



Dimensions of disinhibited personality and their relation with alcohol use and problems



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HIGHLIGHTS

- Disinhibited personality can be parsed into three correlated dimensions.
- Disinhibitory personality traits are differentially associated with alcohol use and problems.
- Impulsivity (IMP) is directly associated with alcohol problems.
- Excitement seeking is directly associated with alcohol use.
- Antisociality mediates the association between impulsivity and alcohol problems.

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ABSTRACT

Although alcohol use disorders (AUDs) have been associated with different aspects of disinhibited personality and antisociality, less is known about the specific relationships among different domains of disinhibited personality, antisociality, alcohol use, and alcohol problems. The current study was designed to address three goals, (i) to provide evidence of a three-factor model of disinhibited personality (comprised of impulsivity [IMP], risk taking/low harm avoidance [RTHA], excitement seeking [ES]), (ii) to test hypotheses regarding the association between each dimension and alcohol use and problems, and (iii) to test the hypothesis that antisociality (social deviance proneness [SDP]) accounts for the direct association between IMP and alcohol problems, while ES is directly related to alcohol use. Measures of disinhibited personality IMP, RTHA, ES and SDP and alcohol use and problems were assessed in a sample of young adults ($N = 474$), which included a high proportion of individuals with AUDs. Confirmatory factor analyses supported a three-factor model of disinhibited personality reflecting IMP, RTHA, and ES. A structural equation model (SEM) showed that IMP was specifically associated with alcohol problems, while ES was specifically associated with alcohol use. In a second SEM, SDP accounted for the majority of the variance in alcohol problems associated with IMP. The results suggest that aspects of IMP associated with SDP represent a direct vulnerability to alcohol problems. In addition, the results suggest that ES reflects a specific vulnerability to excessive alcohol use, which is then associated with alcohol problems, while RTHA is not specifically associated with alcohol use or problems when controlling for IMP and ES.

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1. Introduction

Poor self-regulation is a fundamental feature of alcohol use disorders (AUDs). AUDs are associated with disinhibited-undercontrolled personality (Finn, Mazas, Justus, & Steinmetz, 2002; Finn, Sharkansky, Brandt, & Turcotte, 2000; Sher, Walitzer, Wood, & Brent, 1991) and antisociality (Finn & Hall, 2004; Finn et al., 2002; Iacono, Carlson, Taylor, Elkins, & McGue, 1999), both of which reflect problems with self-regulation. Although a range of studies have established associations between

AUDs and several domains of disinhibited personality, such as impulsivity, novelty seeking, sensation seeking, low harm avoidance (risk taking), and antisocial traits (Finn et al., 2000; Grekin, Sher, & Wood, 2006) it is less clear whether these different trait domains reflect separate, specific vulnerabilities to excessive alcohol use or problems. In addition, disinhibited personality includes a number of diverse, but interrelated, personality traits, such as impulsivity, low harm avoidance, excitement seeking, or general sensation seeking. While each of these traits has been associated with alcohol use and problems when considered univariately or when combined into broader trait dimensions such as sensation seeking (e.g., Castellanos-Ryan, Rubia, & Conrod, 2011; Chassin, Flora, & King, 2004; Sher et al., 1991; Smith et al., 2007; Whiteside & Lynam, 2003; Wills, Vaccaro, & McNamara, 1994), some research suggests that specific traits (e.g., impulsivity and sensation

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seeking) reflect different mechanisms associated with a vulnerability to AUDs (Castellanos-Ryan et al., 2011; Magid, MacClean, & Colder, 2007; Smith et al., 2007).

Although the specific nature of the personality constructs themselves suggests different mechanisms (Finn, 2002), it is difficult to identify specific personality-related pathways or vulnerabilities to AUDs, because many studies of personality and AUDs focus on a single trait domain or measure, rather than a range of unique traits. In addition, antisociality, or social deviance proneness, which has been shown to have strong associations with AUDs (Finn & Hall, 2004; Finn et al., 2000; Grekin et al., 2006; Iacono et al., 1999; Kendler, Prescott, Myers, & Neale, 2003; Mustanski, Viken, Kaprio, & Rose, 2003), represents a trait phenotype somewhere between a basic personality trait and a clinical phenotype. Many studies of personality and AUDs exclude measures of antisociality, others have included antisociality, but excluded other key domains of disinhibited personality (Finn & Hall, 2004; Finn et al., 2000), and still others have included aspects of disinhibited personality and social deviance into a single latent variable of behavioral undercontrol (Sher et al., 1991). The overarching purpose of the current study is to investigate the specific dimensions of disinhibited personality and their associations with excessive alcohol use and alcohol problems. This broad purpose is accomplished by addressing two specific goals using two different methods. The first goal is to test a three-dimensional model of disinhibited personality using confirmatory factor analysis (CFA). The second goal is to investigate evidence for specific personality-related mechanisms of vulnerability to excessive alcohol involvement. This second goal will be addressed by testing hypotheses regarding specific personality-related pathways (see below) using structural equation models (SEMs) that include the three hypothesized dimensions of disinhibited personality as well as a measure of antisociality (social deviance proneness).

