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The Importance of Family Dinners IV

September 2007

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Accompanying Statement by Joseph A. Califano, Jr., Chairman and President

For more than a decade, CASA has been conducting a survey of the attitudes of teens and those, like parents, who most influence them. While other surveys measure the extent of substance abuse in the population, the CASA survey seeks to identify factors that increase or diminish the likelihood that teens will smoke, drink, use illegal drugs or abuse prescription drugs. We believe that parents, armed with this knowledge, can help their teens grow up drug free.

This nation's drug problem is all about kids. *A child who gets through age 21 without smoking, abusing alcohol or using illegal drugs is virtually certain never to do so.* And no one has more power to prevent kids from using substances than parents. There are no silver bullets; unfortunately, the tragedy of a child's substance abuse can strike any family. But one factor that does more to reduce teens' substance abuse risk than almost any other is parental engagement, and one of the simplest and most effective ways for parents to be engaged in teens' lives is by having frequent family dinners.

This year, 59 percent of teens report having dinner with their families at least five times a week, the same proportion we have observed in the past several years, and an increase in family dining from the 1996 CASA survey, when the relationship of frequent family dinners to substance abuse risk was first detected.

Family Dinners and Teen Smoking, Drinking and Drug Use

Frequent family dining is associated with lower rates of teen smoking, drinking, illegal drug use and prescription drug abuse. Compared to teens who eat dinner frequently with their families (five or more family dinners per week), those who have infrequent family dinners (fewer than three per week) are:

- three and a half times likelier to have abused prescription drugs,
- three and a half times likelier to have used an illegal drug other than marijuana or prescription drugs,
- three times likelier to have used marijuana,
- more than two and a half times likelier to have used tobacco, and
- one and a half times likelier to have used alcohol.

Family Dinners and Current Teen Substance Use

Teens who have frequent family dinners are less likely to currently use marijuana and tobacco, drink alcohol and get drunk.

Compared to teens who eat dinner frequently with their families, those who have infrequent family dinners are:

- more than twice as likely to have used marijuana in the past 30 days,
- almost twice as likely to have drunk alcohol in the past 30 days,
- almost twice as likely to have used tobacco in the past 30 days, and
- more than one and a half times likelier to have gotten drunk in the past 30 days.

Family Dinners, Age and Substance Use

The relationship between frequent family dinners and substance use that we observe among all teens is also observed to varying degrees at every age level. The impact of frequent family dinners seems strongest among the youngest children in our survey, and the behavior that appears to be most significantly affected among teens of all ages is marijuana use.

Compared to 12- and 13-year olds who have frequent family dinners, 12- and 13-year olds who have infrequent family dinners are six times likelier to have used marijuana, more than four and a half times likelier to have used tobacco and more than two and a half times likelier to have used alcohol.

Compared to 14- and 15-year olds who have frequent family dinners, 14- and 15-year olds who have infrequent family dinners are three times likelier to have used marijuana and two and a half times likelier to have used tobacco.

Compared to 16- and 17-year olds who have frequent family dinners, 16- and 17-year olds who have infrequent family dinners are more than twice as likely to have used marijuana and almost twice as likely to have used tobacco.

At ages 14 through 17, those teens who have infrequent family dinners are likelier to have used alcohol than those teens who have frequent family dinners.

Family Dinners and Teens with Friends Who Use Substances

Teens who have infrequent family dinners are twice as likely to report that half or more of their friends currently drink beer or other alcoholic beverages, compared to teens who have frequent family dinners.

Teens who have dinner with their families less than three times a week are three times likelier to say half or more of their friends currently use marijuana, compared to teens who have dinner with their families at least five times a week.

The CASA survey and 15 years of my life devoted to understanding this problem lead me to this bottom line: preventing America's drug problems is not going to be accomplished in court rooms, legislative hearing rooms or classrooms, by judges, politicians or teachers. It will happen in living rooms and dining rooms and across kitchen tables--by the efforts of parents and families.

Chapter I

Introduction

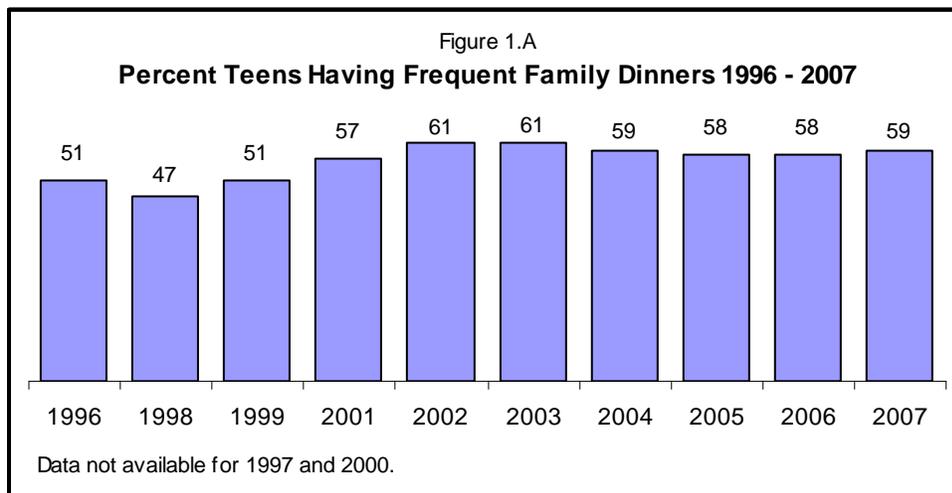
For more than a decade, CASA has been surveying the attitudes of teens and those, like parents, who most influence them. On August 16, 2007, CASA released the *National Survey of American Attitudes on Substance Abuse XII: Teens and Parents*. While other surveys measure the extent of substance abuse in the population, the CASA survey seeks to identify factors that increase or diminish the likelihood that teens will smoke, drink, use illegal drugs or abuse prescription drugs. The methodology for CASA's 2007 survey is described in Appendix A.

