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Curcio, A., Knott, V., & MAK, A. (2015). Why Do Young People Engage in Delinquency and Problem Drinking? Views From Adolescents and Stakeholders. *Australian Psychologist*, 50(5), 350-361. <https://doi.org/10.1111/ap.12118>

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Curcio, A. L., Knott, V. E., & Mak, A. S. (2015). Why do young people engage in delinquency and problem drinking? Views from adolescents and stakeholders. *Australian Psychologist*, 50, 350-361. doi:10.1111/ap.12118.

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Why do young people engage in delinquency and problem drinking? Views from adolescents and stakeholders

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## Abstract

*Objective:* Socially deviant and health-compromising behaviours are prevalent among adolescents living in Australia. The aim of this study was to explore from the perspectives of adolescents, and those involved in the provision of their care, potential reasons for youth delinquency and problematic drinking styles. *Method:* Participants were recruited purposively and comprised adolescents ( $n = 16$ ) and stakeholders ( $n = 20$ ), including youth mental health workers ( $n = 7$ ), school teachers/counsellors ( $n = 7$ ), and police officers ( $n = 6$ ). An open-ended question was used to prompt group discussion around why young people engage in deviant behaviour, including problem drinking. Responses were transcribed and analysed thematically. *Results:* Participants identified a number of factors that potentially underpin delinquent behaviour. These results were summarised within three global themes: social determinants (e.g. parenting practices), reinforcement histories (e.g. social endorsement), and individual determinants (e.g. personality traits). *Conclusions:* Multi-disciplinary interventions addressing these causes are likely to result in optimal outcomes.

**Keywords:** adolescence; delinquency; problem drinking; psychosocial risk-factors; thematic analysis

Why do young people engage in delinquency and problem drinking? Views from adolescents  
and stakeholders

Socially deviant behaviours, including crime and problem drinking, present universal health and societal problems with significant costs to individuals, communities, and economies (Australian Crime Commission, 2013; United Nations Office on Drugs and Crime, 2012; World Health Organisation, 2011a). For example, problematic drinking styles comprise the third largest risk factor for global burden of disease (World Health Organisation, 2011b), and along with damaging the health of the drinker, can compromise the health and safety of others through deviant acts such as assault, drink driving, and property damage (Victorian Drug and Alcohol Prevention Council, 2010).

Problem drinking and delinquent behaviours are particularly prevalent among Australian adolescents. For example, research indicates that Australian youth initiate drinking at younger ages and drink at higher levels than their counterparts in the United States and Europe, despite samples being matched on potential indicators of social disadvantage such as socioeconomic status (Jonkman, Steketee, Toumbourou, Cini, & Williams, 2012; Toumbourou, Hemphill, McMorris, Catalano, & Patton, 2009). Rowland et al. (2014) suggests that such early initiation (i.e. at 12 to 14 years of age) may be influenced by the increased density of alcohol outlets in Australia. However, heavy consumption levels, which peak in older adolescents (i.e. 15-17 years of age), may be more related to Australia's relaxed alcohol related policies, thereby increasing peer, parental and community influences (e.g. peer norms promoting alcohol use, parents providing access to alcohol, perceived availability of alcohol; Rowland et al., 2014). Similarly, Mattick et al. (2014) found that Australian teenagers whose parents supplied alcohol in early adolescence were three times more likely to be drinking full serves of alcohol at age 16 than those whose families did not supply alcohol.

Owing to its illegal status, underage drinking is a form of delinquency, and many criminal offences, such as assault, drink driving, homicide, and property damage are committed under the influence of alcohol (Victorian Drug and Alcohol Prevention Council, 2010). Criminal trends (i.e. non-alcohol-related trends) suggest that delinquency is prominent among Australian adolescents; with juvenile offence rates triple that of the adult cohort (Australian Institute of Criminology, 2011a). In an Australian longitudinal study, Vassallo et al. (2002) found that, although initiated in early adolescence (i.e. 13-14 years of age), delinquent activities tended to peak around 15-17 years of age, particularly those related to property offences, authority conflicts (e.g. truancy, running away from home, expulsion) and substance use. Statistics such as these raise concerns pertaining to reasons underpinning such high rates of socially deviant and health-compromising behaviours among Australian adolescents.

To date, empirical work has attempted to identify underlying risk factors for delinquency and problem drinking, though this work has tended to be framed according to specific theoretical perspectives. Behavioural theories tend to emphasise issues of social learning and reinforcement (e.g. Akers, 2009), whereas biological theories perceive adolescence as a period of reward sensitivity, with an incapacity for impulse regulation, planning, and forethought owing to under-developed brain regions (Rafter, 2008; Steinberg et al., 2008). Psychological theories examine the influence of social relationships and motives (e.g. Hirschi, 1969), whereas sociological and public health perspectives often examine the influences of the current social and economic environment (e.g. Shapland & Ponsaers, 2009; United Nations Office on Drugs and Crime, 2012).

Such empirical approaches have contributed substantially to a body of knowledge from which public health and policy change can be developed and implemented. However, considerable gaps in understanding remain. In our view, the current literature does not offer

a holistic account reflective of potential reasons or influences underpinning social deviance from the perspective of those living the experience. Furthermore, despite substantial contributions of empirical work in the area, a multi-disciplinary approach that synthesises risk factors from various theoretical perspectives (e.g. behavioural, biological, psychological, sociological, and economical) may enhance understanding of various risk factors underpinning socially deviant behaviours among Australian adolescents.

### **The Present Study**

To our current knowledge, no studies have specifically explored adolescent delinquency and problem drinking in Australia from a cultural or phenomenological perspective. That is, by exploring the phenomenological perspectives and experiences of adolescents themselves – and those involved in their care, we may enhance understanding of potential reasons underpinning youth delinquency. Qualitative approaches, especially those embracing inductive methods of analysis, are increasingly being used within the health and social sciences, particularly within psychology, sociology, public health and education fields (Sheriff, Gugglberger, Hall, & Scholes, 2014). Recognised for their utility in generating a rich and holistic understanding of complex phenomena in hard-to-reach groups (Braun & Clarke, 2006), focus groups have been used to access young peoples' perceptions of their environments, including exploring peer group cultures (Jackson & Sheriff, 2013), youth violence (Aubert, Melgar, & Valls, 2011), and sexual health behaviours (Van Teijlingen et al., 2007). In the area of youth delinquency, a focus group approach offers insight into the interpersonal worlds of adolescents and stakeholders, which may potentially generate novel information concerning risk factors and/or reasons for engagement in social deviance from the perceptions of those living the experience.

