

Multilevel analysis between alcohol use trajectories: parent, peer, school, and neighborhood factors among Asian American adolescents

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Background and Significance



Asian American population has been **increasing** among American ethnic groups in the last few decades



In spite of their growing significance, health problems in the Asian American population remain **under-researched** (Ghosh, 2003; Price et al. 2002).



Specifically, research on alcohol use behavior using **longitudinal data is rare** among Asian Americans

Background and Significance



Risk factors of adolescent alcohol use



Parental alcohol use and parent-adolescent relationships (Simons-Morton et al., 2001)



Peer alcohol use also is a strong risk factor for alcohol use in late adolescence

Background and Significance



School factors: low academic achievement, lower level of school bonding, and school absence (Kaplan et al., 2003)



Neighborhood factors: economic deprivation, decreased social cohesion, and low collective efficacy (Brown, Phillips, & Jalongo, 2004)

Background and Significance

Community-Level Variables and Alcohol Use

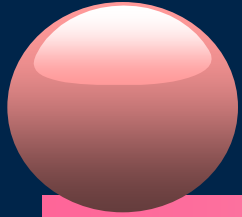


Regarding **types of schools**, private school adolescents were 30% more likely to drink alcohol than those in public school



Regarding **location**, Adolescent substance use in **rural or small towns** was higher than that in urban areas

Purpose



To examine the influence of parental, peer, school, and neighborhood factors at the **individual-level**, and contextual factors at **community-level** (school & neighborhood) on **alcohol use trajectories** among Asian American adolescents from grades 7 to 12