CASA's annual survey has consistently shown a strong relationship between the frequency of family dinners and teen substance abuse risk. In 2003, CASA released the first *The Importance of Family Dinners* report, which found that the more often children have dinner with their parents, the less likely they are to smoke, drink or use drugs. This year's survey confirms the tight link between the frequency of family dinners and teen substance use. We also took a closer look at the impact of frequent family dinners on specific age groups.

We surveyed 1,063 teens, age 12 to 17 (554 boys, 509 girls) and 550 parents of teens, 53 percent of whom (292) are parents of teens who completed the survey.

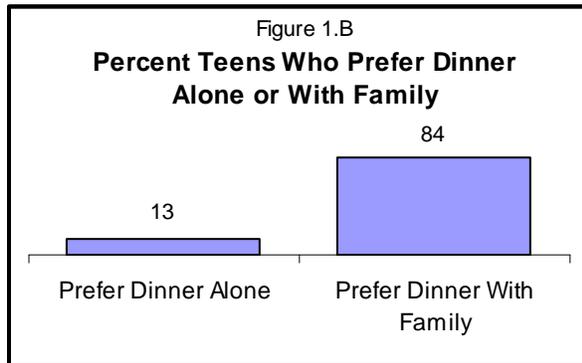
Frequency of Family Dinners

This year, 59 percent of teens (and 59 percent of parents of teens) report having dinner with their families at least five times a week, the same proportion we have observed in the past several years, and an increase in family dining from the 1996 CASA survey, when the relationship of frequent family dinners to substance abuse risk was first detected. (Figure 1.A)

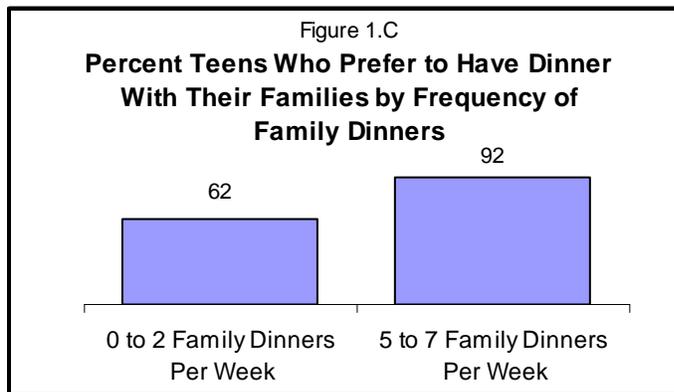


Teens Prefer Family Dinners

When asked whether they prefer to have dinner with their families or to eat alone, 84 percent of teens surveyed say they prefer to have dinner with their families, compared to 13 percent who say they prefer to eat dinner alone (three percent responded “don’t know” or gave no response). (Figure 1.B) Even among older teens (16- and 17-year olds), 81 percent say they prefer to have dinner with their families.

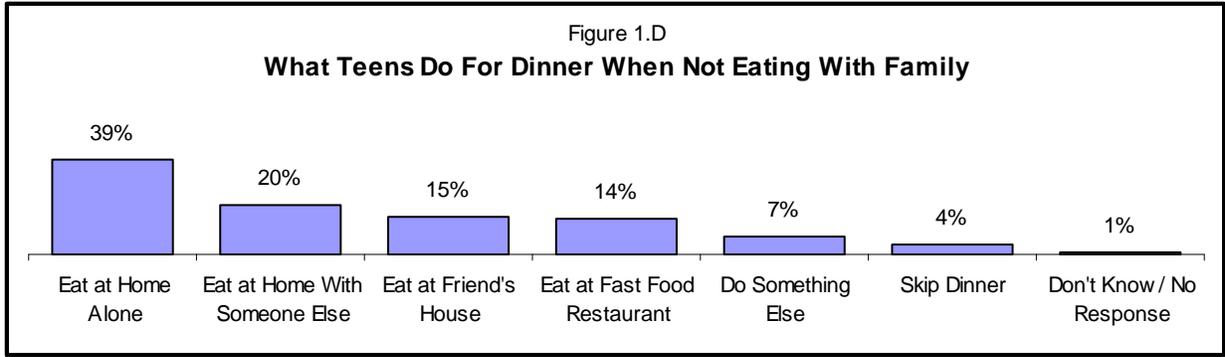


Teens who have frequent family dinners are likelier to say they prefer to have dinner with their families rather than eat alone. Ninety-two percent of teens who have at least five family dinners per week say they prefer to have dinner with their families, compared to 62 percent of teens who have fewer than three family dinners in a typical week. (Figure 1.C)



What Teens Do For Dinner When Not Eating With Family

This year for the first time we asked teens to tell us what they usually do for dinner when they are not dining with their parents. Thirty-nine percent of teens have dinner with their families seven nights a week. Among the 61 percent of teens who do not always eat dinner with their families, 39 percent say that when they do not have dinner with their families they usually eat at home by themselves, and 20 percent report that they usually eat at home with someone else. Fifteen percent say they usually eat over a friend’s house when they’re not having dinner with their parents, and 14 percent at a fast food restaurant (12 percent gave other responses). (Figure 1.D).



More than half of teens (59 percent) are eating in their home, either by themselves or with someone else, when they are not eating dinner with their parents.

