When Parents' Stories Go to Pot: Telling Personal Transgressions to Teenage Kids

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"Tell me a story about when you were young" is a familiar refrain to parents, and is beginning to be heard by family narrative researchers. Parents in many cultures tell family stories in an effort to guide their children's conduct and convey important values (Fiese, Hooker, Kotary, Schwagler, & Rimmer, 1995). Personal stories lie at the heart of "opportunity education" (Fung, 1999), emerging at moments when the parent's own past experience seems to connect with the concerns of the child. Parents tend to believe that the stories they tell their children about their past lives can influence their children's behavior and values, and communities differ with regard to the kinds of parental stories that are told and not told to children (Miller, Sandel, Liang, & Fung, 2001; Miller, Wiley, Fung, & Liang, 1997).

The present study builds on past studies of an important domain of parental storytelling, stories of personal transgressions. Peggy Miller and her colleagues have contributed much of the foundational ethnographic work on how and why parents tell stories of their own transgressions to their children. Miller et al. (2001) found that White middle-class American mothers felt that telling their personal transgressions to their children created closeness by placing the parent at a more equal level with the child. This "self-lowering" parental strategy has also been identified in other studies of narrative socialization practices in White middle-class America (e.g., Ochs & Schieffelin, 1984). In contrast to Chinese mothers, who felt that exposing parental misdeeds would grant permission for transgressive behavior, American mothers emphasized a distinction between the behavior and the person. In narrating their own transgressions, American mothers espoused the view that bad acts do not make a bad person, that bad behavior can be redeemed, and that people are "complex, protean, and flawed" (Miller et al., 2001, p. 178).

The present study explored a specific kind of parental transgression: smoking marijuana in one's teenage years. Although the dilemma of how to talk to one's teenagers about one's own experiences with marijuana is very specific, it is also a fairly common predicament within the community that we studied and in the United States overall. An estimated two thirds of the parents of today's teenagers experimented with marijuana at some point in their youth (Johnston, O'Malley, & Bachman, 1986). Nevertheless, there appear to have been no systematic studies of whether and how parents disclose these youthful experiences to their children. Prior research has focused on relatively innocent parental misdeeds as told to young children. Because marijuana use is illegal and emerges later in adolescence, we turned to the larger family narrative literature...
to anticipate potential age-developmental changes with regard to transgressive experiences, and the role of marijuana in the development of American adolescents. In this chapter, we tell the story of the beliefs and practices that emerged.

**Age-Developmental Changes in Performing and Explaining Transgressions**

Adolescents, by virtue of having lived longer than young children and having broader social networks, are likely to be exposed to a varied array of transgressions on the part their families, their peers and the families of their peers. Because transgressive acts breech community norms and tend to require narrative justification (Bruner, 1990), adolescents can also be expected to hear a larger variety of beliefs and values with regard to transgressive behavior. Teenagers are also cognitively more sophisticated than children, and more interested in comparing one value with another in pursuit of an ideology to live by (Goodnow, 1992; Habermas & Bluck, 2000; McAdams, 1993). In white, middle-class America, adolescence is not only an era for exploring alternative practices and values, but also for developing a more egalitarian relationship with parents (e.g., Collins, 1997; Grotevant & Cooper, 1985). This greater mutuality includes more open disclosures on the part of parents than would occur with younger children, such as revealing the true reason that the children were sent away to live with relatives, or the mother's mastectomy scars (McLean & Thorne, 2003). However, parents may be less willing to disclose parts of their past which, if emulated, could put the teenager at risk.

Although children eventually reach an age in which their own transgressions can potentially match those of the parent, parent and teen values about transgressive conduct may be slower to coincide. Part of the divergence concerns differences in time perspective, with adolescents more likely to live in the present (Burton, Sussman, Hansen, Johnson, & Flay, 1989). Collins and Repinski (1994) suggested that adolescence is a period in which parents and children may be especially likely to misunderstand each other because the adolescent is changing more rapidly than the parent. Disparity between teens' and parents' views of the child has been found to be highest in early adolescence; by late adolescence, there is likely to be more convergence between parents' and teens' views (Allessandri & Wozniak, 1989).

In considering how and why parents tell transgressive stories to their teens, it is important to consider that for the parent, adolescence is a bygone era whereas for the teen, adulthood is unknown. Parents know the consequences of their own teenage misdeeds, whereas teens and parents can only guess about the eventual consequences of transgressive conduct on the part of the teen. To encourage responsibility in their adolescent children, should parents refrain from disclosing their own transgressions, or if they do, should they emphasize the negative consequences and forgo the parts of the story that suggest there was anything positive about the experience? Although the Miller et al. (2001) study understandably focused on relatively innocent misconduct, the mothers of the preschoolers described themselves as "wary of a too-ardent adherence to the letter of the law," and felt that there was "much to be learned by experimenting"; there was a value in transgressive selves (Miller et al., 2001, p. 181). Some parents may be willing to tolerate at least some of their teenagers' illicit misdeeds. Underage drinking, for example, may be allowed in the home under parents' supervision. But what about behaviors that do not become legal, for which one does not legally come of age?
Marijuana, Adolescent Exploration, and Risk Taking

In a longitudinal study of Northern California residents, Shedler and Block (1990) found that 18-year-olds who had experimented with drugs, mostly marijuana, were better adjusted than were adolescents who were frequent drug users, or who had never experimented with drugs. In explaining their findings, the authors suggested that occasional use of marijuana can be understood as "developmentally appropriate experimentation" in the context of American adolescent culture; in former generations, alcohol primarily served that function.

