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BRIEF REPORT:

The association of puberty and young adolescent alcohol use: Do parents have a

moderating role?

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ABSTRACT

- Purpose To explore the extent to which parent-adolescent emotional closeness, family conflict, and parental permissiveness moderates the association of puberty and alcohol use in adolescents (aged 10-14).
- Methods
 Cross-sectional survey of 7631 adolescents from 231 Australian schools.
 Measures included pubertal status, recent (30 day) alcohol use, parentadolescent emotional closeness, family conflict, parental permissiveness of alcohol use and peer alcohol use. The analysis was based on a two-level (individuals nested within schools) logistic regression model, with main effects entered first, and interaction terms added second.
- Results The interaction of family factors and pubertal stage did not improve the fit of the model, so a main effects model of family factors and pubertal stage was adopted. There were significant main effects for pubertal stage with boys in middle puberty at increased odds of alcohol use, and girls in advanced puberty at increased odds of alcohol use.
- Conclusions Puberty and family factors were strong predictors of adolescent alcohol use, but family factors did not account for variation in the association of pubertal stage and alcohol use.

KEY WORDS: adolescent, alcohol, puberty, family, parents, permissiveness, family relationships.

1.0 INTRODUCTION

Alcohol use and misuse increases during early adolescence (10-14 years of age) (Kelly et al., 2011b), and adolescents who are advanced in their pubertal development may be ill-prepared for contextual influences on alcohol use (Hummel, Shelton, Heron, Moore, & van den Bree, 2013). Early pubertal development predicts substance use (Kelly et al., 2012), and effects are independent of age (Kaltiala-Heino, Koivisto, Marttunen, & Fröjd, 2011). Relatively little research has focused on early adolescents, when alcohol use often emerges, and pubertal development begins.

Parents have an important protective role in reducing alcohol-related risks (Kelly, et al., 2011b). Key protective factors include communication of clear rules about alcohol non-use (Habib et al., 2010; Simons- Morton, 2004), providing a safe and secure emotional environment (Choquet, Hassler, Morin, Falissard, & Chau, 2008; Luyckx et al., 2011), and effectively managing family distress (Chan, Kelly, & Toumbourou, 2013; Kelly et al., 2011c). Based on Contextual Amplification Theory (Ge, Brody, Conger, Simons, & Murry, 2002) parenting may amplify existing risks of pubertal development on alcohol use.

Research on the interplay of parenting, pubertal development, and alcohol use is comparatively rare (Hummel, et al., 2013). Prior research has focused on negative family factors such as lax supervision, harsh/inconsistent parenting, family violence (Costello, Sung, Worthman, & Angold, 2007), and positive factors, such as warmth, love, and caring behaviors (Shelton & van den Bree, 2010). These studies indicate that when family relationship quality is low, the risk of alcohol use is elevated for early maturing girls but not boys (Costello, et al., 2007; Shelton & van den Bree, 2010). Other research shows that family factors may hasten pubertal development (Belsky et al., 2007; Ellis, 2004; Ellis &

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Essex, 2007; Ellis & Garber, 2000; Moffitt, Caspi, Belsky, & Silva, 1992), and externalizing behaviours (Ellis et al., 2003; Ge, et al., 2002).

This study examined the extent to which positive and negative dimensions of family relationships moderated the association of pubertal development and alcohol use. This is important to evaluate, because different studies show each to be significantly related to alcohol use in early maturing girls, yet these dimensions are obliquely related, and there are gender differences in how alcohol use develops in response to family problems (Chan, et al., 2013; Kelly, et al., 2011b). We examined these associations in a large sample of young adolescents (10-14 years of age), given the importance of this age period in the development of alcohol use and the significant role of parents in this developmental period relative to later periods (Bray, Adams, Getz, & Baer, 2001). Controls included age, parental substance use, involvement in peer drinking networks, and school-level variance in alcohol use. Following Costello, et al. (2007) and Shelton and van den Bree (2010), we hypothesized that family factors would moderate the association of pubertal stage with alcohol use, with this effect most pronounced for girls.

