cause a shift from truth to untruth. It is therefore important for the researcher

to take steps to prevent biasing the interpretation away from the participants' experiences and toward the researcher's (Plager, 1994).

Each transcript was analyzed using the seven-step analysis process presented by Widera-Wysoczanska (1999) in her study of everyday awareness of death. The steps are as follows:

Step one: Open-minded reading of the transcripts. The transcripts were read and reread several times with the researcher making a conscious effort to maintain an open mind. This allowed the researcher to become immersed in the experiences of the participants and to gain an understanding of the events they described.

Step two: Looking for themes. Important themes were marked in each transcript during additional readings.

Step three: Discovering key words. The researcher read the texts again and marked key words and phrases that appeared essential for understanding the participants' experiences.

Step four: Looking for unity of meanings. This involved lifting the key words and phrases that were marked in each text for further analysis and comparing them for similarities and differences.

Step five: Creating units of meaning. The identified themes and words were grouped with similar words and ideas from within the same transcript. This allowed for further analysis by placing them in a new context, which also allowed for additional similarities and discrepancies to emerge.

Step six: Forming a personal picture of the experience. I combined the units of meaning from the previous step that expressed identified themes in order to formulate a picture of what was shared in the experiences of the participants.

Step seven: Forming a personal model of the experience. Main themes were combined and the researcher prepared a final interpretation from all the identified themes across all the texts. Excerpts from the texts were then sought that supported the



interpretation. When the final interpretation was written, it was given to each participant for her feedback, and I made appropriate changes.

#### Protection of Human Subjects

The Augsburg College Institutional Review Board (IRB Approval number 2001-10-1) approved this study (Appendix D). Participation in this study was completely voluntary. The participants signed consent forms before the interview process began (Appendix C). The consent form included permission for the audiotaping of the interview and the utilization of direct quotes in the thesis. Participants could withdraw their consent at any time. I informed them of potential risks involved in the research, such as experiencing difficult emotions as a result of discussing the experiences. A list of resources was given that included numbers for counseling and support services. I told the participants that the information they shared would be kept confidential, but not anonymous because of the small sample size. The interviews were audiotaped to ensure accuracy. I had the interviews transcribed and had all identifying information removed or altered from the texts. Pseudonyms were assigned to each participant and were used in the findings and discussion chapter. The audiotapes and other identifying materials are kept in a locked file cabinet in my home and will be destroyed by January 1, 2002. The participants were informed that the transcripts would be shared with my thesis advisor and research team.

#### Summary

This chapter outlined and discussed the methodology that was used in this study. The research question, interview question, design, participants, data collection, and data analysis were included. The philosophical background of the methodology was also presented. Protection of human subjects was addressed. The next chapter presents the results and discusses the findings of the study.

## CHAPTER FIVE

### Findings and Discussion

#### Overview

According to the three participants in this study, the experience of alcohol use as an adolescent is meaningful and influences you even into adulthood. This research study explored the lived experience of three adult women whose lives were influenced by alcohol use during their adolescence. The experience of drinking as an adolescent is unique for each person and affects each individual differently. However, people who share the common experience of drinking as an adolescent may also share similar meanings of this experience. The focus of this study was to identify and describe these similar meanings.

Because each individual's experiences are unique, the interpretation offered in this study is only one of many ways of viewing the experience of alcohol use as a teenager. The participants will continue to interpret and learn from their experiences as they continue to age and mature as adults. The women who participated in this study gave multiple examples of ways in which they and their behavior changed, with respect to alcohol use. It is this *maturing* process that emerged as a dominant theme in this research. In this chapter, I will explore two contributing factors to this process of maturing: being influenced by peers and taking risks.

#### Maturing

All three participants spoke about how when they were younger they drank more heavily than they do now. They described their adolescent drinking behavior as "drinking to get drunk"; now when they drink, it is not to get drunk. All three participants attributed this change in their alcohol use to aging and maturing. Johnstone, Leino, Ager, Ferrer, and Fillmore (1995) found that frequency of drinking is likely to decrease as people age beyond 20.

Kathy, a 24-year-old woman, talked about how her drinking behavior changed as she got older:

I was more responsible...I would drink like at home...I wouldn't even drink that much. I didn't [go to bars to drink] when I was 19 and 20...I would go to a friend's house and drink. We would just sit down and play games and drink. Rather than like when I was 11 and 12. [Then] everyone was smoking marijuana and we would just sit and drink and do nothing and we would just get totally drunk.

Kathy's drinking changed around the time she was 19. She stated that she became a more responsible drinker. She no longer drank to get drunk as she did when she was 11 and 12. Because of her life experiences and aging, she moved along the continuum toward more responsible drinking behavior.

For Jenny, also a 24-year-old woman, the passage of time and her experiences, as elements of maturing, contributed to the changes in her drinking behavior:

I think it was just my experiences through the years, watching people die, watching people be destructive toward themselves, that made me realize that, my god... you're on a one-way road to death when you're drinking like that and making the decisions that you do when you're drinking heavily. And over the years, I think this is true of everybody, that over the years, you start to think more of long-term and short-term.

