

Does “Being Connected” Reduce the Risk of Teenage Drinking, Smoking and Drug Use? Survey Results from Southeast Asia

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In many Asian societies, the shift from traditional agriculture toward an industrial, export-based economy has brought about dramatic changes in the lives of young people. Prolonged schooling, employment opportunities outside the home, and delayed marriage have created a population of “young singles” unheard-of a few decades ago.

Increasingly urban, educated, affluent, and exposed to mass media, will young people in Southeast Asia experience similar health and behavioral problems as their counterparts in the West? The question is particularly important today because the recent shift from high to low fertility has produced a temporary, but significant “youth bulge” in the region. Between 1970 and 1990, the population age 15–24 in Southeast Asia rose from 43 to 72 million. This age group is projected to increase to 92 million by 2025.

This issue of *Asia-Pacific Population & Policy* discusses factors that may influence teenage drinking, smoking, and drug use, based on youth surveys in Thailand and the Philippines. Adolescents and young adults are assuming increasing importance in both of these countries. Between 1970 and 1990, the population age 15–24 grew from 7 to 12 million in Thailand and from 8 to 12 million in the Philippines.

ABOUT THE SURVEYS

In response to increasing concern about adolescent risk-taking behavior in Asia, the East-West Center is coordinating a project to analyze and compare results from youth surveys in Nepal, Indonesia, Thailand, the Philippines, Hong Kong, and Taiwan. Initiated in 1998, the Asian Young Adult Reproductive Risk (AYARR) project is supported by the United States Agency for International Development (USAID). This issue of *Asia-Pacific Population & Policy* uses data from two of the surveys in the network.

The Family and Youth Survey in Thailand interviewed a national sample of 1,087 men and 1,092 women age 15–24. The Institute for Population and Social Research, Mahidol University, conducted the survey in 1994, with financial support from the United Nations Population Fund (UNFPA).

The second Young Adult Fertility and Sexuality Study (YAFS-II) in the Philippines interviewed a national sample of 5,266 men and 5,612 women age 15–24. YAFS-II was the first nationally representative survey of youth in the Philippines that covered both men and women. The University of the Philippines Population Institute conducted YAFS-II in 1994 with a

Table 1 Percent of boys and girls age 15–19 who report various indicators of “connectedness” with their families and communities: Thailand and the Philippines

Indicator of “connectedness”	Thailand		Philippines	
	Male	Female	Male	Female
Has always lived in parental home	81	74	86	76
Was raised by two parents ^a	84	82	86	83
Has never been out of school	57	55	61	65
Plans to go to college	48	48	46	53
Strongly religious	52	35	49	65

^aIn Thailand, the survey question was “When you were 10 years old, who were the people living in the same household with you?”

network of nine regional research centers throughout the country. The project was supported by UNFPA. The East-West Center collaborated in the survey, with support from USAID.

ARE TEENAGERS CONNECTED TO THEIR COMMUNITIES?

Several studies in the United States and Europe have shown a relationship between teenage risk-taking behavior and indicators of “connectedness” with the community. Young people who live with their parents, who stay in school, and who participate in religious activities are generally less likely than other teenagers to smoke, drink, or take drugs.

The 1994 surveys conducted in Thailand and the Philippines provide an opportunity to learn whether “connectedness” also plays a role in adolescent risk behavior in these countries. In this analysis, we measure “connectedness” to family by two variables derived from the surveys—whether teenagers have ever lived away from their parental home and whether they were raised by two parents (Table 1). “Connectedness” to school is measured by whether teenagers have ever been out of school and whether they plan to go to college.

A third measure of “connectedness” included in the surveys is degree of religiosity. Young people who describe themselves as strongly religious are likely to participate in services and

thus feel connected to a religious community.

The proportions of teenagers who have never lived away from their parental home and who were raised by both parents are similar in the Philippines and in Thailand. Teenagers in Thailand are slightly more likely to have been out of school at some point in their lives than are teenagers in the Philippines. Filipino girls are particularly likely to plan on a college education. Girls are more likely than boys to be strongly religious in the Philippines, while boys are more likely to be strongly religious in Thailand.