2.0 METHODS

2.1 Participants

Participants were students who participated in the Healthy Neighbourhoods Study (2006). The survey involved 7866 students (10-14 years old) from 231 schools located in 30 communities across three States in Australia (N = 7866). Surveys were administered in school classrooms (Jacka et al., 2010). Communities were selected by random stratification according to socioeconomic disadvantage (Australian Bureau of Statistics, 2009). Within each community, primary (n=164) and secondary schools (n=82) were invited to participate, 83% schools (n=443) responded, and 52% of schools agreed to participate. Students only

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participated if signed parent consent was obtained (67%), and 92% of students who returned permission forms consented to participation. The survey was web-based and completed at school (paper copies available if needed). The research was approved by an Institutional Research Ethics Committee.

Of the full sample, 152 participants were excluded because of low self-report reliability (see 2.2), 41 were excluded due to missing values for alcohol consumption, 22 who did not report their age, and 515 who did not respond to puberty items. The final analysis sample consisted of 7136 adolescents (91% of the consented sample, 47% male, modal age 12). Compared to those meeting inclusion criteria, excluded participants were more likely to be male ($\chi^2 = 5.55$, p < .05).

2.2 MEASURES

Measures were based primarily on the *Communities That Care Youth Survey* (Arthur, Hawkins, Pollard, Catalano, & Baglioni, 2002; Glaser, Van Horn, Arthur, Hawkins, & Catalano, 2005).

Recent Alcohol Use was measured using the item "In the past 30 days have you had more than just a few sips of an alcoholic beverage (like beer, wine or spirits)?" (0 '*No*', 1 '*1-2 times*', 2 '*3-5 times*', 3 '*6-9 times*', 4 '*10 or more times*'). Scores were collapsed to create a binary variable (any alcohol use, yes/no).

Pubertal Development was measured using a modified self-report version of the Pubertal Development Scale (PDS) (Petersen, Crockett, Richards, & Boxer, 1988) which has been validated for Australian school use (Bond et al., 2006). Both males and females completed 3 items about their height, body hair growth and skin changes on a 4-point scale (0 '*has not started yet*', 1 '*has barely started*', 2 '*has definitely started*', 3 '*seems complete*'). Males and

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females completed two other gender-specific item (males; "Have you begun to grow hair on your face?" and "Have you noticed a deepening of your voice?" females; "Have you noticed that your breasts have begun to grow?" and "Have you begun to menstruate (started to have your period)?"). Summed scores were used to capture overall pubertal development for males/females ($\alpha = .74/.75$ respectively). Based on summed scores, participants were categorised according to Tanner Stage (Patton et al., 2004; Tanner & Whitehouse, 1976). Only 6% of the participants were in Tanner Stage I (start of physical maturation) and only 1% of participants were in Tanner Stage V (completion of physical maturation). Therefore, Tanner Stages were collapsed into *initial puberty* (Stage I/II, 34% of the sample), *middle puberty* (Stage III, 38%) and *advanced puberty* (Stage IV/V, 28%) (Patton, et al., 2004).

Parent- child emotional closeness was measured separately for mothers and fathers with three items (e.g., "Do you feel very close to your mother/father?", 1-4 point scale, $\alpha = .80/.82$ for mothers/fathers). *Family Conflict* was measured with three items (e.g., "people in my family often insult and yell at each other", 1-4 point scale, $\alpha = .79$). *Parental permissiveness* was measured separately for beer/wine and spirits (e.g. 'How wrong do your parents feel it would be for you to drink beer or wine/spirits regularly (at least once or twice a month)?" (1 '*Not wrong at all'*, 2 **A little bit wrong'*, 3 *'Wrong'*, 4 *'Very wrong'*, $\alpha = .85$). *Involvement in peer drinking networks* was assessed with the question "How many of your best friends have tried alcohol (like beer, wine or spirits) when their parents didn't know about it?" (0-4). Scores were collapsed to a binary variable (0/1+) (Kelly, et al., 2012; Kelly et al., 2011a). *Parental alcohol use* was measured separately for mother and father, "Does your mother/father drink alcohol?" (0 *'Never'* to 3 *'Every day'*). *Parental education* was measured with the items 'What is your mother/father's highest level of education?' (1 'Didn't complete high school', 2 'Completed high school', 3 'Has a degree from a university'). Adolescents were excluded