Marijuana use is not illegal in all cultures, and even in the United States occupies a distinctive niche among illicit transgressions because it is prohibited by the official macro-culture but is visibly tolerated in some communities within the larger culture. In the latter communities, including the Northern California county from which we drew our informants, the values of the official macro-culture reach deeply into the school system and the home. Ex-drug addicts visit schools to tell stories about their personal struggles with drug abuse, and the DARE program teaches children how to identify the smell of marijuana. Recently the television news showed footage of federal raids on local medical marijuana growers, juxtaposed with footage of civic leaders approving the defiant distribution of medical marijuana on the steps of the county courthouse.

Compared to some illicit misdeeds, marijuana use may seem relatively minor. Nonetheless, value conflicts about marijuana use appear to be widespread, diversely managed, and rarely exposed to public view. The value conflicts can be expected to be especially intense for parents of teenagers, not only because marijuana is a prominent vehicle for adolescent exploration, but also because adolescence is the period in which parents may be most likely to be asked to disclose and justify their own adolescent risk taking to their children. At that point, parents may feel pressed to "come clean" to their teens not only about their own use of marijuana, but also about the meaning of such use in their own lives. Full discussion of personal values with regard to marijuana use, if at all, may not be appropriate until late adolescence, when the child can better understand the parent's point of view. Stated another way, the act of smoking marijuana may emerge developmentally earlier than a mature understanding of the values that may protect children from compromising their future.

How to Talk to Teens about One's Own Marijuana Use: The Official Cultural Line

There is an official cultural line about how parents should protect their children from illicit drug use: "Talk to your kids about drugs." This advice is dispensed in public service television advertisements and on billboards and bumper stickers across America. But how, exactly, should parents talk to their teens about drugs, particularly when the parent has had personal experience with marijuana? Should the conversation focus on impersonal drug facts and on the teen's drug experience, or should the parents also disclose their own personal experience with drugs?

The most accessible source for educating parents about how to talk to their children about drugs is Drug Free America, a nonprofit organization whose website draws from guidelines provided by the U.S. Department of Education. The Drug Free America website (http://www.drugfreeamerica.org/Templates/Help-For-Parents) advises parents to begin to talk early to their children about drugs, to be a good listener, to give a clear no-use message, and to
model honest behavior that the child can emulate. The advice to parents who have used drugs in
the past is to go slow in the disclosure in an effort to determine the child's readiness for an open
answer. In 1999, as we were conceiving the present study, we discovered a script on the Drug
Free America website tailored for such occasions: 1

The 12-year-old you care for comes home from school and says, pretty matter-of-
factly, "I learned about drugs today. The teacher said that lots of people your age
used to do drugs. Did you?"

You: "Wow, you're learning about drugs already? What are they teaching you?"

Child: "Well, just about drugs and alcohol, and the teacher said a lot of people
your age used drugs when they were young."

You: "Well, I'm not sure what your teacher meant to say, but I can tell you what I
know about those times. Would you like me to?"

Child: "Sure."

You: "Well, many people my age, who were young adults back then, tried
marijuana. We mostly called it pot. But we didn't know as much about it as we do
now. It was the same with cigarettes. We didn't think smoking was very harmful
either. So do you still want to know if I smoked marijuana? Think …."

Child: "Are you just trying not to tell me?"

You: "No, I'm trying to be thoughtful about how I answer you so I'll know more
about what you think about my drug usage."

Child: "So you did?"

You: "Yes, I tried it. A couple of times because friends of mine were doing it. And
then I stopped because I decided it just wasn't a good thing to do."

The preceding script provided a useful point of departure for our study because it was so
vague; the script seemed to end just at the point that the parent was beginning to tell a personal
story. The cautionary tone of the script may have been due to its being addressed to a 12-year-
old. Is such a script appropriate for older adolescents, or should parents respond more directly
and, if so, with how much detail? If parents have smoked pot in the past, should they openly
share their stories with their teenagers, or should parents speak with the voice of the parent self,
and downplay their teenage selves in an effort to emphasize the role of caregiver?

Responding to the question "Did you ever smoke pot when you were younger?" raises
serious issues that lie at the heart of parenting, and at the heart of making sense of one's life in a
way that is both honest and responsible. In answering what we will henceforth refer to as the
Question, one must answer to oneself as well as to one's child. The ideals of personal integrity
and responsibility would seem at odds for parents who smoked marijuana in their younger years,
and who seek an optimal way to reconcile those values.
The Study

To explore the parameters of this sensitive case of family narratives, we interviewed 17 parents (75% females) and 18 teens (60% females). The large majority of our informants were White, middle-class, and American born, and had at least some college education. The informants all resided in a county of Northern California, an area of the United States known for politically liberal values and which, along with California at large and seven other states, voted in the late 1990s in favor of the medicinal use of marijuana. The parents in the sample ranged in age from 40 to their early 50s, and the average number of children was two. Most of these children were currently in their mid-to late teens, although a few were preteens and several were in their 20s. The parents heard about our study by word of mouth; this is not an optimal method for sampling the community, but we felt it was a useful way to begin to explore the parameters of a very sensitive topic. Most of the teens whom we interviewed were 18 years of age and in their first months of living away from home at college, a time when exposure to alternative lifestyles is in high gear. Most of the teens were recruited from the research participation pool at a local college for a study of "family stories." All informants were promised anonymity.

