



Coping motives as a mediator of the relationship between sexual coercion and problem drinking in college students

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ABSTRACT

Sexually coercive experiences, heavy alcohol use, and alcohol-related problems occur at relatively high base rates in college populations. As suggested by the self-medication hypothesis, alcohol consumption may be a means by which one can reduce negative affect or stress related to experiences of sexual coercion. However, few studies have directly tested the hypothesis that coping motives for drinking mediate the relation between sexual assault and problem drinking behaviors, and no published studies have tested this in men. The current study tested this hypothesis using structural equation modeling in a sample of 780 male and female undergraduates. Results revealed that coping motives partially mediated the relation between sexual coercion and drinking and alcohol-related negative consequences. In addition, direct and indirect paths between sexual coercion and drinking were found for men whereas only indirect paths were found for women. Results provide support for self-medication models of drinking and suggest the importance of exploring gender differences in mechanisms for drinking.

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1. Introduction

Problematic drinking has been linked to various negative consequences in college populations, including unwanted sexual experiences (Ham & Hope 2003; Larimer, Lydum, Anderson, & Turner 1999; Perkins 2002). Previous research has found that alcohol use increased risk for sexual victimization experiences (Kaysen, Neighbors, Martell, Fossos, & Larimer 2006; Testa & Parks 1996; Ullman 2003; Ullman, Karabatsos, & Koss 1999) and that drinking increased in response to sexual victimization (Corbin, Bernat, Calhoun, McNair, & Seals 2001; Hill, Schroeder, Bradley, Kaplan, & Angel 2009; Ullman, Filipas, Townsend, & Starzynski 2006). However, few studies have specifically examined the mechanisms of the relationship between victimization and problematic drinking (for exceptions, see Grayson & Nolen-Hoeksema 2005; Kaysen et al., 2007; Ullman, Filipas, Townsend, & Starzynski 2005), and have not generally focused on the impact of sexually coercive experiences per se on drinking behavior as opposed to sexual assault or rape. In addition, although sexually coercive experiences and responses to those experiences have been extensively studied in women (e.g., Blythe, Fortenberry, Temkit, Tu, & Orr 2006; De Visser, Rissel, Richters, & Smith 2007; Livingston et al., 2004; Zweig, Crockett, Sayer, & Vicary 1999), there are few studies that investigated men or tested for gender dif-

ferences in responses to sexual coercion (Larimer et al., 1999; O'Sullivan, Byers & Finkelman, 1998; Zweig, Barber, & Eccles 1997). The present research examined the extent to which using alcohol as a coping mechanism mediates the relation between sexual coercion and alcohol use and related consequences among college students. We further investigated whether this relation operated similarly for men and women.

1.1. Sexual coercion among college students

Sexual coercion refers to “behaviors in which nonphysical tactics (e.g., verbal pressure, lying, deceit, and continual arguments) are utilized to obtain sexual contact with an unwilling [partner]” (DeGue & DiLillo 2005). As discussed by DeGue and DiLillo (2005), the term, “sexual coercion” has been used inconsistently and has been applied to sexual experiences that range considerably in severity. For example, sexual coercion has also been used to describe more subtle forms of pressure including intoxication or emotional manipulation (Basile 1999; Camilleri, Quinsey, & Tapscott 2009; Johnson & Sigler 2000; Marshall & Holtzworth-Munroe 2002; Shackelford & Goetz 2004).

Sexual coercion differs in a number of ways from sexual assault. Unlike sexual assault, where women are far more likely to be victims than men, prevalence rates suggest similar rates of coercion among college men and women, with approximately 30% reporting sexual coercion within their dating relationships (Chan, Straus, Brownridge, Tiwari, & Leung 2008; Gross, Winslett, Roberts, & Gohm 2006; Koss, Gidycz, & Wisniewski 1987; Larimer et al., 1999) and the majority of

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coercive experiences occur in relationships where some type of sexual behavior has already been initiated (Harned 2005; Livingston, Buddie, Testa, & VanZile-Tamsen 2004; O'Sullivan et al., 1998).

Given the prevalence of sexual coercion among both male and female college students, further study of the impact of coercion on health behaviors is of great importance. Sexual coercion is associated with a number of negative outcomes such as lower rates of condom use, higher rates of sexually transmitted infections, increased physical aggression and victimization in the relationship, and poorer psychological and physical health (Blythe et al., 2006; De Visser et al., 2007; Teten, Hall, & Capaldi 2007). For example, a large study of female college students found that those who were victims of sexual coercion had lower self-esteem, were more socially isolated and reported more depressed mood and social anxiety than did nonvictims (Zweig et al., 1997). Additionally, experiencing sexual coercion has been linked to higher suicidality in college women (Segal 2009). Of note, one study found that victims of sexual coercion and victims of sexual assault experienced comparable symptom levels on clinical subscales of the Trauma Symptom Inventory (Broach & Petretic 2006). Thus, sexual coercion appears to be a risk factor for psychological distress and health risk behaviors.