HOW MANY TEENAGERS DRINK, SMOKE, OR USE DRUGS?

Patterns of drinking, smoking, and drug use are similar in Thailand and the Philippines (Table 2). In both countries, drinking is much more common than smoking. Drug use is much less common than drinking or smoking, but it is not negligible, particularly considering that it is likely to be underreported in these surveys.

It is interesting to compare these findings on drinking, smoking, and drug use with results from the 1999 Youth Risk Behavior Surveillance coordinated by the Center for Disease Control and Prevention in the United States. Among American high-school students (grades 9–12), 50 percent had drunk alcohol in the 30 days before the survey, 33 percent had used tobacco, 27 percent had used marijuana, and 4 percent had used cocaine. In the U.S., boys are only slightly more likely than girls to drink, smoke, or use drugs, while in the two Asian countries discussed here, boys are much more likely than girls to engage in these risk behaviors.

A comparison of the proportions currently drinking, smoking, or using drugs in Thailand and the Philippines

Table 2 Percent of boys and girls age 15–19 who have ever tried drinking, smoking, or drugs and who currently drink, smoke, or use drugs: Thailand and the Philippines

Risk behavior	Thailand		Philippines	
	Male	Female	Male	Female
Ever tried				
Drinking	69	41	61	29
Smoking	49	9	48	12
Drugs	15	3	6	1
Current use				
Drinking	43	16	47	12
Smoking	33	2	28	3
Drugs	6	1	2	0

with the proportions who have ever tried these behaviors suggests that boys who try are much more likely than girls to continue. Among boys, there also tends to be a strong correlation between different types of risk behavior. More than one-half of all the boys who drink also smoke or use drugs. By contrast, most girls who drink only drink. Eighty-six percent of boys who smoke in the Philippines and 73 percent of boys who smoke in Thailand also drink or use drugs. Virtually no young people—boys or girls—use drugs without also smoking or drinking.

Boys generally begin drinking and smoking at younger ages than girls. In the Philippines, 11 percent of boys began drinking and 12 percent began smoking by age 15. Only 4 percent of girls began drinking and 3 percent began smoking at such an early age. Again in the Philippines, 1 percent of boys began using drugs by age 15. By contrast, the proportion of girls who use drugs does not reach 1 percent until age 20.

at ages 15–19. With two countries, two genders, two indicators of “connectedness,” and three risk behaviors, the analysis includes 24 possible effects. Eight are statistically significant. In each case, teenagers who are less connected to their families are more likely than other young people to initiate one of the three risk behaviors.

The strongest effect of family “connectedness” is on drug use among girls in the Philippines. Filipino girls who were not raised by two parents are more than twice as likely as other Filipino girls to begin using drugs at ages 15–19.

Other results from YAFS-II in the Philippines underscore the importance of the attitude of parents toward adolescent risk-taking behavior. Teenagers who report that their parents disapprove of drinking or smoking are much less likely than other young people to drink or smoke.

In general, the effects of schooling on risk behavior are not as strong as

the effects of family (Figure 2). Again, there are 24 possible effects of a lack of “connectedness” to school on risk behavior. Six of these possible effects are statistically significant. In each case, young people who are less connected to school are more likely than others to engage in risk behavior.

Once more, the strongest effect is on drug use. Thai girls who have ever been out of school are four times as likely to begin using drugs as other Thai girls. Thai boys who do not plan to go to college are nearly twice as likely to begin using drugs as other Thai boys.

The analysis includes only one indicator of religiosity, so there are 12 possible effects of religiosity on adolescent health risk. Five are statistically significant. In each case, teenagers who are not strongly religious are more likely than others to engage in risk behavior (Figure 3). The strongest effect of religiosity is for drug use among boys in the Philippines.

IS THERE A RELATIONSHIP BETWEEN “CONNECTEDNESS” AND RISK BEHAVIOR?

