

# Are sipping and drinking different? Parents, peers, and behaviour.

**Monika Wadolowski<sup>1</sup>, Delyse Hutchinson<sup>1</sup>, Richard P. Mattick<sup>1</sup>, Raimondo Bruno<sup>2,1</sup>,  
Alexandra Aiken<sup>1</sup>, Jake Najman<sup>3</sup>, Kypros Kypri<sup>4</sup>, Tim Slade<sup>1</sup>, Nyanda McBride<sup>5</sup>.**

<sup>1</sup> National Drug & Alcohol Research Centre, UNSW / <sup>2</sup> University of Tasmania / <sup>3</sup> University of Queensland / <sup>4</sup> University of Newcastle / <sup>5</sup> Curtin University

## Introduction

Sipping alcohol is common during early adolescence [1, 2]. However, research has mostly investigated predictors of alcohol use in regards to any use (including a sip), or categorised sipping with abstinence [e.g. 3, 4-8]. However, unlike consumption of whole beverages, having a sip/taste of alcohol often occurs with parents in supervised contexts [1, 2]. Sipping may subsequently have different determinants and outcomes than drinking whole beverages.

For example, a 13-year-old who has only ever sipped/tasted alcohol may have very different parenting, peer and behavioural contexts, compared to a 13-year-old drinking whole beverages.

## Aim

The present study investigated whether sipping was distinct from abstinence and drinking whole beverages in relation to known predictors of adolescent alcohol use, such as parenting practices, peer influences, and problem behaviours.

## Method

**Sample:** Families were recruited from Grade Seven classes across Australian Independent, Government and Catholic schools. 1,823 dyads completed baseline surveys (T1; M adolescent age: 12.4, SD=0.6; 55% were male), and 95% (n=1,729) completed surveys one-year later (T2); the latter being the basis of these analyses. Comparison with the Australian population found this sample was matched on adolescent sex distribution, household composition, and socioeconomic status [7-9].

**Measures: T2 outcome measure:** Adolescent alcohol use in the past 6 months (abstinence, sip/taste, and drinking at least a whole beverage).

**T1 adolescent measures:** parental alcohol-specific rules; parental monitoring; peer substance use; peer substance use disapproval; externalizing problems; and internalizing problems.