Conceptual Framework

Individual Levels

Socio-demographic factors

Parental factors

Peer factors

School factors

Neighborhood factors



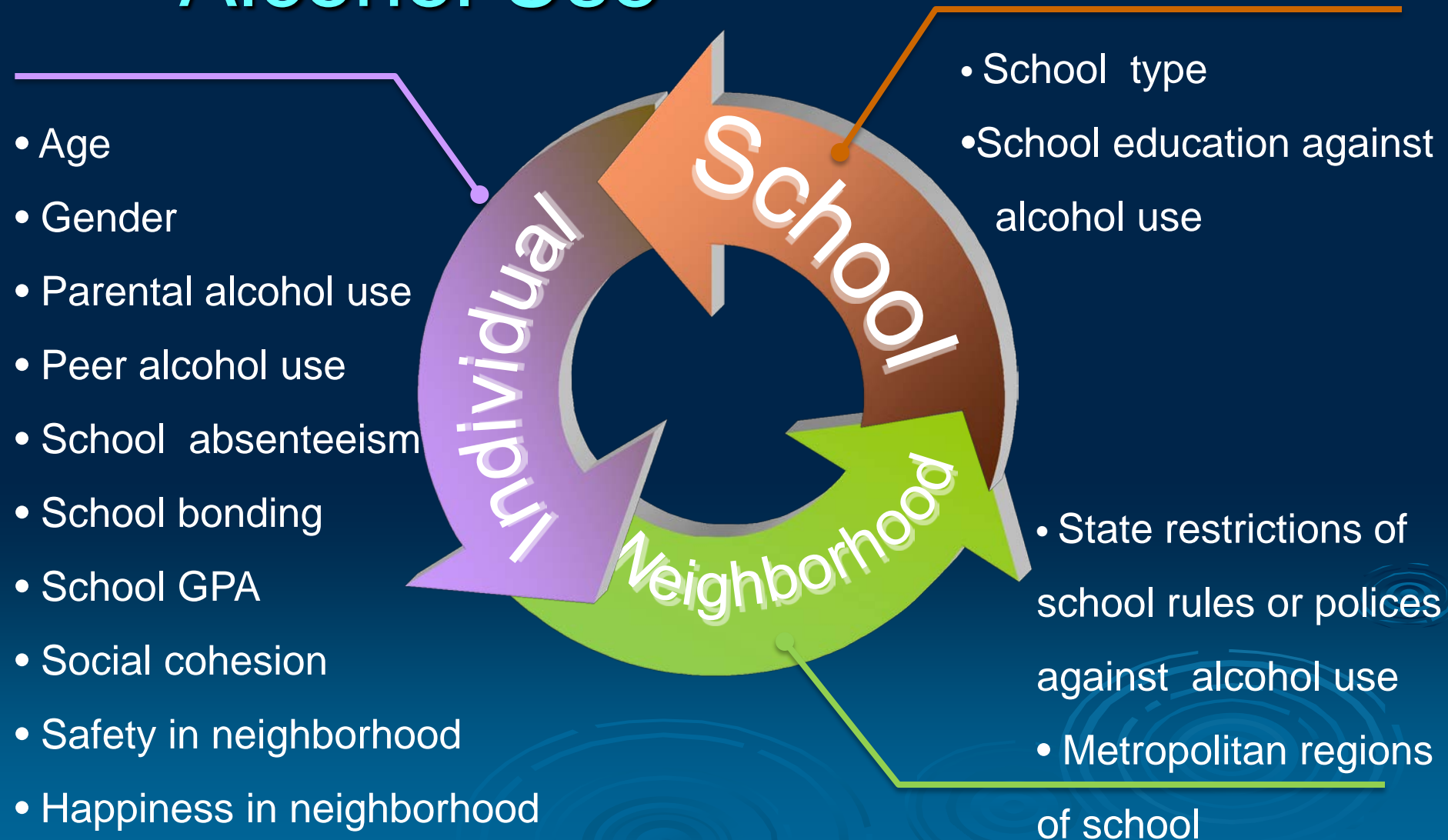
Community Levels

School factors

Neighborhood factors

Alcohol Use
(frequency * quantity)

Three Level Determinants of Alcohol Use



Research Questions



Are adolescent alcohol use behaviors associated with **individual level** determinants of alcohol use (**parental and peer alcohol use**) among Asian American adolescents?



Are adolescent alcohol use behaviors associated with **individual level** determinants of alcohol use (**parental-adolescent relationships and peer-adolescent relationships**) among Asian American adolescents?



Are adolescent alcohol use behaviors associated with **school factors at individual-level** (**school absenteeism, school bonding, GPA**) among Asian American adolescents?

Research Questions



Are adolescent alcohol use behaviors associated with **neighborhood factors at individual-level** (social cohesion, safety in neighborhood, happiness in neighborhood) among Asian American adolescents?



Are adolescent alcohol use behaviors associated with **school-level** determinants of alcohol use (school type and school education programs)?



Are adolescent alcohol use behaviors associated with **neighborhood-level** determinants of alcohol use (State policies of school rules against alcohol use, school location)?

Methodology

1
Sample

National Longitudinal Study of Health
(Add Health data)

2
Design

Participants: **Asian American adolescents**

Wave I : 1582 respondents

Wave II: 1088 respondents

3
Age

- mean age of sample: 16.01 years in Wave I
16.58 in Wave II

- Wave I: males-824 (52.08%) ,
females- 758 (47.92%)

- Wave II: males-556 (51%)
females-533 (49%) (unweighted number)

Data analysis

1

National Longitudinal Study of Health
(Add Health data) for the **secondary data**
analyses: Wave I & Wave II data

2

Data were collected from the United States with a
stratified cluster sampling design
In order to reflect the clustering and stratification,
sampling weights were used

3

Survey analysis procedures in the **SAS and Stata**
were used to handle the **sampling weights** and the
complex sample design

Data analysis

4

To deal with item non-response and attrition in a longitudinal study, the **multiple imputation** method using **IVEware** was used (Raghunathan, Lepkowski, VanHoewyk, & Solenerger, 2001)

5

For an inferential statistical analysis, **Hierarchical Linear Model program (HLM: three level)** was used to estimate growth trajectories for each individual

6

Multilevel analysis and three -level Linear Hierarchical multiple regression analysis employed by HLM: to define the determinants of alcohol use over time

Methods: Measures Individual-level variables



Alcohol use : frequency and quantity of alcohol use



Parental factors

Parent alcohol use for fathers and mothers was measured by one item obtained from each parent: “How often do you drink alcohol?”



Adolescent–parent relationships:

Cronbach’s *alpha*:adolescent-mother relationship :
: 0.85 in Wave I, and 0.84 in Wave II

Cronbach’ *alpha*:adolescent-father relationship
: 0.88 in Wave I, and 0.86 in Wave II

Methods: Measures **Individual-level variables**



Peer Factors: Peer alcohol-assessed by a single item: “Of your 3 best friends, how many drink alcohol at least once a month?” Responses ranged from “no friends” (0) to “three friends” (3). The higher scores indicated that adolescents having more friends who drink alcohol



Peer-adolescent relationships-measured by a single item: “How much do you feel that your friends care about you?” Responses ranged from “not at all” (0) to “very much” (5). A higher score represented a closer relationship with friends.

