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Alcohol Use Trends Among LDS High School Seniors in America From 1982-1986

Ricky D. Hawks, EdD

Straus and Bacon (1953), Snyder (1958), Skolnick (1958), Smith (1969), Moss and Janzen (1980), Albrecht (1985), and Hawks (1987) have each identified a unique alcohol use pattern among members of The Church of Jesus Christ of Latter-day Saints (LDS). In general, research has suggested that affiliation with an alcohol abstinence-teaching group, such as the LDS religion, will produce a “paradoxical” drinking pattern. Paradoxical drinking among LDS persons has been described in the literature as having two unique characteristics when compared to religious groups not teaching abstinence. First, an overall low rate of alcohol use by LDS members has been noted. And second, the relatively few who do report alcohol use tend to report high amounts of alcohol being consumed and many problems associated with their alcohol use.

Current research focusing on LDS adolescent alcohol use patterns and trends have been virtually nonexistent. More importantly, the effect that expensive national alcohol prevention campaigns (such as “Just Say No”) might have on the thousands of youth in America who belong to an abstinence-teaching religious group is unknown.

I asked the following questions. What are the national trends for LDS alcohol use? How do those trends differ, if they do, from trends in other religious subgroups? Finally, are LDS youth from an abstinence-teaching background influenced in a similar way by national abstinence-prevention campaigns as are Non-LDS youth? While I acknowledge that answers to such questions will require several major, formal research efforts, I propose that this paper serve as a pilot project to stimulate questions and ideas for other researchers to pursue.
Bachman, O’Malley, and Johnston have conducted a national survey of high school seniors entitled *Monitoring the Future: A Continuing Study of the Lifestyles and Values of Youth* (MTF) under the direction of National Institute of Drug Abuse (NIDA) from 1979 to present. In 1982, the researchers began to delineate “Latter-day Saints” (LDS) as a separate religious denomination as a demographic question. This research served as my primary database and my secondary analysis on this data is presented in this report.

**Method**

The original sample selection was based on a random sampling design and was conducted under the supervision of NIDA. The data are assumed to represent alcohol use trends for American high school seniors. I acknowledge that by combining ordinal data and a truncated research sample I have introduced some weaknesses to this study.

**Subjects**

The adolescents included in the MTF were approximately age 17 and considered to be “representative” of youth from the 48 adjacent states from 1982–1986. The current study, however, in part focused on responses resulting from a truncated sample of the entire MTF. The truncated research sample contains three subgroups. The first subgroup was the “LDS” denomination. The LDS sample size included 350 in 1982, 369 in 1983, 312 in 1984, 255 in 1985, and 286 in 1986. The second subgroup was the “Non-Religious” subgroup. The Non-Religious sample size included 1,669 in 1982, 1,455 in 1983, 1,557 in 1984, 1,704 in 1985, and 1,786 in 1986. The third and final sample I created from the database by extracting data to form a “Other Religious” subgroup. The Other Religious subgroup contained those adolescents who identified themselves as Roman Catholic, Jewish and Lutheran. The Other Religious sample size included 7,160 in 1982, 6,324 in 1983, 5,578 in 1984, 5,833 in 1985, and 5,573 in 1986.

It should be noted that all of the survey respondents used in this study were participating seniors only. Alcohol use rates did not reflect adjustments for absentees, missing data, or dropouts. The LDS sample size would seem noticeably small for extrapolation to a national sample. However, the LDS sample was randomly obtained from throughout the United States and was the largest sample of its type available. I believe that such data will provide
an indication of LDS high school senior alcohol use trends nationally.

Variables

The MTF questionnaire was extensive. For this study only portions of it were used. (For additional information concerning the MTF, refer to the U.S. Department of Health and Human Services publication, National Trends in Drug Use and Related Factors among American High School Students and Young Adults 1975–1986 [1987].) Variables of interest in this study included three measures of alcohol use frequency and religious affiliation. The three measures of alcohol use frequency included: "Lifetime Alcohol Use," "Annual Alcohol Use," and "Monthly Alcohol Use." Lifetime Alcohol Use was defined by all those who reported any alcohol use in their lifetime prior to responding to the MTF. Annual Alcohol Use was defined by all those who reported any alcohol use in the 12 month period prior to the MTF. And finally, Monthly Alcohol Use was defined by all those who reported any alcohol use 30 days prior to the MTF.

The “Non-Religious” subgroup was selected to represent those adolescents who reported on the MTF to have “no religious affiliation.” The “Other Religious” subgroup was created to represent those adolescents who reported affiliation to a religious denomination that was non-abstinence teaching regarding alcohol use. Finally, the “LDS” subgroup was selected because of its conservative doctrine of abstinence from alcohol. All other religious denominations represented in the MTF were eliminated in this study. In addition to the three religious denominations listed above the entire MTF research population was also referenced in this study as “American Seniors.” Only the three religious subgroups are depicted in the tables.

