Patterns of Problem Drinking Among Employed African American Men: Preliminary Results from a National Survey

Jack K. Martin
Indiana University

Steven A. Tuch
George Washington University

Paul A. Roman
University of Georgia

Jeff Dixon
Indiana University

ABSTRACT
Existing surveys of African-American drinking patterns have not adequately differentiated those social structural and cultural variables that may account for intra-group differences in alcohol consumption patterns. In this report we provide a brief overview of the existing literature and develop logic to support a more comprehensive modeling of blacks’ drinking behaviors that explores the influences of several social structural and cultural variables hypothesized to either place African Americans at risk for, or protect against, maladaptive drinking. Using data obtained from a subsample of 826 employed African American men drawn from a recent survey of

* This research was supported by research grant R01-AA-10243 and training grant T32-AA-07473 from the National Institute on Alcohol Abuse and Alcoholism. An earlier version of this paper was presented at the R. Brinkley Smithers’ Institute for Alcohol Related Workplace Studies’ Symposium on Alcohol in the Workplace, October, 2000. Address all correspondence to J.K. Martin, Department of Sociology, Institute of Social Research, 1022 E. Third Street, Bloomington, IN 47405.
African American workers we broadly establish the theoretical utility of a model of drinking behaviors that focuses on a series of empirically verified race-specific risks and protections that partially account for blacks' intra-group variation in drinking patterns and outcomes. This model provides a more nuanced and much-needed alternative to the "Social Disorganization Paradigm" that has too long dominated the sociological discourse on race and drinking behaviors.

According to some commentators, alcohol abuse is the number one health and social problem in the Black community (Williams 1982; Harper 1976). Alcohol researchers, however, have largely ignored patterns of drinking in this population. As Harper and Dawkins (1976) point out in their frequently cited review of over 16,000 alcohol-related studies published between the 1940s and the 1970s, only 77, or approximately 5 percent, dealt with African-Americans' drinking, and only 11 studies dealt exclusively with members of this population (Harper and Dawkins 1976). The reasons for this omission emphasize African Americans' relatively small proportional representation in the U.S. population, (Caetano 1984; Herd 1985). Specifically, two factors have combined to limit studies of African American drinking: (1) the difficulty in recruiting African American respondents on other than an availability basis; and (2) the statistical fact that there are often too few African American respondents in national samples to develop reliable estimates (Martin 2000).

Recently, however, scholarly attention to African Americans' patterns of alcohol consumption has increased (Jones-Webb 1998; Martin 2000). The efforts of researchers involved in analyzing data from the African American over-sample from the 1984 National Alcohol Survey (NAS), and the Epidemiological Catchment Area Surveys (ECA), have significantly increased our understanding of drinking patterns and, in particular, the prevalence of problem drinking behaviors in the African American population (Herd 1985, 1988, 1990, 1991, 1994a; Herd and Grube 1993, 1996; Clark and Hilton 1991; Robins 1985). This literature remains deficient, however, in at least one important regard. The existing surveys of African-American drinking patterns have not adequately differentiated those social structural and cultural variables that
distinguish sub-groups within the African American population. In other words, the existing research has not sufficiently considered intra-group differences in African American drinking (Fernandez-Pol, Bluestone, Missouri, Morales, and Mizruchi 1986; Martin 2000).

Below we provide a brief overview of the existing literature and develop logic to support a more comprehensive modeling of Blacks' drinking behaviors. We then examine data obtained from a recent survey of African American workers to explore the influences of the social structural and cultural variables that comprise this model as they operate to either place African Americans at risk for, or protect against, maladaptive drinking.

RACE AND ALCOHOL USE

Existing Data and the Dominant Theoretical Model. Studies of American drinking behaviors and attitudes that have used adequate national or regional probability samples with sufficient numbers of African Americans to produce reliable estimates have documented remarkably similar overall alcohol consumption patterns for African Americans and whites (Harper and Safroorian 1991; Martin 2000). Aggregate level similarities in DSM-III assessments of lifetime or current alcohol disorder and alcohol symptoms among African Americans and whites have also been documented (Robins 1985). For example, aggregate prevalence estimates from the 1984 NAS indicate that similar numbers of African American and White men (29 percent versus 24 percent respectively) report abstaining from alcohol use (Herd 1991; 1990). Additionally, the proportions of African American men who could be classified as infrequent, less frequent, or more frequent drinkers were not significantly different from the proportions of White men in these categories, although whites were somewhat more likely to be considered heavy drinkers (Herd 1991: 310).

Aggregate level data comparing African American and White drinking patterns, while informative, nonetheless conceal several important differences in African-American drinking practices. Perhaps the best example of these differences is found in the drinking patterns of African American women. Compared to their White counterparts, African-American women are more likely to abstain,
less likely to be frequent or heavy drinkers, and less likely to develop problems with their drinking (Herd 1991). Similarly, many of the commonly held associations between socio-demographic attributes and drinking do not apply, or are in some cases reversed, among African Americans (Caetano 1984; Caetano and Herd 1984; Herd 1990; Robins 1985; Warheit, Auth, and Black 1985). Notable in this regard are the relationships between drinking, age and socioeconomic status. Counter to patterns observed in the White population, among African Americans, drinking and drinking problems are inversely related to income level, and positively related to age (Caetano 1984; Herd 1990; Robins 1985). Finally, recent data indicate that aggregate level estimates mask the tendency for African Americans to disproportionately experience negative consequences associated with heavier drinking (Herd 1994a).

