'Yelling in the Face of Life': Addressing the Concept of

Risk and Risky Decision Making in Adolescence

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Supervised by Professor Jason Ditton

Department of Law, University of Sheffield

Contents

The Role of the Self; Optimism, Experience and Knowledge

Do adolescents consciously choose risky behaviours, or do they fail to perceive the danger in what they do? If they understand the risks involved, are these taken willingly (or even enthusiastically), or are they taken on reluctantly in order to fulfil some other goal?

(Harre 2000: 207)

7.0. Overview

The challenge of the two forthcoming chapters is to investigate those biases of judgement previously mentioned in the working definition of risk. We have learnt from the preceding chapters which types of risk young people engage in, some of the societal forces which may exacerbate this behaviour and the way in which this concept is perceived and used. The focus now turns to address the reasoning behind such decisions. Boyne (2003) outlined 3 key concerns for investigating risky decisions: knowledge, beliefs and interactions. Alternatively, Irwin (1993 in Davis 1999: 25) suggests 3 key umbrella factors which should be accounted for in an analysis of risk taking behaviour. 'Biopsychosocial' which accounts for variables such as race, gender, hormones, and aggression; 'Environmental' which includes for example family, schooling and peers; and 'Precipitating' which stem from Biopsychosocial and includes, amongst others vulnerability, experience and knowledge. In addition Bingham & Shope (2004) note that the 'perceived environment system (i.e. parental and peer influence), the personality system (i.e. feelings and perception about the self) and the behaviour system (i.e. problem and conventional behaviours)' all factor as 'psychosocial' regulators of adolescence. The framework of such an analysis is

obviously varied, however the components amount to much the same. It is naïve to conceive in contemporary debate that decisions about risk can be entirely based on one domain, that of either structure (environment) or agency (personality). This research is influenced by the more recent work of Giddens (see Vaughan 2001) which suggests that an all encompassing view of human behaviour, not simply as social or individual entities, but as amalgams of equal weight would adequately acknowledge the complexity of the decision making process. Therefore via a comprehensive review of the risk literature the following dimensions were identified which support this discussion and incorporate many of those previously cited. Firstly turning to personality factors and entitled 'the role of the self' features of optimistic bias, experience, knowledge and sensation seeking are analysed. Secondly turning to environmental factors, and entitled 'the role of the other' parental and peer influence will then be discussed[1]. Conclusions will highlight their specific relevance to cannabis decisions and the wider forum of variant risk taking. Throughout these chapters, evidence will be cited to support the identification of decision making factors from the primary (quantitative) and secondary (qualitative) data collection. Close attention will be paid to the preceding chapters and the discussion will make the links between decision making and the conditions of the Risk Society.

7.01. Personality Factors

The essence of risk taking in the Risk Society is the management of uncertainty and self-affirmation, although as variables, such reflexive concepts appear difficult to measure. Therefore the results of relevant studies often claim support for complementary features. For example Jessor & Jessor (1977) highlight a number of

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[1] It is to be noted that the most prominent biological determinant, gender, has also featured heavily in this risk context in Chapter Four.

cognitive reasons for adolescent engagement in risky behaviour; to appear in control, to deal with anxiety and failure, to confirm identity, and as a rite of passage into maturity (Gonzalez *et al.* 1994: 701). In addition a recent European survey concluded rather simplistically that 'curiosity' was the dominant reason given for experimenting with drugs (EORG 2002 in EMCDDA 2003). It is obvious therefore that internal questioning has been found to influence many of decisions made: who am *I*? what shall *I* do? and why should *I* do it? These questions are influenced by two key overarching themes – self preoccupation and the search for pleasure.

Firstly we refer to the work of Elkind (1967) who coined the phrase 'personal fable' to account for why adolescents seemingly appear to view themselves as immune from risk. Such opinions were based on the work of Piaget in the 1950s. During adolescence, Piaget found that young people developed the cognitive ability to form hypotheses and explanations, moving away from the 'concrete' to the 'possible' to include concepts of prospect and belief (Coleman & Hendrey 1990). Elkind developed his suggestion to include social cognition and the ability to hypothesise about the thoughts of others. This preoccupation led to 'egocentrism' and the belief in personal uniqueness. Due to the emphasis on individual accountability and the decline of collective action, characterised by the Risk Society, it is not untoward to suggest that young people will develop such a preoccupation and thus a biased perception of risk.

Such a concept is noted here as relevant to the pressures of the Risk Society and the desire of young people to seek pleasure. Zuckerman's theory of sensation seeking (1964 in Horvath & Zuckerman 1993) is a well-used explanation of adolescent risk taking. Jessor & Jessor also found that 'problem behaviour' was concurrent with pleasure or fun. Subsequent studies of offending have also cited the 'buzz' factor as an

explanation for such behaviour (Katz 1988, Hagell & Newburn 1994 in Croall 1998), and specifically drug taking has been accounted for by the 'thrill', just as vandalism has been as a fun expression of creative art (Anderson 1994 in Croall 1998).

Crime can therefore be more than a response to boredom ... by providing a more exciting alternative to school and work.

(Collinson 1996 in Croall 1998: 131)

Boredom is endemic to adolescents because there is much in their lives that they do not control.

(Csikszentmihalyi & Larson 1984 in Warr 2002: 82)

Emotional engagement in sensation seeking (Lupton & Tulloch 2002: 119) can be linked to the affect model. Slovic (2003: 45) argues that young people 'do not adequately understand and appreciate the risks involved (in smoking)...they are lured into the behaviour by the prospects of fun, excitement and adventure'. Secondly he announces that young people do not even *consider* the concept of risk whilst making their decision to undertake the activity. It is only some time after, when they smoke regularly or become addicted that they begin to appreciate any risks to health. For example, as young people can find little evidence to demonstrate what is it actually like to have lung cancer or heart failure their perception is of happy, healthy smokers. The umbrellas of sensation and self create the links between decision making and the Risk Society, under which optimism, experience and knowledge will all be tested.

7.02. Environmental Factors

In addition to internal pressures faced by young people, the influence of the social environment on adolescent behaviour cannot be ignored. Social control theory provides

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one such explanation of adolescent behaviour. The diversity of social control ranges from the bond with the perceived risk environment and that with significant others. Previous research has measured social control via a range of variables. In the work of Bingham & Shope (2004) for example, parental monitoring, parental permissiveness, tolerance of deviance, parental orientedness and marks in school were all explicitly linked.

Considering the social theory developed by Lyng (outlined in section 6.12), links can be made specifically to adolescent behaviour.

> One specific implication of Lyng's work for the study of dysfunctional risk taking adolescence is the suggestion that risk taking may be primarily motivated by an attempt to gain personal control over an environment viewed as largely controlled by adults.

(Anderson *et al.* in Bell & Bell 1993: 166)

Smith (1995: 230) also notes the double-edged character of adolescent risk taking.

> Risk behaviours entail not only the risk of physical injury, but also a suite of social costs and benefits. Thus, in respect of adolescents, two activities may carry the same objective risk[2] but vary considerably in the extent to which they engender peer approval or parental concern. By incorporating these additional components one may explore the socially grounded risk environment of adolescents.

The impact of another, be it one of control and authority or friend and peer has obvious implications for the three aforementioned questions as the young person asks: who are *they*? what do *they* do? and why do *they* do it? The behaviour and opinions of others, coupled with the desire to rebel (from parents) or conform (with peers), therefore works alongside those specific to individual personalities. The conditions of the Risk Society suggest that collective action has been replaced by excessive individualism. Other

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[2] For those that believe that risk can be measured, classified and predicted, as opposed to the perception of that risk by others.

commentators suggest that the role of the other (specifically peers, Denscombe 2001a) is negated for the superiority of self identity. Such proposals will also be tested specifically as factors of parental and peer influence.

The focus of this research, after identifying how quite broad theories may impact on adolescent risk taking, turns to investigating specific risk perception factors. In attempting to appreciate the way in which young people consider risk decisions and place these in the context of their own lives, a detailed investigation of some of the factors which may influence their judgments is necessary. The factors discussed here are not mutually exclusive. The features of each can be intrinsically linked to provide a theory of risk taking and intervention that will be examined in the final chapter.

7.1. Optimism

7.11. Personal Fable

The first factor that was identified from the literature as relevant to adolescent risk taking was the concept on invulnerability. Paying closer attention to the work of Elkind and others, invulnerability and specifically personal fable is described as

> the belief held by many adolescents telling them that they are special and unique, so much so that none of life's difficulties or problems will affect them regardless of their behaviour

(Jack 1989: 334)

The expectation that as adolescents, they are somehow immune to the adverse consequences of taking risks is apparent in many spheres of daily life, from unwanted pregnancies, to stealing, cheating and lying. Personal susceptibility surrounding the

likelihood of possible harm therefore often turns out to be unrealistically optimistic. These decisions are also susceptible to context. Under the gaze of uncertainty (found in contemporary society) optimistic bias will increase to the degree to which it is based on a greater perception of failure. The temporal proximity of possible outcomes also controls bias; when outcomes are not apparent for sometime (e.g. health risks of smoking) optimistic bias increases.

7.12. Optimistic Bias and the Illusion of Control

The key distinction must be made here between voluntary and involuntary risk taking. If an individual is voluntarily engaging in risk behaviours any optimistic bias or under-estimation of risk could lead to potentially damaging consequences not least for the individual. Attention must be paid to how young people perceive the risk of their behaviour and how they think this will affect their actions. It is important to note that optimism should not be interpreted as stupidity or ignorance. As Armor & Taylor note (2002: 338) individuals are not indiscriminately optimistic or entirely unreasonable in their predictions.

Lyng notes that it is the illusion of control over a situation that generates such feelings of invulnerability.

> As many commonsense observers of young people are aware, adolescents often harbour an abiding sense of their own immortality. Thus, if the illusion of control allows edgework to appear less threatening than it actually is, then young adults are good candidates for edgework since they are particularly susceptible to this illusion

(Lyng 1990: 872)

7.13. Overestimation and Overconfidence

The preoccupation and tendency to 'imagine that they are constantly the object of attention of a rapt audience (Arnett 1989: 172) adds to the feelings of personal uniqueness, which in turn develops into an invulnerable status. In addition optimism and specifically addressing the concept of 'it won't happen to me' is also embedded in the overestimation of peer involvement (Benthin *et al.* 1993: 158). Rather than using the idea of the self as the indicator of personal optimism and invulnerability, young people also justify their ability to avoid harm by suggesting that everybody else is doing it. This additional frame of reference highlights the overlap with the 'role of the other' discussed in the next chapter.

The recent application of the principles of optimistic bias and the imaginary audience in the overconfidence heuristic is taken directly from the work of Kahneman, Slovic & Tversky (1982).

> People …tend to be sure that bad things 'wont happen to them'. Even though exposure to smoking …etc is the same for one person as it is for another, each of us tends to see ourselves as being at a lower risk level than our neighbours

(Anderson 1998:4)

Furthermore it is suggested that individuals are internally optimistic of likely events. They conceive future successful scenarios and reject the possibility of multiple (negative) outcomes or alternative scenarios (Buehler *et al.* 2002: 253). It is with this focus on success that overconfidence occurs. The rejection of multiple outcomes also alleviates past experiences and the experiences of others from this equation. The ramifications of omitting past (negative) experiences from the frame of judgement is discussed in section 7.22, although its relevance to personal vulnerability is noted.

The above comments link closely to the notions of confidence and trust as defined by Luhmann (1988) and latterly in the work of Giddens (both cited in 1990: 31) cited below.

> You cannot live without forming expectations with respect to contingent events and you have to neglect, more or less, the possibility of disappointment. You neglect this because it is a rare possibility, but also because you do not know what else to do. The alternative is to live in a state of permanent uncertainty and to withdraw expectations without having anything to replace them.
>
> In a situation of confidence, a person reacts to disappointment by blaming others: in circumstances of trust she or he must partly shoulder the blame and may regret having placed trust in someone or something.

The first comment, relevant to adults alike affirms why we are drawn to this notion of confidence, the dismissal of negative consequences and a sole belief in the positives. The troubling world of adolescence may mean that even voluntary risks are conceptualised in the same manner. Trust, according to the above, may not seem appealing for young people, given that optimistic bias suggests a perceived removal from blame. To be confident, and then blame others for failure, has more relevance to the notions of optimistic bias and personal fable. If the individual follows the path of confidence, and the 'other' is the expert system, a link can be made to the scepticism and mistrust suggested by Beck and Giddens.

7.14. Vulnerability

In contrast to this debate research into the field of adolescent invulnerability and optimistic bias has shown some inconsistencies. Milan *et al.* (2000) tested invulnerability with regard to cigarette smoking (mean age 16.7). During this study the researchers asked respondents how likely they thought it was (on a 5 point scale) that they would experience the negative consequences of smoking (e.g. chronic cough). Following the remit of optimistic bias, theory would hypothesise that smokers would

perceive themselves as relatively invulnerable to apparent risks. The study found that smokers viewed themselves as more vulnerable than non-smokers to all smoking related items. In defence of this factor it may be the case that optimistic bias only dictates initial or experimental risk taking behaviour. As the features share similarities with that of 'affect', noted by Slovic, and associated with initiation, this conclusion is all the more likely. Perhaps only once caught in a spiral of use does the realism of personal vulnerability becomes clear. As Armor & Taylor note (2002: 347) 'being realistic offers no guarantee that one's prediction will turn out to be accurate'. The functional aspect then in optimistic prediction, the alleviation of demoralising inaccurate predictions, may be of some use to the formulation and continued morale of the self.

In contrast to suggestions that optimistic bias involves a tendency to counteract the influence of previous negative experiences Denscombe (2001b: 294) uses the concept (taken from the work of Slovic *et al.* 1980, and Kahneman *et al.* 1982) of vividness to reinforce such an effect.

> The vividness of the risk,..., has a bearing on peoples perception of how likely it is that a risk outcome will actually happen. Vividness tends to heighten peoples awareness of the risk and tends to make them more conscious of the consequences

(Denscombe 2001b: 294)

Therefore, in certain situations of risk, young people may use their experience of critical incidents to ground a sense of their own mortality. In addition and again used in contrast to many of the above points is the concept of dread.

The dread factor concerns the depth of fear caused by a risk. It is influenced by a number of variables but arguably one is the extent to which one feels *personally vulnerable*. When they feel vulnerable to a risk it arouses passion, it causes worry, it increases their fear and sense of horror about the risk outcome

(Denscombe 2001b: 294)

If adolescents make decisions based on the belief that no harm will come to them, where is element of dread and fear that should make them feel personally vulnerable? Again one has to question the relative number of critical incidents found amongst the risk taking population. Although it is appreciated that a negative experience may lead to fear, the lack of such incidents may allow such accounts to be neutralised by the majority.

Byrnes (2003: 12) concludes that evidence used to contrast the adolescent invulnerability hypothesis have shown that a) adolescents and adults tend to rank the likelihood of negative consequences similarly, b) there is no dependable relationship between egocentrism and risk taking, and c) many adolescents *over*estimate their personal likelihood of a negative consequence. He continues to suggest that previous studies have measured invulnerability by asking a question about the likelihood of a peer experiencing negative consequences. It is important to note that these studies indicate that 'risk takers believe they are less vulnerable than their risk avoiding peers', not the implication that adolescents believe they are invulnerable (Byrnes 2003: 13). In addition general criticisms have cited the failing of cognitive descriptions of adolescent decision making as simply an inability to provide sufficient empirical evidence to support the hypothesis (Millstein in Bell & Bell 1993: 55).

Even given these criticisms, the link between optimism as a cognitive coping strategy and those presented in Chapter Five strengthens the rationale for inclusion of this factor.

Optimistic bias is used by young people to justify their actions, minimise the perception of risk and block out any previous adversities. As Giddens suggests, to always harbour disappointment is to allow the uncertainties of society to become paramount. For young people optimism becomes the search for satisfaction. The concerning elements of such a property, although enabling the development of the self and transition through adolescence, may be placing these young risk takers in heightened situations of possible harm because of illusions of control. Whilst this thesis is supporting the functional development of the self as an acknowledgement of coping with everyday life, the costs of such optimism and perceived invulnerability need to be minimised.

7.15. Cannabis Vignette Analysis

In order to investigate the feature of optimism the sample of young people were asked to provide solutions to a hypothetical situation.[3] Their answers were collated both quantitatively and qualitatively.

During the lunch break at school one of Adam's good friends, Matt, tells him that he has some cannabis in his pocket. He tells Adam that he has to see the Head teacher that afternoon and he is sure he will get caught with the drug. Matt has been in trouble at school before. He asks Adam if he could look after it for him until the end of the day. Do you think Adam will take the cannabis and help his friend?

If Adam is caught he will be in serious trouble. But Adam believes that he is much *less* likely to be caught, as he has never been in trouble before. Do you think Adam will still take the cannabis and help his friend?

Even if he is caught, Adam thinks he is much *more* likely to get away with it as he has never been in trouble before. Do you think Adam will take the cannabis now and help his friend?

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[3] The vignettes used a variety of male and female character names. It was not necessarily the case that questionnaires were administered according to gender. Results show that the gender of the character did not significantly affect the hypothetical decisions made. See Appendix D questions 19-21 for those related specifically to optimism.

If the young people in the sample adhered to their risk taking label, it was assumed that they would accept the risk of possessing cannabis to help their friend. The real test was to envisage through the focus groups whether this decision was influenced by feelings of personal invulnerability. Some 56.3% of the sample suggested that they would take this risk, showing that more than half of the sample was harbouring some notion of optimism. The discussions surrounding this decision were influenced by personal invulnerability, for example where no fear of punishment was shown or rather the optimistic belief that detection was not likely was suggested. Furthermore the negative consequences were well known indicating that such a decision was not based on ignorance. Evidently in this situation the consequences were not feared.

L   he's not gonna get caught is he

M   there's not much chance, it's in his pocket

L   if he's not much of a trouble causer, then he's not gonna get caught

(mY10)

W   I don't think like, it's just exclusion innit, I mean really how many days, like exclusion you're only out of school about three or four days

is it?

W   then you come back in, it's like, not permanent like expulsion

Y   it depends what exclusion it is, if it's internal or not

Z   it's not that bad is it

W   like, some people don't see it as punishment as that bad anymore, I mean most people like it, it depends what kind of person he is, some people see exclusion as like a day off now

(mY11)

However the value of friendship was a prominent influence in this situation. The sample showed that optimism was necessary to justify helping a friend.

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S   cos she's right good friends

T   cos she's your mate innit, you have to

S   help her out

T   yeh you have to help them out so they don't get into trouble

In addition peer loyalty was expected if detection became an issue.

D   cos, if you do end up, if you pass it on to a friend, say I pass some to (E), if he got caught later
    on that day I'd tell them, if I was a good friend I'd tell them it was my drugs

The notion of consideration for others could be used as evidence against the egocentric outlook of young people and the decline of collective responsibility.

For the 27.8% that said no to the risk, the reasons given were not necessarily due to personal feelings of vulnerability. The majority of the responses suggested that the sample were inclined to think that individuals should be responsible for their actions and not place such demands on a friend.

LL   I'd be like you brought it, it's your responsibility

In contrast, for the minority who were risk averse, the notion of individual accountability supported their decision. It may be the case that such a condition of contemporary life is applicable to those who strive for risk aversion, whereas collective responsibility and support is more apparent with risk takers. As such a feature was theorised in part with involuntary risks and the search for safety rather than active engagement this conclusion may carry significant weight.

Very few respondents changed their decision during the additional scenarios changes which were also based on personal fables. It was believed that the nature of a good track record may influence the sense of optimism. However, the concept was not thought to alleviate the seriousness of the offence or the likelihood of detection.

B   he'll still get done for it because it's cannabis, it's a big drug isn't it

(mY10)

M   oh aye they're gonna say cos it's your first time
L   it don't make a difference

(mY10)

Other factors which arose from the discussion were that knowledge (the *fact* that we are not invulnerable) would also greatly influence this decision. It was noted that experience (either personal or from others) was not directly cited as affecting decisions designed to challenge optimistic bias. Furthermore there was no discussion surrounding the influence of parents.

The focus groups data showed a realistic appreciation of the possible consequences of possessing cannabis on school property however they were not fearful enough to deter the behaviour. In the majority of responses peer influence was the greatest push towards risky action.

Analysing the quantitative data presented in the Chapter Six (Table 6.7) could also allow inferences to support the above hypotheses. If young people show high levels of worry about risk it can be assumed that their sense of optimism is relatively low. Low levels of concern for the use of alcohol (coupled with the high levels of participation) indicate that the sample show signs of biased optimism. The relatively high level of concern for cannabis and lower level of use perhaps show that such a concept had less relevance for this sample.

Graph 7.0 Percentage of respondents who were worried about the risks of the following activities
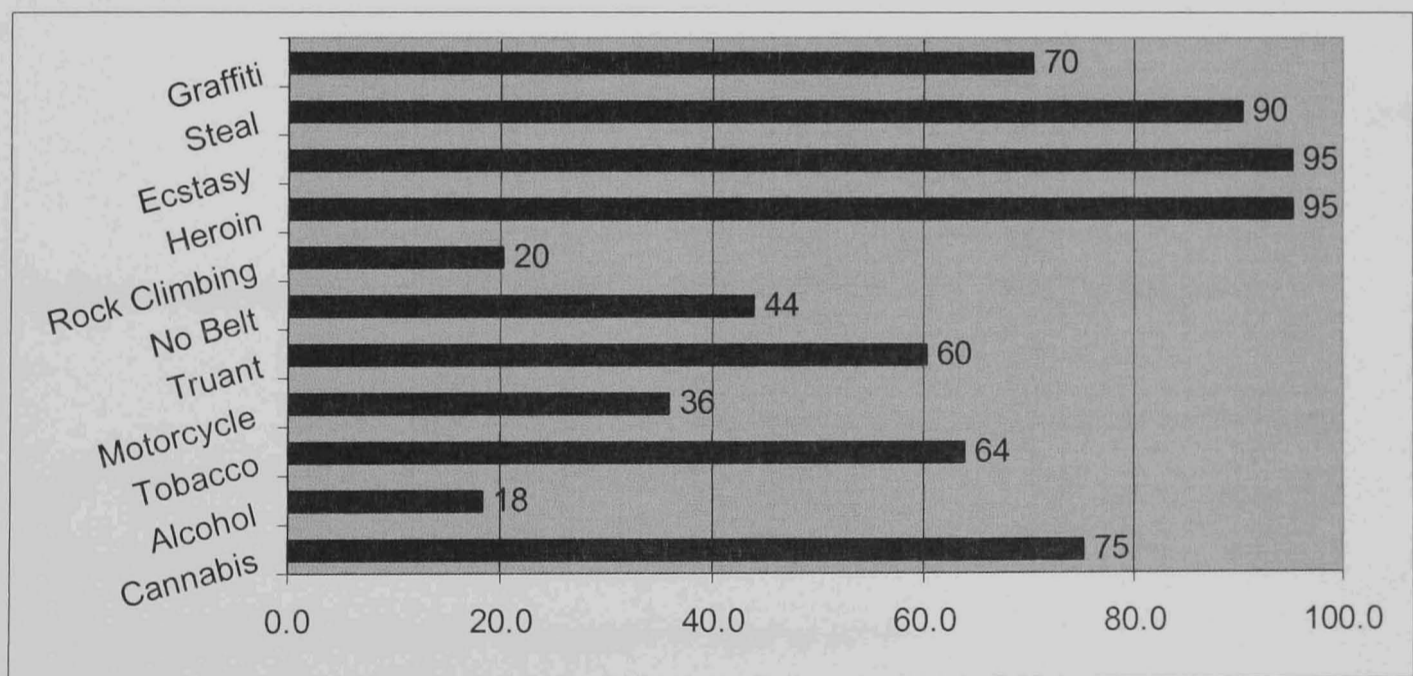
7.16. Multiple Risks Analysis

By investigating a wider pool of data[4] using the tools provided by Phase I of the analysis, additional comment can be passed on the influence of optimism, invulnerability and overconfidence. There was evidence from the focus groups to show that some respondents believed that they were somehow immune to the consequences of certain acts. It should be raised here that these remarks were not common and were not noted in any of the older (Y11) focus groups. One respondent claimed that drinking alcohol brought her out in a rash, however she continued to drink. She believed that if she controlled the amount she drank she could prevent the rash from spreading to her face (fY10). She was unaware of any more serious consequences she might experience. Another respondent, replying to comments about the long-term affects of smoking, said

F   mind you, if you don't smoke and you just have a couple of fags its not really gonna do owt is it

(fY10)

Another respondent expressed the same thoughts about smoking cannabis.

M   most riskiest thing, that aint risky smoking weed!

L   I know it aint!

M   I only did it a couple of times, a couple of hundred times!

L   it's not risky at all

(mY10)

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[4] See Appendix I

The belief that everybody else is doing it is a key feature of the optimistic framework. To confirm this one respondent suggested that the perceived frequency of participation would lower her perception of risk.

BB you wouldn't do it would you, I mean it's not like a lot of people would do it if it were, yeh, a
    big thing

(fY11)

The concept of control, or rather the illusion of control, is congruent with that of perceived invulnerability though the path of 'edgework' and is being seen as relevant in many of the examples given. Firstly, we find examples which link control to risky decision making. In relation to optimism and overconfidence it is then noted that the notion of skill becomes more important. The sample showed a certain belief in personal control, as opposed to placing the responsibility for the consequences in the hands of others. The respondents felt that they would rather be personally in control of a situation. This grounds the notion of control in the remit of self management, and is an expected outcome in the Risk Society via the decline of collective action and ideas of trust. Therefore vulnerability is felt if the control is placed in the hands of another. This discourse was in relation to riding in a boy racer car and playing chicken in the road.

F   you cant decide nowt and they're going at what speed they want to go, go where they want to go

(fY10)

K   your life's in their hands, whereas when you're playing chicken your life's in your own hands

MM yeh I think that one's (road) more risky cos it's your decision and you could be wrong

KK and if summut happens you're to blame

LL   I think it's opposite actually, cos I think

OO yeh if you're not in control of car

LL   if you're not in control, you're not like

OO yeh if you knew you were gonna crash and driver didn't you'd think twice about doing it

This issue of control also arose when comparing specific acts rather than responsibilities as seen in the last three examples. Some acts were seen as riskier if the individual did not have the ability to control most of the variables apparent in the act.