In light of recent research indicating the importance of preventing socially deviant behaviours among adolescents (e.g. Australian Institute of Criminology, 2011a; Jonkman et

al., 2012; Mattick et al., 2014), the aim of the current study was to explore reasons for engaging in delinquent behaviour, including problem drinking, through the lens of those living the experience. More specifically, we intended to gain insight into perspectives of adolescents themselves, as well as through stakeholders who may provide important information pertaining to contextual or other factors underpinning delinquency. Given previous research has found focus groups useful in revealing a group's specific expression of culture (e.g., Heath, Brooks, Cleaver, & Ireland, 2009), we expect that the findings from the current study may better inform personal, social, and policy implications associated with socially deviant behaviours among Australian adolescents.

## **Method**

### **Participants**

Participants from pre-existing groups (i.e. participants in each group were previously known to each other through attending the same school or working within the same agency) were recruited via opportunistic sampling. We believe data saturation was achieved among the particular groups sampled in the current study.

Author AC emailed Principals of government and independent high schools and colleges in Canberra, located in the capital city of Australia. The only selection criteria for adolescents were that they satisfied the legal definition of a "juvenile". In Canberra, a juvenile is defined as less than 18 years of age (Australian Institute of Criminology, 2009). Principals who agreed to participate then delegated to teachers, who informed students of the research project. School teachers then liaised with the researchers, and organised a date and time for the focus group(s) to be held at school. Students who chose to participate attended the focus group and provided consent prior to participating. The current study had representation from public ( $n = 10$  students) and private ( $n = 6$  students) educational settings. Students from the public school were part of a broader program aimed at providing support for students who are

disconnected from education owing to issues with expulsion, alcohol and drug abuse, and crime. Public and private adolescents completed two separate focus groups. Despite authors approaching both high schools and colleges, the majority of adolescent participants were aged 16-17 years. However, longitudinal research has suggested that this age range is consistent with peak delinquent and alcohol involvement (Rowland et al., 2014; Vassallo et al., 2002).

The current study also included participation from a variety of stakeholders identified for potential expertise with youth across differing areas. These stakeholders were contacted by AC, and included youth workers recruited from a youth mental health agency ( $n = 7$ ), school teachers and counsellors recruited from an independent Canberra secondary school ( $n = 7$ ), and police officers recruited from the Australian Federal Police ( $n = 6$ ). The Australian Federal Police are Australia's policing representative, and are the chief policing body in Canberra, being responsible for enforcing Commonwealth law for both local and national jurisdictions. Three separate focus groups were held for youth mental health workers, school teachers and counsellors, and police officers. Inclusion criteria for stakeholder groups involved two or more years of experience working with young people. Table 1 presents a summary of the types of participants and their demographic background.

**\*Insert Table 1 Approximately Here\***

## **Design**

Focus groups with adolescents and stakeholders were chosen rather than interviews to allow rich and heartfelt discussions. Further, an open and inductive approach could add value to previously existing knowledge, and perhaps help intertwine varying perspectives, by allowing detailed examination of the intricacies underpinning youth deviance from the personal perceptions of adolescents and those involved in their care (Smith & Osborn, 2008). Author AC, a female psychologist and PhD Candidate, conducted the focus groups and had

no prior relationships with the participants. AC had not conducted qualitative research previously. Therefore, author VK, an experienced qualitative researcher, attended the initial focus group to provide supervision, advice, and ensure adherence to best practice principles in the conduct of focus groups. This included listening attentively, allowing participants to lead the discussion, promoting discussion from all group members, seeking clarification, and treating all participants with respect, among other logistical considerations (for a checklist of focus group conduct see Krueger & Casey, 2000). Author AM has a strong theoretical background in delinquency and was therefore not involved in data collection or analysis to reduce any potential bias with regard to interpretation of the data.

An open-ended question was used to prompt group discussion around why young people engage in deviant behaviour, including problem drinking. Taking advantage of relevant shifts in the discussion, issues highlighted by the participants were then explored further. The focus groups met one time each, taking approximately one hour, and were conducted in a private room at the participants' school or work. As no identifying information was recorded, the focus groups were audio-recorded and professionally transcribed. Field notes were also made during the focus groups. Focus groups were discontinued once data saturation was reached (i.e., no new themes emerged from the data; Grbich, 1999). Verbal and non-verbal prompts (e.g. appropriate pauses before engaging in further discussion, open body language, nodding, asking for more information) were used to facilitate discussion among participants and clarify information. Facilitators also attempted to build rapport by remaining open and accepting regardless of the information divulged. The facilitator kept participants on topic, reduced the impact of dominant or talkative participants by asking others for alternative views, and ensured that all participants were actively engaged and contributed to discussions. The facilitator would invite quieter participants to share their views and exchange ideas (Rabiee, 2004), and all participants were

encouraged to question each other's responses, elicit clarification, and explore their statements further (Freeman, 2006).

### **Procedure**

Ethics approval was gained through the Education Directorate and the University of Canberra's Human Research Ethics Committee prior to the conduct of the research. Ethics protocol prevented adolescent participants from discussing personal experiences owing to privacy issues and their age. As a result, adolescent participants were instructed to provide their perspective on the phenomenon of youth delinquency and problem drinking in general. Those who volunteered to participate were provided with participant information and complaints procedure forms prior to beginning the study. Participants were informed that the study was voluntary and that they could withdraw at any time without penalty. Prior to the focus group(s), participants were made aware that their responses would be recorded and summarised for research purposes. Participants were advised that the material discussed should remain confidential. All participants signed an informed consent form prior to the focus group(s).