Initially we intended to interview parents and their own teenage children. However, we found during pilot interviews that the topic could be invasive in its impact on the relationship between the parent and child. Privacy issues were one consideration, for although we assured informants that we would not reveal what they had said to the parent and vice versa, we sensed some hesitation on the part of each. We also heard a few stories about the impact that anticipation of the interview had upon family discussions of the topic, an interesting issue in its own right but one that goes beyond our current scope. Because we were not sure how these family discussions might impact what parents and teens said about the topic, we decided to switch to the safer ground of non-related parents and teens. A woman in her late 40s, with grown children, interviewed most of the parents, and a 20-year-old female college student interviewed most of the teens. The interviewers, like most of the respondents, were White and middle class, and had some college education.

We emphasized to the informants that our intention was not to cast one particular narrative practice as better than another. We don't know enough about how these practices work in the context of particular families, and we have not independently assessed antecedents or outcomes of the practices. Ideally, we would like to capture these narrative practices "on the hoof," as they spontaneously emerge in everyday discourse, and to collect a much larger and more representative sample. But at this stage of the project, we were simply interested in exploring how parents and teens talked about this particular transgression and the range of practices and values that emerged.

Informants' Histories of Marijuana Use

To enhance rapport with the informants, we did not directly ask about their own past and current levels of marijuana use or that of their families. Instead, we waited for them to volunteer this information, and it usually emerged in the course of the interview. Approximately one third of the parents said they had never smoked marijuana, explaining that it was not available when they were growing up or that alcohol was the drug of choice in their family and peer group. Another third of the parents said they had used marijuana along with other illegal drugs and
alcohol in the past, but stopped permanently when their children were young; most of these parents regarded themselves as reformed, ex-drug abusers. The final third of the parents described themselves as recreational pot smokers in the past and present. This felicitous distribution of parental drug use (similar proportions of non-users, ex-abusers, and recreational users) allowed us to compare practices of parents with different transgressive histories. With regard to the marijuana use of the 18-year-olds, 75% said they had smoked pot; of these, half said their own parents had smoked pot while the others either said their parents had not, or did not mention their parents' marijuana history.

The Interview

In the pilot phase of the study, we used open-ended interviews. However, it soon became clear that teenage marijuana smoking is a topic that merges with other kinds of other risky behaviors in adolescence, particularly sex, alcohol, and other drugs. Furthermore, the discourse was not confined to one's own behavior and that of one's children, but also included the behavior of grandparents, other family members, and friends. A few public figures also got referenced with a fair degree of regularity, such as Bill Clinton ("I didn't inhale"), and George W. Bush ("Maybe I did, maybe I didn't"). In an effort to get the informants on track, we would ask, "Did your child ever ask you if you have smoked pot?" To our surprise, we found that answers to this question were usually not straightforward. We got few spontaneous narratives of specific incidents in which parents disclosed their pot experiences to their children. Because the parents appeared to be forthright about the extent of their past marijuana use, and because rehearsal aids memorability, we surmised that specific episodes of disclosing their drug use to their children tended to be historically rare and/or subsequently forgotten.

Although vivid stories of parent-child disclosure were not very prevalent in the pilot interviews, opinions abounded about how parents should respond to the question. In most cases, the opinions reportedly were based on one's own experience as a parent and/or a child, and observations about siblings, neighbors, and friends. On the basis of the variety of responses we obtained in the pilot interviews, we developed brief scripted responses that parents said they themselves, their parents, or teens said their parents used to answer the question. We added to these a scripted response that paraphrased the advice from the aforementioned Drug Free America website, although we did not reveal this source to the informant.

The interview protocol shown in Table 1 was the basis for the interviews that are the focus of the present study. During the interview, the informant was asked to comment on the appropriateness of each hypothetical script, with minimal intrusion on the part of the interviewer. Parents generally were more voluble than the teens with regard to their personal experiences, and seemed more emotionally engaged by the posed parenting predicaments. The interviews were transcribed, and tallied with regard to which hypothetical scripts the informant viewed as appropriate, which yielded mixed or ambivalent responses, and which were viewed as inappropriate.

We found that the first two scripts shown in Table 1 were unanimously rejected by all of the parents and all of the teens. The third script was endorsed to some degree by all the parents and all of the teens, and the fourth script was endorsed by all of the teens and only some of the
parents. In the following sections, we elaborate the parents' and teens' reactions to each script, focusing on the values that emerged for informants with different histories of marijuana use.