While there has been some movement toward developing an understanding of variation in drinking practices within the African American population (Fernandez et al. 1986; Gaines 1985; Herd 1987 1994b; Herd and Grube 1996), most conventional analyses of these behaviors continue to treat African Americans as a homogeneous group. This is to say, African American drinking has tended to be viewed as a characteristic response to more-or-less uniform negative social and economic experiences. For the most part, this literature has assumed that as a result of common norms, values and experiences, African Americans demonstrate uniform behavior (Gaines 1985). The result of having ignored intra-group variation among African Americans is a paucity of reliable data on class, familial, religious or regional differences in drinking patterns. Lacking such data, there is a tendency to assume that such differences do not exist. This untested assumption of uniformity amounts to little more than a sophisticated form of stereotyping, and by underestimating the variability of behaviors among African Americans, it ultimately leads to an overestimation of the contribution of race to drinking patterns.

The Need for an Alternative Model of African American Drinking Behaviors. The findings of systematic variation in the drinking patterns of African Americans noted previously raise the question as to what factors other than race, account for these differences. These findings also seriously question earlier approaches
that treated African American drinking patterns as monolithic. However, the paucity of research on African American drinking has led to the emergence of several popular myths, stereotypes and unicausal “folk theories” on African American drinking (Benjamin and Benjamin 1981; Gaines 1985; Warheit, et al. 1985). The reliance on such paradigms is particularly distressing in view of the otherwise widespread belief among alcohol researchers that alcohol use and abuse and its correlates are extremely complex phenomena that defy simplistic explanation.

Perhaps the most popular of the unicausal folk theories is the social disorganization perspective. As Herd (1987) points out, alcohol researchers often invoke a social disorganization perspective to explain African American drinking behavior. For the most part, a social disorganization explanation of African American drinking practices tends to blame African Americans for their problematic or maladaptive use of alcohol. This perspective focuses on the role of intra-psychic deficiencies that presumably reflect a “cultural inferiority” (relative to the dominant White culture) that characterizes the African American community. As a result of various features labeled as social ills that have plagued the African American community (i.e., matriarchal family structure, high rates of crime and delinquency, weak attachment to jobs, etc), African Americans are seen as having internalized personality attributes and lifestyle orientations tolerant of drinking and drunkenness (Herd 1987).

The current study begins with the recognition that the vast majority of adult African Americans are integral participants in “mainstream” American social structure, most notably through their employment statuses. However, the disproportionate representation of African Americans among the unemployed (not working but looking for work) and the non-employed (not working and not looking for work), has subtly encouraged researchers to employ social disorganization and like paradigms in accounting for drinking patterns and associated behaviors. The broader research literature, however, has demonstrated the importance of social integration in explaining both problem drinking and buffers against such behavior. It is thus important to include integrative experiences in any attempt to explain African Americans’ drinking behavior, and employment is well-established as a major “hub” of social integration at both the personal
and social level. The overarching concern of the study proposed here is to generate a more complex theoretical modeling of African American drinking that incorporates a series of social structural and cultural risk and protective factors that should account for intra-group variation in drinking patterns.

**Risk and Protective Factors.** In recent years a substantial literature has developed in an attempt to identify various situational and psychosocial factors that place an individual at increased risk for problem drinking (Kumpfer 1984). This literature, however, has tended to ignore race-specific differences in risks. The model proposed for the current study takes as its starting point the assertion that historically and contemporarily the status of African Americans has exposed members of this population to unique stressors that elevate the risk for alcohol problems. In particular, African Americans have been the victims of stress producing race-based prejudices, biases and discriminatory practices that have also relegated large numbers of blacks to segregated and marginal positions in both the economy and the larger social structure.

**Prejudice and Discrimination as Risk Factors.** Despite evidence of liberalizing trends in whites’ racial attitudes (Tuch and Martin 1997; Schumann, Steeh, Bobo, and Krysan 1997), race-based discrimination and anti-Black affect remain enduring features of American life such that substantial numbers of minority group members report personal experiences with various forms of racism and discrimination (Kessler, Michelson, and Williams, 1999; Yen, Ragland, Greiner, and Fischer 1999a; Sigelman and Welch 1991; Jaynes and Williams 1989; Kluegel and Smith 1986). By elevating levels of life stress and dissatisfaction (Takeuchi, Uehara, and Maramba 1999; Beatty and Tuch 1997), these personal experiences of unfair treatment can have adverse effects on mental health outcomes, including a reliance on alcohol (Bell 1982; Harper and Dawkins 1976; Harper 1979; Harper and Saifnoorian 1991; Primm and Wesley 1985). Recent studies have found that personal experiences with discriminatory behaviors are associated with elevated levels of psychological distress, depression, and anxiety (National Research Council 2001; Ren, Amick, and Williams 1999; Williams, Yu, Jackson, and Anderson 1997; Pak, Dion, and Dion 1991; Burke 1984), with a few studies finding direct effects of
discrimination on patterns of problem drinking (Yen, Ragland, GRENER, and Fisher 1999a, 1999b). Thus, discrimination experienced by African Americans is a stressor that places them at risk for the development of problem drinking patterns.