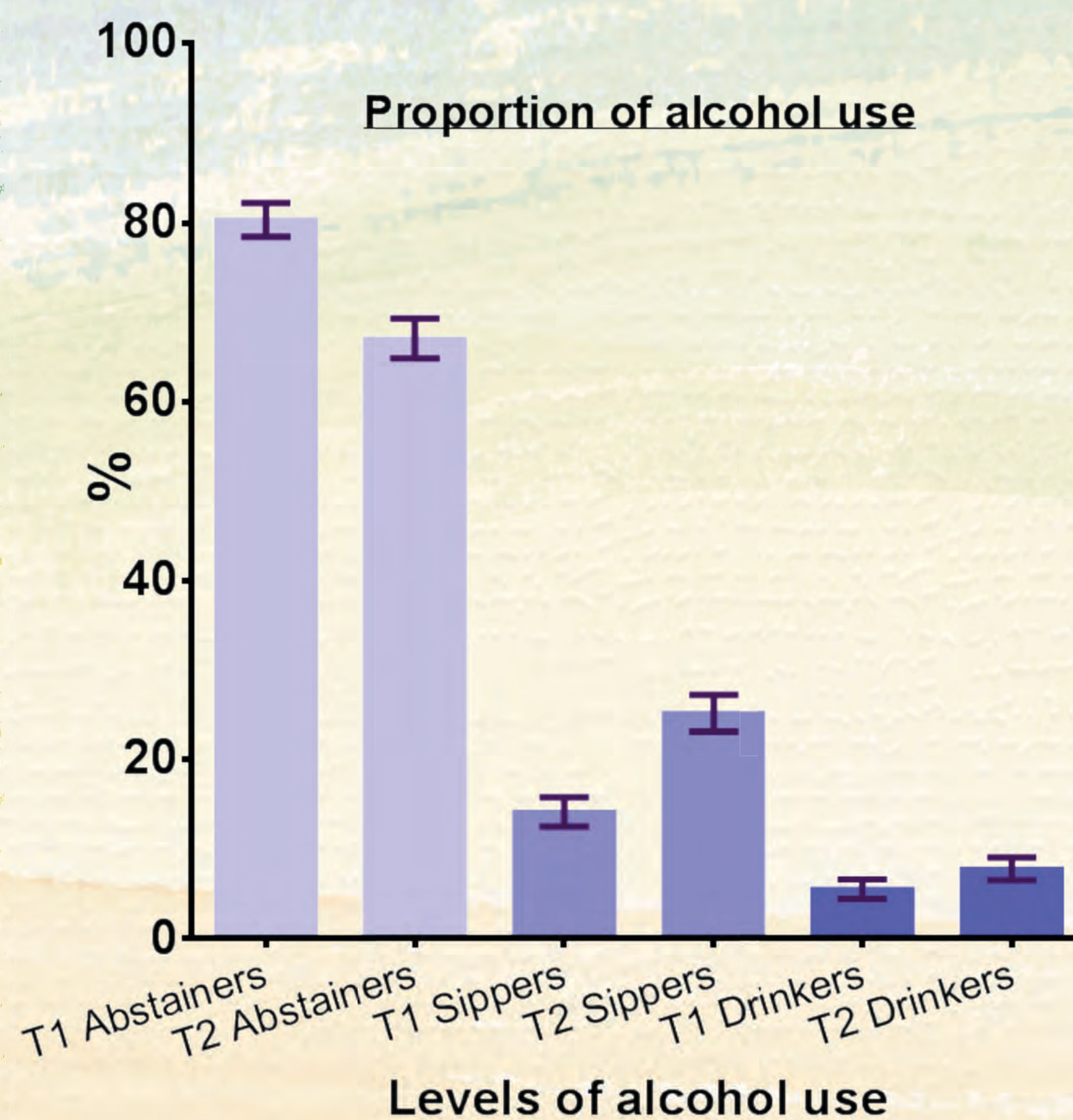
**T1 parent measures:** demographics; parent supply of a sip to child; parent alcohol use; home alcohol access; parent-child relationship quality; parenting consistency; child's peer substance use.

**Statistical analysis:** Multinomial logistic regressions tested the prospective effects of parenting, peers, and problem behaviours, on abstinence, sipping, and drinking one-year later.



