



An examination of associations between social norms and risky alcohol use among African American men who have sex with men



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ABSTRACT

Background: Research has indicated associations between risky alcohol consumption and sexual risk behavior, which may in turn present risk of HIV acquisition or transmission. Little is known about social determinants of problematic alcohol use among African American MSM (AA MSM), a risk group disproportionately affected by HIV. The present study sought to explore associations between risky alcohol use and perceived peer norms of alcohol use among a sample of urban African American men who have sex with men (AA MSM).

Methods: A cross-sectional survey was administered to 142 AA MSM in Baltimore, Maryland, recruited using active and passive methods. Risky and hazardous alcohol use was assessed using the Alcohol Use Disorders Identification Test (AUDIT) and participants self-reported descriptive and injunctive peer norms regarding frequency and quantity of alcohol consumption.

Results: Nearly half reported hazardous or high risk consumption of alcohol. Perceived peer alcohol norms, both descriptive and injunctive, were associated with alcohol use, including hazardous use.

Conclusions: The findings highlight the role of social factors on problematic alcohol use among AA MSM. Results indicate that AA MSM's use of alcohol is associated with their perceptions of peer alcohol use. Potential interventions could include norms-based campaigns that seek to reduce risky alcohol consumption among AA MSM as well as programs to screen and identify individuals with problematic alcohol use.

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1. Introduction

Studies have shown high rates of alcohol use and abuse among men who have sex with men (MSM; Stall et al., 2001; Woolf and Maisto, 2009; Reisner et al., 2010; Pollock et al., 2012). Factors associated with problematic alcohol use among MSM include depression (Reisner et al., 2010), lower socio-economic status, history of incarceration, frequenting gay bars (Wong et al., 2008), HIV positive status (Deiss et al., 2013) and non-gay sexual identity (Agronick et al., 2004).

Alcohol use is also associated with increased HIV risk among MSM (Woolf and Maisto, 2009; Reisner et al., 2010), specifically, engaging in transactional sex (Deiss et al., 2013), increased number of recent and lifetime sexual partners, unprotected anal intercourse (UAI) and sex under the influence of alcohol (Purcell et al., 2001; Colfax et al., 2004; Parsons et al., 2005). Additionally, HIV seropositive MSM who frequently engage in sex under the influence of

alcohol are more likely to report an increased UAI with casual partners (Purcell et al., 2001). Understanding factors associated with problematic alcohol use among MSM is necessary to expand development of appropriate interventions targeting alcohol-related risk. Alcohol use is typically a social behavior, yet little is known about social determinants of problematic alcohol use among African American MSM (AA MSM), a risk group disproportionately affected by HIV.

Social norms are a component of the social context of alcohol use and are strong predictors of behavior (Neighbors et al., 2007; Rimal, 2008; Rosenquist et al., 2010; Teunissen et al., 2012). Perceptions of others' behavior (termed descriptive norms) and perceptions of others' disapproval for a certain behavior (termed injunctive norms) have been associated with heavy episodic consumption drinking and alcohol-related problems (Larimer et al., 2004). Studies of alcohol-related social norms, predominately conducted with heterosexual college-aged populations, have shown that greater alcohol use is associated with perceptions that peers are excessively consuming alcohol (Perkins et al., 2005; Perkins, 2007; Bertholet et al., 2011). One study among college aged students found that the association between descriptive social norms on individual drinking behavior was stronger for men than it was for women (O'Grady et al., 2011). In another study, among a

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Table 1

Associations between perceived alcohol norms and AUDIT risk level among African American men who have sex with men (n = 142).

