Young women’s use of medicines: autonomy and positioning in relation to family and peer norms

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Outline

• Background
• Research question and study design
• Results
• Conclusions and implications
• Questions and discussion
Background

• Paucity of research on young people’s use of medicine, seen from their own perspective
• Qualitative approach useful to get behind the numbers from quantitative studies
• Research on other forms of health behavior in youth shows the social context (i.e. family and peers) plays an important role in youth’s behavior
Research question & study design

*What do young women perceive as the norms for medicine use at home and among peers and how are these perceptions reflected in their own use of medicine?*

**Norms**
- Perceptions of family and peer expectations regarding appropriate medicine use
- Ideas about common practices at home and among peers

**Design**
- 20 semi-structured interviews
- Young women aged 16-20
- Recruited through 2 high schools
Results

*Central theme: growing autonomy and changes in medicine use*

- Limited autonomy – family practices and expectations
- Growing autonomy and changing influences
- Asserting autonomy – going against the grain
Limited autonomy – family practices and expectations

• Upbringing
• Awareness of acceptable and unacceptable use
• Access to medicines
Limited autonomy – family practices and expectations

One can always use organic things and stuff like that, she says. If you have a headache, then it’s because you haven’t drank a lot of water, right. So you drink a bit of water and go in to lie down and then it’s over with. If you have a stomach ache, then you take a hot water bottle or something like that. So that’s the kind of thing I’ve been raised with. (IP9)

But if it’s, like, [paracetamol] and stuff like that – they’ve never been particularly against it. They’ve been really, like, “If you feel unwell, better to take a couple of [paracetamol] than feel ill.” (IP15)
Growing autonomy and changing influences

- Greater autonomy in medicine use
- Begin to go against the family’s norms
- Greater access to medicines
- Awareness of norms among peers and within the school context
Growing autonomy and changing influences

But my mom (smiling voice), she doesn’t like that I take medicine. She says that I should (smiling voice) stick it out and tolerate the pain, but I can’t do that. (IP17)

I’ve often experienced it in the classroom, if someone has menstrual cramps or just has a headache, then they often ask if anyone has a [paracetamol]..... I think it’s very normal. I mean, most have it on them all the time .(IP1)
Asserting autonomy – going against the grain

- Many with a great degree of autonomy
- Resulted in an increased or decreased usage
- Distanced themselves from norms among family and/or friends
  - Disapproval
- Comparisons and positioning
Asserting autonomy – going against the grain

There are some of my girlfriends who tend to be, “Oh no, I’ve got a bit of a headache,” and stuff like that. And does anyone have – can they get a pill? Where I’m kind of like, I just want to say to them, I don’t want to be too mom-like, but just say, “I don’t think it’s a good thing, you just take a pill every time.” (IP2)

They just say, “Really, why don’t you just take a pill?” (determined voice) “No!” I can lose my temper a bit. (IP18)
Asserting autonomy – going against the grain

For example, when I have [a headache], then my mom says, “Well then take –” one of those, I don’t know exactly what it is – some kind of pill that calms you down in some way. Then I say, “No mom. I don’t want to, because it’s a pill and that’s unnatural, so I’m not interested. (IP11)

And they were really surprised, because I guess it’s something they do, that’s normal. And because it’s normal, we don’t talk about it. It’s something one expects everyone does once in a while. Umm. But then there’s ones like me who don’t do it so often. (IP11)
Conclusions and implications

• Perceived norms guided young women’s medicine use, but did not determine or control it
  • Norms as frame of reference for own use (awareness and positioning)
  • Distanced themselves from norms as autonomy grew, despite disapproval
  • Personal experience and everyday goals outweighed influence of perceived norms

• School a suitable context for educating youth about medicines
• Greater accessibility to medicines often related to increased use
Questions and discussion