**Economic and Occupational Outcomes of Discrimination as Risk Factors.** Aside from the stressful psychological effects of perceptions of race bias and discriminatory practices, many African Americans experience a host of economic and occupational stressors that reflect their disadvantaged status in American society. For instance, the African American unemployment rate remains approximately twice that of Whites (Jaynes and Williams 1989; Farley 1984). Moreover, employed African Americans differ significantly from White workers with respect to a wide range of employment conditions and rewards. Relative to Whites, African American workers tend to be concentrated in low-paying and low-skilled occupations and have jobs that provide lower levels of non-material rewards (Tuch and Martin 1991). African American workers also are less likely to attain positions of authority within work organizations (KLUGEL 1978); experience fewer intra-firm promotions (Sandefur 1981); are more often subject to bureaucratic rather than informal social control (Blum, Harwood, and Roman 1992); are more likely to be underemployed (Terry 1981); and realize lower economic and occupational returns to education (STOLZENBERG 1975). Further, African Americans are over-represented in firms in the economic periphery where opportunities to develop human capital are limited (Beck, Horan, and Tolbert 1978), and experience greater job insecurity due to their greater likelihood of displacement during economic recessions (DiPRETE 1981). Finally, affirmative action programs notwithstanding, African Americans continue to encounter discriminatory hiring practices (FeAGIN and FeAGIN 1986) and barriers to membership in industrial and trade unions (Bonacich 1976; Leigh 1978).

Considerably less clear is whether the stresses associated with these patterns of economic and occupational marginality place African American workers at risk for the development of alcohol problems. There appears to be ample theoretical and empirical support, however, for the general contention that economic stress places individuals at greater risk for the development of alcohol
problems. Studies have consistently shown that alcohol problems are more prevalent among the economically disadvantaged (Cahalan and Cisin 1968; Ojesjo 1980; Room 1977; Trice and Roman 1973); those experiencing economic strain (Pearlin and Radabaugh 1976; Seeman and Seeman 1992); and the unemployed (Catalano, Dooley, Wilson, and Hough 1993; Ojesjo 1980; Smart 1979). Particularly relevant to this last point, a recent analysis of the effects of unemployment on drinking problems found being unemployed placed African American men at significantly higher risk for negative drinking consequences (Herd 1994a). Similarly, the concentration of alcohol problems among members of lower socioeconomic groups also seems to apply to members of the African American population (Herd 1985). Finally, although not specific to African Americans, there is evidence that the threat of job loss is associated with health-related outcomes (Catalano and Serxer 1992; Catalano, Rook, and Dooley 1986), including alcohol consumption and instrumental drinking (Steffy and Laker 1991).

Similar to economic stress, a growing body of literature indicates that various forms of problem drinking are at least modestly affected by the pressures of job demands that exceed individual stress thresholds. Drinking outcomes have also been related to the estrangement from the social matrix experienced by workers who find their jobs to be non-rewarding and unchallenging (Martin 1990). Stressful dimensions of work related to employee drinking behaviors include low levels of pay and fringe benefits (Martin, Blum, and Roman 1992); unfair promotion opportunities (Fennell, Rodin, and Kantor 1981); low levels of job complexity (Parker and Brody 1982; Parker and Farmer 1988); low levels of decision latitude (Bromet, Dew, Parkinson, and Schulberg 1988) and low levels of job satisfaction (Martin and Roman, 1996).

Thus, to the extent that African American workers as a group are likely to experience a variety of stressors related to marginal economic and occupational statuses, we expect that reports of alcohol problem behaviors and outcomes will be higher among African American workers who report high levels of economic strain, who are at the lower brackets of household income and who perceive their jobs to be unrewarding, unchallenging, and/or stressful.

**Race, Stress, and Drinking Motives.** The perspective on African American workers' problem drinking developed to this point
suggests that stress associated with perceptions of prejudice/discrimination and economic/occupational marginality affect African American workers’ alcohol consumption patterns directly. While direct effects of these structurally-based risks are expected, recent studies provide evidence that the linkage between chronic stress and drinking is more complex than a simple direct effects model (Martin, Roman, and Blum 1996; Martin, et al. 1992; Harris and Fennell 1988). In particular, there is evidence that elevated levels of stress also indirectly influence alcohol consumption patterns by conditioning intra-psychic dispositions. Specifically, one result of perceived and/or experienced disadvantage may be to condition individual definitions of alcohol use as an effective coping mechanism. Such individual definitions/ reasons for drinking when motivated by an attempt to modify or alleviate unpleasant affect are typically characterized as “escapist” and may reflect attempts at self-medication (Martin, et al. 1992). More important, escapist reasons for drinking have been found to interact with levels of consumption and ultimately increase the probability of alcohol abuse (Donovan and Marlatt 1982; Farber, Khavari, and Douglass 1980). There are several reasons to examine escapist motives for drinking as a risk factor in the current study. Previous research has found high rates of escape or personal effects drinking among members of ethnic and racial minority groups (Cahalan and Cisin 1968; Cahalan, Cisin and Crossley 1969; Neff 1991), particularly among African American men (Williams, Takeuchi, and Adair 1992). More important, there is evidence that escapist coping styles may be more common when the individual perceives that he or she has little or no control over outcomes (Folkman 1984). Thus, insofar as African Americans have little control over their sources of stress (i.e., racial biases, discrimination, and marginality), escapist drinking may become more likely (Huselid and Cooper 1992).

Thus far we have considered the influences of three classes of alcohol risk factors. It is important to note, however, that while there is good reason to expect that race-specific stressors place African American workers at increased risk for the development of alcohol problems, it is also likely that there are unique protections available in the African American community that can mitigate against the development of these problems. In particular, there is at least cursory
evidence that having a strong sense of racial group identification, and/or involvement in African American religious life, are two protective factors that mitigate against problem drinking and make the development of escapist drinking motivations less likely.