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if they reported low self-report reliability by endorsing the question "I was not honest at all" (about completing the survey) or the use of a fictitious drug.

2.3 ANALYSIS PLAN

Statistical analyses were performed with STATA 11 (StataCorp., 2009). The main statistical design was a 2-level logistic regression model (individuals nested within schools), with random effect estimations for school, and recent alcohol use (present/absent) as the dependent variable. The influence of *pubertal stage* was measured separately for each gender. Power analyses were estimated using G*Power 3 (Faul, Erdfelder, Buchner, & Lang, 2009). To detect OR = 1.2 at 80% power, a sample of 961 is required, so the present sample was easily sufficient. In a stepped approach, main effects were entered into the models first followed by key interactions simultaneously. Best fit of main effect versus interaction models was determined using Likelihood-ratio tests.

3.0 RESULTS

3.1 Preliminary analyses

A higher proportion of boys had consumed alcohol (p < .001), and as expected, alcohol use was related to advanced pubertal stages (p < .001) (see Table 1). There were lower levels of emotional closeness, higher levels of family conflict, and more parent permissiveness of alcohol use in adolescents who had consumed alcohol compared to those who had not (ps <.001). There were comparable numbers of boys and girls in *middle* puberty, but most boys (52%) were at the *initial* stage. A larger proportion of girls were in the *advanced* stage of puberty (40% compared to 12% for boys).

[INSERT TABLE 1 ABOUT HERE]

3.2 Main Analyses

Main effects for pubertal development, family factors, and controls were first entered into main effect models, then puberty-family interactions were entered. Gender effects were modelled separately given established findings in the area (Hummel et al., 2013). For boys, the main effects models indicated that recent alcohol use was significantly associated with *Middle* puberty (relative to *initial* puberty, p < .05), family conflict (p < .001), and parental permissiveness (p<.001). For girls, recent alcohol use was significantly associated with Advanced puberty (relative to *initial* puberty, p < .01), family conflict (p < .001), and parental permissiveness (p < .001). In both models, these effects were independent of controls, including peer alcohol use (p < .001), and mothers/fathers alcohol use (everyday alcohol use relative to none, p < .001 to p < .05). Low emotional closeness to parents was not associated with alcohol use in either model. When interactions for the three family variables and pubertal stage were added to each main effects model, Likelihood ratio tests indicated that interaction terms did not improve model fit for males ($\chi^2 = 7.08, p = .53$) or females (χ^2 =14.56, p=.07). Because model fit was not improved, further analysis of interaction terms was inappropriate, and the main effects model was retained as the model of best fit (see Table 2)

[INSERT TABLE 2 ABOUT HERE]

4.0 DISCUSSION

The present study is unique in that it assessed the simultaneous contribution of both positive and negative dimensions of family relationship quality on alcohol use. Contrary to our hypothesis, and despite having sufficient statistical power, it was found that family factors did not moderate the association of pubertal stage with alcohol use. Pubertal status, parental

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permissiveness, and family conflict were significant independent associates of alcohol use, but these effects were independent of each other. Consistent with our hypotheses, advanced pubertal status was associated with alcohol use in girls but not boys.