Methods: Measures Individual-level variables



School factors: School absenteeism

without excuse measured by one item (Higher scores → frequent school absenteeism)



School bonding scale included 6 items
(Higher scores → greater school bonding)

Cronbach's alpha: 0.71 in Wave I, 0.72 in Wave II



Academic achievement: English or language arts, mathematics, history or social studies, science
(Higher scores → a better grade point average)
Cronbach's alpha: 0.79 in Wave I, 0.76 in Wave II.

Methods: Measures **Individual-level variables**

Neighborhood factors



Neighborhood social cohesion: 3 items
(higher scores → higher levels of social cohesion)
Cronbach's alpha: 0.62 in Wave I, 0.63 in Wave II



Adolescents' perceptions of safety in their neighborhood: a single item



Adolescents' perceptions of their own personal happiness with living in their neighborhood: a single item

Methods: Measures **community-level variables**



Community-Level Variables: all adolescents in the same school → same values Variables from Wave I data



Types of schools: private, catholic & public schools
Metropolitan location of schools: urban, suburban and rural (urban - a reference group)



School health policies and programs
(School Health Policies and Programs Study, 1995)
: schools' educational programs on alcohol
state policy on alcohol use

Methods: Measures



Background variables: age, gender and SES

Age: measured by the interview completion date, and a participant's date of birth at Wave I.
(age = int ((interview date-birth date)/365.25))