**Racial Group Identification.** With one notable exception (Herd and Grube 1996), the potential influence of racial group identification on the drinking patterns of African Americans has not been the subject of a systematic inquiry. For the most part the literature on racial group identification among African Americans focuses on the feelings that some African Americans have about being Black, on their sense of group commitment and cohesion, and on their perceived location in the social structure (Broman, Neighbors, and Jackson 1988; Demo and Hughes 1990; Porter and Washington 1979). Most commonly, this literature has sought to identify the sociodemographic correlates of racial identification (Demo and Hughes 1990; Broman, et al. 1988; and Sanders and Vetta 1993). Thus, studies of African American group identity have identified several features of the experience of being Black in American society that might affect the intensity of racial group identification. Less frequently, however, the racial group identification dimension has been related to behavioral and attitudinal outcomes, with the majority of these treatments examining either political participation (Ellison and London 1992; Miller, Gurin, Gurin, and Malanchuk 1981) or feelings of personal efficacy (Hughes and Demo 1989; Gurin and Epps 1975). There is, however, recent evidence that racial identification is related to the drinking patterns of African Americans. For example there is documentation that African Americans with little or no sense of racial identity are more likely to abuse alcohol (Caution 1986; Gary and Berry 1986; Harper and Saifnoorian 1991). Additionally, racial identity has been found to be related to attitudes toward the use of alcohol, with African Americans who are more cognizant of racial issues being less tolerant of alcohol abuse (Gary and Berry 1986). Caution (1986) has also suggested that racial identification provides a protective device by fostering the development of values inconsistent with alcohol abuse. Finally, in the most directly relevant analysis to date, Herd and Grube (1996) provide clear evidence that the strength of Blacks' racial identification has important negative effects on drinking patterns. We expect, then,
that reports of alcohol problem behaviors and outcomes will be lower among African American workers who report a strong sense of racial identification.

**Participation in the Black Church.** Traditionally, the Black church has occupied a unique place in the lives of African Americans. Specifically, the Black church is argued to maintain cohesion in African American community by acting as an agency of moral guidance and conservator of African American political leadership; and being the organizational center of African American community life (Taylor and Chatters 1991; Jaynes and Williams 1989; Levin 1984; Frazier 1963). Moreover, as the African American population became increasingly urbanized in the early part of the twentieth century, the church functioned as a key linkage between rural migrants and their new urban locales. Over time, in fact, the role of the church in the lives of large numbers of African Americans has become increasingly secular, as evidenced, for instance, by the church’s importance in the civil rights movement of the 1950s and 1960s (Morris 1984).

The church continues to assume a leadership role in many sectors of the African American community today. The continuing significance of religion in the lives of many African Americans is clearly underscored by recent work that portrays religion as an important coping mechanism for negotiating life’s stresses (Taylor and Chatters 1991; Krause and Tran 1989; Neighbors, Jackson, Bowman, and Gurin 1988). As Taylor and Chatters (1991: 106) note, the traditionally escapist and “other-worldly” emphasis of many Black churches, particularly in the rural south, was “Black religion’s remedy for the deleterious effects of pervasive discrimination and racism, and the resulting psychological alienation and demoralization....” In similar fashion, the role of religion in the lives of many African Americans persists today, making the church the most important social institution in the African American community.

Despite continuing interest in the role of the Black church, few empirical studies have been conducted on the insulating effects of Black religious experience (Taylor and Chatters 1991), including studies of religion’s role as a factor mitigating against maladaptive behavior such as problem drinking. There are several reasons to expect that involvement with and commitment to the precepts of Black religious life will decrease alcohol abuse. To begin, there is
evidence that reliance on prayer and other religious means of coping is related to lower alcohol consumption and suppresses the development of escapist reasons for drinking (Stone, Lennox, and Neal 1985; Timmer, Veroff, and Colten 1985). Moreover, Krause and Tran (1989) report that, although high levels of personal stress among African Americans lead to declines in self-esteem and in feelings of personal efficacy, involvement in organized religion mitigates against these outcomes. Similarly, Chatters and Taylor (1989) found that prayer is an important coping mechanism, particularly for older African-Americans, in dealing with a variety of personal problems. Moreover, participation in the Black church at an early age has been found to function as an important personal control that helps determine exposure to drinking environments (Donovan and Jessor 1978). Finally, Herd (1994a 1994b) documents a pattern where religious involvement generally, and involvement in conservative Protestant denominations in particular, significantly reduce the probability that African-Americans will report problems related to their drinking, and also influence African-Americans’ attitudes toward drinking, presumably an outcome of access to protective networks and resources.

Thus, the church is a continuing source of spiritual sustenance for many African-Americans. Many in the African-American community look to the church as a source of guidelines for moral behavior, and recent literature suggests the importance of locating change strategies within the religious sphere (Knox 1985; Levin 1984). We expect, then, that commitment to religious life will protect against or suppress African-Americans’ instrumental drinking as a mechanism for coping with stress. We also expect that in the face of stresses associated with marginality and discrimination, the endorsement of escapist reasons for drinking will be lower when the individual is involved in the Black church.

**Individual Attributes.** The discussion to this point has sought to justify a perspective that examines the influences of various risk and protective processes on the problem drinking patterns of African American workers. It is important to note, however, this perspective does not assume that these influences operate completely independent of the background attributes of individual workers. Research has repeatedly demonstrated that several individual
attributes have important effects on problem drinking behaviors. For example, national data indicate that problem drinking patterns and outcomes are inversely related to education and age (Clark and Hilton 1991). Similarly, alcohol problems are known to be less common among married persons and rural residents (Clark and Hilton 1991). Thus, we will also examine the dispositional effects of schooling, age, marital status and place of residence on the drinking patterns of African-American workers.