Unanimous Endorsement of Honesty

Script 1: *Do you really want me to tell you whether I smoked pot as a kid? Think about how you would feel if I said no, and think about how you would feel if I said yes. Do you really want to know?*

All of the parents and teens, who ranged from claimed abstainers to current users, were troubled by the evasiveness of the first script because it seemed deceptive. The importance of giving a straightforward answer to the Question was endorsed by every parent and teen in the study. Parents emphasized the virtue of being forthright and not beating around the bush, as exemplified by three mothers' narratives:

I would never say that to my kid. It seems argumentative, avoids the question, seems deceptive.

If they asked me, I figure they do really want to know. This answer makes it seem like I have something to hide, that I'm afraid I would hurt them with the truth.

That's avoiding the issue.

Teens also endorsed the virtue of parental honesty, viewing the script as dodging the question and implying that the parent had something to hide. Understandably, teens more often took the child's perspective, saying that the evasion would make the child feel bad for asking the question and unwilling to confide in the parent. These consequences for the child were volunteered by teen informants who described themselves as having dabbled in pot, and by a teen who said she would never smoke pot, nor would her parents. Here are responses from four teens:

It's vague, general, threatening, leaves the kid in the dark. Makes him feel bad for asking the question. It will make him unwilling to confide in the parent since the parent isn't willing to confide in the kid.

I think the parent is just trying to be cautious, but the kid would clam up if the parent said this; the kid wants something a little more definite.

That's really bad. The parent might as well say, ‘Do you want me to lie or do you want me to tell you the truth?’ They must think the kid is an idiot.

The kid will think the parent smoked pot and is uncomfortable talking about it.

One of the most vivid stories with regard to evasion came second-hand, from a mother who reported the following conversation with the daughter of a friend. This narrative emphasized the humanizing virtues of parental stories of misdeeds that were cited by parents of pre-schoolers in prior research (Miller et al., 2001). Italics are added to emphasize the part of the narrative that we found particularly interesting.
My friend's daughter [Alice] was staying overnight because she and her mom were having battles, having problems and stuff. And [Alice] said, 'You know, my mom acts like she's an angel, she's never done anything like smoke pot, which isn't true. And um, I know it and I think she knows it too.' And I said, 'Well, would you rather have her be open and talk to you, you know talk like we're talking?' And she said, 'Yes I would because then at least I'd know my mom is human.' And you know, as far as, you know, her mom is some goody two-shoes that never did anything and duh-de-duh-de-duh. And I said, 'Well, you know a lot of times parents don't want to tell you these things 'cuz they think they'll give you, you know, ideas.' And what she said to me was she said, 'How could I possibly get more ideas than I already have?'

This informant felt that the mother's failure to disclose her own transgressions contributed to the rift between the mother and the child. The informant, who cast herself and Alice's mother as having smoked pot as teens, then added, "If you don't talk to them about it, I think you're setting them up to get into trouble. I think you're setting yourself up for having problems with your kid, bigger problems to deal with." Lying about the transgression was viewed as more grievous than the transgression itself.

*Unanimous Endorsement of Personal Integrity, and of Knowing Drug Facts*

*Script 2: No, I didn't. That stuff rots the brain and makes people stupid. People start with pot and then go on to harder stuff. It's really dangerous. I hope you never do it.*

This script was double-barreled because it included the claim that the parent had not smoked marijuana, and the claim that pot rots the brain and leads to harder drugs. A double-barreled response is not ideal for a questionnaire item, but this sort of response was prominent in our pilot interviews, in which a parent's denial of having ever smoked pot was reportedly followed by a dire warning about the dangers of marijuana. Very few of our informants, either parents or teens, believed that smoking marijuana usually leads to harder drugs, a belief supported by research (e.g., Gabany & Plummer, 1990; Kandel, 1975). Teens appeared to be more aware of this research than parents, referring to Script 2 as propounding the erroneous "gateway theory" of drugs. The teenage informants had been reared in an era in which drug education was formally dispensed by experts, in contrast to their parents and grandparents, for whom drug education was much more informal.

The grandparents were cast as the most ignorant of drug facts. A number of the parents said that their own parents believed that pot was a gateway to harder drugs, and that dire warnings about pot were a familiar refrain in their family of origin. Their parents were viewed as not only naïve about pot, but also as hypocritical because alcohol was normalized while marijuana was demonized. In one case, this perceived parental hypocrisy was used to justify the daughter's own excessive use of pot in adolescence. The daughter, a former heavy drug user who is now "clean and sober," recounted the following story:

In my own family there was so much drinking on the part of adults that when I was experimenting with drugs and they told me, 'Don't smoke marijuana, it's a dangerous drug,' I said, 'Well you're doing your drugs.' And I really remembered
this hypocrisy and I didn't wanna be that way with our kids. That was real important to me, to not be hypocritical. But then I felt really struck by the fact that I had done things that I had to in order to not be a hypocrite. I had to 'fess up. I wish very strongly I could have led a better example.

This mother, angry at her own parents' hypocrisy with regard to alcohol, became a heavy drug user. She used drugs with abandon in front of her very young children, just as she said her parents had used alcohol. She now sees the irony of her response to her parents' hypocrisy, and wishes she had set a better example.

