

Preventing Alcohol Abuse among Japanese College Students: Stalking a Cultural Paradox

大学生のアルコール乱用予防の「文化的パラドックス」を探って

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SURVEY

大学生の飲酒行動、予防、日本文化、調査

要旨

過度の飲酒やその他アルコールに関連した様々な問題は、日本をはじめ、他の国々においても大学生の間に蔓延している。現代社会において、予防し得る罹患や死亡の第一の原因がアルコールの乱用であるにも拘わらずである。世界中の多くの国々と同様、日本もまた未成年者（20歳以下）のアルコール使用を取り締まっている。しかし、マリファナやコカインのよう

なハード・ドラッグは所持しているだけで厳しく罰せられるのに対し、日本のアルコールの取り締まりはかなり甘い。このような日本の社会は未成年者を含む大学生の「飲みの文化」を黙認していると言えよう。このことから、大学のキャンパスでのアルコールの乱用ならびに過度の飲酒に対する予防的介入は、近年浮上してきた予防科学の分野から見ても「文化的なパラドックス」であると考えられる。

本研究の目的は二つある。一つは様々なレベルでの文化的・コンテクスト的な変数が、日本の大学生のアルコール乱用予防に対する態度に与える効果を検討することにより、日本というコンテクストの中の予防と文化の関係を検討することである。もう一つは今後、日本の大学生を対象とした文化に根付いた予防介入を開発し、実行するための示唆を与えることである。国際基督教大学での全学調査から得られた 552 名の大学生回答者の結果から、学校が学生の飲酒を規制することに対する大学生の態度は、予測されたものよりも悪く、逆に学校が学生の喫煙を規制することに対しては許容的であることが明らかになった。また、これらの態度に関連する変数を用いて重回帰分析を行ったところ、個人的および環境的な要因が、大学が健康促進や予防対策を行うことに対する学生の態度を説明することが示された。これらの結果を日本の文化と予防の関連という視点から論じ、日本の大学というコミュニティーへの予防的介入の示唆を与えた。

Excessive alcohol use and alcohol-related problems remain widespread among college students in Japan as well as in other countries (Bachman, 1997; Sasao, 1999a; Wechsler, Dowdall, Davenport, & Castillo, 1995; Williams, 1998). Nevertheless, it should be noted that alcohol abuse is perhaps one of the most important contributors to preventable morbidity and mortality in our contemporary society. As in most of the other countries worldwide, Japan takes sanction against the use of alcohol by minors (e.g., 20-year-olds); however, unlike the use of other hard drugs (e.g., marijuana, cocaine), alcohol

is not considered illegal in the sense that it is not strictly prohibited and persecuted if a person is caught by mere possession. As such, the Japanese society has allowed the “alcohol drinking culture” among college students. Thus, the prevention of alcohol abuse or excessive alcohol use on college campuses may well be considered as a “cultural paradox” in the emerging field of prevention science (Sasao, 1999a; Sasao, Niiya, Nishimura, & Kano, 1999). On the one hand, the society endorses a general value system where healthy lifestyle is being encouraged with moderate drinking and moral/legal sanctions for minors. On the other hand, the Japanese society is extremely lenient for college drinking, implying that alcohol use appears acceptable so long as not to cause social or personal difficulties in everyday life situations. In fact, casual observations and informal interviews found in popular magazines and newspapers all point to the role of alcohol among college students as a “prelude to surviving the hierarchically-structured employment system” (cf. Shimizu, 1990). Under this cultural milieu, it has been difficult for prevention researchers and practitioners to design and implement prevention programs on Japanese colleges (Sasao et al., 1999). The overall goal of this article is to investigate psychological and ecological correlates of college students’ attitudes toward drinking alcohol and prevention.

Over the past three decades, empirically-based knowledge and practice relevant to prevention has phenomenally grown with the potential for significantly reducing health and social problems including alcohol abuse, smoking, drug dependence, mental disorders, HIV infection, and other unhealthy lifestyle concerns (e.g., Elias, 1995; Weissberg & Elias, 1993). Moreover, it has become increasingly clear that prevention can be most effective if all stakeholders involved have a common forum for facilitating information sharing, program implementation and evaluation, collaboration, new theories and me-

thods, and planned strategies with policy makers (cf. Keeling, 1998). Nonetheless, planning, implementing, and evaluating prevention interventions in community settings has met numerous difficulties and problems across various cultural contexts (Sasao, 1999b). For example, while considerable progress has been made over the past years in identifying effective community - or school-based drug abuse prevention approaches, little attention has been paid to the implementation and evaluation issues *in multicultural community or school contexts*, thereby leaving the field less ecologically and culturally optimal (e.g., Botvin, Schinke, & Orlandi, 1995; Sasao, 1999b; Sasao & Sue, 1993).