Gender: coded as males=1 and females=2

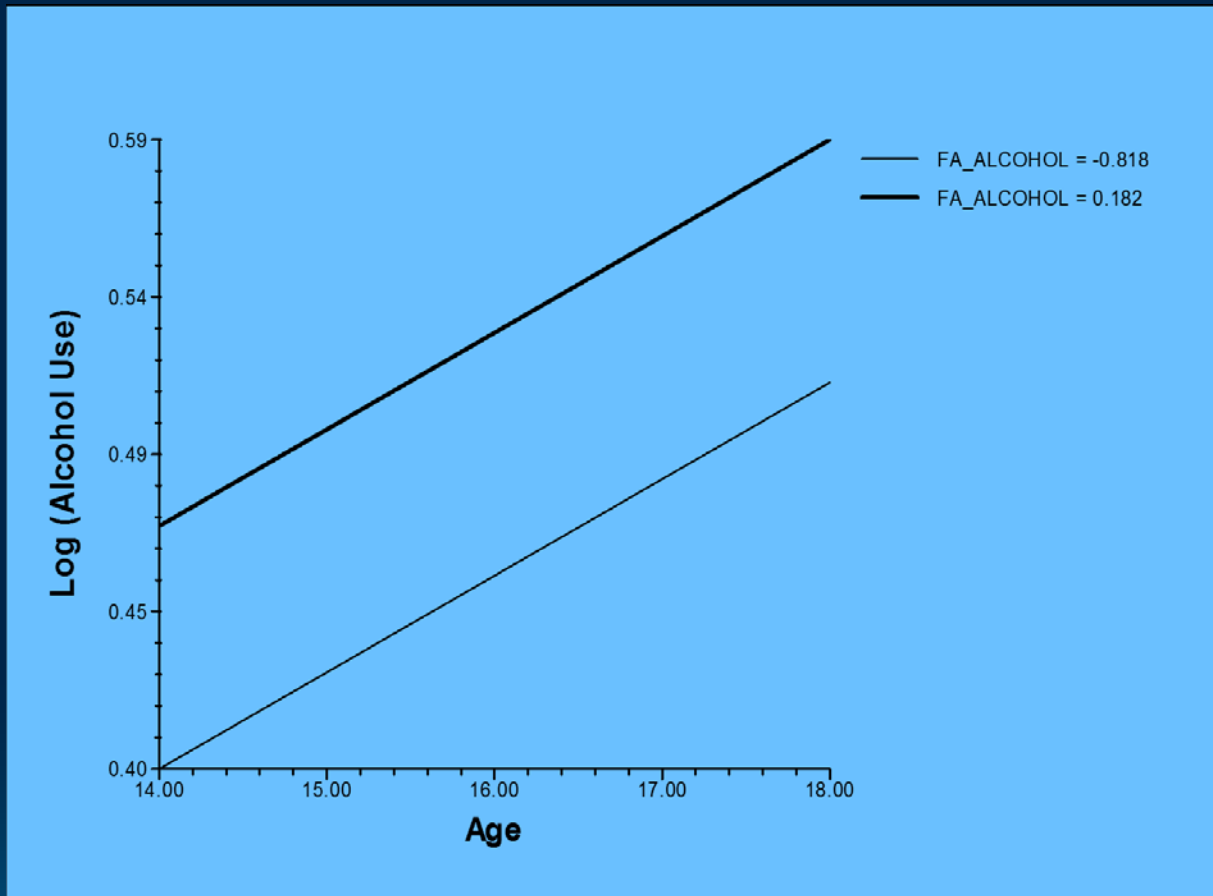


Socioeconomic status: measured by parental education. Whoever had the highest level of education, the father or mother, was chosen for parental education level (Hussong & Hicks, 2003)

Results: father's alcohol use

- Adolescents having **fathers who drank alcohol** frequently drank **7.5 % more** on average than their counterparts whose fathers did not drink alcohol, controlling for other variables ($p < 0.01$)
