



Trait-based affective processes in alcohol-involved “risk behaviors”

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ARTICLE INFO

Keywords:

Risk behavior
Alcohol
Impulsivity
Affect

ABSTRACT

This study tested a theoretical model of alcohol use, markers of extreme intoxication, and risk behavior as a function of trait affect, distress tolerance, and affect-based behavior dysregulation. Positive affective pathways to risk behavior were primarily expected to be indirect via high levels of alcohol use, while negative affect paths were expected to be more directly associated with engagement in risk behavior. In addition, we expected trait affectivity and distress tolerance would primarily exhibit relationships with alcohol use and problems through behavioral dysregulation occurring during extreme affective states. To evaluate these hypotheses, we tested a SEM with three alcohol-related outcomes: “Typical” alcohol use, “blackout” drinking, and risk behavior. High trait negative affect and low tolerance for affective distress contribute to difficulty controlling behavior when negatively aroused and this is directly associated with increased risk behavior when drinking. In contrast, associations between positive urgency and risk behaviors are indirect via increased alcohol consumption. Positive affectivity exhibited both inverse and positive effects in the model, with the net effect on alcohol outcomes being insignificant. These findings contribute important information about the distinct pathways between affect, alcohol use, and alcohol-involved risk behavior among college students.

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1. Introduction

A substantial amount of the public health costs incurred as a result of alcohol-related problems can be attributed to alcohol-associated “externalizing problems,” or risk behaviors (Hingson, Heeren, Winter, & Wechsler, 2005; Kassel, Wardle, Heinz, & Greenstein, 2010). Associations between alcohol consumption and various risk behaviors may reflect a combination of acute effects of intoxication and dispositional factors, such as impulsivity, that increase risk behavior among drinkers. In this regard, several studies indicate that forms of disinhibition are associated with alcohol-related problems over and above measures of typical quantity and frequency of alcohol use (Magid, MacLean, & Colder, 2008; Settles et al., 2012; Simons, Carey, & Wills, 2009; Simons, Gaher, Correia, Hansen, & Christopher, 2005). However, there is wide variability in both alcohol consumption patterns and risk for associated problems. Currently, it is unclear whether such results indicate a specific association between disinhibition and alcohol-related behavioral problems or whether disinhibition predicts the likelihood of isolated drinking events characterized by extreme intoxication. These events may

deviate from one’s “typical” pattern of use and increase the likelihood of associated problems.

Although many studies have investigated relationships between binge drinking and alcohol problems, the typical binge drinking criteria (i.e., 4 drinks for women, 5 drinks for men in about 2 h) reflect a BAC level of about .08 (NIAAA, 2004), and as such, these episodes may not encompass the high levels of drinking often observed in college students. Research on binge drinking suggests that 40% of college students report binge drinking in the last two weeks (Evenden, 1999), but only 9.4% of college student drinkers report an instance of “blacking out” in the last two weeks (White, Jamieson-Drake, & Swartzwelder, 2002). Thus, reported symptoms of extreme intoxication, such as blackouts, getting sick, or having a hangover, may be more fitting indicators of high-level use that deviates from one’s “typical” drinking pattern and may increase the likelihood of engaging in risk behavior. The current study addresses a gap in the literature by distinguishing between one’s “typical” alcohol use pattern and symptoms of extreme intoxication.

1.1. Trait affect, alcohol use, and problems

Affect dysregulation plays a role in alcohol-related problems (cf. Cyders & Smith, 2008; Kassel et al., 2010; Sher & Trull, 1994; Simons et al., 2005; Smith & Anderson, 2001). For example, those high in trait negative affect may use alcohol at high levels in order to cope with painful feelings, which may, in turn, increase the risk for alcohol-related

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problems (Cooper, Frone, Russell, & Mudar, 1995; Cox & Klinger, 1988). A growing body of research has demonstrated associations between negative affect and alcohol use, as well as alcohol problems beyond use level (Cooper, Agocha, & Sheldon, 2000; Hussong, Hicks, Levy, & Curran, 2001; Jackson & Sher, 2003; Simons et al., 2005; Swendsen et al., 2000; Turner, Larimer, Sarason, & Trupin, 2005). Still, many studies have found no support for relationships between trait negative affect and alcohol use or problems (Greeley & Oei, 1999; Hussong et al., 2001; Sayette, 1999). Thus, understanding the mechanisms by which negative affect may contribute to alcohol use and problems remains an important and unresolved area of study.

Individuals high in positive affectivity may also drink at high levels to enhance positive mood, and this may, in turn, be related to more alcohol-related problems (Cooper et al., 2000; McCreary & Sadava, 2000). However, findings have been inconsistent (Pandina, Johnson, & Labouvie, 1993; Simons et al., 2005) and some report inverse associations between positive affect and alcohol use (Wills, Sandy, Shinar, & Yaeger, 1999). Whereas drinking to cope with negative affect exhibits direct associations with alcohol problems, drinking for enhancement motives is indirectly associated with problems via alcohol use (Cooper et al., 2000). Given these findings, the most plausible relationship between trait positive affect and alcohol problems may be indirect through increased levels of alcohol use. Such a relationship may be more relevant in samples comprised of individuals who often drink at high levels in jubilant social contexts, such as college students (Glindemann, Wiegand, & Geller, 2007; Neal, Sugarman, Hustad, Caska, & Carey, 2005). Nevertheless, the inconsistent relationships between both positive and negative affectivity and alcohol use suggest that associations may be indirect via more proximal predictors, limited to specific drinking variables, (e.g., use frequency vs. problems), or conditional upon important moderating variables.