One of the major methodological and conceptual problems in hindering the progress of research on the relationship between “prevention and culture” concerns the complex nature of these two constructs in multicultural contexts, where two or more cultures or groups of individuals co-exist (cf. Sasao, 1999b). Moreover, when “successfully” implemented prevention programs have been exported out of the U.S. context where the field originally developed, the issue of “prevention and culture” becomes especially murky because the idea of prevention is often a *culturally-loaded* construct.

In many of the Asian countries including Japan, prevention is *not* a historically prevalent or well-liked idea; instead, individuals in such cultures expect some immediate and tangible effects or treatments (e.g., medication) in response to a presenting problem or concern. Serious difficulties without fully understanding cultural factors are noted elsewhere in implementing and evaluating prevention programs (e.g., drug abuse, child abuse) even in the U.S. Asian and Hispanic communities (cf. Sasao, 1999b).

Ecological Conceptions of Culture in Preventive Interventions

In the current literature on “culture and prevention,” the concept of culture is often treated as if it were a discontinuous and distinct set of beliefs, values, and practices associated with a particular social or cultural group or category (e.g., Asians, Hispanics, Christians). This unfortunately leads to what Trimble (1990-91) calls “ethnic or cultural gloss” effects, ignoring historical and contextual factors unique to an identified group. However, as noted above, it has been precarious to define culture as such because our society, be it the U.S. or Japan, has become so multicultural for some time now (i.e., incorporating diverse cultural elements not necessarily attributable to one single culture) (cf. Wasilewski, 1998). Given this situation, Sasao (1999b) proposes to investigate the effects of culture in a concentric model where various social influences are embedded within each other, which then defines cultural diversity (see Figure 1). This understanding of culture is necessary for capturing both distinct and interactive aspects of a diverse array of elements in a single culture or country (such as Japan). In other words, using Bronfenbrenner’s (1979) parlance, macro- or group-level consistency may exist as to what a particular culture or country is, and yet, at the individual level (i.e., micro- or meso-level), a great deal of variations may be found in the experience of culture.