Y   yeh but when you're doing stunts on a bike, you're in more control of the bike, but when you're on top of a building, you don't have control of the building

V   you're in total control on a bike, you're not in total control playing chicken

In addition, and somewhat optimistically, some of the sample, in relation to alcohol, noted that control was needed and could be managed to ensure that any possible negative consequences were limited.

X   er I wouldn't know me, it depends, depends cos drinking isn't [risky] because you know your

limit, in moderation

W   it's all about knowing you limit innit, if you can, some people go stupid and drink as much as

they can

\#   you'd rather drink alcohol even though some of you thought it is riskier?

V   yeh but you know when you've had enough

Here again the illusion of control is apparent, coupled with the belief in immunity from long-term consequences. The social context of alcohol use and such perceptions of risk have been extensively researched elsewhere. The empirical work and literature reviews of Horness *et al.* (2000) and Newburn & Shiner (2001) provide similar conclusions. Although providing classification by age and extent of use (something which this thesis avoids) these accounts also touch on 'knowing the limits' and engagement for a 'buzz' (*ibid.*) (see comments below). It is also interesting to note that Coleman & Cater 2005 found that those young people who contextualised their drinking behaviour in terms of a 'buzz' were more likely to report instances of harmful outcomes. Similarities were also found with the social context of young people's alcohol use and that of adults (Horness *et al.* 2000).

It was also apparent during the focus group discussions that control became an issue when strength was needed to reject an activity. This notion was clear in relation to having friends who get in trouble and the ability to dodge the pressure to join in (fY10). In addition the term 'will power' was used in relation to giving up smoking (fY11).

Some respondents believed that strength and will power would be enough for them not to become involved in certain acts. Rather in one case the young female simply suggested that she could stop whenever she wanted to.

> T   I could stop if I wanted to

<div align="right">(fY10)</div>

This reinforces the optimism commonly felt by young people in relation to the ability to give up smoking once they have started (Slovic 2003, 2001).

Following on from control is skill: the ability to control a situation via specific abilities and to do it well. Many respondents in relation to rock climbing, stunts on a bike and riding a motorbike raised this point. Their perception of risk was dependant on their level of skill.

> W   depends what situation is, depends whether you're a good actual bike rider, doing stunts I mean if you're like good on it and you can pull them off and you're in no danger

<div align="right">(mY11)</div>

There was also the concept of being able to 'get away with' detection or punishment as an indicator of participation. These comments were made about disobeying parental rules.

Z   depends whether you get caught by your parents as well though, if you know you can get away

     with it

Y   if you can get away with it, you know you can, I'd disobey

                                                                                    (mY11)

Finally, and noted as the precursor to optimistic decision making, and raised in relation to alcohol use above, is the concept of sensation seeking. It became obvious that the respondents engaged in many of the acts for the pure excitement it gave them. These findings mirror those found by the wider sample of Lupton & Tulloch (2002: 120). There was a common assumption that the young people were keen to get a 'buzz' from certain activities. This word was used predominantly by the younger respondents.

F   she might believe her friends about it giving you a buzz

                                                                                    (fY10)

D   an adult, that had experience of riding motorbikes knows when they've gone too far don't they,

     like I'm gonna have to stop now, whereas kids like us, they see no fear, just get buzz's off it and

     keep going don't they

                                                                                    (mY10)

I   or it [alcohol] might just give you a buzz then you're alright

                                                                                    (fY10)

which would you prefer to do?

M   motorbike, buzzin that innit

                                                                                    (mY10)

In addition the element of excitement is noted solely when breaking prescribed rules.

> T   it depends what my mum tells me cos if she says T your allowed to smoke and you don't do it, that's boring isn't it

<div align="right">(fY10)</div>

> MM I think some risks make it more exciting, like you're under age but you can still go to a pub and have a few like, you can think to yourself yeh I know I'm underage but I'm getting served, and I think that makes you go back for more

<div align="right">(fY11)</div>

Specifically in relation to cannabis use, the attraction of the risk was in the essence of its illegality.

> #   do you think it [cannabis] should be legalised?
> M   no cos part of havin it is risk of it's illegal and getting caught, so then you'd move on to other drugs probably, more dangerous stuff

<div align="right">(mY10)</div>

In contrast to suggestions of optimism there was evidence to imply that many of these subjects were aware of their own mortality. In relation to health consequences, it was noted that hereditary illness (heart disease) or personal illness (asthma) could make someone 'more at risk' (fY10). This was observed again in relation to smoking. One respondent also highlighted the fact that young people will not always elude punishment.

H   you can do it so many times and get away with it but do it one more time and steal something
     small and get caught

<div align="right">(fY10)</div>

The possible consequences of an action (physical harm or injury, mental harm and punishment) can be used to determine perceived risk. There were several types of consequences frequently mentioned by the respondents, evident for all ages and genders. The acknowledgment of such outcomes can be presented as evidence against the case of adolescent invulnerability. There were examples of an acknowledgment of the possible consequences of even minor, seemingly non-risky acts.

E   you could still break your arm on a little jump, even if you fall off your bike on a flat thing you
     still could break owt

<div align="right">(mY10)</div>

Q   depends you might go out with them, you might know them and they're still a boy racer, you've
     still got risks of crashing, and then you've still got risks of crashing when you get in car with
     your mum

<div align="right">(fY10)</div>

The most common response when asked about the possible risks of an activity involved mortality or injury. There was a general consensus that acts that could result in death were riskier than those which may result in injury. Participation in those with lower perceived mortality rates was favoured.

K   cos it's your life innit, if your gonna crash at high speed

<div align="right">(fY10)</div>

<div align="right">200</div>

M   I don't care, chicken, if a car hits you a six miles per hour you're dead aren't you

(mY10)

MM yeh I think bungy jumps are risky, because it's like involving your life in a way cos if cord int attached you're gonna go and you're gonna fall

(fY11)

There was also an acknowledgement of the differences between long term and short term consequences. Immediate consequences (death or injury) were categorised as high risk.

Q   you could drink alcohol and die later on in life, but if you do a stunt and do it wrong you die straight away

(fY10)

KK   but with drinking alcohol it's there for life like, if you get liver cancer then you cant get rid of it

(fY11)

However some respondents believed they would rather participate in acts that had long term effects.

F   [I'd rather] smoke fags, you cant just die like straight away, or get cancer straight away, it takes time

(fY10)

In more than one focus group the young people suggested that the social consequences of an act, the possible punishments, were perceived as worse (or at least equal) than death. Young people are very dependent on their social life and peers, and threats to this security can be perceived as life threatening. Even if an activity is perceived as

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risky (in terms of injury or mortality), it may be viewed as favourable to another that risks social consequences such as being grounded.

Q   I always get scared when she says I'm gonna tell your dad, or tell your grandma, god I wouldn't have a life if my dad found out!

<div align="right">(fY10)</div>

There was also evidence to suggest that respondents disagreed over the severity of the consequences. This young male was unique in his realistic account of risk taking and penalties.

E   grounded! Your not going to die from being grounded are you!

D   no, but its virtually like dyin innit

E   why is it?, in a home! grounded!, your like there on computer, but you'd rather go off a bungy jump, it snaps and die?

D   yeh I would

so you're weighing it up, on the one hand you could die on the other you could be grounded, which is worse?

E   dying!

B   depends how bad thing's that you've done, if its that bad they might change schools

E   yeh but your not dead are you if you move school!

<div align="right">(mY10)</div>

Furthermore, there was an acknowledgement from all ages and genders of multiple risk factors. Not only were the risks of death, injury and social ramifications cited, but it was noted that the possibility of being *at risk* from a multitude of additional (not obvious) factors is heightened by engagement in singular risk taking.

F   if you smoke fags, they don't influence you, but if you have alcohol, it does influence you, so, you might get run over or summut

<div align="right">(fY10)</div>

M   cos you might be strapped to a twig or summut like, or you might fall and land on glass and it might have AIDS on it I don't know, or you might fall on a needle from someone who's got AIDS I don't know

<div align="right">(mY10)</div>

T   it just depends because you could be proper bladdered and walk into a car or you might pass out

<div align="right">(fY10)</div>

If young people feel they are invulnerable to the possible consequences of certain acts it would be unusual for them to also think in terms of safety. Personal fable theory describes a personal immunity to risks, via their own abilities, rather than the intervention of others. However many of the respondents in this study cited safety measures as an influencing factor in their risk decisions. These comments were more frequent in the older focus group discussions. For a number of activities, the respondents described ways in which they could take personal control over making the acts safer.

E   just drink a little bit of alcohol

<div align="right">(mY10)</div>

B   put your seatbelt on

<div align="right">(mY10)</div>

<div align="right">203</div>

In addition, being with someone who had experience in the act was also viewed as making the act safer, and contributed to the overall perception of risk. This again supports the ethos of collective responsibility found in risk seeking and again stresses that it may only be risk aversion which harbours individual accountability.

> B   there's all people there, there's all ... ambulances and that when you do a bungy jump
>
> B   and people that know what they're doing, when your on a tarzan swing its just you and your mates
>
> (mY10)

> Z   in a boy racer they can generally handle it, though they do show off a bit sometimes, generally they can handle it
>
> (mY11)

A solid conclusion cannot be made to suggest that young people are eternally optimistic as much of the data suggested otherwise. A varied response was found from the respondents in relation to this notion, the most interesting points being those which link risky decisions (seeking or aversion) to collective or individual accountability. Successive vignettes and multiple risk discussions will aim to add substance to these findings if such factors are subsequently observed.

7.2. Experience

7.21. The Availability Heuristic

What factors contribute to a young person's sense of optimism or confidence? The literature suggests that many risky decisions are made using experience and knowledge to ground judgements of capabilities and expectations. The way in which the individual

uses experience (first and second hand) can again be grounded in research into biases of judgement. The availability heuristic relates to how easily an event is 'brought to mind' and the content of that recalled image (Schwarz & Vaughn 2002: 98). Initial investigation can again be taken from Kahneman & Tversky's pioneering work. People will tend to estimate the frequency of an event happening based on how memorable it is, thus 'if an event is truly frequent, availability can be a very appropriate cue' (Anderson 1998: 3). However biases occur when the frequency of such memories are distorted. In addition if the event has little personal relevance the content of the image can become distorted. Such a process is known as 'attribute substitution' (Kahneman & Fredrick 2002: 53) whereby a cognitive question is 'substituted' with one which seems easier to answer. During the substitution, certain judgements are given either too much or too little weight that in turn produce bias. For example a young person may consider:

Initial cognition: What proportion of young people smoke cannabis?

As the exact answer is not readily available, an alternative question is formulated and a more conceivable answer given.

Substituted cognition: Do instances of peer cannabis use come readily to my mind?

It is obvious that when such substituted attributes are brought to mind the effect can be to overestimate or underestimate the possible risks involved. Gregory *et al.* (1985 in Cvetkovick & Earle 1988) conducted an experiment to test the mental processing of images. Students were asked to read a story about a road traffic accident and then mentally rehearse events which might lead to a similar event happening to them. 'Compared to students who had not mentally rehearsed an accident image, these

students reported higher estimates of an accident happening to them, and were more favourable to legislation related to traffic safety (e.g. mandatory seat belt laws)' (1988: 10). The use of ad campaigns advocating seat belt legislation using imagery of risk increasing information is returned to in Chapter Nine.

7.22. Lived Experiences

Individuals can either use a lived experience (personal or the lived experience of others) or experiences promoted by abstract mechanisms. Firstly research was found which supports the reliance on personal experience to make risky decisions. 'Critical incidents' is a term used by Denscombe (2001b, taken from Herzberg *et al.* 1959), and is based on the two factors; vividness and dread (introduced in section 5.14).

> it is reasonable to suppose that where someone has personal experience of the nasty outcome with a given risk then there is likely to be a heightened sensitivity to that risk. If people know of the dangers at first hand – if they personally have suffered or have close knowledge of someone who has suffered – the risk is likely to be more real and foreboding for them
>
> (Denscombe 2001b: 294)

Denscombes's questionnaires, interviews and focus groups asked specific questions about first hand experiences with serious accidents and personal experiences with serious illnesses along with death, serious accidents or illnesses of someone close to them. We find that experience overlaps with the vulnerability concept – to have witnessed a risk event with a negative outcome may reinforce to the adolescent the notion of his or her own mortality and invalidate feelings of invulnerability. In support of this Benthin *et al.* (1993: 165) also found that 'those who participate in a given activity also perceive a generally higher participation rate'. Schwarz & Vaughn (2002: 98) note that the more self involving the availability task, the more likely individuals are

to pay attention to specific recall indicators. This is consistent with the availability heuristic, experience and the personal fable ethos.

Zuckerman conducted an experiment which involved asking subjects to rate the risk in of a set of activities and then state the frequency in which they had participated in such events. The correlation indicated that 'the more experience one had doing something, the less risky the activity was judged to be' (Horvath & Zuckerman 1993: 42). The conclusion was that with heightened experience comes a sense of competence and controllability, and hence optimistic bias may follow.

Experienced smokers show similar results. Owen *et al.* (1991: 316) (used in comparison to Milan *et al.* 2000) states that studies show that 'smokers tend to perceive less risk to be associated with smoking than do non-smokers, whether they are adults, or adolescents'. The method often used to derive such conclusions is the 'psychometric paradigm' developed by scientists such as Slovic, Fishcoff & Lichenstein (1982). In support of these results for smoking, Barnett & Breakwell (2001: 172) note that 'other evidence suggests that people with a greater experience of constant and extreme risks may be less concerned'. They give the example of residents living near nuclear power facilities and invoke the processes of habituation to explain this. In contrast, these conclusions differ if the activities described are familiar to the respondent or emit some novel value. Risk ratings for novel activities vary. 'Lack of personal experience with an activity does not necessarily make it seem risky' (Horvath & Zuckerman 1993: 42). Furthermore, in their conclusion the cited authors suggest that in relation to sensation seekers, it may be biology rather than previous experience which accounts for their risk taking behaviour (1993: 51).

Supporting data on participation and risk perception, Natalier (2001) argues that the lived experience is more important when making risky decisions than any other information acquired, especially statistics of fatalities. People who engage in risky activities (like the motorcyclists in her study) do not have access to these figures, or if they do they do not question their significance. Risk is therefore an 'ambivalent' concept (2001: 66), which is undermined by the importance of the lived experience. The motorcyclists in this study measured the level of risk of their activities in relation to 'an idealised experience' or a 'good ride' (*ibid.*: 71). It encompassed the level of control and techniques used to maintain control, the ability of the rider and the demands of the physical surroundings. Note here the comparisons between this activity and drug use – levels of experience, control and surroundings culminate into the 'good trip' experience. This evidence supports that touched upon in section 7.13 which suggested that the negative consequences of personal history or that of others is often belittled. Buehler *et al.* (2002: 98) note that the process of prediction, by its very nature, focuses on the future. Therefore individuals are less inclined to use their past experiences to form predictions.

> People are probably more inclined to deny the significance of their personal history when they dislike its apparent implications. If they are reminded of a past episode that could challenge their optimistic plans, they may invoke attributions that render the experience uninformative for the present forecast.
>
> A focus on the future reduces the salience of others' experiences, and the tendency to attribute others' outcomes to their own dispositions limits the inferential value of others' experiences. Furthermore, our understanding of other people's experiences is typically associated with uncertainty about what actually happened; consequently, we can readily cast doubt on the generalisability of the experiences.

(*ibid.*)

It becomes obvious then that future decision making and risk appraisal is evidently linked to whether previous experiences (personal, witnessed or anecdotal) have resulted

in success or failure. In comparison to the negation of failure, success is also used to boost confidence.

Repeated success might produce an overconfidence in abilities and an appraisal of situations as challenging that should be assessed as threatening. Failures to cope will bring about a downward reassessment of ability, a reduction of self esteem and possibly a withdrawal to less demanding tasks

(Cvetkovich & Earle 1988: 13)

It seems that for young people, either outcome (success or failure) although promoting self esteem and identity, can be detrimental to the vigilant management of potential risks. In the Risk Society young people will be searching for control and pleasure and certainty through bigger and more unknown risks. Such a reliance on positive experiences as a basis for decision making may become problematic.

The link made here is with the concept of knowledge and the way in which the two factors are interlinked.

personal experience or another recent involvement with a risk under consideration will tend to co-determine (along with objective information) judgements and information which tends to contradict generally held cultural beliefs will tend to be discounted.

(Boyne 2003: 70)

Experience therefore becomes 'valuable and useful knowledge'. The education of substance use and of HIV/AIDS can be included here to note that young people are 'also searching for knowledges that are embedded in experience, and recognise these as alternative forms of expertise' (Lupton & Tulloch 1998: 32 in Natalier 2001: 67). Such an alternative knowledge also needs to be recognised by methods of intervention, as is addressed in Chapter Nine.

The attributes taken from personal lived experience are most applicable to decisions about continued engagement in a specific act. Lived experience by its very virtue is only apparent once initiation has taken place. Therefore we find that the attributes of the lived experiences of others are often substituted and used to influence initiation. The role of attribute substitution at the onset of initiation also absorbs abstract, often mediated experiences. Therefore aspects can be obtained via external influences. Heimer (1988: 499) suggested that heuristics and biases developed from Douglas & Wildavsky's remit of cultural theory (although this was not explicated stated in Tversky & Kahneman's work) via the assumption that institutions have a hold over our processes of classification and recognition (Douglas1986: 3). In relation to experience gained from an 'other', Heimer argues that 'what institutions do is to provide us with a series of vivid experiences that then, through the availability heuristic, make us more likely to overestimate some risks and to underestimate others. Institutions might similarly supply stereotypes or that 'social situations have some influence on how people perceive superficially identical risks'. The examples cited include how mothers view the risks of amniocentesis differently than do either fathers or physicians, and how workers and bosses view workplace risks.

Giddens discussed the influence of mediated (printed and electronic media) experience on the self, and claims that such an experience has continually influenced 'both self identity and the basic organisation of social relations' (1991: 4). In this current era the global system has intensified this effect. One such example would be the media hype surrounding ecstasy related deaths, which was massively over reported in relation to the actual number of deaths recorded during the late 1990s. According to the availability

heuristic this could lead people to overestimate the probability of dying from taking ecstasy. Young people who take ecstasy, or come into contact with people who do, thus have two contrasting sets of images influencing their decisions.

The evident consumer culture also promotes the positive mediated experience and can skew perceptions of possible risk. In addition Warr (2002) notes that the increasing influence of the peer group on adolescent behaviour is intensified by what he calls the 'virtual peer group'. The technological advances of the current era have allowed interaction to mediate and no longer rely on face-to-face contact. The influence of the internet, MTV and mobile phones now creates a new social identity 'within which they can develop a self' (*ibid.*).

7.24. Cannabis Vignette Analysis

Following the set marker in the appropriate vignette[5], was the decision to accept cannabis based on witnessed experiences, or were other factors at work?

Adam is hanging out with his friends in the local park. He knows that a lot of people there are smoking cannabis. He has been asked to join in, but he can't decide what to do. Do you think Adam will try smoking cannabis outside in the park?

Adam can see that a few of his close friends have started to smoke cannabis. They look like they are enjoying it and they tell him that it will make him feel good. Do you think Adam will try smoking cannabis now?

Later on that night he sees one of his friends that has been smoking cannabis looking very ill and being sick. Adam has also smoked some of the cannabis. He is feeling fine now but he worries about his health. Do you think Adam will smoke cannabis again?

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[5] See Appendix D questions 33-35

Some 37.7% of the sample said the character would accept the offer of smoking cannabis outside in the park. The focus group discussions created limited acknowledgements to previous experience in reference to this decision. Peer influence, along with decreased perceived likelihood of detection, lack of police deterrent (personal fable) and sensation seeking were however found to influence this judgement.

AA I think if you're inside there's more things that would probably occupy you, but if you're outside and everyone's just smoking it and that, there might not be owt else to do

(fY11)

if your outside the police could drive past couldn't they?

M yeh but if it's a roll up, you could say it was a roll up

L yeh but police cant do nowt

(mY10)

Some 41.1% of the sample said the character would reject this offer. Again peer (non) involvement and perceived higher risks of detection were cited as possible influences.

E unless he's with people who don't smoke it, like if there's people who don't smoke it, don't take it, I don't think he will

(mY10)

Some 32.3% of those respondents who answered negatively to the first scenario, changed their mind to accept the offer based on the good experience of the friend. Trust in the experiences of this friend was cited as one possible reason. Again the majority of the sample opted for the character to decline the cannabis in both situations (56.5%). Interestingly those respondents who were undecided about the first situation split their decision after witnessing the experience of the friend. Exactly half (50.0%) changed

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their mind and said the character would now accept the substance, and the remaining 50.0% continued to suggest they were unsure. No respondents who were initially unsure said they would decline the cannabis after hearing the positive experience

W   it's like if they're close friends and like, he's gonna feel left out and they're all talking about their experiences with it and he's not going to be able to say anything on the subject I think it will affect him, it'll make him want to do it

(fY11)

Of those respondents that said yes to initial cannabis use, 56.1% decided against it after the character witnessed the negative experience. This percentage is considerably higher than those who changed from negative to positive, highlighting the greater influence of the bad experience. For those who were initially undecided, 46.7% rejected the offer and 50.0% remained undecided.

MM not after she's seen what her friends gone through

(fY11)

In addition, 3.3% said they would still accept the cannabis after the character witnessed the negative consequences. Possible explanations acknowledged that good experiences tended to outweigh the bad, and such experiences were not necessarily deterrents. Although a very small percentage, some respondents showed the ability to downplay or reject the messages from negative experiences. It was obvious that the effects of a positive or negative experience had differing biases on decision making.

M   yeh but everyone whitey's eventually who's done it

O   whitey, what's a whitey?

L   when you spew up and it's white

M   yeh everyone who's done it eventually, so he knows after one time of doing it he's gonna be
    alright

(mY10)

The data collected for this vignette suggests that the initial decision to accept was based on issues of invulnerability (location, deterrent) and the behaviour of peers rather than any mention of previous experience (he might have done it before, she might have tried it and not liked it). The decision to reject was based on the same features, substituting invulnerability for vulnerability. There was also a marked difference in the influence of a positive or a negative outcome. A positive experience changed a significant amount of the undecided opinion, whereas the negative consequence had a significant impact on those who suggested initial use.

In relation the abstracted experience the sample did use famous role models and their experience to support their views. In discussions involving the other vignettes the following was heard.

S   no but remember S Club 7, they got caught but nowt happened to them

T   yeh but, it's different cos they're famous, look at R Kelly, he got done for paedophilia and he
    didn't even get done, I think he just got fined and that's it, he didn't get locked up like
    everybody else who gets caught, he didn't get done for it, he got fined and it wont even a lot of
    money either, and if it were someone like, someone like us, they'd get banged up or summut

(fY10)

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M   well you've got to release stress haven't you, Bob Marley, it didn't do Bob Marley any harm did it (laugh)

These comments overlap and contribute to the use of knowledge which is analysed in section 5.3.

It was hypothesised that the amount of times an act was witnessed (Graph 7.1) would be significantly related to risk perception and participation. This was true for the use of cannabis.

Table 7.0 Experience Profile for Cannabis

Correlation Sig N	Ever Tried	Risky
Witnessed > twice	.580 .000 98	-.319 .000 145

The more times the act was witnessed the more likely the sample were to have tried the activity themselves. In addition the more times that act was witnessed the lower the perception of risk. These finding imply that the witnessed acts had predominantly positive consequences. Had most of the outcomes been negative, the opposite relationship would be observed. If the outcomes were more varied, no significant relationship would have been observed. This suggests that the lived experience of others witnessed by the sample was overly positive. This result again has ramifications for the process of drugs intervention and will be discussed in the final chapter.

Graph 7.1 Percentage of respondents who said they had witnessed the following activities more than twice

Graffiti — 43
Steal — 25
Ecstasy — 15
Heroin — 10
Rock Climbing — 44
No Belt — 81
Truant — 68
Motorcycle — 95
Tobacco — 96
Alcohol — 98
Cannabis — 43

(x-axis: 0.0, 20.0, 40.0, 60.0, 80.0, 100.0)
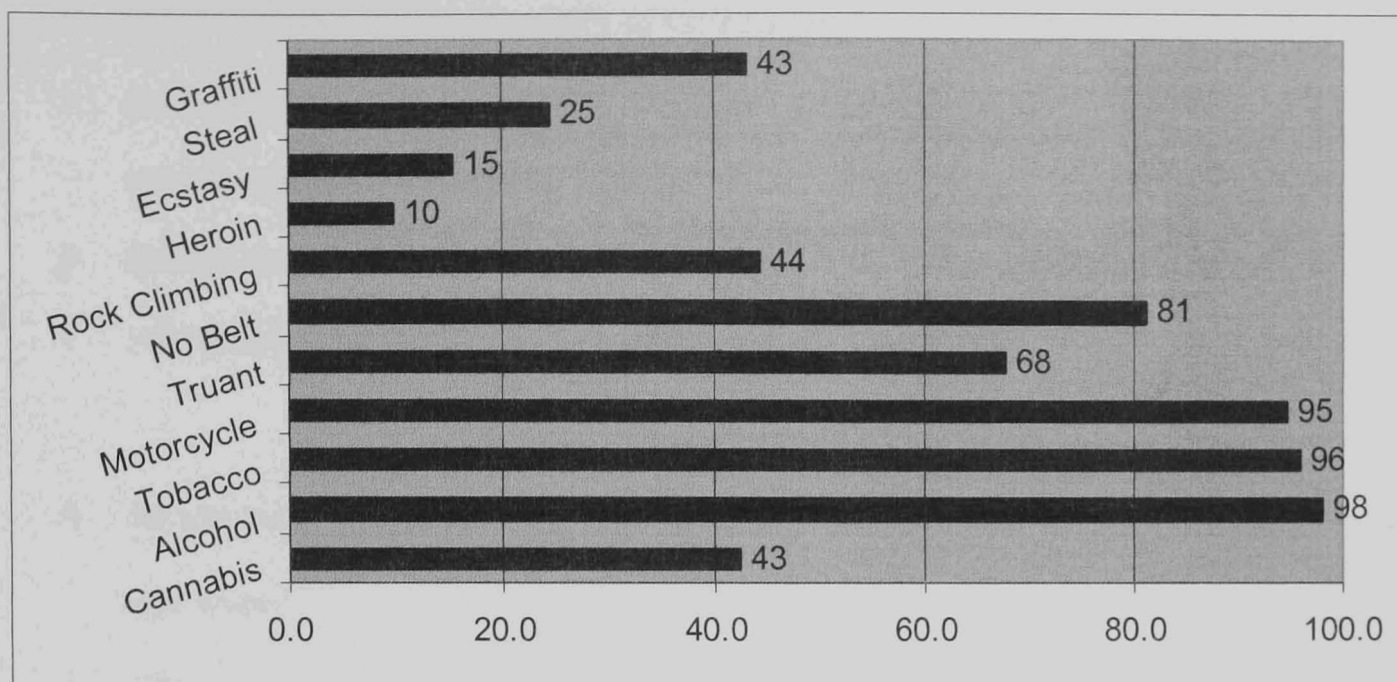
7.25. Multiple Risk Analysis

As opposed to the vignettes which provoked predominantly hypothetical responses, the discussion surrounding multiple risks[6] had the ability to assess directly the lived experience and owned risk perception. It has been concluded that 'the more experience one had doing something, the less risky the activity was judged to be' (Horvath & Zuckerman 1993). The respondents in this study also acknowledged this conclusion. The younger respondents made the majority of these responses. The following example shows a young girl downplaying the risk of fast cars because her boyfriend regularly drives one. In turn she would rather participate in this act than any alternative risk.

