

HOW DO DRINKING, EMOTIONAL HEALTH, AND ACADEMIC SUCCESS OF TEENS INFLUENCE EACH OTHER IN DIFFERENT KINDS OF SCHOOLS?

JOURNAL of HEALTH
and SOCIAL BEHAVIOR

JHSB Policy Brief

Robert Crosnoe¹, Aprile D. Benner¹, and Barbara Schneider²

RESEARCH PROBLEM & DATA

Because American middle and high schools bring together large numbers of teenagers for long periods of time, they serve as sites of peer culture and social and emotional development, in addition to being centers of instruction and learning. Some of the most important conventional tasks of the teenage years, such as academic progress, are tangled up with some of the riskier realities of this period, such as the tendency for teenage peer culture to reward drinking behavior and also generate social stress that taxes emotional health. The goal of this study was to examine this tangle of teenage experiences and how it varies across schools with different kinds of peer cultures, with the broader objective of highlighting connections between educational and health policies.

To pursue these goals, we estimated structural equation models to examine the two-way influences between drinking and poor socioemotional health (e.g., feelings of not fitting in socially, loneliness) over two years of secondary school for teenagers in a nationally representative sample of American youth: the National Longitudinal Study of Adolescent Health. With these data, we investigated whether the exchange between drinking and poor socioemotional health led to increases or decreases in academic achievement over time and whether this exchange was similar or different across schools characterized by more or less densely connected peer networks with high or low levels of drinking.

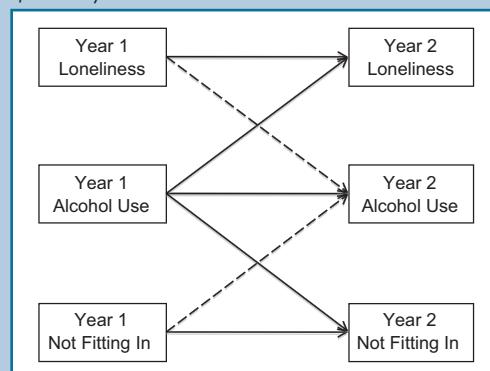
KEY FINDINGS

- Poor social and emotional health do not predict changes in alcohol use from year to year, suggesting that teenagers do not generally turn to drinking to cope with problems they are having with peers at school.
- Drinking (and binge drinking) predict increasing levels of loneliness and greater feelings of not fitting in socially at school from year to year, suggesting that drinking is more likely to be a source of social isolation than a means of integrating with others. This link between drinking and declining socioemotional health is a key way that drinking disrupts academic progress over the course of middle and high school.
- Teenagers' drinking is most likely to interfere with their socioemotional health when they attend schools in which peers are densely connected with one another and have low rates of drinking, suggesting that drinking is most isolating when it makes teenagers stand out from a tight crowd with few other social opportunities.

POLICY IMPLICATIONS

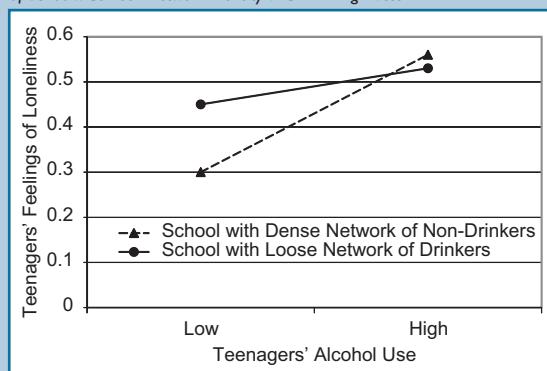
Efforts to support the academic progress of secondary school students have ramped up in recent years, driven by concerns about the educational performance of American youth compared with their counterparts in other countries. This study adds to the growing call for such educational policies to expand their focus beyond the formal instructional, curricular, and structural components of education that may support or depress student learning and achievement to also consider the ways in which seemingly nonacademic factors pose academic risks. Attending to the socioemotional health of students and paying attention to the peer contexts of schools that are conducive to such health (or not) can promote the academic bottom line of schools while also serving the general health and well-being of their students.

Links among Drinking and Poor Socioemotional Health over Two Years of Secondary School



Note: Solid lines represent significant paths. Checked lines are not significant.

Links between Teenagers' Drinking and Loneliness, by the Combination of Schoolwide Peer Network Density and Drinking Rates



JHSB Policy Brief 53(2), June 2012. DOI: 10.1177/0022146512449817.

Crosnoe, Robert, Aprile D. Benner, and Barbara Schneider. 2012. "Drinking, Socioemotional Functioning, and Academic Progress in Secondary School." *Journal of Health and Social Behavior* 53(2):150–164.

For full text of paper go to: <http://www.asanet.org/journals/jhsb/>

¹University of Texas at Austin, Austin, TX, USA

²Michigan State University, East Lansing, MI, USA