### **Measures**

This study is part of a series of studies investigating youth delinquency and problem drinking. Prior to beginning the focus groups, delinquency was defined as illegal or risky behaviour conducted by adolescents under the age of 18. Focus group participants were provided with a copy of the Australian Self-Reported Delinquency Scale (ASRDS; Mak, 1993) and asked for feedback to update items to ensure consistency with contemporary youth culture (e.g. "Used or threatened to use force to get money or things from another person; "Forced someone to do sexual things with you when that person did not want to"). The results of the scale revision are reported in Curcio, Mak, and Knott (2014). The ASRDS also includes items pertaining to alcohol, and problem drinking was defined as excessive alcohol

consumption that may lead to alcohol-related problems (e.g. health risks, depression, violence, relationship issues). Owing to participation in the scale revision prior to discussing causes of delinquency and problem drinking, participants had a thorough understanding of delinquency and problem drinking definitions. Finally, demographic information (age, gender, and years of experience) was collected via an anonymous short form, and issues surrounding confidentiality, privacy, and mutual respect for participants were discussed.

### **Analysis**

The digitally recorded focus groups were transcribed verbatim and analysed thematically according to Attride-Stirling's (2001) model. The focus of the analysis was to inductively assess the data set for themes pertaining to delinquency and problem drinking causes from the phenomenological perspectives of participants. Author AC analysed transcripts and noted initial ideas and reflections before employing initial coding by highlighting salient and recurrent issues that arose in the text. VK, a researcher experienced in inductive and data-driven approaches, including grounded theory (Knott et al., 2012) and thematic analysis (Connerty & Knott, 2013), provided supervision, training, and guidance to AC during the process of thematic coding. Subsequent coding was used to group together similar words and passages of text before salient themes were abstracted. To reduce the data, themes were then refined in terms of specificity and meaning. Themes were consequently arranged into basic (or lowest-order) themes (by indentifying premises characteristic of the data), organising (or middle-order) themes (by organising several basic themes into clusters of similar issues to present a main idea or concept), and global (or super-ordinate) themes (by grouping together sets of organising themes to present an argument by summarising and making sense of lower-order themes abstracted from and supported by the data; Attride-Stirling, 2001). Attride-Stirling (2001) recommends using a thematic map to present the thematic network graphically, "giving fluidity to themes, and emphasising the

interconnectivity throughout the network” (p. 389). A thematic map was subsequently produced by illustrating the basic, organising, and global themes in a web-like graphical representation (see Figure 1).

Coding attempts, theme abstraction, and thematic maps were reviewed by VK to ensure the process applied to analysis was data-driven. That is, codes and categories were derived from empirical information in the text rather than based on pre-existing categories (Gläser & Laudel, 2013). To ensure the process was data-driven, AC read and re-read the data, looking for key trends or themes before any analysis took place. AC engaged in reflective practice with VK to ensure flexibility and openness to new themes or ideas. VK and AC consulted until an agreement was reached in terms of identifying and naming basic, organising, and global themes. Finally, detailed and compelling examples from participants’ narratives were extracted, so as to capture and reflect themes of delinquency and problem drinking causes from the phenomenological perspective of respective participants. Participants were given pseudonyms to ensure anonymity.

## **Results**

### **Causes of Delinquency and Problem Drinking Themes**

Participants discussed a range of potential causes of adolescent delinquency and problem drinking with multiple, and sometimes inter-related causes identified. Presented here are global, organising, and basic themes relevant to delinquency and problem drinking causes from the perspectives of adolescents and stakeholders. Note that these views are not necessarily the views of the authors.

**Global Theme 1: Social determinants.** A number of social determinants were identified, including parenting practices, cultural and social norms, social disadvantage, and pigeonholing.

***Organising Theme 1.1: Parenting practices.*** Parenting practices perceived as

harmful to adolescent development included neglectful or abusive parenting, experiencing divorce or conflict, or over-protective parenting and poor limit setting.

*Basic Theme 1.1.1: Neglectful or abusive parents.* Adolescent and stakeholder groups tended to agree that neglectful or abusive parenting increased the likelihood of involvement in delinquent or drinking behaviours. Adolescents in particular suggested that alcohol or criminal activity could be a means of avoiding or distracting oneself from a negative familial environment: “The drinking could be like a branch off from the family problems and issues” (Bill, adolescent), and “Abusive parents...or maybe if they don’t have parents” (Sam, adolescent). Having parents who are abusive may model violence, which may be replicated by the adolescent in the form of assault or other criminal acts. Similarly, the absence of parents may lead to criminal activity if the young person has not had an attachment figure to role model prosocial behaviours. This may also lead to problematic drinking styles as a means of coping with issues of abandonment and abuse. Stakeholder groups tended to agree with statements made by adolescent groups: “Parents who either don’t care or parents who are so busy that they don’t have time to dedicate to their kids” (Rebecca, police officer).

*Basic Theme 1.1.2: Divorce and conflict.* Family circumstances, including conflict-fuelled homes and divorce were raised as potential causes of delinquency and drinking problems. Absent parents and hostile separations were suggested as a source of rejection and anger that could cause rebelliousness: “Having a shitty home situation” (Dayne, adolescent), and “Whether or not they come from a broken home, whether or not they’ve had to come across other circumstances or dealt with other issues” (Jessica, adolescent). Adolescent participants indicated that parent-child relationships may be disrupted through divorce/conflict (e.g. reduced quality time, financial difficulties owing to single-income households) and young people may engage in problem drinking and delinquency because of related opportunities (e.g. low parental monitoring may increase ability to associate with

delinquent peers, criminal behaviour may be committed out of financial necessity, problem drinking may be used as a means to cope with a chaotic home life). These sentiments were also pursued by stakeholder groups:

Because that comes from a form of protest as well especially when the husband and wife, they sort of part company and it has a very bad effect on children and this is the only way that they can protest by being a delinquent. (Katherine, police officer)

While most adolescents agreed that divorce and conflict increase the likelihood of engagement in delinquency and problem drinking, others indicated that some adolescents are resilient and do not follow this path: “You start on that path and think, hold on, I don’t really want to do this” (Jessica, adolescent). This indicates that some young people may have protective factors that buffer them against a trajectory of delinquency or problem drinking, despite substantial risk factors.

