Variability in Drug Use and Intervention Services Utilization Across Rural Communities

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Interviews were conducted with a random sample of adults living in the lower Rio Grande Valley of Texas, a region adjacent to the Mexican border. The present analysis examines responses from 400 residents of rural colonias in comparison to 400 residents of small towns in the same geographic region.

1. Cultural impediments in working with the predominantly Hispanic population on the border include having to take account of differing levels of acculturation, language ability, and respondents' sensitivity regarding immigration status. Poverty and lack of health insurance are overarching issues affecting work in this geographic area.

2. Qualitative reports from interviewers suggest that the collection of household survey data can be problematic due to fear and distrust of strangers, crowded households with little privacy for interviews, and the tendency for men to remain present and/or interfere in interviews with their wives. Using older women who are local residents and somewhat assertive as interviewers proved effective in enhancing participation. The fact that rural colonias are not identified as separate places in the Census makes it difficult to derive a sampling frame and to select block
groups comparable to those used for sampling urban areas.

3. Binge drinking and alcohol dependence were higher in colonias than in urban areas after taking other demographic variables (gender, age, ethnicity, education, income, marital status and employment status) into account. Social and cultural factors predictive of illicit drug use and heavy or binge drinking in rural areas were frequent contact with friends and generation of immigration. Factors associated with lower alcohol and drug problems were frequent contact with relatives and Anglo acculturation. Interestingly, higher levels of neighborhood social cohesion and informal social control were associated with lower past-year drug use in urban but not in rural areas.

4. Service utilization was related to attitudes, beliefs, acculturation, and frequency of contact with family and friends in somewhat different ways in rural and urban areas; however, the numbers who ever received treatment in this study were small so some findings are suggestive only. Colonia residents were more likely than small town residents to have ever talked to someone about a drug or alcohol problem they were having, and to have received substance abuse treatment, if they needed it. All border residents reported they would be much more likely to seek help for alcohol or drug problems from medical or professional services than from religious sources,
family and friends, or curanderos, but rural residents were somewhat more likely than urban residents to endorse professional treatment over other sources. Positive attitudes towards professional services correlated with actually receiving such services among those who needed them in rural areas, but had no association in urban areas.

The patterns of association between socio-cultural factors and drug use prevalence, problems and treatment are complex and need more investigation, but suggest the need for outreach and engagement strategies that take social contacts and varied acculturation levels into account.