



Characteristics of abstainers from substance use and antisocial behavior in the United States[☆]

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ABSTRACT

Purpose: Whether lifetime abstainer's antisocial behavior is maladjusted or well-adjusted is unresolved. The aim of this study was to compare abstainers (defined as persons with no lifetime use of alcohol and other drugs and non-engagement in antisocial or delinquent behavior) with non-abstainers across a range of sociodemographic and mental health characteristics in the United States.

Methods: Data were derived from the National Epidemiologic Survey on Alcohol and Related Conditions, a nationally representative sample of U.S. adults. Structured psychiatric interviews (N = 43,093) using the Alcohol Use Disorder and Associated Disabilities Interview Schedule – DSM-IV version (AUDADIS-IV) were completed by trained lay interviewers between 2001 and 2002.

Results: The prevalence of abstaining was 11 percent. Abstainers were significantly more likely to be female, Asian and African-American, born outside the U.S., and less likely to be unemployed. Multivariate logistic regression analyses revealed that abstainers were significantly less likely to evidence lifetime mood, anxiety, or personality disorder compared to non-abstainers.

Conclusions: Findings indicate that abstainers are not maladapted and are comparatively more functional than non-abstainers.

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Introduction

Engaging in a delinquent act or using a substance such as alcohol over the life-course is thought to be normative. Studies indicate that during adolescence most youths will engage in some form of delinquency and substance experimentation (DeLisi, 2001; Elliott, Huizinga, & Menard, 1989; Moffitt, 1993). Abstainers are individuals who have not used any psychoactive substances or have not committed

any delinquent or antisocial act. It has been theorized that because abstaining behavior is abnormal in a statistical sense that abstainers are therefore suffering from some form of psychopathology. Abstainers are thought to lack interpersonal skills and are therefore loners, avoid close personal relationships, are emotionally and behaviorally bland and are perhaps sad and depressed due to their isolation. Furthermore, abstainers are purported to be overly conscientious, highly conservative, and moralistic. Many of these notions, while theoretically plausible, have been developed from a limited empirical foundation. In an important study, Shedler and Block (1990) did find that abstainers may have impaired psychological well-being and are generally anxious. In contrast, persons who engage in moderate substance use are thought to be expressive, sociable, and fit in well with others.

In a seminal work, Moffitt (1993) hypothesized that abstainers are inhibited from opportunities to learn and engage in antisocial behavior because they possess certain characteristics such as social anxiousness. Thus, Moffitt speculated that abstaining may be due to something intrinsic about the individual that results in social isolation and lack of encountering the standard opportunities, such as peer contagion, that

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lead to engagement in delinquency or drug use. This possibility was tested by [Piquero, Brezina, and Turner \(2005\)](#) using data from the National Longitudinal Survey of Youth. Findings from their study showed that 13 percent of adolescents were abstainers. Abstainers were more likely to be female, have fewer delinquent peers, more prosocial peers, date less, have greater teacher attachment, have higher parental monitoring, be less physically mature, have lower levels of depression, and be less autonomous. However, they did not find that abstainers were socially alienated. Abstention was predicted by high levels of teacher attachment, parental monitoring, and involvement with prosocial peers. Abstention was not predicted by sadness/depression or other mental health variables. Although there are relatively few studies devoted to examining delinquency abstention, a number of studies assessing alcohol and marijuana abstention have recently been published.

There have been several studies that have compared abstainers to experimental and heavy users of alcohol. Findings from these studies are mixed. [Walton and Roberts \(2004\)](#) examined relations between substance use and personality traits in two studies using the five factor model of personality as well as other personality inventories. The first study tested the relationship between personality and substance abuse with a comprehensive measure of the Big Five personality traits and perfectionism and impulsivity scales. Study 1 found that heavy users of alcohol and drugs were less conscientious than moderate users or abstainers. Abstainers scored higher on conscientiousness and lower on extraversion compared to the other groups but did not score higher on neurotic over-control or emotional stability. Study 1 relied solely on self-report data. For Study 2, observer ratings of participants' personalities were used. Findings indicated that heavy alcohol and drug users scored lower in agreeableness and conscientiousness. Abstainers scored the highest of the groups on conscientiousness and lowest on extraversion.