Jenny described some of the experiences that influenced her to change her drinking patterns. Watching people die and behave destructively awakened her understanding of long-term consequences. As with Kathy, the life experiences that Jenny had impacted her thinking about alcohol use. As she matured, she realized that drinking heavily is dangerous. She acknowledged that the decisions she made in late adolescence will have an effect the rest of her life:

When you start your freshman year [in college] you don't think, oh, my drinking experiences my freshman year are going to impact the rest of my life. But really they do because you develop morals and values your freshman year regarding alcohol. You make a decision whether to drink as a minor or to abstain. You make that, you consciously make that decision whether you want to admit it or not... You can't make a decision whether or not to drink and not think that it's not going to affect the rest of your life... I've had such a horrible experience with alcohol that I know that I will never participate in heavy drinking ever again.

In reflecting back on her earlier experiences with alcohol, Jenny came to the realization that heavy drinking and its consequences are detrimental. She no longer considers it an acceptable or fun behavior. Her experience is reflected in the literature, which shows that inactive drinkers are likely to view drinking behavior as harmful (McDermott, Clark-Alexander, Westhoff, & Eaton, 1999). Jenny's cessation of heavy drinking led her to the conclusion that the consequences that stemmed from heavy drinking were undesirable. She described a maturing process in which she drifted away from heavy drinking behavior. Neutralization theory asserts that as the pressures of the adult world exert themselves, adolescents are more likely to drift into normative behaviors (Siegel & Sienna, 1981). Jenny's drinking behavior shifted from excessive to socially acceptable.

Though not as dramatic, Michelle, a 20-year-old woman, also experienced a shift in her drinking behavior as she got older. She described this change:

So high school was really irresponsible, when you get drunk drunk, and now that we were in college, we were drinking to get a buzz, not to get drunk. We want to remember this as a good time and whatever else and a feel good drunk. But I drink to feel good, that's what I mean.

Michelle states that in high school, she drank to get very drunk, but in college her drinking behavior changed and she drank to “feel good.” Similar to Jenny, Michelle’s alcohol use moved from excessive to more socially acceptable. Michelle does not state that she will never participate in heavy drinking ever again as Jenny did, but acknowledges that her alcohol use in high school was irresponsible. Perhaps the difference in the extent of “drift” on the continuum between Michelle and Jenny’s drinking behavior is due to their age difference (Siegel & Senna, 1981). Michelle is four years younger than Jenny, so perhaps the pressures of adulthood have not fully emerged in Michelle’s life.

#### Being Influenced by Peers

Adolescent alcohol use occurs most often in a peer context (Donohew, Hoyle, Clayton, Skinner, Colon & Rice, 1999). The narratives of these participants demonstrate that peers have a strong influence on their drinking. It is generally acknowledged that adolescence is a difficult time in life. Many adolescents struggle to find a place where they fit in, which is why the peer influence is so great. Patterson (1982) asserted that adolescents tend to drift into peer groups that participate in risky behaviors such as drinking because of a lack of attachment to their families.

Kathy characterized her mother as abusive and stated that her mother was unaware when Kathy came home drunk. In order to escape the abuse, she would run away to a friend’s house, where she drank. Studies have found that adolescents and young adults often drink as a way of coping with stress and negative affect (Scheier & Botvin, 1997). Kathy described how she started drinking:

It seemed like everyone was doing [it] or getting drunk or smok[ing] and I just started hanging around them ‘cause I was just so scared to get into that scene, but I didn’t really have any other friends who did anything else, so that’s how it was.

Kathy described not wanting to get involved in “that scene,” but not being able to find other friends who were not using alcohol. Perhaps it was the conflict at home that pushed her toward involvement with this peer group (Patterson, 1982). Once Kathy entered that peer group, she felt pressure to use alcohol. She said very matter-of-factly that “that’s how it was,” so it may have been clear that she needed to behave the same way they did in order to be accepted by them and be part of the group. Adolescents are more likely to adhere to the standards of their peer group than those of society because the rewards and punishments are much more immediate. This is the *appeal to higher loyalties* technique (Siegel & Senna, 1981).

Reid, Martinson and Weaver (1987) found that peer use is the strongest predictor of adolescent drug use. During adolescence, peer groups are a source of gratification, entertainment, and status-validation (Biddle, et al., 1980). It is important to behave the same way as peers in order to fit in with the group. Therefore, just as involvement with peers who use alcohol influences adolescents to drink, involvement with peers who do not drink has an impact on adolescent alcohol use (Fillmore, Golding, Leino, Motoyoshi, Shoemaker, Terry, Ager, & Ferrer, 1993).

Michelle, a 20-year-old woman, described how changing peer groups altered her drinking behavior:

So I started to hang out with different friends and they weren’t really into that [drinking] and I kind of took a break from it for about a year maybe. For about a year I didn’t really drink at all.

Changing her group of friends changed Michelle’s drinking behavior. Michelle’s behavior mirrored that of the group.

Jenny explained how peer influence similarly affected her drinking behaviors:

That was our trip to New Orleans for band tour. That was when I got a different flavor for drinking. Because with Janice it was always the club atmosphere, a lot of drinking, a lot of smoking, you know? And it was always

music and dancing. With my friends in the band it was always, when we would drink, we would just sit around and talk and watch movies and you didn't have to drink. And with Janice, if she was drinking, you had to be drinking. And if she was drunk, you had to be drunk. She couldn't be drunk alone.

