Alcohol Abuse, Why Not an Issue for African American College Students?

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Abstract

This article reviews some of the literature surrounding alcohol consumption in college environments and compares its prevalence between African American students and White students. African American college students do not seem to have the same college drinking issues as White students. This article will explore a few of the protective factors postulated to decrease the drinking behaviors of African American students, to include racial identity, parental influence, religiosity, and peer use. Implications for counselors as well as suggestions for intervention and strategies surrounding alcohol use and abuse are provided. Overall, more research needs to be conducted in this area to ascertain ways in which these protective factors can be heralded and possibly expanded to other cultures.

Alcohol use among college students, especially binge drinking, is a serious problem on college campuses (Carter-Edwards, Godette, White, & Tyson, 2009; Johnson & Cohen, 2004, Kapner, 2008; Laird, Shelton, & Jefferson, 2007) however, not an issue for all college students. Siebert, Wilke, Delva, Smith, and Howell (2003) noted that college drinking is “a pervasive culture with its own customs and beliefs handed down from generation to generation” (p.123); however, these customs and beliefs do not seem to impact the African American community in the same way as the White community (Carter-Edwards et al., 2009; Kapner, 2008; Laird et al., 2007). In a study conducted by Siebert et al. (2003) with African American and White college students between the ages of 18-26, African American students were found to abstain from alcohol consumption at much higher rates than White students. While not all African American students abstained, when compared to their drinking counterparts, they still had longer periods of non-drinking than White students (Siebert et al., 2003). While the researchers were interested in the differences in drinking behaviors and consequences for the African American students as compared to the White students, they also found that after the
consumption of alcohol, White students reported higher incidences of having unprotected sex, forgetfulness, regrettable behaviors, and physically self-injurious behaviors than the African American students (Siebert et al., 2003). Similarly, Stevens-Watkins and Rostosky (2010) also found African American young adults report lower instances of binge drinking and general alcohol use than their Hispanic or White counterparts.

Subsequently, alcohol use and alcohol abuse for adolescent African American students are also not as prevalent when compared to White students (Broman, 2007; Siebert et al., 2003; Stueve & O'Donnell, 2005). Taylor, Walker, Austin, Thoth, and Welch (2011) found African American adolescents to have the lowest lifetime prevalence of drinking heavily—or on an annual, monthly, or daily basis—and typically report the lowest frequencies of being drunk. At the same time, with respect to gender, alcohol use continues to be lower among African American adolescent girls when compared to White adolescent girls (Dauber, Hogue, Paulson, & Leiferman, 2009). Dauber et al. (2009) conducted a study on African American and White adolescents aged 13–19 based on data reported from the National Longitudinal Study of Adolescent Health. The researchers were interested in whether types of alcohol use differ between these populations. They found that African American girls abstained from alcohol use at a much higher percentage than White girls based on their reporting practices of alcohol consumption and its resultant consequences. African American girls did not demonstrate the typologies of “moderate” or “heavy drinkers,” defined as, respectively, higher frequencies of drinking with increased consequences, and drinking five or more drinks in a row (Dauber et al., 2009). Consequently, since alcohol use and alcohol abuse tend not to be as prevalent among African American students as compared to White students (Broman, 2007; Carter-Edwards et al., 2009; Kapner, 2008; Laird et al., 2007; Siebert et al., 2003; Stueve & O'Donnell, 2005) therein lies a need to determine the protective factors associated with these differences.

Unfortunately the research is sparse on the exact reasons why binge drinking and issues with alcohol use are not as prevalent for African American college students (Kapner, 2008; Laird et al., 2007). Yet researchers have postulated that enhanced racial identities, parental influences, religiosity, and peer usage could represent some of the protective factors associated with this resistance (Green, Doherty, Reisinger, Chilcoat, & Ensminger, 2010; Herman-Kinney & Kinney, 2013; Huang, DeJong, Schneider, & Towvim, 2011; Kapner, 2008; Laird et al., 2007; Miller-Day & Barnett, 2004; Pugh & Bry, 2007; Stevens-Watkins & Rostosky, 2010; Taylor et al., 2011; Tebes et al., 2011).