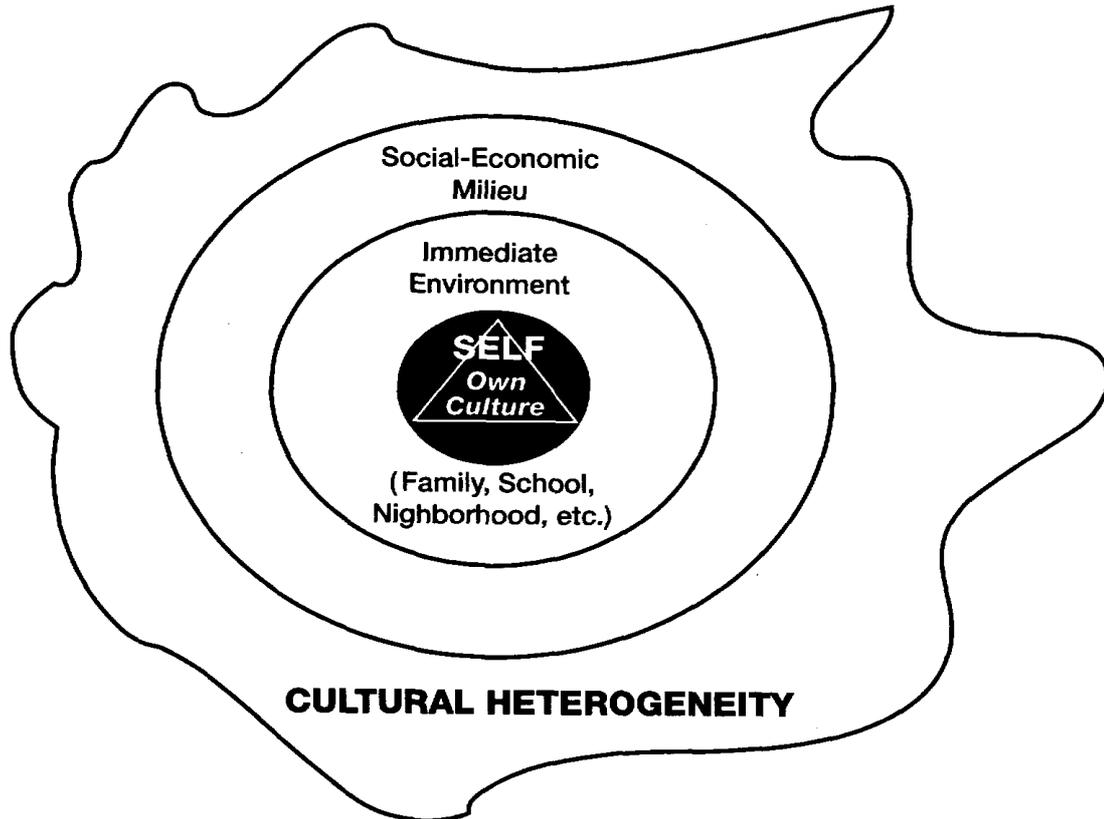


Figure 1.

A socially-embedded model of cultural influences in a multicultural society

Purpose

The purpose of this article was twofold:

- To examine the relationship between prevention and culture in a Japanese context by looking at the effects of cultural-contextual variables (at different levels) on the students' attitudes toward alcohol abuse prevention in a Japanese college campus community
- To provide implications for future prevention work in terms of the need for developing and implementing culturally anchored interventions for college students in Japan

The Politics of Preventing Excessive Alcohol Drinking among College Students in Japan: Results of a Campus-Wide Epidemiological and Etiological Health and Wellness Survey²

To the extent that college students bring with them personal beliefs and value systems acquired elsewhere when they arrive on campus for the first time, the campus environment provides the context in which they understand campus events including their new role as college students (Sasao, 1999b). In fact, college campuses are complex cultural communities that help shape the behaviors of individual constituents including students, faculty, and staff. Moreover, college drinking in Japan is surrounded by a unique cultural politics or paradox with respect to research and interventions while it is often noted that Japan is a “drinking culture.” Thus, an understanding of the interaction between the campus ecology and personal attributes of college students can add substantial leverage to the development and implementation of prevention programs.

Unfortunately, very little prevention work is available for Japanese college communities though there are a few studies that focus on individual and personality characteristics as correlates of alcohol drinking (Sasao et al., 1999). As noted above, several reasons can be speculated; however, it is indeed a “cultural paradox” because numerous studies and observations tend to show that Japanese individuals appear extremely “health-conscious,” being compliant with preventive lifestyles or health behaviors. Interestingly, the Japanese Ministry of Education has recently mandated that all public elementary school children be given “alcohol abuse prevention” education starting in 2000. The proposed curricula do include educational information relevant to alcohol abuse prevention; nonetheless, the basic message there is to abstain from drinking alcohol while under their legal age.

Implicitly, however, the curricula “encourage” young children and adolescents to “wait until college to begin drinking alcohol.” Once in college, Japanese students are no longer restrained even legally because the society then “encourages” drinking as a “prelude to social drinking” when employed by a company. Thus, problems associated with Japanese college drinking (e.g., acute alcohol poisoning, date rape, violence, motor vehicle crashes) are often viewed not as “serious enough” as in the U.S. or in Europe. Therefore, a cultural-contextual perspective should be helpful in understanding alcohol-related issues in a culture where associated problems have not been taken seriously because any preventive measure requires an understanding of intricacies played by the role of culture in prevention.

The purpose of the present survey study was to assess and predict correlates of attitudes toward developing a campus-wide prevention and policy on alcohol abuse prevention on the basis of a health survey recently conducted in a Japanese college. The study also aimed to provide implications for developing prevention curricula for college students in Japan.