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[6] See Appendix E

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I   I get in ___'s car cos like I trust him with my life and everything, but I know he wont crash

K   how do you know he won't crash! Everyone can crash

I   cos I'd kill him! He's a good driver, but, like, I wouldn't run across a road when a cars coming, even though I do it all the time

(to I) so do you think running across the road, playing chicken is riskier?

I   yeh (laugh)

its less risky to get into a boy racer car, is that because you actually do that, based on your experience?

I   yeh

(fY10)

For one respondent a negative experience did not affect his perception of risk. Instead, it affected his willingness to participate in it again. The pair of activities were bungy jump and tarzan swing.

D   most risky is doing a bungy jump, but I'd [rather] do a bungy jump

B   that's cos he's fell off a tarzan swing before and broke his arm (laugh)

D   that was a big tarzan swing

cos you've fallen off before?

D   yeh and broke my arm

(mY10)

For another respondent, a bad experience increased his perception of risk and decreased his willingness to participate again.

M I'd rather do a bungy than a tarzan swing now

\# why?

M cos when I was right young and I fell off

\# which one do think is the most risky?

M tarzan swing for me cos I fell off

<div align="right">(mY10)</div>

In addition to personal experience, the experiences of others were also noted.

Q cos my granddad got right addicted to drink and he still smokes and he got run over cos he was

right drunk (laugh) so I think drinking

<div align="right">(fY10)</div>

In relation to the mediated experience the following comments were made by two males respondents with regard to an advertisement where a bungy jump appears to go wrong. Even though the advert is clearly done in jest the image obviously had a lasting impact on the respondents. It is also interesting to note that the advertised product in question was alcohol.

W I know, you can get your head bitten off by a crocodile! (Fosters advert)

<div align="right">(mY11)</div>

M ... apart from the Fosters advert, jump to it, oh no, that's gonna hurt in the morning (laugh)

<div align="right">(mY10)</div>

The influence of experience is based on the following features – the source (personal, others, abstract) and the image and frequency of the outcome (positive or negative). The evidence has shown that all the above are linked to adolescent decision making. The accumulation of various experiences is expressed as knowledge and the two

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concepts are often explicitly linked. The next section will address the concept of knowledge in more detail.

7.3. Knowledge

It has been established that young people are optimistic about their judgements and one of the reasons for this confidence is their reliance on positive imagery. Such positive images create 'knowledge' of the possible risks and potential consequences, and adjust optimistic bias. The influence of knowledge on the judgements of adolescents follows two paths. Firstly the impact of the Risk Society is noted in the relationship with 'experts'. It is highlighted here whether we adhere to the expert scientist who has the ability to test the harmful content of illegal drugs or, as is noted, the young person who is elevated to expert status based on their own 'lived' experience. However, what must also be addressed is whether young people have a realistic sense of risk and a sound understanding of potential harm. The results again provide a context to the use and processing of information in relation to cannabis related and wider risk decisions.

7.31. Expert and Lay Knowledge

Experts, and expert systems, whether labelled or socially constructed, are synonymous with ideals of knowledge, skills, problem solving and application. The perspective of the experts when it comes to risk is often taken at its word, reinforced by statistical assessments. The layperson, without the means of actuarial investigation, is led to believe the 'official' risks involved in for example, smoking, drug use, caffeine, or the MMR jab. Luhmann (1979 in Boyne 2003: 86) suggests that trust, rather than dealing with the complexities of mistrust, is the easier option. How would we cope with the

insecurities of the Risk Society, coupled with the impossibility of analysing every shred of information? The answer is we couldn't and we don't. Therefore such management demands that all our relationships (with individuals or systems) start with trust (*ibid.*). However conclusions surrounding trust for young people may be somewhat different.

Studies involving the psychometric paradigm show that 'ordinary people...use a broader definition of 'risks' than experts when making judgements about which ones are of most concern to them' (Marris *et al.* 1997). Experts rely on statistics such as fatalities whilst lay people consider a host of qualitative characteristics. Yet we seem to have a reliance on this expert knowledge, even if our judgement, and more importantly our experience, tells us otherwise.

Natalier (2001) continues this argument and draws on the work of Beck (1992) and Giddens (1990, 1991). Natalier claims that the latter sociologists argue that 'we live in an age where we rely on experts to manage and make sense of risks that are unknowable through lay knowledge' (2001: 66). However Beck (1992: 55) argues that 'because risks are risks in knowledge, perception of risk and risks are not different things, but one and the same'. Eldridge (1999: 125) disputes this in relation to the perception of risk of experts and lay people. His example is the contrast between the perception of risk of a casino manager, who uses mathematical probability and will undoubtedly benefit, and the customer, whose knowledge is less thorough. And yet, as Giddens (1990: 91) suggests, experts in many fields, (including health and safety policy) continue to fail to control and regulate the possibility of negative outcomes, which in turn leads society to question the validity of their assessments, a concept he later referred to as doubt (1991: 3). Doubt, Giddens suggests, leads to contestability, revision and possibly abandonment. This is where knowledge overlaps with experience as people, especially

adolescents, accept the health and social warnings but search for their own alternative knowledge base – that of trial, and possibly error. Such a process can contribute to control, risk management and thus self identity.

Bellaby & Lawrenson (2001) found exactly this. The expert's view of motorcycling was that it 'is an extremely risky venture' and imply that 'only the foolhardy would engage in it'. The motorcyclists, via their experiences, contrast such claims, adding that the 'experts concern with their risk taking becomes redefined as the attempted imposition of social regulation' (2001: 368). It could be argued here that this statement be applied to the control of other 'high risk' activities, with drug use having similar credentials.

Marris (1996) suggested that the way society deals with uncertainty is to constantly search for answers from public and private domains. His example relates to the decision to eat healthily. Such a search for information helps us deal with possibly uncertain consequences. This process can be related specifically to young people and drug use. Their choices may be based on public information (drugs education) and law enforcement (legal restrictions) plus private knowledge, desires and emotions. Problems arise when public and private accounts of knowledge do not correspond. Rather than using knowledge to deal with uncertainty, such contradictions increase insecurity and scepticism.

As Habermas suggests (1987 in Boyne 2003: 80) the legal empowerment of the administration of families, education and welfare have exacerbated this expert role, into a 'colonisation of the lifeworld'. What is unfortunate is that this new breed of experts

have emerged at a time when society is resisting their proclamation of 'absolute' knowledge.

> With sceptical spirit of scientific critique now pointed at science itself ... the lay public is invited by the media to sit in judgement upon expertise and to engage in the social construction of counter-expertise.

(Boyne 2003: 101)

Do individuals have a choice but to trust the experts? Garfinkel (1963 in Boyne 2003: 86) noted that the search for an alternative is not necessary as we learn to trust the 'invariant features of interaction context' and 'the ability of ourselves to negotiate them'. We trust that we are part of society with the ability to control and investigate risk. Experimentation, suggests Garfinkel, is simply a way of investigating and confirming what those invariants are. Such a conclusion again bears relevance to young people and recreational drug use.

The overconfidence heuristic is also applicable here. The point here is that not just lay people are overconfident in their assessments of risk. Experts are also subject to the same heuristic when they are forced to rely on judgement. An understanding of this heuristic is necessary, 'since we can't always rely on experts to overcome their biases' (Anderson 1998: 4). These include 'overconfidence in current scientific knowledge, ignoring the role of human error when designing technological systems, and not taking into account the ways in which humans interact with technology' (ibid.: 5).

Knowledge, as we discussed before, can be derived from experience, or it can be taught. In our minds we form a set of images that constitute our knowledge on a particular subject. If we conceptualise knowledge as information or evidence, understanding, is a separate concept, and develops through 'meaning and embodied behaviour. through repetition and action' (Crossley 1995 in Natalier 2001: 70). However understanding in itself has the ability to be biased. The representative heuristic, again developed by Kahneman & Tversky, suggest that our knowledge and understanding of certain events can be influenced by how much they resemble other events.

some probability judgements are mediated by assessments of resemblance (the degree to which x looks like y)

(Kahneman & Fredrick 2002: 49)

Where such representations are the

assessment of the degree of correspondence between a sample and a population, an instance and a category, an act and an actor or, more generally, between an outcome and a model.

(Tversky & Kahneman 2002: 22)

Although a rational actor attempts to pass judgement based on probability alone, certain biases ensue, which allow relevant facts to be ignored. Similarly, if the complete set of facts is not known. alternatives can be created. Again this process is known as 'attribute substitution'. This process has lay reference to the process of stereotyping and is influential to this knowledge debate via the creation of such by institutions (Heimer 1988: 499).

After acknowledging the conflicts surrounding the validity of different sources of information and they way they are used, the content and accuracy of adolescent knowledge must also be tackled. Research by Benthin *et al.* (1993), conducted via psychometric testing, asked a sample 'To what extent are the risks associated with this activity known to people your age?' The results showed that those adolescents who participated in risky activities did perceive the risks as well known. This raises questions about the 'potential effectiveness of information and educational programmes designed to discourage young people from engaging in risk-taking activities' (1993: 165). Cvetkovich & Earle (1988: 12) state that the fact that people know the statistical facts of a particular hazard yet will still engage in the activity is a point which is 'continually ignored by well-meaning public education campaigns which assume that increasing public knowledge about health hazards will automatically decrease risk taking behaviour'. Wilde & Murdock (1982 in Gonzalez *et al.* 1994: 701) also suggest that adolescents are aware of the risks they take when engaging in risky driving.

> The problem does not arise through ignorance of the dangers nor does it result from the failure of young people to understand the key points that are being but across. The problem is that, despite being aware of the risks, they go ahead and do it anyway
>
> (Denscombe 2001b: 293)

This statement is essential to understanding how and why young people make risk decisions. It is also, as Denscombe also suggests, a reason why many substance use education programmes fail. It is perhaps naïve to presume that all risk taking by young people is carried out without a concrete understanding of the risks involved, although undoubtedly this will sometimes occur. Viscusi (1992 in Jamison & Romer 2001) suggested that adolescents overestimate the risks of getting lung cancer from smoking and concludes that smoking is not undertaken in complete ignorance of the risks involved.

One cannot discriminate between teens who engage in risky behaviours and teen who do not. Risk takers and risk avoiders have similar levels of knowledge (superficial and inaccurate as it often is).

(Byrnes 2003: 12)

7.33. Ignorance?

In contrast Lundborg & Lindgren (2002: 166) state that there is now a widespread belief that young people are enticed into addiction (smoking, drinking, drug use) without knowledge of the risks involved, or in ignorance of future consequences. Directly opposing Viscusi's views, Slovic (2000) found that a high proportion of respondents were annoyed with themselves for starting to smoke, implying that this decision was not entirely informed. In addition, Jamison & Romer (2001: 52) found that their sample (14-22 year olds) did not have a 'consistent and realistic sense of the addictive nature of smoking'. Initiation however, may not be entirely informed, but it could be suggested that recreational involvement may be. The lived experience gained after initiation creates an alternative form of knowledge which leads young people to claim they 'know the risks'.

Furthermore ethnographic research carried out by Bellaby & Lawrenson on motorcyclists aged 16 – 68, found that their own perspective of their activity was neither ignorant, nor deliberate (2001: 375). Their view of the activity was three-fold; motorcycling was life enhancing and to not participate was 'wasting your life'. Further, motorcycling was not risky per se, the risks concern the wider environment e.g. other road users. Finally, the risks which were apparent to the riders can be overcome by control and skill, known as 'road craft'. These findings bear obvious resemblance to aspects of sensation seeking and optimistic bias rather than to ignorance.

What is difficult to determine empirically is the source of knowledge, whether correct or incorrect. The section 7.2 suggested that personal or witnessed experience may contribute, as may the images of the mediated source. In addition, the role of the peer group and those in authority (parents, teachers, police officers) may also contribute to knowledge and understanding (sections 8.1 and 8.2). However even if such a source remains elusive, research can contribute to this topic by addressing content via education (with an appreciation of alternative lived knowledge and cultural diversity) and more importantly by managing application. The assumption of adolescence ignorance to lung cancer or STDs had led educationalists to create programmes which highlighted the negative consequences of the said acts. However 'knowledge-based interventions have been found to be uniformly ineffective across various domains' (Byrnes 2003: 12). What can be concluded from the presented research is a failure in educational initiatives which simply provide an information based approach. Either young people do not have the correct knowledge, or do have the knowledge but are choosing not to apply it. What is clear is that young people are engaging in these acts, regardless of any knowledge they may have. Rather than informing young people of the risks involved, the teaching of risk management skills may be more appropriate. The question asking *why* do they go ahead and do it anyway brings the reader full circle with provocation of a discussion about the complex nature of adolescence and the conditions of the Risk Society as cited throughout this thesis.

7.34. Cannabis Vignette Analysis

It was assumed that the content and quality and source of information delivered in the vignettes[7] would affect respondent decision making

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[7] See Appendix D questions 37-39

Adam is in his science lesson. His science teacher is telling the class that using cannabis can make you depressed, it can help give you lung cancer and it is illegal. Adam knows that his friends smoke cannabis and they have never been ill or been in trouble with the police. Do you think Adam believes his science teacher?

Adam decides that his teacher must be telling the truth and he understands the risks involved. However, his friends think that smoking cannabis is fun and it is worth taking the risks. Do you think Adam believes his friends?

After the science lesson, Adam's friend Louise tells him that her mother uses cannabis. She says that her mother is very ill and that using cannabis helps take away her pain. Do you think Adam believes Louise?

Some 59.6% of respondents said the character would believe the teacher about the negative aspects of cannabis rather than the experience of friends. The focus groups revealed that although knowledge gained from school is taken as fact, other factors, including the respectability and superiority of the teacher and the bias of the young people, were also cited as influencing this decision. Very few respondents would not believe a teacher. Furthermore, 56.7% of those who said they believed the teacher could not be persuaded into also believing the experiences of friends. Here we can suggest that the experiences of peers had limited effect on the acceptance of knowledge gained from school. Only 32.2% of those believing the teacher also believed the friends.

M   yeh they're all true anyway

L   there're facts aren't they

\#   so you'd believe him (teacher)

M   yeh

\#   even though your mates are saying no I've never been in trouble?

M   yeh cos they don't know what they're goin on about, they're high as a kite, they're just saying

    cos they're stoned…but what's teachers saying's true so you've got to believe him haven't you

(mY10)

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A large percentage of the respondents said that the characters would believe the information given by friends about the medicinal use of cannabis. Here we see a difference. Respondents may have questioned the reporting of personal experience by friends. However they were much more accepting of this sensitive subject for two reasons. Firstly they did not think that such a subject would be fabricated, whereas, one supposes, personal experience could be. Secondly, the respondents showed that their own personal knowledge came from the media, school education and the experience of close elders rather than their peers.

D   cos, wasn't it cannabis that they were trying to make legal as a painkiller cos it does help pain, all doctors have proved it, you meant to be able to get it on prescription or something now aren't you?

(mY10)

D   people's told me and I've seen it on the news

(mY10)

F   yeh it was on The Bill

was it? What happened on The Bill?

F   there was an old man and he had a shed and his wife was always shouting at him and that cos he was right ill and that and he always said he was in his shed but really he had all these plants

(fY10)

K   yeh my mums friend uses it she's got MS

(fY10)

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Those scenarios designed to test different sources of knowledge showed that young people believed the information they were receiving from a variety of sources. Some of the reasons given for deciding to believe the information were trust and experience of the source rather than the content and/or optimistic bias. Likewise the decision not to believe the source was linked to personal experiences and the experiences of others.

> W   no cos not after his friends are like, they're just going on their experiences, science teacher is an educated person, he's gonna know more about it
>
> Z   friends are gonna be pretending they're cool as well, trying to make him do it as well
>
> (mY11)

There was no discussion surrounding parental contribution to the knowledge debate. In addition there was evidence of the influence of the mediated experience on these young males perception of possible harm.

> M   well you've got to release stress haven't you, Bob Marley, it didn't do Bob Marley any harm did it (laugh) cos right, everybody thinks Bob Marley died of drugs right, he didn't, he was playing football and he had a cut on his leg and it got infected and he died cos of a blood thing, so it didn't do him any harm and he was on it <u>everyday!</u>
>
> L   he knew how to smoke weed
>
> M   I know
>
> (mY10)

These males indicated throughout their focus group that they smoked cannabis regularly. The use of the mediated experience to supplement knowledge of cannabis may also have been a justification for their own use. The fact that a young male had gone to great lengths to investigate his role model shows the desire to become educated on the subject and negate the argument suggesting ignorance.

The sample raised some sound knowledge based conclusions. However, the content of the information, and the decision to believe it was also influenced by the source (levels of trust and experience) and a sense of personal invulnerability. It is interesting to note that the decision not to believe the content of the information was primarily based on personal experience and the experiences of others. This may also be key to why knowledge based interventions fail.

There was also evidence from the focus groups (not specific to this vignette) that some of the sample had a skewed perception of 'correct' knowledge. In relation to the use of cannabis the following was observed. Firstly the legality was misunderstood, supporting claims that reclassification may have confused young people about the risks involved.

it is legal you're allowed to have so much on you as long as you're not passin' it round

(fY10)

T   it is legal, you can have some, can't you

(fY10)

Secondly the health implications were also confused. The interesting point here is that such an unusual belief was suggested by three different groups of people in different school years and of different genders. This may reinforce the power of peer group justification, however the source of this information is not known, nor how it actually diffused across age and gender.

B   doesn't it clean your lungs or summut

(mY10)

Q   dunnit clean your lungs?

S   cleans your system or summut

GG   everyone says it (cannabis) cleans your lungs out and that, that's not true is it?

However accurate understanding, although not detailed, was also observed.

B   depends how much you've got aswell, if you've got like a lot your gonna get done but if you've

just got a little bit...

E   I don't think, it doesn't matter how much you've got you get done

so you were saying (to B) it depends...

B   if your selling it then its more serious, but if you say its for your own use its not as bad, but its

still bad

M   it's [cannabis] as dangerous as any other drug innit, cos it's addictive innit

D   you go right drowsy and lazy and you just want to go to sleep or sometimes if you like enjoy it

you just might want to play football or always laughing all the time, got giggles, gigglies

M   he could just say, teachers aren't allowed to go through your pockets

\#   they aren't allowed to go through your pockets?

M   no they cant touch you, it's your personal space innit

L   no they're not allowed to touch you

\#   so do you know what happens to you if you are caught and you've got it on you?

L   police come in, if they think you've got it, then police come in don't they

M   no but only if they've got a warrant

L   yeh but a police person can (search you) [8]

(mY10)

Again the young males who regularly smoked cannabis gave this final account in support of their own actions. It seems that knowledge may be greater if the situation in which it may be needed is more likely. There is also the suggestion that these males may have had personal experience from which this knowledge was gained.

Interestingly when this sample were asked if they knew the risks, almost 100% gave a strong positive response for all given activities. These results mirror those of Benthim *et al.* (1993) who also found that young people consider risks to be well known. There was no real way of identifying whether these opinions were correct, however as risk perception may be based on the belief that the risks are known this evidence is applicable. Given the lack of variance between these figures further statistical analysis was difficult. As the sample identified that they believed they knew the risks of using cannabis, it is interesting to learn from the focus groups that such knowledge did appear distorted.

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[8] In relation to managing drug incidents, the DfES guidelines for schools note the police should be notified 'without delay' if substances need to be disposed of. In any other incident the school do not have a legal obligation to inform the police. In addition it notes that it is 'not appropriate' for members of staff to carry out personal searches, and prior consent is required to search property (e.g. lockers) (2004: 9)

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Further analysis of the focus group data[9] also showed that the sample showed diverse understandings of specific risks. In relation to alcohol use and bungy jumping the following was noted.

P   police can't do nothing though can they

M   what if you get into a fight?

P   no, your allowed to drink when you're five

M   I know, go into a restaurant ... and wahey

(mY10)

Y   the bungy jump one cos it messes your head up

Z   squashes your brain

(mY11)

There was however a general acknowledgement of many possible risks and reasons why perhaps they should be discouraged. There was a sound level and application of knowledge shown by all ages and genders.

K   there's got to be a reason why they say you can't do it *(parents)*

H   anything could happen when your mum don't know where you are

(fY10)

LL   cigarettes are riskier if your parents are against it but I think alcohol is riskier cos you have to be

        18 whereas cigarettes it's only 16

(fY11)

---

[9] See Appendix I

The major limitation with the questionnaire (and, to a lesser extent the focus group) data is the ability to determine the source of the knowledge. The vignettes investigated the reaction to the source and the content of the information. However, for many of the above statements, and for the statistical data, it is impossible to say with certainty where that knowledge has come from. It is difficult to even summarise whether the knowledge is taught or learnt via experienced (personal or otherwise). However the implications for knowledge based intervention is obvious given that the sample do not admit that there are substantial gaps in their knowledge base which education would attempt to fill. Whether that knowledge is correct is perhaps the secondary issue for intervention. If, in addition, this confidence in a knowledge base extends from lived experience (or that of others), then this again may only add to the limitations of the prescribed approach. A young person may believe they know with certainty that cannabis has no adverse consequences. If this is the case what is the future for drugs education?

7.4. Additional Comments: Rational Processing

As an aside the following can be presented in addition to the heuristics framework of this thesis. Rather than assume that young people are passive recipients of biases of judgement, we see here that some of the respondents were utilising rational processing of expected utility (probability and outcomes). The evidence below highlights those comments relating to the concept of chance. In addition the analytical process is also noted in discussions surrounding dependent factors.

The notion of probability is often mentioned in the description of the concept of risk. However, it was not assumed that it would be a dominant factor in adolescent decision making. Conversely, there was evidence from the qualitative data (all ages and genders) to suggest otherwise. The issues raised concerned terms such as luck, chance, probability and likelihood. The primary factor in the analysis was the avoidance of death, with trouble and injury also featuring.

E   bungy jump! You might be jumping off top of a cliff and the bungy thing might snap

D   yeh but what are the chances of that? Like one in a million, how many bungy jumps do you see jump off a cliff and just twang?

E   there might be a fault

D   go on the internet and look it up, how many people die on a bungy jump?

E   I'm just saying, but one in a million, you might be that one!

(mY10)

F   there's always a chance, even if you know them, there's always a chance they might suddenly turn woooooh, kind of thing

(fY10)

M   no but they might say don't drink and drive or summut, it's more risky than a bungy jump, if you get on a bungy jump you know you're not going to die, well it could happen on the odd occasion

(mY10)

AA   one in a million it's [bungy] gonna go wrong

(fY11)

GG yeh cos in a car, a boy racer car you might not die, you've got more chance of dying with, running across a road

<div align="right">(mY11)</div>

7.42. Dependent Factors

In addition for the majority of the activities given, respondents would claim that the level of risk was dependent on a number of factors. This again highlights the acknowledgment of actual risk assessment.

B   depends what sort of road it was on

B   depends if the roof's slippy

<div align="right">(mY10)</div>

J   depends what you smoke, how long you're smoked for and how much you drink

<div align="right">(fY10)</div>

V   depends how high the tarzan swing is as well

<div align="right">(mY11)</div>

MM that's your religion though innit

<div align="right">(fY11)</div>

The following passage now appears relevant.

<div align="right">236</div>

According to Zuckerman (1979a), risk behaviour can be classified by its consequence. i.e. physical harm or injury, mental harm and punishment. Indeed, risk is partly a function of the objective situation and partly a function of the individual's appraisal of the situation. [In relation to mountain climbing] The objective characteristics that would need to be considered in evaluating the physical risk involved in a situation would include loss of balance with the subsequent fall, the terrain where the activity takes place (...), and the speed and height involved in the activity itself. Moreover, the appraisal of the situation may depend on past exposure to the same or similar situations and on the personality profile of the subject. Thus, it is obvious that there exist objective situations that can be considered risky, according to the aforementioned parameters, and subjects who make an appraisal of the situation and decide to approach it or avoid it.

(Freixanet 1991: 1087)

It becomes clear that to reject the rational in favour of pure biases of judgement as suggested in Chapter Six should be refined to allow for a complementary existence to occur. The sample showed that although they were biased by the above factors, expected utility and the dependency of such an assessment were also prominent features of decision making.

This chapter has highlighted those relevant features taken from the literature and provided evidence to support their inclusion. All features appeared in the qualitative discussions and the statistical data in some form. The implications of the theoretical analysis and any contrasting or supporting empirical conclusions will be addressed in Chapter Nine. Prior to this discussion, a similar analysis will be presented in Chapter Eight to incorporate the environmental factors used in adolescent decision making.

