

Parenting Styles and Alcohol Use Among Hostellers and Non-Hostellers

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ABSTRACT

This study examines the relationship between parenting styles (authoritarian, authoritative, permissive) and alcohol use among young adults, comparing hostellers (N = 50) and non-hostellers (N = 50) aged 18–25 in India. Using a cross-sectional design, participants completed the Alcohol Use Disorders Identification Test (AUDIT) and the Perceived Parenting Style Scale. Results revealed a significant positive correlation between permissive parenting and alcohol use ($r = 0.228$, $p = 0.023$), suggesting that lax parental discipline may enable risky drinking behaviors. Non-hostellers scored higher on authoritarian parenting ($p = 0.031$), possibly reflecting stricter household norms, while hostellers reported marginally higher (but non-significant) alcohol use, hinting at peer or environmental influences. Surprisingly, authoritarian and permissive styles were strongly positively correlated ($r = 0.732$, $p < 0.001$), challenging traditional dichotomies. The findings underscore the role of parenting in shaping alcohol-related behaviors, with permissiveness emerging as a risk factor. Cultural context, such as residential environment (hostel vs. family), further moderates these dynamics. Practical implications include targeted parenting programs to promote boundary-setting and university interventions for hostellers. Limitations include self-report bias and a modest sample size. Future research should explore longitudinal and cultural variations to clarify causality.

Keywords: Parenting Styles, Alcohol Use, Hostellers, Young Adults, India

Alcohol

Alcohol is a widely contentious topic amongst all of humanity. It is the only other legally available substance apart from tobacco that influences the human brain altering a person's ability to function or think, apart from a few prescription drugs that are only available with a doctor's note. While there are various effects that alcohol has on a person's overall state of being, there are various risks involved, including harm to themselves and in some cases, to others. An altered state of perception can lead to people taking decisions that one would otherwise not take, sometimes risk-taking and impulsive actions. These can lead to dire consequences that are often regrettable and sometimes life-altering.

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Received: July 13, 2025; Revision Received: May 11, 2026; Accepted: May 15, 2026

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Alcohol in terms of chemical composition consists mainly of ethanol, sugar and water, changing across each available drink. Fermentation of carbohydrates with yeast results in the formation of ethanol, generally using various sources like wheat, fruits, or other foods to draw carbohydrates from. Being a little less dense than water, it is easily soluble with most other liquids and is generally seen to be drunk after being mixed with various other soft drinks or fruit juices to create blends called cocktails.

Consumption of alcohol is seen as socially undesirable in many cultures and often seen to be threatening to the collective and tradition. While some cultures outright forbid alcohol use, like Islam, others promote it to a certain extent, like Christianity with their wine. Countries seen to be higher in intellectual values and more developed in economic terms and less rigid with their religious sentiments were seen to have higher level of alcohol use.

The term Addiction has a few connotations in the philosophical sense as an addiction can be even for delicacies or exotic luxuries, but in a psychological perspective, addiction refers to the dependence of an individual on psychoactive substances, those that affect the emotions, thoughts and behaviors of an individual. DSM-V-TR and the ICD-11 both have diagnostic criteria for alcohol use disorders that go into extensive detail about the same. The criteria mentions a problematic pattern leading to significant distress and impairment, with some issues listed, like large amounts, persistent desires, time spent trying to acquire alcohol, time spent under the influence, and time spent in recovery, failing to meet responsibilities and obligations at work, use of alcohol when in a physically dangerous location, drinking while under stress from a problematic situation, etc. Alcohol use disorders and related problems are also very widely seen to be comorbid with other disorders or issues that plague a client.

Heavy usage of alcohol with high doses can result in a lot of physical issues that impact virtually every organ in the body. Gastrointestinal issues, stomach ulcers, liver cirrhosis, pancreatitis, low grade hypertension are some of the most common ones. Cognitive issues that impact the central nervous system include cognitive deficits, memory impairment and cerebellum degeneration. A very rare amnesic condition called Wernicke-Korsakoff syndrome where the ability to encode new memory is severely impaired. Alcohol is also seen to increase the risk of suicide in the context of depressive and bipolar disorders.