	AUDIT score					p-Value
	Total sample N = 142	No alcohol use in prior 90 days N = 29 (20%)	≤7 (Low risk) N = 52 (37%)	8–15 (risky/hazardous) N = 31 (22%)	≥16 (high risk) N = 30 (21%)	
Median age (SD) (IQR)	43 (10.9) (31–49)	47.0 (8.76) (42–51)	34 (11.3) (27–47)	45 (10.7) (31–49)	43 (10.2) (35–42)	<0.01
Education						
≤11 years	28 (20)	6 (21)	10 (19)	6 (19)	6 (20)	
12/GED	67 (47)	13 (45)	18 (35)	21 (68)	15 (50)	
≥some college	47 (33)	10 (34)	24 (46)	4 (13)	9 (30)	0.01
Employment						
Full time	17 (12)	3 (10)	13 (25)	1 (3)	0 (0)	
Part-time	23 (16)	3 (10)	11 (21)	5 (16)	4 (13)	
Not working	52 (37)	10 (34)	13 (25)	14 (45)	15 (50)	
Disability	50 (35)	13 (45)	15 (29)	11 (35)	11 (37)	0.02
Health insurance						
Yes	114 (80)	26 (90)	40 (77)	23 (74)	25 (83)	0.41
Sexual identity						
Gay	64 (45)	10 (34)	32 (62)	12 (39)	10 (33)	
Bisexual	48 (34)	8 (28)	13 (25)	12 (39)	15 (50)	
Heterosexual	16 (11)	5 (17)	2 (4)	5 (16)	4 (13)	
Other	14 (10)	6 (21)	5 (10)	2 (6)	1 (3)	0.03
Self-reported HIV+						
Yes	59 (42)	14 (48)	23 (44)	11 (35)	11 (37)	0.70
Homeless in past 6 months						
Yes	32 (23)	6 (21)	10 (19)	5 (16)	11 (37)	0.24
How many friends drink alcohol ≥3 times a week						
None	17 (12)	5 (17)	11 (21)	0 (0)	1 (3)	
A few	56 (39)	15 (52)	19 (37)	13 (42)	9 (30)	
≥50%	69 (49)	9 (31)	22 (42)	18 (58)	20 (67)	<0.01
How many friends drink ≥5 drinks in one sitting						
None	39 (27)	15 (52)	19 (37)	3 (10)	2 (7)	
A few	54 (38)	7 (24)	19 (37)	15 (48)	13 (43)	
≥50%	49 (35)	7 (24)	14 (27)	13 (42)	15 (50)	0.001
How many would disapprove if you drank alcohol ≥3 times a week						
None	42 (30)	8 (28)	10 (19)	12 (39)	12 (40)	
A few	38 (27)	2 (7)	17 (33)	8 (26)	11 (37)	
≥50%	62 (44)	19 (66)	25 (48)	11 (35)	7 (23)	<0.01
How many would disapprove if you drank ≥5 drinks in one sitting						
None	34 (24)	6 (21)	10 (19)	8 (26)	10 (33)	
A few	31 (22)	4 (14)	9 (17)	8 (26)	10 (33)	
≥50%	77 (54)	19 (66)	33 (63)	15 (48)	10 (33)	0.16

sample of predominately white young men who have sex with men, the increased number of friends who drank heavily was associated with individual alcohol use (Paschall et al., 2005). Furthermore, a study of multi-ethnic sample of young MSM, found that heavy episodic drinking was associated with a greater number of peers who engaged in drug, alcohol or sex risk behavior (Wong et al., 2008).

Along these lines, social norms approaches have been utilized to address hazardous drinking among college populations (Borsari and Carey, 2003; DeJong et al., 2006, 2009). Some of these interventions show promise (DeJong et al., 2006), though not all have been found to be effective (DeJong et al., 2009). If norms are associated with alcohol consumption patterns among African American MSM, then norms-based interventions could be designed to address problem drinking and subsequent risky sexual behaviors.

The purpose of this study was to examine associations between descriptive and injunctive norms of alcohol use and alcohol risk level among an urban sample of African American men who have sex with men.

2. Methods

Data for this study came from a cross-sectional survey of AA MSM conducted from March 2012 to July 2012 in Baltimore, Maryland. Participants were recruited using a variety of methods, including street-based outreach by trained field recruiters, word of mouth referrals, collaborations with community-based agencies that provide services to AA MSM, and internet-based postings on Craigslist.org. Inclusion criteria were self-reported age 18 years old or older, African American race/ethnicity, and sex with a male in the prior 90 days. Interested participants were

screened via phone or in person by a trained research assistant. Of n = 196 who were screened, 22% were ineligible. No participants who contacted the research study refused or declined screening. Eligible participants provided written informed consent and completed a baseline survey administered in a private office by a trained research assistant. Participants were remunerated \$50 for completing the survey. All study procedures were approved by the Johns Hopkins Bloomberg School of Public Health Institutional Review Board.

2.1. Measures

2.1.1. Outcome: Alcohol Use Risk. The Alcohol Use Disorders Identification Test (AUDIT) was used to assess alcohol use, hazardous drinking, and risk for alcohol dependence (Saunders et al., 1993; Babor et al., 2001). The AUDIT has been validated in numerous populations and measures frequency of drinking, drinking behavior, dependence, and problems and consequences related to drinking. AUDIT scores range from 0 to 40, with a higher score indicating more hazardous or risky drinking. For each participant, a total score was calculated and categorized for level of Alcohol Use Risk (AUR) measured as 0 = no use of alcohol, 1 = AUDIT score 0–7 (low-risk drinking), 2 = AUDIT score 8–15 (hazardous drinking), and 4 = AUDIT score 16 or higher (high-risk drinking, and likely dependent on alcohol).

2.1.2. Descriptive alcohol use norms. Descriptive alcohol use norms were assessed by asking “How many of your friends drink three or more times a week” (i.e., frequency) and “How many of your friends have five or more drinks in one sitting?” (i.e., quantity) The response choices for both items were: none, a few, half, or most/all.

2.1.3. Injunctive alcohol use norms. Injunctive alcohol use norms were assessed by asking “How many of your friends would disapprove if you were to drink three or more times a week” (i.e., frequency) and “How many of your friends would disapprove if you had five or more drinks in one sitting?” (i.e., quantity) The response choices for both items were: none, a few, half, or most/all.

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