Overall, parents were skeptical about Script 2 because someone who had never used pot was unlikely to be knowledgeable about its effects. Parents who had no exposure to pot and endorsed the gateway theory seemed naïve to their children, and parents who condemned pot but were sanguine about the use of alcohol seemed hypocritical.

Teenagers also attributed the naïveté of Script 2 to parental inexperience, but some of the teens also intimated that the experience of smoking pot itself, not just its long-term consequences, could not be understood by inexperienced parents. For example one teen said of the script, "My mom said that to me and it makes me think she's naïve and biased because she never smoked pot and doesn't know the whole story." Several teens said that Script 2 would create a barrier to open communication and might even boomerang:

Yes, my parents said that to me. In my family, drugs were bad, period. It was ok to drink but not to use pot. It's a very lame answer because there's no exchange allowed; the parent makes it a closed issue. It's too black and white. The kid will feel he can't talk to his parents about it.

*Unanimous Endorsement of Expressing Some Degree of Regret*

**Script 3:** *Yes, I smoked some pot when I was a teenager and I regret it now. It didn't help me do better in school, and I could have gotten into a lot of trouble. I hope you learn from my experience and don't try it.*

In this script, the parent forthrightly confessed to smoking pot, an admission quickly followed by an expression of regret. The presumed honesty of the admission, the realism of the consequences, and the gentle suggestion that the child learn from the parents’ experience were all praised by various informants. A reformed former heavy drug user, the mother of a 16-year-old son, emphasized regret in this bitter account:

I have to keep drilling the regret into my son’s head...I hope he can learn from my experience, but there's pressure from peers, and from his dad [her ex-husband, a chronic pot grower], and I have to be realistic. He's going to experiment. I don't think it's gonna stop him from smoking but I hope it helps him be aware of what's happening to him. He did see me when I first started in recovery; he felt a great relief and we talked a lot about it, the downside and how it made him feel vulnerable because of being raised a pot baby. I had to apologize to him, when he
was 10 or 11. But now he's 16 and seems to think it's cool having been a pot baby, it's culturally sanctioned…I do have so many regrets, I look back and go, God I was such a mess.

Another self-identified former heavy drug user whose grown children have “drug problems of their own” reported an episode in which she and her grown son openly exchanged their regrets. Her account suggested the interesting possibility that a parent's regrets can only be fully understood by someone who shares the same experience, in this case, one’s grown child.

Whereas the preceding two informants voiced considerable regret about their past drug use, the regret was not transformed into a hopeful vision for the future. Rather, the mothers seemed to feel helpless with regard to their own and their children's future, and their difficulties were compounded by a spouse or ex-spouse who was a heavy drug user. Clearly, parents' stories of regret draw from and influence other family members; regret does not exist in isolation, although we are far from understanding the impact of regret on families and lives.

Recreational pot smokers who endorsed the regret script did so half-heartedly, as if they were drawing from a dominant cultural narrative that might serve as a protective device, but which they did not fully embrace. For example, one such mother endorsed Script 3 because it seemed to be a gentle way to try to deter her children from using drugs. She said, “Yes, I said it that way. It's more honest than lying and saying I didn’t smoke pot, but I don’t really regret having smoked it. I didn’t know what else to say to make them think twice about smoking pot.”

Teens liked the script because it seemed more credible than the prior scripts, even if one's parent would never say it. Teens seemed very able to differentiate between what their parents would say and what seemed to be an optimal response:

It's personal, which is good, and honest about the effects, not an exaggeration, and it's good because you're still being the parent. But my parents wouldn't say this--I'd be shocked! They've never smoked pot.

Some of the teens’ parents had reportedly used Script 3, apparently to good effect: "Yes, my dad said this. I really like it. It's honest and states risks, and I've never smoked pot." "Yes, that's what my mom said, 'I'm trusting you to learn from my experience.'” Several teens emphasized the value of giving the teen some leeway; the script seemed to do that by making the child “think twice,” instead of prohibiting experimentation: "It's really good. Emphasizes moderation, illegality, and makes the kid think twice." "It's good because it's honest and they're trying to deter you from something they think is bad for you. It makes the kid think."

A few teens questioned whether the regret script would be effective because the child might not be satisfied living vicariously through the parent's experience, or because regret should be an equal opportunity: if a parent could smoke pot and regret it, then a teen could, too.

It's honest and informative about possible consequences, but the mom's experience may not be the kid's experience. Sometimes kids need to experience stuff for themselves.
It's good because she's telling the truth. But it could backfire, the kid might think 'Well, you did it so I'll do it and learn for myself.' It's better to say this to a college student, a kid who's older.

**Divergence Between Parents and Teens: Providing a Safety Net for Experimentation**

**Script 4:** A lot of kids smoked pot when I was a teenager, and a lot of them smoke it now. At some point someone is going to offer you some and I worry that it will be too strong, or that you'll get arrested. If you do experiment with it some time, I hope you will do it in a safe place and that you will call me if you need me to come get you.