*Basic Theme 1.1.3: Limited discipline and opportunities to learn (“cottonwool”).*

Adolescents indicated that limited discipline from parents may increase problem behaviours, stating that the behaviour becomes reinforced without consequences. For example: “Being allowed to drink, you would obviously drink more” (Jane, adolescent), and “If they get away with it once, why not do it again?” (Ruby, adolescent). Teachers also indicated that poor boundary setting and over-protection by parents could result in increased delinquent activity due to insufficient consequences:

I think there’s also a view by quite a number of our parents that regardless of what the kids do, they’ll go to bat for the kids. The kids start to realise after a while that they can get away with a lot of stuff because their parents will defend them to the hilt regardless of what’s done. (Ruth, teacher)

Furthermore, it was perceived by stakeholder groups that this could lead to young people having a sense of entitlement and lack of responsibility or empathy for how their behaviours

affect others: “Their parents support them in what they see as their individual rights and not the same equal consideration of how this behaviour impacts upon others” (Mary, teacher).

***Organising Theme 1.2: Norms.*** Participants indicated that adolescents would often engage in problematic behaviours owing to societal and cultural norms.

***Basic Theme 1.2.1: Societal and cultural norms.*** Adolescents highlighted that alcohol use in particular is culturally sanctioned in Australia, and that the drinking culture is likely to affect problematic drinking styles. For example: “It’s just accepted that you go and get drunk” (Jessica, adolescent). Stakeholders agreed that drinking is culturally accepted in Australia, leading to normalisation of the behaviour: “Our consumption [of alcohol] is an epidemic [sic]...it’s a huge issue across the whole of the population where we are becoming a nation of drunks” (Mary, teacher). Stakeholder groups suggested that cultural norms also influence adolescent delinquency: “There are too many influences. You used to get morals from the strong family, from your close peer group...Now it’s the worldwide web and your 2000 followers on Tumblr” (Mary, teacher).

***Basic Theme 1.2.2: Alcohol accessibility.*** Adolescents also discussed the availability and marketing of different types of alcohol in Australia, suggesting that alcohol is widely accessible to adolescents: “Everybody can get it” (Ruby, adolescent). Youth workers agreed that the availability of alcohol was instrumental in underage drinking: “Accessibility is a big thing as well...it’s a massive cause” (John, youth worker). The density of alcohol outlets in Australia, paired with advertisements that often depict Australian families and friends celebrating special events with alcohol, may further fuel the belief that heavy consumption of alcohol is a normal part of Australian culture.

***Organising Theme 1.3: Social disadvantage.*** Environmental factors, such as homelessness and poverty were highlighted as risk factors of primarily delinquency rather than alcohol use. Adolescents reported that teenagers may engage in criminal activities for

financial necessity. For example: “My brother used to break into houses because my mum wouldn’t buy him stuff...So, he would go out and get it from other people’s houses” (Amber, adolescent). Police officers also suggested that adolescents from high socioeconomic backgrounds are also at risk of delinquent involvement due to a lack of boundaries and discipline:

The other thing is high socio-economic parents. There’s a lot of that creeping into delinquent adolescence because they are given everything but they’re not actually given parenting. (Karen, police officer)

*Basic Theme 1.3.1: Pigeonholing.* Participants identified that labelling or pigeonholing adolescents due to their backgrounds or differences could lead to self-fulfilling prophecies: “Young people have a really low opinion of themselves and then kind of live up to that” (Mary, youth worker), and it is particularly prominent in schooling systems, where adolescents may feel pressure to succeed or feel isolated for school failure:

Say you might have a kid who’s having some issues at school. They might get pigeonholed and then it just goes from there. The kid goes, well why I am even bothering trying and then starts going down that line of hanging out with the wrong group, starts doing the wrong things to try and get that attention and it goes from there. (Paul, police officer)

**Global Theme 2: Reinforcement histories.** From a behavioural psychology perspective, reinforcement refers to any consequence that will increase the likelihood of a behaviour occurring in the future (Shanks, 2010). Participant-identified causes of delinquency and problem drinking with potentially reinforcing properties included peer approval, social modelling, enjoyment, escape, and receiving status or reputation.

*Organising Theme 2.1: Social endorsement.* Peer approval and social modelling of criminal or drinking behaviours were highlighted as risk factors for adolescent involvement

in similar behaviours.

*Basic Theme 2.1.1: Peer approval.* Adolescents reported that peer pressure was particularly influential because young people have an inherent need to feel a sense of acceptance and belonging from a peer group, and would conform to certain group norms in order to fit in: “Wanting to fit in” (Jane, adolescent) and “Everybody else is doing it, so they think it’s cool” (Alice, adolescent). These statements were endorsed by stakeholders as well: “They’re encouraged by their peers to behave badly” (Sarah, teacher). Peer approval may be particularly relevant for adolescents who are experiencing conflict at home or who have weakened attachments to prosocial role models, such as parents or teachers. Without moral guidance from these adult attachment figures, adolescents may drift to peer groups who adopt delinquent or unfavourable norms and behaviours. These attitudes and behaviours then become the exemplar by which the young person may espouse and replicate.

*Basic Theme 2.1.2: Social modelling.* Adolescents suggested that teenagers who have parents who abuse alcohol or engage in criminal activities could often develop similar attitudes and behaviours: “Say if their family does it, so they just grow up and think it’s normal” (Amber, adolescent), and “[you learn it] from parents” (Luke, adolescent). Stakeholder groups had a tendency to agree: “I think that also goes down to sometimes the role models that they have...trying to live up to a role model that doesn’t exude moral behaviour” (Ruth, teacher).

Police officers particularly noted that adolescents who were frequently in trouble with the law often came from families with criminal histories: “These high delinquents a lot of them I see come from generations of that behaviour” (Katherine, police officer). However, one female adolescent suggested that some adolescents with addicted parents would refuse to go down that path, indicating resiliency: “If your parents do it, usually, most likely their kids would as well. Some people go the opposite way...they just don’t want to touch it ever”

(Jessica, adolescent).

