

Understanding Adolescent Health Behaviour

Smoking, drinking, unhealthy eating: how can we explain these actions in teenagers? Do teenagers stop to consider potential hazards or is their decision making frantic and impulsive, with little rational thought? In this intriguing book, Kanayo Umeh debunks conventional explanations of teenage behaviour (peer pressure, self-esteem issues, parent—child conflicts) and offers a fresh perspective based on the premise that teenagers, like adults, retain the power of choice. He shows that adolescents sometimes readily commit to a course of action despite being sceptical about its benefits, and reveals how decision strategies that appear ill-considered to adults are regarded as smart by adolescents, and with convincing justifications. Contrary to stereotypes, the teenager emerges as a curious individual: a multifaceted decision maker whose actions may not be quite as mindless as popular myth suggests.

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Understanding Adolescent Health Behaviour

A Decision Making Perspective

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To my wife and son, Oby and Oli



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Preface

I won't pretend writing this book was easy. It wasn't. Yet, I find the concept behind it even more intriguing now it's finished than when I first started writing.

A few days before submitting an initial draft of the manuscript to my publisher I observed several teenagers climbing precariously over a spiked iron fence just outside my home. The threat of injury was considerable. Yet, these youngsters complacently went about their reckless endeavours, seemingly oblivious to the risks. Scenes like this are common worldwide. They fuel a stereotype of teenagers as thoughtless, impulsive risk takers, and raise numerous questions about the soundness of their decision making. Did they stop to think about potential hazards before acting? Do risks matter? Or is conforming to the peer group activity more important? Even if risks are considered, would this be sufficient to dissuade such unhealthy behaviour? Such scenes provide the impetus for books like this one.

When I began writing this book I was determined that it would not end up being yet another conventional text on adolescent health behaviour, one which merely documents the results of endless health behaviour or lifestyle surveys, often leaving readers rather more bewildered at the end than they were before reading the text. It was not my intention to write a book that merely offers a repackage of familiar products. Similarly, I had no desire to serve up the usual cocktail of explanations for adolescents' behaviours, such as peer pressure, self-centredness, parental influence, self-esteem issues, delinquency, hostility, depression, identity, coping, parent—child conflict, and so on. Books that cover these issues are abundant — almost any academic bookshop will have them — so it would be silly to publish yet another text that simply reinvents the wheel.

The primary focus here is on decision making, whether as a momentary act or as a protracted process, a deliberate manoeuvre or a subconscious event. Human beings, many philosophers argue, exercise free will. They retain freedom of choice irrespective of personal and situational forces acting upon them. Familiar phrases or questions like 'Look before you leap', 'If your friends jumped off a cliff, would you jump with them?' and 'It's a no-brainer' all denote an ingrained belief in Western culture that, whatever the circumstances, a person can choose freely from alternative courses of action. Thus, for example, criminals are berated for making wrong lifestyle choices, often with little regard for any adverse childhood experiences, or current social deprivation.

The method by which people exercise their free will – in other words, how they arrive at decisions – can be crucial in understanding their actions. Thus, for

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example, a boy who acts on impulse may be more susceptible to peer pressure than his friend who usually pauses to contemplate his options before acting. Similarly, a girl who habitually puts off difficult decisions may be slower to abandon a risky behaviour than another panic-prone youngster stricken by a perpetual sense of impending doom, and in a hurry to take protective action.

This argument can also be appreciated in the context of a reckless teenage driver with a car loaded with friends. Many factors may affect the driver's performance in manoeuvring the vehicle, including the opinions of the passengers, their relationship with the driver, the driver's self-confidence and mental health, and even physical or climatic factors such as interior temperature, humidity and lighting. But if a behavioural scientist wishes to understand why the car is being driven recklessly, he has two options. He can either study the personal and situational factors acting on the driver, such as peer pressure, or he can scrutinise the driver's decision making. For example, does he appear to think before acting, react impulsively to changing road conditions, and/or deliberately ignore road hazards when deciding how fast to go?

If there is an accident, the police will be particularly interested in the driver's decision making. Although it may turn out that the passengers were goading the driver to speed, the police will want to know why the driver allowed such pressure to affect his judgement, negating considerations of health and safety. Focusing solely on how personal and situational factors such as peer pressure, self-esteem and parental factors influence adolescent health behaviour only provides a partial account of events. It can be argued that these variables are mediated by free will. That is, they can only affect behaviour to the extent that an individual allows them to. A competent decision maker may try to remain careful and objective, irrespective of the circumstances, whereas an incompetent decision maker may allow his thinking to be skewed by outside influences.