Various risk factors can lead to alcohol use and exacerbate preexisting conditions, both medical and psychological. Culture and attitude towards drinking can be seen as a big factor affecting alcohol use among both males and females. Availability, pricing, personal experiences with alcohol, stress levels, heavy peer usage, are all environmental factors that can be prognostic towards the development of alcohol use disorder. Males are seen to have higher rates of alcohol consumption both in dosage and frequency, although we must consider that due to body size, fat levels and water content differences, women tend to get drunk with lesser quantities.

For years, the exact ways in which alcohol affects brain synapses remained a mystery. A pivotal study by Phillis and Jhamandas (1970) first revealed alcohol's ability to inhibit acetylcholine release in the cortex. This groundbreaking discovery spurred further research into alcohol's impact on other important neurotransmitters. Soon after, Davidoff (1973) found that ethanol didn't just suppress; it also enhanced GABAergic transmission in the spinal cord. Today, GABA receptors are known to be one of alcohol's primary neural targets (Kumar et al., 2009).

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Dopamine has since taken center stage in alcoholism research. Acute alcohol consumption disrupts the brain's reward pathways, flooding dopaminergic systems with positive reinforcement. However, long-term abuse can cause these systems to enter a hypodopaminergic state, leading to feelings of dysphoria and increasing the likelihood of relapse (Koob & Volkow, 2010). It wasn't until the 1990s that researchers confirmed alcohol's addictive nature, particularly its ability to hijack dopamine in the nucleus accumbens, the brain's reward center (Samson et al., 1992).

Alcohol's effects are easily observed, with many changes being outwardly visible. As alcohol enters the bloodstream, it interacts with neurotransmitters like GABA and glutamate, which slow down communication between brain cells and impair reaction times. This results in a calming and relaxing effect on both body and mind. Additionally, alcohol triggers the release of dopamine and serotonin, chemicals associated with pleasure and happiness.

Addiction is far more than a matter of willpower—it's a chronic brain disorder that stems from the manipulation of neural reward pathways. Substances like alcohol, opioids, and stimulants exploit the brain's dopamine-driven reinforcement system, creating a feedback loop that drives compulsive substance use (Koob & Volkow, 2016). Specifically, the mesolimbic dopamine pathway, particularly the nucleus accumbens, becomes dysregulated over time, dulling natural rewards like food and social bonding while heightening cravings. Repeated exposure causes neuroadaptations in the prefrontal regions, impairing impulse control and decision-making, thus trapping individuals in a cycle of relapse (Goldstein & Volkow, 2011).

Adding to this vulnerability is the common co-occurrence of addiction and mental health disorders. Nearly half of individuals with substance use disorders (SUDs) also suffer from conditions like depression, anxiety, or trauma (Grant et al., 2016). This bidirectional relationship creates a vicious cycle: substance use may initially serve as a form of self-medication, but long-term abuse only exacerbates psychiatric symptoms by disrupting the stress-response systems (e.g., HPA axis dysfunction). These overlapping mechanisms, such as serotonin deficits in depression and GABA/glutamate imbalances in anxiety, point to the need for integrated treatment approaches (Sinha, 2008).

The societal costs of addiction are staggering. In the U.S., SUDs drain over \$740 billion annually in healthcare, criminal justice expenses, and lost productivity (NIDA, 2020). Hospitals are burdened with alcohol-induced liver failure, opioid overdoses, and stimulant-related psychosis, while businesses deal with absenteeism and workplace accidents linked to impairment. The legal system is overwhelmed by drug-related incarcerations, yet punitive measures often fail to address the root causes of addiction, perpetuating recidivism.

Perhaps the biggest obstacle to progress is the stigma surrounding addiction. The belief that addiction stems from "moral weakness" discourages many from seeking help, and underfunded treatment systems leave significant gaps in care (Corrigan et al., 2017). Currently, only 1 in 10 people with SUDs receive evidence-based treatment, largely due to factors like cost, limited access, and societal shame (SAMHSA, 2021). Addressing this crisis requires both neuroscience-informed therapies (e.g., medications for opioid or alcohol dependence) and policy changes that focus on prevention and harm reduction.

Parenting Styles

Diana Baumrind was a pioneer in studying parent-child relationships, focusing on how different parenting methods shape children's behavior. Building on the work of other researchers, she coined the term “parenting styles” and measured them based on two main factors: demandingness and responsiveness. Parental responsiveness refers to how sensitive a parent is to their child's needs, while parental demandingness reflects the level of control a parent exerts over the child's life.

