

Do Normative Perceptions of Drinking Relate to Alcohol Use in U.S. Military Veterans Presenting to Primary Care?

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RESEARCH HIGHLIGHTS:

- About 25% of veterans screen positive for alcohol misuse during primary care sessions. Alcohol misuse is associated with a number of negative consequences, including higher rates of health, occupation and interpersonal problems.
- Brief alcohol interventions (BAIs) have been presented as a potential treatment option for both civilians and active duty military service members in previous studies. By correcting misconceptions of normative alcohol use, BAIs can effectively reduce alcohol consumption.
- Researchers in this study found that perceptions of alcohol use among veterans were related to actual consumption and alcohol dependence; however depression symptoms and coping styles also factored into the relationship, which may complicate the use of BAIs for use with the veteran population.

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ABSTRACT:

Objective: The current cross sectional study sought to examine whether perceived social normative beliefs are associated with indicators of alcohol use in a sample of alcohol misusing veterans.

Method: A sample of 107 U.S. Military Veterans presenting to primary care screening positive for alcohol misuse on the Alcohol Use Disorders Identification Test-Consumption Items (AUDIT-C) was recruited. Assessment measures were used to examine social normative beliefs and alcohol-related concerns as they relate to indicators of alcohol use at baseline.

Results: Our findings indicate mixed support for our two hypotheses in that perceived descriptive norms were associated with alcohol use indicators in the predicted direction; however, this was not the case for alcohol-related concerns. For perceived norms, we found that higher quantity beliefs were significantly related to greater alcohol consumption on a drinking day (pb.01), increased likelihood of dependence (pb.01), and frequency beliefs were significantly related to total number of drinking days (pb.01). Findings for alcohol-related concerns emerged contrary to our hypothesis, with results depicting increased alcohol-related concerns associated with higher alcohol consumption across indicators of use (psb.01).

Summary: Findings of the current study suggest that social normative beliefs, specifically misperceptions about descriptive norms, are significantly associated with alcohol consumption in a sample of alcohol misusing veterans presenting to primary care.”

Implications

FOR PRACTICE

Findings from this study suggest that normative perceptions of alcohol use may be related to actual consumption of alcohol in some Veterans presenting to primary care and screening positive for alcohol misuse. Age and reported income were shown to be important factors in explaining variation in alcohol consumption, which is consistent with prior research showing high rates of alcohol misuse among younger veterans and especially veterans returning from the Iraq and Afghanistan conflicts. Because these groups of veterans are at particular risk of alcohol misuse and dependence, it is especially important to assure access to primary care providers and to ensure access to effective interventions for alcohol misuse, primary care and community clinics with veteran patient populations that may wish to follow the approach utilized in the Veterans Health Administration and adopt standard screening for alcohol misuse.

Furthermore, brief alcohol interventions designed to correct normative perceptions of alcohol use may have potential for reducing alcohol consumption in some veterans; however, future research is needed to examine this hypothesis.

FOR POLICY

This study highlights the importance of standard screening for alcohol misuse among veterans presenting to primary care. The Veterans Health Administration implemented standard screening of alcohol misuse using the AUDIT-C Items in 2004. Health care systems with veteran patient populations may wish to also utilize this approach as it can help facilitate the identification of veterans who may benefit from brief alcohol interventions or those who may require more comprehensive evidence-based interventions for substance use disorders (SUD). Policy makers should work with providers and clinicians to establish screening processes for veterans presenting to primary care and establishing the groundwork for physician and clinician trainings in BAI interventions and referral to SUD specialty care.

FOR FUTURE RESEARCH

Possible directions for future research include longitudinal studies, as this study was limited to the use of cross-sectional data. Using longitudinal data, researchers can investigate the relationship between social normative beliefs, BAIs and alcohol consumption, examining factors that serve as predictors in these relationships. In addition, the sample for this study was drawn exclusively from veterans reporting alcohol misuse in primary care from one VA healthcare center, limiting its generalizability. Future studies should gather information from a national sample of both male and female veterans of various ethnic backgrounds. Previous studies have shown differences in social norms of alcohol use across gender and ethnicity, so gathering information from diverse, more representative groups of veterans and active duty military is important when examining the link between normative beliefs and alcohol consumption. Researchers should also focus on identifying potential psychosocial moderators for alcohol misuse. In this study, BAIs were found to have some potential for reducing alcohol misuse, however coping styles and depressive symptoms played a role in this relationship, indicating comprehensive evidence-based SUD interventions may be required. Future studies should determine whether BAIs are effective across diverse groups of veterans and military service members, and what role depression and different coping styles play in moderating the effectiveness of BAI interventions.

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