1.2. Affect-based behavioral undercontrol: positive urgency and negative urgency

Impulsivity is associated with increased rates of alcohol use and related problems (Neal & Carey, 2007; Sher & Trull, 1994; Simons, Gaher, Oliver, Bush, & Palmer, 2005). Several lines of research indicate that impulsivity is a multi-faceted construct (Evenden, 1999; Whiteside & Lynam, 2001). Two aspects of impulsivity, positive urgency and negative urgency, may be particularly relevant to understanding associations between trait affectivity and alcohol outcomes. Positive urgency and negative urgency refer to the tendency to act rashly when experiencing either positive or negative affect, respectively (Cyders et al., 2007; Whiteside & Lynam, 2001). Psychometric studies have shown that both negative urgency (Whiteside & Lynam, 2001) and positive urgency (Cyders & Smith, 2007) load onto a higher-order neuroticism factor. Thus, negative affectivity is positively associated with both negative urgency and positive urgency (Cyders & Smith, 2008; d'Acremont & Van der Linden, 2005; Fischer, Smith, Annus, & Hendricks, 2007; Gonzalez, Reynolds, & Skewes, 2011), suggesting that those who frequently experience uncomfortable emotions may be more likely to act rashly when experiencing emotional extremes of either valence. Few studies have examined relationships between trait positive affectivity and the urgency traits, but research with related constructs (e.g., extraversion, frequency of intense positive mood) indicates that trait positive affectivity may not be associated with urgency (Cyders & Smith, 2008; Settles et al., 2010; Simons, Dvorak, Batien, & Wray, 2010). Alternatively, positive affect may promote psychological health, increasing faculties like cognitive flexibility and problem solving (Isen, 1987; Isen, Niedenthal, & Cantor, 1992). In this latter case, positive affect might be related to adaptive behavioral control.

The urgency traits have shown consistent relationships with substance use and related problems (Fischer, Anderson, & Smith, 2004; Fischer & Smith, 2008; Magid & Colder, 2007), and in many cases, positive urgency and negative urgency exhibit direct associations with

substance-related problems, commonly over-and-above use (Cyders, Flory, Rainer, & Smith, 2009; Cyders et al., 2007; Fischer et al., 2007; Magid & Colder, 2007; Smith et al., 2007). Cyders et al. (2009) proposed that positive urgency may be a particularly important predictor of alcohol use and related problems among college students, since drinking often occurs in celebratory contexts in this population. Indeed, positive urgency is associated with problematic alcohol use and a range of risk behaviors (Cyders & Smith, 2007, 2010; Cyders et al., 2007), including risky sex (Simons, Maisto, et al., 2010; Zapolski, Cyders, & Smith, 2009).

Negative urgency also exhibits associations with alcohol problems over and above use level (Cyders et al., 2009; Fischer & Smith, 2008; King, Karyadi, Luk, & Patock-Peckham, 2011), including increased aggression (Lynam & Miller, 2004), unprotected sex (Deckman & DeWall, 2011; Simons, Maisto, et al., 2010), and functional problems (Verdejo-Garcia, Bechara, Recknor, & Perez-Garcia, 2007). However, many of these studies did not include positive urgency, which may change observed relationships. In two models that included both urgency traits, positive, but not negative, urgency was associated with alcohol-related problems (Cyders et al., 2009) and risk behaviors (Zapolski et al., 2009). Simons, Maisto, et al. (2010), however, found that both positive urgency and negative urgency were positively related to risky sex. Cyders and Smith (2008) note that both positive urgency and negative urgency tend to be related more to externalizing expressions of emotionality (as opposed to internalizing), which suggests that both urgency traits may be robust predictors of risk behaviors, such as getting into fights, driving drunk, and risky sex.

The previous review suggests two potential mechanisms by which urgency may be involved in associations between trait affect and alcohol use and problems. First, urgency may mediate associations between trait affect and alcohol use or problems. Gonzalez et al. (2011) showed that negative urgency mediated relationships between depressive symptoms and alcohol-related problems. Settles et al. (2012) also showed that negative urgency exhibits unique predictive power beyond neuroticism for externalizing alcohol problems. Expected associations between positive affectivity and urgency are less clear, but worthy of further investigation. Etiological models of urgency suggest that both urgency traits may emerge as individuals attempt to regulate and change dysregulated affect (Cyders & Smith, 2008), lending general support for the mediating role of the urgency traits. Second, urgency may moderate associations between affect and risk behavior, increasing the strength of associations. Both global and event-level studies have shown that negative urgency (Cyders & Coskunpinar, 2010; Simons, Dvorak, et al., 2010), as well as general impulsivity (Hussong & Chassin, 1994; Simons, Gaher, Oliver, et al., 2005), strengthened relationships between negative affect and alcohol use and problems. Positive urgency has similarly been shown to potentiate the effects of negative affectivity on alcohol-related problems (Karyadi & King, 2011). Two studies have also found that impulsivity and positive urgency may moderate the relationship between positive affect and alcohol use and problems, such that this association is stronger at low levels of positive affect (Colder & Chassin, 1997; Simons, Maisto, et al., 2010).

Overall, these studies demonstrate that the tendency to engage in reckless behavior when affectively aroused is an important individual difference characteristic in affective models of alcohol use and problems. Urgency may moderate associations between affectivity and alcohol use and problems, accounting for the sometimes discrepant findings in the literature on associations between trait affect and substance use. Alternatively, urgency may mediate associations between trait affect and alcohol use and related problems.

1.3. Tolerance of affect

Distress tolerance refers to the ability to experience and withstand negative emotional states (Simons & Gaher, 2005). Distress tolerance is considered a meta-emotion construct of evaluations and expectations

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