Sixteen percent of parents who do not always have dinner with their teen say they worry where their teen is and what he or she is doing on those evenings when their teen does not have dinner with them; 83 percent say they do not worry.

Chapter II

Family Dinners and Teen Substance Use

Family Dinners and Teen Smoking, Drinking, Drug Use

Frequent family dining is associated with lower rates of teen smoking, drinking, illegal drug use and prescription drug abuse. Compared to teens who eat dinner frequently with their families (five or more family dinners per week), those who have infrequent family dinners (fewer than three per week) are: (Table 2.1)

- three and a half times likelier to have abused prescription drugs (seven percent vs. two percent),
- three and a half times likelier to have used illegal drugs other than marijuana or prescription drugs (seven percent vs. two percent),
- three times likelier to have used marijuana (25 percent vs. eight percent),
- more than two and a half times likelier to have used tobacco (26 percent vs. 10 percent), and
- one and a half times likelier to have used alcohol (47 percent vs. 30 percent).

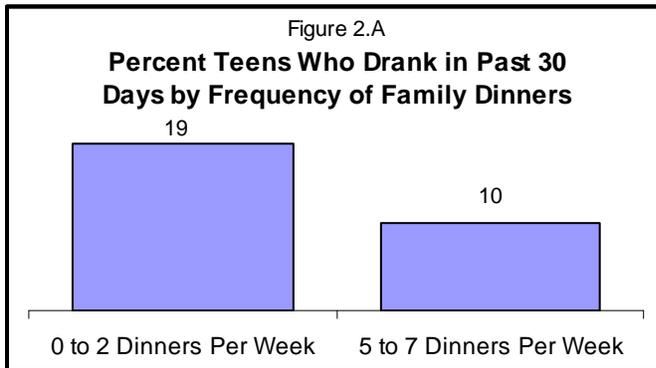
Table 2.1
Percent Teens Who Have Used Alcohol,
Tobacco, Marijuana, Other Illegal Drugs or
Abused Prescription Drugs
(by frequency of family dinners)

	5 to 7 dinners per week	0 to 2 dinners per week
Alcohol	30	47
Tobacco	10	26
Marijuana	8	25
Other Illegal Drugs	2	7
Prescription Drugs	2	7

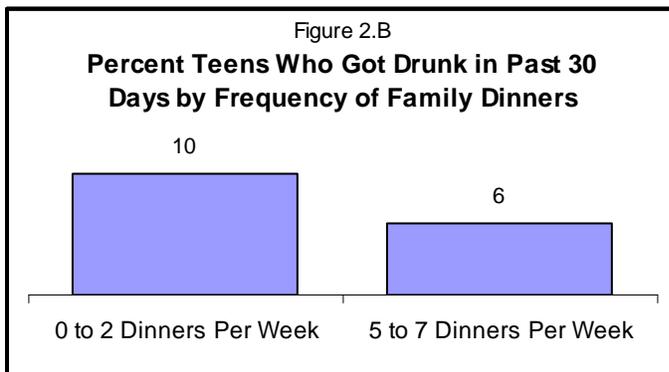
Family Dinners and Current Substance Use

Teens who have frequent family dinners are also less likely to currently use marijuana and tobacco, drink alcohol and get drunk.

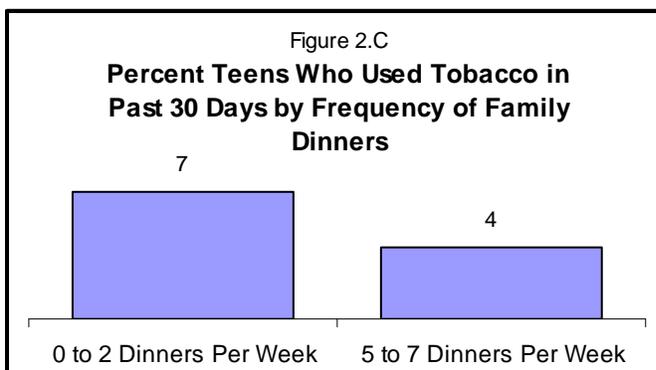
Teens who have family dinners less than three times a week are almost twice as likely to say they drank alcohol in the past 30 days (19 percent vs. 10 percent). (Figure 2.A).



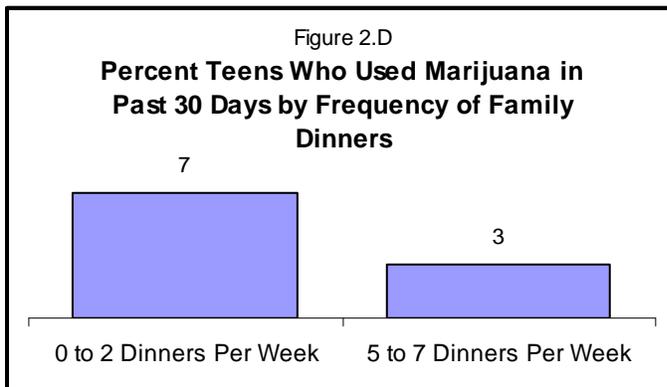
Teens who have family dinners less than three times a week are more than one and a half times likelier to say they got drunk in the past 30 days (10 percent vs. six percent). (Figure 2.B).



Teens who have family dinners less than three times a week are almost twice as likely to say they used tobacco in the past 30 days (seven percent vs. four percent). (Figure 2.C).



Teens who have family dinners less than three times a week are more than twice as likely to say they used marijuana in the past 30 days (seven percent vs. three percent). (Figure 2.D).