- Adolescents having **mothers who drank alcohol** drank **5.6% more** than their counterparts whose mothers did not drink alcohol on average, controlling for other variables

Alcohol use over time by father's alcohol use



➤ **Figure 4.2. Alcohol use (quantity and frequency) over time by father's alcohol use**

* FA_ALCOHOL: father's alcohol use (25th and 75th percentiles were used)

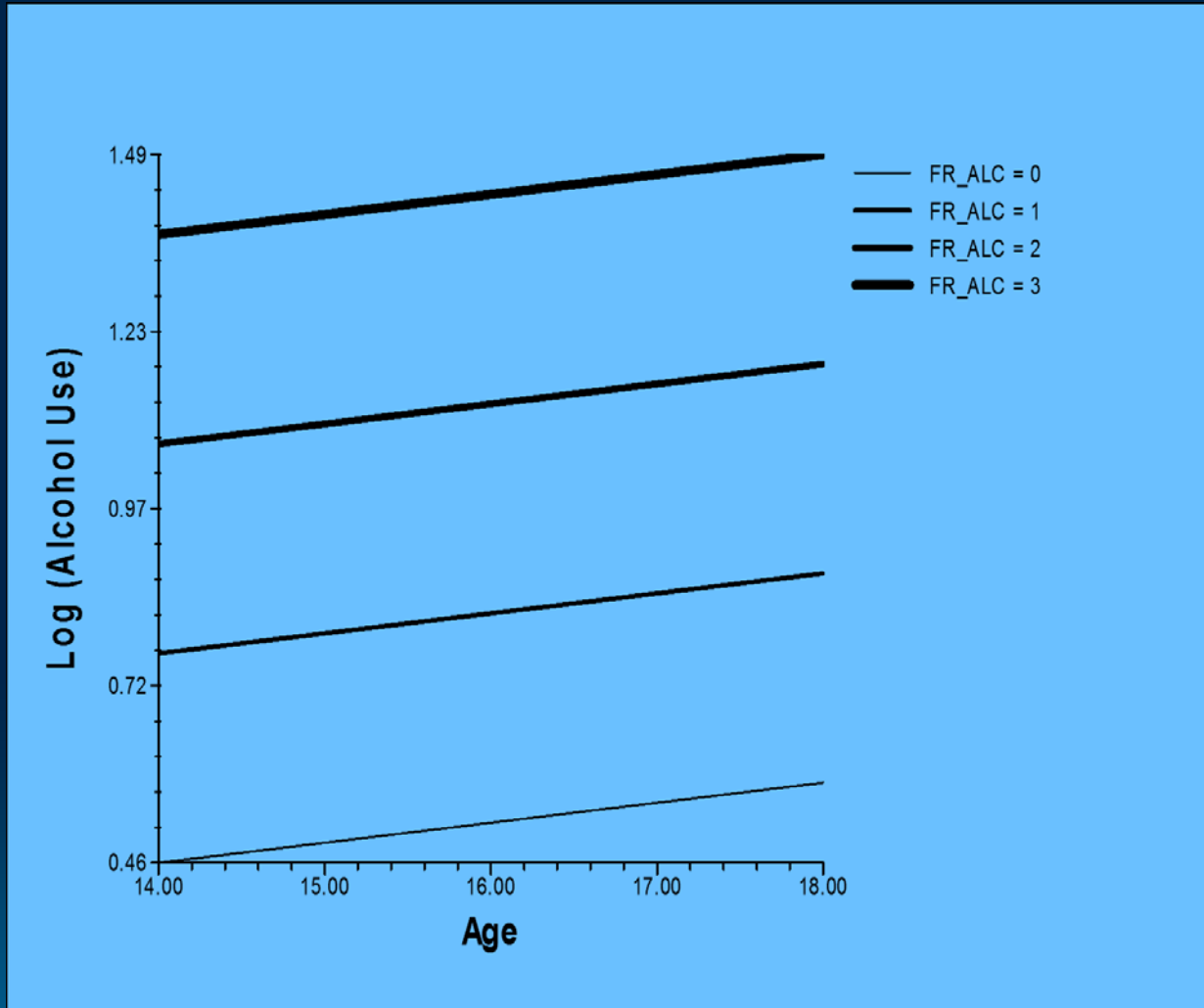
➤ FA_ALCOHOL = -0.818: 25th percentile value