**Organising Theme 2.2: Pay-offs.** Participants identified a number of pay-offs or rewards that could reinforce adolescent involvement in criminal and drinking behaviours, including enjoyment, escape from negative or uncomfortable feelings, and receiving social status.

*Basic Theme 2.2.1: Enjoyment.* Participants tended to agree that adolescents specifically drink for fun and entertainment, and to enhance social encounters. For example, “Oh, just for a good time...I think that’s mainly the number one reason” (Sam, adolescent), and “Most young people feel great when they start drinking... It might just make them feel good socially – more confident” (Tania, youth worker).

*Basic Theme 2.2.2: Escape.* Adolescents suggested that sometimes teenagers will drink or engage in delinquency as a form of avoidance or distraction from negative life events: “In some cases they’ll do it just to take their mind off something else” (Dean, adolescent), and “I dropped out of school in Year 9 to drink...I think it’s an escape” (Abby, adolescent). Stakeholders tended to agree: “If you’re looking at the classroom and if what is happening in the classroom is too difficult for them, then I think it can be an avoidance strategy” (Ruth, teacher).

*Basic Theme 2.2.3: Badge of honour and status.* Adolescent participants identified that some teenagers would engage in delinquent or problem drinking behaviours in order to achieve status and build a reputation among peers: “It’s a status thing” (Amber, adolescent). Stakeholders agreed that certain sub-sections of the youth population see their delinquent behaviour as a badge of honour: “A lot of the kids we work with have been through...youth justice and it is a badge of honour to the point where some kids will talk up what they’ve done” (Bob, youth worker).

**Global Theme 3: Individual determinants.** Individual characteristics and

personality traits were also raised as potential causes of delinquency and problematic alcohol use.

***Organising Theme 3.1: Personality traits.*** Participants identified impulsivity and sensation seeking as risk factors for delinquent and drinking involvement.

***Basic Theme 3.1.1: Impulsivity.*** Participants suggested that adolescents often fail to consider the consequences of their behaviours and act spontaneously. More specifically, they suggested that adolescents tend to live in the present, and that problem behaviours are often associated with little forethought for consequences: “You don’t really have to think...You’re just in the moment” (Jessica, adolescent), and “It just happens” (Danielle, adolescent). Impulsivity was also endorsed by stakeholders: “Lack of planning ahead as well...not thinking about the consequences” (Margaret, youth worker).

***Basic Theme 3.1.2: Sensation-seeking.*** In addition to impulsivity, adolescents and stakeholders agreed that adolescents may engage in delinquent or alcohol-using behaviours as a means of thrill or sensation seeking: “It’s like a thrill...It’s like a definite thrill” (Ruby, adolescent), and “For the rush” (Danielle, adolescent). Stakeholder groups tended to agree: “There’s also the element of for the thrill of it” (Ruth, teacher).

***Organising Theme 3.2: Psychological factors.*** Psychological factors such as mental illness, self-medication, and low self-esteem were also recognised as risk factors for adolescent criminality and alcohol use.

***Basic Theme 3.2.1: Mental illness and/or self-medication.*** Adolescent participants indicated that some adolescents may engage in drinking or delinquency to self-medicate psychological problems: “To take your mind off things...take the pain away” (Luke, adolescent), and “mental problems” (Dayne, adolescent). Stakeholder groups tended to discuss mental illness as a risk factor for delinquency and drinking: “Mental health, whether its alcohol and drug induced mental health or if it’s just general mental health, that affects a

lot of these behaviours” (Katherine, police officer).

*Basic Theme 3.2.2: Self-esteem.* Interestingly, stakeholders, rather than adolescents, were more likely to emphasise low self-esteem: “Poor self esteem...just culls everything. I think that’s got a lot to do with behaviour” (Sarah, teacher).

**Beliefs favourable to alcohol use and delinquency.** The combined influence of social determinants, individual determinants and reinforcement histories may directly or indirectly form beliefs favourable to delinquency and problematic alcohol use. Participants indicated that, due to cultural acceptance and social reinforcement for such behaviours, adolescents may not perceive delinquency or excessive alcohol consumption as problematic. Adolescents reported that they did not perceive delinquency or problem drinking as serious, stating that there was: “a lack of information” (Jessica, adolescent), and no real consequences: “They just give you a warning” (Ruby, adolescent).

**\*Insert Figure 1 Approximately Here\***

## **Discussion**

The aim of the current study was to explore reasons for engaging in delinquent behaviour, including problem drinking, through the lens of adolescents themselves, as well as via perceptions of those working in the field. The current qualitative findings suggest a complex array of potential determinants of adolescent delinquency and problem drinking. Three global themes were identified: social determinants (e.g., parenting practices, norms, social disadvantage, pigeonholing), reinforcing histories (e.g., peer approval, social modelling, enjoyment and escape, status), and individual determinants (e.g. impulsivity, sensation seeking, mental illness, self-esteem), which likely shape attitudes and beliefs favourable to engaging in deviant behaviours.

By capturing a multi-disciplinary array of risk factors, and relationships existing among these factors, the current research offers a more holistic conceptualisation of reasons

underpinning adolescent social deviance and health-compromising behaviours. Owing to a rich variety of determinants identified by participants, it is unlikely that any one theory or framework could comprehensively explain the behaviour in question, but rather, requires an integration of these approaches. For example, the basic theme of pay-offs (including organising themes of enjoyment and escape) may replicate behavioural theories such as social learning and reinforcement (e.g. Akers, 2009; Skinner, 1938). From a biological perspective, personality traits with biochemical markers (e.g. impulsivity and sensation seeking) were themes abstracted from the data, and highlight risks associated with deficits in regulatory systems leading to impulsive and thrilling behaviours. Public health and sociological perspectives often examine the influences of the current social and economic contexts. Themes of social/cultural norms, alcohol accessibility, and limited discipline and opportunities to learn may add new insights to this area.