This book is targeted mainly at behavioural science academics, scholars and students, although it wouldn't surprise me if the odd teenager finds it interesting. I have tried to eschew psychological jargon, where possible, but ultimately some background in psychology or social science may facilitate understanding. Psychologists have become so engrossed in their own theories and research that they have developed a rather flamboyant language of their own – what many people refer to as 'psychobabble'. This vernacular often makes little sense to anyone except psychologists themselves. However, this situation is by no means peculiar to psychology – medicine for instance is notorious for its 'big' words, as can clearly be heard in medical dramas. Jargon makes simple and interesting phenomena appear abstract and unwieldy to the untrained (and occasionally trained) eye.

By minimising fancy academic lingo, where possible, I believe it is possible to write an interesting textbook that is enjoyable to read. Whether I have achieved this goal is up to the readers to judge. It is fair to say that I have used jargon many times in this book, and unavoidably so, to capture accurately the psychological meaning of many an argument. If there are areas in which this proves an irritation



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to the reader, then I apologise in advance, but suggest that the disappointed reader take the philosophical view that breaking the habit of a lifetime is unlikely to be an entirely successful affair. I always prefer reading psychology written in the style of a newspaper article: a succinct heading, simple terms, and a concision and clarity that your average person on the street can understand. Unfortunately this is not the way most psychologists are trained to write. Thus writing a book that attempts to eschew jargon can be a particularly trying affair for many psychologists, myself included.

Initially I had wanted this book to be based almost entirely on scientific evidence and reasoning, particularly evidence derived from traditional randomised scientific experiments (in which control, placebo and treatment groups are compared on some measure) and, to a lesser degree, semi-experimental field studies (no randomisation) and correlational studies (questionnaire surveys). However, any academic who appreciates qualitative research will concede that some of the best scientific data come in the form of personal experience, anecdotes, intuitions and impressions. While this kind of evidence is less reliable, it is typically more realistic, providing a better depiction of everyday life. Thus, many arguments in the book are based on just this type of 'evidence', and I make no apologies. I also read a lot of correspondence sent by adolescents to various Internet websites, and magazines, plus newspaper accounts of teenage activity in my local community here in Liverpool, England, not to mention the odd teenage biography. Traditional scientific evidence on decision making and health behaviour in adolescence is so limited that reliance on other forms of literature is unavoidable.

Finally, this book steers clear of mathematical or economic accounts of decision making. While these perspectives have their academic merits (which are considerable), they are incompatible with the basic theme of this text, which is about behavioural descriptions of decision making, rather than arithmetical permutations. In my view numerical and exact models lack realism. They are just too orderly, precise and predictable to capture adequately the nonsensicality, instability and unpredictability of human decision making. These accounts often denote a kind of 'uncorrupted' and 'mechanical' rationality that simply isn't within the realm of messy real-life human decision making.

I'm sure this view may be controversial with some readers. But such controversy may be a good thing, helping to inform our understanding of teenage health behaviour. All in all, my hope is that this book shows another 'side' to the adolescent decision maker that perhaps was previously hidden from view, or simply ignored, or forgotten. Whether I have achieved this will be up to the readership to judge.



Acknowledgements

This book was largely inspired by my doctoral thesis, written at the University of Leicester, England, during the 1990s, under the supervision of Dr Gillian Penny and Dr Jim Robinson. I wish to extend my profound thanks to almost one thousand teenagers who volunteered as subjects, most of whom will now be in their mid to late twenties, and making decisions in ways that are probably beyond the scope of this book.

Much of my doctoral research was inspired by the pioneering work of Professor Leon Mann, and in particular his colleague, the late Professor Irving Janis. Their writings on human decision making span several decades and, for a starry eyed novice PhD student utterly bewildered by the overly geometric, abstract and often chaotic literature on decision making, provided a much needed breath of fresh air, and a realism, combined with a strong sense of 'hmm, this sounds like how I make decisions' that is rarely found in the literature. I was also enthused by the efforts of Professor Howard Leventhal, who has shed considerable light on the notion of decision making, not just as goal directed behaviour, but also as a dynamic process. Elliot Aronson's writings in social psychology have also been an inspiration. Although he is not a decision theorist specifically, his simple, down to earth and concise way of explaining otherwise complex psychological phenomena made me better appreciate the importance of eschewing unnecessary jargon in academic expression.

I am very much indebted to numerous teenagers for making themselves available for a chat, even though I'm sure they had more exciting things to do with their time. These include Lorraine Omari-Asor, Aishia Mills, Abbi Igwemma, Lindsay Rogers, and many others. Sincere thanks to Cambridge University Press for 'getting' the philosophy behind this book, and supporting it even when I wasn't always entirely sure what specific arguments would evolve, their content, and how long the manuscript would take to complete. In particular, thanks to Andrew Peart and Carrie Cheek for their patience and support.

Finally, a book like this would clearly have been impossible to write without the patient support of my wife Oby. She had to endure almost three years of books, journal articles and other documents littering the house untidily, and my long hours spent locked away in the university library, not to mention regular discussions about teenagers, teenage movies and magazines, and numerous other

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