To sum up, the current study of African American problem drinking seeks to account for intra-group variation in Black workers' drinking patterns by examining the influences of both alcohol-related risk and protective factors. Examining these relationships will provide a broad data base on the sources of, and protections against, alcohol problems among African Americans, and will fill a gap in our knowledge of the impact of African Americans' employment experiences on drinking behaviors. However, since we focus on these patterns in the 62 percent of the population of all African American adults who are currently employed, patterns identified here do not necessarily apply to the entire population of adult African Americans. Specifically, our analyses do not include African Americans not currently in the labor force (i.e., those individuals who have never worked, or who may have worked in the past but have been out of work for a year or more). Since work is a major integrating force in American society, the hypothesized links among risks, protective factors and alcohol problems may operate differently among African Americans who are out of the labor force.

DATA AND METHODS

Sampling. The current study of African American workers' drinking reports data from the male subsample (n=826) drawn from the first-wave of the 1998-2000 National Survey of Black Workers (NSBW). The NSBW reports data from a nationally representative cross-section of 2,638 employed African Americans. Eligible respondents are currently employed adults (eighteen years or older) drawn from the continental United States, and who reside in households with telephone access. Individuals who reside in institutional settings such as prisons and hospitals, those who are
not English-speaking and residents of households without telephone availability are not included in this survey. Data for wave 1 of the NSBW were collected by telephone interviews approximately 20-25 minutes in length conducted by the survey research centers at the University of Georgia, Kent State University and Indiana University. The overall response rate for this survey was 69.4 percent.

Sample elements for the cross-section of employed African American workers were selected by means of a race-targeted single-stage Random Digit Dial (RDD) technique. Single-stage RDDs permit a natural stratification of the sample by state, county, and area code (Frey 1989; Groves and Kahn 1979) and theoretically provide an equal probability of reaching all households in the nation with a telephone access line (i.e., a unique telephone number that rings in that household only), regardless of whether that phone number is published or unlisted (Lavrakas 1993). The current sampling design differs from traditional single-stage procedures in a major regard. Specifically, since African Americans represent only 10.9 percent, a relatively small proportion of the total population of households in the U.S. (U.S. Census 1991), it is inefficient to rely on a simple random sampling design. Instead the current sampling design for the African American cross-section utilized an RDD design that first correlates the probability of ethnic densities within census tracts to Central Office Codes (i.e., three digit dialing prefixes, COC). Utilizing this approach the current sample selected respondents from the 2,996 COCs where the proportion of African-American households was 30 percent or higher — approximately 60 percent of all directory listed African American households in the U.S. (Survey Sampling Incorporated 1993).

Measures of Drinking Patterns. The majority of drinking-related research has viewed the overall level of alcohol use as an indicator of the presence of alcohol problems (Martin, et al. 1992). The justification for this emphasis is straightforward: excessive levels of consumption place individuals at risk for events of impaired role performance, deviant acts, and/or the development of other alcohol-related problems. In the current study, overall consumption of alcohol is assessed by frequency and quantity of consumption (FQ), two standard items. First, respondents were asked how frequently they had a drink of beer, wine, or liquor in the past month (range: zero
days to daily), and second, respondents were asked how many drinks they consume in a typical drinking episode. The combination of responses to these two questions form the basis of the measure of overall monthly consumption.

Cross-sectional survey based measures of alcohol problems have also developed a number of disaggregated measures of problem drinking outcomes (American Psychological Association 1987; Clark and Hilton 1991; Grant, Harford. Hasin, Chou, and Pickering 1992; Smart, Adlaf, and Knoke 1991). The current analyses adopts four commonly employed measures/scales of alcohol problems: 1) a single-item maximum consumption (MAX) as a measure of heavier drinking; 2) the CAGE alcoholism screen for problem drinkers (CAGE); 3) a measure of job escape drinking (JOB-RELATED); and 4) a measure of more general personal effects drinking (PERSONAL EFFECTS).

We use a single-item, the maximum number of drinks consumed in a drinking episode in the last year (MAX) as an indicator of heavier drinking. The CAGE Alcoholism Screen is a commonly employed alcoholism screening instrument comprised of responses to four items: (1) have you ever felt that you should cut down on your drinking?; (2) have people annoyed you by criticizing your drinking?; (3) have you ever felt bad or guilty about your drinking?; and (4) have you ever had a drink first thing in the morning to steady your nerves or get rid of a hangover? Recent applications have found the CAGE to be a useful measure of the prevalence of alcohol problems in general population, correlating significantly with the frequency of drinking and the frequency of consuming five or more drinks (Smart et al. 1991: 595). Responses on each item are coded yes-no with respect to occurrence and summed to produce a composite measure of problem drinking with a score of two or more taken as an indication of potential problems with alcohol.

We include two measures of escapist drinking motives in our analyses of problem drinking. Job-related escape drinking is scaled as responses to items that ask if the respondent drinks to (1) relax after work; (2) relieve job tension; (3) forget problems at work; and (4) when there is pressure at work. A more general measure of personal effects drinking is measured by three items asking whether the respondent drinks to (1) feel more comfortable; (2) relax or “unwind” on the weekend; or (3) cheer up when depressed or sad.
Measures of Risk and Protective Factors. We examine the influences of several risk and protective factors on drinking patterns. Perceptions of economic insecurity, is scaled as responses to a series of items asking for the respondent’s overall assessment of (1) household income and financial security; (2) whether household income is sufficient to meet monthly family expenses and needs; and (3) whether family income is sufficient to provide comfort. A second component of marginality is assessed with a series of items tapping perceptions of job insecurity, including (1) the likelihood that the respondent will lose his/her job in the near future; (2) how easily the respondent’s employer could replace her/him; and (3) a direct question regarding the degree of security the respondent perceives in his/her current job.