This final script emphasized the inevitability of the temptation, the potential physiological and legal dangers, and the importance of being cautious and calling the parent for help, if need be. Although the script did not reveal the parent's own marijuana history, this omission did not seem to trouble the informants. Instead, informants focused on the delicate balance that was conveyed between allowing the teen freedom and responsibility in an era in which exposure to marijuana was viewed as inevitable.

The teens, regardless of their own marijuana history and the attitudes of their parents toward marijuana, were uniformly enthusiastic about the trust and responsibility that was conveyed by script 4. Teens felt that the script would encourage honesty and openness on the part of the child, as well as responsible experimentation. The enthusiasm for this script was apparent in the response of a young woman who had never smoked pot nor had her parents. Despite the fact that she could not imagine her parents voicing the script, she thought it was a good way to handle it:

I think this one is great. The parent is taking responsibility and giving the kid responsibility but also saying “I’ll be there for you.” The parent is understanding. My parents would never say this, though. They would lecture me really hard if I ever smoked pot.

A young man whose dad used to grow pot and reportedly told hell-raising stories about it, described himself as having gone in the opposite direction. But he liked the script because its openness would make the teen feel he didn’t have to “hide stuff,” and that the teen would “feel relieved.” Another young man liked the script because it addressed the dangers, health risks, legal risks, and inevitable exposure: "The parent seems very well informed about the teen's situation, which would make the kid feel more secure and understood."

Whereas teens were uniformly positive about script 4, the script split the general consensus that had prevailed in the parents' responses to the prior scripts. Reformed former pot users found the safety net script too permissive. For example, the mother of the “pot baby,” described previously, felt that the script "encourages the kid to experiment. It’s important to send a strong no-pot message." This mother felt that she perpetually had to battle her son's peer culture and her ex-husband's permissiveness to keep her son away from marijuana. To her, the issue was black and white because of her fear that her son would become like her former self, and like her ex-husband, an unrepentant daily pot-smoker.
Parents who favored the safety net script were abstainers who had never smoked pot but had indulged in alcohol, or were recreational pot-smoking parents. The former group included a mother of three teenagers, the youngest of whom she was “worried about.” She said she uses this script because “it makes them feel I’ll be there for them if they make a mistake, and that I’ll disappointed if they go too far.” She thinks the narrative instills a dual sense of security and guilt, and also keeps the lines of communication open. A recreational pot-smoking mother said that she emphasized how not to cross the line with regard to pot smoking. She told her teens:

Don't take it to school, don't carry it around because it's illegal and you'll get into trouble; you can smoke it at home with your friends before you go to a dance, but if you are ever in a situation where you can't get home safely you call me, no questions asked, no lectures.

Another recreational pot-smoking mother said, “We’ve never pretended that our kids don't smoke pot, but we remind them not to go too far; use your brain and be careful.” The illegality bothers her, and the excess, but she feels that experimentation is inevitable and so far she feels that their teenagers are open with them about their experimentation and able to be moderate about it.  

**Implications**

We were surprised at the eagerness with which parents volunteered to participate in the study and their vested interest in the findings. Many sought from us the perfect script, or as one mother phrased it, the "magic bullet" for how to talk to one's children about one's personal experiences with marijuana. We cannot provide a magic bullet on the basis of 3 dozen interviews, but the themes that emerged suggest some guidelines for what virtues matter for American parents and teens with regard to the narrative management of this illicit transgression. These virtues—honesty, knowledge, regret, and, for most parents and all of the teens, safe experimentation—will be discussed in this section along with larger implications for the field of family narrative.

The most prominent virtue across all parents and 18-year-olds was the importance of answering the question "Did you ever smoke pot when you were younger?" honestly and straightforwardly. A simple, immediate, and honest "yes" or "no" was highly valued because it was felt to create a climate of mutual honesty. Parents who were honest with their children could more often expect their children to be honest with them. Sharing stories about one’s illicit past may signify a turning point toward an egalitarian relationship between parent and child, which tends to surface in emerging adulthood (Arnett, 2000). Whereas offering one’s adolescent more freedom (e.g., to use the family car or to stay out later) communicates a one-way trust in the child, disclosing one's illicit behavior communicates a mutual trust. The disclosure trusts the child to use the information wisely and to understand the parent from a more mature perspective.

To our surprise, parents who had not smoked pot were not off the hook with regard to the Question because such parents ran the risk of being dismissed by their teens as naïve and out of touch with the child's reality. Parents who had not smoked pot tended to be regarded by their children as ignorant of basic drug facts. The teens in our study, relative to their parents, tended to be more formally educated about the inaccuracy of the claim that marijuana is usually the
When parents' stories of transgressions are told, they serve as a gateway to hard drugs. However, some teens felt that accurate knowledge of drug facts was not sufficient to render their parents credible sources with regard to the effects of marijuana, or to fully understand the child's experience. These teens felt that parents had to have smoked marijuana themselves in order to understand the "whole story" and to more fully open the lines of communication between parent and child. This view raises the interesting question of whether engaging in the same activity (although not necessarily with one's child) opens lines of communication about the experience. For example, the full story of a parent's sexual experiences is not usually discussed in American families, regardless of the age of the child (Bartle, 1998).