[Leifman and colleagues \(1995\)](#) compared Swedish, military eighteen to nineteen year old alcohol-abstainer males to alcohol consumers in terms of "sociability," which was defined in terms of social insecurity, number of close friends, quality of conversations with friends and school popularity. Swedish military men born 1969–1970 were broken into five groups, with 5.9 percent of the study being abstainers (2,691 persons) who drank 0 g alcohol/week, 25.3 percent being light consumers (11,563 persons) who drank 1–25 g alcohol/week, 53.2 percent being moderate consumers (24,329) who drank 26–100 g/week, 13.2 percent being frequent consumers (6,051) who drank 101–250 g/week, and 2.4 percent being high consumers (1,112) who drank >250 g/week. For sociability, abstainers were highest in the categories "often insecure in the company of others," "unpopular in school," and "no friends or one friend." [Skogen, Harvey, Henderson, Stordal, and Mykletun's \(2009\)](#) study of anxiety and depression among abstainers and low-level alcohol consumers used data from the Nord-Trøndelag Health Study (N=38,930) in two waves. Alcohol consumption was measured by self-report while anxiety and depression were measured using the Hospital Anxiety and Depression Rating Scale. Findings indicated that abstention was related to increased odds for case-level anxiety and depression.

In a study that assessed relations between alcohol abstention and cognitive performance, [Anstey and colleagues \(2005\)](#) identified several key findings. Cognitively, abstainers performed worse on all measures in all age groups. More women than men were abstainers and abstainers had lower education levels. In comparison to same-age drinkers, abstainers were less likely to smoke marijuana in last twelve months and had lower levels of extroversion and behavior activation system–fun-seeking. In a study designed to directly test [Shedler and Block's \(1990\)](#) classic assertion that abstainers are less psychologically healthy than experimenters, [Milich et al. and colleagues \(2000\)](#) classified study participants into three groups: those with marijuana use by age twenty; alcohol use during 10th grade; and alcohol use at age twenty. These groups were compared at age twenty in terms of personality characteristics, deviant behavior, and psychopathology. Findings indicated that abstainers were less psychologically impaired, and were

generally healthier. In a study examining psychological maladjustment among adolescents who were abstainers from marijuana use suggested that abstainers were healthier than experimenters and frequent users. [Tucker, Ellickson, Collins, and Klein \(2006\)](#) analyzed a longitudinal study composed of seventh graders recruited from middle schools in California and Oregon in 1985 and assessed again in 1990 (12th grade) and 1995 (age twenty three) with self-report surveys. Abstainers from marijuana fared better than experimenters and frequent users in school, family and peer relations, mental health, and behavior.

Study aims

In sum, some studies suggest that abstainers are more socially withdrawn and may suffer from anxiety and mood disorders whereas other studies suggest abstainers are quite psychologically healthy. However, extant studies of abstainers are limited in scope as exemplified by non-representative samples or lack of comprehensive mental health assessments. A clear gap in this body of work is the absence of an epidemiological study of true abstainers (i.e., substance use and externalizing behaviors) that takes into account a large swath of the life-course and is comprehensive in terms of sociodemographic and mental health assessment. The purpose of this study was to compare lifetime abstainers to non-abstainers across sociodemographic, mental health, and personality characteristics in a nationally representative sample of U.S. adults and estimate the strength of these comparisons in controlled multivariate analyses. The primary study aims are to 1) test the null hypothesis that abstainers are no more maladjusted than non-abstainers and 2) shed light on the socio-demographic characteristics of abstainers in order to advance the descriptive research database on abstainers.

Method

Participants

Study findings are based on data from the 2001–2002 National Epidemiologic Survey on Alcohol and Related Conditions (NESARC). NESARC is a nationally representative sample of 43,093 non-institutionalized U.S. residents aged 18 years and older ([Grant, Hasin, Stinson, Dawson, Chou, Ruan, & Pickering, 2004; Grant, Stinson, Hasin, Dawson, Chou, Ruan, & Pickering, 2004; Grant, Dawson, Stinson, Chou, Kay, & Pickering, 2003](#)). The survey gathered socio-demographic data and extensive information about substance use and co-morbid psychiatric disorders, including personality disorders, from individuals living in households and group settings such as shelters, college dormitories, and group homes in all fifty states and the District of Columbia. NESARC utilized a multistage cluster sampling design, oversampling young adults, Hispanics, and African-Americans in the interest of obtaining reliable statistical estimation in these subpopulations, and to ensure appropriate representation of racial/ethnic subgroups. The overall response rate was 81 percent. Data were weighted at the individual and household levels to adjust for oversampling and non-response on demographic variables (i.e., age, race/ethnicity, sex, region, and place of residence). Data were also adjusted to be representative (based on region, age, race, and ethnicity) of the U.S. adult population as assessed during the 2000 Census. Study participants provided fully informed consent. The U.S. Census Bureau and the U.S. Office of Management and Budget approved the research protocol and informed consent procedures.

Assessment

Data were collected through face-to-face structured psychiatric interviews conducted by U.S. Census workers trained by the National Institute on Alcohol Abuse and Alcoholism and U.S. Census Bureau. Interviewers administered the Alcohol Use Disorder and Associated

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