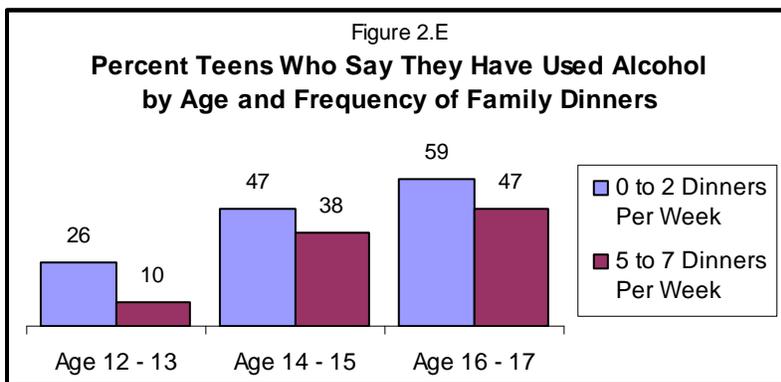


Family Dinners and Teen Alcohol Use by Age

The relationship between frequent family dinners and substance use that we observe among all teens is also observed to varying degrees at every age level. The impact of frequent family dinners seems strongest among the youngest children in our survey.

Twelve and 13- year olds who have infrequent family dinners are more than two and a half times likelier to say they have used alcohol, compared to 12- and 13-year olds who have frequent family dinners (26 percent vs. 10 percent). (Figure 2.E)

Among teens ages 14 to 17, those who have infrequent family dinners are likelier to say they have used alcohol, compared to 14- to 17-year olds who have frequent family dinners. (Figure 2.E)

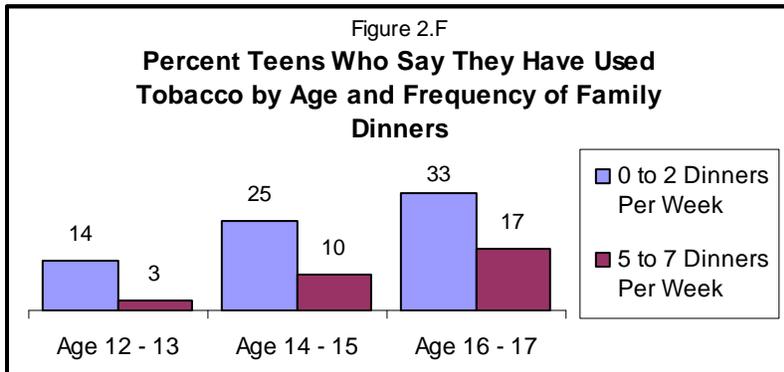


Family Dinners and Teen Tobacco Use by Age

Twelve and 13-year olds who have infrequent family dinners are more than four and a half times likelier to say they have used tobacco, compared to 12- and 13-year olds who have frequent family dinners (14 percent vs. three percent).

Compared to 14- and 15-year olds who have frequent family dinners, those who have infrequent family dinners are two and a half times likelier to say they have used tobacco (25 percent vs. 10 percent).

Sixteen and 17-year olds who have infrequent family dinners are almost twice as likely to say they have used tobacco compared to 16- and 17-year olds who have frequent family dinners (33 percent vs. 17 percent). (Figure 2.F)

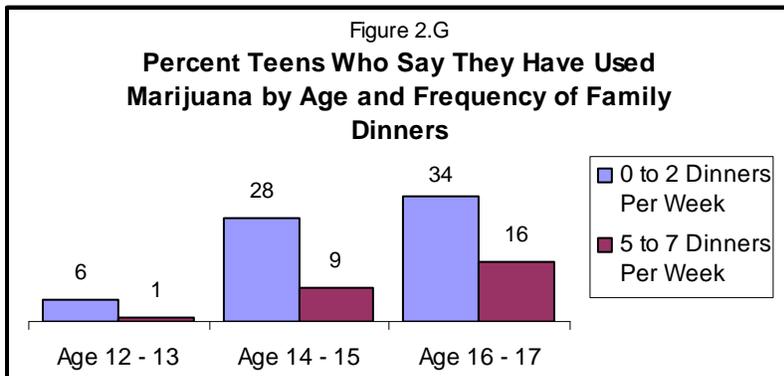


Family Dinners and Teen Marijuana Use by Age

Twelve and 13-year olds who have infrequent family dinners are six times likelier to say they have used marijuana, compared to 12- and 13-year olds who have frequent family dinners (six percent vs. one percent).

Compared to 14- and 15-year olds who have frequent family dinners, those who have infrequent family dinners are three times likelier to say they have used marijuana (28 percent vs. nine percent).

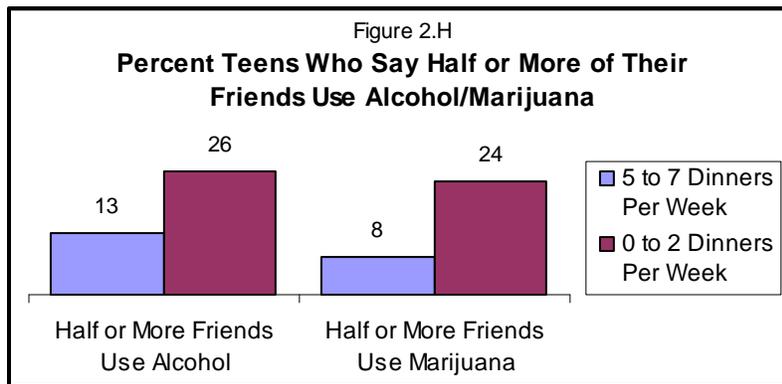
Sixteen and 17-year olds who have infrequent family dinners are more than twice as likely to say they have used marijuana compared to 16- and 17-year olds who have frequent family dinners (34 percent vs. 16 percent). (Figure 2.G)