The respondent’s job-reward characteristics are measured with four scales tapping autonomy, complexity, and pressure. Job autonomy is scaled as responses to four items: (1) freedom to decide how job tasks are accomplished; (2) ability to make independent decisions; (3) ability to take part in decisions affecting the respondent; and (4) having “say” over what happens on the job. Job complexity is measured also by four items: (1) respondent’s job requires a high degree of skill; (2) requires that she/he keeps learning new things; (3) requires him/her to be creative; and (4) requires the respondent to perform repetitive tasks (reverse coded). Job pressure is scaled as responses to five items: (1) respondent’s job requires her/him to work fast; (2) respondent’s job requires her/him to work hard; (3) respondent’s job requires her/him to do excessive amounts of work; (4) respondent doesn’t have enough time to complete tasks; and (5) respondent experiences conflicting demands at work. Overall job satisfaction is scaled as the composite of responses to five items: (1) how satisfied workers are at the present; (2) how well the respondent’s job measures up to initial expectations; (3) whether the respondent anticipates looking for a new job within the next year; (4) whether the respondent would take the same job again; and (5) whether the respondent would recommend his/her job. Finally, a single-item ordinal measure of income is included as a measure of financial rewards.

Perceptions of Prejudice and Discrimination. While social researchers have a longstanding history of studies of racial discrimination and prejudice, surprisingly few studies have directly
assessed African-Americans' perceptions of, and experience with, discrimination. Therefore, there are only a few previously developed items tapping African-Americans' perceptions and experiences with discrimination, and even fewer to assess perception of race-based prejudices.

Studies that have addressed African-Americans perceptions and experience with discrimination typically focus on whether respondents report having been discriminated against in either hiring or employment conditions. Less frequently respondents are also asked about the extent of discrimination in housing and schooling. Using items such as those drawn from the General Social Surveys (GSS) and Quality of Employment Surveys (QES) we scale discrimination in two realms. Current job discrimination is scaled as the composite of responses to 4 items, and includes whether the respondent believes that on his/her current job: 1) blacks are treated badly at his/her job; 2) that she/he has was denied a promotion because of race; 3) that he/she was ever discriminated against in hiring; and 4) that he/she personally experienced discriminatory behaviors. Perceptions of more general discrimination and experiences are taken as the composite of responses to five items assessing whether the respondent has ever experienced discriminatory behaviors: 1) school; 2) housing; 3) hiring; 4) promotions; or 5) firing. We also scale Black workers' perceptions of the extent of race-based prejudice in the U.S with three standard items that assess whether the respondent thinks: 1) that prejudice against African-Americans is widespread; 2) that prejudice against African-Americans has increased in recent years; and 3) that prejudice against African-Americans is likely to increase in the future.

Racial identification. Earlier treatments of racial identification have embodied a range of dimensions, the most common being a sense of connectedness or closeness to other African-Americans. Drawing on the work of Allen, Dawson and Brown (1989) and Herd and Grube (1996), we use four items to tap racial identification: 1) preference for African-American political candidates; 2) preference for African-American merchants; 3) how important is it to read African-American print media; and 4) how important is it for the respondent to participate in African American organizations. We also include a single item that assesses the overall importance of Black
culture in the respondent's life.

**Participation in the Black Church.** The measure of religiosity used in this study is a composite of six standard items: (1) how often the respondent reads religious materials; (2) how often the respondent watches religious programs on television; (3) how often the respondent prays; (4) how often the respondent asks others to pray for him/her; (5) how important the respondent believes it is for African-Americans to take their children to church; and (6) the respondent's self-reported religiosity. We also include a single item assessing the frequency of church attendance.

**Control Variables.** Finally we include measures of several background attributes found to have nontrivial effects on alcohol consumption. These include age (in years); schooling (in years); gender; marital status; and place of residence.

**FINDINGS**

**Descriptive Analyses.** Table 1 reports means, standard deviations, and ranges on all single and multi-item indicators. Internal consistency reliability coefficients (Cronbach’s Alpha) are displayed for all cumulative scales. These data indicate that our subsample of African American men are on average 37 years of age with a majority of respondents (64 percent) being unmarried, with a majority (62.5 percent) residing in urban or suburban places. More than 60 percent report having completed schooling beyond a high school diploma (data not shown) but 4 in 10 respondents (40.1 percent) report annual incomes of less that $25,000. The sample also indicates relatively low monthly alcohol consumption, reporting having on average approximately seven drinks per month, with the greatest number of drinks consumed at any time in the past year being approximately 2 drinks.

**Correlational Analyses.** To explore the influences of various social structural and cultural risk and protective factors on the drinking patterns of African American workers we conducted a series of zero-order correlational analyses. These data are reported in Tables 2 thru 5 below.

Previous research has found that workers are at heightened risk for problem drinking behaviors when they perceive their jobs to
be unrewarding, unchallenging, and/or stressful. Table 2 provides estimates of the impact of these job-reward characteristics on the drinking patterns of African American workers. According to these
TABLE 2
Association of Job-Reward Factors with Drinking Outcomes for Employed African American Men, 2000 NSBW (n=826)

<table>
<thead>
<tr>
<th></th>
<th>Autonomy</th>
<th>Complexity</th>
<th>Job Pressure</th>
<th>Income</th>
<th>Job Satisfaction</th>
</tr>
</thead>
<tbody>
<tr>
<td>-0.01</td>
<td>0.19</td>
<td>0.21</td>
<td>0.075*</td>
<td>0.041</td>
<td></td>
</tr>
<tr>
<td>0.020</td>
<td>0.033</td>
<td>0.022</td>
<td>-0.033</td>
<td>-0.032</td>
<td></td>
</tr>
<tr>
<td>0.025</td>
<td>0.043</td>
<td>0.122**</td>
<td>0.176**</td>
<td>0.140**</td>
<td></td>
</tr>
<tr>
<td>0.009</td>
<td>0.025</td>
<td>0.027</td>
<td>-0.031</td>
<td>-0.152***</td>
<td></td>
</tr>
<tr>
<td>-0.063*</td>
<td>-0.115***</td>
<td>0.115**</td>
<td>0.160***</td>
<td>0.133**</td>
<td></td>
</tr>
</tbody>
</table>