Protective Factors

Racial Identity

Ethnicity as defined by “patterns of behavior linked to an ethnic group” may be more salient for African Americans than Whites and therefore could prove to be a stronger deterrent for alcohol use and overall substance abuse (Miller-Day & Barnett, 2004, p. 210). Ethnic identity as a strong deterrent for the use of alcohol or other substances could make the cultural values of specific ethnic groups a vantage point from which to view differences in substance use behaviors (Carter-Edwards et al., 2009; Miller-Day & Barnett, 2004; Taylor et al., 2011). At the same time, African American youth who espouse a clear and positive ethnic identity may be better equipped to delay
and/or resist substance initiation than those who do not (Miller-Day & Barnett, 2004). Strong, positive ties to a particular racial identity have been shown to decrease the prevalence of substance abuse in African Americans (Carter-Edwards et al., 2009; Taylor et al., 2011). Pugh and Bry (2007) also found ethnic identity to be a protective factor against alcohol abuse for African American young adults. These researchers cite lower levels of drug use among African Americans who have a greater awareness of African American history, a sense of belonging to their ethnic group, and greater identification with African American friends (Pugh & Bry, 2007). At the same time, greater involvement with African American social networks and political awareness resulted in lower levels of the perceived alcohol usage of others and ultimately lower levels of alcohol use (Pugh & Bry, 2007).

Likewise, according to the study conducted by Miller-Day and Barnett (2009) African American youth emphasized pride in being unique and sited not using substances as a testimony to their uniqueness. For example, “I am different. I don’t try to act like nobody. I don’t try to be like nobody” (Miller-Day & Barnett, 2004, p. 217). In contrast, White adolescents were using drugs based on a desire to be similar to others (Miller-Day & Barnett, 2004). Equally, with regard to the ability to refuse offers to use substances, African Americans reported the necessity to represent oneself as being unique by demonstrating the ability to display a non-substance use identity (Miller-Day & Barnett, 2004).

**Parental Influence**

Positive parental relationships have been shown to impact the drinking behaviors of African American college students (Carter-Edwards et al., 2009; Tebes et al., 2011). Research has indicated that parents of African Americans tend to more closely monitor the activities and whereabouts of their adolescents over other ethnic/racial groups, therefore decreasing substance use amongst this population (Tebes et al., 2011). Parental knowledge as defined as knowing the whereabouts of your children, who their friends are, and the types of activities in which they engage, has been shown to be a protective factor for both boys and girls (Tebes et al., 2011). At the same time, while parental knowledge has been shown to impact substance abuse for all adolescents, the impact is greatest for early adolescents in grades 6–8 (Tebes et al., 2011).

Herman-Kinney and Kinney (2013) also found that parental influence decreased the desires of college students to partake in alcohol consumption. Specifically, 15% of their sample reported internalizing their parents’ wishes and beliefs surrounding drinking and drug use (Herman-Kinney & Kinney, 2013). Nasim, Belgrave, Corona, and Townsend (2009) also cite positive parent-adolescent relationships and strong family cohesiveness as factors associated with lower levels of drug use and intolerant attitudes. African American adolescents reporting more caring and affectionate relationships with their mothers were more likely to express confidence in their ability to refuse alcohol pressures as compared to those who reported poor relationship quality (Nasim et al., 2009).

**Religiosity**

Religion and spirituality have been cited as two of the main reasons for decreased alcohol consumption among African American college students (Carter-Edwards et al.,
2009; Kapner, 2008). Specifically, lifestyle choices shaped by personal values and religious beliefs denigrating the image of being a drinker, losing control, or acting inappropriately, contribute significantly to the decrease in drinking behaviors (Huang et al., 2011; Kapner, 2008). Herman-Kinney and Kinney (2013) found that students actively involved in religious groups tended to abstain from alcohol consumption. Johnson and Cohen (2004) postulated that negative attitudes towards alcohol based on little to no experience with drinking could be a result of religious beliefs. Similarly, Green et al. (2010) found that young adults who attended religious services less frequently were more likely to develop a drug use disorder as compared to those who attended services weekly. These researchers speculated that decreased church attendance may impact one’s social control by removing the constraints associated with obligation and expectations of their church community, causing drug use to potentially escalate to a problematic state (Green et al., 2010).

Peer Use
Social norms and expectations have also been shown to impact the drinking patterns of college students (Carter-Edwards et al., 2009; Harper, Harris, & Mmeje, 2005; Laird et al., 2007; Miller-Day & Barnett, 2004). For example, men in college tend to feel a need to engage in behaviors that are presumed desirable by their same sex peers (Harper et al., 2005). Consequently, the fact that African American college students do not engage in the same level or intensity of drinking behaviors as White college students could be representative of a social norm and expectation of alcohol moderation. This inadvertent social norm and expectation could represent yet another protective factor for this group. Huang et al. (2011) found that while peer disapproval was not a significant indicator for alcohol abstinence, the homogeneity of the peer group was a strong covariate for alcohol use. Likewise, masculinity in popular culture has been marked by alcohol use among college males, along with the need to have these masculinities approved and validated by their male peers (Harper et al., 2005). However, Stevens-Watkins and Rostosky (2010) found male gender role development for African American males and their expression of masculinity to differ significantly from that of White males. Subsequently, African American male college students may not feel that the use and abuse of alcohol appropriately represents their masculinity. Likewise, as was found by Huang et al. (2011) in their research on alcohol abstainers, African American college students might not feel alcohol is necessary to have fun.