Though past research has identified several negative outcomes associated with sexual coercion, few studies have specifically examined alcohol use in relation to sexual coercion. Larimer et al. (1999) did find that sorority and fraternity members who had experienced sexual coercion reported heavier alcohol use and more alcohol-related consequences than did their nonvictimized counterparts. This study did not address possible mediators for this relationship. Thus, there is a clear need for more research examining the link between coercive experiences and alcohol use in both college men and women, as well as research exploring possible mechanisms through which this could occur.

1.2. Drinking to cope

Motivational theories of alcohol use have previously been evaluated in a wide range of contexts and assume that people drink to attain specific desired outcomes (Cooper 1994). This theory holds that alcohol use is motivated by perceived functions and specific motivations are associated with unique trajectories of use and consequences (Cooper 1994; Kuntsche, Knibbe, Gmel, & Engels 2005). Applied to victimization experiences, victims may engage in alcohol use as a means of coping with their experience because they perceive that alcohol will help reduce their distress.

Previous research has found support for self-medication models of drinking in women with victimization histories using cross-sectional (Goldstein, Flett, & Wekerle 2010; Grayson & Nolen-Hoeksema 2005; Kaysen et al., 2007; Miranda, Meyerson, Long, Marx, & Simpson 2002; Ullman et al., 2005) and longitudinal designs (Kaysen et al., 2006; Kilpatrick, Acierno, Resnick, Saunders, & Best 1997; Schuck & Widom 2001). Specifically, previous research has found that experiencing a sexual assault was associated with both more alcohol use and negative alcohol-related consequences in community and college samples (Kilpatrick et al., 1997) and that sexual assault victims use alcohol to decrease psychological distress associated with the assault (Khantzian 1985; Miranda et al., 2002). Thus, alcohol may serve as a negative reinforcer for psychological distress, which ultimately can lead to alcohol misuse and abuse over time. In partial support of this hypothesis, studies have found that women with sexual assault histories report greater motivations for drinking to cope than nonvictimized women (Corbin et al., 2001; Miranda et al., 2002; Ullman et al., 2006). Moreover, greater endorsement of coping motives in sexual assault victims has been associated with heavier alcohol consumption (Grayson & Nolen-Hoeksema 2005; Schuck & Widom 2001; Ullman et al., 2005).

Although drinking to cope has not specifically been tested as a mediator of the relation between sexually coercive experiences and drinking outcomes in college students, research on community samples indicates that drinking to cope plays a role in the broader victimization–drinking relationship. Previous research has shown that drinking to cope mediated the relationships between victimization and problem drinking (Goldstein et al., 2010; Grayson & Nolen-Hoeksema 2005; Ullman et al., 2005) and between psychological distress and drinking in recently battered women (Kaysen et al., 2007). Though these studies suggest coping motives mediate alcohol use in victimized women, little is known about how these relationships might function among those who have experienced sexual coercion and even less is known about how men cope with coercive experiences. Given that coercive experiences are more prevalent than other forms of sexual victimization, especially among men, and that these experiences are associated with decreased psychological functioning (De Visser et al., 2007; Zweig et al., 1997) and increased risk for alcohol consumption (Larimer et al., 1999), it is important to consider self-medication models of drinking among victims of sexual coercion.

The present study, therefore, sought to investigate coping motives for drinking as a potential mediator of the relation between sexual coercion and alcohol consumption and alcohol-related negative consequences in a large sample of college students. Given the high levels of sexual coercion reported by men and women in college student samples (e.g., Chan et al., 2008; Gross et al., 2006; Koss et al., 1987; Larimer et al., 1999), these constructs were investigated in male and female students. Based on previous findings, sexual coercion was expected to be positively related to alcohol consumption and alcohol-related negative consequences. Consistent with theories which suggest that people often drink to reduce negative affect (e.g., self-medication), it was expected that the relations between sexual coercion and alcohol consumption and alcohol-related negative consequences would be mediated by coping motives for drinking. Although men have less often been studied as victims of sexual coercion, the hypotheses described above were expected to hold for them as well.

2. Method

2.1. Participants

The present research represents a cross-sectional secondary analysis of baseline data from a larger prevention trial. Details regarding the larger trial are available elsewhere (Neighbors et al., 2010). Incoming college freshman at a large Northwestern U.S. public university were invited to participate in a Web-based survey as part of a larger social norms intervention study. Out of the 4103 students who were invited to participate in the study, 2095 students completed the initial screening assessment (51.1% response rate). Selection criteria for the present research included reporting one or more heavy drinking episodes in the previous month (4+/5+ drinks on an occasion for women/men) and minimum age of 18. This provided a sample of 780 (57.3% female) participants. Participants were an average of 18.18 (SD = 0.42) years of age at the time of the survey. Ethnicity of participants was 66.1% White, 23.7% Asian, 4.4% Hispanic/Latino, 1.3% Black/African American, 0.5% Native American/American Indian, and 4.1% self-classified as other.

2.2. Procedures

Participants completed an initial 20-minute Web-based screening assessment and were paid \$10 for their participation. Participants who completed screening and met the drinking criteria were invited to complete a 50-minute baseline assessment online within the 2 weeks following the screening assessment as part of a larger, Web-based normative feedback intervention study targeting college student drinking. Participants who completed the baseline assessment were

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