In talking about their past experiences with marijuana, parents tended to place much more emphasis on conveying risks than benefits. Even parents who were current occasional users endorsed the expression of regret in an effort to promote caution and long-term achievement over the pleasures of a short-term high. While honesty about whether one had ever smoked pot was an important theme, honesty about the full range of consequences--bad and good, short-term and long-term--was less valued. Thus, even for parents who appeared to have enjoyed marijuana with few negative consequences, expressing regret about potentially negative consequences trumped honesty about experienced consequences.

The final virtue, safe experimentation, was enthusiastically endorsed by all the teens and by most of the parents. This virtue did not focus on the parent's marijuana experience, but instead emphasized the inevitability of the temptation, the potential physiological and legal dangers, and the importance of being cautious and calling the parent for help, if need be. Teenagers were enthusiastic about the realism, freedom and responsibility that were simultaneously conveyed by this script. The dissenting parents were perhaps the most interesting informants in the study. For parents who viewed marijuana as partly responsible for their own extended life problems, the child's well-being did not seem well served by opening the doors to experimentation, doors which they themselves had passed through in their youth and now tried to keep tightly shut. The "safe experimentation" script was viewed as too permissive by such parents, whereas it was viewed as appropriate by parents who felt that marijuana had not compromised the quality of their lives and who felt that their children could also handle marijuana responsibly.

*Larger Implications for the Field of Family Narrative*

As noted in the introduction to this chapter, studies of parental stories of transgressions have focused primarily on practices that are common across a community rather than practices that are idiosyncratic to particular families or parents (Miller et al., 2001). We, too, found some commonality across parents and teenagers, but this commonality pertained mostly to common values or beliefs, not practices. Because of the delicacy of the topic, we did not attempt to observe how parents actually talked to their teenagers about their past use of marijuana. However, we did expect that parents would offer vivid narratives about how they had talked to their teenagers in the past.

To our surprise, no parents had a ready story to tell us about a *specific episode* in which they had talked to their children about their own experiences with marijuana. Parents had firm opinions about what not to say, but did not usually offer specific stories about what they did say. We also observed that although most of the teens seemed confident about their knowledge with regard to whether their parents had or had not smoked pot, the source of this knowledge was not
necessarily the result of deliberate disclosure on the part of the parent. Some knowledge was reportedly based on serendipitous observation or eavesdropping: overhearing one's mother and aunt laughing about being stoned on a high school camping trip, the picture in an uncle's photo album of one's dad smoking pot, a baggie full of stale weed tucked into the back of dad's sock drawer. Clearly, children derive information about their parents' past from many sources, only some of which are under the direct control of the parent. The impact on children of indirect knowledge about their parents' lives, such as hearsay, is an interesting domain for future study because it encourages a more distributed conception of narrative selves and lives as extending beyond the nuclear family and into the wider community (Bruner, 1990).

Teenagers were aware of their parents' tendency to shield this part of their past, especially when the children were younger. Generally, the older and the more responsible the child, the more likely the informants (both parents and teens) viewed as appropriate parents' disclosure of their illicit past. This sensitivity to the maturity of the child was striking, although parents on the whole were viewed by teens as continuing to be more protective of their illicit transgressions than the teens felt was necessary. The teens viewed their parents as people who make mistakes but are generally well intentioned, a view that parallels the attitudes of the American parents of young children in the Miller et al. (2001) study. The parents in the present study, however, were less uniform than either Miller's parents or our 18-year-olds in viewing their teenagers as human beings who make mistakes. Many seemed to feel that the fruits of their parenting were still on the vine. The more casual attitude of teens toward parental transgressions than vice versa may reflect differences in investment in the parental project (Steinberg, 2001). For example, parents tend to view their children's transgressions as reflecting on their own failure as a parent, whereas teens do not tend to read such deep meaning into it (Collins, 1990; Smetana, 1988). Sometimes in our interviews with teens, we asked them how they would talk to their own kids about their experiences with illicit drugs. This question tended to produce a more cautious story, one that was more reminiscent of the cautionary tales more often portrayed by parents. Possibly, projecting oneself into the future may lead a teenager to cast the present into a longer time perspective and to experience the present with more of an eye to the future.

The most dramatic differences among parents centered on their comfort with their own adolescent selves. The recreational pot-smoking mothers still seemed to value the exploratory mentality to which they viewed marijuana as a route. For such mothers, cautious experimentation was a practice which they felt they had successfully incorporated into their lives; their current selves were relatively conversant with their past selves (Bakhtin, 1981; Hermans, 1996). These mothers expressed pride in their children's academic and extracurricular achievements and confidence in their children's moderation with regard to the use of pot, although they were alert to signs that their children were veering off track. Such mothers seemed to exemplify families who have a sustained generational identity. In a longitudinal study of California counter culture families, Weisner and Bernheimer (1998, p. 212) found that regardless of whether counter culture values had been sustained or abandoned, all of the parents felt that their teenage children's "well-being (or lack thereof)...resulted partly from counter cultural parental values and life choices." A sustained commitment to these values was found to be associated with greater subjective and objective well-being for middle-aged parents and their teenagers, including lower levels of teenage drug use.
The recreational pot-smoking mothers contrasted markedly with the mothers who were worried about their teenage children's use of drugs. The latter mothers had a spouse or an ex-spouse who, in their view, did not use moderation as a philosophy. The disparity between the parents with regard to attitudes toward marijuana was cast as a perpetual obstacle in keeping their children on the good path. A former pot-using mother whose husband smokes marijuana daily said she had never discussed her husband's marijuana use with her 17-year-old:

My son oftentimes will say, “Well, you know, dad said this, you say that.” You can tell there's a little bit of confusion. On the other hand, I don't think it's reasonable for two people to get their stories straight ahead of time either. I think you just have to go with it. Like I say, “Well, you know, that's what dad thinks and dad is different from me.”