Jenny's experiences with her friends in band gave her a "different flavor for drinking." Like Michelle's experience, Jenny's drinking behavior was dependent on the drinking behavior of her peer group. For both Michelle and Jenny the choice of peer group directed the drift on the delinquency continuum (Matza, 1964; Siegel & Senna, 1981).

### Taking Risks

Alcohol use often leads to risk-taking behaviors and the narratives of these participants revealed that this was true for them as well. Being under the influence of alcohol enhances adolescents' tendency to engage in risky behaviors (Richter, et al., 1993). Three categories of risky behaviors emerged from the participants' stories and these same categories appear in the literature: sexual risk taking, physical risk taking and violence, and drinking and driving. Richter et al. (1993) found a significant correlation between risky sexual behavior and alcohol use. Dukarm, Byrd, Auinger and Weitzman (1996) found a correlation between alcohol use and an increased involvement in physical fighting. Adolescent drinking is also often linked with drinking and driving behavior (Copeland, Shope, & Waller, 1996).

### Sexual Risk Taking

Studies have revealed that sexual risk taking and alcohol use often co-occur (Dermen, Cooper, & Agocha, 1998; Poulson, Eppler, Satterwhite, Wuensch, & Bass, 1998; Richter, et al., 1993). Adolescents who drink more alcohol and drink frequently have been found to have a higher number of sexual partners than adolescents who either do not drink, or drink less and less frequently (Poulson, et al., 1998). Studies have also

indicated that early alcohol and drug use is related to earlier initiation of sexual activity (Staton, et al., 1999).

Jenny related an experience in which she took a sexual risk because of alcohol:

I was drunk and I totally threw myself at him and it [is] so embarrassing now to look back on that because, you know, this guy had had a crush on me for all these years, well, for a year and a half. And then I threw myself at him. I can't believe I did that. I know I wouldn't have done that if I wasn't drinking.

Jenny engaged in behavior that she would not have, had she not been drinking. In this instance, her behavior did not lead to a regretful sexual encounter. Jenny, nonetheless, regrets her forward behavior. This is consistent with studies that show a majority of adolescents report having made decisions under the influence of alcohol that they later regretted (Poulson, et al., 1998). In some cases, alcohol may serve to disinhibit youth, allowing them to behave out of character. These behaviors can lead to a change in their social status among peers, and along with this status change may come new expectations that reinforce future alcohol use (Scheier, et al., 1996).

Michelle described her experience with this change in status due to alcohol use:

I had quite the reputation in high school...yeah, [be]cause I don't know, at parties or whatever word got out that I was this and I was that and after awhile some football players would ask: 'Let's do this' or 'let's do that' and 'you're really gorgeous, let's do that.' So I acquired quite the reputation just because of a few parties. So I put the blame on alcohol and got wild.

Michelle talked about gaining a reputation because of her risky behavior at a "few parties." She stated that she blamed alcohol for her behavior. By blaming her behavior on her drinking, she denied any personal responsibility and therefore was able to continue with the behavior (Siegel & Sienna, 1981). Some studies have found that people who believe that alcohol use promotes risky sexual behavior are more likely to engage in sexual risk taking while drinking than those who do not hold that belief (Dermen, et al.,



1998). Michelle stated that she “always say[s] liquor is a natural aphrodisiac,” so perhaps it was this belief that led her to engage in risky sexual behavior in high school.

Along with the correlation to sexual risk-taking behavior, alcohol use has also been linked to an increased risk for sexual victimization (Clark, Lesnick, & Hegedus, 1997). Among adolescents, higher levels of alcohol use have been found to be associated with sexual abuse (Clark, et al., 1997). Two of the participants spoke about experiences with sexual victimization.

Kathy recounted an experience in which she was sexually victimized:

I was drinking one time and I passed out and woke up and this guy was really all over me and trying to kiss me and take advantage of me...[we were] at a party and there was people everywhere and we were just rolling around on the floor. I blacked out. I don't know how I ended up on the floor or how I ended up in his arms, but I know some of the guys would, like, take our heads and put them in their lap or...they'd have their clothes on, but they would like rub our heads [and] make sexual gestures.

This experience of sexual victimization did not take place in isolation. Kathy stated that there were “people everywhere” while she was being assaulted. The fact that this assault took place in front of a group without interference supports the finding in the literature that the use of alcohol and sexual activity go together. The behavior of the peer group demonstrated that they accepted the belief that drinking leads to sex (Dermen, et al., 1998). Kathy went on to explain that this was not the only time that someone in her peer group was sexually harmed while under the influence of alcohol. She stated that she “heard a rumor” she is not sure is true about one of her friends being raped while she was passed out after drinking too much. Kathy admitted that although she is not sure it is true, “that’s something that could happen, that’s for sure.” It is obvious that Kathy recognized a connection between alcohol and sexual risk taking.

Michelle described a similar personal experience: "I know a few of my friends, as well as myself, we'd, we were taken advantage of quite a few times. And yeah, um, I was actually raped one night." Obviously shaken, Michelle recalled the rape:

I fell asleep and I woke up at 5:00 and still drunk, with some guy on top of me. I was kind of disoriented, like what's going on and I kind of thought it was a dream at first and um, I sat up and I'm okay. I know where I'm at. I got my bearings and he's still on top of me. I'm like, 'what are you doing?' He said, 'Just lay there down and be quiet.' I'm like, 'Wait, what are you doing?' And he puts his hand over my mouth and at this point I'm not only pissed, I'm scared and frustrated and scared and scared and scared. So I get up and I hit him and I get up and pull my pants up and I leave and I'm still drunk...I had to work at six so I went home and took the longest shower I've ever taken in my life.

