

Young Adult Women and Alcohol-Related Problems: The Key Role of Multidimensional Feminine Norms

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ABSTRACT: Young adult college women are closing the gender gap with respect to heavy episodic drinking and alcohol-related problems. Accordingly, it is important to understand and examine the factors that help explain within-group differences in problematic drinking patterns among this vulnerable population. One promising theoretically-relevant factor that appears to explain problematic alcohol use among young adult women is conformity to multidimensional feminine norms. Feminine norms are the beliefs and/or expectations of what it means to be a woman. This review paper identifies the current trends and limitations of research examining the role of feminine norms on alcohol use among young adult women in college. The review of the literature suggests that relationship between feminine norms and alcohol problems is complex in that there are costs and benefits for endorsing and opposing different feminine norms. Women who endorse appearance and relational feminine norms such as striving to be thin, focusing on their appearance, and maintaining relationships are at heighten risk of engaging in heavy episodic drinking and alcohol problems. Women who endorse feminine norms including maintaining sexual relationships with one partner, endorse the belief that one should be modest, and sweet, and nice, and upholding domestic values are less likely to report alcohol problems. Clinical and future research recommendations are provided.

KEYWORDS: women, feminine norms, alcohol, alcohol problems

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Heavy episodic drinking (HED) among college students is a major public health concern. It is estimated that 36 to 58% of college men engage in HED¹ while the rate for women is between 30 and 40%.²⁻⁴ While HED is prevalent among college students, a more alarming concern is growing evidence that women are closing the gender gap with respect to problematic drinking.⁵ Women's HED is especially concerning as they are likely to reach intoxication faster than men due to sex-related differences in hormones and brain functioning after alcohol consumption.⁶ Women's HED behaviors are associated with negative mental health outcomes including depression, eating disorders, suicide, and increased risks of being victims of sexual assault and partner violence.^{6,7} Given the distinct risk associated with HED among college-aged women, it is important to understand the key factors associated with alcohol use and related problems among this population.

There is growing belief that the increase in alcohol use among young adult women may be due to cultural and societal changes granting women access to new work environments and social contexts in which drinking is more socially acceptable for women.^{8,9} These societal changes may also reflect the changes in gender roles and expectations among women. One important theoretically-relevant factor that may explain these changes as well as explicate within-group differences in HED and alcohol-related problems among women is conformity to feminine norms. Feminine norms describe the socially constructed attitudes, beliefs, and expectations of how women should think, feel, and act.¹⁰ The social constructionist theory posits that feminine and gender norms are learned

and reinforced by society, and these norms guide how women interact socially through observational learning and modeling.¹¹ Thus these feminine norms represent a social hierarchy structure that stigmatizes women and simultaneously limits women's individual agency.^{12,13} These norms also reflect the notion of "emphasized femininity" by which there is a patriarchal gender order and compliance to patriarchy.¹⁴ Accordingly, this brief review will highlight the complex role of feminine norms on drinking behaviors among young adult college women.

Historically, femininity has been measured as a global and unidimensional construct using the Bem Sex Role Inventory¹⁵ which assesses the extent to which an individual endorses general femininity. A unidimensional approach to femininity has been criticized for assessing an individual's personality traits and their level of endorsement to femininity, rather than their adherence to distinct gender roles.¹⁰ Scholars argue that this approach does not account for within-group differences among women as well as the unique societally-based beliefs and attitudes that define gender roles.¹⁰ Contemporary theory and research suggests that femininity should be examined through a multidimensional approach that assesses different salient feminine norms for an individual woman.^{10,16} By operationalizing feminine norms multidimensionally, researchers may be able to more accurately identify the distinct feminine norms associated to specific behaviors including alcohol use, substance use and mental health.^{10,16,17} According to the conformity to feminine norms model,¹⁰ there are nine dimensions of feminine norms which include investment in appearance, sexual



fidelity in a committed relationship, focus on thinness, modesty, upholding domestic values, caring for children, valuing romantic relationships, maintaining friendships, and being sweet and nice to others. Women may endorse some or none of these norms. For example, some women may conform more to the role of valuing thinness and appearance while other women may value caring for children or upholding domestic values.