Summary

7.1.

- The literature review highlighted the relevance of optimism, invulnerability, overconfidence, an illusion of control, and the rejection of previous negative experiences as beneficial means of coping with the pressures of the Risk Society.

- Empirical data highlights the limited influence of invulnerability in relation to cannabis related decisions. Evidence of numerous other activities showed mixed influences; both invulnerability and vulnerability; the illusion of control and safety consciousness. Sensation seeking was also identified.

- In situations where the risk was taken, peer support pushed and justified this decision stressing collective responsibility. In situations where the risk was avoided, peer support was rejected and the notion of individual accountability justified this decision.

7.2.

- The literature review stated the relevance of the lived experience as alternative knowledge alongside the effect on the estimation of peer involvement. Actual success or failure in an activity both contribute to biases of judgement and should be addressed by harm minimisation intervention.

- As the lived experience only occurs after initiation, the experiences of others and those of the abstract/mediated sphere have more of an influence on initial experimentation.

- The data showed that initial use had little to do with previous lived experiences (own and others) rather personal invulnerability, however the frequency of peer participation was a key factor.

- Positive experiences were shown to influence undecided respondents towards use. The fact that the negative experience had a significant impact on those who suggested the character initially would try the cannabis contrasts those points provided above. Evidence was also provided to show the impact of mediated experience.

7.3.

- The literature highlighted the relationship between expert and lay knowledge and the transmission of this knowledge to others, especially the mistrust of those with alternative lived experiences. The content of that knowledge for both parties is influenced by the bias of representation.

- Young people show an awareness of risk, but chose to engage with it regardless. Quantitative data supports this conclusion. Therefore to assume adolescent ignorance and to deny the lived experience is a major failing of methods of education.

- The sample did not show scepticism of experts and generally trusted the teacher as a source of knowledge. In contrast, the sample was more cautious of the claims of peers.

- The sample showed basic (sometimes confused) knowledge of many of the risks involved in cannabis use good knowledge of the medicinal uses of cannabis and had acquired this knowledge form the media, the experiences of others and from school. Additional data showed the influence of role models on this acquired knowledge.

7.4.

- The collected data also showed an appreciation of probability which should not be discounted in research founded on testing the biases of heuristics.

The Role of the Other; Parents and Peers

8.0. Overview

Although the previous chapters have focused to some extent on agency based decisions, it is recognised that 'personal identity has to be considered within a social context' (Head 1997: 25). Adolescent relationships with parents and the peer group are both found to be causes of anxiety for adolescents. Coleman & Hendry (1990: 206) note that for boys, the ages of 14 and 15 cause the most stress over peer bonding, and this shifts to relations with parents by the age of 17. Both spheres work in competition with each other, although the divide is not clear-cut and much of the influence is interlinked[1]. Warr (2002) notes that such a struggle has also evolved in criminological theory as the battle between differential association (peers) and control theory (parents) rages. Moderated from the ideas of Warr (*ibid.*) and Farrington & West (1995 in Warr 2002) the following diagram of the conventional life course can be formulated to encapsulate such a struggle.

Figure 8.0. The Role of the Other

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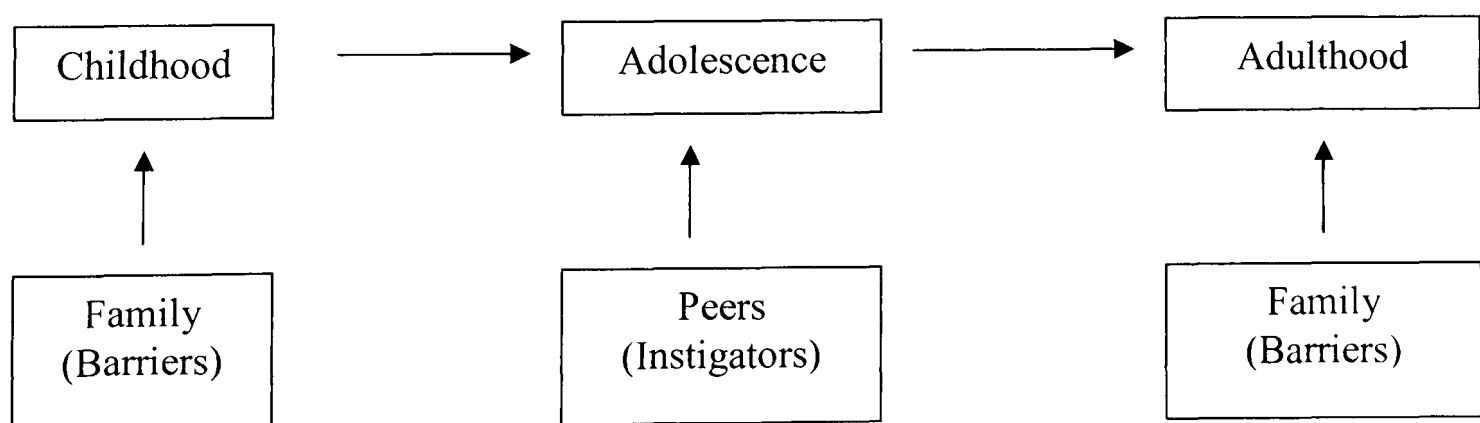
[1] The influence of parents and peers has been tested via the hypothetical scenario (Larson 1980 in Warr 2002: 29) however the results showed that the decision relied more upon the content of the influence rather than the source.

As peer influence is defined as the dominant factor in adolescence, it follows that this relationship, and the fact that it coincides with the peak age of offending/risk taking, is one of paramount importance. Furthermore, in contemporary society it is suggested that family ties are weakening, whilst relationships with peers (and with the media) are strengthening (Miles 2000). In contrast, and embedded in the context of the Risk Society, is the premise that collective action, or the influence of others is now secondary to the notion of individual accountability. In addition, it may appear through the reliance on trust that Giddens highlights, both peer and parental dimensions contribute as alternative forms of expertise to add their own distinct markers on the knowledge and experience of friends and offspring. In this sense, the relationship between the three variables: risk, peers and parents, creates an interesting arena for analysis.

8.1. Parents

8.11. Closeness and Attachment

The relationship between youth and adulthood has never been easy. In current society, Head (1997) recalls 4 distinct areas of conflict between the two generations; myths and stereotypes, protection vs. freedom, diversity of knowledge and experience, and difficulties in communication. As Marris (1996: 45) notes, attachment is the 'single most compelling motive behind the construction of meanings', and a fifth or a quarter of our lives is spent in the care of our parents (*ibid.*: 64). Thus the impact on the behaviour and identity of an individual is obvious. The input of emotional support by parents has been found to influence egocentrism. Those young people with increased levels of emotional support have been found to have a lower sense of self consciousness

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(Coleman & Hendrey 1990). Where egocentrism and self concept is less of an issue, the propensity to take risks may therefore be reduced. In *Causes of Delinquency* (1969), Hirschi outlines the elements of social control theory that relates to the family. It is suggested that those who have a greater social bond to the family are less likely to commit crimes via the notion of 'attachment', especially the 'sensitivity to, and the affection for, conventional others' (Jones 2001: 266). Results showed that boys who had a closer attachment to their parents were less likely to report involvement in delinquent acts, regardless of race, class, or friends.

Marris goes on to suggest that a child's experience of authority[2], until the age of around 15 or 16, is deeply affected by the attachment relationships which form the basis of all experiences of social control (1996).

> A child's fundamental response to fear and pain is to seek the protection of the attachment figure ... angry attention is better than none at all, because abandonment, not punishment is a child's greatest danger.
>
> *(ibid.:* 63)

8.12. Separation and Control

In addition role as an attachment figure, parents also have a significant impact on specific behaviours via social learning and social control. The influence of parents on the behaviour of their children, according to Wyatt & Carlo (2002), follows this dichotomy. Firstly, that expected consequences will affect the decision made and action taken, and secondly that the values of the message are absorbed. The former is explained in this article (quoted below) by social-cognitive theory and social information-processing model which suggest that acting in similar ways produces

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[2] It is suggested that the role of the teacher, in terms of trust, source of knowledge and social control provides many similar functions.

similar expectations and subsequent evaluations (Bandura 1986, Crick & Dodge 1994 in *ibid.*: 647). This conclusion of anticipation is further support by the 1993 research of Warr (2002).

> Over time children and adolescents should naturally anticipate the reactions their parents might have to future behaviours before choosing to engage in those behaviours.
>
> An anticipated reward or punishment will increase or decrease the likelihood of a particular action; therefore, these expectations influence the decision-making process
>
> Wyatt & Carlo (2002: 647)

This model can be loosely compared to the expected utility calculation of probability and outcome. This natural assessment, however, is based on previous experience. Secondly, the perceived appropriateness on the method and severity of the disciplining can affect the child's internalisation of values (Grusec & Goodnow 1994 in *ibid.*: 648). Wyatt & Carlo's own research base supported these theories, however as cited, further research into the second point would investigate the adolescent definition of 'appropriate' discipline (2002: 663).

Curtner-Smith & MacKinnon-Lewis (1994: 462) note that coercive family theory (negative parental discipline and low parental monitoring) is related to 'association with deviant peers, engagement in delinquent behaviours...and poor school performance'. Traditional research into alcohol use has shown that young drinkers were less bonded to their parents (Jessor & Jessor 1977), and less likely to be controlled by their parents than abstainers (Davies & Stacy 1972 both in Engels & Bogt 2001). Bingham & Shope (2004) also found that 'problem driving in young adulthood is greater in individuals who experienced fewer parental influences discouraging their participation in problem behaviour', and conclude that their results support both social control and problem behaviour theory.

Benthin et al. (1993: 158) also include a version of parental concern in their research. For a variety of behaviours, they asked the question: 'to what extent does this type of activity need to be controlled by parents?' They found that participants reported less desire for regulation than non-participants, indicating that engaging in risky behaviour may be a way of searching for independence from parental controls.

A link needs to be made here with the concept of fear. Parental concern may be expressed in rules made for the young person to abide by. If a young person undertakes an activity s/he may be breaking the parental rules. Thus we need to investigate the level of fear associated with participating in the activity i.e. of detection and reprimand. Anderson et al. 1994 (in Croall 1998: 125) notes that often criminal acts are not reported to parents for 'fear of reprisals' or what they describe as 'double trouble'. This relates to the fear by young people that the parental response would be disbelief, coupled with the prohibition of specific activities, 'hang outs' or acquaintances.

Denscombe (2001b) mentioned the 'dread' factor (i.e. the depth of the fear associated with participating in a given activity) although the nature of that fear was not specified. Other risk perception studies have analysed the dread factor, defined as the 'perceived catastrophic potential of the hazard and also...the perceived lack of control over the situation' and found it to be the most determinant factor governing risk evaluation (Bouyer et al. 2001: 457). Cvetkovich & Earle (1988: 12) outline the use of this definition by young people upon appraising levels of risk. The emotional reactions to these questions; Am I o.k or in trouble? What can I do about it? help the young person adjust or adapt to the situation which presents itself.

To link identity and late modernity, Giddens (based on the work of Erikson 1965) suggests that ontological security develops during early childhood essentially from the mother figure. The ability of individuals to deal with the uncertainties of the current era and create stable identities, depend upon the reliability, integrity and predictability of the mother coupled with lessons in personal survival. Linked closely to this is the notion of trust discussed Chapter Five (section 5.3). Giddens notes that the antithesis of trust, highly relevant for young people, is that of dread.

The contradiction between separation and closeness is obvious, but can be embraced as functional for the development of the adolescent self. Head (1997: 28-29) again outlines 3 key areas in which such as dichotomy aids self development: a balanced encouragement to make self defining decisions (strict rules lead to uncritical acceptance, no rules lead to confusion and anomie), the resources for identity choices (dialogue, role models), and the stimulation of thought about identity (facilitation of learning or *scaffolding*). Stanton & Burns (2003: 197) also note the following instances of parental influence: as authority figures and a major source of information on risk behaviours, as role models, selection of peers via influencing the child's perception of social norms, and the installation of moral values. Figure 8.0 shows the conflict between parents and peers, and many could assume that the parental role is redundant during these transitional years. However Warr (2002), supporting Hirschi's results, is keen to stress that the attachment of the family during adolescence (e.g. time spent together) has been shown to influence individual behaviour even if association with delinquent peers is noted. Any conclusion on the role of parents must consider this point as relevant to any intervention programmes.

8.13. Cannabis Vignette Analysis

The vignette specific to parental concern assessed a reaction to the use of cannabis in the family home[3]. Fear and trust would be assessed via the decision to address the issues with parents.

Adam and his friends are doing their homework at his house. Adam realises that Matt has brought the cannabis into his house, and that he has been smoking it whilst Adam was out of the room. He is worried that his parents will realise when they get home. Do you think Adam will tell his parents the truth when they get home?

If Adam tells his parents that Matt smoked cannabis, Matt says he will tell them that Adam has been smoking cannabis too. Do you think Adam will now tell his parents about Matt?

Do you think Adam will not tell his parents and hope they don't find out?

It was assumed that the sample of young people would not talk to their parents due to fear over disbelief or reprisals. Some 66.2% of the sample said they would not tell their parents the truth. The focus group discussions suggested that such a confrontation would not be required unless suspicion was aroused, as parental trust was questionable. In addition, most respondents did not think detection was likely as traces of cannabis use could be concealed. This links to the concept of optimism highlighted in section 7.1.

how would you get caught?

B   smell

E   if they could smell it, but I'd just open the window though and waft it all out

(mY10)

I   I think she'd just spray, spray, spray

as in?

I   deodorant

to get rid of the smell?

H   open windows

F   febreeze!

<div align="right">(fY10)</div>

For those that believed the truth would always be the best option, it was again due to the notion of trust.

KK I'd tell them because I wouldn't want them to think it was me, so I'd still want them to trust me

<div align="right">(mY11)</div>

Some 51.6% of those who said they would confront their parents, perhaps as suspicion is aroused, altered their decisions when faced with the threat of personal implication. Again, the possible reasons behind this decision stemmed from lack of parental trust and fear of possible punishments. In addition, the issue of the rules of friendship is again raised as a reason for non-confrontation with parents. The issue of peer loyalty was discussed in opposition to addressing the matter with parents. The value of friendship was positioned higher than concern over deceit.

M   cos he's a mate really, he doesn't want to rag on his mate does he

<div align="right">(mY10)</div>

Of those few respondents that suggested that initial confrontation was the best option, 41.9% agreed that even with possible personal incrimination, the truth should be told.

The lack of fear here was cited as the belief in proving innocence, and the belief that innocence will be believed. Supporting the optimistic bias ethos, punishment was not feared by some respondents in the sample. It should be questioned here whether this is the optimism of the sample, or a general reform and stance in the punishment of cannabis use. The quote here supports the latter conclusion.

> they'd normally just have a go at me and just make sure I'd learnt my lesson and that would be it. wouldn't say owt about it
>
> I don't know I think I'd get grounded for two weeks at most, not even that

(fY10)

For those who said the issue should not be raised with parents, 88.0% said that they would say nothing and hope parents did not find out. Some 25.8% of those who believed confrontation with parents was the preferred action also agreed that to do nothing was not the best option. It was however suggested that parents would be able to detect the use of cannabis via its smell, and to then do nothing may introduce greater risks and severity of punishment.

In addition to the concept of trust, for the majority of responses the influence of parents on cannabis related decisions stemmed from fear.

> F   or she might tell her parents or whoever it is the truth cos she might not want to get into trouble

(fY10)

M   they'd probably ground you for about a million year until your like forty six and then they'd

probably stop you from hanging about with your mates, or try to and they'd probably ring their

mum and dad up or summut like that...I'm not saying that happened to me like

(mY10)

Additional points raised which contradict those based primarily on parental concern

were optimistic bias (that punishment is not feared), and knowledge of the ability to

prove innocence. It should also be noted that experience did not feature explicitly as an

influence in the decision making process. In addition parental concern was rarely noted

in any of the previous vignettes, indicating that unless the topic is specifically addressed

such notions are of secondary thought.

8.14. Multiple risk analysis

Graph 8.0 Percentage of respondents who said their parents/guardians would be upset if they found out they had participated in the following activities
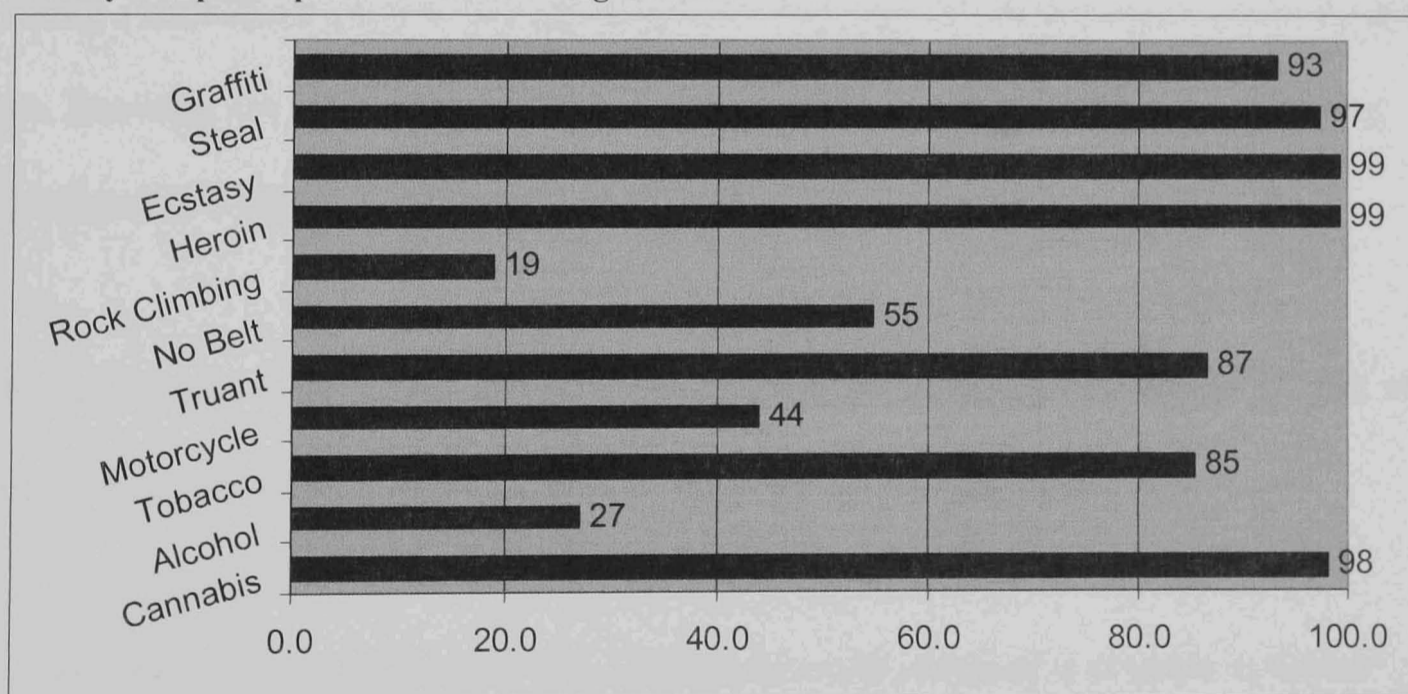
The data above shows that for the majority of risks, parental concern was high.

Truanting, which was not considered to be of high risk, evokes obvious concern,

perhaps due to the legal implications for parents of non-attendees. It is the sporting

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risks which evoke the lowest levels of concern. The anomaly here is again the concern over alcohol use. Very few respondents suggested that their parents would be upset if they were aware of their children's alcohol use. This again adds to the discussion surrounding the problematic overtones of alcohol use presented in Chapter Four. Graph 6.0 supports the assumption that cannabis use is perceived as less problematic than most other illegal drugs and interestingly, given the concept of fear discussed above, evoking more concern than any other criminal activity. As the product of risk taking is suggested as being a necessary part of the development of the self, those acts which promote the most concern may be the most beneficial. This supports the evidence cited above with regard to rebelling from authority. Again, as with the previous quantitative data, those risks of great sensitivity are not promoted as the most functional.

Supporting the evidence provided on gender difference a significant relationship (Chi Squared, 1df =3.52, p<0.05) was observed between gender and parental concern of riding a motorbike (.011). Significantly more females said their parents would be upset on knowing of their participation, perhaps highlighting the social conditioning of gendered risk taking by parents.

In the further focus group discussions,[4] parental influence on perception of risk was centred on the possible consequences of detection i.e. punishment.

B   they might say, do one more thing I told you not to and your going in to a home or summut

(mY10)

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[4] See Appendix E

Other consequences included grounding, cease spending money, thrown out of the family house and a loss of trust and respect. However there was a general disregard for some punishments and a feeling that the risk is lowered if detection can be avoided.

if they say you're grounded for a week, is that something that scares you?

T   no

S   no

U   no

T   my dad always turns round and I just follow him round till he says right you can go out now

(fY10)

Z   depends whether you get caught by your parents as well though, if you know you can get away with it

(mY11)

In contrast to the personal fable theory, some respondents appreciated that parental concern was justified to protect their best interests.

K   there's got to be a reason why they say you can't do it

H   anything could happen when your mum don't know where you are

F   that's why you should keep your mobile on and hope it doesn't run out of battery!

I   phone mum, I'm babysitting for Sarah's aunty, then, I'm just going camping to Derbyshire (laugh)

(fY10)

DD   summut could happen to you an all, say if you dad says come back at this time, and you didn't come back at that time, during that time, summut could happen to you, or go somewhere where you're not allowed

(fY11)

Although the evidence shows a general fear of parental concern, this fear did not act alone. On the whole optimism was observed in relation to punishment and detection, either that it was not a deterrent or that is was unlikely. It may be then that concern is expressed by young people towards hurting the feelings of parents once detection is known (as observed by Graph 6.0), however few conceive that such a situation is likely. Again, the role of the peer is observed and loyalty expressed even when incrimination is likely due to the optimism of non-detection.

8.15. Self-Defined Acts Which Provoke Parental Concern

The empirical data reported here asked the respondents to highlight the types of behaviour which would court the disapproval of their parents and peers. The parental role takes many forms, from carer and provider and to positions of authority, providers of information and teachers of moral values (Stanton & Burns 2003). Therefore the types of action which would upset a parent are likely to be based on both personal attacks and wider moral and social disobedience. It was considered interesting to establish whether the acts which were believed to upset parents were also considered risky.

Table 8.0 Types of Act that Upset a Parent

	Total	% Of Total
Health	23	16.8
Criminal Acts	12	8.8
Transport	6	4.4
Disobeying School	19	13.9
Association with Others	6	4.4
Disobeying Rules	21	15.3
Respect for Property	11	8.0
Disrespectful	34	24.8
Family Relationships	5	3.6
Total	137	100

There were 137 separate acts cited, grouped into 9 categories. The most prevalent categories were Disrespectful, Health, and Disobeying Rules. The interesting point to note here is that there is some overlap with those activities cited as risks, at least to the extent where many of the same categories could be applied. Furthermore, having ever upset parents was a significant indicator of risk for these young people (Table 6.1). With a significance value of .009 (Chi squared, 1df=3.52, p<0.05) respondents who had ever taken a risk were significantly more likely to have ever upset their parents. A similar relationship was found with the variable danger (.000), and between ever being in trouble at school and ever upsetting parents (.000).

Table 8.1 Relationship between upsetting parents and taking a risk

Upset parents	Taken a Risk		
	Yes	*No*	*Total*
Yes	83.8	56.7	75.5
No	16.2	43.3	24.5

Table 8.2 Types of Act that Upset a Parent by Sex

	Males	% Of Male Response	Females	% Of Female Response
Health	5	9.1	18	22.0
Criminal Acts	8	14.5	4	4.9
Transport	0	0	6	7.3
Disobeying School	9	16.4	10	12.2
Association with Others	2	3.6	4	4.9
Disobeying Rules	6	10.9	15	18.3
Respect for Property	10	18.2	1	1.2
Disrespectful	13	23.6	21	25.6
Family Relationships	2	3.6	3	3.7
Total	55	100	82	100

The most prevalent acts for males were Disrespect, Respect for Property, and Disobeying School. The most prevalent acts for females were Disrespect, Health and Disobeying Rules.[5] This analysis supports the gender dimensions of risk suggested in

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[5] For a more detailed analysis see Appendix C

Chapter Four. Male parental upset concerned many acts of non-intentional rebellion (e.g. losing property) and even within the category of disrespect there was a clear divide in the motive behind the activities. In addition, disobeying rules and health related items both supported the female associated with deliberate rebellion. The statistical data again showed that there was no significant difference in the likelihood of upsetting parents, again indicating that opportunity factors may be at work.

8.2. Peers

8.21. Attachment and the Consequences of Exposure

If relationships between adolescents and adults continually come into conflict (see Figure 8.0), and the need for attachment is still apparent, peer group interaction (that between social equals) becomes even more necessary. Within the peer group, adolescents will have shared or similar experiences and often with peers of the same sex. The notion of 'influence', as noted by Warr (2002), is not concrete and incorporates the compliance with suggested behaviour and/or the internal acceptance of the norms and values of others. The product of such influence can be either positive or negative. Although the young person may engage in behaviours that are considered unsuitable, such participation can allow the development of the self and the ability to cope with the uncertainties of adolescence.

At the approach to mid-teens a young person may spend up to half of their waking hours in the company of their peers (Warr 2002: 11). In a 2002 study of offending behaviour, 65% of school attending offenders said they offended with friends and only 23% carried out the offence alone (MORI). The younger age groups were most likely to

carry out the offences alone and drug use was the most likely offence to be involved in with friends. In addition, one in five school attending offenders said their friends influenced them and one in ten said they had carried out the act to impress the people they were with (MORI 2002: 17). In support of this evidence Warr's research from the National Youth Survey (1993 cited in Warr 2002) found that peer experience of cannabis and alcohol (along with other delinquent acts) increased by approximately 10% a year through adolescence. Heavy exposure coupled with increased amounts of time spent, and importance placed on time spent with peers, both had a significant effect on individual behaviour. In his comprehensive review of recent literature, Warr (2002: 136) concludes that peer influence is the 'principal proximate cause of most criminal conduct', adding however that such a link is the culmination of an 'undoubtedly long causal chain'.