One study found that incarcerated rapists who used alcohol prior to committing their crimes held a belief that drinking leads to increased sexual risk taking. The beliefs of those offenders were stronger than the beliefs of the offenders who did not drink prior to committing rape (Dermen, et al., 1998). In this instance, described by Michelle, the perpetrator had been drinking. The research indicates that his use of alcohol may have disinhibited him enough to allow him to commit this crime. Following the assault, Michelle told a friend who had also been at that party that she had been raped, and was told that it could not have happened. She was told that she must have misunderstood what happened because of how much she had to drink. Perhaps Michelle's peer group did not view her as a victim because of her use of alcohol that night. They may have believed that she "had it coming" because she was so drunk (Siegel & Senna, 1981). Like Kathy's peer group, Michelle's friends clearly held the belief that alcohol use and sex co-occur (Dermen, et al, 1998).

Regardless of what label she gave the experience, it obviously had a lasting impact on her. After talking about a friend of hers who was also raped, she explained how the rapes affected her:

So, yeah, there was a lot of that going on. So, after that, it's like your self-esteem just kind of plummets...After awhile you just kind of permit it, I guess. It's like they'll take advantage up to a certain point and you're like, okay, whatever. So after the rape happened, I was just like whatever...not much worse is going to happen now, so go ahead.

Michelle described how her self-esteem suffered after she was raped and because of that, she loosened her boundaries around sexual activities. In her eyes, it no longer mattered because nothing worse could happen. This lowering of her self-esteem may have contributed to continued alcohol use because youth with low self-esteem are at greater risk for alcohol abuse than youth with high self-esteem (Finke & Bowman, 1997; Thompson, 1989; Wasson & Anderson, 1995). Enhanced self-esteem has been found to better enable adolescents to set boundaries around sexual activity (Richter, et al., 1993). Perhaps it was low self-esteem that prevented Kathy from keeping the boundaries she once felt were necessary.

The experiences of these three women illustrate what the literature has found: alcohol contributes to risky sexual behavior and increases sexual vulnerability. Staton et al. (1999) indicated that earlier use of alcohol correlates with earlier engagement in sexual activity. Two of the three participants had the experience of becoming sexually active at an early age because of their alcohol use. These same two participants also experienced a sexual violation in conjunction with their alcohol use.

#### Physical Risk Taking and Violence

Research has shown that the greatest risks to adolescent health are the risky behaviors in which they participate. Among these risky behaviors are both substance abuse and violence (Resnick, et al., 1997). Adolescent alcohol use is linked to aggressive

behavior and physical risk taking (Richter, et al., 1993). The significance of this is that homicides, unintentional injuries, and suicides cause more than 75% of adolescent deaths (Resnick, et al., 1997). The introduction of alcohol may increase the likelihood that adolescents will sustain injuries (Richter, et al., 1993).

All three of the participants described experiences in which physical injury and/or violence occurred. Their experiences ranged from minor injuries to death. Kathy sustained a minor injury one night while drinking:

I was at my friend's house and some of my close girlfriends were up the road. There's a park and you have to go up a steep stairwell to get to their house and um someone said: "Oh, they're fighting, they're fighting." Someone drove their car over there...so I started running and I ran up these stairs and I hurt my ankle...And I woke up and my ankle was just swollen and my mom is like: "You're going to the emergency room." I couldn't walk...I couldn't even feel the pain [the night before]. It just hurt and it was like swollen and black and blue and the next day I woke up and it hurt really bad.

Research indicates that substance abusers are at an increased risk for injury (Miller, Lestina, & Smith, 2001). Kathy's intoxication led her to behave in a way in which she not only injured herself, but also was unaware of the extent of the injury. This inability to pay attention to her injury may have put her at risk for greater injury. Had she not been drinking, she may have sought medical attention sooner, minimizing the damage to herself.

Although Kathy might have broken her ankle running up stairs even if she had not been drinking, she may have exacerbated the injury because her intoxication prevented her from attending to it. Often, adolescents choose to engage in risky behaviors when they are under the influence in which they would not otherwise participate (Donohew, et al., 1999; Donovan & Jessor, 1978; Poulson, et al., 1998). These behaviors often lead to injuries.

Michelle described some of the behaviors her peers engaged in when they were under the influence of alcohol:

It was more or less my friends who did the crazy stuff. They played a little knife game...It was always when they were drunk, too, 'cause it was really stupid. And they'd have sissy wars where you'd burn yourself with a cigarette and see who could hold it on the longest...We played chicken in the car. Just stupid, stupid stuff.

Michelle gave details about some of the "games" that her friends would engage in while under the influence that they would not have done if they had not been drinking. She described a game with a knife and a game in which the participants burned themselves, obviously causing injury. The literature has documented that these types of high-risk behaviors and sensation seeking have been correlated to alcohol use (Donohew, et al., 1999; Martin, Milich, Martin, Hartung, & Haigler, 1997). Michelle did not specify whether the friends who played these games were male or female, but she did state that her male friends did "stupid stuff like jumping out of second floor windows" and breaking into people's houses. This also bears out what the literature has found about males being more likely than females to engage in risky behaviors when under the influence of alcohol (Martin, et al., 1997).