1.1. Personality, social deviance proneness, and alcohol use and problems

We theorize a model of disinhibited personality comprising three interrelated dimensions of impulsivity, excitement seeking, and low harm avoidance (risk taking) (Finn, 2002). Impulsivity is narrowly defined and reflects basic problems in self-regulation associated with increased appetitive motivation in combination with difficulties inhibiting approach behavior (e.g., De Wit, 2009; Finn, 2002; Luego, Carrillo de la Pena, & Ortero, 1991; Patton, Stanford, & Barratt, 1995; Swann, Bjork, Moeller, & Dougherty, 2002).

Our approach to conceptualizing impulsivity narrowly is in contrast to the approach taken by Whiteside and Lynam (2001) and others (Evenden, 1999; Gullo, Ward, Dawe, Powell, & Jackson, 2010; MacKillop, Mattson, Anderson MacKillop, Castelda, & Donovick, 2007) who define impulsivity more broadly to include domains such as sensation seeking (including risk-taking and our construct of excitement seeking). Recent work suggests that sensation seeking and impulsivity reflect distinct constructs that have unique associations with different facets of alcohol use disorders (Castellanos-Ryan et al., 2011; Curcio & George, 2011; Smith et al., 2007), where sensation seeking was associated with alcohol use and negative urgency was associated with alcohol problems. Our approach extends this work further by decomposing sensation seeking into two constructs, excitement seeking and risk taking and proposing that the domain of excitement seeking is specifically associated with increased approach tendencies and excessive drinking, while risk-taking is not likely to be uniquely associated with excessive alcohol involvement in emerging/young adulthood.

Excitement seeking, a subdomain of sensation seeking, reflects increased approach tendencies and a general reliance on engaging in pleasurable-hedonistic-type approach behaviors to feel good and a tendency to experience boredom and negative affect when not actively engaged in appetitive behavior or when engaging in routine activity

(Finn, 2002). Based on theory that excitement seeking is associated with increased approach, while impulsivity is associated with problems in self regulation, we hypothesize that excitement seeking will be uniquely associated with excessive alcohol use and impulsivity will be associated with more alcohol-use-related problems. Risk taking/low harm avoidance, on the other hand, is thought to reflect reduced activity in the aversive motivation system (Finn, 2002) and reflects a number of related mechanisms, including fearlessness, low behavioral inhibition to the prospect of aversive experience, and the experience of the physiological arousal inherent in dangerous situations as pleasurable rather than aversive (Finn, 2002; Justus & Finn, 2007; Ziv, Tomer, Defrin, & Hendler, 2010). Studies indicate that risk taking/low harm avoidance is associated with risk for excessive substance use in childhood and adolescence (Mâsse & Tremblay, 1997; Wills et al., 1994). However we propose that the association between risk taking and excessive alcohol use in emerging adulthood (18–25 years of age) will be weaker and that risk taking is not uniquely associated with excessive alcohol use, because excessive alcohol use in this developmental phase is not perceived as a very risky behavior (Chomynova, Miller, & Beck, 2009; Finn, 2002), while alcohol use in childhood and adolescence is associated with more risk. Some research suggests that impulsivity and excitement seeking/sensation seeking reflect different aspects of a vulnerability to AUDs (Castellanos-Ryan et al., 2011; Magid et al., 2007; Smith et al., 2007). We extend this further by postulating that social deviance proneness, or antisociality, plays a central role in the association between impulsivity and AUDs.

While we conceptualize impulsivity as a more generalized vulnerability to poor self-regulation, social deviance proneness, indexed by the Psychopathic Deviance scale of the MMPI-II (Hathaway & McKinley, 1989) and the Socialization (So) scale of the California Psychological Inventory (Gough, 1969) reflects a vulnerability to poor self-regulation in response to social norms, and interpersonal and contextual cues for appropriate behavior (Finn et al., 2000). High social deviance is associated with a general disregard for social norms, authority, and a tendency toward rule-breaking, delinquent behavior. We propose that social deviance reflects a particular facet of impulsivity where strong approach motivation is not sufficiently inhibited by social norms for appropriate behavior. This facet of impulsivity is particularly relevant for alcohol problems since a great deal of the problems related to alcohol abuse are associated with the violation of social norms for respectful, responsible, healthy behavior in domains of work, family, and interpersonal relationships (Finn & Hall, 2004; Finn et al., 2000). The general idea that antisociality accounts for much of the association between impulsivity and alcohol problems is consistent with the results of Whiteside and Lynam (2003), who reported that some personality traits related to impulsive behavior (from the UPPS scales; Whiteside & Lynam, 2001) are only related to alcohol abuse in groups who are also high in antisocial traits. We extend this further by postulating that social deviance proneness, or antisociality, plays a central role in the association between impulsivity and AUDs.

The overarching aim of the current study was to delineate the specific associations among three domains of disinhibited personality (impulsivity, excitement seeking, risk taking/low harm avoidance), social deviance proneness, and alcohol use and problems in order to provide evidence for different vulnerability processes. The study tested the following specific hypotheses: (i) confirmatory factor analyses will support a three factor model of disinhibited personality, (ii) in a structural equation model (SEM) that examines the association between the three dimensions of disinhibited personality and alcohol use and problems, impulsivity will be directly associated with more alcohol problems and excitement seeking will be directly associated with more alcohol use, and (iii) in another SEM, social deviance proneness will account for the variance the association between impulsivity and alcohol problems.

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