### 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 threequarters 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, Matzger, & Weisner, 2008)
- ► Religion is protective against ETOH abuse (Michalak, Trocki, & Bond, 2007)
- Religiosity/Spirituality is protective against alcohol use among emerging adults from multiple racial/ethnic backgrounds (Mahoney, Pargament, Carels, Wachholtz, Edwards, et al.,2005)
- Religion/Spiritual variables positively impact health behaviors and alcohol use in 84% of studies (Rew & Wong, 2006)

### Childhood & Adult Influences

However, little is known about:

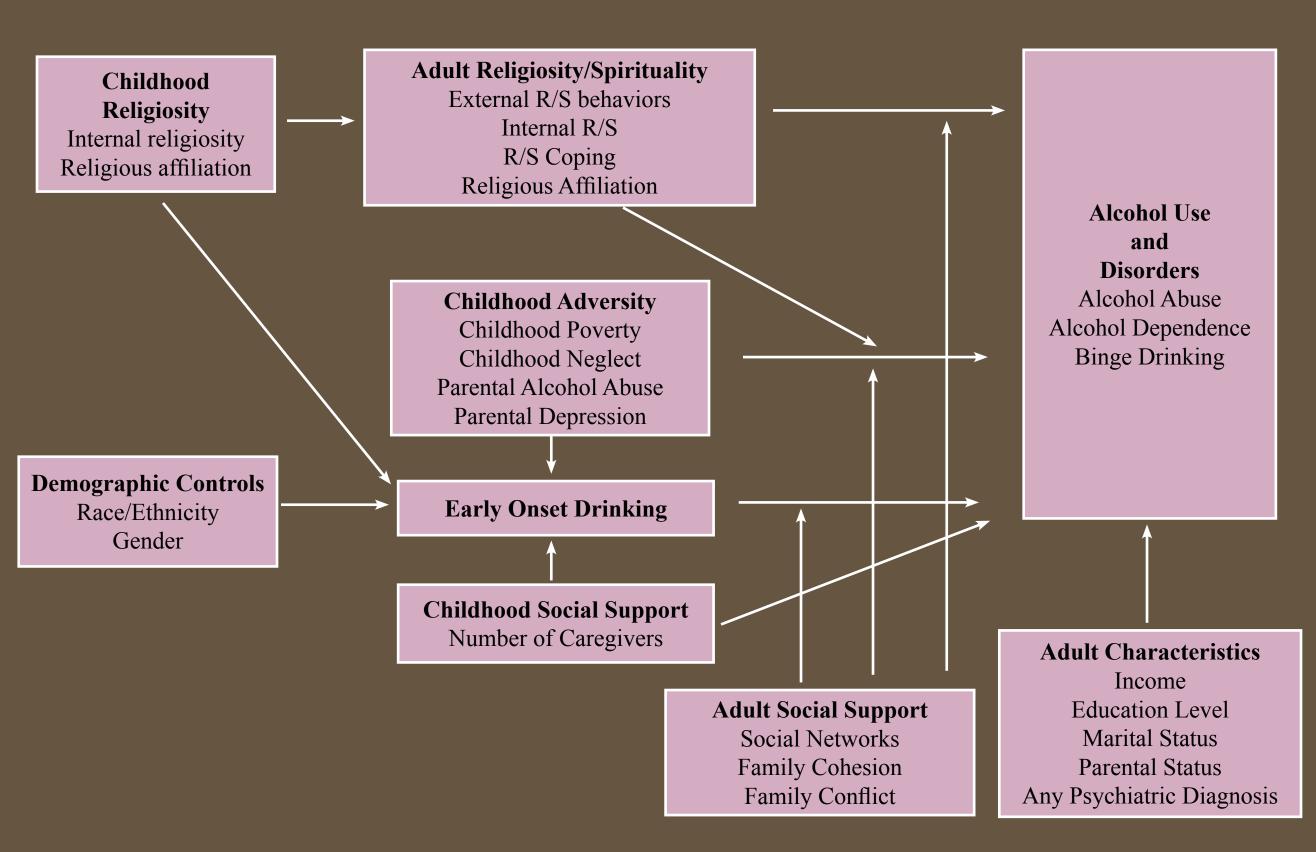
- the relationship among stressors, childhood and adult religious variables, and lifetime prevalence of alcohol abuse among diverse ethnic groups

- the link among childhood and adult religiousness 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 substance abuse will be risk factors for LAA