We use multivariate analyses to estimate the net effects of the measures of “connectedness” listed in Table 1 on the age-specific probability that a young person will start to smoke, drink, or use drugs at ages 15–19. We estimate these effects using logistic regression models and controlling for rural/urban residence, age, father’s education, mother’s education, and the young person’s marital status. The results show strong, but not universal, correlations between measures of “connectedness” and drinking, smoking, and drug use.

Figure 1 shows the effects of a lack of “connectedness” to family on the likelihood that a young person will begin drinking, smoking, or using drugs

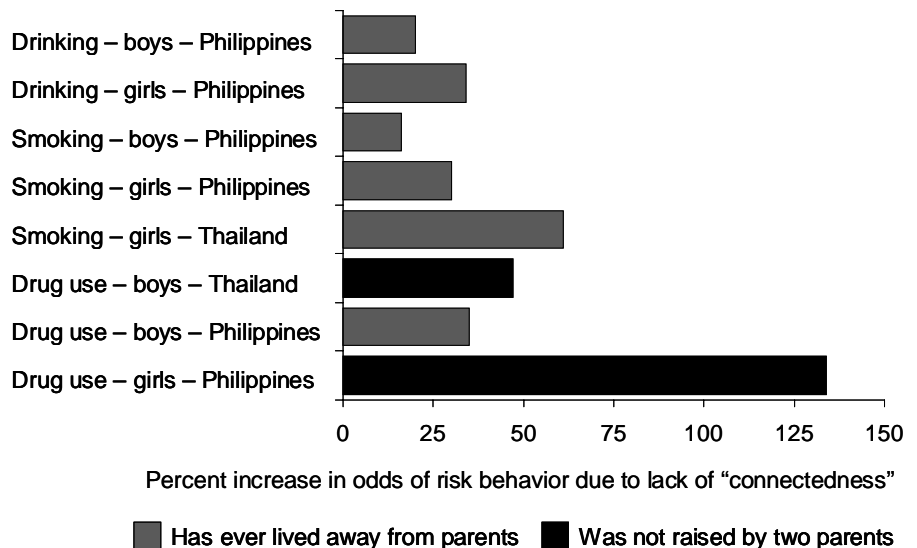


Figure 1 Net effects of lack of “connectedness” to family on the odds of starting to smoke, drink, or use drugs at ages 15–19, Philippines and Thailand

Notes: “Connectedness” to family is assessed in terms of whether a teenager has ever lived away from the parental home and whether he or she was raised by two parents. The figure only shows effects that are statistically significant. Effects are measured in terms of percent increase in the odds of starting a risk behavior due to a lack of “connectedness.” The odds are defined as $p/(1-p)$, where p is the annual probability of initiating a risk behavior.

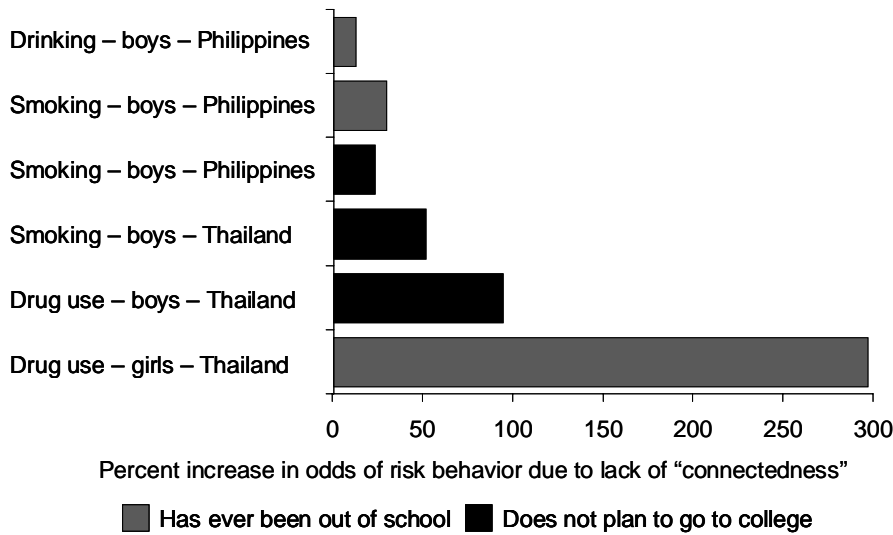


Figure 2 Net effects of lack of “connectedness” to school on the odds of starting to smoke, drink, or use drugs at ages 15–19, Philippines and Thailand