The relationship between the peer group and risk taking behaviour is complementary and can be sourced to many criminological studies. The criminological theories grounded in differential association could explain those statistics provided by Warr and MORI. In addition, focusing on collective group attitude, Cohen (1955: 59 in Coleman 2000) claims that a subculture (not necessarily delinquent) will 'provide a set of solutions to the problems that a group faces'. Such solutions may not seem acceptable to wider society but may be neutralised (adhering to the work of Sykes & Matza 1957 in Jones 2001: 175) within the group[6]. Alternatively a young person may feel pressured into an activity because they want to gain acceptance in a specific peer group, or the activity is undertaken to show allegiance as a member of the group. The young person

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[6] In previous chapters it has been noted that the use of the investigations of subcultures is perhaps outdated in contemporary society and has less relevance to the study in question. However many of the features of subcultures can be associated with risky taking peers groups via the affirmation of youth lifestyles.

may also be attracted to others with similar high risk interests. In turn engaging in risk behaviour and via mutual experience the bonds of the peer group are cemented.

Peer influence is another potential explanation for the attraction of risky activities for high sensation seekers. If high sensation seekers are attracted to peer groups interested in sensation seeking activities, their risk appraisals of these activities could be changed and they would receive reinforcement for engaging in such activities. Many high sensation seeking activities in young people start with a dare from their peers.

(Horvath & Zuckerman 1992: 42)

8.22. Integration, Loyalty and Identity

Benthin *et al.* (1993) also found that the ability to control the activity, and the ability to avoid participation (if peers participate), also contributes to this discussion. Results showed that 'participants of high risk activities thought that they could control the risks but at the same time believed they were unable to avoid they activity' (1993: 166). This evidence strengthens the conclusion surrounding the influence of the peer group and highlights the notion of optimism examined in section 7.1.

Such an attachment to their peers has many consequences and can influence decision making in many ways. The sense of loyalty felt within a peer group can lead young people to engage in risks they would not normally take, including illegal conduct (Warr 2002). This loyalty can act as a neutralisation technique in support of the benefit of an other. In addition the disapproval of a best friend is considered of more weight in decision making than either the opinion of parents or teachers (Coleman 1961 in *ibid.*: 28). Furthermore, Warr suggests that fear/risk of ridicule may influence risky engagement. However interestingly Beyth-Marom (1993 in *ibid.*: 46) found that such fear had more of an influence on the rejection of risky behaviour than the decision to accept.

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In addition to the encouragement to engage in acts supported by the peer group, such activity has a significant impact on the identity of the individual. Engels & Bogt also found evidence to suggest that engagement in risky activities such as substance use (marijuana) leads to a greater involvement and intimacy with peers. Their own study found that high levels of substance use and transgressive behaviour (shoplifting, truancy) were related to high levels of peer attachment. However it should be highlighted that this beneficial link cannot be adopted freely in all societies without realising that Engels & Bogt's research stems from the Netherlands where differences in social acceptance and regulation (of greater distinction to those found between the United Kingdom and the United States, for example) apply. Benthin *et al.* (1993: 196) also note that care needs to be taken to explain why 'certain behaviours yield benefits for some teenagers whereas they remain less attractive to others'. Distinctive cultural differences in legislation and tolerance may be one such area.

Although the product of peer association may be perceived as detrimental, it must be recognised that learning to work with others and within a group can be a valuable social tool. In addition, by making comparisons with the behaviours and values of others an individual can construct his or her own identity (Head 1997). This final tool resists criticisms for the overly deterministic interpretation of peer relations. The reliance on peer interaction allows for a smooth passage through this turbulent time via: emotional support, shared sensations, problem solving and the initiation of responsibility.

In many ways, peers become a substitute family during adolescence, proving an independent source of self esteem, identity and even protection.

(Warr 2002: 23)

The product of such may well be risk taking or more specific criminal activity, but such peer activity supports the notion of the need for abstract coping mechanisms.

> The intrinsic features of criminal activity – the dangers of discovery and its attendant risks, the interpersonal emotions like trust, shard fear and mutual protection that come into play – are surely an effective antidote to the monotony of boredom.

(ibid.: 80)

Control theory offers one explanation for why certain behaviours are found to occur during adolescence, with a sharp decline seen at the beginning of adulthood. Figure 8.0 represents this point and would suggest that stronger attachments including marriage and employment may become more dominant influences. In contrast, it is suggested that psychological factors rather than elements of social control harbour conflicting desires. As the function of the peer group was the formation of identity, such a role becomes redundant as self affirmation is realised (Warr 2002). The relationship that bonds young people to the ethos of the Risk Society is again augmented.

In contrast to the suggestion that peer influence is apparent and necessary in contemporary society Benthin *et al.* (1993: 158) found a low mean figure for peer influence suggesting that peer influence decisions on risky activities is relatively minor. Denscombe (2001a: 170) also comments on the decreasing influence of peers on adolescent decision making.

> Peer influence – once regarded as a major formative influence on young people's actions and identities – now appears to have a markedly less effect as greater emphasis gets placed on individual responsibility for decisions affecting 'who I am' and 'what I stand for'.

Loader (1996) presented a case in direct contrast to this suggestion. He noted that the two concepts, peer influence and self identity, are strongly linked. Loader suggests the management and use of public space by the peer group via collective practices has a positive affirming affect on individual identity and sense of personal security. To leave this peer group is that which places the individual 'at risk' due to the absence of 'shared practical knowledge' of where to go and who to avoid.

To frame the suggestion of the decline of collective influence in the context of the Risk Society requires some justification. Some have suggested that the focus of adolescent behaviour has shifted from the peer group onto individual accountability (Mitterauner 1992 in Miles 2000). So how do peer groups operate in a current society perpetuated by individualisation (i.e. free from collective constraints)? The distinction for Miles is that peer groups are now characterised as 'individually chosen rather than organically grown' (2000: 60). Here the practice of group action and collective attitudes is not totally dismissed. Instead, Miles stressed that the decision to engage with the peer group has become one of individual pro-activity rather than passive reciprocation.

Although the relevance of peer influence on decision making is debateable, and the evidence supporting peer influence difficult to collect, what is apparent is the bias involved in relying on the collective opinions of others. Loader dichotomises these limitations, firstly highlighting the reliance on narrative interpretations or 'atrocity tales' (1996: 68) which 'exacerbate feelings of vulnerability and powerlessness', and secondly stressing the dominance of naïve loyalty (to people or places), which although centred in the creation of identity and security, actually perpetuates anxiety and vulnerability (*ibid.*: 69). The relationship between peer influence, knowledge and experience via the 'expertise' of the adolescent and optimistic bias now becomes clear.

8.13. Cannabis Vignette Analysis

The designed vignette aimed to test loyalty and trust in peer relations[7].

Adam has gone to a party at a friend's house. Most of the people at the party are in the same school year as Adam, but he notices that a few people seem to be a bit older than him. Adam notices that these older people are smoking cannabis .One of the older boys approaches Adam; he says he recognises him from school. The older boy asks Adam if he wants to share his cigarette. Do you think Adam will smoke the cannabis cigarette?

Adam's good friend Simon is also at the party. Simon tells Adam that the person who just approached him was Simon's older brother. Do you think Adam will share the cannabis cigarette now?

Later that evening some of Adam's friends from his school football team arrive. Adam knows that these friends would not approve of him smoking cannabis. He is offered cannabis again .Do you think Adam will smoke the cannabis cigarette anyway?

When the sample were asked to decide whether the character will accept the cannabis from the older stranger, 45.7% said no and 30.5% said yes. Distrust of the stranger was found to be present via the focus groups as an influencing factor.

It was also assumed that after realising that this stranger was actually known to them, the sample would be more likely to change their mind and accept the cigarette. The focus group data shows that those who did may have based their decision on trust, support in peer action or possible pressure over non-involvement.

N   he'll trust them

P   yeh he trusts them

(mY10)

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[7] See Appendix C questions 12-14

In fact only 18.8% of those who rejected the initial cigarette changed their mind. Interestingly, 44.4% of those who were unsure about accepting the offer from a stranger then changed their mind on finding out the stranger was known to them. The overwhelming majority of the sample stood by their original decision and declined the offer.

It could be suggested that those who were unsure and sceptical of the stranger were greatly influenced by the additional information. Those who declined the offer initially were perhaps basing this decision on something other than the influence of the stranger. The focus group data would suggest that such a reason could be concern about the risks of cannabis, or a naivety to its use.

JJ   he might not know what it does to him

(mY11)

In addition to the original hypothesis, the known other also had negative connotations, as described by the sample. Just as the stranger was mistrusted, so was the known other and was viewed, because of their personal closeness, as able to inform members of their family about their behaviour.

Z   he might think it's alright yeh, somebody he knows closely is doing it as well

X   I don't cos they might tell on him

(mY11)

The influence of disapproving friends was the real test of peer influence. It was assumed that, in front of disapproving friends, the cannabis would be rejected. Some 67.5% of the sample suggested this. In addition, 55.3% of those who said that the

cannabis would be accepted by a known other, changed their mind on acceptance in front of disapproving friends. The ramifications of disregarding the opinions of those who disapproved were heavily cited by the focus groups.

> MM because you think a lot about what your friends think about you don't you, and if they're not gonna approve and if she's in netball team...

> OO end of day, if all her friends fall out with her she's got no-one, apart from person that's offered her cannabis

(fY11)

There was one respondent who, on declining the offer to smoke cannabis from the friend, accepted in the presence of disapproving friends. The additional focus group data prompted the response that overt rebellion could be the key to promoting peer approval via image building.

> M yep because now he's just been smoking it I think he'll wanna show off in front of them like, I don't know, I think he might show off doin' it, he might say to his mate oh I'm smoking cannabis

(mY10)

Those who responded positively to this acceptance were also noted as having the ability to make their own choices and rejected the influence of those around them.

> you're friends can't pick and chose what you can do

(f Y10)

This point again links back to self identity, with some of the respondents showing confidence in themselves rather than in the group. The nature of a true friend is also evident here, as it was in many of the previous focus groups. The boundaries of friendship are clearly defined, and supplemented by the belief in 'that's what good friends do'

The vignette designed to test the influence of peers on cannabis related decisions produced a range of findings. On the whole, these decisions were grounded in the relationship with the 'other' via issues of group belonging and trust.

> D   I think yeh .... cos, like if everyone else is smoking it then he might feel a bit left out, summit like that

(mY10)

In addition the decision to accept cannabis was thought to be affected by peer pressure. Those who chose to decline the offer did not tend to cite peer pressure as a possible reason. There were numerous other factors which were given in contrast to the factor of peer influence. For example, knowledge of the risks involved and concerns over personal vulnerability were also identified by the respondents as reasons for declining the cannabis. Personal experience also biased both decisions.

> E   they could tell his parents again, it could get back to his parents

(mY10)

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MMI think if she smokes anyway she'll say yes

In addition the concept of sensation seeking was noted as a reason for participation.

H   or she might just want to try it and see what it's like

Personal choice (self) was also cited as influencing the decision to decline. It is to be noted that there was no mention of parental influence, either concern over action or fear of reprisal when these decisions were discussed.

Another variation of peer influence was noted in subsequent vignettes. This issue was one of peer loyalty. In contrast to trust, which inferred protection from harm, loyalty referred directly to the notion of supporting any action, regardless of the consequences.

8.24. Multiple Risk Analysis

Graph 8.1 Percentage of respondents who said their friends would disapprove of their participation in the following activities
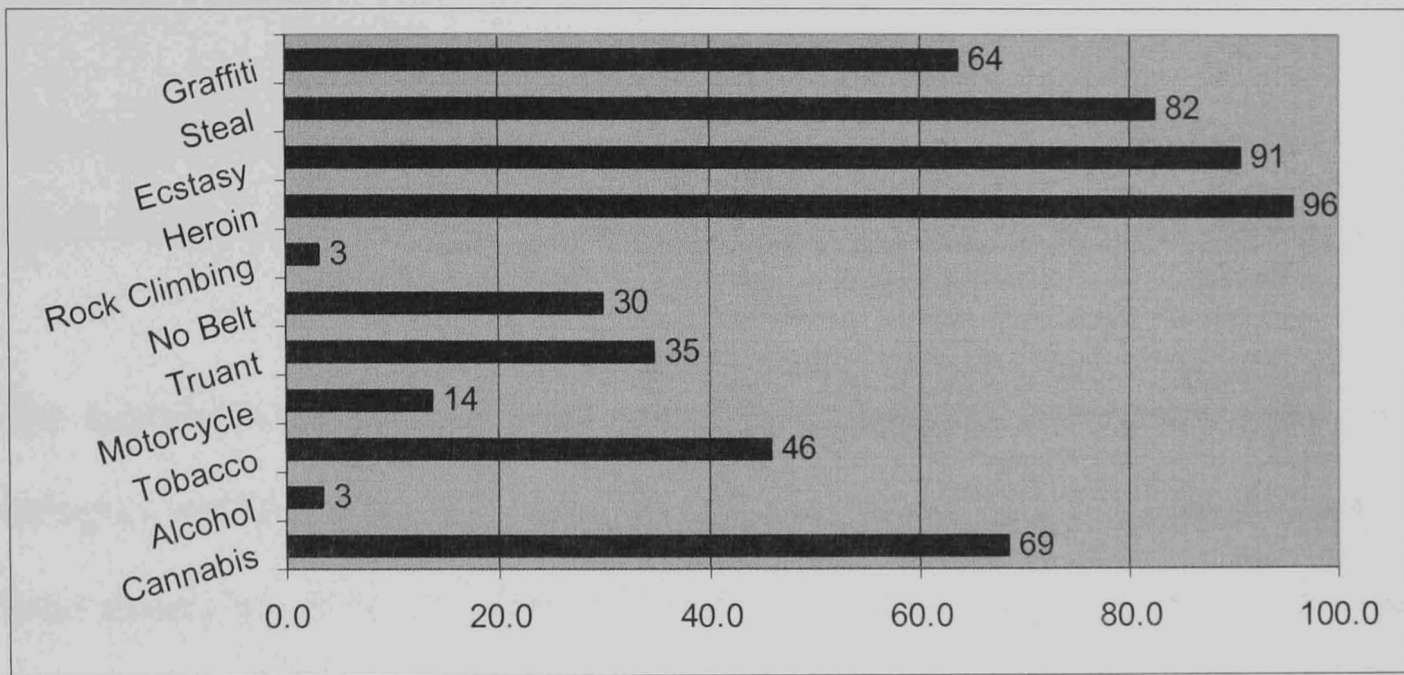
This data shows that the majority of risks do not harbour peer disapproval. Alcohol use again shows evidence of problematic overtones. Acts involving illegality were the most disapproved of, with cannabis again showing higher disapproval ratings than acts of graffiti. In comparison with Graph 8.0 (indicating parent upset), peer disapproval data is lower for all questioned acts. It can be concluded that the sample suggested that parental concern was more significant for all the activities than the concern of their peers.

Table 8.3 Friend Approval Profile for Cannabis

Correlation Sig N	Ever Tried	Risky
Friend Approval	.546 .000 89	.474 .000 128

In relation to participation and risk perception, showed that those respondents who suggested that their friends would approve of them using cannabis were significantly more likely to have tried it, and to think it was risky.

With regard to gender differences, significantly more females said that their friends would disapprove of their participation in ecstasy use (.003), than was true for males.

The hypothesis for peer influence was that involvement with certain peers would influence whether an individual would engage in risk behaviour. The results from the focus group data[9] showed that this influence was predominantly a matter of trust. Being with a peer who had experienced the act, or was trusted to make the right judgements, was shown to influence risk decisions. The majority of responses came from the female focus groups. The following comments were made about getting into a boy racer car.

F   if you know them and right trust them then yeh ... they might not be right experienced in driving

       or summut and they might crash or summut

I   I get in _____' s car cos like I trust him with my life and everything, but I know he won't crash

       ... but if you know them right well you know whether they're a good driver or not

(fY10)

There is also the belief that peers will consider your best interests when drinking alcohol. Additionally for older respondent the notion of trust also applied to the family role.

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[9] See Appendix E

S   if your mates are looking after you though

S   yeh exactly, if your mates are there

T   come on T, pick me up and carry me to somewhere else, _____ does all the time (laugh)

<div align="right">(fY10)</div>

W   as long as you're with good company as well, as long as you're with good mates they're not gonna let you do something stupid, as long as you're with mates you can trust, or with your family

<div align="right">(mY11)</div>

There was evidence, not only from this discussion but from previous vignettes, that peer influence holds some weight in the decisions of young people. Primarily this weight was noted as trust and loyalty that encouraged use. However, the notion of individual choice and confidence in oneself was again witnessed, with some respondents rejecting the parrot-like acceptance of peer behaviour. This conclusion supports that suggested by Miles (2000). There, influence is apparently the ability to choose loyalty via confidence in individualism. The strategy of peer group behaviour as a function of self development cannot be denied. However, some commentators, such as Beck, have been quick to dismiss such collective action in favour of excessive individual administration.

8.25. Self-Defined Acts Which Would Upset Peers

The types of acts undertaken that would upset peers are shown in Table 8.4.

Table 8.4 Types of Act that Upset a Best Friend

	Total	% Of Total
Rejection	13	22.8
Betrayed Trust	12	21.1
Relations with Opposite Sex	10	17.5
Bad Attitude	10	17.5
Cease Friendship	6	10.5
Violence	3	5.3
Health	2	3.5
Disobeying School	1	1.6
Total	57	100

There were 57 separate acts cited, grouped into 8 categories. The most prevalent categories were Rejection, Betrayed Trust, and Relations with Opposite Sex and Bad Attitude. On the whole, the acts shown above were not cited by the respondents as either risky or dangerous acts. This indicates that the majority of respondents did not view the acts that upset their friends as either risky or dangerous.

Table 8.5 Types of Act that Upset a Best Friend by Sex

	Males	% Of Male Response	Females	% Of Female Response
Rejection	6	25.0	7	21.2
Betrayed Trust	2	8.3	10	30.3
Relations with Opposite Sex	5	20.8	5	15.2
Bad Attitude	7	29.2	3	9.1
Cease Friendship	1	4.2	5	15.2
Violence	2	8.3	2	6.1
Health	0	0.0	1	3.0
Disobeying School	1	4.2	0	0.0
Total	24	100	33	100

The most prevalent male acts were Bad Attitude, Rejection and Relations with Opposite Sex. The most prevalent female acts were Betrayed Trust, Rejection, Relations with Opposite Sex and Cease Friendship. In addition, females were more likely to cite responses which involved disapproval of acts which did not directly harm the friend.

For example, truanting, self harm, and having an obsessive partner are acts in which the friend had obvious concerns for the well being of the respondent, not for themselves. There are no male responses which indicate this relationship. This data supports evidence presented in Chapter Four which suggested that adolescent girls show stronger signs of empathy, whereas their male counterparts are often more exploitative (Lees 1987 in Head 1997: 45). The responses gathered for this question were not found to be significantly related to gender suggesting again that any differences observed are present in opportunity rather than inclination.

Summary

8.1.

- The literature review highlighted that the causes of anxiety surrounding parental influence stem from separation (fear via control) and closeness (trust via attachment).

- The empirical data collected suggested that the sample based the decision to confront parents and to conceal from parents on perceived levels of trust and fear.

- On the whole, respondents noted that detection was not considered likely, suggesting that optimistic bias featured heavily in these decisions. In addition peer loyalty and knowledge (not experience) also influenced these decisions.

- The quantitative data showed the sample believed in high levels of concern over the majority of risky activities, with the exception of alcohol use and rock climbing.

- The comparable relationship between parents and peer and gender differences were also noted.

8.2.

- The literature review highlighted the importance of peer relationship to the formation of identity, and the pull factors towards risk taking behaviour. To link these two points we find that attachment to peers and consequently the participation in specific risk taking, decreases in adulthood as the self affirming function of the peer group has been effective and is no longer required.

- The contrasting explanation to this suggestion is that social control (via marriage, employment etc), rather than psychology creates the pull away from the said behaviour.

- Those who suggest that peer influence is declining as a result of individualism are critiqued by way of active decision making rather than passive conformity. Data from this research supports the latter conclusion.

- The vignette data highlighted trust and mistrust in peers as greatly contributing to decisions to accept cannabis use. The influence of disapproving others also greatly influenced this decision, although the rebellious response suggested individual accountability as an alternative precursor.

- Knowledge, vulnerability, personal experience and sensation seeking all also influenced these decisions.

- The comparable relationship between parents and peers and gender differences were again noted.

Discussion: Implications for De-biasing Intervention[1]

9.0. Overview

To take a risk, subject to the conditions of the Risk Society, is to engage in socially acceptable or unacceptable behaviour where the outcome (positive or negative) of a specific danger/hazard is not known with certainty. The additional consequences of active risk engagement can be the management of uncertainty and self development. The decision to voluntary engage in such a risk is further subject to optimism, experiential, knowledge-based, peer and parental biases of rational judgement.

The two previous chapters were designed to explore whether the five biases of judgment derived from the literature were apparent within adolescent decision making. All the qualitative vignette analyses confirmed their selection, reinforced by quantitative data which added weight to any strength of association. This research does not offer concrete conclusions on how *all* adolescents make decisions about *all* types of risk. Nevertheless, the stage has been set for more detailed analysis in this area, using the above description and the prescribed markers as an initial framework. Moreover, it was not possible to conclude with certainty that any of the aforementioned markers held more influence over any other. Other researchers such as Davis (1999: 12) have made such claims. She inferred that lack of experience and experimentation were the most influential factors in the risky decisions of young people. Therefore the following discussion will focus on how each of these identified and tested factors are interlinked via the de-biasing mechanisms of intervention.

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[1] Taken from Weinsten and Klein (2002: 313)

The government line on the use of illegal drugs is straightforward – all controlled drugs are dangerous and nobody should take them (HMSO March 2005). However this research has shown that the use of cannabis could have positive effects for many young people. Coupled with this, it has been found that a multitude of internal and external factors affect the decision to either avoid or take the associated risk. Young people do not have unrealistic or under-inflated perceptions of risk, and furthermore do not reach the decision to participate irrationally. Thus, how should the government, parents or teachers react to this engagement? Many of the theoretical foundations of risk taking previously discussed now need to be applied to the remit of intervention. If the risks and engagement in cannabis use is moderated by knowledge, optimistic bias, and experience, how does this affect intervention measures? How can the influence of peers and parents be brought into the equation? How is the Risk Society and sensation seeking acknowledged? Do these agendas work alongside each other, or do they demand opposing theoretical stances and therefore practical differences? This discussion will begin with the evidence found to critique those factors aligned with individual personality. After the discussion of what works (or rather what doesn't work) from the experimental to the real world examples, the current climate of drugs education will be described assessing the shift from abstention to the management of risk. The final dialogue will comment on future recommendations of risk intervention mechanisms, pulling the threads together to create a model of effective risk management.

9.1. What Works?

Weinstein & Klein (2002: 314-322) outline three methods of intervention aimed at addressing risk perception and risk behaviour, all of which were tested with surprising results. Each of these methods link to those factors credited to the role of the self.

9.11. Testing Optimism

The first relevant investigation engineered the issue of optimism. The said authors tested the creation of individual 'comparison targets' in an attempt to alter perceptions of risk and subsequent involvement. This theory states that individuals will consider themselves less at risk than their peers. By allowing subjects to compare themselves with individuals with a low risk standard and risk reducing characteristics, subjects were expected to reduce their optimistic bias. However the authors found that risk judgements were unaffected by such methods of intervention. Denscombe pays specific attention to such a failure, suggesting that such optimism or belief that 'it won't happen to me', can be used to account for why 'programmes designed to alert young people to the danger of substance misuse have not been affective' (2001b: 293). Such that feelings of invulnerability, which create errors in perceptions of possible harm, cannot be corrected by educational campaigns that simply stress the negatives of each activity.

Secondly, Weinstein & Klein (2002: 314-322) give evidence of an approach designed to alter how subjects view themselves through a process of self reflection. The recognition and identification of personal experience and specifically risk increasing factors was thought to reduce the likelihood of making biased judgements. Again the authors found 'weak and inconsistent' results. Given the research which suggests that individuals have the ability to counteract any previous negative personal history (Natalier 2001, Buehler *et al.* 2002: 98), this finding is not surprisingly inconclusive.

The consequences of the above methods are as follows. In direct contrast to the efforts of health campaigns, Weinstein & Klein (2002) found that creating such targets, either via comparisons or self reflection and specifically stressing high risk, can actually increase optimistic biases.

> It appears that health campaigns emphasising high-risk targets (such as smoking interventions that show unattractive pictures of smokers) and campaigns conveying information about undesirable actions (as with pamphlets listing factors that raise the risk for a particular health problem) may unwittingly worsen the very biases they are designed to reduce.

> (*ibid.*: 323)

This conclusion may be in direct contrast with the assumptions of the affect/experiential heuristic. If we judge risk on an emotive perception of goodness/badness, then negative images of the consequences of health-related risk taking should lower our optimistic bias. However, what is being acknowledged here is that such imagery is not powerful enough to positively bias such decisions. It follows that knowledge from mediated experience, when packaged as a mechanism of intervention, has limited, or possibly adverse effects. If other factors have the ability to increase optimistic bias (for example

sensation seeking experiences or the behaviour and opinions of peers) it follows that such factors may also be instrumental in creating realistic perceptions.

9.13. Testing Knowledge 275

Taking consideration of these points opens the debate on the effectiveness of information-providing, knowledge-based interventions. Many studies (for example Lundborg & Lindgren 2002, Slovic 2001, Jamison & Romer 2001) have provided the rationale underpinning the suggestion that young people lack a basic comprehension of risk information. For example, they are believed to misunderstand the nature of addiction when they start smoking, and thus make such decisions from an incomplete knowledge base. Thus the final study by Weinstein & Klein (2002) provided subjects with information on their risk behaviour in an attempt to re-align their risk perception. This approach assumes that subjects do not fully understand or pay systematic attention to 'risk factor information' when making decisions. Accordingly, correcting this information deficit is thought to amend optimistic bias. Again no overall effect was found in their results surrounding subsequent risk judgements.

