



## Alcohol and tobacco use and desistance among Asian Americans: A study overview

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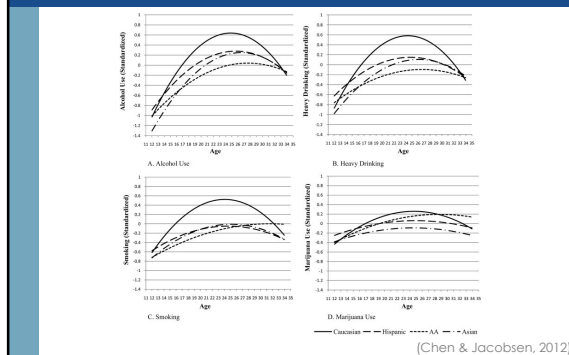
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## ALCOHOL AND TOBACCO USE IN ASIAN AMERICANS

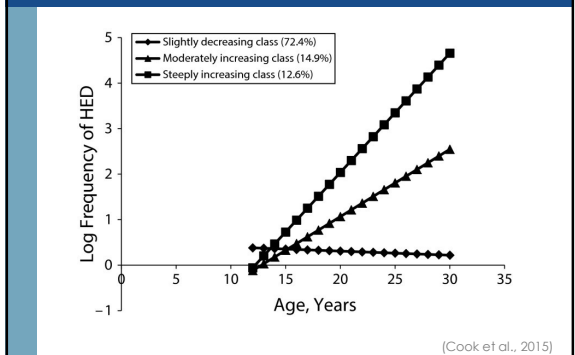
- ▶ Asian Americans (AAs) have greater risk for certain alcohol- and tobacco-attributable health conditions and mortality
- ▶ Alcohol and tobacco (A&T) use among AAs vs non-Hispanic Whites (NHWs) over time
  - Greater increases in high-risk drinking (up 57% vs 23%; NESARC II & III)
  - Slower declines in smoking (down 26% vs 29%; CDC 2006, 2018)



## DEVELOPMENTAL TRAJECTORIES OF SUBSTANCE USE BY RACE IN US ADOLESCENTS, 1994-2008



## TRAJECTORY CLASSES OF HEAVY ALCOHOL USE IN US ASIAN ADOLESCENTS, 1994-2008



## NEED FOR LONGITUDINAL STUDIES

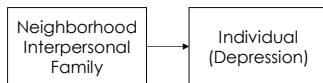
- ▶ The timing of heavy A&T use/co-use for AAs differs from that of non-Asians
- ▶ Substance use initiation during adolescence vs young adulthood
  - College as a time for heavy use: 92% AAs matriculated into college (US Census, 2018)
  - Up to 25% of AA college students initiated smoking, and up to 98% of smokers also drank alcohol (Myers et al., 2009; Reed et al., 2007; McKee et al., 2004)

## CRITICAL PERIODS: RISK & RESILIENCY

- ▶ Going beyond traditional predictors of substance use in non-White populations (e.g., acculturation)
- ▶ Risk and resiliency factors relevant to the AA experience across time (i.e. a *social development perspective*) (Catalano & Hawkins, 1996)
  - **Neighborhood**, e.g., ethnic density
  - **Interpersonal**, e.g., racial discrimination
  - **Family**, i.e. parent bonds and expectations
  - **Individual**, i.e. depression

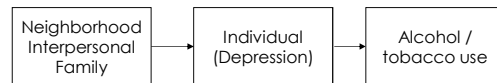
## DEPRESSION AMONG ASIAN AMERICANS

- ▶ AA young adults reported greater depressive symptoms than NHWs (Rawana & Morgan, 2014)
- ▶ Known sociocultural elements heighten risk for depression (Kane et al., 2018; Wang, Kviz, & Miller, 2012; Chae et al., 2008)



## DEPRESSION AS AN EXPLANATORY PATHWAY FOR HEAVY A&T USE

- ▶ Mental health and alcohol/tobacco use
  - Distress had the largest effect on heavy drinking for AAs relative to other groups (Woo et al., 2017)
  - Smoking cessation associated with reduced depression (Taylor et al., 2014)



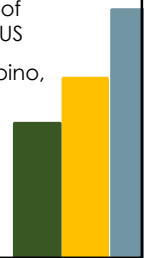
## AIMS

- ▶ **Describe longitudinal patterns** of heavy A&T use/co-use for Asian Americans
- ▶ **Identify risk and resiliency factors** at the individual, family, and neighborhood levels associated with heavy A&T use over time
- ▶ **Assess an internalizing pathway** between risks through depression on heavy A&T use and examine buffering effects from resiliency factors

## DATA

### National Longitudinal Survey of Adolescent to Adult Health (Add Health)

- ▶ 5 Waves (1994, 1996, 2001-02, 2008-09, 2016-18)
  - Nationally-representative sample of adolescents in grades 7-12 in the US
- ▶ **Asian subgroups** include Chinese, Filipino, Korean, Japanese, South Asian
- ▶ **Outcomes:** PY drinking volume and heavy drinking frequency; Current smoking volume; A&T co-use



## EXPLORATORY ANALYSES

- ▶ Compare patterns of and mechanisms leading to heavy A&T use
- ▶ Subgroup disparities
  - Nativity status
  - Ethnicity
  - Gender
- ▶ Across racial categories



▶ LESSONS LEARNED

## DISTINCTIVENESS OF THE AA EXPERIENCE

"**Utilization of only Asian American data** reduces the ability to determine whether any of the expected associations are unique to Asian Americans or whether use/co-use is more strongly related to specific factors compared to other races."

## IDENTIFIED STRENGTHS

"There exists limited research on AA alcohol and tobacco co-use, **no longitudinal studies** of Asian American alcohol and tobacco co-use, and no longitudinal studies of AA alcohol past emerging adulthood."

"It appears...potentially the first study to explore risk and resilience at multiple ecological levels **beyond studies of acculturation** on AA alcohol and tobacco use/co-use."

## IDENTIFIED STRENGTHS

"...the study's potential capacity to **identify specific ages** from adolescence into adulthood when Asian Americans are at highest risk for alcohol and tobacco use as well as modifiable factors across multiple levels of influence that can inform intervention development."

"Exploring **differences across AA subgroups** would be a unique contribution."

"Overall, the investigators were very **responsive** to reviewer comments."

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THANK YOU!  
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