Method

Participants & Procedure

A total of 581 Japanese students at a liberal arts university in Tokyo volunteered to participate in the self-report survey. Of the total sample, only the undergraduates ($n=552$) served as the basis for the present study because of a wide range of age groups represented among the graduate students. The characteristics of the survey respondents are shown in Table 1. A comparison with the university records showed a sample highly representative of all undergraduate

students registered in the fall of 1998. All potentially eligible students received a self-administered survey form in their private mail boxes on campus. Students were to complete and return the form, and received a book certificate of a modest amount (an equivalent of US \$5). The overall return rate was not high (38%); however, given this type of survey, it was deemed acceptable.

Table 1 *Characteristics of the Survey Respondents (n=552)*

Characteristics	Percent
Age	20.08 years (median)
Gender	
Female	70.3%
Male	29.1%
Missing	.7%
Year in School	
Freshman	28.1%
Sophomore	31.0%
Junior	19.4%
Senior	21.6%
Student Club Participation	
Yes (include "Participation in Past)	84.4%
No	20.8%
Current Living Situation	
With Parents/Relatives	53.4%
Alone	33.6%
Dormitory	12.6%
Other	.4%
Overseas Experience (1+ years)	
Yes	34.4%
No	65.6%

Survey Instrument.

A 10-page survey instrument (“ICU Wellness Survey”) contained the questions on:

- (a) *alcohol use*, e.g., perceived prevalence, individual use of alcohol in terms of frequency and quantity, self-efficacy, reasons for drinking, attitudes toward prevention intervention;
- (b) *cigarette smoking*, e.g., perceived prevalence, attitudes toward university policy, personal use;
- (c) *subjective well-being and mental health*, e.g., physical and psychological well-being; and
- (d) standard *demographic questions*. A series of pilot studies were conducted to develop the survey instrument. At pilot testing, it took, on average, 20 minutes to complete all of the items.

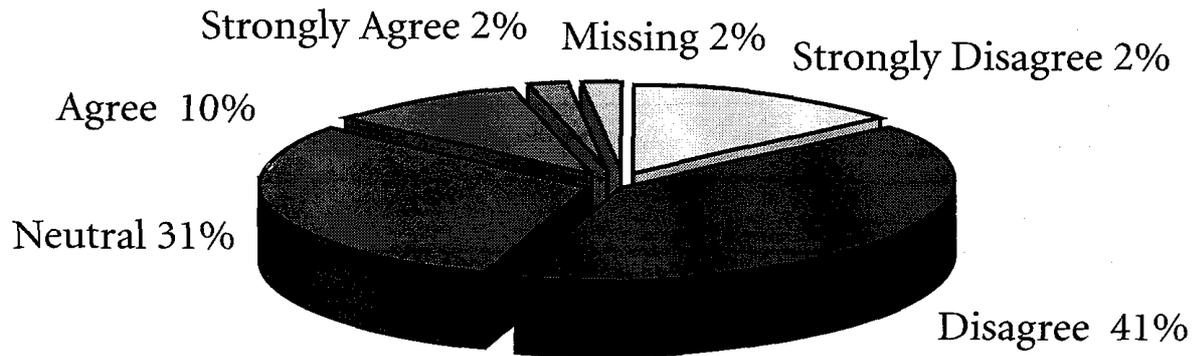
Results & Discussion

Attitudes toward Alcohol Prevention Policy among Students

Figure 2 shows the students’ attitudes for the university’s involvement in controlling alcohol drinking among students. For comparison purposes, a piechart on the students’ attitudes about the university’s role in cigarette smoking is also shown. Interestingly, over half of the respondents were strongly against the university’s involvement with students’ *alcohol use* while only 11% were explicitly against the university controlling the use of *cigarettes* among students (e.g., removal of cigarette vending machines). It should be noted that about a year prior to the survey, the university administration implemented an institutional policy about prohibiting any form of cigarette sales, designated smoking areas, non-smoking policy in

classrooms and hallways in the faculty office building. This obviously influenced the differences in the perception of the university's involvement in alcohol and cigarette use.