### **Limited Discipline and Opportunities to Learn**

The increased incidence of juvenile delinquency and problem drinking in Australia may be directly linked with recent changes in economic and social structures. Increases in divorce and separation, single-parent households, and children in out-of-home care or foster placements have changed family dynamics, and inflexible and unaccommodating workplace policies and the global market have placed growing pressures on parents to spend longer hours at work (Hayes, Weston, Qu, & Gray, 2010). These changes in family structure subsequently compromise parent-child attachments, restrict parental involvement and monitoring, and lessen limit-setting (Australian Institute of Criminology, 2011b; Wise, 2003), providing more opportunities for children to associate with delinquent peers and engage in deviant activities. In the current research, stakeholders suggested that parents tend to over-protect their children and defend their delinquent behaviour, regardless of the impact on others. This was further supported by adolescent perspectives, who suggested that

delinquency and problem drinking behaviours were fuelled by broken homes and deficient consequences. From a social and economical perspective, this “cotton wool generation” described by participants is a relatively new concept, where parental over-protection detracts the child’s ability to learn responsibility as there are no consequences for immoral actions. Family-based treatments and parenting programs focusing on parenting styles and increasing the parent-child bond have received substantial support in reducing adolescent deviant behaviours (for a meta-analysis see Petrosino, Derzon, & Lavenberg, 2009). However, these results suggest that, in addition to promoting warm but firm parenting styles, parenting programs should focus on allowing youths to face the consequences of their actions, experience failure, and accept responsibility in order to develop resiliency (Fuller, 2008).

### **Social and Cultural Norms**

On a similar note, recent social and economical contexts of Westernised culture place increasing emphasis on materialism, wealth, individualism, instant gratification, acquisition, status, and competition (Twenge, Campbell, & Freeman, 2012). This economical pressure places greater demands on family (e.g., stress, marriage conflicts, limited parental involvement due to work demands), and in combination with poor limit setting (characteristic of the cotton wool generation), promotes a sense of entitlement or feeling owed by society. This sense of entitlement was highlighted in the current research, with participants suggesting that some adolescents lack a moral compass and have little empathy for how their behaviour affects others. This is consistent with a large body of existing research (e.g. Rothman & Steil, 2012; Twenge et al., 2012; Zaffirakis, 2008), which suggests that adolescents in Western cultures may engage in deviant behaviour owing to egocentrism, entitlement, and a need for instant gratification. However, the current research provides a descriptive narrative, from the perspectives of those living the experience, of how various causes (i.e. parenting

practices such as lack of boundaries and consequences, social and cultural norms emphasising individualism and acquisition, and personal traits such as empathy) may be intertwined in their influence on delinquency and problem drinking initiation.

### **Reinforcing Histories**

From a behavioural psychology perspective, peer approval, social modelling, enjoyment, escape, and status were identified as reinforcing adolescent delinquency and problem drinking behaviours. For example, enjoyment positively reinforces crime and alcohol use in that it incites fun, whereas escape negatively reinforces crime or alcohol use, as engagement in these activities helps the teenager avoid uncomfortable feelings or events. This finding supports previous research which has found social and enhancement motives to be particularly prominent in adolescent drinking (Kuntsche, Knibbe, Gmel, & Engels, 2006). Participants in the current study highlighted that these motives may also influence crime and delinquency, potentially highlighting an avenue for future research.

Similarly, for some adolescents, the reputable status gained from excessive alcohol use or criminal involvement is so reinforcing it is considered a 'badge of honour'. In terms of research and early intervention, less attention has been paid to this concept and may be one reason why youth involvement in crime and drinking continues to increase (Carroll, Houghton, Khan, & Tan, 2008; Smith-Adcock, Min Lee, Kerpelman, Majuta, & Bo Young, 2013). Adolescents who engage in criminal and drinking behaviours are rewarded by social status among like-minded peers. Individuals who attempt to promote a non-conformist reputation may adopt an oppositional stance to conventionally approved activities (e.g. good grades, sporting achievements, altruistic behaviour), and instead engage in socially deviant behaviour (Carroll et al., 2008). The reinforcing properties of this 'badge of honour' concept should be further investigated in relation to crime and drinking involvement.

### **Pigeonholing and Social Disadvantage**

The concept of a “badge of honour” or reputation as a delinquent may be directly related to pigeonholing. Sociological theories suggest that labelling youths as “bad” or “delinquent” may provoke a self-fulfilling prophecy and thereby encourage further deviant behaviour (Brezina & Aragonés, 2004; Madon, Willard, Gyll, & Scherr, 2011). Labelling theories suggest that being branded as a delinquent can alter ones’ personal identity and becomes internalised as others reinforce this view (Brezina & Aragonés, 2004). Stakeholders in the current study suggested that adolescents are often pigeonholed through school (e.g. as a “bad student”), families (e.g. coming from “families with criminal histories”), friends (e.g. associating with the “wrong crowd”) or isolated through social disadvantage. This suggests a somewhat bleak trajectory for adolescents, despite research to suggest that even “high risk” youth can develop resilience and achieve healthy development (Zimmerman & Brenner, 2010). Protective factors (such as a healthy parent-child bond, connection with a teacher, prosocial peers, talents or interests, monitoring or supervision) may buffer some adolescents from harm. Indeed, adolescent participants identified that some young people choose not to follow the path of delinquency despite risk factors such as parental substance use and criminality. Rather than pathologising adolescents through pigeonholing and social stigma, prevention and intervention efforts could focus on developing resiliency and opportunities for capacity-building.

Pigeonholing is unlikely unhelpful, particularly as participants in the current study suggested that adolescents who come from socially disadvantaged and high socioeconomic backgrounds are both at risk of deviant activity. Adolescents from low socioeconomic families may engage in criminal activities out of need and financial necessity. For example, young people may deal drugs to make an income, steal electronic devices because they cannot afford their own, or squat in houses due to homelessness. Similarly, participants highlighted that adolescents from high socioeconomic backgrounds may also be at risk of

delinquency and problem drinking. This is consistent with a body of research which suggests that children of affluent parents are often at risk of deviant behaviour through academic pressures, limited boundaries, and insufficient discipline or consequences from distracted parents (e.g. Luthar & Latendresse, 2005).

### **Implications and Future Directions**

The current research explored youth delinquency and problem drinking from the perspectives of adolescents themselves and those experienced at working with them. The current research was able to build upon existing empirical work by integrating various sociological, biological, psychological, and behavioural perspectives to create a comprehensive narrative of adolescent delinquency and problem drinking using themes identified by participants.