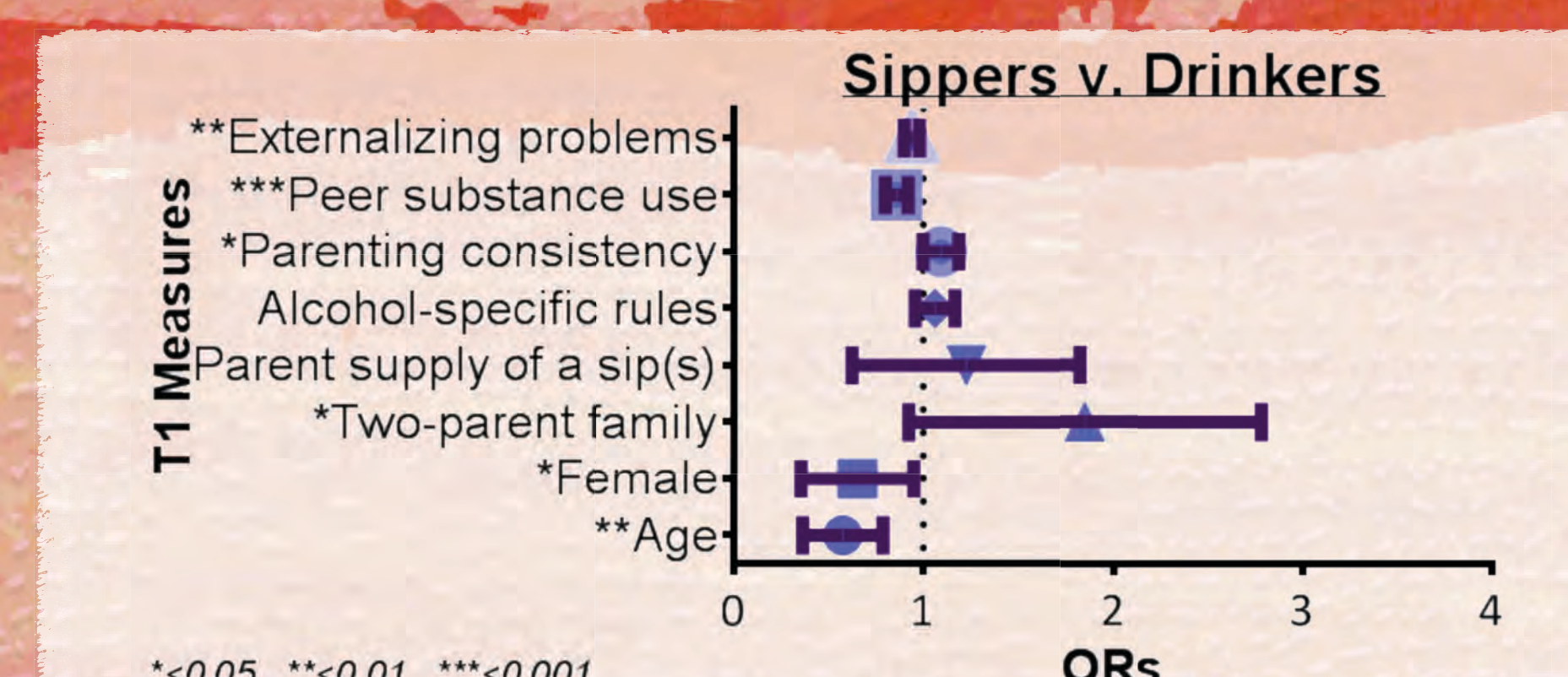
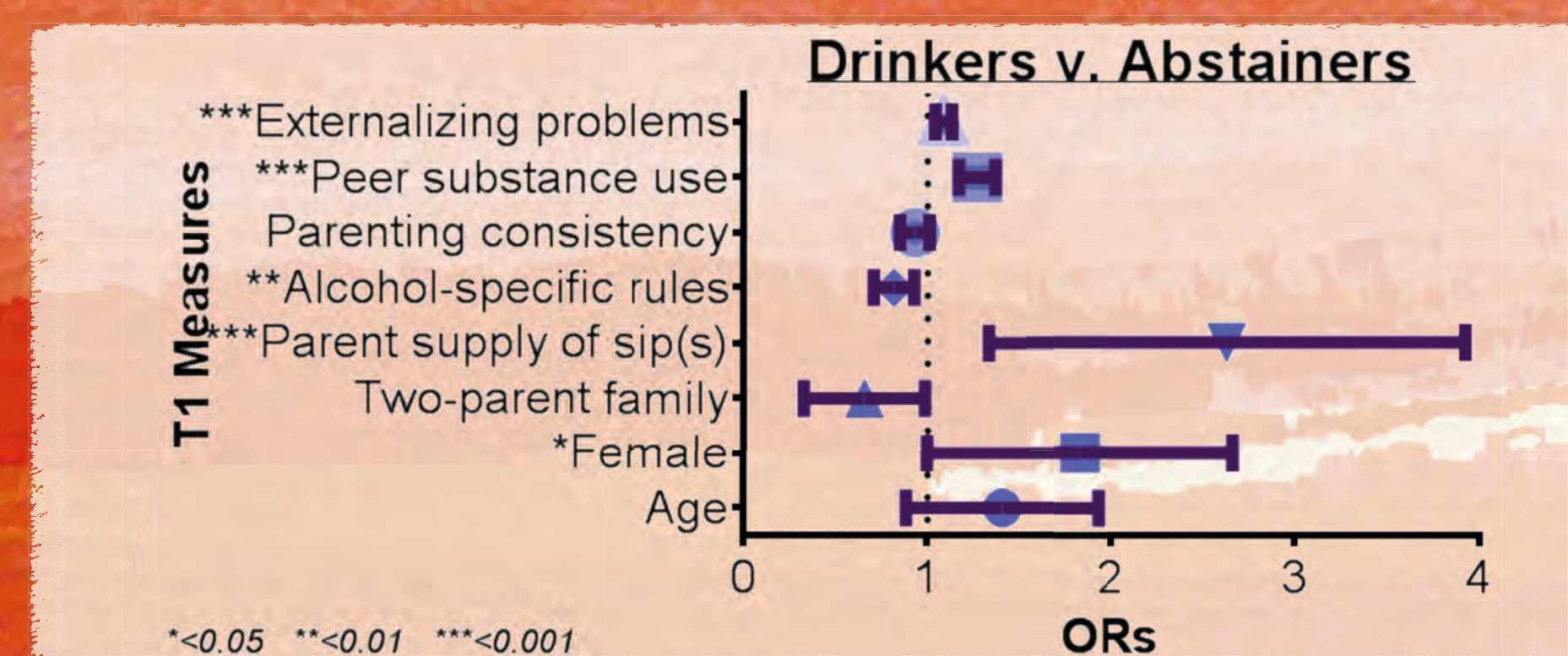
