

# “The Effect of Religion on Alcohol, Drug Use, & Delinquency

March 24, 2011

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# Today and Upcoming Thursday Class Schedule

- **March 24: Effect of Religion on Alcohol and Drug Use, Delinquency (chapter 11 - 12, HRH)**
- March 31: Effect of Religion on Heart Disease & Hypertension (chapters 16-17, HRH)
- April 7: Effect of Religion on Immune System Dysfunction and Cancer (chapter 19-20, HRH)
- April 14: Effect of Religion on Longevity and Disability (Chap. 21-22, HRH)

# Outline for today – Alcohol, Drug Use, & Delinquency

I. Introduction

II. Alcohol

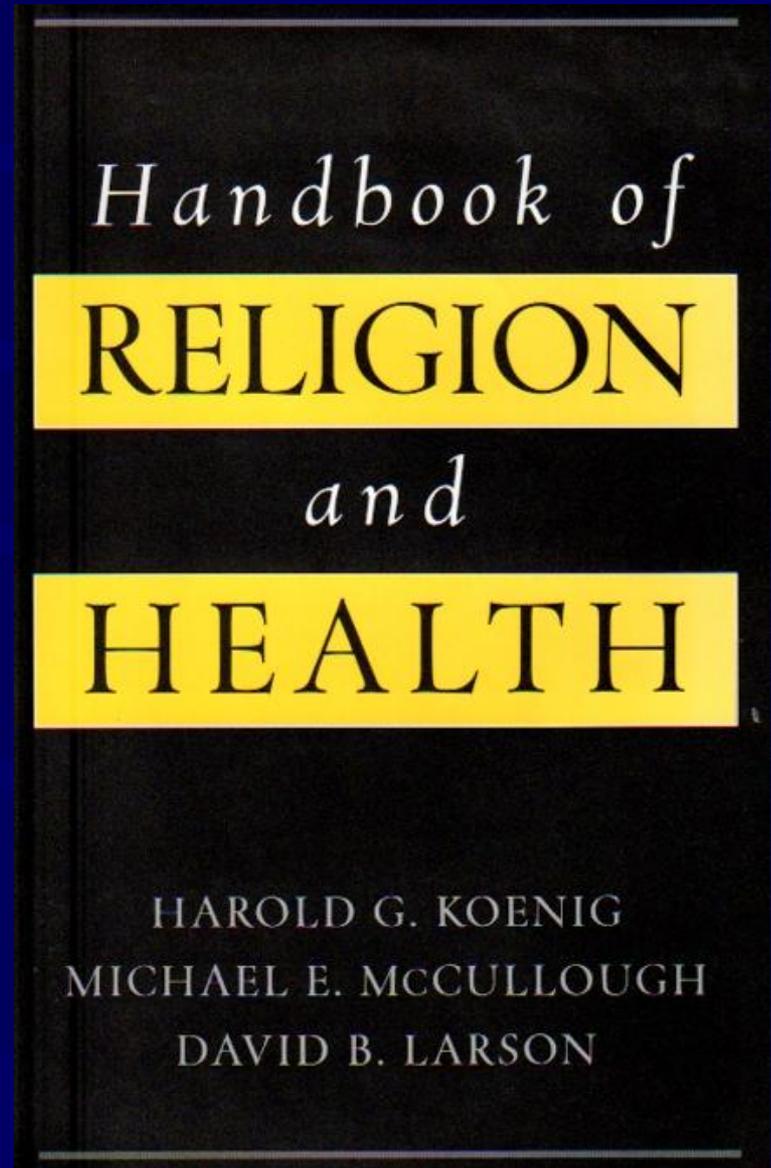
III. Drug Use

IV. Delinquency

V. Summary

# I. Introduction:

- Today we are looking at Chapters 11 & 12 of Dr. Harold Koenig, Michael McCullough and David Larson's book,
- ***Handbook of Religion and Health (2001)***
- published by Oxford University Press, New York.



## II. Effect of Religion on Alcohol Usage

- Alcohol and Drug Addiction exact an enormous cost on individuals and society in terms of physical disease and mental suffering, disturbed social order, and loss of productivity.
- Religious beliefs and practices may play an important role in the prevention of serious alcohol and drug problems and in rehabilitation of abusers.
- However, some forms of religion may also exacerbate or interfere with recovery from substance abuse problems. This should not be ignored.