Given the promising role of multidimensional feminine norms on health behaviors among women, there is an emerging body of research in this area¹⁸⁻²¹ (for a review of the literature on unidimensional feminine norms and substance use in general see the review by Brady et al¹⁶). Overall, the review of the literature highlights that a multidimensional feminine norms approach appears to better explain and clarify patterns of problematic drinking among women compared to a unidimensional measure (eg, Bem Sex Role Inventory). Moreover, the association between multidimensional feminine norms and problematic alcohol use is complex. Studies have found that endorsement of some specific feminine norms may increase the risk of HED and alcohol-related problems while other norms may serve as protective factors.^{16,17,21} Women who invest in their physical appearance, such as having a long, methodical daily beauty routine, and who focus on being thin were more likely to engage in HED.^{20,22} Although endorsing appearance norms and drinking more heavily may be counter-intuitive, it is theorized that these women may also be engaging in compensatory weight control behaviors, such as vomiting or fasting, so they can continue to drink heavily with their peers without gaining weight.¹¹ In addition, women who endorsed appearance norms may engage in HED to satisfy their social expectations, fit in with peers, and to gain higher status with their male peers.^{17,23} Women who desire to maintain close relationships with people in their life may drink in order to facilitate social interactions and inclusion in college drinking environments.²² Higher submissive femininity, or a sense of dependence and inadequacy, were found to be significantly associated with higher alcohol use.²⁴ Submissive femininity was found to be significantly and positively correlated with internalizing and externalizing problem behaviors such that women who endorse submissive femininity may be more vulnerable to anxiety and depression.²⁴ Thus, adhering to submissive femininity may have an indirect effect on drinking behavior through drinking to cope.²⁴

While endorsing various dimensions of feminine norms appears to increase risk of HED and alcohol-related problems, there are feminine norms that may serve as protective factors. More specifically, women who value feminine norms such as modesty or maintaining humility regarding their talents and abilities, being sweet and nice to others, upholding domestic values or cleanliness, and sexual fidelity to one sexual partner were negatively associated with HED.^{16,17,21} In fact, women who conform to the sexual fidelity and romantic relationships feminine norms had lower weekly alcohol use.^{18,19} Individuals who endorse sexual fidelity may perceive drinking as

threatening to their romantic relationships as high levels of alcohol consumption in college drinking environments may lead to sexual activity.²⁵ Whereas women who endorse feminine norms including modesty, being sweet and nice, and upholding domestic values may be less likely to engage in problem drinking. In other words, women who endorse modesty and being sweet and nice may believe that women should not engage in heavy drinking as it is “un-lady-like” and thus, they may abstain from HED in order to avoid being labeled as “unfeminine.”^{17,26} These women may, additionally, want to raise a family in the future which may reduce the risk of engaging in HED.

The evidence clearly suggests that distinct feminine norms both confer HED risk while other norms serve as protective factors. Thus, it is essential, to view these norms as multidimensional, complex constructs. Based on the review it appears that it is important to incorporate and explore feminine norms in prevention and intervention efforts for young adult women. Prevention and clinical interventions can challenge and explore the meaning of feminine norms. More specifically, such interventions can target the messages women have received from family and society about what it means to be a woman, can examine how feminine norms may influence behaviors, and can explore with the client when it is beneficial to endorse certain norms and when endorsing these norms could heighten risk of engaging in risky behaviors. However, it is important to note that we are not stating whether women should or should not adhere to various dimensions of feminine norms, but rather the goal is for individuals to be cognizant about how gender norms shape their behaviors, cognitions, and influence how they interact with others and view the world.¹⁰

Although there are many strengths in the current findings, there are limitations in the literature, which hinders the ability to make causal inferences about the relationship between feminine norms and alcohol use. While research clearly highlights the role of distinct feminine norms on various alcohol outcomes, there has been a paucity of studies examining the potential mechanisms or mediators of risk. Well-established correlates of drinking such as positive alcohol expectancies and drinking motives which include drinking to cope, enhancement, social, and conformity motives may help explain the underlining relationship, or mechanism (s) between the norms and alcohol outcomes. In the masculine norms literature, masculine norms appear to have a direct and indirect effect on alcohol use through alcohol expectancies.²⁷ It makes sense that distinct feminine norms may heighten risk or be associated to alcohol expectancies and drinking motives.