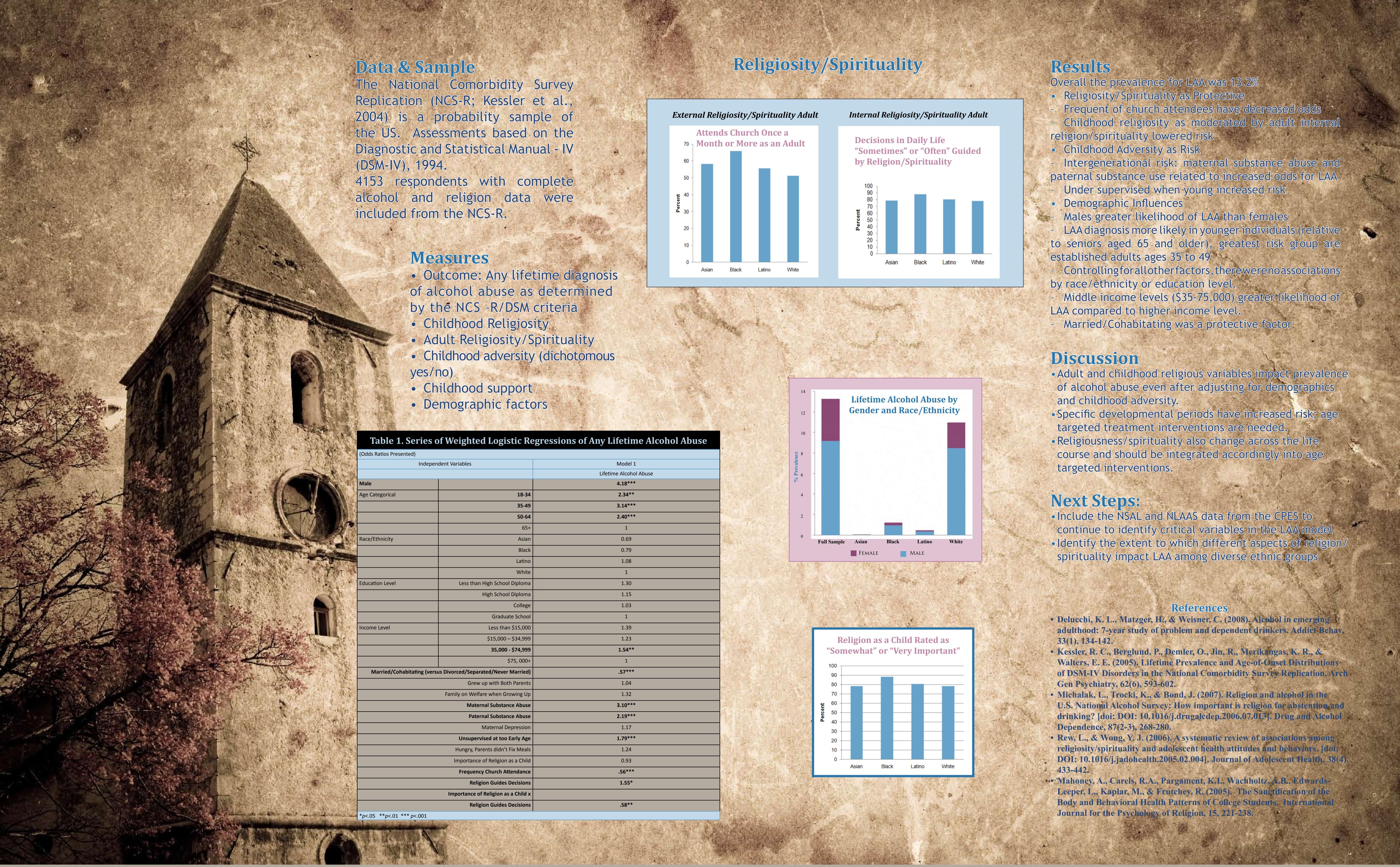


### Theoretical Model

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# Lifetime Alcohol Abuse Prevalence: Role of Childhood and Adult Religion

