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Editorial

Parent–Adolescent Drug Use Discussions: Studying Content and Affective Processes



The role of parent socialization in the onset and development of adolescent substance use has been somewhat underemphasized compared with the important role of peer influence. However, both general parenting (e.g., supportiveness, moderate and consistent discipline) and parental substance-specific practices (e.g., messages and rules specifically about adolescent substance use) are associated with lower rates of smoking [1,2], alcohol use [3,4], and other drug use [5,6]. Because parent socialization is a potentially important target of prevention intervention, it is an important area of study.

In a study published in this issue of the *Journal*, Chaplin et al. [7] videotaped family discussions about drug use in a laboratory session and coded them for both drug-specific content (rules, information, and advice) and general parenting behavior (warmth vs. criticism). They related these observations to adolescent physiological responses (heart rate, blood pressure, and cortisol) before, during, and after the discussions and to adolescent-reported substance use. They found that the discussion of rules was associated with higher heart rate and blood pressure and greater substance use, whereas discussion of advice was associated with lower blood pressure and substance use. In addition, parental criticism was associated with higher cortisol responses and substance use.

An important feature of the Chaplin et al. study is the direct observation of parent–adolescent discussions. As Chaplin et al. note, with some important exceptions [8], past research has often relied on questionnaires assessing parent and adolescent reports of both general and substance-specific parenting. Although such questionnaire methods are valuable in large epidemiological studies, these measures are influenced by self-reporting biases, and different reporters do not always agree [9].

Moreover, an important advantage of behavioral observations is that they are potentially able to capture the impacts of parent–adolescent communication that go beyond the explicit content of communication, to include more nuanced emotional tone and nonverbal messages. For example, Richmond et al. [10] found that higher quality parental communication was associated with a decline in negative affect for adolescents who were smokers and that negative affect was associated with greater risk for future smoking. Similarly, findings by Chaplin et al.

suggest that less confrontive communication (more advice, less criticism, and less emphasis on rules) may lower adolescents' physiological reactivity, perhaps making them more receptive to parental messages. Indeed, developmental psychologists have suggested that children will be more receptive to parental socialization messages in the context of a positive parent–child relationship [11].

These findings suggest that parents' explicit values and rules about adolescent substance use as well as their more general parenting styles and parent–child relationships and communication quality will influence adolescent substance use behavior. In addition to their explicit messages, parents' implicit attitudes about substances may also be communicated to their children. For example, Sherman et al. [12] found that mothers' implicit attitudes toward cigarettes (measured by the Implicit Association Test [13]) predicted their children's implicit attitudes toward cigarettes (controlling for explicit attitudes and current smoking). Moreover, this intergenerational transmission of implicit attitudes predicted adolescent smoking onset 18 months later [12]. Ways in which such implicit attitudes are shaped and communicated across generations (as well as methods for modifying them) are important areas for future research.

Another complexity in considering the effects of parent substance-specific socialization is that the impact of a parental message may vary depending on the parent's own use of the substance in question. Most parents do not want their children to smoke (or drink, or use drugs) and report that they provide messages to promote that position [14]. However, the task of managing family conversations about substance use can be challenging for parents, especially for those who currently use the substance in question or who were ex-users. Parental users or ex-users are put in the position of communicating, "Do as I Say, not as I do (did)." In the case of parental smoking, longitudinal questionnaire studies [1] and observational studies [8] show that the effects of parent discussion on adolescent smoking outcomes varied based on parent smoking status. Wakschlag et al. [8] obtained structured behavioral observations of over 300 adolescents in discussion with their mother or father about smoking and followed them over 6 months. They found that elaboration of consequences for smoking in

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discussions reduced risk for their adolescent's smoking only for mothers who were nonsmokers, whereas maternal personal disclosures in discussion were associated with reduced risk only for mothers who smoked. Wakschlag et al. suggested that elaborating rules and consequences when the parent's own behavior is contradictory undermines its impact. Ways in which parents who themselves use (or used) substances can effectively socialize their adolescents not engage in substance use is another important research question [15].