In addition to self-harming behaviors, alcohol use has also been correlated with physical fighting and aggression (Dukarm, et al., 1996; Quigley & Marlatt, 1996; Scott, Schafer, & Greenfield, 1999; White, et al., 1993). One study found that almost 17% of adolescents who drank indicated that they had been involved in a physical fight after consuming alcohol (Quigley & Marlatt, 1996). This data was supported by the experiences of all three participants. Kathy stated that the night she broke her ankle there was a big fight.

Jenny related an experience in which she felt she had to step in to prevent a fight:

He had lost his temper with Janice yet again. Many, many times he had lost his temper with her and he was so drunk that he wasn't thinking and he threw a kitchen chair through the front door of my apartment...I took control of the situation...because he gets so aggressive when he is drinking that I imagine, I imagined just the worst. That he goes back to his dorm room and beats up his roommate or...God forbid beat up Janice and injure her.

Jenny did not know whether or not her friend would lose his temper, but she was aware that it was a possibility; she had seen him lose his temper before. Jenny stated that her friend "gets so aggressive when he is drinking." The literature on aggression and alcohol use supports Jenny's fear that her friend may react violently when provoked because of his intoxication (Parker & Auerhahn, 1998; Scott, Schafer, & Greenfield, 1999). Jenny also described a time when her friend was "so drunk that he wasn't thinking," which implies a denial of responsibility due to his state of intoxication.

When there is no intervention, the combination of alcohol and aggression can lead to physical fighting (White, et al., 1993). Michelle described a time when this occurred:

There was a few fights that I know of where my friends actually got involved... My friend Vicky broke up with this guy and he's absolutely looney. He's psychotic, a psychotic boy...[She] started hanging around these guys in [her] apartment [building]. Not necessarily dating, just a group of friends going out. No big deal. Well, he got word of this and he came over one night at like two o'clock in the morning, drove over, he and his friends, drove over when they were drunk. He should not have been driving at all. He should have not. He was well over the legal limit. Well over. Couldn't even walk straight...he came over and he started beating up these guys, you know, that my friends were hanging out with at the time...He knocked [Vicky] out

and the cops came and they were arrested and they were charged with assault and battery and they got tagged with DUIs and everything.

Michelle told about an incident in which alcohol contributed to a physical altercation. The experience of Michelle's friends is supported by the findings in the literature that alcohol "plays a significant role in physical assault perpetration and victimization" (Scott, et al., 1999, p. 539). Studies have indicated that there is a strong correlation between alcohol use and aggression (Dukarm, et al., 1996; Scott, et al., 1999; White, et al., 1993). It is important to note that although studies indicate that there is a correlation between the two, it is not a causal relationship; alcohol use does not necessarily cause aggressive or violent behavior (White, et al., 1993). This causal link is negated by other findings that demonstrate that aggressive adolescent males behave aggressively even in the absence of alcohol (White, et al., 1993). Based on these findings, it may be that alcohol use disinhibits aggressive adolescent males, making them more susceptible to provocation. Based on Michelle's description of her friend as psychotic it could be asserted that he had aggressive tendencies prior to the introduction of alcohol. It may have been his use of alcohol that led him to engage in the level of violence he did that night.

The experiences of the three participants bear out what the literature has found about the correlation among alcohol, injury and aggression. Both the literature and the participants' experiences demonstrate that there is a range of behaviors that are physically risky or violent that often accompany the use of alcohol. These behaviors range from individual injury to interpersonal violence to drinking and driving. Although all these behaviors hold potential for harm, driving while intoxicated may present the greatest potential.

### Drinking and Driving

Adolescents often engage in drinking and driving behavior (Copeland, Shope, & Waller, 1996). One study found that one out of three high school seniors reported driving

after drinking at least once within the past six months (Copeland, et al., 1996). By engaging in this behavior adolescents put themselves, their peers, and others at risk for serious harm. All three participants talked about drinking and driving.

Kathy stated that when her friends were intoxicated they sometimes came to visit her in stolen cars. Michelle explained that she had a cousin who was killed by a drunk driver and that her behavior was influenced by his death. She did not drink and drive. Jenny had a similar experience, losing two close friends in drunk driving accidents. Jenny's behavior was also affected by her friends' death. She, however, "made the mistake of driving drunk" and described how she felt about this:

I was drunker than a skunk...and I drove us. I couldn't believe it, I drove us to the hockey party...I remember just being sick the whole time driving there and then once we got to the party I got sick and I didn't drink again [that night]. So...by the time we came home I was sober, but I think I got sick just because I made myself sick. You know, just thinking I cannot believe I'm behind the wheel of this car, driving 65 miles per hour, with ten lives in my hands.

Despite Jenny's intense reaction to driving drunk herself, she stated that she continued to ride with others who were under the influence of alcohol, suggesting that there was a denial of injury. Research suggests that close to 30% of adolescents report driving after drinking, and many report that they rode with friends who had been drinking (Copeland, et al., 1996). The experiences of Michelle and Jenny support these findings. Their personal experiences with alcohol-related driving deaths are also paralleled in the literature, which indicates that adolescents and young adults constitute only 15% of licensed drivers in the United States, yet they represent almost 30% of drinking and driving fatalities (Campbell, Zobeck, & Bertolucci, 1995).