Statistics

The reliability of the percentages obtained in this study was determined by the Standard Error of Proportion statistic. Guilford (1956) and Fleiss (1981) suggested that the Standard Error of Proportion is an effective formula to determine the true score range in which a certain proportion might fall. As a practical rule, however, they recommend that avoidance of seriously abnormal sampling distributions containing high percentages. Therefore, in order to use the statistic appropriately I did not calculate the Standard Error of Proportion for any percentage higher than 80%. A
95% level of confidence ($P \leq .05$) was used in calculating the Standard Error of Proportion.

**Results**

**Alcohol Use Trends**

**Lifetime Alcohol Use.** The national trends among American Seniors as reported by Johnston, O'Malley, and Bachman (1987) suggest that the percentage of Lifetime Alcohol Use steadily declined 1.5% from 92.8% in 1982 to 91.3% in 1986. The decline was noted by Johnston, et. al., as being significant. The Non-Religious and Other Religious subgroups identified in this study also appeared to manifest declines in Lifetime Alcohol Use for the same time period. The percentage of Non-Religious seniors reporting Lifetime Alcohol Use displayed the following pattern: 94%–1982, 95%–1983, 94%–1984, 94%–1985, 93%–1986. From 1983 to 1986 there was a downward trend totaling 2%. The percentage of Other Religious seniors reporting Lifetime Alcohol Use also exhibited an apparent downward trend from 97%–1982, 97%–1983, 97%–1984, 96%–1985, 96%–1986 (See Table 1). In total, there was a 1% decline from the 1982 (97%) to the 1986 (96%) figure. The statistical method selected for this study (Standard Error of Proportion) does not establish that this decline is statistically significant.

![Figure 1—Lifetime Alcohol Use by Other Religious, Non-Religious and LDS American High School Seniors, 1982–1986](image)

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The national trends among American Seniors as reported by Johnston, O'Malley, and Bachman (1987) suggest that the percentage of Lifetime Alcohol Use steadily declined 1.5% from 92.8% in 1982 to 91.3% in 1986. The decline was noted by Johnston, et. al., as being significant. The Non-Religious and Other Religious subgroups identified in this study also appeared to manifest declines in Lifetime Alcohol Use for the same time period. The percentage of Non-Religious seniors reporting Lifetime Alcohol Use displayed the following pattern: 94%–1982, 95%–1983, 94%–1984, 94%–1985, 93%–1986. From 1983 to 1986 there was a downward trend totaling 2%. The percentage of Other Religious seniors reporting Lifetime Alcohol Use also exhibited an apparent downward trend from 97%–1982, 97%–1983, 97%–1984, 96%–1985, 96%–1986 (See Table 1). In total, there was a 1% decline from the 1982 (97%) to the 1986 (96%) figure. The statistical method selected for this study (Standard Error of Proportion) does not establish that this decline is statistically significant.
The percentage of LDS seniors reporting Lifetime Alcohol Use appeared to exhibit more variability between 1982–1986 than did the Non-Religious and Other Religious subgroups (See Table 1). However, the variation between the five LDS percentages (specifically 1982-65±5%, 1983-61±5%, 1984-59±5%, and, 1986-61±6%) do not appear to be statistically significant.

When isolated as a subgroup, the LDS Lifetime Alcohol Use fell approximately 6% from 65±5% in 1982 to its lowest recorded level of 59±5% in 1984 (See Table 1). As mentioned, this drop was insignificant. The 1985 percentage of 66±5% exhibited an increase of about 7% from the 1984 figure (59±5%). The difference appeared to be nonsignificant when the Standard Error of Proportion was calculated. Additionally, the 1986 figure of 61±6% also showed a small increase from the 1984 figure (59±5%). In general, there did not appear to be statistical significance found in the apparent upward trend in LDS lifetime alcohol use from 1984 to 1986. Likewise, it does not appear that there was a clear and consistent lowering trend as was noted in the MTF.

Annual Alcohol Use. The national trends among American seniors as reported by Johnston, O'Malley, and Bachman (1987) suggest that the Annual Alcohol Use rate declined 2.3% from the 1982 figure of 86.8% to the 1986 figure of 84.5%. The decline was noted by Johnston, et. al., as being significant. The Non-Religious and Other Religious subgroups identified in this study also manifested declines in Annual Alcohol Use for the same time period. The percentage of Other Religious Seniors reporting

![Figure 2—Annual Alcohol Use by Other Religious, Non-Religious and LDS High School Seniors, 1982–1986](image-url)
Annual Alcohol Use exhibited a general decline from 95%–1982, 94%–1983, 93%–1984, 93%–1985, to a final 92% in 1986. A 3% decline was noted from the 1982 (95%) figure to the 1986 (92%) figure. The percentage of Non-Religious seniors showed a smaller decline in Annual Alcohol Use from 88%–1982, 90%–1983, 88%–1984, 87%–1985, to 87% in 1986 (See Table 2). A 1% and 3% decline were noted from the 1982 and 1983 figures to the 1986 figure, respectively. Again, the statistical method used in this study did not indicate a significant drop in Annual Alcohol Use by Other Religious seniors.