A major strength of the current study was the use of a multi-tiered approach, allowing in-depth insight into the phenomenological experiences of adolescents and relevant stakeholders pertaining to causes of delinquency and problem drinking. However, there are some limitations to be noted. Although it allowed for insight into the deviant youth culture by discussing interpersonal experiences and perceptions of participants, the small sample size cannot be considered representative of the wider population. Similarly, the sampling framework did not purposively sample for individuals from culturally or linguistically diverse groups or rural and remote locations. Furthermore, judging whether data saturation has been reached can be difficult, and it is likely that additional insights could be gained from conducting further focus groups with adolescents (and various other stakeholders) across varying settings and demographics. Ethics protocol required adolescent participants to discuss their general views on the topic rather than personal experiences. Further, there is research to suggest that adolescents may struggle to articulate complex understandings in group settings (MacDonald et al., 2011), which may have lead to heavier emphasis on views

from stakeholders. Adolescents may feel more comfortable expressing their views in one-on-one interviews. In addition, focus groups can be burdened by social desirability issues that can steer discussions in certain directions. Future researchers could attempt to replicate this study using the interview method. Finally, observations of a phenomenon are inevitably shaped by prior knowledge and it is virtually impossible to analyse the data in an entirely inductive manner free from existing theories (Thornberg, 2012). Nevertheless, every attempt was made to engage in reflective practice and approach the data from a point of theoretical agnosticism and pluralism (Dey, 1993; Henwood & Pidgeon, 2003); taking a critical stance towards several different pre-existing theories and searching for new meanings and building upon existing empirical research.

The current research highlighted several directions for future research. First, perhaps the findings from the current study can contribute additional value to the field by integrating pre-existing theories to form a more holistic and multi-disciplinary framework of adolescent delinquency and problem drinking. For example, many identified themes (e.g. parenting practices, peer approval, impulsivity, sensation seeking, perceived seriousness or favourable attitudes) align with a revised version of psychosocial control theory (Curcio et al., 2013). This theory posits that the aforementioned themes are risk factors for adolescent involvement in delinquency and problem drinking behaviours. Perhaps the current research can build upon this existing theory by providing new insights into causes from other disciplines that are not adequately incorporated by the revised psychosocial model. For example, inconsistent or lacking discipline (“cotton wool generation”), social and cultural norms, reinforcing histories (e.g. enjoyment, escape, and status), pigeonholing, social disadvantage, mental illness, and low self-esteem were potential causes identified by participants that have not been considered in the revised psychosocial control model, and their inclusion in this framework may provide a more comprehensive narrative of adolescent delinquency and problem drinking.

Going beyond delinquency and problem drinking per se, the current research could inform other psychological theories of health-compromising behaviours. Although contributing vastly to our knowledge of psychological processes underpinning health-compromising behaviours, models such as the theory of planned behaviour (Ajzen, 1991), the transtheoretical or stages of change model (Prochaska & DiClemente, 1983), and the health belief model (e.g. Hochbaum, 1958) tend not to extend their boundaries to consider the roles of socio-economical determinants, and as a result, discount the breadth and rich interplay of factors highlighted in the current study. For example, there is a body of literature highlighting the deficits of the transtheoretical model, suggesting that it lacks practical utility given that it does not capture the complexity and various dimensions of health-compromising behaviours (e.g., Burrowes & Needs, 2009; West, 2005). Given the complexity of reasons underpinning health-compromising behaviours presently identified, prevention and intervention efforts are likely to require a multi-disciplinary approach, requiring the work of psychologists, social workers, public health practitioners, policy makers, and more.

In addition, responses in the current study emphasised a relatively new concept, the “cotton wool generation”, in which parenting practices of poor discipline and protection from reprimands, along with social and economical emphasis on individualism and acquisition, result in entitled children with little empathy for others. This concept should be tested empirically and cross-culturally. For example, whether adolescents from collectivist cultures (where there is less emphasis on self-gratification and materialism, and more emphasis on social belonging) have similar levels of empathy, egocentrism and entitlement as seen in Westernised adolescents. Given that parenting practices were considered so influential to adolescent initiation of problem drinking and crime, future research could conduct focus groups looking at parental perspectives of such behaviour. Finally, although the current study asked for causes of delinquency and problem drinking separately, seeking views on

causes of delinquency and problem drinking in the same focus group could cause a possible confounding effect. For example, participants may assume that delinquency and drinking have the same (or similar) causes if they are being considered together. This is a potential methodological limitation of the current study.

The combined influence of social determinants (e.g. parenting practices, cultural and societal norms), reinforcement histories (e.g. social endorsement, status), and individual determinants (e.g. personality traits) may directly or indirectly form beliefs favourable to delinquency and problematic alcohol use. Consequently, adolescents tend to perceive marginally deviant activities and problematic drinking styles as “normal” rather than serious behaviours with potentially severe health consequences. Given the breadth and depth of reasons underpinning health-compromising behaviours, a multi-disciplinary approach to prevention and intervention efforts is required.

Considerations at systemic levels could include policies and prevention efforts aimed at increasing compliance with the law through amplifying consequences for misdemeanours. Currently, Australian juveniles have been dealt with separately from adults and treated less harshly than their adult counterparts (Australian Institute of Criminology, 2013). While current Australian policies include cautioning and conducting restorative justice conferences (Australian Institute of Criminology, 2013), the current research highlighted that these lack of consequences serve to reinforce deviant behaviour. Given that the criminal justice system is already committed to holding conferences in order to prevent recidivism, it may be feasible to include additional measures, such as targeting risk and resiliency factors (e.g., involving parents or other social controls), holding educational programs regarding the offending behaviour, and encouraging adherence to community service programs.