Further fracturing the coherence of that family system was the troubled trajectory of the mother's life story. The mother seemed to have psychologically divorced her adolescent drug self from her current sober self, but had not developed a hopeful vision of the future for herself or for her children. This kind of unhopeful personal story has been found to be associated with unfortunate family outcomes (McAdams & Bowman, 2001; Pratt, Norris, Hoef, & Arnold, in press; Singer, 1997).

Clearly, an important issue to be pursued by family narrative research concerns the impact of parents' personal stories on family climate and children's well-being. Consistent with Miller et al. (2001), most of the parents in the present study believed that the personal stories that they chose to tell to their children influenced their children's development. We have no independent evidence to support the validity of such beliefs, but we noted some variation with regard to the strength of the conviction. Fathers, although underrepresented in the study, tended to be less concerned than mothers about vividly disclosing past episodes of drug use to their children. Hints of a parallel gender difference also emerged in the "hell-raising" stories that fathers more often told children in Miller's studies of American families (Miller et al., 2001). Overall, we sensed that mothers viewed personal narratives as a more powerful socializing agent than did fathers, who tended to view their stories as serving more of an entertainment than a guidance function. The field of family narrative is just beginning to understand the influence of parents' personal stories on children's well-being. How parents determine which stories are appropriate to tell is a fascinating route for future research.

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References


Footnotes

1 This script is no longer featured on the website, which now contains more general advice for parents of children at different ages. The source of the advice is U. S. Department of Health and Human Services (1998, pp. 8-9).

2 Our proportion of parents who had smoked marijuana in the past year, about one third, was larger than the 10% of parents who, in national surveys, report occasional marijuana use (Cass, 2002), but is not surprising given the community in which they resided.

3 One father described himself as a chronic drug abuser all his life; we excluded him from the study because he was atypical of our informants, and because his narrative was so impersonal; he attributed his own drug use and that of his kids' to the pressures of modern life and the permissiveness of the media.

4 Although a 75% base rate is higher than the 54% of American high school seniors who reportedly have experimented with drugs (Johnston, O'Malley, & Bachman, 1998), it is not surprising for first-year college students in this Northern California community.

5 As an interesting side note for the study of family narrative, we noticed that among the currently married informants, the recreational pot smokers more often used the collective voice, using "we" instead of "I" in their discourse, for example, "We say be smart about it and don't get in a car. Call us, and try to be moderate." Such indications of parental consensus (Steuve & Pleck, 2001) were less prevalent among married informants who had reportedly not smoked pot, or who were reformed ex-drug abusers.
Table 1

*Interview Protocol for Parents and Teens*

In our past interviews with parents and teens, a number of responses were offered with regard to how parents should talk to their kids about their personal experiences with marijuana. We’ve listed some of the responses on these cards. We’re interested in knowing which responses seem to be appropriate, and which seem inappropriate. Since there are no correct answers to this question, we’re interviewing parents [teens] to see what they can tell us.

I’d like you to read the first response out loud, and to tell me whether you think it’s something a parent should say to their kid, and why or why not. We’re especially interested in the “why or why not” part. Then we’ll move on to the next response. Before I read each parental response, I’d like you to pretend to be the kid. Each time, you'll ask the same question: “Some of my friends are talking about smoking pot. Did you ever smoke pot?” I'll then read the response on the card. Then I'd like you to tell me if you think the response is the right thing to say to one's kid, and why or why not. Then we'll proceed to the next card and repeat the process. Do you have any questions? … OK, let's begin.

Kid says:

“Some of my friends are talking about smoking pot. Did you ever smoke pot?”

Parent responds:

1. “Do you really want me to tell you whether I smoked pot as a kid? Think about how you would feel if I said no, and think about how you would feel if I said yes. Do you really want to know?

   [Is this something you think a parent should say to their kid? Why or why not? Interviewer repeats after reading each hypothetical response]

2. “No, I didn’t. That stuff rots the brain and makes people stupid. People start with pot and then go on to harder stuff. It’s really dangerous. I hope you never do it.”

3. “Yes, I smoked some pot when I was a teenager and I regret it now. It didn’t help me do better in school, and I could have gotten into a lot of trouble. I hope you learn from my experience and don’t try it.”

4. “A lot of kids smoked pot when I was a teenager, and a lot of them smoke it now. At some point someone is going to offer you some and I worry that it will be too strong, or that you’ll get arrested. If you do experiment with it some time, I hope you will do it in a safe place and that you will call me if you need me to come get you.”