In addition to this discussion, Byrnes (2003: 12) also concluded that 'knowledge-based interventions have been found to be uniformly ineffective across various domains'. Arnett's study (1990) proposed that because risk taking behaviour (such as sex without contraception) was related to sensation seeking 'knowledge is not enough'. As most girls in this cohort study had had sex with and without contraception, the problem is not simply one of ignorance. Benthin *et al.* (1993: 165) raised a similar problem.

The findings that those who engage in risky activities tend to perceive the risks as well known, raises questions about the potential effectiveness of information and educational programmes designed to discourage young people from engaging in risk taking behaviours.

Such assessments, although highlighting the relevance of the decision making factors chosen for investigation in this thesis, show that self-reliant methods adopted to de-bias risk taking have been proven to be unsuccessful. The following section will emphasise the current methods of intervention used to address general risk taking behaviour, then specifically drug related decision making.

9.2. Managing Risk Behaviours

9.21. Example 1. Seat Belt Laws (Adams 1995)

The following example, relevant to all drivers of motor vehicles rather than specific to young people, highlights the preventative measures adopted via legislation to avoid risky driving behaviour. In 1981, the Department of Transport implemented mandatory seat belt legislation following international evidence and national expert backing. The rationale for such was that the chances of dying if one was involved in a road traffic accident would be reduced by 41% if wearing a seatbelt. The supplementary ad campaign persuaded people of the need for safety – using negative imagery to increase their perception of risk via defined cultural filters. Just before the law was passed, John Adams provided a critique of such rationale wherein he suggested, amongst other things, that such evidence was limited and inconsistent. The following year the UK witnessed no effect in the total number of fatalities recorded from such behaviour.

Adams notes two fundamental flaws of such legislation. Firstly there is little to no appreciation of *risk compensation* – the theory which suggested that forced safety

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precautions actually exaggerate risky behaviour. Secondly the theory of *selective recruitment* suggests that those who are naturally safer drivers (risk avoiders) will voluntarily take safety precautions and thus will wear a seat belt.

This example shows that by implementing mandatory safety measures the Government is increasing the optimistic bias of the nation's drivers and their propensity to take risks – 'I'm wearing a seatbelt so I can drive more erratically and still be safe'.

> Might you drive a little more carefully if you were deprived of the protection of you seatbelt? ... Might you break slightly more gently or corner a wee bit more slowly if your children were not safely secured in the back seat?
>
> *(ibid.*: 128)

Thus to de-bias such a situation would be to quash current regulations. Such a situation is unlikely under the conditions of Cultural Theory, predominantly due to the strength of the perceived hierarchical authority and responsibility of the state. Those who have chosen to contest this authority and criminalisation of self-risk have, in this example, suggests Adams, been 'heavily outnumbered'.

9.22. Example 2. Smoking legislation (Hanson & Kysar 2001)

The following concise example of the manipulation of heuristics is taken from the United States where policy on tobacco advertising is somewhat different to Britain. Hanson & Kysar the failings of preventative measures during the 1990's to reduce adolescent and even adult smoking stems from the inability to combat market manipulation. Many legal economists that operate within such markets claim to stand by the controversial work of Viscusi (1992 in *ibid.*) that assumes rational decision

making. However the tactics used by such product promoters plays close attention to the manipulation of biases of judgement.

The exploitation of such biases, striving towards the goal equation of lower risk perception = greater consumption, inflates demand. Positive imagery, youth-orientated demographics and increased advertising in stores close to schools (*ibid.*: 241) all reinforce this underlying message. The illusion of control, touched upon as a component of the optimistic bias ethos (section 7.12) markets 'low tar' and 'filtered' products that allow the participant to believe they are voluntarily engaging in lower risk activity[2]. Tapping into the availability heuristic sees 'ubiquitous images of healthy and attractive smokers' preventing any negative images of smoking to be less readily 'brought to mind'. Finally, as suggested throughout this thesis, such behaviour is linked to 'affect' which is exploited by advertising which uses waterfalls, foliage, nature and natural produce to play on the positive emotional response.

Thus the role of advertising and market manipulation for numerous products, including alcohol in Britain, will continue to undermine legal regulation or preventative programmes aimed a reducing risk taking or promoting abstinence.

9.23. Example 3 Gambling (Potenza 2003)

Never before in our history has gambling been such a big industry with governments obtaining large revenues through operation or taxation of gambling ventures

(Potenza 2003: 247)

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[2] The authors state disparities in evidence which make it impossible to say whether or not this perception is actually true.

The key to risk taking via gambling is the reliance on optimistic bias: the belief that one can reclaim any losses or that a large win will solve a bigger problem. Adolescent gambling in Britain and in the United States is more limited than gambling by adults (as with most risky behaviours) and is centred on lotteries, scratchcards and slot machines. Although for the most part such activity is supported by excitement and peer group action, recent research has highlighted the adverse consequences of gambling. Many of the preventative measures advocated for gambling prevention stem from those used in the field of health risks. Potenza stated that such techniques must incorporate 'intrapersonal (individual) factors, interpersonal (group) processes, institutional factors, community factors and public policy. (*ibid.*: 251).

Potenza also states that the young 'often do not completely understand the risks involved with gambling or the odds underlying specific forms of gambling' and suggests that increasing such knowledge may aid better informed decisions. Further, the acceptance of adolescent gambling (in arcades or lotteries), for example by parents, needs to be addressed in conjunction with availability, promotion through the media and tighter legal restrictions. Potenza noted the limited capacity of studies based primarily on gambling, and many of the recommended measures are based on current alcohol preventative campaigns. Despite these efforts, the governmental influence on this activity (as with tobacco and alcohol) cannot be overlooked. The quote used at the top of this section was included to highlight the growing need for tighter regulation and specific research. To which may be added that, as with the smoking example, such an underlying objective may be the reason for the failure of many current and future proposals.

9.3. The Current Climate of Drugs Education

9.31. The Failings of Abstinence

The common theme embedded within all these examples is the aim of an alteration in risk perception and the avoidance of risk taking. Such an aim is also apparent in the teachings of drugs education (DfES 2004) and current legal restrictions found in Britain. Despite of such an emphasis, a significant proportion of young people have tried drugs at some time in their life (see section 2.11).

Programmes of primary prevention have two paramount limitations. Firstly, the abstinence based 'just say no' model apparent during the 1980s and 1990s had the effect of 'fostering widespread distrust and discounting of all messages – no matter how credible' (Beck 1998 in Dickinson, Derevensky, & Gupta 2004: 1237). Here we highlight the link made in Chapter Seven (section 7.31) between expert and alternative knowledge, with the latter considering experimentation as a necessity for self realisation. It can be suggested then that such knowledge based programmes attempting to encourage abstention are outdated. Benthin *et al.* (1995: 151) suggests that not only should intervention address optimistic bias, but also that 'such programmes should acknowledge that risk behaviour fulfils important functions for adolescents'. Claims such as this are supported by figures which show that drug use has increased in parallel with anti-drug and preventative programmes in secondary schools (Aldridge 2001: 52). From a functional perspective, education concerning risk taking should accept that such behaviours have a purpose, and education should assume the role of promoting harm minimisation and risk management rather than outright deterrence[3].

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[3] Again this discussion talks specifically of the lower risks drugs and has less relevance to those such as heroin.

Dickinson, Derevensky, & Gupta (2004) advocate the use of harm minimisation programmes, specifically for multiple risk behaviours, on the back of results emphasising harm reduction for both legal and illegal risk activities. Further, their acknowledgement of a strategy which recognises that individuals may be involved in multiple risk taking, both socially acceptable and unacceptable, is to be commended

> As an overarching framework, harm reduction (also referred to as harm minimisation) includes any strategy (policy or program) that seeks to help individuals without requiring abstinence from an activity that may currently be causing harm ... a public and mental health approach that remains value neutral with respect to particular activities (e.g. drug use, alcohol consumption, gambling)[4]

> *(ibid.* : 236)

The authors suggest that such a model could be an 'interim step towards an abstinence model' *(ibid.)*. In relation to the present study, such a conservative goal is not prescribed. In light of the research in this thesis which notes the functional overtones of risk taking, the harm minimisation approach could have sufficient value to be a goal itself, rather than a means to another one.

> This approach seeks to reduce harm, that is undesirable outcomes – not through changing persons, their habits, motivations, and lifestyles, or punishing offenders, but rather through modifying environmental or situational factors.

> Davis (1999: 188)

To allow the harm minimisation model to work effectively as an end in itself, as a method of coping and control, risk taking itself has to be accepted. To ground such an acceptance in the context of this study is to call for methods of intervention titled 'harm minimisation and the management of risk'. In an interview for The World Today

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[4] The cited authors recognise that as their own research related specifically to gambling, the prescription of abstinence on the ground of risks to health is perhaps not as critical as, for example, alcohol and drug use.

(22/6/04) Duff outlined the functional use of recreational drug use, using the term 'management' to refer to drug use which does not seem to interfere detrimentally with ones lives. Drug use, Duff suggests, is moving away from the subculture into the mainstream (supported by Parker's normalisation thesis) and the challenge now, rather than preventative strategies, is one of safe management. The emergence of the 'just say know' (Dickinson, Derevensky, & Gupta 2004), or the risk management model, should not only be applied to functional risks. As research suggests that perception of risk is inversely related to levels of use, the safe management approach could fill the gaps for those users who are not aware of or neutralise the risks they face.

9.33. Solution: Appreciating Biases of Judgement

Donohew *et al.* (2000: 1082) report, the failure of current preventative programmes stems from an assumption that young people follow a rational model of decision making[5]. Such an assumption ignores the effect of heuristic biases. Some have attempted to address these biases although such methods still require additional thought. For example O'Donoghue & Rabin (2000 in Lundborg & Lindgren 2002: 180) note that perhaps the best educational strategy would be to exaggerate the risks of given activities, weighting this policy against the potential loss of credibility, instead of providing accurate information. This basic methodology is challengeable on ethical grounds. Furthermore, using the optimistic bias framework and the evidence presented in section 7.13 would also suggest that such techniques could have the opposite desired effect.

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[5] Such as those of Viscusi (1992, 2000), challenged by Slovic (2001, 2003)

Slovic's answer, using the affect model specifically with regard to smoking, firstly requires a ban on the advertisement of tobacco products and therefore positive imagery. This model would then be used to create experiential knowledge, for example by familiarising young people to cumulative risks by introducing people who have suffered and 'play the affect game, building images and feelings that promote healthy behaviour and block destructive risk taking' (2003: 48). The comments relating to advertising have limited relevance to illegal substance use. However the essence of the affect game is to introduce the lived experience of an other into the tactical negotiation of altered risk perception. This has been used in some contemporary drugs education. The respondents in this study make reference to this point as will be discussed in section 9.46 below.

9.34. Drugs Education at the Researched School

The researched school outlines it's commitment to drugs education in its policy document. Their aims cover practical skills to resist experimentation, to increase knowledge of the substances and consequences of use, to minimise the risks faced by users and potential users and direct them to sources of support. Primary responsibility for drugs education lies with the PSHE (Personal, Social and Health Education) curriculum and is reinforced in other subjects such as Science and English. Group work, discussions, videos and the use of outside agencies are used to deliver the programmes. Sensitive issues are often dealt with via 'distancing techniques' for example third person case studies (DfES 2004: 35). Specific examples taken from the researched school include a selection of case studies based on the legal technicalities of drug use. This tool was used specifically for Y9 students (13 and 14 year olds), and resembled the vignette method used in this study.

There are four key issues with the school's policy. Firstly, this method clearly adheres to Weinstein & Klein's (2002: 314-322) educational approach. It acknowledges the need to fill the gaps in adolescent knowledge by providing the information they feel to be the most relevant. Secondly, the aim of the policy is primarily preventative. It would, however, be impossible for a school to encourage such behaviour on a number of grounds. It can be argued for example that cannabis use may act as a platform to other substances (EMCDDA 2003: 61). However, a review of the evidence by Drugscope suggests that cannabis use does not lead directly to other substances, although Drugscope acknowledge that many problem drug users may have used cannabis in the past (2004). Nevertheless, given the nature of present society, figures show experimentation is rising, but there is only limited data suggesting progression to problematic use. The question arises: could education simply stress a balanced argument? Thirdly, with no apparent distinction between types of drugs (in the researched policy or the DfES guidance for schools, 2004) the possible functional properties of cannabis are being confused with those properties of, for example heroin or solvent use. Such a merger not only rejects the evidence presented in this thesis, but also can only be confusing for young people. In addition, the lived experience of different types of drugs will also make such amalgamated messages redundant. Finally, and in support of the school policy the minimisation of risk is acknowledged. However, without an overtly value neutral approach, it is unlikely that such methods follow the prescriptions of the risk management model. It is perhaps not then the approach which should be revised, but the content and context of the information embedded within it.

9.4. Recommendations

9.41. Abstract Framework

Dr Cameron Duff outlined a stringent plan for reform of drugs education, drawing on many of the previously mentioned theories. A paper given by him at the 4th Annual Conference on Drugs and Young People, May 2003, effectively summarised the concerns and remit for this research. Duff (2003c) argues that drugs education in Australia is provided by the labelled 'expert' who enters the school to 'protect' the young people from the risks, harms and dangers of drug use. Duff outlines the following concerns.

- The use of context in educational materials is too narrow.
- The materials use expert risk assessments – but are these the same risks that young people identify?
- Education predominantly asks young people to assess the risks of drugs and effectively avoid them.
- Individuals are presumed to be risk averse.
- The 'lived experience' of young people's behaviour is effectively ignored.

He continues to outline three further propositions.

- Young people have varying attitudes to risk – risk assessment is becoming individualised – key features of personality and character.
- Policies should appreciate the culture and meaning of young peoples risk taking – not all individuals are risk averse .
- Educators should acknowledge that risk taking is no longer a developmental process to be 'grown out of'. It has become an 'essential life skill'.

As with this thesis, Duff draws on the work of Beck and Giddens to link drug use and policy to the development of self identity or 'self-actualisation' (Lupton 2002). Therefore, education should acknowledge that young people accept that life is risky, and take pleasure from successfully managing those risks as it affirms their identity. Furthermore, to successfully manage risks does not necessarily mean to successfully

avoid them. However Duff does not tackle the intricacies of adolescent decision making, rather he supplies an abstract framework on which to pin future research. This thesis accepts his conclusions and attempts to cement this research within its parameters.

9.42. Addressing Definition and Context

Duff suggested that educators need to appreciate how young people themselves conceptualise risks. This research showed that the definitions provided by the sample, although incorporating many of the stereotypical activities, covered a much broader range than originally conceived. This may indicate that those who are responsible for intervention may also be providing a too narrow definition of relevant risks. Such a variation in definition is accepted as feature of contemporary society and as a condition of the Risk Society. In this respect, it is necessary for any method of intervention to acknowledge this. Indeed, Duff also suggested that materials used to facilitate learning should be tailored to suit the diversity of attitudes.

The previous discussion highlighted a distinct difference in the conceptualisation and use of risk by gender as an example of such diversity. The model of observed difference, first adhered to in the literature and subsequently confirmed by this research, should perhaps be incorporated in the remit of drugs education and that related to other risk behaviours. The DfES document 'Drugs: Guidance for School's stresses that drugs education in schools should set realistic aims. These aims should be 'appropriate to the age and maturity of pupils' (2004: 18). Schools should plan drugs education to be sensitive to cultural or religious backgrounds that may affect attitudes to drugs, and appreciate varying beliefs and values (2004: 30). At no point in this document is the

issue of gender differences in risk taking specifically acknowledged. The term 'maturity' could be applied to the developmental differences between males and females during adolescence. However such a distinction is not clear enough.

9.43. Acknowledging the Need for Sensation in the Risk Society

All controlled drugs are dangerous and nobody should take them.

(HMSO March 2005)

Utopian thinking is useless, and possibly extremely dangerous, if applied, say to the politics of deterrence ... it can lead to perverse outcomes if not tempered by the realization that, with high consequences risks, the minimizing of dangers must be the overriding goal.

(Giddens 1990: 155)

This research found that evidence to suggest that risk taking in adolescence may have functional properties. Although the link between function and the use of cannabis has not been empirically tested, there is evidence to suggest that risky activities, including recreational drug use, may be appropriate. However, the official line, noted here, is complete abstinence. This contradicts many academics, including Giddens, who appreciates the dangers not of risk taking itself, but of the 'politics of deterrence'.

The national guidance for schools notes that drugs education is a stepping stone to drug prevention. The aims of drug prevention are; to minimise the number of young people engaging in drug use, to delay the age on onset of first use, to reduce the harm caused by drugs, and to enable those who have concerns about drugs to seek help (2004: 18). It also recommends that drug education should help young people to manage risk and develop associated coping strategies. This is an important aim given the current risk taking climate. However the overall remit of prevention contradicts that of harm minimisation. It could be suggested that a more specific line on harm reduction could

be taken, specifically if recreational and problematic drug use were separated. The term 'harm-minimisation' is found in sections on alcohol use. It is suggested that similar terms should be acknowledged in the section on cannabis following the findings presented to stress the problematic overtones of alcohol use. Such a conclusion overlaps with the following sub section.

9.44. Addressing Functional Risk Taking

Risk taking in adolescence is a reality, and generally observed as actions specific to that period of life, which will not necessarily lead to long term problems (Dickinson, Derevensky, & Gupta 2004: 246). Thus functional risk taking is behaviour that is realistically appraised and effectively managed, temporal and therefore not persistent throughout the life course, produces benefits from the act itself (pleasure) and also the negotiation of such (control). The array of adolescent lifestyle choices therefore warrants conceptualisation on the basis of a continuum, differentiating for example, between 'substance use per se and use-related problems' (*ibid.*: 246). Within this continuum

> There may well be a role for prevention initiatives that seek to limit the harmful consequences of problem behaviour until the onset and course of the problem behaviours has run its term, rather than aiming to change the course per se.

(*ibid.* : 246)

The distinction provided in Chapter Six between functions and problems now becomes vital. National recommendations for drugs education aim 'to reduce the harm that illegal drugs cause to society and to prevent today's young people from becoming tomorrows problematic drug users' (DfES 2004: 14). It is welcoming to note that such guidance also appreciates such distinctions.

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The following example given by one young male, and already presented as a feature of sensation seeking, gives a clear indication of the young persons perspective on functional and problematic distinctions.

do you think it [cannabis] should be legalised?

M   no cos part of havin' it is risk of it's illegal and getting caught, so then you'd move on to other drugs probably, more dangerous stuff

(mY10)

The abstinence approach to drug use and risk taking in general has not proved to be successful. We can no longer expect young people to avoid risk taking. Adults have created a world in which the search for understanding and certainty is impossible for themselves and even more difficult for younger people. Young people will take risks to take control of their lives, to prove they are different, to prove they are normal, and to understand themselves. The respondents in this study could not have highlighted this insight more clearly. The ability to control getting caught gives them a sense of satisfaction, separate from the 'buzz' and excitement of the act itself. This young person did not want a life which was risk free, as this would only in turn lead to the search for new and more harmful risks. He is telling the researcher that the gateway effect exists and that it is adult intervention, not the young themselves, who could be directly responsible. Rather than running the risk of introducing a catalyst into the gateway equation, policy needs to deal with the social construction of risk and those issues relevant to young people. We cannot take those risks away, or the opposite of our intentions is likely to occur. Therefore a holistic approach within schools that acknowledges that non-problematic substance use is functional for the affirmation of the

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self is recommended. The distinction between healthy and harmful risk taking needs to be identified and tackled with different sets of tools.

9.45. Addressing Parental and Peer Influence

Before passing significant comments on the self-related biases, the ultimate foundations of decision making, a note on the role of the other is required. The role of parents and peers in the intervention debate adds clarity to the affective (in terms of emotive influence) push-pull model shown in Figure 8.0. Peer influence has been found to bias situations of risk seeking. As risk seeking is now acknowledged as a condition of the Risk Society, it makes sense that such an emotive influence is found to be the most influential factor in adolescent risk behaviour (Warr 2002). Alternatively, parental contributions stem from the support for risk aversion thus creating the conflicts of interest debated in the Chapter Six. In this respect, peer bias adds to the positive emotive response to a risk endeavour, whereas parental regulation would generate a contrasting negative emotional response. Although evidence supports the removal of delinquent peers, and the increase of parental attachment as methods of successful intervention, such a philosophy again adheres to preventative principles. The preferred methods of addressing such bias would stem from what Slovic described as the 'affect game' (section 9.33).

9.46. Addressing Exaggerated Optimism

LL we've had people in who's been on drugs and things like that

MM yeh, been through rehab and everything, showing us scars and everything

OO when you see somebody that's been through it

MM you think to yourself, oh my god I'm not gonna get myself into the state that they are and some

  of the stories that they tell you, what they've actually done to get the drugs it makes you feel

  like, why do that, it's only a habit at end of day, it's like owt else, you've got to work your way

  around it and get over it

(f Y11)

The method of intervention described by the respondents followed a similar format to those comparison targets indicated by Weinstein & Klein (2002: 323) in section 9.11. They found that providing high risk targets to reduce the optimistic bias of subjects was ineffective, and could produce the opposite effect. The sample used in this study provided evidence to suggest that this was indeed the case. Initially, members of the sample acknowledged the shock tactic and reflected on their personal vulnerability. They welcomed the lived experience, and although it did not bear resemblance to their own, this demonstrated the importance of this concept.

Yet it is interesting to note that the concept of personal control and responsibility was apparent in discussion. This links back to those indicators of optimistic bias presented in section 7.12. It is possible that because this 'lived' experience had little personal relevance to their own, the concepts of addiction, and the ability to overcome it without the intervention of 'an other' (family, drug treatment services etc) was underestimated ('it's only a habit'). An unrealistic account of this activity was thus formulated. Slovic (2003) found similar results with his affective smokers who suggested addiction was not

known until one was personally involved in it. However Slovic suggests that the affect game involves the introduction of 'people who have suffered'. It is worth considering that such an intervention may have ill-conceived consequences. This evidence, although welcomed by the respondents, may indicate an increase in optimistic bias and a situation that compares somewhat to the findings of Weinstein & Klein. Such methods need to be aware of the by products of seemingly effective techniques. Rather than using the other as a primary source of bias, perhaps a balance needs to be struck with the experiences of the self. In addition optimistic peer involvement will not be addressed via experiences with little relevance to the target audience. The phrase 'it won't happen to me' may be more be likely to be used if the comparison target bears little resemblance to the subject group.

9.47. Addressing the 'Lived' Experience

Many commentators previously cited (Denscombe 2001a, Lupton & Tulloch 2002, Duff 2003) have made reference to the lack of context specific information provided to risk takers. Furthermore, without such a resemblance, 'expert' accounts will continue to be undermined. This research showed that the sample was more likely to have tried cannabis if they had witnessed its use more than twice, and that such witnessed experiences were predominantly positive. The normalisation of consumption and the positive overtones of use should perhaps be acknowledged within drugs education. There is some encouraging guidance on the role of experience within drugs education, with Evans (2002) concluding that 'talking about drugs within the context of young people's lives' and appreciating that young people are diverse in their experiences and expectations are very effective educational tools. The DfES guidance document also contains a section on context where it outlines that drugs education should relate 'to

their own and others actions' (2004: 7). Specifically valid are 'normative' techniques which challenge overestimations of peer involvement in drinking, smoking and drug taking (ibid: 20). However in relation to cannabis the DfES (2004: 25) state that

> It is important for schools to reinforce to pupils the message that cannabis is harmful to health and is still an illegal drug, and that possession remains a criminal offence leading to a possible criminal conviction.

Again we find that it is the content of the approach rather than the framework which needs tackling.

One can infer the possible disadvantages of contradictory messages regarding levels of consumption and experiences. By removing over estimation of peer involvement, and by suggesting that such behaviour is not the norm, are schools encouraging those who do experiment to become even more removed from the harm minimisation content of the input? If the norms of the intervention are again in direct contrast to those of the young person ('well I know for certain that the majority of my friendship group use cannabis') then we again provide information which bears little resemblance to the lived experience. Although addressing overestimation may prevent experimentation in those who have not tried the drug, the risk of alienation for those already engaged in use is thereby increased. Is intervention risking the onset of problematic use in an activity which had now become the norm? The impact on those who have had prior involvement, and involvement which is may be functional, needs addressing in addition to those who have not (yet) begun.

Head (1997) comments on his two principles of effective adolescent development via education. These can be linked specifically to drugs education and the lived experience. Firstly, he suggests that personal freedom must be balanced with recognised rules to

support communication. Secondly, the growing maturity of the student must be acknowledged – if they are treated as immature they are likely to stay that way (1997: 106).

> Increasingly, as they mature, we should help the students feel that they 'own' their newly acquired knowledge. By this term we mean that they should not see the lesson content being presented as a take it or leave it basis, something to be assimilated simply because the teacher says so, but as something relevant, useful and valuable to them. They need to integrate this new material with their prior knowledge so that the new becomes fully meaningful to them … owned knowledge is likely to be valued, and knowing what one values is part of personal identity.

Thus we see here that it is necessary to embed new forms of knowledge into the lived experience to promote this sense of ownership, and ultimately of self awareness – this is who I am and this is what I know.

9.48. Addressing the Context and Content of Knowledge

The jury is still out on the conclusions to be derived from the choice between informed choice or ignorant recipients. What is clear is that techniques that try to correct an unrealistic knowledge base through the provision of accurate information are failing. This research found that knowledge was patchy and confused in places. More importantly, the sample were confident, perhaps overconfident (expected as part of the optimism ethos) that they knew the risks involved. The cited literature, and the example given by the respondent cited in section 9.43 suggests that young people may not have a clear and realistic comprehension of the nature of addiction, although it is likely that they believe that they do. The reason this knowledge is not complete is due to optimistic bias and the lived experience. Young people, presuming they have not or are not experienced in the world of addiction, have no personal frame of reference. Their knowledge is incomplete due to gaps in their *own* experience. They then believe, having been provided with the information intended to fill this gap, that if it happened

to them they would be able to 'get over it'. For those who have experienced lived positive outcomes, optimism still prevails due to the contradictory assumptions and teaching of knowledge based education. For those who have experienced lived negative outcomes, continued use may prevail due to the ability to negate personal history, or as suggested, via the continued optimism of control.