Baumrind identified three primary types of parenting styles: Authoritarian, Authoritative, and Permissive.

- Authoritarian Parenting is characterized by a strict, rule-based approach where parents maintain high control and often use corporal punishment. These parents expect obedience without providing much explanation for their rules.
- Authoritative Parenting, in contrast, involves parents who listen to their children, offering a balanced approach that combines clear boundaries with positive reinforcement. This style encourages children to make their own decisions and learn from their mistakes, all while maintaining parental support. This is considered the most beneficial style for child development.
- Permissive Parenting, also called the indulgent style, is marked by a lack of discipline and a tendency to offer children a lot of freedom. Children raised this way often struggle with authority, exhibit low self-regulation, and may act without considering consequences, which can lead to issues later in life.

Later, Maccoby and Martin expanded Baumrind's work by adding a fourth style: the Neglectful or Uninvolved style, which is characterized by both low responsiveness and low demandingness.

Research has shown that parenting styles significantly influence adolescent outcomes such as emotional regulation, academic performance, self-esteem, and decision-making skills. In particular, authoritative parenting promotes autonomy while maintaining appropriate boundaries, fostering an environment conducive to healthy identity development and emotional resilience (Steinberg, 2001).

In contrast, authoritarian and neglectful parenting are linked to higher levels of internalizing behaviors (e.g., anxiety and depression) and externalizing behaviors (e.g., aggression and delinquency) in adolescents (Hoeve et al., 2009). These behaviors are often precursors to risky activities, including substance use.

In addition to overall parenting style, parental monitoring—knowing where children are, who they are with, and what they are doing—along with open communication, play crucial roles in shaping adolescent behavior. High parental monitoring, often found in authoritative parenting, reduces engagement in risky behaviors like early sexual activity, delinquency, and substance use (Dishion & McMahon, 1998).

Even permissive or authoritarian parents may reduce adolescent risk-taking if they maintain strong lines of communication (Stattin & Kerr, 2000). Hence, the quality of interaction is just as important as the style itself.

Adolescents are significantly influenced by peers, but parenting style can moderate how strongly peer pressure affects them. Teens with authoritative parents are more likely to resist

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negative peer influence, thanks to higher self-confidence and strong internalized values (Mounts, 2002). In contrast, adolescents from neglectful or permissive homes may be more susceptible to peer-driven risky behavior due to a lack of guidance and emotional support.

The effectiveness of a parenting style can also vary based on cultural and socioeconomic factors. For example, authoritarian parenting, which is often linked to negative outcomes in Western cultures, may be seen as protective or even normative in some collectivist societies (Chao, 1994). Economic stressors may also affect a parent's ability to practice authoritative parenting, influencing family dynamics and adolescent outcomes (Conger et al., 2002).

Parenting styles also play a role in developing emotion regulation and self-control, both of which are crucial for avoiding risky behaviors in adolescence. Authoritative parenting helps nurture these traits by modeling appropriate responses and encouraging reflective thinking (Morris et al., 2007). Poor emotion regulation, on the other hand, is linked to impulsivity and a higher likelihood of substance experimentation.

Alcohol and Parenting Style

The connection between parenting styles and adolescent alcohol use has been a focal point of developmental and psychological studies. The way parents interact with, discipline, and guide their children plays a significant role in determining the likelihood of alcohol initiation, frequency of consumption, and the risk of problematic drinking behaviors.

Authoritative parenting, marked by warmth, clear boundaries, and open communication, has consistently been associated with lower levels of adolescent alcohol use (Cleveland et al., 2005). Adolescents raised by authoritative parents are more likely to adopt parental norms, make responsible decisions, and resist peer pressure—factors that protect against early or excessive alcohol consumption (Van der Vorst et al., 2006). These parents tend to monitor their children's behavior closely and discuss the risks of alcohol use, both of which help delay alcohol use and reduce its intensity.

On the other hand, authoritarian parenting, which stresses strict rules and obedience without much emotional warmth, has mixed outcomes. Some studies suggest that high levels of control may prevent early alcohol use, while others indicate that the lack of emotional connection may drive adolescents to rebel or seek approval from deviant peer groups, increasing the likelihood of alcohol use (Calafat et al., 2014).