## II. Categorizing Alcohol and Drug Problems

- Clinicians use two major systems for classifying alcohol and drug problems:
  - The International Classification of Disease (WHO, ICD-9, 1992)
  - Diagnostic & Statistical Manual of Mental Disorders (DSM-IV, 1994)
- Recent research provides overwhelming evidence that alcohol and drugs not only interfere acutely with normal brain activity but also have long-term effects on brain metabolism and functioning (National Institute for Drug Abuse, 1998)
- These changes in the CNS eventually lead to a compulsive craving for drugs that is so overwhelming as to impair the ability to exercise restraint. There is both a physical and a psychological dependence (Fritzche, 1998). **Soon, the addicts resources, time, and energy are solely focused on acquiring, using and recovering from their addictive substances.**

## II. Clinical and Social Consequences

- Abuse of alcohol and drugs ranks among the leading health and social concerns in America today.
- Chronic alcohol consumption is associated with an increased risk of both morbidity and mortality:
  - Liver disease
  - Cancer and Cardiovascular problems
  - Mental illness – depression & suicide (very high)
  - Accidental death and disability (DUI) & Homicides

Among teens – higher risk for early sexual activity, pregnancy, STDs

  - 18% of newborns are exposed to alcohol/drug throughout gestation
  - 28 million children are being raised by alcohol/drug addicted parents
- Because the liver is the primary site of alcohol metabolism, death due to cirrhosis has been used as an indicator of alcohol consumption patterns in nations. In US: 29,000 deaths/year

## II. Effect of Religion among adolescents

- Adlaf & Smart (1985) studied 2,066 Canadian Adolescents and found that Catholic students were less likely than Protestants or nonaffiliated students to have used marijuana, nonmedical or hallucinogenic drugs during the previous year.
- Level of religiosity and church attendance variables both had strong negative relationships with drug use though both groups were users: (60% vs 80% for alcohol; 6% vs 39% for marijuana; 2% vs 22% for hallucinogenics; and 10% vs. 20% for medical drug use).
- Hadaway et al (1984) explored relationship of religion and drug use among 23,000 high school students in 21 public schools in Atlanta, GA. The study showed a significantly negative relationship in drug usage/attitudes & religiosity.

## II. Religion and adolescents, cont . . .

- Lorch & Hughes (1985) studied 13,878 Colorado adolescents and found church membership was inversely related to alcohol and drug usage.
- Of six variables studied – “church attendance” yielded the highest correlation and “importance of religion” was the second highest.
- “The importance of Religion” was the strongest if looking at drug usage alone.
- **The authors concluded:** “This implies the controls here are deeply internalized values and norms rather than that they come from fear associated with church ideology or peer pressure coming from interaction with one’s church group.”

## II. Religion and adolescents ...

- Amoateng & Bahr (1986), national survey of 17,000 high school seniors examined the impact of many factors: parent's education, mother's employment, number of parents at home, religiosity, religious affiliation, gender, and race.
- **Found Religious Affiliation was inversely related to drug use:**
  - Mormons had the lower use of alcohol and marijuana
  - Baptists and fundamentalists had lower usage than other Christian denominations
- **Among all religious denominations, the degree of "personal religiosity" had strongest inverse relationship with drug use. I.e., students who were more committed to their religion were the least likely to report either marijuana or drug use.**
- Interestingly, none of the three family variables had any effect on student alcohol usage (the value of church attendance)

## II. "Monitoring the Future Survey"

- Amey et al (1996) surveyed a random national sample of 11,728 senior high students around the country.
- Religiosity was measured by affiliation, religious importance and religious attendance. The use of various substances: cigarettes, alcohol, marijuana, other drugs including LSD, cocaine, amphetamines, barbiturates, heroin, other narcotics and inhalants.
- Religious involvement was inversely related with use of all substances. The odds ratio, Church attendance for cigarettes (29% lower); for alcohol (45% lower); for marijuana (33% lower); for other drugs (21% lower).