Notes: “Connectedness” to school is assessed in terms of whether a teenager has ever been out of school and whether he or she plans to go to college. For other notes, see Figure 1.

POLICY IMPLICATIONS

These findings on adolescent drinking, smoking, and drug use in two countries of Southeast Asia are generally consistent with patterns observed in the United States and Europe. They suggest that young people who feel strongly “con-

nected” to their communities are less likely than others to engage in risk-taking behavior. Factors such as living with parents, staying in school, having plans for college, and being strongly religious are associated with low use of alcohol, cigarettes, and illegal drugs.

The importance of teenagers’ closeness to their parents and their respon-

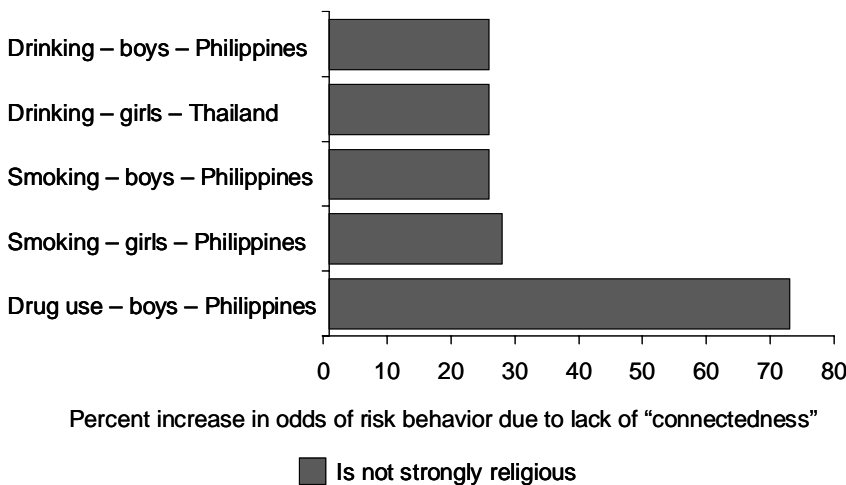


Figure 3 Net effects of not being strongly religious on the odds of starting to smoke, drink, or use drugs at ages 15–19, Philippines and Thailand

Notes: See Figure 1.

siveness to parental attitudes suggest that efforts to prevent teen drinking, smoking, and drug use should enlist the participation of parents. The clear effects of school enrollment also suggest that teenagers may be influenced by teachers and classmates to avoid these types of risk behavior.

These survey results suggest that teenagers who do not live with their parents and do not attend school are at a particularly high risk of drinking, smoking, or using drugs. Programs targeting such young people should include efforts to make them feel more “connected” to the community, possibly through neighborhood clubs or young persons’ groups at the workplace. Programs that feature adult mentoring may also give teenagers who are away from home and out of school some of the same kinds of support that other young people receive from their parents and teachers.

The relationship between different types of risk-taking behavior also has important policy implications. If a high proportion of young people who use drugs also drink or smoke, then programs to reduce illegal drug use might usefully include efforts to prevent these other risk behaviors. Interventions to prevent drug use might also place special emphasis on young people who already smoke or drink.

In a sense, modernization in Asian societies has “created” adolescence as a transitional period between childhood and adulthood. At the same time, the number of young people going through this life stage has increased in many countries. Asian families and societies will need to look for new ways to keep teenagers “connected” to their communities and to nurture them through the—potentially stormy—transition to adulthood.