***p<.001; **p<.010; *p<.050 (one-tailed tests)

data, taken alone only job satisfaction significantly impacts monthly consumption, and none of the job rewards emerge as significant correlates of maximum consumption. With regard to the three more problematic outcomes, however, a somewhat more complex pattern is evidenced. Specifically, as expected, personal effects drinking, job escape drinking, and problem drinking as assessed by the CAGE, are significantly higher at greater levels of reported job pressure and lower levels of job satisfaction. It should also be noted that higher levels of job autonomy and income have important negative influences on job-related and CAGE consumption drinking, respectively.

The exploratory model examined in the current study argues that African American workers are at heightened risk for the development of alcohol problems that result from race-based prejudices, biases and discriminatory practices that increase stress levels and that have relegated large numbers of these workers to segregated and marginal positions in the economy and the larger social structure. In Table 3 we assess the association of five race-specific risk factors with the alcohol outcomes. These data suggest several interesting findings. While unrelated to either monthly0 consumption or maximum consumption, respondents who report higher levels of economic insecurity also score significantly higher on the measures indexing personal effects drinking, job-related
### TABLE 3
Association of Risk Factors with Drinking Outcomes for Employed African American Men, 2000 NSBW (n=826)

<table>
<thead>
<tr>
<th></th>
<th>F0</th>
<th>MAX</th>
<th>Personal Effects</th>
<th>Job Related</th>
<th>CAGE</th>
</tr>
</thead>
<tbody>
<tr>
<td>Economic Insecurity</td>
<td>.018</td>
<td>.034</td>
<td>.136**</td>
<td>.158**</td>
<td>.166**</td>
</tr>
<tr>
<td>Job Insecurity</td>
<td>.087*</td>
<td>.093**</td>
<td>.004</td>
<td>.051</td>
<td>.075*</td>
</tr>
<tr>
<td>Perceptions of Prejudice</td>
<td>.049</td>
<td>.043</td>
<td>.064*</td>
<td>.115**</td>
<td>.170**</td>
</tr>
<tr>
<td>General Discrimination</td>
<td>.004</td>
<td>.010</td>
<td>.045</td>
<td>.125***</td>
<td>.065</td>
</tr>
<tr>
<td>Job Discrimination</td>
<td>-.010</td>
<td>.012</td>
<td>.010</td>
<td>.092**</td>
<td>.005</td>
</tr>
</tbody>
</table>

***p<.001; **p<.010; *p<.050 (one-tailed tests)

drinking and problem drinking (CAGE), a pattern that is also evidenced among respondents who perceive higher levels of prejudice against African Americans. Respondents reporting higher job insecurity, on the other hand, do emerge as drinking significantly more per month and consuming significantly more drinks in their maximum drinking episode in the previous month. Job insecurity is also significantly related to problem drinking as assessed by the CAGE. It is also interesting to note that contrary to expectations, personal experiences with either general or job-related discriminatory behavior are significant correlates of only one of the five drinking outcomes — job-related escapist drinking.

The correlational analyses reported in Tables 2 and 3 broadly support the relationships between the risk factors outlined in our exploratory model of Black workers’ drinking patterns. That model, however, also posits that there are unique protections available in the African American community that can reduce the likelihood of developing drinking problems. In particular, having a strong sense of racial group identification, and/or involvement in African American religious life, are two protective factors that are expected to reduce
the likelihood of problem drinking and make the development of instrumental drinking motivations less likely. We assess this possibility in Table 4.

Examination of the data in Table 4 indicates that each of the four hypothesized protective factors has at least some expected relationships with the alcohol outcomes. Most notable in this regard

**TABLE 4**

**Association of Protective Factors with Drinking Outcomes for Employed African American Men, 2000 NSBW (n=826)**

<table>
<thead>
<tr>
<th></th>
<th>FB</th>
<th>MAX</th>
<th>Personal Effects</th>
<th>Job Related</th>
<th>CAGE</th>
</tr>
</thead>
<tbody>
<tr>
<td>Racial Identification</td>
<td>-.089**</td>
<td>.005</td>
<td>.051</td>
<td>.007</td>
<td>-.010</td>
</tr>
<tr>
<td>Impact of Black Culture</td>
<td>-.111***</td>
<td>-.070*</td>
<td>-.042</td>
<td>.085**</td>
<td>-.167**</td>
</tr>
<tr>
<td>Church Attendance</td>
<td>-.226***</td>
<td>-.169***</td>
<td>-.109***</td>
<td>.123**</td>
<td>-.193***</td>
</tr>
<tr>
<td>Religiosity</td>
<td>-.239***</td>
<td>-.109**</td>
<td>-.144***</td>
<td>-.160***</td>
<td>.015</td>
</tr>
</tbody>
</table>

***p<.001; **p<.010; *p<.050 (one-tailed tests)

are the negative influences of the church-related protections where 9 of 10 possible relationships are statistically significant. Also, respondents reporting more frequent church attendance reported significantly lower levels of monthly consumption, maximum consumption, personal effects drinking, job-related drinking and problem drinking behaviors. Similarly, respondents who score higher on the measure of religiosity report significantly lower monthly consumption, maximum consumption, personal effects drinking and job-related drinking.