➤ FA_ALCOHOL = 0.182: 75th percentile value

Results: Peer alcohol use

- Peer alcohol use was strongly significantly associated with adolescent alcohol use. An **increment in the number of best friends who drank alcohol** at least once a month increased the expected alcohol use of adolescents by **35.5 %** ($p < 0.001$), controlling for other variables

Alcohol use over time by peer alcohol use



- **Figure 4.3. Alcohol use (quantity and frequency) over time by peer alcohol use**
- *FR_ALC: a number of peer who drinks alcohol use

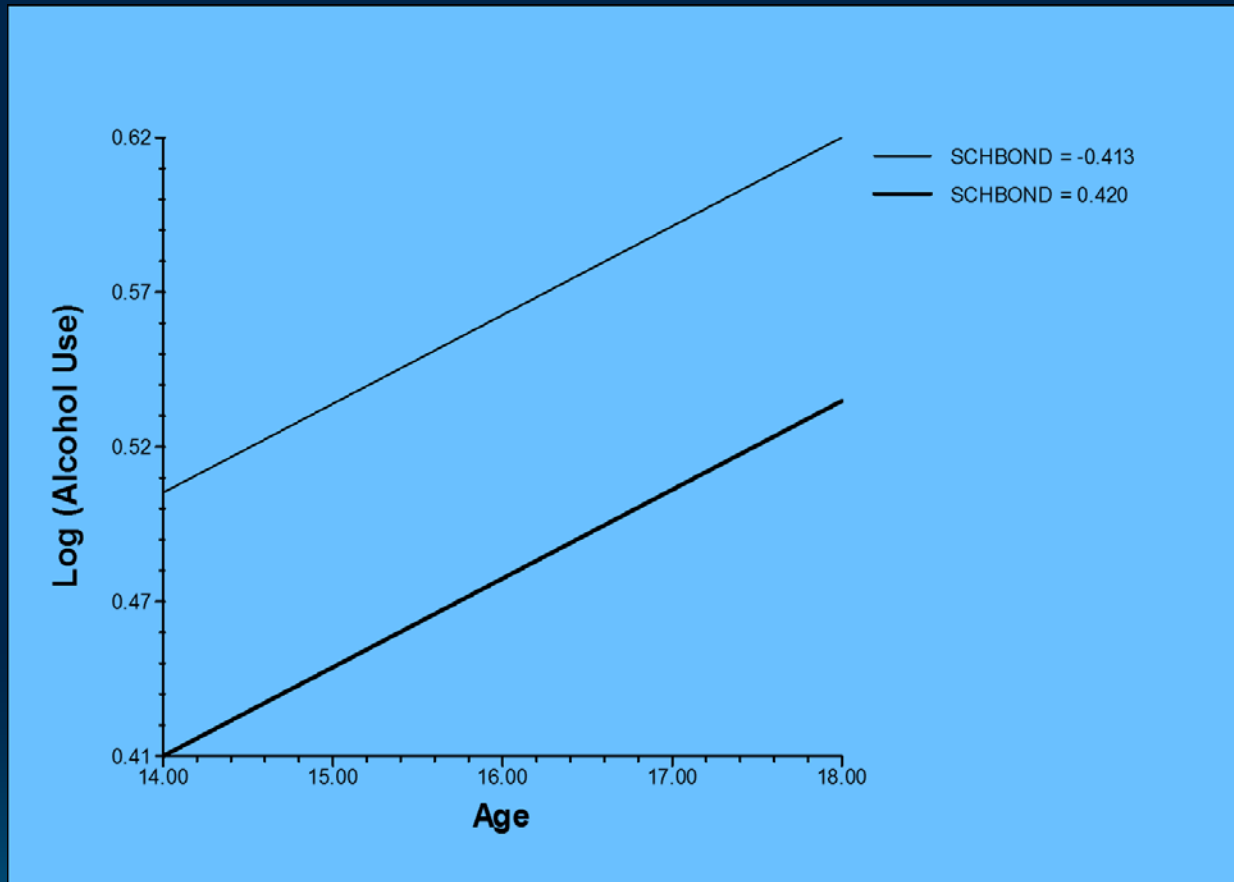
Results: adolescent-parent relationship

- A one-unit increase in the **adolescent-father relationship** measure decreased the expected alcohol use of adolescents by 7 % ($p < 0.1$), controlling for other covariates
- **Adolescent-mother relationship** and the **friends' caring** :not significant associations with adolescent alcohol use

Results: Individual Level

- **School factors:** a one day increment in the number of **school absent days** increases the expected alcohol use by 1.3% ($p < 0.001$)
- A unit increase in **school bonding** decreases alcohol use on average by 11.6% ($p < 0.01$)
-
- A one-unit increase in **GPA** decreases alcohol use by 8.0 % ($p < 0.05$) on average, controlling other covariates
- **Perceived neighborhood factors:** social cohesion, perceived safety in the neighborhood and happiness living in the neighborhood: **not significant** with alcohol use

Alcohol use over time by school bonding



- Figure 4.4. Alcohol use (quantity and frequency) over time by school bonding
- * SCHBOND: school bonding (25th and 75th percentiles were used)
- SCHBOND= -0.413: 25th percentile value
- SCHBOND= 0.420: 75th percentile value

Results

➤ Community-Level variables

- At the school level, students attending **catholic schools** drank **1.17 times** ($p < 0.1$) as much as their counterparts attending a public school (reference group), controlling for other covariates.
- **Regions** such as urban, suburban and rural: **not significant**
- **School required alcohol prevention education and State recommendation that schools or school districts include rules against alcohol and drug: not significant**

Conclusion

- The results can contribute to a **better understanding** of alcohol use behavior among **Asian American adolescents**
-
- Since **longitudinal studies of alcohol use** in Asian American adolescents are limited in number, the results provide important information on predictors of alcohol use in this population.

Discussions & Implication

● Longitudinal studies of alcohol use in Asian American adolescents are limited in number : provide important information on predictors of alcohol use

● Identification of growth curve trajectories of alcohol use: provide better understanding on predictors of alcohol use

● These findings suggest that **cultural** factors and alcohol use determinants must be considered when designing interventions and education against alcohol use for Asian American adolescents

Discussions & Implications

- The strongest aspect of this study is the framework using **multilevel analyses**, which includes both individual-level and community-level variables

- The findings of the multilevel analysis using **longitudinal data** can be helpful for developing **comprehensive prevention programs** against alcohol use: benefit to school nurses & those who work in adolescent health

- Predictors of alcohol use based on **developmental stages** provides **important information** for the development of prevention and education programs for Asian American adolescents

Limitations

Secondary data analyses: variable selection was **restricted**

Not examine alcohol use in **subgroups** of Asian American adolescents: each subgroup may have different cultural backgrounds

Future Implications

- Future studies: should explore **heavy drinking and binge drinking** using longitudinal data

- Focused on **subpopulations** of Asian American adolescents

Future Implications

Variable centered approach but research on **patterns of trajectories** needs to be carried out for further understanding of alcohol use as having different antecedent factors : **Multiple trajectories** offer a method to define risk factors

Paucity of longitudinal studies of Asian American adolescents: **more research using longitudinal data** needs to promote health and to reduce risky behaviors

Thank you!