## II. "Socialization" of College Students ...

- Hardert and Dowd (1994), examined the relationships between four "socialization" variables and alcohol and marijuana use among high school and college students.
- "Socialization Factors" were:
  - Socio-demographic (gender and educational level)
  - Intrapersonal (personality and attitudes and values)
  - Interpersonal (peers' values, peers' usage of drugs and parents values)
  - Contextual (communication with teachers, exposure to violence in school, fear of terrorist or nuclear attack)
- Found College students were six times more likely to use alcohol and marijuana than were high school students
- The strongest predictors for college student use were interpersonal – Peer drug use and peer attitudes about drugs.

## II. Summary for Adolescent and Young Adults

- Research on adolescent and young adult drug use suggests that there is a clear inverse relationship between various measures of religion (attitudes, beliefs, affiliations, behaviors) and alcohol or drug use.
- Koenig, et al (p 172, HRH): “Young persons who attend religious services regularly, who report that religious is very important in their lives, and who belong to a denominations that prohibit or discourage drug use are less likely to be involved with drugs than those who are less religious.”
- Peer association may be one of the mechanisms by which religion exerts its effect on drug use in adolescents. But, other mechanisms may be involved.

## II. Religion and Substance Abuse in Adults

- As with adolescents and young adults, studies of middle-aged or older adult populations consistently find an inverse relationship between religious involvement and substance use/abuse.
- Cahalan and Room (1972) study of 2,746 adults found that more abstainers than infrequent, moderate, or heavy drinkers participated in church activities.
- A later study by same authors found two religious variables were significant: **conservative Protestant affiliation** and **attendance at religious services**. In Protestant denominations that favored abstinence, there were a high percentage of abstainers, but those who did drink, drank heavily. There were many heavy drinkers among Catholics and liberal Protestants. Among Jewish, most drank a little, but few drank heavily.

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## II. Religion and Adults . . .

- Khavari and Harmon (1982) examined data from 4,853 persons surveyed. They reported a “powerful relationship” between degree of religious believe and the consumption of both alcohol and psychotropic drugs – marijuana, hashish, amphetamines and tobacco. All were significantly higher in the non-religious group.
- The authors concluded that “drug treatment personnel may do well to closely scrutinize the possibility of enlisting the addict’s religion as an aid to the overall treatment strategy.”
- Koenig, et al (1994) examined 2,969 people aged 18-97 in N.C. checking many religious variables (bible reading, prayer, church attendance, religious denomination, “born-again”) and found alcohol disorders were significantly less common among those who were weekly church goers and those “born-again.”

## II. Religion and Adults . . .

- Interestingly, in Koenig's study, alcohol disorders were more common among those who frequently watched/listened to religious television or radio programs.
- And, lifelong Alcohol disorders were more prevalent among members of Pentecostals than others Christian denominations (perhaps due to aggressive proselytizing by this group of the lower socio-economic class)
- To summarize: research suggests that adult alcohol and drug use may be influenced by religion.
  - Greater: the importance of religion, the frequency of church attendance, and private religious practices (prayer and Bible reading) all predict less alcohol and drug use/abuse among adults.
  - And, membership in a denominational group that discourages alcohol and drug use is also a predictor of less substance use and abuse.

## II. Possible Explanations . . .

- What is it about religious involvement that influences alcohol and drug abuse?
  - For adolescents and young adults, peer influence is important (indirect)
  - Studies indicate there may be a direct effect on alcohol and drug use:
- Instilling Moral Values – religion may directly influence substance use by serving as a moral compass.
- Burkett (1980) surveyed 323 high school students to correlate attitudes about drinking with religiosity measures including the belief drinking was a “sin.”
- In the study, Protestants who were highly religious tended to believe drinking was a sin and were significantly more likely to abstain from drinking alcohol.

## II. The Moral Compass . . .

- To test the hypothesis that religion can directly influence alcohol consumption via strong moral message, Bock, et al (1987) examined 4,278 American Adults.
- Analysis indicated that the moral message of respondents increased proportionally according to religious comitment and being affiliated with a denomination that prohibited/discouraged alcohol use.
- In addition to indirectly influencing alcohol and drug us by influencing peer interactions, religion may play a direct role in discouraging alcohol use by supporting a moral code of conduct which excludes the use of alcohol and drugs.
- And, the more one is exposed to a religion which teaches this, the more likely one is to not partake of alcohol and drugs.

