

Psychoactive substance use in adolescence: The role of coparenting and identity status

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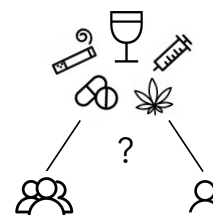
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BACKGROUND

- o Psychoactive substance use during adolescence is an important concern given its potential negative consequences for the health and future well-being of adolescents (Zimmermann et al., 2017).
- o A number of studies have examined separately the associations of individual and contextual characteristics with risk-taking behaviors. Some studies indicated associations with coparenting (parents' collaboration in childrearing) dimensions (e.g., Baril et al., 2007; Teubert & Pinquart, 2010) or identity statuses (actual state derived from the combination of identity processes) (e.g., Jones & Hartmann, 1988; Schwartz et al., 2011). However, no study to date examined simultaneously these two factors.

OBJECTIVE

Examine simultaneously the **associations between psychoactive substance use in adolescence** (alcohol, tobacco, cannabis and other drugs), the **coparental context**, and **personal identity formation**, using a variable-centred and a person-centred approach.



METHOD

Participants

A total of 1105 adolescents (wave 1 of a longitudinal study; 51.2% women; $M_{age} = 15.08$ years; $SD = .63$; 89.5% consider that their biological parents are responsible for their upbringing) from ten public secondary schools in the French-speaking part of Switzerland, completed self-report questionnaire.

Measures

- o **Perception of mother's, father's, and parental dyad's contributions to coparenting:** Coparenting Inventory for Parents and Adolescents (CI-PA; 38 items; $\alpha = .69-.86$; Teubert & Pinquart, 2011) (i.e., cooperation "If I have a problem, my parents solve it together", conflict "My parents agree on whether I did something wrong or not", triangulation "I get involved in my parents' arguments")
- o **Identity processes:** Dimension of Identity Development Scale (DIDS; 25 items; $\alpha = .60-.88$; Luyckx et al., 2006; Zimmermann et al., 2015) (i.e., commitment making, identification with commitment, exploration in breadth, exploration in depth, ruminative exploration)
- o **Frequency of psychoactive substance use:** A revised version of the Risk Involvement and Perception Scale (RIPS-R; 5 items; $\alpha = .79$, Zimmermann, 2010) (i.e., alcohol, tobacco, cannabis and other drugs)

RESULTS

Figure 1. Correlations between coparenting dimensions and psychoactive substance use.

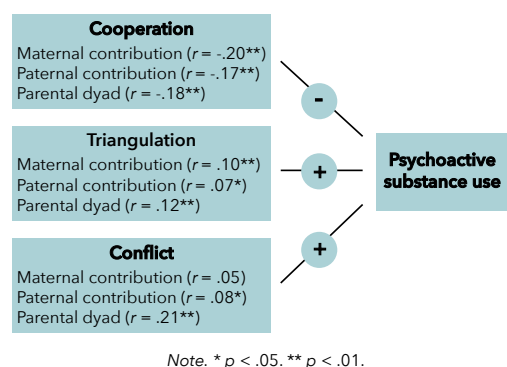
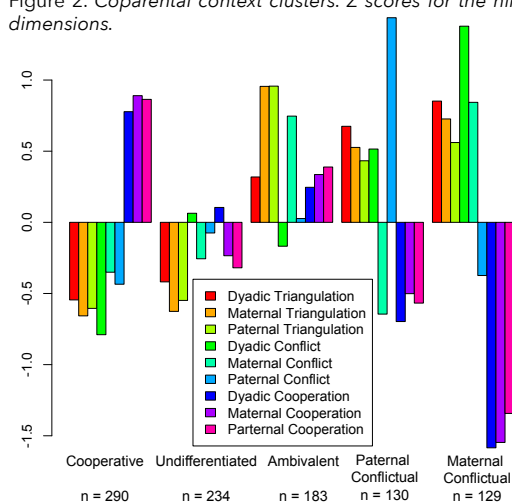


Figure 2. Coparental context clusters. Z scores for the nine dimensions.



- ANOVA's conditions not satisfied → two categories: a substance non-use group and a substance use group.
- **Likelihood ratio test:** significant relation between coparental context and psychoactive substance use ($\chi^2(4) = 18.91, p < .001$).
- **Logistic regression** with Cooperative coparental context as referent: adolescents in **Undifferentiated** ($z = 2.32, p < .05, OR = 2.24$), **Paternal Confictual** ($z = 2.83, p < .05, OR = 2.92$) and **Maternal Confictual** ($z = 4.07, p < .05, OR = 4.37$) coparental contexts had more probability to belong to the substance use group.

In our sample, **identity** didn't have a statistically significant role in the probability of psychoactive substance use ($\chi^2(5) = 7.60, p > .05$). No associations with identity statuses were highlighted and no interaction effects were observed between coparental contexts and identity statuses.

DISCUSSION

- o Family context seems to be important in regard to psychoactive substance use of middle adolescents, whereas identity status seems unrelated.
- o Absence of coparental cooperation seems to play an important role in adolescents' substance use.
- o The warmth, support and loyalty perceived between coparents may be a protective factor in adolescents' substance use, despite the presence of triangulation and conflict ?
- o Results underline the importance of considering the family context in clinical practice with adolescent substance users.