#### Relationship Between Neutralization Theory and Maturing

Studies indicate that most young adults who drink heavily appear to "mature out" of their abusive drinking patterns as they age (Quigley & Marlatt, 1996). Neutralization



theory also holds that as people age, they tend to “drift” on the continuum toward more socially acceptable behaviors (Siegel & Senna, 1981). It is not as easy for an adult to deny responsibility for his or her actions or to state that “everyone was doing it.”

Society’s expectations change rapidly once one becomes a legal adult, which means 21 years of age where alcohol is concerned. What were once seen as innocent pranks can become serious problems when carried out as an adult. The three participants in this study described this process of maturing, during which they were influenced by their peers to drink and to be engaged in risk-taking behaviors.

Each participant had a pivotal point in her experience that altered her drinking behavior. For Kathy, it was a life changing experience: she became a mom as a teenager. This major role change forced her to behave more responsibly because she suddenly had adult responsibilities. Because of these new responsibilities, her drinking behavior “drifted” to a more socially acceptable level (Siegel & Senna, 1981). She could no longer “neutralize” her beliefs about drinking alcohol (Matza, 1964; Siegel & Senna, 1981). Kathy stated that she still drinks, but does not drink as often or as much as she did when she was a young adolescent. She appears to have moved along the neutralization continuum from delinquency to “normal” drinking behavior (Siegel & Senna, 1981).

Michelle’s turning point came when she realized that she was physically addicted to alcohol. She described the experience when friends intervened:

Finally it was like, what am I doing? I mean my friends actually sat me down and said “We’re going to go somewhere and we’re going to have fun and we’re not going to drink and you can have cigarettes if you want to.” And I was like, okay, cool, good. I’ll smoke a few cigarettes. We went out and I got the shakes because I didn’t have a drink. I was scared. I didn’t want to go to treatment because I didn’t want my parents to know that I had a drinking problem.

Michelle did not realize how severe her drinking behavior had become until her friends pointed it out to her. She stated that this realization scared her and she was afraid of her parents finding out she had a drinking problem. This fear prompted her to change her drinking behavior. Michelle's friends were concerned about her drinking, so it is safe to say that they were not drinking as much or as often as she was. This allowed Michelle to change her drinking behavior while maintaining the loyalties of her peer group (Siegel & Senna, 1981). She could not, however, continue to rationalize her alcohol use by denying that she was injuring herself (Siegel & Senna, 1981). She felt the physical effects of her drinking.

Michelle still drinks frequently, but does not get drunk as often as she did when she was a teenager. She states that she is a more responsible drinker now and she drinks to feel good. Michelle has progressed some from where she was as a young adolescent, however, out of the three participants in this study she appears to have moved the least on the continuum. Perhaps the fact that Michelle has not reached the legal drinking age yet helps account for her lack of advancement in the maturing process.

Jenny's turning point came when she turned 21 years old. She described how her attitude toward drinking changed:

Because after I turned 21, drinking didn't seem to have the spark that it had. It became something that I could do and the consequences were mine. They weren't, I don't know. Like when you were underage, it felt like you were just a child breaking a law, so your consequences weren't as extreme as they were when you were an adult. Like when you're an adult having a hangover means I was irresponsible the night before, but when I was a teenager, having a hangover meant I had fun the night before.

Jenny stated that once she turned 21 years old and could drink legally, drinking suddenly had significant consequences attached to it. The literature supports Jenny's change in attitude, stating that adolescents are often insulated from many of the consequences that

adults face when drinking, including social and work related consequences (Scheier & Botvin, 1997). Neutralization theory also supports this change in behavior stating that once the pressures of adulthood are placed upon an individual, they are likely to “drift” back toward socially acceptable behaviors. Their neutralization techniques no longer work, so they stop engaging in delinquent behaviors (Siegel & Senna, 1981). This change in attitude also shifted Jenny’s perception of what the consequences related to drinking are. She explained what she came to see as the main consequence of drinking:

From my eyes, when I think of the consequences of drinking, the consequence is death. Yeah. Death being number one. That’s the number one consequence that I think of because having a hangover, having a headache, throwing up, that’s not a consequence. That’s an experience, you know. Death is the number one consequence of drinking.

Part of the maturing process for Jenny involved reframing the consequences of drinking. What once were consequences she now saw as simply experiences, and death was now seen as the main consequence of drinking.

Jenny seems to have progressed the farthest along the neutralization continuum. Both her age and her life experiences have contributed to this growth. She states that she rarely drinks now, and if she does she has a beer or two. Jenny has seen the severe consequences that can accompany heavy drinking and this knowledge along with age have helped her to mature and changed her attitude about alcohol use. What cemented Jenny’s change in attitude was the intense experience of living with her roommate who continued to be a heavy drinker:

I would wake Janice up off the living room floor and guide her to bed. That just became so emotionally overwhelming. Trying to pick her up every morning. Checking her pulse. No one should have to check their roommate’s pulse.

### Summary

This chapter explored and discussed the experiences of three adult women who drank as adolescents. One theme, *Maturing*, was presented and illustrated with excerpts from the participants' narratives. Literature from the field of adolescents and alcohol use was used to expand and support the findings.

## CHAPTER SIX

### Implications

#### Overview

This chapter will discuss the contributions of this study. Implications for social work practice and policy, as well as recommendations for further research will be offered.

