Epidemiologic data provide valuable information on the problems associated with alcohol consumption, high-risk drinking, and related psychiatric conditions. Collected over time, these data allow us to identify where disparities exist, to understand the genetic and environmental underpinnings that contribute to them, and to develop and test hypotheses aimed at eliminating them. Data on cultural variables, such as acculturation coupled with the longitudinal design, enable us to generate and test hypotheses on culture and how it may affect the course of alcohol use disorders (AUDs)—from the likelihood of their occurrence to their natural course and the correlates of disease.

NIAAA Epidemiological Surveys

NIAAA has invested more than two decades to conducting large, general population surveys (43,000 respondents) among U.S. adults 18 years of age and older. These surveys have included extensive questions concerning alcohol consumption, items designed to provide psychiatric classification of alcohol use disorders, and a variety of other questions on family history of alcoholism, alcohol treatment, health conditions, major depressive disorder, and basic demographic information. The National Epidemiologic Survey on Alcohol and Related Conditions (NESARC Wave I 2001 to 2002 and Wave II 2004 to 2005) is a longitudinal survey designed to assess the incidence and prevalence of AUDs and co-morbid psychiatric illnesses. As with its predecessor, the National Longitudinal Alcohol Epidemiologic Survey (NLAES), NESARC addresses a wide range of AUD indicators, such as the quantity and frequency of alcohol consumed; drinking patterns, including binge drinking; and detailed demographic and socioeconomic data. Both surveys used the same AUDADIS instrument, providing an opportunity to analyze trends. For example, between 1991 to 1992 and 2001 to 2002 increases in alcohol abuse were observed among men, women, and young Black and Hispanic minorities, while the rates of dependence rose among men, young Black women and Asian men. These findings have underscored the need to continue monitoring prevalence and trends and to design culturally sensitive prevention and intervention programs.

Health Disparities Relevance

Both NLAES and NESARC are important resources for the study of race/ethnic differences in alcohol use, AUDs, and related psychiatric conditions. Each survey oversampled African Americans and Hispanics to provide sufficient numbers for analysis (approximately 20 percent each of the total sample). For policy and prevention efforts, information on changes in vulnerable groups may highlight the need for focused planning on both national and local levels. The fact that accurate data over time have not been available on trends in the incidence and prevalence of alcohol abuse and dependence reflects a major gap in public health information. NIAAA’s commitment to addressing this gap, particularly as it relates to health disparities, has been the basis for efforts to further understand the context in which these problems develop among those groups at greatest risk and targeted translational research designed to prevent those problems in specific minority, rural, and low-income populations.