9.5. Managing Risk Perception and Engagement - Flow Diagram

The diagram (Figure 9.0) displayed here highlights the connection between the aforementioned points.

Figure 9.0 Managing Risk Perception and Engagement

The Risk Society						
Y O U N G P E R S O N	No Lived Experience Gaps in Knowledge Base Confident They Know All the Risks	Cause ⟹	Emotive/ Affect Heuristic	Effect ⟹	Initiation Lived Experience	Intervention ⟹

	Risk Management Approach Realistic Experimental/ Recreational	Knowledge-based Approach Idealistic Abstinence
		Effect
⬇	**Outcome**	Increased Optimistic Bias
		Outcome
	Functional Risk Taking	Problematic Risk Taking

9.51. The Young Person

The chart maps the development of risk taking from initiation to further use.[1] The diagram starts with an individual who has no previous experience in the said behaviour and therefore has gaps in their own knowledge about the risks involved. At this stage, evidence from this research suggests that even without actual participation, young people believe they know the risks involved. For a proportion, the risks are acknowledged and behaviour follows with little regard. For others, their perception of the possible risks or perhaps previous critical incidents may prevent future use.

9.52. The Impact of the Risk Society

In this diagram the Risk Society is graphical represented as the constant conditions within which these decisions are taking place. Furthermore such conditions have been analysed to suggest that they may also have a considerable impact on the decisions themselves. Retuning to the discussion provided in Chapter Five, young people may feel the need to take risks to control decision making in a seemingly uncontrollable and uncertain world. Furthermore, the scepticism and fatalistic view of the world as adopted by marginalised groups demands the curiosity to take risks – to seek sensation. This search is predominantly the desire for fun, adventure, and laughter, and culminating in the perception of 'goodness'. This desire then biases the young person into believing that every risk situation is a good situation, which can only be monitored by the following steps – personal experience and the minimisation of harm.

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[1] It is appreciated that there are many permutations of this relationship, for example with intervention occurring before initiation, or occurring without initiation. It is suggested that the biases found at each stage would be apparent in some form regardless of the direction of the diagram.

9.33. Positive 'Affect'

It is suggested that the affect heuristic is central to the perception of risk taking provided by the framework of the Risk Society. This search for emotive 'goodness' is included in acknowledgement of the affect heuristic (see Slovic 2002, 2003). In addition peers and their approval, through the process of collective practices and interaction of practical knowledge (Loader 1996) and techniques of neutralisation (Sykes & Matza 1964), mediated experiences and a sense of optimism, may specifically lead the young person to a positive illustration and ultimately expand into the realisation that the decision to participate is a good one to make. In addition exposure to positive images of others use and experimentation (supported by this research) also increases tolerance which in turn can lead to initiation (Jessor & Jessor 1977 in Hammersley *et al.* 2001). For those who choose to reject this specific risk, it is hypothesised that alternative risks and sensations will be sought.

9.54. Initiation

The effect of 'affect' is initiation, creating for the first time a realistic account of the risk embedded in the lived experience. This realism, unique to the individual may positively conclude 'I smoked cannabis and I liked it, I didn't feel ill or get in trouble by the police or my parents' or alternatively support a negative experience 'I was sick, I didn't like it and my parents grounded me for two weeks'. Evidence showed that the sample did not generally downplay negative experiences, indicating that any negative reaction may well be followed by cessation of use. Figure 9.0 then becomes more relevant for those individuals who appreciated the positives of this experience.

9.55. The Educational Approach

The discussion turns to the effects of intervention, that now follow two very different paths. The educational approach assumes that young people have gaps in their knowledge that may mean that they are not making entirely informed decisions. This knowledge based approach attempts to prevent further use by providing risk factors, comparative stories, possible negative outcomes and experienced accounts (some of which may be adopted by parents). It is well known that this approach does not work (see Slovic 2001, Jamison & Romer 2001, Lundborg & Lindgren 2002, Byrnes 2003). In fact some studies have shown that such shock tactics do the opposite of their intention (Weinstein &Klein 2002).

9.56. Increasing Optimistic Bias

Rather than making individuals aware of the risks they face the supply of risk information actually increases their optimistic bias of their ability to avoid them. It should be noted that before initiation, with only narratives and feelings of trust and loyalty to use as their decision base, young persons find themselves feeling essentially uncertain. The act of risk taking goes some way to quashing these feelings as the illusion of control and the negation of disappointment symbolise belonging to the group, and confidence in actions and identity. However this uncertainty must not be exasperated by methods of intervention. The reason this type of intervention is not effective post-initiation is because such information has little relevance to the lived experience. As cited by Duff (2003, 2004) the messages surrounding the legality and health risks of cannabis have little relevance to the initial experience 'I smoked cannabis and I liked it, I didn't feel ill or get in trouble by the police or my parents'.

9.57. Problematic Use

In essence the effect is that the individual will continue to assume that this outcome will always transpire. As identified, risk taking will always occur due to the conditions of the Risk Society and is necessary for the development of the self. If the knowledge based approach is maintained, with little relevance to the lived experience, skepticism of expert accounts[2] and a belief in personal invulnerability may lead to problematic risk taking, an escalation of prevalence and severity of use.

9.58 Harm Minimisation and Risk Management

An alternative intervention approach which addresses context, the lived experience, is realistic about the continued occurrence of risk taking, drug experimentation and recreational use is clearly desirable. Rather than trying to fill the gaps, we must acknowledge that the owned lived experience is a valuable and *equally credible* source of knowledge – therefore attempting to minimise any possible harm rather than trying to prevent participation. The effect of adopting a process of harm minimisation and risk management hopefully allows the majority of adolescent participation to remain experimental or recreational. Young people will possibly be less at risk due to the provision of a safe, controlled and monitored risk environment. The outcome results in a real world appreciation for risk taking, one which can be functional for the development of the self. Such behaviour, although beneficial during adolescence, then may appear to become a 'phase they grow out of', as its inherent qualities

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[2] In must be noted that the majority of the sample did not show signs of scepticism of taught information. However, given that only a fifth of the sample had tried cannabis, the opinions of those with lived experience in the focus groups (approximately a quarter of the total sample) may have been limited. In addition the context of the data collection (in school) could also have implicated bias on these answers.

(entertainment, peer relations, edgework, learn from mistakes, testing boundaries of authority etc) have been absorbed.

9.6. New Methods of Intervention?

> Unlike staunch proponents of the rational-actor models, behavioral decision researchers can be driven by facts, ready to allow whatever they observe to enrich their science.
>
> Fischhoff (2002: 748)

What is apparent from this discussion and attempts to modify educational practices is that biases of judgment can never be entirely corrected. The lived experience may correct the bias of knowledge but may contribute to a change in optimism. Taught knowledge (even if we question the biases of experts) may alter a sense of optimism but may not counter the influence of peers. The lived experience becomes the central determinant, but can further bias judgments dependent on a positive or negative experience. Therefore, intervention must teach the neutral skills to deal with bias rather than creating additional ones.

9.61. Teaching Risky Decision Making Skills

Boyne (2003) makes some reference to the above point in his recent work on risk. He advocates that methods and techniques of decision making and risk assessment should be taught at school as part of the citizenship curriculum. A similar approach has been included in the 2004 DfES drugs education document. This document outlines the national aims of drugs education in schools as the development of: knowledge via the clarification of misconceptions, skills to make informed decisions including the 'assessing, avoiding and managing of risk' (2004: 18), and to challenge their own and other peoples attitudes. However, should the challenge now be to merge all such

behaviours under the umbrella of risk taking and tackle them together, regardless of how they are conceived? Boyne suggests that without such a move young people are provided with vital information without an understanding of how to use it. He advocates the introduction of teaching methods to address the value of evidence, the use of 'decision matrices and compromise formation' to tackle assessment and evaluation of risk.

Although the attempt to tackle risk taking per se via the curriculum is applauded, it is suggested that Boyne has contradicted his own theories, and much of the present research, with these conclusions. Firstly, there is Boyne's own issue of cultural context. If it is the latter which explains how we 'measure and prioritise' risks, rather than the risk itself, is it wise to focus intervention on this generic concept? Are we recognising cultural and contextual variations by adopting a standard means of risk assessment? If we are sure that such an approach will not discriminate variations in risk conceptualisation, perhaps Boyne can be reinterpreted. If, as we know, drugs education is flawed due to its present inability to tackle cultural context (Duff), then the idea of loosing the boundaries of the current curriculum in favour of a generic risk management approach could repair this flaw. If young people were taught decision making techniques, under the umbrella of risk but with an appreciation of contextual issues, then Boyne may be correct.

9.62. How Does Teaching Decision Making Tackle Optimistic Bias?

However if these methods addressed the faults of the educational approach by tackling context, how then does it address optimistic bias? Of what benefit is a decision matrix if a young person believes they know all the possible risks, believes that are not likely to

sustain physical harm, have no fear of parent reprisal and have witnessed their peers suffer no adverse consequences? We have seen that risk increasing information alone does not address optimistic bias, and it is likely that the discussed methods would also fail faced with this hurdle if context is not specifically applied.

9.63. Prevention of Risk Taking or Management of Risks?

The notion of risk assessment should be replaced by the term risk management if this was introduced. Management refers to many of the ideals of the harm minimisation thesis, whilst assessment could imply prevention. This leads on to the second point of concern. Would the introduction of decision making techniques be biased towards an elimination of risk taking? If a young person were to use a decision matrix when faced with a choice would it ultimately lead them to avoid the risk? The crux of this point is whether curriculum based risk intervention would acknowledge that some risk taking may be functional for young people - a problem which needs to be overcome with any future programmes.

The present research has shown that risk taking by young people covered many spheres of activity. Would such techniques apply to all risky decisions? Can the decision to use cannabis be made using the same rationale as decisions surrounding GCSE options? Can the functional and problematic outcomes of risk taking be addressed in the same way? Figure 9.0 could not claim to provide a fit for all risks. It may not be appropriate for risks which negotiate addiction. Furthermore, those activities which are not even considered as risky by young people (e.g., alcohol) warrant separate analysis. Therefore can education really benefit from a grouped strategy?

9.64. Tackling Mistrust?

Finally we return to a point made by Boyne himself, linked specifically to the remit of this research. Any school based intervention needs to tackle the issue of mistrust by its students. Following the rationale of the Risk Society, we suggest that the damage created by scepticism in expert systems has already been done. As context and the lived experience has been omitted from education, young people fail to trust those people and materials designed to guide them. Can we suggest that the above redesign of school based intervention will be any different? Will our subjects trust the rationale of our decision making tools? If the sample in this study is anything to go by, then the conclusion is positive. However, the limitations of the data collection do not allow for such a generalisation to be supported.

9.65. Using the Specifics of Heuristics

It is clear from the above discussion that some effort must be made to de-bias the decision making ability of young people. Many measurements have been tried and are failing, not least due to their remit of avoidance. However Fischhoff (2002: 747) cites that academic based 'better process' are now being introduced. An evaluation of a 'social skills' real-world training program aimed to reduce the risk of behaviours such as smoking and drink driving can be used as a valid marker.

These programs aim to help teens understand and resist temptations, in part by addressing judgemental biases. For example, course leaders explain how the availability of other teens' overt risk behaviour (and claims thereof) leads to overestimating their prevalance – whereas less salient avoidance of risk behaviour is underestimated. That lesson is reinforced in group discussions of strategies for avoiding risk behaviours. These exercises attempt to make otherwise abstract base rates concrete – in addition securing public commitment to better behaviour. Showing students the (surprisingly) high rate of responsible drinking is part of social marketing approaches found to reduce binge drinking on college campuses (Wechsler *et al.* 2000).

Fischhoff (2002: 747)

However, progress is slow, and many of these programmes still require more attention to the specific rather than general content (*ibid.*). Fischhoff's conclusions are welcomed. Either, he suggests, such teaching allows 'better real-world choices' to be made, or they work simply by an approach which respects the rights of young people to make their own choices. It is possible to see some benefit in both of these evaluations. Jamieson & Romer (2003: 375) note that such skills demands 'additional research to determine the optimum ages at which to deliver these educational interventions and to determine the duration of their effects'.

It is noted that many contemporary risk commentators have overlooked the specifics of heuristics, the contradiction of functionalism, the role of the consumer and the attitudes of a sceptical youth in their suggestions for the future. This discussion has identified such weaknesses, and it is hoped that such limitations will be addressed in the future. The grounding of this discussion in the conditions of contemporary society is necessary if risk taking and specifically drug use is to be effectively managed. The development of such a task should pay close attention to the biases of judgment played upon throughout the decision making process if real advances are to be made. Those commentators who have attempted to address these issues have stopped short of providing accounts that can be used to alter intervention at the base level in favour of abstract dialogue. This research has attempted to join together the abstract and the

concrete spheres of discussion as an illumination of the pathway towards a real

appreciation of young people and their decisions about risk.

Summary

9.1.

- Those methods designed to address optimism, experience and knowledge have proved unsuccessful and theoretical reasoning can explain such failure.

9.2.

- Those measures which do attempt to tackle such biases are limited by the contradictions of legislation, prevention and consumerism.

9.3.

- Perhaps the key as to why specific methods fail is the unrealistic aim of prevention which still prevails in currents drugs education.

- Harm minimisation, as an end in itself, should re-align such aims to emphasise the possibility of function and the role of risk management.

9.4.

- The work of Duff provides an overview of the relationship between the Risk Society and the context of adolescent drug use but does not identify the heuristic base needed to carry out such ideas.

- Future drugs education needs to appreciate the diversity of definition and context, for example with an acknowledgement of gender differences.

- Future drugs education needs management to shout louder than prevention to recognise the desire for sensation in contemporary society.

- Such a management ideology should view risks on a continuum, which acknowledges that to negate risk promotes problematic rather than purposeful engagement.

- The role of parents and peers in the affect game is to address the emotive push-pull relationship with the individual rather than direct intervention on each other.

- Optimistic bias must be considered as a by product of seemingly helpful techniques, even those designed to address the affective bias.

- The official line of the appreciation of the lived experience is a starting point. However the content rather than the framework of such methods needs fine tuning to support clear communication and the maturity of the young person.

- The knowledge base of young people will always be incomplete if no lived experience is gained. Providing knowledge alone will not address optimistic bias effectively. Therefore risk management must be developed in context either before or after initiation.

9.5.

- The relationship between the points raised in this chapter can be conceptualised in a flow diagram which highlights the problematic effects of not adhering to these recommendations.

9.6.

- To teach decision making skills or social skills is an important step in the negotiation of risk but future work must look to the arguments of this research in the creation of principles and specific techniques.

Conclusions

This work has been conducted during a period when the risk literature has seen considerable activity. The abstract conclusions of the sociologists of risks have been married to the behavioural analysts of decision research to create an account of 'judgements under uncertainty' (Kahneman, Slovic, & Tversky 1982), which suggests more resonance of the latter word than the founders of the term initially prescribed.

8.0. How Do Young People Define and Conceptualise Risk?

Initial investigation into the risk arena polarised the debate into two spheres which were acknowledged throughout this thesis: to live at risk (conditions of insecurity) and to take risks (conditions of uncertainty). The emergence of research (see Lupton & Tulloch 2002, not specific to young people) into the latter, voluntary risk taking, had demanded that contextual parameters be set prior to any more detailed analysis. In addition, the review of the literature also highlighted the diverse and interchangeable application of concepts synonymous with that of risk, emphasising the need to ground any research in this initial analysis. What such commentators found was that, although predominantly threatening, many of the activities described under the umbrella of risk had positive overtones. This research also acknowledged that the starting point for investigations into risk must tackle definitions and context. In addition, the fluidity of such an exploration would provide useful tools in the postmodern climate of inquiry.

The definition of risk by the selected sample was explicitly linked to the concept of social acceptability. The majority of risks cited by the respondents did not adhere to the common assumptions of socially *un*acceptable risks. This finding was presented in

direct contrast to the stereotypical image of the young risk taker and the dominant line of academic inquiry. In contrast it was the connotations of danger that provoked predominantly negative consequences. It therefore followed that instances of risk did not necessarily involve danger. Furthermore, the sample aligned cannabis use with the concept of danger due to their association of the act with health related consequences.

In addition a clear distinction was found in the gendered concept of risk. Using gender as one specific demographic variable added another marker of diversity to the context and definition of adolescent risk. There are many other such variables that could have been addressed. However any age range was used collectively to signify the period of adolescence and the small scale empirical work did not support variations in ethnicity or social background. What this analysis did highlight, however, was the need for context specific research and a broader appreciation of the nature of risk applicable to young people

8.1. Under What Conditions are Decisions Involving Risk Made?

The definition of risk as one harbouring social acceptability is grounded in the conditions of contemporary society. It followed that as risk taking is necessary as a coping strategy, and as a self affirming process, those who actively engage in it should view their behaviour as acceptable. Although the respondents in this study showed limited inclination to view drugs as acceptable, the literature suggests that drug use is fulfilling many of the functions traditionally credited to risky sports, smoking and alcohol use. Furthermore the discussion surrounding the dichotomies of risky behaviour provided an account of the use of alcohol that proved to be of more concern.

This study has shown that the effect of assuming negativity and deviance in association with risk is proving to be detrimental to youth. Such a conclusion, when analysed in the context of the Risk Society is damaging to the smooth transition from adolescence to adulthood. An acceptance of function and management coupled with the need for emotive sensation must be incorporated into the perspectives of adolescent behaviour.

8.2. What Specific Factors Bias Such Decisions?

Via a thorough review of the risk literature, five biases of judgement were identified and critiqued. Each of these factors was tested via vignette analysis in relation to cannabis, and in wider discussions of various activities. All the factors were found to be relevant to adolescent decision making. It was not possible to test the strength of the association between the variables and tentative analysis suggests that such concepts (optimism, experience, knowledge as the base biases, and parents and peers as contributors) are by no means mutually exclusive. Those of paramount concern were the use of optimism which is difficult to de-bias in a society in which neutralising risk has become the norm. In addition the lived experience must be acknowledged as alternative knowledge, just as the influence of the other must tackle the bias of emotional attachment.

8.3. What are the Implications of this Analysis?

The implications of the analysis undertaken in this research can be brought full circle and related to the work of Giddens. Giddens (1990: 135) cites four methods of dealing with risk which can be answered in relation to adolescents.

Do young people radically engage in their risk environment to avoid or reduce its consequences? The notion of radical engagement could hold true if its crux was not to avoid or reduce risk. The literature suggests that young people actively engage in the risk environment for the benefit of the risk itself rather than for its prevention.

Do young people adopt a cynically pessimistic view of their risk environment? The literature suggests that young people hold optimistic bias in relation to risk events. Therefore the notion of pessimism is redundant. Pessimism within the Risk Society is neutralised via active involvement rather than humour.

Do young people sustain optimism in relation to their risk environment based on faith in expert solutions? The optimistic relevance is noted although the faith in expert reason is contradictory. For many lay persons, this method is the most appealing based, as it is, on a lack of knowledge and trust in science and technology. In the Risk Society, this trust is faltering and holds more resonance for young people as their lived experience contradicts the taught word. Although the empirical data did not significantly imply sceptical youth, neither did they suggest optimism in their risk environment. Rather optimism was felt with regard to the self.

Do young people have a pragmatic acceptance of their risk environment? This method seems to draw on many of the issues raised in this thesis. The issue of survival and daily engagement is linked to the coping strategies of adolescent risk takers. Young people do not withdraw from the risk environment but embrace it as an opportunity to develop their self identity. Participation does not have to be high risk and examples may be given across a continuum. Any reasoning which stems from pessimism – it's going to happen anyway – links to the omnipresent force of the Risk Society.

Alternatively hope – it won't happen to me – brings in the notion of optimistic bias. The fact that the sample in question were adamant that they knew the risks involved in a number of activities suggests that acceptance is more likely.

This pragmatism should be acknowledged by any method of intervention, and is one of the key concerns of researchers attempting to challenge the current climate of education and regulation. Without such a shift, any methods devised to address decision making skills based on the aforementioned heuristics will again be subjected to cynicism and rejection, the product of which may well be problematic risk taking.

8.4. Final Comments

One must resolve the following when providing conclusion on this topic – the way in which risk perception is measured will ultimately affect the results obtained. Weinstein's (2001) comprehensive review of previous research on smoking cements this point. With any claims of measurement of appraised risk validity and reliability are open to question. The risk discipline could benefit not only from a clear and constantly revised definition as alluded to in this discussion but a standardised procedure for assessment that is removed from the psychometric paradigm of old. At present, Weinstein (2001: 95) suggests 'further research on how people naturally think about risk is certainly needed'. However, 'no single method for assessing risk perceptions can be recommended'. The key is to take the factors central to this research and construct singular investigations carried out in similar ways. One could suggest that the psychometric paradigm did just this. However, the conditioning of wider society was not fully accepted, nor were measures attached to risk seeking rather than risk avoidance.

Appendix A: Types of Risk

Table A.1 Health

Activity	Males	Females	Total
Alcohol related	1	6	7
Smoking tobacco	1	5	6
Unprotected sex		2	2
Slitting wrists		2	2
Overdose		1	1
Total	2	16	18

The risk here was to personal health, physical harm to the individual on the outset. However, these risky acts also involved the risk of getting caught (by parents/police - alcohol, tobacco, or by pregnancy/parents – unprotected sex).

Table A.2 Sports and Leisure

Activity	Males	Females	Total
Under age clubbing		2	2
Bungy Jumping	1	2	3
Water skiing		1	1
Windsurfing		1	1
Jet skiing		1	1
Banana boats		1	1
Para gliding		1	1
Abseiling		1	1
Football	2		2
Taekwondo	1		1
Rock climbing	3		3
Fireworks	1		1
Skateboarding	1		1
BMXing	1		1
Snowboarding	1		1
Ice hockey	1		1
Tennis	1		1
Swimming	1		1
Total	14	10	24

The dictionary definition of 'sports' *pl.n.* athletic activities: a meeting for competition in these'. This category is defined by activities that may be classed as hobbies or leisure

pursuits. The risk here was again of personal harm coupled with the risk of losing or playing badly in competitive sports. Many of the sports involved individual rather than team risks. **'leisure'** *n.* time that is free from work, time in which one can do as one chooses. Similarly fireworks displays can be classed as a leisure pursuit with the risk of personal harm or harm to others. Under age clubbing was a leisure pursuit that involved the risk of getting caught.

Table A.3 Disobeying Parents

Activity	Males	Females	Total
Lying to parents		3	3
Doing thing parents don't allow		10	10
Doing thing parents don't know about	2	1	3
Total	2	14	16

The element of risk here was obviously that parents would find out about the deception. In addition, the consequences may have involved some form of punishment.

Table A.4 Stunts and Play

Activity	Males	Females	Total
Play in hay bales	5		5
Stunts on a bike	4		4
Run in farmers fields	1		1
Messing around	1		1
Hedge hoped	1		1
Jumped off a roof	1		1
Snorted alcohol	1		1
Jumped through flaming furniture	1		1
Pranks	1		1
Jumped off things	1		1
Total	17	0	17

'stunt' *n. (informal)* something unusual or difficult done as a performance or to attract attention. **'play'** *n.* to occupy oneself in a game or other recreational activity. Differentiated from sports via the lack of set rules and regulation. Stunts and play did not involve illegal acts on the whole, although it is not known whether some of the play

areas involved trespassing. The risk element entails physical harm. Although stunts and play may be carried out in a group, the harm would tend to be to the individual, rather than engaging in acts that put other people at risk.

Table A.5 Association With Others

Activity	Males	Females	Total
Talking to someone don't like		1	1
Messing around with serious people		1	1
Go out with friends who commit crimes		2	2
Doing things with my friends	1		1
Lying to keep others out of trouble	1		1
Total	**2**	**4**	**6**

This category includes activities that specifically involved other people. However the element of risk was to the individual, brought on by the association with these other people.

Table A.6 Wrong Place, Wrong Time

Activity	Males	Females	Total
Walk home alone late at night		1	1
Being places not meant to be	1	3	4
Going to peoples houses far away		1	1
Doing things not supposed to		1	1
Walk across a cow field		1	1
Going out in middle of night		1	1
Walking to shops at night	1		1
Total	**2**	**8**	**10**

This category is influenced by the phrase 'being somewhere I shouldn't'. The risk here was either that someone (possibly parents) would find out and reprimand them, or they risked personal harm at the specific location.

Table A.7 Roads

Activity	Males	Females	Total
Run across main road	1		1
Crossed when not safe	3	2	5
Played chicken	1		1
Crossed a road	1		1
Walked down middle of duel carriageway	1		1
Total	**7**	**2**	**9**

This category is self-explanatory and involved any acts undertaken on a road. The risks involved were of personal harm to the individual and others (drivers).

Table A.8 Transport

Activity	Males	Females	Total
Get in boy's cars		5	5
Riding a motorbike	2	2	4
Getting lifts from strangers		3	3
Learning to drive		1	1
Getting into a car	1		1
Going on an aeroplane	1		1
Breaking the speed limit	1		1
Total	**5**	**11**	**16**

This category involved any form of transport used for travel (rather than for play in the case of bikes). The apparent risks here were of personal harm and harm to other road users (accidents). In addition learning to drive included the risk of failure. One activity, which was perhaps unique to this sample, was getting into cars with boys and strangers. This was a female dominated activity participated in with older boyfriends, to attract boyfriends or to uphold certain images. There were multiple risks involved here, including car accidents and sexual propositions. This is a worrying activity in light of recent female abduction cases.

Table A.9 Criminal Acts

Activity	Males	Females	Total
Taking drugs		1	1
Stealing		3	3
Smoking cannabis	1		1
Brought cannabis through channel tunnel	1		1
Broke into a car	1		1
Stole school equipment	1		1
Total	**4**	**4**	**8**

Criminal acts included (amongst others) any drug related incident. It was considered appropriate to separate drugs from health activities such as drinking and smoking, as the latter have only a temporary illegal status.

Table A.10 Helpful Acts

Activity	Males	Females	Total
Helped someone in a fight		2	2
Stopped someone from being run over		1	1
Saved brother falling from a roof	1		1
Total	**1**	**3**	**4**

Helpful acts are again self-explanatory, and involved others being in trouble; taking risks for the benefit of others. The element of risk here was of personal harm, and the inability to prevent harm to others.