The null result for puberty – family interactions appeared at variance with two key studies in this area, where puberty-related effects were noted for lax supervision (a variable related to the present variable 'parental permissiveness'), and positive family relationship quality (a variable similar to parent-adolescent emotional closeness) (Costello, et al., 2007; Shelton & van den Bree, 2010). While a host of cross-study methodological differences are likely to be relevant, perhaps the most likely reason for the variation in findings relates to a focus on pubertal timing in earlier research versus pubertal status in the present study. We did not evaluate effects for pubertal timing, in part because the cross-sectional design precluded assessment of when pubertal stages were reached. It remains possible that pubertal timing might have accounted for the present finding in relation to pubertal stage and timing on adolescent alcohol use is an area for further research.

The present study has implications for prevention of alcohol-related risks during adolescence. Girls with more advanced pubertal status may be at elevated risk of alcohol use compared to boys, pointing to the value of monitoring involvement of girls with older peer groups where drinking cultures are established. The statistical independence of family factors and pubertal status points to the value of family-oriented prevention and addressing contextual risks in both early and late pubertal stages. Because the design was cross-sectional, causal inferences are inappropriate. Active parental consent may have biased the sample towards those with fewer problems (Kelly & Halford, 2007). Findings may not generalize to children whose pubertal status advances before age 10, or who are substantially delayed in their

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pubertal development. The study relied on adolescent self-report data only. Recent alcohol use (30 days) was the primary outcome measure and results may not have captured alcohol use during other time periods. The present study demonstrates that parental effects and pubertal development independently account for recent alcohol use in both boys and girls.

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Table 1.

Descriptive statistics and univariate analyses of alcohol use split by gender.

Descriptive statistics and univariate analyses of alcohol use split by gender.						
	Males			Females	0	
	Last 30 days alcohol use (%)		χ^{2}	Last 30 days alcohol use (%)		γ^2
						<i>70</i>
	No	Yes		No	Yes	
	(<i>n</i> = 2432)	(<i>n</i> = 751)		(<i>n</i> = 3319)	(n = 634)	
Pubertal Stages				\sim		
Initial puberty	1347 (82%)	295 (18%)	66.45***	722 (92%)	64 (8%)	191.82***
Middle puberty	839 (72%)	326 (28%)		1414 (90%)	158 (10%)	
Advanced puberty	246 (65%)	130 (35%)		1183 (74%)	412 (26%)	
	Mean (SD)	Mean (SD)	t tests	Mean (SD)	Mean (SD)	t tests
Low closeness to mother	1.50 (.55)	1.68 (.64)	-7.60***	1.43 (.56)	1.70 (.75)	-9.99***
Low closeness to father	1.57 (.63)	1.75 (.71)	-6.51***	1.70 (.70)	2.00 (.82)	-9.24***
Family conflict	2.11 (.82)	2.35 (.81)	-7.05***	2.06 (.82)	2.46 (.85)	-11.03***
Parental permissiveness	1.31 (.62)	1.91 (.88)	-20.93***	1.29 (.61)	1.97 (.87)	-23.76***
Age	11.55 (.02)	11.77 (.03)	-6.71***	11.46 (.01)	11.89 (.03)	-12.43***
Controls	Last 30 days	alcohol use	χ^{2}	Last 30 days	alcohol use	χ^{2}
	(%)			(%)		
	No	Yes		No	Yes	
	(<i>n</i> = 2432)	(<i>n</i> = 751)		(<i>n</i> = 3319)	(n = 634)	
Peer alcohol use						
Yes	537 (56%)	425 (44%)	324.80***	668 (61%)	420 (39%)	565.47***
No	1882 (85%)	332 (15%)		2630 (93%)	212 (7%)	
Mother's alcohol use						
Never	726 (89%)	89 (11%)	150.95***	841 (92%)	77 (8%)	95.53***