## II. Religion and Psychological Well-Being . . .

- Another way that religion might reduce the risk of alcohol and drug use is by increasing psychological well-being.
- Existing literature suggests that religion reduces the need for alcohol and other drugs by making people less susceptible to stress, by increasing their coping skills, and/or both.
- Krause (1991) examined 1,607 elderly people, 60 and older, to understand the relationship between coping resources and alcohol use and religion.
- He found as health problems grew, religious intensity grew also, suggesting that religion was effective coping with health problems. Increased religiosity was correlated with greater likelihood the individual would abstain from alcohol.

## II. Spiritual Intervention for Alcohol, Drug abuse

- If religious involvement is protective against initial alcohol or drug use, might it also be used as a method of treating those whose lives are devastated by addiction?
- Research has shown that religious involvement has been low among people in treatment for substance abuse. Might fostering religious or spiritual beliefs in substance abusers provide a mechanism for bolstering therapy outcomes?
- Thoresen (1997) argues that religious or spiritual interventions can help people find meaning, direction, and purpose in life.
- And Harvard psychiatrist George Vaillant (1983) wrote:

## II. Harvard psychiatrist George Vaillant (1983) wrote:

- “in the treatment of addiction, Karl Marx’s aphorism “Religion is the opiate of the masses” masks an enormously important therapeutic principle. Religion may actually provide the relief that drug (and alcohol) abuse only promises.”
- “First, alcoholics and victims of other seemingly incurable habits feel defeated, bad, and helpless. They invariably suffer from impaired morale. If they are able to recover, powerful new sources of self-esteem and hope must be discovered. Religion is one such source. Religion provides fresh impetus for both hope and enhanced self-care.”
- “Second, if the alcoholic is to become abstinent, enormous personality changes must take place. We associate such dramatic change with the experience of religious conversion.”

## II. Harvard psychiatrist George Vaillant (1983) wrote:

- “Third, religion, in ways that we appreciate but do not understand, provides forgiveness of sins and relief from guilt. Unlike many intractable habits that others find merely annoying, alcoholism inflicts enormous pain and injury on those around the alcoholic.”
- “As a result, the alcoholic, already demoralized by his inability to stop drinking, experiences almost insurmountable guilt from the torture he has inflicted on others. In such an instance, absolution becomes an important part of the healing process.”

Koenig (p, 177f) presents an overview of research that examines the effectiveness of three types of religious/spiritual interventions: (1) church-based interventions; (2) 12-step programs and (3) meditation.

## II. Churches and Substance Abuse Rehabilitation:

- Most early church-based substance abuse programs were run by Protestant churches. Since the 1960s, however, the Catholic Church has become increasingly involved in rehabilitation services for substance abusers.
- Today, many of the church-based programs are confined to sponsoring Alcoholic Anonymous and Narcotics Anonymous meetings and services.
- Teen Challenge bases its treatment on conservative Christian doctrine. Hess (1977) found the success rate varied with previous religious experience; 75% who were not initially church regulars successfully graduated from the program while only 20% graduated who previously attended church. The latter may have had a bad church experience, making it more difficult for them to use religion in their recovery.

## II. Twelve-Step Fellowships:

- 12-Step fellowships seek to help people with alcohol or drug abuse, and recently other addictions (gambling, overeating, and sexual addiction)
- The original 12-step program is explicitly based on spiritual principles. These principles include dependence on a self-defined Higher Power, self-examination, prayer and meditation, and assistance from others (fellowship & sponsor)
- Steps 10 – 12 are the most important for spiritual growth and maintenance of sobriety. They are:

## II. Steps 10, 11, and 12:

- Step 10 – Continued to take personal inventory and when we were wrong promptly admitted it.
- Step 11 – Sought through prayer and meditation to improve our conscious contact with God *as we understood Him*, praying only for knowledge of His will for us and the power to carry that out.
- Step 12 – Having had a spiritual awakening, as the result of these steps, we tried to carry this message to alcoholics and to practice these principles in all our affairs.