One limitation that Chapin et al. acknowledge is the cross-sectional nature of their findings. Cross-sectional relations between parent socialization and adolescent substance use cannot determine the directionality of the relation, and there are likely to be bidirectional effects. Both the content and the emotional tone of family discussions about substance use reflect dynamic interchanges between parents and adolescents. Such a perspective may help us to understand the finding of Chapin et al. that the explicit discussion of rules about substance use was associated with higher levels of substance use. That is, the events that elicit parent communications about substance use rules may reflect adolescents' substance use behavior such that the family discussions are a reaction to the adolescent's substance use rather than a cause. For example, Huver et al. [16] found in their longitudinal questionnaire study that reductions in antismoking rules and increases in communication about smoking over time were more the result of adolescent smoking than the cause. These effects were larger for smoking parents.

Finally, research on parent socialization has studied a diverse range of adolescent outcomes including cigarette smoking, alcohol use, illegal drug use, and risky sexual behavior and integrating findings across outcomes is another important research direction. Despite the complexities of multiple explicit and implicit pathways of influence and bidirectional effects, studies of parental socialization of adolescent risk behaviors are important to the development of preventive intervention. The study by Chaplin et al. including direct observation of discussions and measurement of physiological reactivity is a welcome step forward in this effort.

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References

- [1] Chassin L, Presson CC, Rose JS, et al. Parenting style and smoking-specific parenting practices as predictors of adolescent smoking onset. *J Pediatr Psychol* 2005;30:333–4.
- [2] Harakeh Z, Scholte R, Vermulst A, et al. The relations between parents' smoking, general parenting, parental smoking communication, and adolescents' smoking. *J Res Adolesc* 2010;20:140–65.
- [3] Latendresse SJ, Rose RJ, Viken RJ, et al. Parenting mechanisms in links between parents' and adolescents' alcohol use behaviors. *Alcohol Clin Exp Res* 2008;32:322–30.
- [4] van der Vorst H, Engels RC, Meeus W, Deković M. The impact of alcohol-specific rules, parental norms about early drinking and parental alcohol use on adolescents' drinking behavior. *J Child Psychol Psychiatry* 2006;47:1299–306.
- [5] de Looze M, van den Eijnden R, Verdurmen J, et al. Parenting practices and adolescent risk behavior: Rules on smoking and drinking also predict cannabis use and early sexual debut. *Prev Sci* 2012;13:594–604.
- [6] King KM, Chassin L. Mediating and moderated effects of adolescent behavioral undercontrol and parenting in the prediction of drug use disorders in emerging adulthood. *Psychol Addict Behav* 2004;18:239–49.
- [7] Chaplin TM, Hansen A, Simmons J, et al. Parent-adolescent drug use discussions: Physiological responses and associated outcomes. *J Adolesc Health* 2014;55:730–5.
- [8] Wakschlag LS, Metzger A, Darfler A, et al. The Family Talk About Smoking (FTAS) paradigm: New directions for assessing parent-teen communications about smoking. *Nic Tob Res* 2011;13:103–12.
- [9] Mahabee-Gittens EM, Ding L, Gordon JS, Huang B. Agreement between parents and youths on measures of antismoking socialization. *J Child Adolesc Subst Abuse* 2010;19:158–70.
- [10] Richmond MJ, Mermelstein RJ, Wakschlag LS. Direct observations of parenting and real-time negative affect among adolescent smokers and nonsmokers. *J Clin Child Adolesc Psychol* 2013;42:617–28.
- [11] Grusec JE, Goodnow JJ, Kuczynski L. New directions in analyses of parenting contributions to children's acquisition of values. *Child Dev* 2000;71:205–11.
- [12] Sherman SJ, Chassin L, Presson CC, et al. The intergenerational transmission of implicit and explicit attitudes toward smoking. *J Exp Soc Psychol* 2009;45:313–9.
- [13] Greenwald A, McGhee D, Schwartz J. Measuring individual differences in implicit cognition: The implicit association test. *J Person Soc Psychol* 1998;74:1464–80.
- [14] Chassin L, Presson CC, Todd M, et al. Maternal socialization of adolescent smoking: The intergenerational transmission of parenting and smoking. *Dev Psychol* 1998;34:1189–201.
- [15] Jackson C, Dickinson D. Can parents who smoke socialise their children against smoking? Results from the Smoke-free Kids intervention trial. *Tob Control* 2013;12:52–9.
- [16] Huver RME, Engels RCME, Vermulst AA, de Vries H. Bi-directional relations between anti-smoking parenting practices and adolescent smoking in a Dutch sample. *Health Psychol* 2007;26:762–8.