Family Dinners and Teens With Friends Who Use Substances

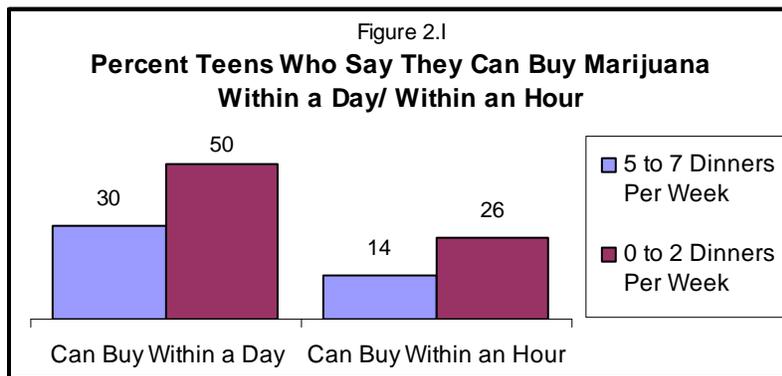
Teens who have infrequent family dinners are twice as likely to report that half or more of their friends currently drink beer or other alcoholic beverages, compared to teens who have frequent family dinners: 26 percent of teens who have fewer than three family dinners per week say that half or more of their friends currently drink alcohol, compared to 13 percent of teens who have at least five family dinners in a typical week.

Teens who have dinner with their families less than three times a week are three times likelier to say half or more of their friends currently use marijuana, compared to teens who have dinner with their families at least five times a week (24 percent vs. eight percent). (Figure 2.H)



Family Dinners and the Availability of Marijuana

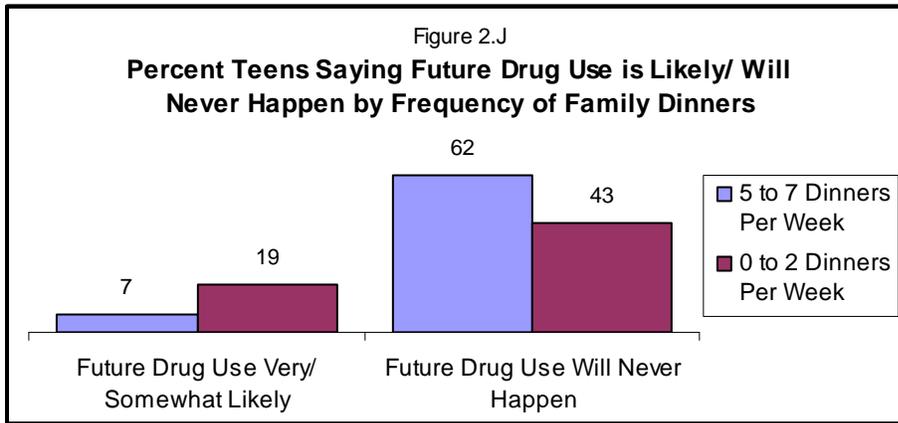
Teens who have dinner with their families less than three times a week are more than one and a half times likelier to say that they can buy marijuana within a day, compared to teens who have dinner with their families at least five times a week (50 percent vs. 30 percent), and almost twice as likely to say they can buy marijuana within an hour (26 percent vs. 14 percent). (Figure 2.I)



Family Dinners and the Likelihood of Future Drug Use

Teens who have infrequent family dinners are nearly three times likelier to say that future drug use is very or somewhat likely, compared to teens who have frequent family dinners (19 percent vs. seven percent).

Teens who have frequent family dinners are one and a half times likelier to say that future drug use will never happen, compared to teens who have infrequent family dinners (62 percent vs. 43 percent). (Figure 2.J)



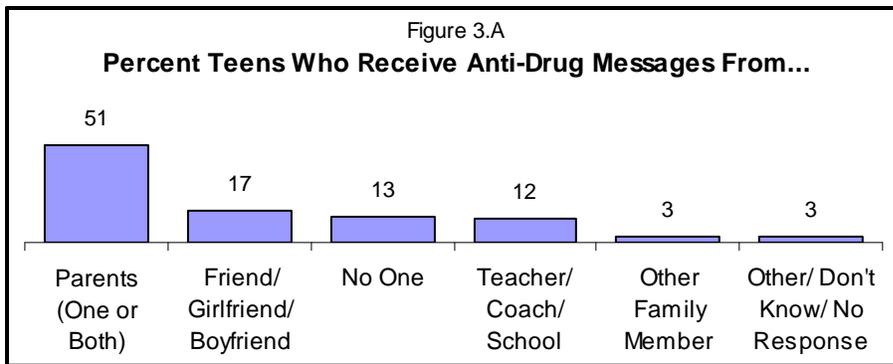
Chapter III

Communication and Family Dinners

Anti-Drug Messages

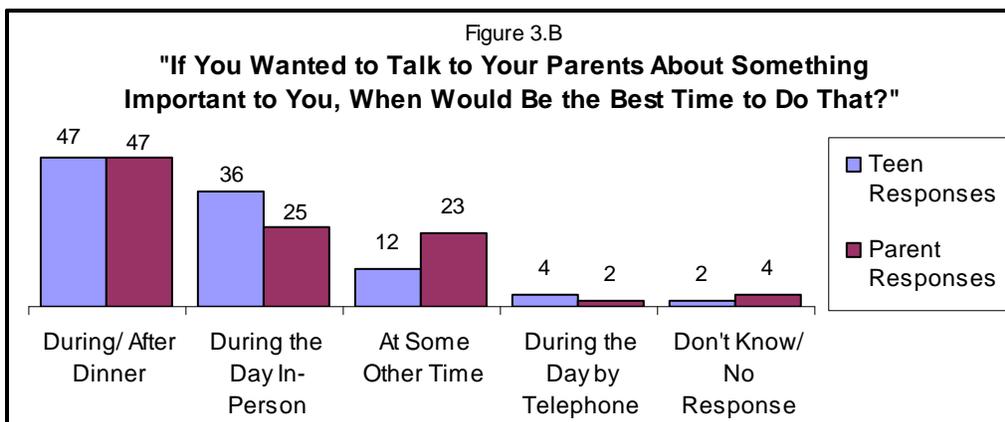
This year we asked teens who, if anyone, is telling them that they should not use illegal drugs.