Table A.11 Disobeying the School

Activity	Males	Females	Total
Truanting		3	3
Going to chip shop during lunchtime	1		1
Total	**1**	**3**	**4**

This category is again self-explanatory with the element of risk being detection and reprimand by the school and/or parents.

Table A.12 Life Choices

Activity	Males	Females	Total
Taking economics GCSE		1	1
Total		1	1

Table A.13 Cosmetic

Activity	Males	Females	Total
Belly button piercing		1	1
Total		1	1

The two final categories were designed for one response (the same respondent) that could not be placed into any of the above. Life Choices was an extremely interesting category, with the possible risks providing an endless list (ranging from affecting future career prospects to depression). Cosmetic risks included health risks and reprimand from parents/school.

Appendix B: Types of Danger

Table B.1 Stunts and Play

Activity	Males	Females	Total
Walking on a roof		1	1
Having a fire	1		1
Playing in hay bales	4		4
Jumps on a skateboard	1		1
Jumped off a wall	1		1
Walked on the edge of cliffs	1		1
Playing in trees	2		2
Playing on a building site	1		1
Stunts on a bike	1		1
Riding a bike	1		1
Climbing on roofs	2		2
Tarzan swing	1		1
Walked over canal locks	1		1
Stunts	1		1
Total	**18**	**1**	**19**

Stunts and play did not involve illegal acts on the whole, although it is not known whether some of the play areas (e.g. building sites, roofs) involved trespassing. The danger element entailed physical harm. Although stunts and play may have been carried out in a group, the harm would tend to be to the individual, rather than engaging in acts that put other people in danger

Table B.2 Health

Activity	Males	Females	Total
Smoking tobacco	1	6	7
Drinking alcohol	2	7	9
Attempted suicide		1	1
Self harm		2	2
Total	**3**	**16**	**19**

Obviously the danger here was to personal health. These activities would not necessarily be carried out in groups, although the peer group is where the act may have originated. On the whole other people were not being placed in danger. The other aspect of danger involved the purchase of the substance by underage individuals.

Table B.3 Criminal Acts

Activity	Males	Females	Total
Smoking cannabis (skunk, weed)	1	5	6
Taken drugs	2	3	5
Total	**3**	**8**	**11**

Criminal Acts (drug use in this case), have multiple explanations of danger. Initially there was the danger of the illegal act, getting caught possessing, or buying the drugs. The secondary danger (for the purpose of this category) was the danger of possible physical harm to the individual.

Table B.4 Sports and Leisure

Activity	Males	Females	Total
Rock climbing	5	3	8
Swimming		1	1
Potholing		1	1
Abseiling		1	1
Mountain climbing	1		1
Fireworks	1		1
Bungy jump	1		1
White-water rafting	1		1
Cycling	1		1
Total	**10**	**6**	**16**

The types of activity cited here were sports or leisure activities that an individual undertakes alone (i.e. not team sports as noted in the risk category). Therefore the danger was that the individual may do something wrong and injure themselves.

Table B.5 Transport

Activity	Males	Females	Total
Riding on a motorbike	3	5	8
Involved in a car accident		1	1
Driving parent's car		1	1
Riding in boy's cars		5	5
Riding in a car that shouldn't be driven		1	1
Not wearing a seatbelt	2		2
Racing motorbikes	1		1
Total	**6**	**13**	**19**

Riding motorbikes is proven in the literature to be more dangerous (in terms of amount of serious accidents) than cars, so the danger here was the possibility of a fall or crash, initiating physical harm. The interesting category here was riding in cars with boys, which was a predominantly female activity. Here the danger was of physical harm from a possible accident or from the driver.

Table B.6 Association with Others

Activity	Males	Females	Total
Associating with people who smoke cannabis		2	2
Associating with people who drink alcohol		1	1
Associating with people who take pills		2	2
Associating with people who take drugs		1	1
Messing around with friends	1		1
Total	**1**	**6**	**7**

The danger here was that activities were in the hands of others, and out of the control of the individual. The element of danger could have been of what these others could do to themselves or to others, or that the individual would be incriminated as part of the act by association. The danger may also have been of the unknown.

Table B.7 Roads

Activity	Males	Females	Total
Cross when not safe		3	3
Playing chicken	2		2
Running across the road	1		1
Walked in front of a tram	1		1
Total	**4**	**3**	**7**

The danger here was of physical harm, that the individual might be hit by oncoming traffic. This is often a game played by young people.

Table B.8 Wrong Place, Wrong Time

Activity	Males	Females	Total
Sleeping rough		3	3
Walking home late at night		1	1
Going to a rough fair		1	1
Total	0	5	5

The initial danger for the young person was that they were somewhere that they shouldn't have been and they have possibly lied to their parents about it. So there was a danger of getting caught. At the forefront of an adult's mind, and at the back of the mind of the young person is that being at this place at this time could bring them harm. If they are sleeping rough they could be attacked, abducted etc. There will normally be a reasonable argument for why this place is forbidden.

Table B.9 Disobeying Parents

Activity	Males	Females	Total
Staying out all night without knowing		1	1
Total	0	1	1

The danger here was that the young person would be found out and punished by their parents. The act itself could also make them susceptible to physical harm.

Table B.10 Disobeying School

Activity	Males	Females	Total
Climbed through a classroom window		1	1
Total	0	1	1

This act was dangerous in the consequences of detection, and also of personal harm.

Table B.11 Job

Activity	Males	Females	Total
Bitten by a dog on paper round	1		1
Total	1	0	1

323

This activity was considered dangerous due to the situation the job placed the individual in – the path of a territorial dog. The danger was of physical harm.

Appendix C: Types of Parental or Peer Concern

Table C.1 Types of Act that Upset a Best Friend

	Total	% Of Total
Rejection	13	22.8
Betrayed Trust	12	21.1
Relations with Opposite Sex	10	17.5
Bad Attitude	10	17.5
Cease Friendship	6	10.5
Violence	3	5.3
Health	2	3.5
Disobeying School	1	1.6
Total	57	100

There were 57 separate acts cited, grouped into 8 categories. The most prevalent categories were Rejection, Betrayed Trust, and Opposite Sex/Bad Attitude.

Table C.2 Types of Act that Upset a Best Friend by Sex

	Males	% Of Male Response	Females	% Of Female Response
Rejection	6	25.0	7	21.2
Betrayed Trust	2	8.3	10	30.3
Relations with Opposite Sex	5	20.8	5	15.2
Bad Attitude	7	29.2	3	9.1
Cease Friendship	1	4.2	5	15.2
Violence	2	8.3	2	6.1
Health	0	0.0	1	3.0
Disobeying School	1	4.2	0	0.0
Total	24	100	33	100

The most prevalent male acts were Bad Attitude, Rejection and Opposite Sex. The most prevalent female acts were Betrayed Trust, Rejection and Opposite Sex/Cease Friendship.

Table C.3 Rejection

Activity	Males	Females	Total
Not answering their phone call		1	1
Not listen to them		1	1
Walked home with another friend	1		1
Not go out when they call at house	1		1
Not doing what they want to do	1	1	2
Ignore them	2	1	3
Not including them in activities	1	3	4
Total	6	7	13

Table C.4 Betrayed Trust

Activity	Males	Females	Total
Be two-faced		5	5
Lying		1	1
Bad mouthing	1	1	2
Told secrets	1	3	4
Total	2	10	12

Table C.5 Relations with the Opposite Sex

Activity	Males	Females	Total
Had relations with someone they liked	2		2
Had relations with a sibling	2		2
Argued over the opposite sex		2	2
Accused friend of relations with an ex		1	1
Had an obsessive partner		1	1
Tried to have relations with their partner	1	1	2
Total	5	5	10

Table C.6 Bad Attitude

Activity	Males	Females	Total
Be annoying		1	1
Be horrible		1	1
Petty things		1	1
Shouting	3		3
Being bigheaded	1		1
Being mardy	2		2
Let then down	1		1
Total	7	3	10

Table C.7 Cease Friendship

Activity	Males	Females	Total
Fall out		2	2
Have an argument		2	2
Be friends with others instead	1	1	2
Total	1	5	6

Table C.8 Violence

Activity	Males	Females	Total
Hit them	1	1	2
Kicked a ball at them	1		1
Total	2	1	3

Table C.9 Health

Activity	Males	Females	Total
Self harm		2	2
Total		2	2

Table C.10 Disobeying School

Activity	Males	Females	Total
Truanting		1	1
Total		1	1

Table C.11 Types of Act that Upset a Parent

	Total	% Of Total
Health	23	16.8
Criminal Acts	12	8.8
Transport	6	4.4
Disobeying School	19	13.9
Association with Others	6	4.4
Disobeying Rules	21	15.3
Respect for Property	11	8.0
Disrespectful	34	24.8
Family Relationships	5	3.6
Total	137	100

There were 137 separate acts cited, grouped into 8 categories. The most prevalent categories were Disrespectful, Health, and Disobeying Rules.

Table C.12 Types of Act that Upset a Parent by Sex

	Males	% Of Male Response	Females	% Of Female Response
Health	5	9.1	18	22.0
Criminal Acts	8	14.5	4	4.9
Transport	0	0	6	7.3
Disobeying School	9	16.4	10	12.2
Association with Others	2	3.6	4	4.9
Disobeying Rules	6	10.9	15	18.3
Respect for Property	10	18.2	1	1.2
Disrespectful	13	23.6	21	25.6
Family Relationships	2	3.6	3	3.7
Total	55	100	82	100

The most prevalent acts for males were Disrespect, Respect for Property, and Disobeying School. The most prevalent acts for females were Disrespect, Health and Disobeying Rules.

Table C.13 Health

Activity	Males	Females	Total
Smoking	3	7	10
Alcohol-related	2	7	9
Self harm		1	1
Having depression		1	1
Getting a tattoo		1	1
Sexual experimentation		1	1
Total	5	18	23

Table C.14 Criminal Acts

Activity	Males	Females	Total
Shoplifting	1	2	3
Get arrested	1	1	2
Stealing	2	1	3
Vandalism	3		3
Breaking and Entering	1		1
Total	8	4	12

Table C.15 Transport

Activity	Males	Females	Total
Got in cars with boys		4	4
Got knocked down		1	1
Ride on a motorcycle		1	1
Total	0	6	6

Table C.16 Disobeying School

Activity	Males	Females	Total
Not working hard at school	2	2	4
Truanting	1	6	7
Misbehaving	3	1	4
Getting excluded	3		3
Lying to a teacher		1	1
Total	9	10	19

Table C.17 Association with Others

Activity	Males	Females	Total
Associate (trouble with police) with people who take drugs		1	1
Choice of partner		1	1
Seeing people not allowed to		2	2
Had a fight	2		2
Total	2	4	6

Table C.18 Disobeying Parental Rules (Wrong Place, Wrong Time)

Activity	Males	Females	Total
Coming home later than curfew	1	3	4
Going places they shouldn't	1	12	13
Running away	4		4
Total	6	15	21

Table C.19 Lack of Respect for Property

Activity	Males	Females	Total
Breaking their belongings	7	1	8
Loosing own belongings	2		2
Breaking own belongings	1		1
Total	10	1	11

Table C.20 Disrespectful to Parents

Activity	Males	Females	Total
Being disobedient		3	3
Saying 'I hate you'		1	1
Shouting at them		3	3
Jeopardising parents job		1	1
Causing trouble	1	1	2
Swearing	2	3	5
Lying	3	4	7
Being rude	5	4	9
Being unhelpful	2	1	3
Total	13	21	34

Table C.21 Family Relationships

Activity	Males	Females	Total
Not liking a step parent		1	1
Arguing with a sibling		1	1
Stop seeing an estranged parent		1	1
Fighting (violence) with a sibling	2		2
Total	2	3	5

Appendix D

LIFESTYLE QUESTIONNAIRE

Confidential

Please answer all questions as truthfully as you can. Nobody will know what you have written because this questionnaire does not have you name on it. When you have finished put it in the envelope and give it to the researcher so nobody at the school will know the answers you gave.

How to answer the questions

This is not a test. There are no right or wrong answers. Try and answer as many questions as you can.

You can answer most of the questions by putting a tick in the box, like this: ☑

For other questions you will be asked to write your answers. Do this on the dotted lines.

---

1. Are you male or female?

Male ☐
Female ☐

2. Which school year are you in?

Y9 ☐
Y10 ☐
Y11 ☐
Y12 ☐
Y13 ☐

3. How old are you?

.... years

4. What types of music do you listen to? (You can tick more than one box)

Pop/Chart ☐
Indie/alternative ☐
Dance ☐
Rock ☐
R n B/Garage ☐
Classical ☐
Other (write in below) ☐

....

5. What do you like to do in your spare time (hobbies, sports etc)? (Write your answers on the dotted lines below)

....

....

....

....

....

6. How much pocket money do you get each week from your parents/guardians?

£0 - £4 ☐
£4 - £8 ☐
£8 - £12 ☐
£12 - £16 ☐
More than £16 ☐

7. Do you have a part-time job?

Yes *Go to question 8* ☐
No *Go to question 9* ☐

8. What is your part time job? (Write your answers on the dotted lines below)

....

....

....

....

9. Have you ever taken a risk?

Yes *Go to question 10* ☐
No *Go to question 11* ☐
Don't know *Go to question 11* ☐

10. What kinds of things have you done that involved taking a risk? (Write your answers on the dotted lines below)

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11. Have you heard of a drug called cannabis? (also known as marijuana, gange, ganga, dope, grass, weed, hash, skunk)

Yes ☐

No ☐

Read the story and answer the questions below

> **Adam is an imaginary character. Imagine that he is the same age as you. Imagine he is in your school year and that he enjoys the same hobbies as you do.**

12. Adam has gone to a party at a friend's house. Most of the people at the party are in the same school year as Adam, but he notices that a few people seem to be a bit older than him. Adam notices that these older people are smoking cannabis.

One of the older boys approaches Adam; he says he recognises him from school. The older boy asks Adam if he wants to share his cigarette.

Do you think Adam will smoke the cannabis cigarette?

Yes   *Go to question 14*   ☐

No   *Go to question 13*   ☐

Don't know   *Go to question 13*   ☐

13. Adam's good friend Simon is also at the party. Simon tells Adam that the person who just approached him was Simon's older brother.

Do you think Adam will share the cannabis cigarette now?

Yes   *Go to question 14*   ☐

No   *Go to question 14*   ☐

Don't know   *Go to question 14*   ☐

14. Later that evening some of Adam's friends from his school football team arrive. Adam knows that these friends would not approve of him smoking cannabis. He is offered cannabis again.

Do you think Adam will smoke the cannabis cigarette anyway?

Yes	*Go to question 15*	☐
No	*Go to question 15*	☐
Don't know	*Go to question 15*	☐

15. What would the reaction of your best friend be if you did any of the following activities?

(Tick the boxes, like this: ☑, or leave them blank if you do not understand the question)

	My best friend would do this with me	My best friend would not care if I did this	My best friend would not like me doing this	I don't know
Smoking cannabis				
Drinking alcohol				
Smoking tobacco				
Riding a motorcycle				
Playing truant from school/'wagging it'				
Riding in a car without wearing a seatbelt				
Rock climbing				
Using heroin				
Taking an ecstasy pill/ 'E'				
Stealing something from a shop				
Spraying graffiti/vandalising something				

16. Have you ever done something that really upset your best friend?

Yes	*Go to question 17*	☐
No	*Go to question 18*	☐

17. What kinds of things have you done to really upset your best friend? (Write your answers on the dotted lines below)

....
....
....
....
....
....

Read the story and answer the questions below

18. During the lunch break at school one of Adam's good friends, Matt, tells him that he has some cannabis in his pocket. He tells Adam that he has to see the Head teacher that afternoon and he is sure he will get caught with the drug. Matt has been in trouble at school before. He asks Adam if he could look after it for him until the end of the day.

Do you think Adam will take the cannabis and help his friend?

Yes	*Go to question 19*	☐
No	*Go to question 20*	☐
Don't know	*Go to question 19*	☐

19. If Adam is caught he will be in serious trouble. But Adam believes that he is much *less* likely to be caught, as he has never been in trouble before.

Do you think Adam will still take the cannabis and help his friend?

Yes	*Go to question 21*	☐
No	*Go to question 20*	☐
Don't know	*Go to question 21*	☐

20. Even if he is caught, Adam thinks he is much *more* likely to get away with it as he has never been in trouble before.

Do you think Adam will take the cannabis now and help his friend?

Yes	*Go to question 21*	☐
No	*Go to question 21*	☐
Don't know	*Go to question 21*	☐

21. Have you ever been in trouble at school?

Yes	*Go to question 22*	☐
No	*Go to question 23*	☐

22. What kinds of things have you done that got you into trouble at school? (Write your answers on the dotted lines below)

....

....

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23. How *worried* are you about the risks doing the following activities?

(Tick the boxes, like this: ☑ or leave them blank if you do not understand the question)

	Very worried about the risks	Quite worried about the risks	Not very worried about the risks	Not worried about the risks at all	I don't know
Smoking cannabis					
Drinking alcohol					
Smoking tobacco					
Riding a motorcycle					
Playing truant from school/'wagging it'					
Riding in a car without wearing a seatbelt					
Rock climbing					
Using heroin					
Taking an ecstasy pill/ 'E'					
Stealing something from a shop					
Spraying graffiti/vandalising something					

24. Have you ever seriously injured yourself? (where you needed to go to hospital)

Yes   Go to question 25   ☐
No   Go to question 26   ☐

25. What were you doing when you seriously injured yourself? (Write your answers on the dotted lines below)

....

....

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....

26. Which of the following activities do you think are *worth taking the risk*?

(Tick the boxes, like this: ☑ or leave them blank if you do not understand the question)

	Definitely worth taking the risk	Maybe worth taking the risk	Probably not worth taking the risk	Definitely not worth taking the risk	I don't know
Smoking cannabis					
Drinking alcohol					
Smoking tobacco					
Riding a motorcycle					
Playing truant from school/'wagging it'					
Riding in a car without wearing a seatbelt					
Rock climbing					
Using heroin					
Taking an ecstasy pill/ 'E'					
Stealing something from a shop					
Spraying graffiti/vandalising something					

Read the story and answer the questions below

27. Adam and his friends are doing their homework at his house. Adam realises that Matt has brought the cannabis into his house, and that he has been smoking it whilst Adam was out of the room. He is worried that his parents will realise when they get home.

Do you think Adam will tell his parents the truth when they get home?

Yes   *Go to question 28*   ☐
No   *Go to question 29*   ☐
Don't know   *Go to question 28*   ☐

28. If Adam tells his parents that Matt smoked cannabis, Matt says he will tell them that Adam has been smoking cannabis too.

Do you think Adam will now tell his parents about Matt?

Yes   *Go to question 30*   ☐
No   *Go to question 29*   ☐
Don't know   *Go to question 29*   ☐

29. Do you think Adam will not tell his parents and hope they don't find out?

Yes	*Go to question 30*	☐
No	*Go to question 30*	☐
Don't know	*Go to question 30*	☐

30. How *upset would your parents/guardians be* if they found out you had done any of the following activities?

(Tick the boxes, like this: ☑ or leave them blank if you do not understand the question)

	Very upset	Quite upset	Not very upset	Not upset at all	I don't know
Smoking cannabis					
Drinking alcohol					
Smoking tobacco					
Riding a motorcycle					
Playing truant from school/'wagging it'					
Riding in a car without wearing a seatbelt					
Rock climbing					
Using heroin					
Taking an ecstasy pill/ 'E'					
Stealing something from a shop					
Spraying graffiti/vandalising something					

31. Have you ever done something that upset your parents/guardians?

Yes	*Go to question 32*	☐
No	*Go to question 33*	☐

32. What kinds of things have you done that upset your parents/guardians? (Write your answers on the dotted lines below)

....
....
....
....
....
....

Read the story and answer the questions below

33. Adam is hanging out with his friends in the local park. He knows that a lot of people there are smoking cannabis. He has been asked to join in, but he can't decide what to do.

Do you think Adam will try smoking cannabis outside in the park?

Yes	*Go to question 35*	☐
No	*Go to question 34*	☐
Don't know	*Go to question 34*	☐

34. Adam can see that a few of his close friends have started to smoke cannabis. They look like they are enjoying it and they tell him that it will make him feel good.

Do you think Adam will try smoking cannabis now?

Yes	*Go to question 35*	☐
No	*Go to question 36*	☐
Don't know	*Go to question 35*	☐

35. Later on that night he sees one of his friends that has been smoking cannabis looking very ill and being sick. Adam has also smoked some of the cannabis. He is feeling fine now but he worries about his health.

Do you think Adam will smoke cannabis again?

Yes	*Go to question 36*	☐
No	*Go to question 36*	☐
Don't know	*Go to question 36*	☐

36. Have you *ever seen* any of the following activities *being done in real life*?

(Tick the boxes, like this: ☑ or leave them blank if you do not understand the question)

	Have seen too many times to remember	Have seen many times	Have seen once or twice	Have never seen	I don't know
Smoking cannabis					
Drinking alcohol					
Smoking tobacco					
Riding a motorcycle					
Playing truant from school/'wagging it'					
Riding in a car without wearing a seatbelt					
Rock climbing					
Using heroin					
Taking an ecstasy pill/ 'E'					
Stealing something from a shop					
Spraying graffiti/vandalising something					

Read the story and answer the questions below

37. Adam is in his science lesson. His science teacher is telling the class that using cannabis can make you depressed, it can help give you lung cancer and it is illegal.

Adam knows that his friends smoke cannabis and they have never been ill or been in trouble with the police.

Do you think Adam believes his science teacher?

Yes   *Go to question 38* ☐
No   *Go to question 39* ☐
Don't know   *Go to question 38* ☐

38. Adam decides that his teacher must be telling the truth and he understands the risks involved. However, his friends think that smoking cannabis is fun and it is worth taking the risks.

Do you think Adam believes his friends?

Yes   *Go to question 39* ☐
No   *Go to question 39* ☐
Don't know   *Go to question 39* ☐

39. After the science lesson, Adam's friend Louise tells him that her mother uses cannabis. She says that her mother is very ill and that using cannabis helps take away her pain.

Do you think Adam believes Louise?

Yes	*Go to question 40*	☐
No	*Go to question 40*	☐
Don't know	*Go to question 40*	☐

40. How likely would you be to *harm yourself* (physically or in other ways) doing the following activities?

(Tick the boxes, like this: ☑ or leave them blank if you do not understand the question)

	Very likely to harm myself	Quite likely to harm myself	Not likely to harm myself	Not likely to harm myself at all	I don't know
Smoking cannabis					
Drinking alcohol					
Smoking tobacco					
Riding a motorcycle					
Playing truant from school/'wagging it'					
Riding in a car without wearing a seatbelt					
Rock climbing					
Using heroin					
Taking an ecstasy pill/ 'E'					
Stealing something from a shop					
Spraying graffiti/vandalising something					

41. Have you ever done something dangerous?

Yes	*Go to question 42*	☐
No	*Go to question 43*	☐

42. What kinds of things have you done that were dangerous? (Write your answers on the dotted lines below)

....

....

....

....

....

....

43. Do you *know the risks* involved in doing the following activities?

(Tick the boxes, like this: ☑ or leave them blank if you do not understand the question)

	Yes I know the risks	I'm not sure I know the risks	I don't think I know the risks	I don't know the risks at all	I don't know
Smoking cannabis					
Drinking alcohol					
Smoking tobacco					
Riding a motorcycle					
Playing truant from school/'wagging it'					
Riding in a car without wearing a seatbelt					
Rock climbing					
Using heroin					
Taking an ecstasy pill/ 'E'					
Stealing something from a shop					
Spraying graffiti/vandalising something					

44. How *risky* do you think it is to do the following activities?

(Tick the boxes, like this: ☑ or leave them blank if you do not understand the question)

	Very risky	Quite risky	Not very risky	Not risky at all	I don't know
Smoking cannabis					
Drinking alcohol					
Smoking tobacco					
Riding a motorcycle					
Playing truant from school/'wagging it'					
Riding in a car without wearing a seatbelt					
Rock climbing					
Using heroin					
Taking an ecstasy pill/ 'E'					
Stealing something from a shop					
Spraying graffiti/vandalising something					

45. Have you *ever tried* any of the following?

(Tick all you have tried, like this: ☑ or leave them blank if you do not understand the question)

	Yes I have tried	I don't know
Smoking cannabis		
Drinking alcohol		
Smoking tobacco		
Riding a motorcycle		
Playing truant from school/'wagging it'		
Riding in a car without wearing a seatbelt		
Rock climbing		
Using heroin		
Taking an ecstasy pill/ 'E'		
Stealing something from a shop		
Spraying graffiti/vandalising something		

46. Which of the following would you *like to try*, if you have not tried already?

(Tick all you would like to try, like this: ☑ or leave them blank if you do not understand the question)

	Yes I would like to try	I don't know
Smoking cannabis		
Drinking alcohol		
Smoking tobacco		
Riding a motorcycle		
Playing truant from school/'wagging it'		
Riding in a car without wearing a seatbelt		
Rock climbing		
Using heroin		
Taking an ecstasy pill/ 'E'		
Stealing something from a shop		
Spraying graffiti/vandalising something		

Thank you for completing this questionnaire.

Please put your question paper in the envelope provided

Appendix F: Focus Group Schedule

Female

OR

Drink Alcohol	Do Stunts on a Bicycle
Do Something Your Parents Tell You Not To	Do a Bungy Jump
Get in a Boy Racer Car	Run Across the Road When a Car is Coming
Drink alcohol	Smoke Cigarettes
Do Something Your Parents Tell You Not To	Stealing
Get in a Boy Racer Car	Become Friends With People Who Get in Trouble

OR

Drink Alcohol	Do Stunts on a Bicycle
Do Something Your Parents Tell You Not To	Do a Bungy Jump
Get in a Boy Racer Car	Run Across the Road When a Car is Coming
Do Stunts on a Bicycle	Climb on a Roof
Do a Bungy Jump	Play on a Tarzan swing
Run Across the Road When a Car is Coming	Ride a motorbike

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