In addition, public health advocates could implement informative programs at school and community levels, with the intention of educating individuals of all ages to prevent

transgenerational cycles of deviance, including problem drinking. For example, a preventative program is currently being implemented in Australia to promote trauma sensitive schools. This program focuses on psycho-education, a whole of school approach to understanding trauma, relationship-based practices, and social and emotional teaching strategies to manage trauma responses (Australian Childhood Foundation, 2010). This type of program could be extended to promote understanding of deviant behaviours, including school approaches to resiliency and skill-building. Clinical implications for individual treatment suggest a systems-theory type approach, with the treating clinician aware of the interplay of social, biological, psychological and cultural processes within nesting levels (e.g. family, peer network, school, community) of the adolescents' environment.

### **Key Points**

*What is known on this topic:*

- Adolescent delinquency and problem drinking are highly prevalent among Australian adolescents
- Problem behaviours share common causes
- Several empirical perspectives to explain delinquency and problem drinking independently

*What this study adds:*

- Phenomenological exploration of health-compromising behaviours from the perspective of adolescents and professionals in the field
- Holistic, multi-disciplinary narrative of adolescent delinquency and problem-drinking behaviours
- Recommendations for adapting existing theories in explaining health-compromising behaviours

**Acknowledgements**

This research report was submitted by Angela L. Curcio as a partial requirement for the Doctor of Philosophy in Clinical Psychology at the University of Canberra. This research was conducted with the financial support of an Australian Postgraduate Award PhD Scholarship awarded to Angela L. Curcio. The authors would like to thank participating schools and agencies.

**Author Contributions**

Authors AC, VE, and AM conceptualised and designed the study. Author AC collected and analysed the data under the supervision of author VE. Author AC wrote the manuscript, and authors VE and AM edited the manuscript. All authors approve give approval for the manuscript to be published.

**Conflict of Interest**

The authors declare no conflicts of interest.

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Table 1

*Summary of focus group participants (N = 36)*

Stakeholders	Male ( <i>n</i> )	Female ( <i>n</i> )	Age range	<i>M</i> age	Years of experience range	<i>M</i> years of experience
Private school students	6	0	17	17	-	-
Public school students	2	8	16-17	16.9	-	-
Youth workers	3	4	25-51	35.6	2-22	11.9
School teachers	0	6	30-63	48.9	15-35	26.1
School counsellor		1				
Police officers	2	4	25-64	39.6	2-22	12.8

*Note.* The school counsellor will be referred to as a teacher to protect anonymity.

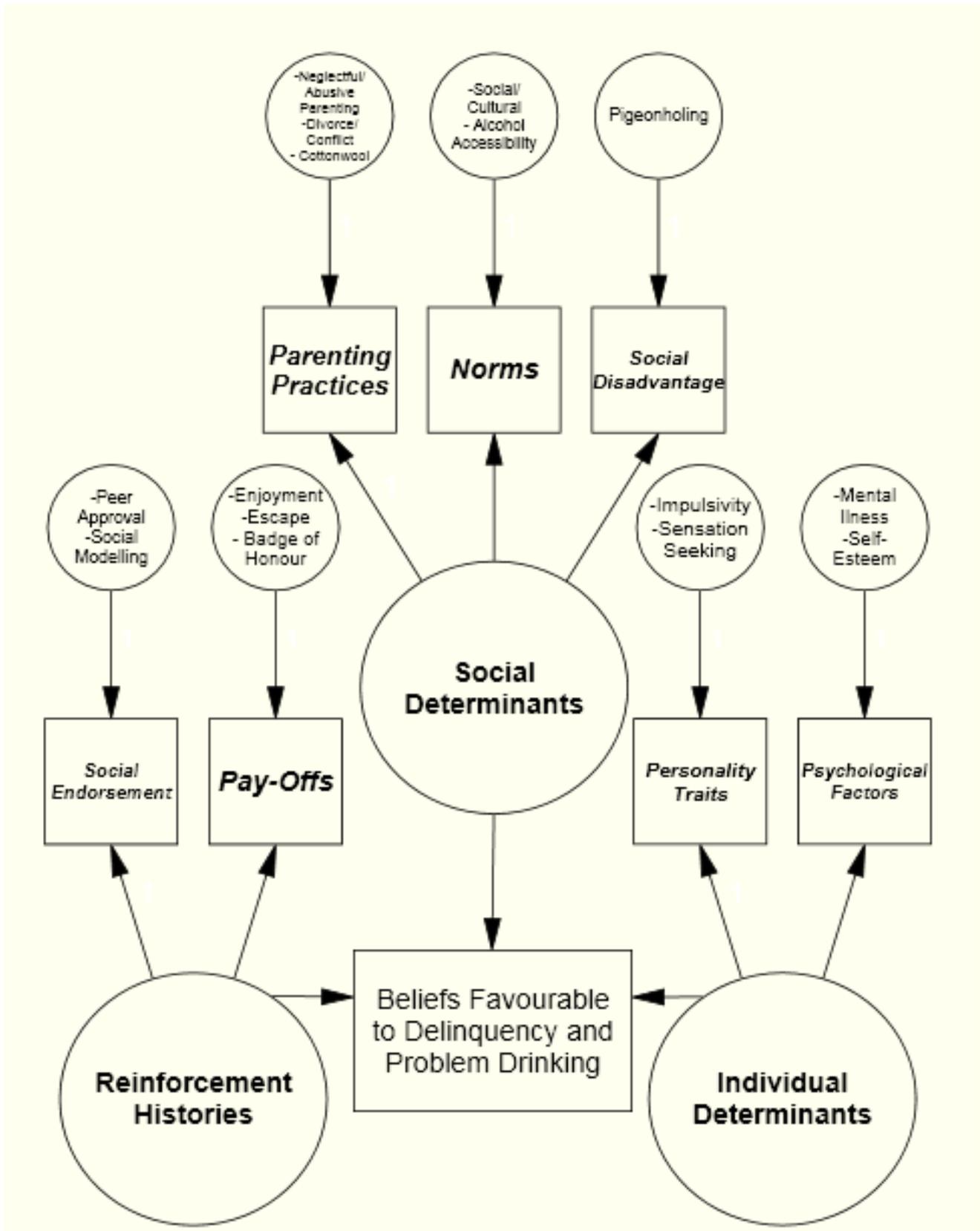


Figure 1. Thematic map depicting global themes, organising themes, and basic themes identified by participants as risk factors for adolescent delinquency and problem drinking.