A somewhat more complex pattern is evidenced in the relationships of the two measures of racial identification to the alcohol outcomes. To begin, both overall racial identification and the respondent's report of the importance of Black culture have a statistically significant negative association with total monthly consumption. Respondents who report a greater importance of Black
culture in their lives also report significantly lower levels of maximum consumption, job-related drinking, and problem drinking as indexed by the CAGE.

The final set of associations explored in this research, the relationships between sociodemographic attributes and alcohol outcomes are displayed in Table 5. According to these data, with the

<table>
<thead>
<tr>
<th>TABLE 5</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Association of Sociodemographic Attributes with Drinking Outcomes for Employed African American Men, 2000 NSBW (n=826)</strong></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th></th>
<th>FR</th>
<th>MAX</th>
<th>Personal Effects</th>
<th>Job Related</th>
<th>CAGE</th>
</tr>
</thead>
<tbody>
<tr>
<td>Age</td>
<td>.085**</td>
<td>.088**</td>
<td>-.040</td>
<td>.027</td>
<td>.036</td>
</tr>
<tr>
<td>Schooling</td>
<td>-.139**</td>
<td>-.008</td>
<td>-.102**</td>
<td>.081**</td>
<td>.148***</td>
</tr>
<tr>
<td>Married (1=yes)</td>
<td>.068**</td>
<td>-.088**</td>
<td>-.036</td>
<td>.029</td>
<td>-.100***</td>
</tr>
<tr>
<td>Rural (1=yes)</td>
<td>.040</td>
<td>.012</td>
<td>.024</td>
<td>.050</td>
<td>.056</td>
</tr>
</tbody>
</table>

***p<.001; **p<.010; *p<.050 (one-tailed tests)

exception of rural residence, each of these background variables is associated with the various alcohol outcomes. Consistent with previous research, respondents with greater educational attainment emerge as drinking less per month, and as less likely to endorse personal effects and job-related reasons for their drinking or to engage in CAGE problem drinking behaviors. A similar pattern is observed among married respondents who drink significantly less per month or per drinking episode and who are also less likely to engage in CAGE problem drinking. Finally, total monthly consumption of alcohol increases significantly with the age of the respondent although older respondents report a significantly lower number of drinks per episode.
SUMMARY AND CONCLUSIONS

In this study we derived a preliminary theoretical modeling of African American drinking that incorporated a series of social structural and cultural risk and protective factors that were expected to account for intra-group variations in the drinking patterns of Black workers. Exploratory correlational analyses broadly verified the relationships implied this model.

Turning first to the influences of Blacks’ placement in non-rewarding or stressful jobs, we found only modest evidence that these characteristics of jobs directly impact drinking patterns. Only perceptions of job pressure and levels of satisfaction with work emerged as consistent correlates. This pattern is not unlike that reported in previous studies of these relationships (Martin et al 1992; Martin and Roman, 1996) where the influences of job characteristics on drinking were mediated by levels of job satisfaction. Subsequent analyses of these data will incorporate this more complex modeling of the influences of jobs on drinking behaviors. It is also important to note that in these data, Black workers respond to stressful or non-rewarding aspects of their jobs in ways that are quite similar to their White counterparts, a pattern also established in previous analyses (Tuch and Martin, 1991).

The exploratory model examined in the study suggests that African American workers are exposed to unique stressors that are the result of race-based prejudices, biases and discriminatory behaviors that elevate the risk for alcohol problems. Here our analyses found evidence in support of the expected relationships. In particular we have clear evidence that African American workers who report high levels of economic distress, and who perceive widespread racial animus are significantly more likely to engage in instrumental and problem drinking behaviors. Unexpectedly, however, reports of general and current job discrimination did not emerge as consistent correlates of drinking behaviors, with only one drinking outcome — job-related drinking — significantly related to experiences with discrimination. This finding is perhaps partially explained by a tendency noted in earlier research for Blacks to report experiencing significantly fewer discriminatory actions in their personal lives than they see occurring in the larger social structure. Nevertheless, these preliminary analyses provide sufficient justification for the inclusion.
of variables that tap the deleterious impact of various stressors related to anti-Black affect, discrimination and economic insecurity on problem drinking outcomes.

Perhaps the most consistent findings of the current analyses were found in the examination of the associations between drinking outcomes and participation in the Black church and racial identity. Both were believed to offer unique protections that would reduce the risk that Black workers will develop alcohol problems. As expected, both racial identity and church participation have important influences on the drinking outcomes and subsequent tests of the model should include estimates for these direct effects. What remains unclear, however, is whether racial identity and involvement in African American religious life provide coping resources that are additional protective “buffering” or moderating influences, and thus reduce the direct impact of the previously described race-based risks for instrumental drinking. Subsequent tests of the model will address this possibility by fitting a series of non-additive terms that interact the risk and protective factors.

On the basis of these preliminary analyses, we have broadly established the theoretical utility of a model of drinking behaviors that focuses on a series of empirically verified race-specific risks and protections that may at least partially account for African Americans’ intra-group variation in drinking patterns and outcomes. Thus, the proposed model rejects the assumption that African Americans’ drinking patterns are uniform. Equally important, this model provides a much-needed alternative to the ‘Social Disorganization Paradigm’ that has too long dominated the sociological discourse on race.

**Methodological Note**

To create all multi-item scales we first conducted a series of principal components factor analyses to establish the unidimensionality of the measure. Subsequent scale scores are taken as the simple sum of the re-coded component items and range from low to high.
REFERENCES


SSI *Information Sheet.* Fairfield, CT: SSI.