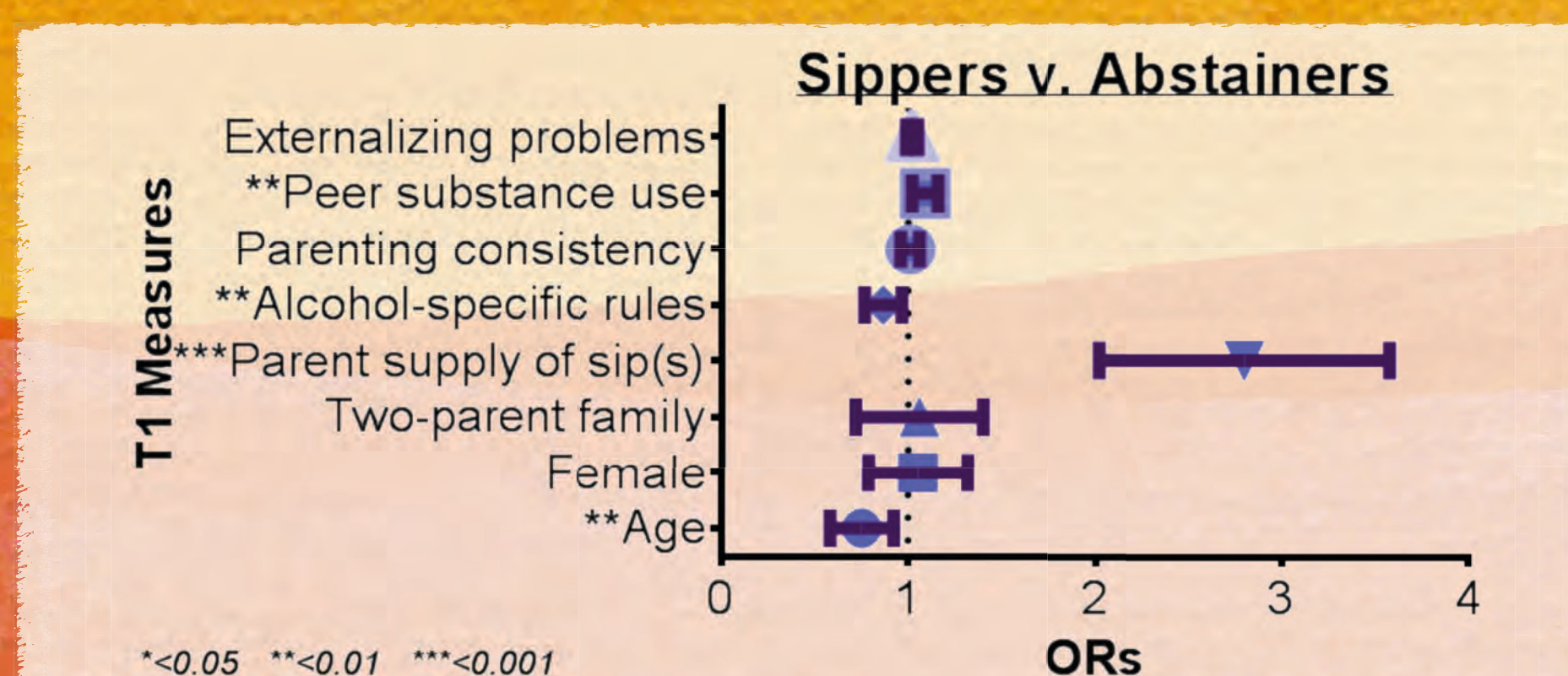
## Results