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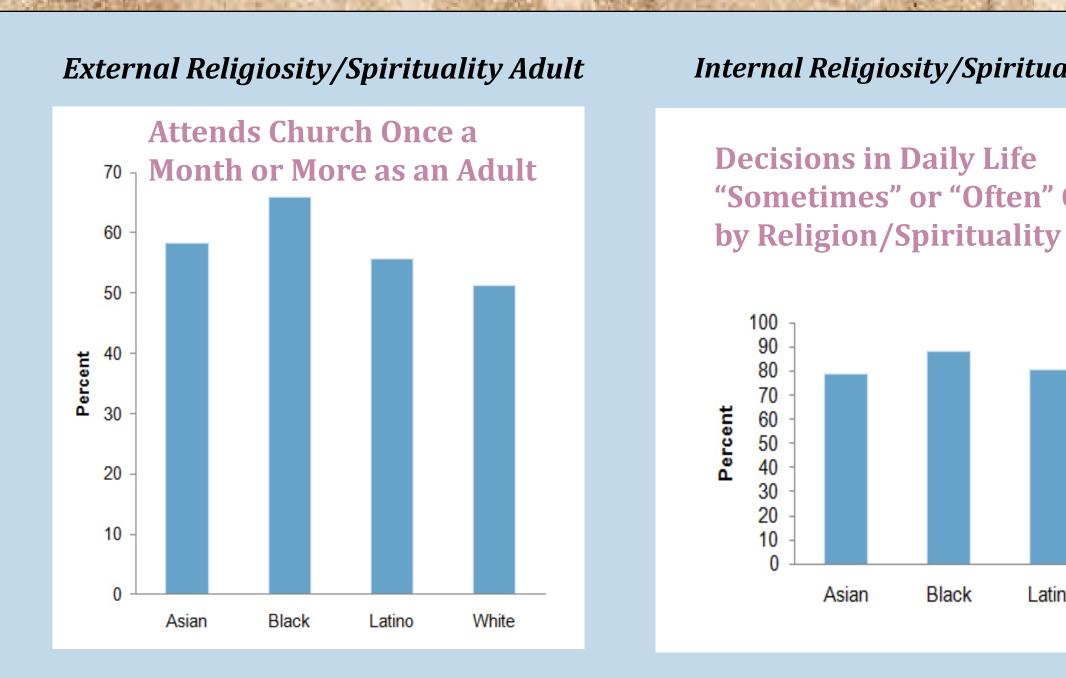
The National Comorbidity Survey Replication (NCS-R; Kessler et al., 2004) is a probability sample of the US. Assessments based on the Diagnostic and Statistical Manual - IV

4153 respondents with complete alcohol and religion data were

### Measures

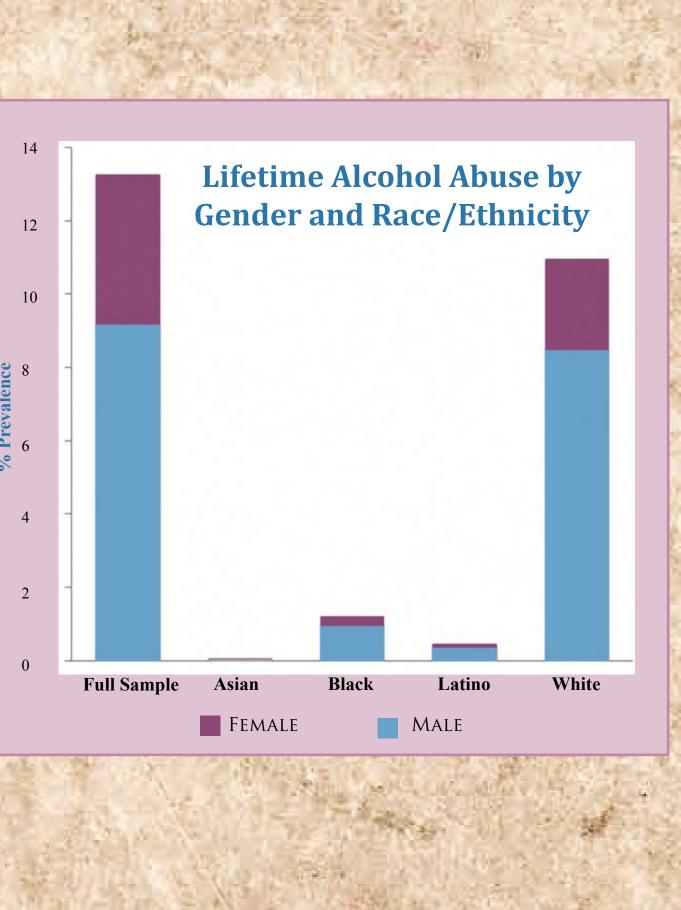
• Outcome: Any lifetime diagnosis of alcohol abuse as determined by the NCS -R/DSM criteria Childhood Religiosity Adult Religiosity/Spirituality • Childhood adversity (dichotomous Childhood support • Demographic factors