#### Contributions of Study

The majority of research done on adolescent alcohol use has been quantitative in nature, and this study offers a qualitative exploration of experiences. Previous research has focused on factors contributing to the use of alcohol by adolescents, but little has been done beyond that. This qualitative study moves from contributing factors to examining the actual experiences of using alcohol as an adolescent.

Using the hermeneutic method, this study provides a deeper understanding of what drinking as a teenager is like from an adult perspective. As Jenny pointed out, using alcohol as an adolescent is a choice and that choice, once made, begins a process. This process is revealed through the use of the participants' words and supporting literature. The experiences that occur along the way encourage a process of maturing. This study examined in depth the factors that contributed to this maturation process.

Due to society's condemnation of underage drinking, the type of in-depth information that the participants gave about their experiences is often not discussed. Aside from the sharing of "war stories" with peers, the lived experiences are kept to oneself. This study allowed these three women to reflect back on their experiences and to openly talk about how alcohol use changed their lives.

This study went further than asking, "What caused you to drink as a teenager?" and asked, "What did drinking as a teenager mean to you?" "How did it change your

experience?" The answers to these questions tell the stories of these three participants. This type of rich information has been absent in the literature until now.

### Implications for Social Work Practice and Policy

The most important lesson that social workers must learn is to listen to their clients and to never assume that they completely understand the experiences of their clients. Nelson (2000) describes how hermeneutics reinforces this lesson.

The gift of the hermeneutic method for interpretive research is in the lesson it teaches for the practice of social work. As a practitioner, I cannot perceive what the human beings I work with perceive. What I can do is try to understand how others are in their worlds and how they perceive the broader culture to which we both belong.

Although my experience was similar to those of the participants, I will never completely understand their experiences. The circular process of interpretation made it clear to me that even when one thinks he/she understands, he/she might not. The human experience is complex and unique for each individual. Allowing the client to tell his/her story and working continuously to hear what he or she is saying without assuming you understand is of the utmost importance in social work. This study reinforced that belief.

Previous research and this study indicate that many adolescents are choosing to drink. This shows that current prevention efforts are not working. Certainly it appears that a change in prevention techniques is warranted. Perhaps instead of trying to convince teenagers not to drink, efforts could be made to teach them how to drink more responsibly. Similar to sex education classes that were implemented when research showed that teens were continuing to have sex despite prevention efforts, classes that promote abstinence from alcohol but openly discuss the reality and the risks could be implemented in schools.

Understanding that the choice of whether or not to drink as a teenager holds implications that stretch far beyond adolescence challenges social workers who work

with children, adolescents, and young adults to remain open to discussion around this topic. Statistics demonstrate that despite prevention efforts a majority of teenagers will choose to at least experiment with alcohol; this study shows that this choice affects the person for the rest of their lives. By being aware of this and also being open to discussion about the choice to drink, social workers may be able to help adolescents see the impact their decisions may have on their lives and the lives of others. Professionals also need to be educated about the relationship among Neutralization theory, alcohol use, and maturing.

#### Limitations and Implications for Further Research

The main limitation of this study is the small number of participants. The nature of the hermeneutic method does not allow for great generalizability. It does, however, provide one interpretation of a lived experience that others with similar experiences may relate to. A second limitation is the lack of diversity of the participants. All three of the participants were Caucasian. A third limitation is that all of the participants were female, so the findings are not generalizable to males. All of the participants were from Minnesota and lived in the Twin Cities area, which further limits the generalizability of the study as well.

There is a further limitation to this study. Individuals inclined to participate in a study of this type may tend to be further along in the maturation process than the drinking population at large. The inclination to assist in the study indicates a recognition that problems with drinking do exist, a recognition that not all potential subjects have made.

The fact that one of the participants was not 21 years old at the time of the study bears mentioning again as it is sure to have an impact on the participants progress in the maturing process.

Most of these limitations could be addressed with further research. Further research with young adults who drank as adolescents that included participants from a broader diversity of cultural backgrounds could provide further understanding of this

experience. Research with a larger number of participants would also increase the richness of the data collected. Perhaps research with teenagers who currently use alcohol could also add to the depth of understanding. Research with adult males would provide a deeper understanding of their adolescent experiences with alcohol and how it differs from the experiences of females. Finally, a study that included participants from different geographical areas could also add to the field of research on this topic.

#### Summary

This chapter presented the contributions of this study. Recommendations for social work policy and practice were provided. The limitations of this study and suggestions for areas of further research were also discussed.



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APPENDIX A  
INTERVIEW QUESTIONS  
To be asked by the researcher

Initial Question:

1. Tell me what your experience is with alcohol use as a teenager.

Prompts:

1. What stands out for you?
2. What does this mean to you?
3. Tell me more about what that was like.
4. For instance?
5. Can you give me an example?
6. Can you clarify that?

APPENDIX B  
RECRUITMENT SCRIPT

Hello, my name is Stacy Swenson. I am currently in my final year of a Masters in Social Work program at Augsburg College. As part of our program requirements, we must work on a thesis, or research paper, in an area of interest to us. I have chosen to interview young adults about their experience of alcohol use during adolescence. I am interested in hearing about the experiences of young adults who drank as adolescents.