The LDS subgroup did not reflect an overall decline in reported Annual Alcohol Use. The LDS subgroup’s Annual Alcohol Use percentages remained rather constant from 51±5%–1982, 50±5%–1983, 51±6%–1984 to 51±6%–1986. No decline was noted between the 1982 and the 1986 percentages. Again, it did not appear that there was a clear and consistent lowering trend as was noted in the MTF.

*Monthly Alcohol Use.* The national trends among American Seniors as reported by Johnston, O’Malley, and Bachman (1987) suggested a decline of 4.4% in the Monthly Alcohol Use. The percentage fell from the 1982 figure of 69.7% to the 1986 figure of 65.3%. The decline was noted by Johnston, et. al. as being significant. The Non-Religious and Other Religious subgroups identified in this study also manifested declines in Monthly Alcohol Use for the same time period.

![Graph](image.png)

**Figure 3**—Monthly Alcohol Use by Other Religious, Non-Religious and LDS High School Seniors, 1982–1986
The Non-Religious Seniors exhibited a general decline in reported Monthly Alcohol Use as illustrated by the following percentages and years: 72±2%–1982, 74±2%–1983, 73±2%–1984, 70±2%–1985, and 68±2%–1986 (See Table 3). There was approximately a 4% decline from the 1982 figure to the 1986 figure. The difference was nonsignificant when comparing the Standard Error of Proportions between the 1982 and 1986 sets of figures. However, as noted, there was a tendency towards a downward trend.

The Other Religious subgroup also displayed a general decline in reported Monthly Alcohol Use as illustrated by the following percentages and years: 80±1%–1982, 79±1%–1983, 77±1%–1984, 76±1%–1985 and 75±1%–1986 (See Table 3). There was approximately a 5% decline from the 1982 to the 1986 figure. The difference was significant when comparing the 1982 and 1986 proportions indicating a significant decline in Monthly Alcohol Use.

The LDS seniors reported Monthly Alcohol Use as 32±5%–1982, 32±5%–1983, 33±5%–1984, 32±6%–1985, and 32±5%–1986. No decline was noted. The LDS subgroup did not display a significant downward trend in Monthly Alcohol Use as did other samples from the MTF data representing the American Seniors, the Other Religious subgroups and the apparent downward trend exhibited by the Non-Religious subgroup.

**Conclusions**

1. Across all measures of frequencies used in this study, a significantly lower percentage of LDS seniors consistently reported alcohol use, than did Other Religious, Non-Religious, and American Seniors. It would appear that roughly 62% of LDS seniors in the United States during 1982–1986 reported Lifetime Alcohol Use. Approximately 51% of LDS seniors in United States during 1982–1986 reported Annual Alcohol Use. Finally about 32% of LDS seniors in the United States during 1982–1986 reported Monthly Alcohol Use. The abstinence-teaching practice found in the LDS health model appears to be very successful as a resource to prevent alcohol use among our nation’s youth.

2. There appeared to be a general lack of decline in alcohol use frequencies among the LDS subgroup from 1982–1986 when LDS trends were compared to the Other Religious, Non-Religious and American Seniors. This might suggest that the factors that activate the LDS youth to reduce frequency of alcohol use may, in
part, be separate from those factors that activate similar process variables in Non-LDS youth populations.

**Discussion**

LDS seniors—an abstinence-teaching subgroup—appear to be somewhat immune from national alcohol prevention tactics such as “Just Say No.” The cumulative effects of national and local anti-alcohol campaigns appear to be less influential on LDS seniors in reducing alcohol use from 1982–1986 than on other religious subgroups.

An additional explanation for the lack of decline in the LDS alcohol use trends might be that those LDS seniors who would have been influenced by national campaigns, such as the “Just Say No” campaign, had previously been influenced by their own religious teachings of abstinence (that is, the Word of Wisdom). On the other hand, Non-LDS seniors may show a more significant decline in alcohol use trends over the years because they were significantly influenced more by their first exposure to the “Just Say No” campaign.

A final possible explanation of the LDS lack of decline is that in some cases there is such a limited number of LDS youth who do report alcohol use that the percentages of use statistically do not have as much freedom to fluctuate as do other groups of seniors. This might suggest that the results obtained in this study are an artifact of the small percentage of LDS alcohol users.

**Recommendations**

1. Additional research and model building must be completed to further evaluate the conclusions of this study and to identify possible unique mechanisms that might more effectively reduce the percentage of LDS youth using alcohol.

2. Continued use of an abstinence-teaching practice such as the LDS Word of Wisdom and the Nation’s “Just Say No” campaign seem appropriate as a primary alcohol use prevention strategy.

*Ricky D. Hawks is a counselor with the Weber County Department of Substance Abuse, Ogden, Utah. The author expresses special thanks to Dr. Stephen Bahr and Bern Vetter who read this report, to Dr. Eugene Buckner for providing computer services at BYU, and both to SAVE, Inc., and Weber County Department of Substance Abuse for their support.*
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