Permissive parenting, characterized by a lack of discipline and excessive indulgence, is often associated with higher alcohol consumption in adolescents. These parents tend to avoid setting firm boundaries or enforcing consequences, creating an environment that allows risky behaviors, including regular drinking (Patock-Peckham & Morgan-Lopez, 2007).

The most concerning outcomes are linked to neglectful or uninvolved parenting. This style, marked by low responsiveness and low demandingness, is strongly associated with early alcohol use, frequent binge drinking, and a higher risk of alcohol dependence in adolescence or adulthood (White et al., 2000). The lack of parental engagement often results in adolescents lacking the emotional control and boundaries necessary for making safe choices. Parental modeling, or the way parents themselves use alcohol, also plays a significant role. Even in authoritative households, if parents frequently model risky drinking behaviors, adolescents may still perceive alcohol use as acceptable (Latendresse et al., 2008). This

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highlights the combined impact of both parenting style and parental behavior on adolescent attitudes toward alcohol.

Ultimately, the evidence emphasizes the importance of a parenting style that balances emotional support with clear boundaries and communication. Programs aimed at reducing underage drinking often stress improving parental monitoring, communication about alcohol, and promoting authoritative parenting strategies.

METHODOLOGY

Sample

This study was conducted on a sample of 100 individuals belonging to the age range of 18 years to 25 years of age, amongst these 100 individuals, 50 were individuals living in a hostel and 50 were day scholars who lived with their parents. The sampling technique used in this study was purposive sampling, consisting of undergraduate, graduate and PhD Scholars.

Instruments

Two measures were used in this study,

- 1. Alcohol Use Disorders Identification Test (AUDIT):** The Alcohol Use Disorders Identification Test (AUDIT) is a 10-item screening tool developed by the World Health Organization (WHO) to assess alcohol consumption, drinking behaviors, and alcohol-related problems. A self-report version of the AUDIT is provided. Patients should be encouraged to answer the AUDIT questions in terms of standard drinks. A chart illustrating the approximate number of standard drinks in different alcohol beverages is included for reference. A score of 8 or more is considered to indicate hazardous or harmful alcohol use. The AUDIT has been validated across genders and in a wide range of racial/ethnic groups and is well suited for use in primary care settings.
- 2. The Perceived Parenting Style Scale:** Developed by Divya and Manikandan (2013), the Perceived Parenting Style Scale measures the perception of the children about their parent's behaviour. It measures perceived parenting style of the subject with regard to three dimensions such as authoritarian, authoritative and permissive. Clear instructions in simple language in English are prepared and printed on the first page of the parenting style scale so that each participant might be able to follow them before he or she started responding to items. The participants are provided with a separate answer sheet which has columns to mark their responses. The participants could mark his or her responses for each item putting a tick mark (X) in the corresponding space of each item. The perceived parenting style scale consists of 30 items. It is a five point Likert scale with response category as Strongly Agree (5), Agree (4), Neutral (3), Disagree (2) and Strongly Disagree (1). All the items in the scale are worded positively and scored 5 to 1. All the three perceived parenting styles are scored separately.

Procedure

Individual participants from various domains such as undergraduate students, postgraduate students as well as young professionals participated in the study. Before filling out the questionnaire all relevant details regarding the study were given to the participant and informed consent was taken only after which the questionnaire was filled in by the respected participants. Ethical concerns regarding informed consent and anonymity of the study were explained to the participants and maintained throughout the course of data collection. The

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participants were given the physical copy of the questionnaire, they completed certain questions regarding personal information and demographic details necessary for the data collection and no form of incentives were provided for participating in the study. Once the process of data collection was completed, statistical analyses were employed to assess the hypotheses.