## II. Are the 12-Steps successful?

- 12 Step programs are considered to be one of the most successful methods for ending substance abuse and preventing relaps (Emrick et al, 1993)
- Studies have concluded that active AA membership enables 60-68% of alcoholics to drink less (or not at all) for up to a year, and 40-50% achieve sobriety for many years (Emrick)
- Not all experts are so optimistic about AA. Peele (1990) concluded that AA programs have not demonstrated their efficacy. Alford et al (1991) found that the positive effects of involvement in AA, while often short-lived in men, persisted for at least two or more years with women. He found no difference between male completers (at 1 year) and non-completers.

## II. 12-Steps' success

- Some AA practices are more important in recovery than others. Montgomery et al (1995) found that, while post-treatment frequency of AA attendance was not predictive of drinking outcomes, the extent to which patients became involved in AA did predict longer sobriety.
- Carroll (1993) tested "purpose of life" among AA members and showed that those who practiced steps 11 and 12 had a sense of "increased purpose of life." The number of AA meetings attended correlated with longer sobriety and fewer relapses.
- Carroll concluded that practicing Step 11 (*seeking through prayer and meditation to improve conscious contact with God and for the power to carry it out*) was especially important for recovery and maintaining sobriety.

## II. Meditation

- Meditation-based interventions have been reported in a number of studies to reduce alcohol and drug abuse. (Alexander, et al 1994; Taub, et al, 1994)
- Gelderloos et al (1991) reviewed 24 studies of the benefits of Transcendental Meditation (TM) in treating and preventing substance abuse and dependence. All studies showed positive effects for the TM program.
- The authors concluded TM simultaneously addressed several factors that underlay chemical dependency, providing not only immediate relief from physical distress, but also long range improvements in well-being, self-esteem, personal empowerment, and in general, psycho-physiological health.

## II. Religion and Exacerbation of Substance Use

- By inducing guilt and suppressing aggressive or sexual drive, religion may in some cases lead to or worsen problems with substance abuse.
- Walters (1957) at a VA hospital report that a larger proportion of those alcoholics had parents who were both members of the same church denomination than did a control group.
- Mothers of Alcoholics were also more involved in religious activities than were mothers of control group (66% to 55%).
- Zucker (1987) conducted a study of 61 male alcoholics and found that religious patients who had anti-alcoholic attitudes on admission had the least room for change in attitudes. The least religious patients found attitude adjustment easier.

## II. Religion and Exacerbation of Substance Use

- Other than 3 studies that showed negative findings for religion and substance abuse, nearly 150 studies on the relationship between religious involvement and substance abuse suggest less substance abuse and more successful rehabilitation among the more religious.

## II. Summary: Effect of Religion on Alcohol/Drug Abuse

- Over 100 studies suggest religion may be a deterrent to alcohol and drug abuse in children, adolescents and adults.
- The greater a person's religious involvement the less likely he or she will initiate alcohol or drug use. Religious participation may reduce usage by:
  - Providing friends that do not abuse substances
  - Instilling moral values
  - Increasing coping skills
  - Reduces likelihood of turning to alcohol/drugs during times of stress
- 12-step fellowships and private spiritual practices can have a significant impact on the rehabilitation of persons with substance abuse problems.

### III. Delinquency

- Definition: Delinquency is problem behavior that is against the basic principles of society, is harmful to society, or is in violation of the law.
- Onset is usually at early ages, around 9 or 10, particularly in boys and may be marked by the onset of stubborn behavior or minor covert acts such as frequent lying or shoplifting.
- These behaviors are followed around 11-12 by acts of defiance, minor aggression and property damage.
- Over time, more serious forms of delinquency may ensue, such as violent behavior (fighting or assault) and chronic resistance to authority figures, truancy, staying out late at night, and running away from home.

### III. Consequences of Delinquency

- In 1992, estimated that 1 million Juveniles in the US were charged with 1.5 million delinquent acts, a 26 % increase over the number of cases report just five years previously. Aggravated assault rates doubled, as did murder rates.
- Males drove the 1987-1994 spike in the murder arrest rate, and the increases were seen in acts committed with firearms. Females did not experience the sharp rise and fall that occurred with males during the '90s. Instead, arrest rates among female offenders have continued to slowly climb year after year.
- Since 1994 most arrest rates have been in steady decline. Murder arrest rates, for example, were 74% lower in 2000 than they were in 1993. Drug abuse arrest rates, however, rose steadily through the '90s and have not dropped significantly.