Alcohol Use



Cigarette Use

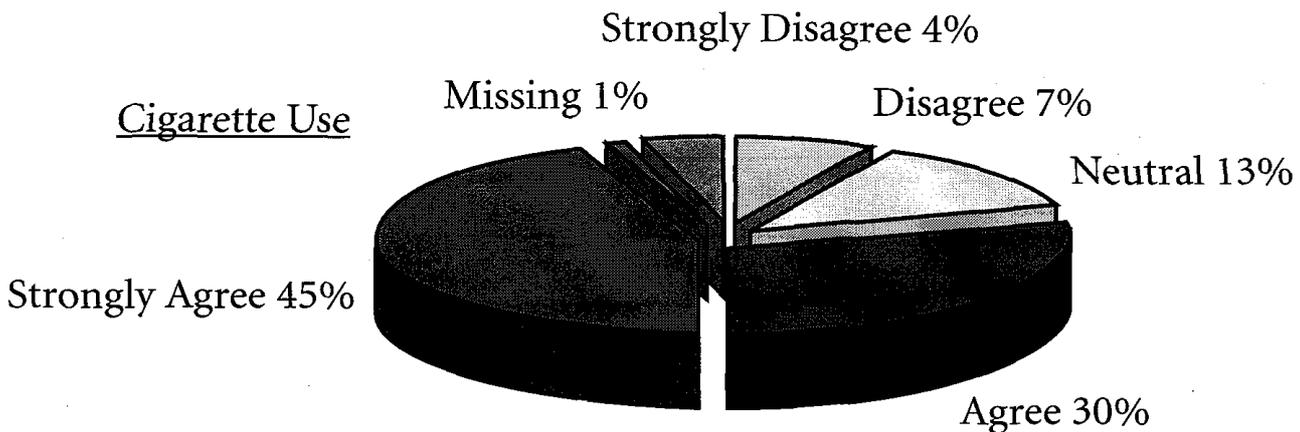


Figure 2. Attitudes toward the University's Involvement with Prevention Policy

Correlates of Students' Attitude toward Alcohol Prevention on Campus: Regression Analyses

Hierarchical regression analyses were performed to assess the unique contributions of various correlates for (a) the students' attitudes

Table 2 *Hierarchical Regression Analyses Predicting Students' Attitudes toward the University's Involvement in Alcohol Abuse Prevention and Desire for Alcohol-Related Information*

Step / Variable	University's Involvement		Desire for Alcohol Info	
	β	ΔR^2	β	ΔR^2
Step 1: Personal Attributes		.10		.04
Year in School	-.22***		-.16*	
Gender	-.18**		.01	
Step 2: Social Integration		.09		.06
Student Club Membership	.13*		-.04	
Living at Home	.10		.29***	
Religious Activity	.24***		.00	
Step 3: Personal Experience		.05		.12
Pre-College use	-.19**		-.31***	
Use Frequency	-.13		-.14	
Use Amount	-.14		-.19**	
Intoxicated Experience	.02		-.01	
Alc Abstinence Efficacy	-.21		-.26***	
Binge Drinking	.11		-.03	
Step 4: Alcohol Norm		.08		.01
Amount OK for Students	-.23***		-.10	
Freq OK for Students	-.19**		-.08	
Overall Model (R^2)		.32***		.23***

* $p < .05$ ** $p < .01$ *** $p < .001$

toward the university's involvement in preventing alcohol abuse among students and also (b) their desire for alcohol-related information. To investigate the effects at different levels, all of the variables were entered at four different steps as seen in Table 2. The overall proportions of the variance accounted for in each model were 32% for the university's involvement, and 23% for more alcohol-related information.

Students' Attitudes toward the University's Involvement in Alcohol Prevention on Campus.

As expected, the longer the students were on campus from their freshman year on, the more negative they were toward the university taking control of the alcohol policy on campus. The social integration variables, especially one's religious activity (church membership and active participation), appear to support the university's role in preventing alcohol abuse. In other words, one's membership with the church and actively participating in church-related activities appear to contribute to more positive attitudes toward the role played by the university in controlling the level of alcohol use on campus. At Step 3, some personal experiences with alcohol also explain some of the students' negative attitude toward the alcohol policy. Those students who experienced some negative consequences of alcohol use tend to be supportive of the university's direct role in alcohol policy. Finally, students' perception of a typical college student's drinking also explains their attitudes to the degree that if alcohol use in terms of frequency and quantity was relatively higher than usual, they tended not to be positive about the university playing a role in students' alcohol use.

Students' Desire for Alcohol-related Information.

Table 2 also shows the results of a hierarchical multiple regression analysis in predicting whether students would like to receive more information related to alcohol use and its consequences. The explanatory power of this model was more modest than the former model because the unique contribution of each variable did not seem to be consistent at each step. Nonetheless, personal experiences with alcohol are likely to explain the students' information-seeking in a more negative manner, i.e., less desire for alcohol-related information.