Half of teens (51 percent) say their parents are telling them not to use drugs, 17 percent are receiving an anti-drug message from a friend, boyfriend or girlfriend, and 12 percent say they receive anti-drug messages from their coach, teacher or school. Thirteen percent of teens say that no one is telling them that they should not use illegal drugs. (Figure 3.A)

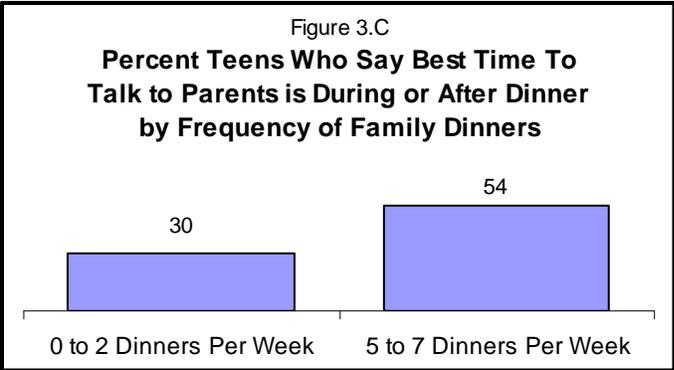


Fifty-five percent of teens who have frequent family dinners say they receive anti-drug use messages from their parents, compared to 42 percent of teens who have infrequent family dinners.

When asked when is the best time to talk to their parents about something that is important to them, nearly half of teens and parents (47 percent of teens and 47 percent of parents) agree that during or after dinner is the best time. Thirty-six percent of teens say that during the day, in person, would be the best time to talk to their parents about something important to them. (Figure 3.B)



Teens who have frequent family dinners are more than one and a half times likelier to say that the best time to talk to their parents about something important to them is during or after dinner, compared to teens who have infrequent family dinners (54 percent vs. 30 percent). (Figure 3.C)



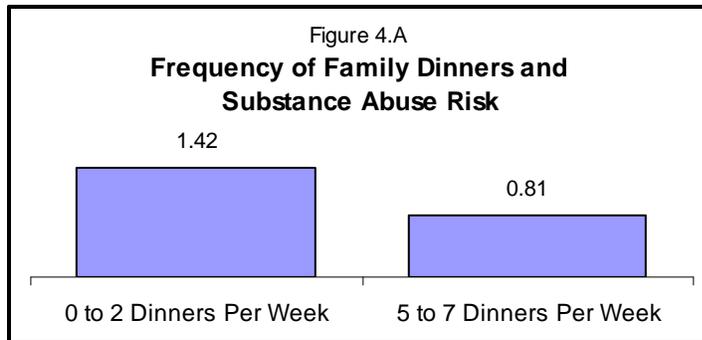
Chapter IV

Family Dinners and Other Factors Affecting Teen Substance Abuse Risk

The CASA strategy for assessing the substance abuse risk of a teenager is described in Appendix B. The average substance abuse risk score for all teens is 1.00, the risk score for a teen who has not used alcohol, tobacco or marijuana is 0.43, the risk score for a teen who admits to having used alcohol, tobacco or marijuana is 1.20, and the risk score for a teen who admits to having used all three is 3.68.

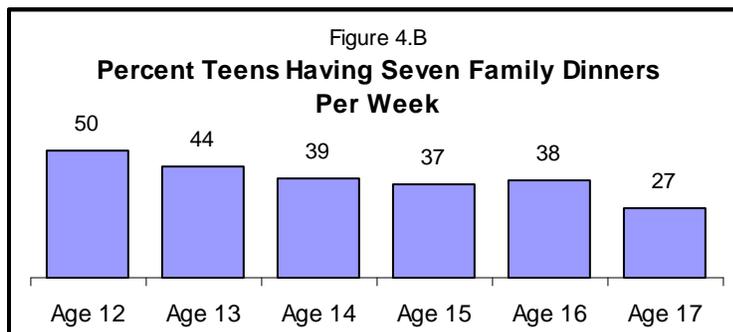
Family Dinners and Teen Substance Abuse Risk

The number of family dinners a teen has in a typical week is a powerful indicator of substance abuse risk. The average risk score of teens having dinner with their families fewer than three nights in a typical week is more than one and a half times that of teens having dinner with their families five or more nights per week (1.42 vs. 0.81). (Figure 4.A)