### III. The Effect of Religion and Delinquency

- Religion has long been considered a deterrent to crime because it promotes social control and encourages the development of moral character and the acceptance of societal norms and values (Davis, 1948, Erikson, 1966, Fitzpatrick, 1967).
- Hirschi and Stark (1969), disputed this notion and reported that church attendance and belief in supernatural sanctions were virtually unrelated to self-reported delinquency studies.
- Stark et al (1982) found that delinquency was consistently lower in religious communities than secular communities and concluded that religion lowers one's risk of delinquency only if it is reinforced by prevailing social norms – i.e., one's surrounding community. This is known as Social Control Theory.

### III. Church Attendance and Delinquency . . .

- Higgins & Albrecht (1977) analyzed data from 1,400 high school students. Two items were evaluated about religion – church attendance and church affiliation.
- When analyzed, they found modest to moderately strong negative relationship between frequency of church attendance and 17 delinquent behaviors studied.
- In a later report, Ellis (1985) reviewed the literature on the subject and found 31 relevant studies – all but five studies (84%) reported a significant inverse relationship between church attendance and crime. Even in the five mentioned, the relationship was negative, though not as convincing.

### III. "Importance of Religion" and Delinquency . . .

- Middleton & Putney (1962) found that in adolescents religious salience, religion ideology (belief in God), and religious attendance, were all negatively related to victimless crimes (gambling, smoking, petting, and drinking alcohol).
- Benson & Donahue (1989) found that the number of nights high school seniors reported they "went out for fun and recreation" was the single strongest positive predictor of delinquent behaviors.
- Conversely, religiousness and plans to graduate from college were the two most powerful negative predictors of delinquent behaviors -- cigarette use, binge drinking, and marijuana use.

### III. Religion and Long-term Criminality . . .

- Evans et al (1995) – studied the relationship between religion and adult criminality.
- They found surprisingly, that three of the four measures of religiousness – general religiousness, religious beliefs of punishment, and religious influence (salience) – were unrelated to adult criminality.
- However, religious activities (attending religious services, reading religious material and listening to religious TV and radio) were related to less adult criminality.
- Interestingly, members of conservative religious denominations did not commit crimes less frequently than did members of liberal denominations. However, socio-economic factors differ.

### III. Religious/Spiritually-based programs & Criminality.

- Despite the historical importance of religious groups as unique and powerful social institutions within communities, the influence of these institutions in preventing or controlling juvenile delinquency has drawn limited attention from social scientists and criminologists.
- One of few exceptions is Richard Freeman (1986) who concluded that participation in the African American church helps inner-city African American male youth escape the world of poverty, drug use, and crime.
- Freeman analyzed data from 2,358 African-American youth in Boston, Chicago and Philadelphia, and found that church attendance had a significant negative effect on deviant activities among at-risk youth, including alcohol and drug use.

### III. Religious/Spiritually-based programs . . .

- Johnson, Larson et al (1997) studied prison inmates in four NY state prisons for two years to determine whether participation in Prison Fellowship (PF) had any effect on the inmates adjustment in prison. They also examined inmates recidivism rates and post-release arrests.
- 201 inmates in the PF program were matched with an equal number not in the program. Results indicated that both groups were similar on their initial adjustment to prison and in the follow-up period while in prison.
- However, the level of PF participation in Bible study groups did predict recidivism rates. PF inmates in the high participation category were significantly less likely than non-PF inmates to be arrested during the followup period (14% vs 41%).

## IV. Summary, Religion and Delinquency

- The causes of delinquency are multifaceted. Individual, familial, community, and societal factors interact to produce behavior.
- There is growing evidence that affiliation with religion may help protect against delinquent behavior and attitudes among youth.
- Further evidence suggests that such effects persist even if there is not a strong prevailing social control against delinquent behavior in the surrounding community.
- Religious involvement may help adolescents learn social behavior skills and concern for others' welfare.

# Next Thursday's Class

- March 31: Effect of Religion on Heart Disease & Hypertension (chapters 16-17, HRH)
- April 7: Effect of Religion on Immune System Dysfunction and Cancer (chapter 19-20, HRH)
- April 14: Effect of Religion on Longevity; and, Religion and Disability (Chap. 21-22, HRH)