Prevention & Japanese Culture: A Paradox

Results show that the concept of prevention, as understood in the U.S., does not seem to apply directly to the Japanese college campus context, indeed leaving both researchers and practitioners a "cultural paradox" that need to be dealt with. On the one hand, while those students in the present study appear to be cognizant of health issues in general, they do not seem to be concerned much with excessive alcohol drinking because drinking is believed to be part of their "socialization" event while in college. Hence, substantially different attitudes toward the two health-compromising behaviors (i.e., alcohol and cigarette smoking in the present context) --- those actions or behaviors that increase vulnerability to negative health consequences might have been observed in the present survey study.

When the ideas of prevention and culture are brought to bear in a Japanese context, some of the prevention program development and implementation issues have not been adequately addressed in the past. For one thing, prevention in the absence of serious and devastating problems (e.g., sudden and increased mortality due to drunk driving) has met much community resistance unless it brings immediate, visible, and tangible solutions to those individuals who

are most concerned. This is understandable given that the purpose of prevention is to prove the “no-difference” equation. Another issue might be that the impact of cultural contexts has not been fully understood by the recipient targets as well as the professionals in Japan. For example, as noted above, culture is often conceptualized as “ethnic or cultural glosses” (Trimble, 1990-91) referring to non-Japanese cultures or elements per se in the society. This leaves an undesirable consequence that unless you come across many non-Japanese individuals, cultural factors do not seem very important. In other words, to qualify as “culture,” a group or category of individuals need to look different! Contrary to such popular, but narrow conceptions of culture in Japan, if we broaden the definition of culture as presented in Figure 1 earlier (cf. Sasao, 1999b) including family, student clubs, and religion, the impact of cultures in Japan becomes more evident (cf. Wasilewski, 1998).

Because of the rapid social changes occurring in Japan since the end of World War II, there exist a series of issues or problems derived from cultural differences within and/or among Japanese schools, communities, and families. For instance, many of the problems facing community researchers and practitioners can be viewed as consequences of differences among differing cultural groups and / or values, which include domestic problems and generation gaps as “cultural differences within the family,” bullying (“ijime”) problems in schools (a reflection of cultural differences in values and virtues nurtured in homes), and religion-based community violence and discrimination in the wake of Aum Shinrikyo’s possible wrong-doings (cultural differences due to a variety of religious beliefs and practices).

Thus, there is a critical and continuing need to address the linkage between prevention and culture in differing cultural contexts lest that “thirty-something” years of community psychology research

and practice represent peculiar successes (cf. Snowden, 1987) under the guise of practicing clinical psychology in community or group contexts. This need is particularly self-evident because preventive interventions have received increasing attention in international contexts in recent years (Sasao et al., 1999).

Conclusions: Toward Unraveling a Cultural Paradox

We should address the following issues to maximize the effectiveness of alcohol-related or any preventive interventions in a Japanese college context: (a) introduction of preventive efforts as part of the overall educational system, (b) consideration of developmental and cognitive developmental knowledge for age-appropriate and context-specific interventions, (c) use of long-term interventions, and (d) community-wide home-based intervention efforts for college students. After all, the goal of community psychology is not simply to provide interventions for those who exhibit a certain problem, but to ensure the well-being of the whole community.

Despite the importance of a linkage between culture and prevention in community or campus research, many of the intervention programs in Japan have not addressed such issues for several reasons. For instance, the issues of culture have not been recognized as viable because of the seemingly homogeneous cultural orientation in Japan. Numerous recent publications, however, indicate that the Japanese culture is not mono-cultural, but mixed and varied in its psychological and community structures (Wasilewski, 1998). This observation points out the importance of physical appearance in understanding cultures, and any intervention needs to address the latent cultural, attitudinal or value orientations (e.g., the independent-interdependent

contruals of the self) that may underlie much of our decision-making in our actions. There is a need to continue this line of work so that the impact of community-based work is to be recognized more fully in the form of community consultation and intervention (cf. Orford, 1992). Moreover, it would be a reminder for us that the goals of any community research should be realized based upon a two-way communication between target individuals or groups on the one hand and interventionists on the other (cf. Arriaga & Oskamp, 1998).

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