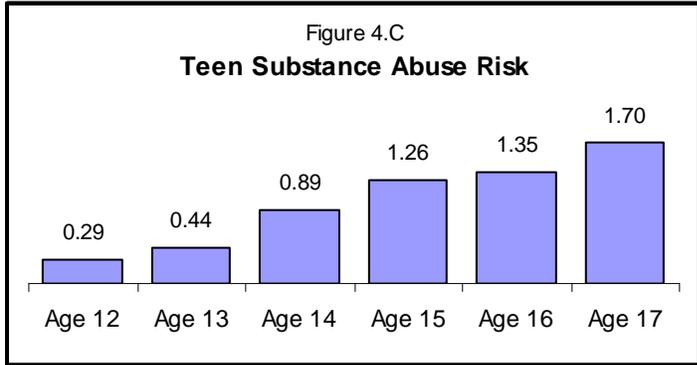


Family Dinners and Age

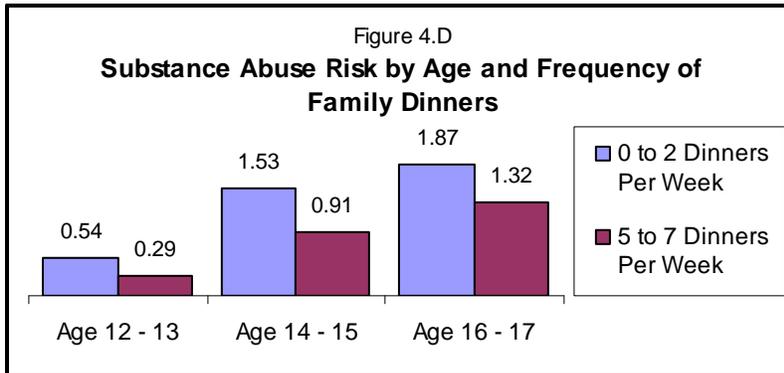
The older teens are, the less likely they are to have dinner with their families: Twice as many 12-year olds as 17-year olds report having dinner with their families seven nights in a typical week (50 percent of 12-year olds vs. 27 percent of 17-year olds). (Figure 4.B)



This decline in frequent family dinners from age 12 to 17 is of concern because, as the CASA survey shows, that period is one of sharply increasing risk of substance abuse. Among the youngest age cohort in the CASA survey (12-year olds), the average risk score is 0.29. By the time a teen reaches age 17, the average risk score jumps to 1.70, almost a sevenfold increase. (Figure 4.C)

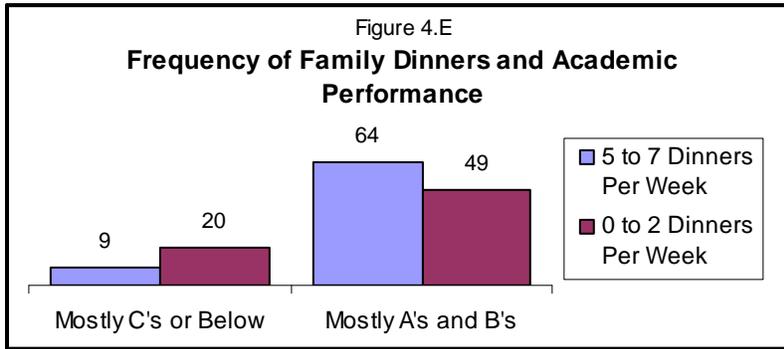


Substance abuse risk score decreases as the frequency of family dinners increases, regardless of age. At every age, a teen benefits from eating dinner with their family. (Figure 4.D)



Family Dinners and Teen Academic Performance

Teens who have fewer than three family dinners in a typical week are more than twice as likely to do poorly in school; twenty percent of teens who have infrequent family dinners report receiving mostly C's or below in school, whereas only nine percent of teens who have frequent family dinners report receiving mostly C's or lower. (Figure 4.E)



Appendix A

CASA 2007 Survey Methodology

The questionnaire for this survey was designed by the staffs of QEV Analytics and CASA. Questions and themes were pre-tested by conducting two focus groups in suburban Cincinnati, OH with 16-and 17-year old participants. The two sessions were segregated by sex and conducted by moderators of the same sex as the participants.

This survey was conducted by telephone, utilizing a random household selection procedure called random digit dialing (RDD), in which a pool of telephone numbers was assembled by a commercial survey sample vendor utilizing extensive information concerning telephone number assignments across the country. Numbers in this initial pool represented all 48 continental states in proportion to their population.

Households were qualified for participation in the survey by determining that a teen between the ages of 12 and 17 lived in the household (see Appendix C for screening questions). At least four call back attempts were made to each telephone number before the telephone number was rejected.

Once a household was qualified as the residence of an eligible teenager, 12 to 17, permission for survey participation by the teen was sought from the teen's parent or guardian. After permission was obtained, if the potential teen participant was available, the teen interview was attempted. If the potential teen participant was not available at the time of the initial contact with the parent or guardian, then the parent/guardian interview was attempted, and a call back scheduled for the teen interview.

In total, 1,063 teenagers and 550 parents of teenagers were interviewed between April 2 - May 13, 2007 (for teens) and April 27 - May 13, 2007 (parents). The margin of sampling error for the teen survey is ± 3 percent at a 95 percent confidence level (meaning, were it possible to interview all teenagers in the country between the ages of 12 and 17, the results would vary by no more than ± 3 percent, 19 times out of 20, from what was found in this survey).

All of the 550 parents interviewed reside in households in which a parent gave consent for their teen to be interviewed (even though the teen interview may not have been completed). 292 parental interviews were conducted in households in which a teen interview was accomplished. In the 258 cases in which a parental interview was completed but not a teen interview, the cause was typically the persistent unavailability of the teen.

The two sets of responses (parent and teen) are linked, so we can relate the teen's risk of using drugs with the parent's responses and characteristics. The margin of sampling error for a survey of 550, which is the size of the parent/guardian sample, is ± 4.2 percent (at the 95 percent confidence level). While we consider the random selection of households with teenagers in residence to yield a representative sample of parents of teenagers as well, it should be noted that parents were interviewed only after assenting to the participation of their teenager in the survey; this protocol could potentially influence the representativeness of the parents' sample.

