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A "refugee paradox" for substance use disorders?

Salas-Wright CP¹, Vaughn MG².

Author information

Abstract

BACKGROUND: Few, if any, studies have systematically examined the link between nativity and substance use disorders (SUD) among refugees using national samples. As such, it remains uncertain if the "immigrant paradox" for substance use can be extended to include refugees in the United States.

METHODS: Employing data from the National Epidemiologic Survey on Alcohol and Related Conditions, we examine the lifetime prevalence of SUDs among refugees (n=428) in contrast with non-refugee immigrants (n=4955) and native-born Americans (n=29,267). We also examine the impact of gender and refugee duration on the relationship between nativity, refugee status, and SUDs.

RESULTS: Refugees were between 3 and 6 times less likely than native-born Americans meet criteria for all SUDs examined, and significantly less likely than non-refugee immigrants to meet criteria for alcohol (AOR=0.44, 95% CI=0.41-0.47), cocaine (AOR=0.54, 95% CI=0.50-0.59), hallucinogen (AOR=0.66, 95% CI=0.58-0.74), and opioid/heroin (AOR=0.62, 95% CI=0.58-0.66) use disorders. The refugee-SUD link was significantly moderated by gender. Duration as a refugee was associated with increased risk for alcohol use disorder and decreased risk of cannabis and illicit drug use disorders.

CONCLUSIONS: Study findings provide evidence in support of a "refugee paradox" for SUDs among adults in the United States. Refugees are substantially less likely than native-born Americans to meet criteria for all SUDs examined and, albeit with weaker effects, significantly less likely than non-refugee immigrants to meet criteria for a variety of SUDs.

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KEYWORDS: Alcohol use; Drug abuse; Immigrant; Refugee; Substance use disorders

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