RESULTS

Table 1 - Correlation Between Alcohol Use and the Three Parenting Styles

Correlations		Alcohol Use	Authoritative	Authoritarian	Permissive
Alcohol Use	Pearson Correlation	1	0.062	0.118	.228*
	Sig. (2-tailed)		0.542	0.241	0.023
	N	100	100	100	100
Authoritative	Pearson Correlation	0.062	1	-.661**	-.636**
	Sig. (2-tailed)	0.542		0.000	0.000
	N	100	100	100	100
Authoritarian	Pearson Correlation	0.118	-.661**	1	.732**
	Sig. (2-tailed)	0.241	0.000		0.000
	N	100	100	100	100
Permissive	Pearson Correlation	.228*	-.636**	.732**	1
	Sig. (2-tailed)	0.023	0.000	0.000	
	N	100	100	100	100

Table 2 - Group Statistics for Alcohol Use, Authoritative, Authoritarian and Permissive Parenting Styles Grouped on the Basis of Residence

Group Statistics		N	Mean	Std. Deviation	Std. Error Mean
Alcohol Use	Hostellers	50	5.92	5.986	0.847
	Non-Hostellers	50	4.64	4.960	0.701
Authoritative	Hostellers	50	38.64	6.216	0.879
	Non-Hostellers	50	36.50	7.552	1.068
Authoritarian	Hostellers	50	21.68	6.539	0.925
	Non-Hostellers	50	24.94	8.279	1.171
Permissive	Hostellers	50	20.92	7.247	1.025
	Non-Hostellers	50	22.92	6.767	0.957

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Table 3 - Independent Sample t-Test of Alcohol Use, Authoritative, Authoritarian and Permissive Parenting Styles

Independent Samples Test											
		Levene's Test for Equality of Variances		t-test for Equality of Means							
		F	Sig.	t	df	Sig. (2-tailed)	Mean Difference	Std. Error Difference	95% Confidence Interval of the		
										Lower	Upper
Alcohol Use	Equal variances assumed	0.907	0.343	1.164	98	0.247	1.280	1.099	-0.902	3.462	
	Equal variances not assumed			1.164	94.730	0.247	1.280	1.099	-0.903	3.463	
Authoritative	Equal variances assumed	2.261	0.136	1.547	98	0.125	2.140	1.383	-0.605	4.885	
	Equal variances not assumed			1.547	94.509	0.125	2.140	1.383	-0.606	4.886	
Authoritarian	Equal variances assumed	1.595	0.210	-2.185	98	0.031	-3.260	1.492	-6.221	-0.299	
	Equal variances not assumed			-2.185	93.005	0.031	-3.260	1.492	-6.223	-0.297	
Permissive	Equal variances assumed	0.709	0.402	-1.426	98	0.157	-2.000	1.402	-4.783	0.783	
	Equal variances not assumed			-1.426	97.542	0.157	-2.000	1.402	-4.783	0.783	

The result shows correlations between parenting styles (authoritative, authoritarian, permissive) and alcohol use, as well as differences between hostellers ($n = 50$) and non-hostellers ($n = 50$). Pearson correlation analyses revealed a significant positive association between permissive parenting and alcohol use ($r = 0.228, p = 0.023$), while no significant correlations were found for authoritative or authoritarian styles ($p > 0.05$). Parenting styles were strongly intercorrelated: authoritative parenting was negatively associated with both authoritarian ($r = -0.661, p < 0.001$) and permissive ($r = -0.636, p < 0.001$) styles, whereas authoritarian and permissive parenting showed a strong positive correlation ($r = 0.732, p < 0.001$).

Group comparisons through independent sample t-tests indicated that non-hostellers scored significantly higher on authoritarian parenting ($M = 24.94, SD = 8.28$) compared to hostellers ($M = 21.68, SD = 6.54; t(98) = -2.19, p = 0.031$). Although hostellers reported higher mean alcohol use ($M = 5.92, SD = 5.99$) than non-hostellers ($M = 4.64, SD = 4.96$), this difference was not statistically significant ($p = 0.247$). Similarly, hostellers exhibited slightly higher authoritative parenting scores ($M = 38.64$ vs. 36.50) and lower permissive scores ($M = 20.92$ vs. 22.92), but these differences were non-significant ($p > 0.05$).

Alcohol use was seen to be higher in Hostellers than in Non-Hostellers, although seen to be a statistically insignificant difference.

DISCUSSION

The title of the present research is “Parenting Styles and Alcohol Use among Hostellers and Non-Hostellers”. For this, a sample of 100 young adults was taken, further divided into Hostellers (50) and Non-Hostellers (50). For data collection, tools such as AUDIT scale (Alcohol Use Disorders Identification Test) developed by WHO and Perceived Parenting Styles Scale were used. For Statistical Analysis, Correlation and Independent Sample T-test was administered.