The data collection process was supervised by QEV Analytics, Ltd. of Washington, DC. The survey analysis was done by Steven Wagner, President of QEV Analytics, Ltd. and Elizabeth Planet and Amy Shlosberg of CASA; this report was written by Planet, Shlosberg and Wagner.

Appendix B

How CASA Calculates Teen Substance Abuse Risk

Through 12 surveys conducted over 13 years, CASA has been surveying public opinion on substance abuse, seeking answers to the question: “Why do some teenagers smoke, drink and use illegal substances while others do not?”

This survey continues an analysis aimed at revealing factors that contribute to teens’ risk of smoking, drinking and using drugs. Some of these factors--including their family dynamics, their parents’ involvement in their lives, their friends’ substance use, and their school and neighborhood environments--tend to cluster, such that teens with problems in one area of their life often have problems in others as well. Nevertheless, by identifying individual risk factors, we seek to help parents (and other adults who influence teens) better identify those who are most vulnerable to substance abuse, and develop strategies to diminish their risk.

Although this survey includes some questions on substance use, it is not intended to be an epidemiological study of substance abuse. For measurements of the actual prevalence of drug and other substance usage there are other sources of data, including the *Youth Risk Behavior Surveillance System* (conducted by the Centers for Disease Control and Prevention of the U.S. Department of Health and Human Services), the *Monitoring the Future Study* (conducted at the University of Michigan and funded by the National Institute on Drug Abuse of the National Institutes of Health), and the *National Survey on Drug Use and Health* (sponsored by the Substance Abuse and Mental Health Services Administration of the U.S. Department of Health and Human Services).

This survey was conducted by telephone in the United States. The 1,063 teens (ages 12 to 17) who participated were derived from among a randomly selected, nationally representative sample frame, interviewed between April 2 and May 13, 2007. Despite assurances of confidentiality, we assume that some teenage respondents will be reluctant to admit illegal activities over the telephone to someone unknown to them. Therefore, this survey--like any telephone survey asking respondents to self-report proscribed behaviors--presents conservative estimates of the extent of the use of illegal drugs, the consumption of tobacco products and alcohol by teenagers, and other negative behaviors, and over-reports positive behaviors. The parental permission requirement may also contribute to under-reporting of proscribed behaviors.*

The CASA strategy for assessing the substance-abuse risk of a teenage respondent is to measure the prevalence of tobacco, alcohol, and illegal drugs in the teen’s daily life. To measure the respondent’s substance-abuse risk, we use a statistical procedure called factor analysis to combine each teen’s response to eight survey questions (see Table B.1) yielding a “substance-abuse risk score” for each teen respondent. This risk score then becomes our key dependent

* See Fendrich, M., & Johnson, T. P. (2001). Examining prevalence differences in three national surveys of youth: Impact of consent procedures, mode, and editing rules. *Journal of Drug Issues*, 31(3), 615-642.

variable, the phenomenon we seek to explain by reference to the other responses and characteristics of the teen and his or her parent.

To put this risk score in context, the average risk score for all teens is 1.00; the risk score for a teen who has not used alcohol, tobacco or marijuana is 0.43; the risk score for a teen who admits to having used alcohol, tobacco or marijuana is 1.20; and the risk score for a teen who admits to having used all three is 3.68. This risk variable represents our inference of respondent risk, since risk cannot be measured directly in a survey.

The calculated substance-abuse risk score is highly related to the age of the teen respondent. When another risk factor--for example, frequency of dinners with family--is related to both the substance-abuse risk score and also to age, it is important to insure that the observed relationship between this second risk factor and the substance-abuse risk score is not just a function of age. In such cases, when we describe a relationship between a risk factor and the substance-abuse risk score, we test to insure that the relationship is not spurious, using a statistical technique called analysis of variance (ANOVA). Using this technique, we can test to make sure that a relationship between two variables (e.g. frequency of family dinners and the substance-abuse risk score) continues to exist even after controlling for age.

Table B.1
What the Risk Categories Mean

High Risk Teens (15 percent of 12- to 17-year olds)

- More than one-quarter smoke (28 percent smoked in the past 30 days)
- Most have used alcohol (94 percent have used alcohol and 54 percent drank in the past 30 days)
- More than half say they get drunk (54 percent at least once a month)
- Almost all have friends who use marijuana (96 percent)
- Two-thirds know a friend or classmate using acid, cocaine, or heroin (67 percent)
- A majority could buy marijuana in an hour or less (54 percent)
- Three-quarters have used marijuana (73 percent)
- Half say future drug use is “likely” (48 percent)

Moderate Risk Teens (41 percent)

- Almost none smoke (98 percent did not have a cigarette in past 30 days)
- Almost half have used alcohol (43 percent)
- Few get drunk in a typical month (three percent)
- Nearly half have marijuana-using friends (47 percent)
- Half know a friend or classmate who uses acid, cocaine, or heroin (49 percent)
- One in five could buy marijuana within an hour (21 percent) and half within a day (51 percent)
- Few have used marijuana (four percent)
- Almost half say future drug use “will never happen” (47 percent)

Low Risk Teens (44 percent)

- None smoke (fewer than one percent have ever used tobacco)
- Just one in 10 has used alcohol (nine percent)
- None get drunk in a typical month (100 percent never get drunk)
- Almost none have friends who smoke marijuana (one percent)
- Fewer than one in 10 knows a user of acid, cocaine or heroin (seven percent)
- Two-thirds would be unable to buy marijuana (65 percent)
- None have used marijuana
- Most say future drug use “will never happen” (81 percent)