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Lifetime Alcohol Abuse Prevalence: Role of Childhood and Adult Religion

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Lifetime Alcohol Abuse Prevalence: Role of Childhood and Adult Religion

Authors
Amy B. Wachholtz, Lisa R. Fortuna, Michelle V. Porche, and Rosalie A. Torres Stone

Comments
Presented on Psychiatry Research Day at the University of Massachusetts Medical School, 2009.
**Background**

- Alcohol abuse disorder has a lifetime prevalence rate of 13.2% (Kessler et al., 2005).
- Over half of these cases are diagnosed by the early 20s, and three-quarters by age 30 (Kessler et al., 2005).
- Early influences on ETOH consumption have long lasting impact on later ETOH consumption, health status, and SES (Delucchi et al., 2003).
- Religion is protective against ETOH abuse (Michalak, Trock, & Broid, 2007).
- Religiosity/spirituality is protective against alcohol use among emerging adults from multiple racial/ethnic backgrounds (Pargament et al., 2003).
- Marital/spiritual variables positively impact health behaviors and alcohol use in $84\%$ of studies (Rae & Wang, 2006).

**Childhood & Adult Influences**

- However, little is known about:
  - the relationship among stressors, childhood and adult religious variables, and lifetime prevalence of alcohol abuse among diverse ethnic groups.
  - the role of childhood and adult religiosity/spirituality and lifetime alcohol abuse (LAA)

**Hypotheses**

1. Childhood and adult religiosity/spirituality will be protective factors against LAA
2. Male gender, SES factors, childhood adversity and parental factors against LAA

**Methodology**

- Theoretical Model - Religious affiliation
  - Male gender, SES factors, childhood adversity and parental factors against LAA
  - Childhood and adult religiosity/spirituality will be protective against LAA
  - The link among childhood and adult religiousness and lifetime alcohol abuse (LAA)

**Religiousity/spirituality**

<table>
<thead>
<tr>
<th>Measuring Categories</th>
<th>Adult Internal Religiosity/Spirituality</th>
<th>Adult External Religiosity/Spirituality</th>
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<td>Frequency Church Attendance</td>
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<td>Family on Welfare when Growing Up</td>
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<td>Graduated School</td>
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<td>Income Level</td>
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**Data & Sample**

- **Method:** National Comorbidity Survey Replication (NCS-R).
- **Sample:** 4153 respondents with complete data on LAA and religiosity/spirituality (Kessler et al., 2005).
- **Instruments:** Diagnostic and Statistical Manual - IV (DSM-IV), 1994.
- **Population:** U.S. adults ages 18 to 59.
- **Outcome:** Any lifetime diagnosis of DSM-IV Disorders in the National Comorbidity Survey Replication (Kessler et al., 2005).

**Results**

- **Table 1.** Series of Weighted Logistic Regressions of Any Lifetime Alcohol Abuse
  - All independent variables included from the NCS-R.
  - Analyses controlled for all covariates.

**Discussion**

- Gender and ethnicity moderate the association of alcohol abuse prevalence, severity, age at diagnosis, and treatment intake.
- Specific developmental periods appear to play a role in targeted substance/abuse prevention efforts.
- Religiosity/spirituality and spirituality interventions are crucial in the course and should be considered as targeted interventions.

**Next Steps:**

- Identify the NCS-R samples, confirm the NCS-R sample to identify and reduce key points.
- Identify the problem on which different aspects of religiosity/spirituality impact LAA.

**References**