Particularly, certain feminine norms assess how one appears to others such as appearance and thinness. According to social learning theory, endorsing appearance norms may be related to positive alcohol expectancies given that these women may be more likely to learn and develop positive alcohol expectancies and fail to consider the negative effects of alcohol use such as

cognitive impairment or behavior functioning.²⁸ In addition to appearance norms, peers and family may also influence young adult women's drinking behaviors. When college students overestimated how often their peer group engaged in HED, they were more likely to increase their own frequency of HED, despite actual group behavior.²⁹ Individuals who perceive high campus drinking norms during Homecoming week and Halloween may be at heightened risk for stable, consistent engagement in HED throughout the school year despite deadlines and finals.²⁹ Availability of alcohol in the home was a greater predictor of alcohol use for young adult women, but not for young adult males.³⁰ This suggests that alcohol in the home may normalize drinking behaviors for young women.³⁰ In addition, although individuals are theorized to engage in more HED due to less behavioral restrictions from parents during young adulthood, paternal and maternal relationship quality was negatively associated with HED for both males and females between the ages of 18 to 19.³¹ These parental relationships remained protective factors until the age of 25 for males but became non-significant for females at ages 20 to 25 years old, as females may have experienced more behavioral restrictions from their parents during childhood and adolescence than males.^{31,32} Endorsing certain feminine norms may create gender strain (eg, attempting to live up to these unrealistic gendered expectations), thus there is reason to believe that these norms may be linked to drinking motives such as drinking to cope. Testing these potential mechanisms of risk is an exciting direction for future research in this field.

Methodologically, there has been only one study that has examined the link between multidimensional feminine norms and HED trajectories longitudinally.²² The majority of the studies in this area have been cross-sectional which makes it difficult to assess the temporal relationship between specific feminine norms and HED and related problems. The research is not clear about whether prior HED heightens specific feminine norms. Studies have found that sexual fidelity is protective of HED, however, it may be that women who engage in more frequent sexual and drinking behaviors will have lower sexual fidelity norms. Future research is needed to clarify and delineate the temporal order of this association.

There is a lack of studies with ethnically diverse and non-college young adult females. More research is needed in order to understand if these norms operate similarly or differentially in relation to alcohol outcomes for ethnically diverse and non-college age women. The primary measure of multidimensional feminine norms was normed with a predominately White and college sample. It is unclear whether there is metric variance or invariance in this measure for non-college and ethnically diverse women (eg, African American, Latina, Asian, migrant, and lesbian women). There is evidence the women's lived experiences (eg, African American compared to White women) and socioeconomic status may impact adherence to feminine norms. That is, given the systemic inequality that African American women experience, they often in varying context (eg,

work environment) have to act feminine but reject certain traditional feminine norms.³³ This highlights the need for more intersectionality research examining the role ethnicity/race, socioeconomic status and gender orientation and gender identity (cisgender versus transgender) may be associated to drinking behaviors.³⁴ Peralta and colleagues³⁴ have taken innovative steps in addressing the lack of intersectional studies on this topic and found that women and men who endorse a masculine gender orientation were more likely to engage in HED, while endorsement of feminine gender orientation were at lower risk. These results illustrate the importance of including measures of masculine and feminine gender orientation when attempting to study and explain college student drinking behaviors.

Despite these limitations multidimensional feminine norms appears to be a very promising gender-relevant factor that significantly explains alcohol use and related problems, and is a fruitful area of research that has the potential to advance science and improve responsiveness in prevention/clinical interventions to reduce problematic alcohol use for women.

Authors' Contribution

All authors made substantial contributions to the conception of the review paper. All authors were involved in revisions and drafts of the manuscript. All authors approved of the final version for publication

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