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Occasionally	1502 (75%)	513 (25%)		2151 (83%)	436 (17%)	
Most Days	159 (59%)	110 (41%)		259 (75%)	85 (25%)	
Everyday	31 (48%)	34 (52%)		52 (60%)	34 (40%)	
Father's alcohol use				4	8	
Never	414 (89%)	49 (11%)	131.44***	540 (94%)	37 (6%)	106.34***
Occasionally	1453 (79%)	387 (21%)		2045 (85%)	352 (15%)	
Most Days	412 (66%)	217 (34%)		522 (76%)	169 (24%)	
Everyday	115 (58%)	85 (43%)		145 (71%)	60 (29%)	

*p < .05, **p < .01, ***p < .001. *Notes*. For males, alcohol was negatively associated with mothers' and fathers' education respectively (χ^2 = 18.90, p < .001; χ^2 = 18.78, p < .001). State, *n.s.* For females, alcohol was negatively associated with mothers' and fathers' education respectively ($\chi^2 = 11.23$, p = .01; $\chi^2 = 21.00$, p < .001). Participants in Victoria had higher rates of alcohol use than the other two States (χ^2 = 27.41, p <.001). A CERTER MANUS

Table 2.

Adjusted odds ratio estimates of last 30 days alcohol use.

Adjusted odds ratio estimates of last 30 days alcohol use.				K	
	Males (n	= 2797)	Females (r	n = 3435)	
Main effects	ORs	95% CIs	ORs	95% CIs	
Pubertal Stages (ref: initial stages)			² O		
Middle stage	1.28*	(1.03-1.61)	1.13	(.78- 1.63)	
Advanced stages	1.34	(.96- 1.86)	1.78**	(1.22-2.58)	
Family conflict (Std)	1.22***	(1.09- 1.35)	1.27***	(1.13- 1.43)	
Low emotional closeness to mother (Std)	1.06	(.93- 1.20)	1.02	(.91-1.15)	
Low emotional closeness to father (Std)	1.05	(.92-1.19)	1.07	(.96-1.20)	
Parental permissiveness	1.70***	(1.55- 1.87)	1.81***	(1.65- 1.99)	
Controls					
Age	1.00	(.86- 1.17)	1.04	(.86- 1.25)	
Involvement with peer drinkers	2.91***	(2.35-3.59)	4.46***	(3.52-5.64)	
Mother's drinking (Ref: never)	2				
Occasionally	2.19***	(1.61-2.97)	1.28	(.92-1.79)	
Most Days	2.78***	(1.81-4.28)	1.52	(.96-2.42)	
Everyday	2.42*	(1.14- 5.12)	2.65**	(1.30- 5.41)	
Father's drinking (Ref: never)					
Occasionally	1.57*	(1.04-2.36)	2.30**	(1.43-3.70)	
Most Days	2.09**	(1.34-3.28)	2.71***	(1.62-4.54)	

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Everyday	2.91***	(1.68- 5.05)	2.32** (1.23-4.37)
	Estimate	SE	Estimate SE
School level variance	.21	.11	.24 .12

p* < .05, *p* < .01, ****p* < .001. *Notes.* For males, mother's education, *n.s.*, father's education, *n.s.*, and state of residence, *n.s.* For

females, mother's education, *n.s.*, father's education, *n.s.*, but state of residence less in QLD compared to VIC (p < .01).

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AUTHOR DISCLOSURE STATEMENTS

Statement 1: Role of Funding Sources

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Statement 2: Contributors

Li is a PhD student under the supervision of the second and fourth authors. Chan assisted Li in the initial data analysis. Li and Kelly wrote the first draft of the manuscript and all authors contributed to and have approved the final manuscript.

Statement 3: Conflict of Interest

All authors declare that they have no conflicts of interest.

Statement 4: Acknowledgements (optional)

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Puberty and young adolescent alcohol use: What role do parents have in moderating this association? Journal of Addictive Behaviors.

Research Highlights

- Highlights the role of family functioning on adolescent alcohol use in the context of varying degrees of pubertal development
- Examines both positive and negative dimensions of family functioning in very early adolescents
- Accounts for school level clustering effects in a large sample of 7631 Australian school students

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