Implications for Counselors
Drinking patterns among college students have been shown to vary based on student demographics and various characteristics of the college environment (Carter-Edwards et al., 2009; Kapner, 2008; Laird et al., 2007). Research has shown schools with higher enrollments of minority students exhibit lower overall percentages of students who drink (Carter-Edwards et al., 2009; Kapner, 2008; Laird et al., 2007) thereby illuminating the need for more diversity on college campuses. Similarly, students at Historically Black Colleges and Universities (HBCU), to include both African American and White, drink considerably less than their counterparts at predominately White institutions (Carter-Edwards et al., 2009; Kapner, 2008). HBCUs tend to emphasize a strong moral character
and religious expression (Kapner, 2008). These values and standards, along with the nurturing environment that is generally paramount to the HBCU may contribute to the decreasing or even elimination of alcohol use on their college campuses (Carter-Edwards et al., 2009; Kapner, 2008; Laird et al., 2007). Likewise, the physical locale and standards of many HBCUs limit student’s access to alcohol, adding to the low rate of alcohol consumption of both the African American and White students attending these colleges and universities (Carter-Edwards et al., 2009; Kapner, 2008). While some of these values and standards may not be replicable at other institutions, counselors and faculty could be encouraged to foster more mentoring relationships with students, and strengthening community involvement and ties to faith-based organizations (Kapner, 2008).

Likewise, drinking behaviors tend to be linked to the perceived drinking behaviors of peers (Carter-Edwards et al., 2009; Harper et al., 2005; Laird et al., 2007; Miller-Day & Barnett, 2004). Miller-Day and Barnett (2004) found that all of the youth in their study perceived their ethnic group as doing more drugs than any other ethnic group. Harper et al. (2005) referred to this phenomenon as “false consensus,” where a person incorrectly assumes that others think and behave just as oneself, thereby normalizing the unhealthy behaviors. Intervention programs designed for college students might be more effective if they include the actual drinking patterns of their college students. Stevens-Watkins and Rostosky (2010) found that binge drinking for African American males in high school was significantly reduced if the close friends of those males were perceived to be non-drinkers. At the same time, programs and interventions that also include reasons why college students abstain or limit their consumption of alcohol might also be equally beneficial (Huang et al., 2011; Kapner, 2008; Laird et al., 2007). Huang et al. (2011) found that reasons associated with alcohol being nonessential were among the highest cited for why some college students abstained from alcohol use.

Lastly, while alcohol use and abuse may not be as prevalent for African American college students, drinking at an early age interferes with both social and cognitive functioning required for overall and long term health (Jackson, 2010; Stueve & O’Donnell, 2005). Early drinking for African Americans contributes to an earlier onset of alcohol-related problems, decreased school performance, suicidality, and violence (Jackson, 2005; Stevens-Watkins & Rostosky, 2010; Stueve & O’Donnell, 2005). Due to the impact of early initiation drinking, alcohol use and abuse interventions and education should begin as soon as possible. For adolescents who may have already begun drinking alcohol, progression to heavy drinking can be slowed by an awareness of the risk factors leading to more extensive drinking (Jackson, 2010). For example, Jackson (2010) highlighted the fact that once drinking has begun, adolescent females and African Americans tended to demonstrate a faster progression to heavy drinking and alcohol-related problems. These risk factors indicate a need to target these students specifically, and as early as 10 years old (Jackson, 2010). Researchers also suggest that interventions aimed at decreasing alcohol use and abuse should begin synonymously with the onset of sexual education for females, begin earlier than the seventh grade, and highlight the risks associated with drinking and sexual experimentation at early ages (Jackson, 2010; Stueve & O’Donnell, 2005). Nasim et al. (2009) further suggested that prevention programs for African American youth should begin in middle childhood and preadolescence, include a focus on preventing and delaying both tobacco and alcohol initiation, and focus on the ability and process of refusing drugs and alcohol.
Conclusion

In short, college drinking is not a huge problem for the African American college student. This could explain why research in this area continues to be scarce. Yet, there is definitely something to be gained from the protective factors of this population that may be adapted for other demographics. This article has highlighted a few of those factors such as racial identity, parental influence, religiosity, and peer use. However, there continues to be some discrepancies as to the extent of protection these factors actually provide (Taylor et al., 2011). This article has also highlighted some suggestions for intervention and strategies surrounding alcohol use and abuse considering the aforementioned protective factors. While some strategies may not be feasible for all institutions to adapt, the relative success of these factors on the African American college student is worth noting and warranting of further research.

References


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