## **Religiosity/Spirituality**

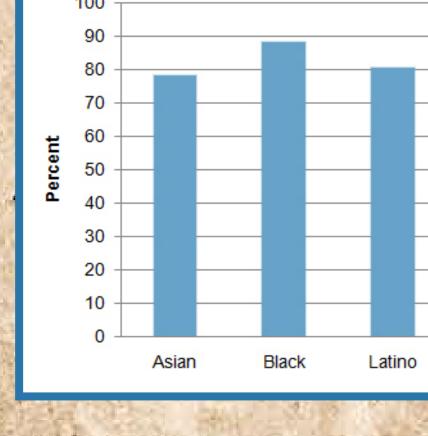


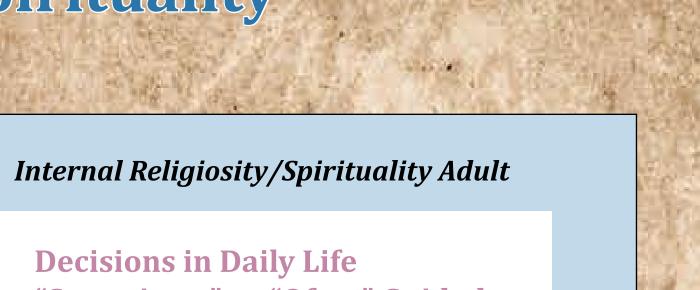
## Table 1. Series of Weighted Logistic Regressions of Any Lifetime Alcohol Abuse

endent Variables		Model 1
		Lifetime Alcohol Abuse
		4.18***
	18-34	2.34**
	35-49	3.14***
	50-64	2.40***
	65+	1
	Asian	0.69
	Black	0.79
	Latino	1.08
	White	1
Les	s than High School Diploma	1.30
	High School Diploma	1.15
	College	1.03
	Graduate School	1
	Less than \$15,000	1.39
	\$15,000 – \$34,999	1.23
	35,000 - \$74,999	1.54**
	\$75, 000+	1
rsus Divorced/Separated/Never Married)		.57***
Grew up with Both Parents		1.04
Family on Welfare when Growing Up		1.32
Maternal Substance Abuse		3.10***
Paternal Substance Abuse		2.19***
Maternal Depression		1.17
Unsupervised at too Early Age		1.79***
Hungry, Parents didn't Fix Meals		1.24
Importance of Religion as a Child		0.93
Frequency Church Attendance		.56***
Religion Guides Decisions		1.55*
Importance of Religion as a Child x		
Religion Guides Decisions		.58**

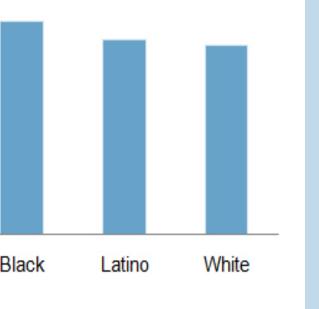


**Religion as a Child Rated as** "Somewhat" or "Very Important"

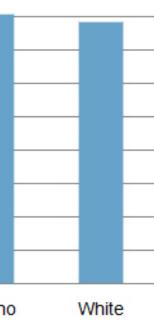




"Sometimes" or "Often" Guided







### Results

- Overall the prevalence for LAA was 13.2%
- Religiosity/Spirituality as
- Frequent of church attende
- Childhood religiosity as mod religion/spirituality lowered risk
- Childhood Adversity as Risk
- Intergenerational risk: maternal substar paternal substance use related to increased odds for LAA
- Under supervised when young increased risk
- Demographic Influences
- Males greater likelihood of LAA than females
- LAA diagnosis more likely in younger individuals (relative to seniors aged 65 and older), greatest risk group ar established adults ages 35 to 49
- **Controllingforallotherfactors, therewere no associations** by race/ethnicity or education level.
- Middle income levels (\$35-75,000) greater likelihood of LAA compared to higher income level.
- Married/Cohabitating was a protective fact

### Discussion

- Adult and childhood religious variables impact prevalence of alcohol abuse even after adjusting for demographic and childhood adversity.
- Specific developmental periods have increased risk; a targeted treatment interventions are needed.
- Religiousness/spirituality also change across the life course and should be integrated accordingly into age targeted interventions.

### **Next Steps:**

- Include the NSAL and NLAAS data from the CP continue to identify critical variables in the LAA n
- Identify the extent to which different aspects of reli spirituality impact LAA among diverse ethni

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