At T2, 7.8% (95% CI: 6.58-9.11) of adolescents reported drinking at least a whole beverage, while 25.2% (95% CI: 23.17-27.26) reported only having a sip/taste of alcohol.



## Results

Multivariate multinomial logistic regression analyses were conducted, with the following analyses: 1) sippers v. abstainers; 2) drinkers v. abstainers; and 3) sippers v. drinkers. The multivariate model was significant ( $\chi^2_{(44)}=627.50, p<0.001$ ), and included all variables listed in the methods. Selected odds ratios (ORs) are presented in forest plots below.



## Results

**Parental supply of a sip(s) was the biggest predictor of alcohol use** (sipping OR=2.73, 95% CI: 2.06-3.61; drinking OR=2.42, 95% CI: 1.45-4.02) one year later.

Other predictors of alcohol use included lenient alcohol-specific rules (sipping OR=0.86, 95% CI: 0.77-0.97; drinking OR=0.81, 95% CI: 0.71-0.93), poor parental monitoring (sipping OR=0.96, 95% CI: 0.91-1.00; drinking OR=0.90, 95% CI: 0.84-0.96), and substance-using peers (sipping OR=1.09, 95% CI: 1.02-1.16; drinking OR=1.27, 95% CI: 1.17-1.37). Increased levels of externalizing problems also predicted drinking one year later (OR=1.09, 95% CI: 1.04-1.13).

**Sippers were different from drinkers.** Sippers came from intact families (two-parent family OR=1.70, 95% CI: 1.01-2.85) with more consistent parenting (OR=1.09, 95% CI: 1.00-1.19), and were less likely to have substance-using peers (OR=0.86, 95% CI: 0.80-0.92), or externalizing problems (OR=0.94, 95% CI: 0.90-0.98).

## Conclusions

**Parents supplying a sip/taste of alcohol was the biggest predictor of alcohol use (both sipping, and tasting) one-year later.**

Notably, **predictors of sipping were distinct from both abstinence, and drinking**, suggesting it may be a separate level of alcohol exposure.

This may have important public health implications for understanding the development of adolescent trajectories of alcohol use.

Further research is needed to disentangle the long-term impacts of sipping on subsequent alcohol use and harms.

**References:** [1] Donovan, et al. Children's introduction to alcohol use: Sips and tastes. *Alcoholism: Clinical & Experimental Research* 2008. [2] Jackson, et al. Letting children sip: Understanding why parents allow alcohol use by elementary school-aged children. *Arch Pediatr Adolesc Med* 2012. [3] Vermeulen-Smit, et al. The influence of paternal and maternal drinking patterns within two-partner families on the initiation and development of adolescent drinking. *Addict Behav* 2012. [4] Duncan, et al. Alcohol use from ages 9 to 16: A cohort-sequential latent growth model. *Drug Alcohol Depend* 2006. [5] Kelly, et al. Very young adolescents and alcohol: Evidence of a unique susceptibility to peer alcohol use. *Addict Behav* 2012. [6] Collier, et al. Prospective associations of internalizing and externalizing problems and their co-occurrence with early adolescent substance use. *J Abnorm Child Psychol* 2013. [7] ABS. Socio-economic Indexes for Areas (SEIFA), Data cube, 2006; 2008. [8] Australian Bureau of Statistics. Australian demographic statistics, June quarter 2012: Australian demographic statistics tables; 2012. [9] ABS. Family characteristics, Australia, 2009-10: Households, families and persons, selected characteristics by state, 2009-10; 2011.

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**Contact:** Dr Monika Wadolowski / National Drug and Alcohol Research Centre, University of New South Wales, Australia / m.wadolowski@unsw.edu.au