The process entails a 60-minute in-person interview in which I would ask you a few questions. I would like to audiotape the interview for transcription purposes. To ensure confidentiality, the audiotapes and my notes would be destroyed when I have finished my study and paper. You will also be asked to read through the interpretation of your interview for accuracy.

Participation in this study is completely voluntary. If you would like to participate, you will receive an honorarium, total value \$20.00, before the interview begins. I will also accommodate you to the best of my ability, by meeting you at the time and location of your choice. Possible indirect benefits include helping to improve the understanding of the researcher and social work practitioners about your experience. You may also benefit by reflecting on these events and sharing your experience on how alcohol use has impacted your self-esteem.

If you are interested in participating, please contact me directly at (612) 330-1565. Please leave your name, phone number, and the best time to reach you. Prior to this interview I would be happy to answer any questions you may have and explain this process in more detail.

Thank you for your consideration,

Stacy Swenson



## APPENDIX C

## CONSENT FORM

A Study of Young Adult Alcohol Use  
and Its Effect on Self-Esteem

*You are invited to participate in my research study designed to look at the experience of using alcohol during adolescence. We ask that you read this form and ask any questions you have before agreeing to be involved in this study. Your participation is completely voluntary. This research study is being conducted by Stacy Swenson in partial fulfillment of the Master of Social Work thesis requirement at Augsburg College.*

What will happen during the study?

The study consists of one audiotaped interview lasting approximately 60 minutes. I will conduct the interview. You will be asked to relate stories about your experience with alcohol use and how it impacted your self-esteem, if at all. After the interview is complete, I will have the tapes transcribed. I will read through the transcriptions and write an interpretation. I will then contact you once again and ask that you read over my interpretations of your interview. Changes may be made to the written interpretation to reflect your comments.

Are there any risks?

It is possible that through the discussion and recollection of your story, painful or uncomfortable memories or thoughts could occur. If at any point during the interview you feel too uncomfortable to continue, you may stop the interview without consequence. After the interview, the following 24-hour counseling referrals are available at your own cost should the need arise.

Hennepin County/Minneapolis Area:

*Crisis Intervention Center* (612) 347-3161

Ramsey County/St. Paul Area:

*Regions Hospital* (651) 221-8922

Seven County Metro Area:

*Crisis Connection* (612) 379-6363

Are there any benefits?

It is possible that you could experience an enhanced sense of well being or satisfaction as a result of telling your story. Also, participants will receive an honorarium worth \$20.00 before the interview begins.

When and where will the interview be done?

The interview will be scheduled at a time and place that are convenient to you. Interviews will be done in person.

Who will have access to the interview material?

The audiotaped interviews will be transcribed by a trained transcriptionist. The trained transcriptionist will be required to sign a confidentiality form to ensure your privacy. Any identifying information from the interview, including your name, will be removed or altered on the written transcript. The transcripts will be shared with the researcher's thesis advisor during the process of writing the thesis and several members of the research team who will be reading, interpreting and reflecting on the transcripts. All information is confidential. However, the researcher cannot guarantee anonymity due to the small sample size, but I will make every effort to maintain anonymity. Transcripts will be identified with numbered codes only, and no names or identifiable information will be used in this study. Raw data including the audiotapes will be destroyed no later than August 31, 2001.

What if you change your mind?

You are free to withdraw from this study or refuse permission for the use of your interview or transcript at any time and the \$20.00 honorarium will be yours to keep. Your decision whether or not to participate will not affect your current or future relationship with Augsburg College.

Before you sign this form, please ask any questions on aspects of the study that are unclear. I will attempt to answer any questions you may have prior to, during, or following the study. If I am unable to answer any of your questions to your satisfaction, you may also call my thesis advisor, Maria Dinis at (612) 330-1704.

Authorization:

I, \_\_\_\_\_, have read this consent form and decided to participate in the research project described above. My signature indicates that I give permission for information I provide during the interview to be used for a thesis research project. I will be given a copy of this form for my records.

\_\_\_\_\_  
Signature of Participant

\_\_\_\_\_  
Date

How would you like me to contact you to verify my interpretation of your experience?

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

In addition:

- 1) I consent to be audiotaped.

\_\_\_\_\_  
Signature of Participant

\_\_\_\_\_  
Date

- 2) I consent to the use of direct quotes from my interview.

\_\_\_\_\_  
Signature of Participant

\_\_\_\_\_  
Date

If you have any questions or concerns you may reach me at:

Stacy Swenson  
Augsburg College- MSW Student  
Phone: (612)330-1565

Or if you need further information, you may contact my thesis advisor:

Maria Dinis  
C/o Augsburg College  
Business Phone: (612)330-1704

APPENDIX D

IRB APPROVAL LETTER

AUGSBURG

C • O • L • L • E • G • E

Memo

To: Stacy Swenson

From: Sharon K. Patten, Ph.D., IRB Co-Chair  
Phone: 612-330-1723

*SKP*

Re: IRB Application

Date: 7 February 2001

Thank you for your response to IRB issues and concerns. Your study, "A Hermeneutic Study of the Effects of Alcohol Use on the Self-esteem of Young Adults," is approved: your IRB approval number is 2001-10-1. Please use this number on all official correspondence and written materials relative to your study.

Your research should prove valuable and provide important insight into an issue in social work practice. We wish you every success.

SKP:ka

cc: Dr. Maria Dinis, Thesis Advisor