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This study offers valuable insights into the relationship between parenting styles and alcohol use, with a particular focus on the role of residential context (hostellers vs. non-hostellers). The findings align with much existing research while also highlighting some unique aspects of this population. Specifically, the positive correlation between permissive parenting and alcohol use ($r = 0.228$, $p = 0.023$) supports the notion that lax discipline or a lack of structure in the home environment can encourage risk-taking behaviors in adolescents and young adults. This finding is consistent with earlier studies that indicate permissive parenting may fail to provide the necessary boundaries to deter early substance use (Steinberg, 2001).

Interestingly, the study found no significant correlations between authoritative or authoritarian parenting and alcohol use, which is in contrast to some previous research. Authoritative parenting, with its balance of warmth and control, has often been linked to lower rates of alcohol consumption and other risky behaviors in adolescents (Baumrind, 1991). However, the absence of a significant correlation in this study could reflect the unique socio-cultural context of the sample, suggesting that the impact of authoritative parenting may vary depending on local values, family dynamics, and societal norms.

The strong negative correlations observed between authoritative parenting and both authoritarian ($r = -0.661$) and permissive ($r = -0.636$) parenting styles highlight the distinctiveness of the authoritative approach. This is consistent with the idea that authoritative parenting provides a balanced, supportive environment, whereas authoritarian and permissive styles represent extremes that may have detrimental effects on adolescent behavior. The positive correlation between authoritarian and permissive parenting ($r = 0.732$), while surprising, may suggest that some parents adopt a mixed approach—alternating between strictness and indulgence, especially in different areas of adolescent life. This blending of seemingly opposing styles has been noted in other research on culturally diverse populations (e.g., Baumrind, 1991), and future qualitative studies could explore this further.

Hostellers vs. Non-Hostellers: Contextual Influences

The study also found that non-hostellers reported significantly higher authoritarian parenting scores ($p = 0.031$), which may reflect stricter household rules in family-based settings, where parental control is emphasized more than in communal living environments. This supports the idea that residential context can influence parental control strategies (Lareau, 2003). The trend toward higher alcohol use among hostellers ($M = 5.92$ vs. 4.64) also hints at the potential influence of peer groups and reduced supervision in communal living, which can facilitate early substance use. However, this difference was not statistically significant ($p = 0.247$), which may suggest that larger sample sizes are needed to fully explore this relationship. Additionally, underreporting due to the stigma associated with alcohol use may have affected the results (Nadkarni et al., 2020), and qualitative studies could shed light on whether hostellers perceive alcohol use as a rite of passage in their social environments.

While permissive parenting's link to alcohol use is well-documented, this study also reveals an interesting paradox: permissive parents often have the best of intentions—fostering independence—but inadvertently remove the necessary guardrails against risky behavior. Unlike authoritarian parenting, which can provoke rebellion, or authoritative parenting, which balances autonomy with guidance, permissive parenting lacks structure and consequence. This creates a setting where risky behaviors like alcohol use may not only be tolerated but implicitly accepted. This aligns with cross-cultural studies where permissive

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parenting is sometimes associated with normalization of early substance use (Patock-Peckham et al., 2011).

The strong correlation between authoritarian and permissive parenting ($r = 0.732$) in this study might reflect a blending of control and indulgence in some families. Parents may exhibit strictness in certain domains (e.g., academic performance) while indulging in other areas (e.g., social life), which could confuse adolescents' understanding of boundaries. This mixed approach warrants further exploration to understand how it shapes adolescents' risk perception and decision-making.

Implications for Parenting and Policy

The study's findings underscore the importance of nuanced parenting practices in shaping adolescents' behavior, particularly with regard to alcohol use. The following theoretical and practical implications emerge from the results:

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Acknowledgment

I would especially like to extend my special thanks to Dr. Roopali Sharma who made this thesis possible. I would also like to thank all my fellow research participants and various teachers who acted as a mentor to my cause.

Conflict of Interest

The author declared no conflict of interests.

How to cite this article: Poddar, A. & Sharma, R. (2026). Parenting Styles and Alcohol Use Among Hostellers and Non-Hostellers. *International Journal of Indian Psychology*, 14(2), 1033-1045. DIP:18.01.099.20261402, DOI:10.25215/1402.099