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ADDICTIVE BEHAVIORS

Addictive Behaviors 31 (2006) 1319-1330

Coping motives and trait negative affect: Testing mediation and moderation models of alcohol problems among American Red Cross disaster workers who responded to the September 11, 2001 terrorist attacks

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Abstract

This study explored the mechanism by which trait negative affect and alcohol coping motives are associated with alcohol-related problems in a sample of American Red Cross workers who participated in the relief operation following the attacks in New York City, the Pentagon, and the Pennsylvania crash site on Sept. 11th 2001. The results supported the mediation but not moderation model of coping motives. The support for the mediation model was fairly strong, including small to moderate associations between negative affect and alcohol problems, moderate to strong associations between negative affect and coping motives, and evidence of coping motives mediating the negative affect to alcohol problems relationships. The association between negative affect and coping motives was stronger among younger participants.

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Keywords: Coping-motivated drinking; Alcohol problems; Disaster workers

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1. Introduction

Comprehensive examinations of the empirical literature regarding the effects of disasters established that the majority of individuals exposed to disasters (victims of disasters as well as disaster responders) experience emotional consequences, ranging from mild and transient distress to severe and lasting psychopathology (Norris et al., 2002; Rubonis & Bickman, 1991). In addition to disturbances in affective functioning such as symptoms of depression or posttraumatic stress disorder (PTSD), increased alcohol use and alcohol-related problems occur among some victims and workers following disasters (Brandt, Fullerton, Saltzgaber, Ursano, & Holloway, 1995; Vlahov et al., 2002).

Trait negative affect is an intrapersonal variable associated with the likelihood of experiencing prolonged negative emotional consequences following disasters (Norris et al., 2002). For example, in a comprehensive review of the empirical disaster literature Norris et al. (2002) indicate that people who are high in traits such as worry, anxiety, and depression seem to be more susceptible to the psychological sequelae of disasters (i.e., posttraumatic stress symptoms, generalized anxiety disorder, and major depression). Bowman (1999) also found that people who are high in neuroticism appear more reactive to a traumatic event. Furthermore, negative affect and neuroticism have also been shown to predict alcohol use and alcohol-related problems (Cooper, Agocha, & Sheldon, 2000; Leibsohn, Oetting, & Deffenbacher, 1994). Thus, trait negative affect, in addition to being associated with one's reaction to disasters may also be associated with the likelihood of alcohol-related problems. Using alcohol to alleviate negative emotions (i.e., alcohol coping motives) represents one variable hat may explain the relationship between negative affect and alcohol variables.

Although the relationships between negative affect, coping motives, and alcohol use and problems have been studied previously with various populations such as college students (Stewart, Loughlin, & Rhyno, 2001), adults (Peirce, Frone, Russell, & Cooper, 1994), and treatment populations (Kushner, Thuras, Abrams, Brekke, & Stritar, 2001), no studies to date have explored these relationships among rescue and recovery workers, a population exposed to high levels of stress. Also, although both victims and workers experience negative consequences following disasters, the majority of disaster research has been disproportionably focused on victims of disasters.

1.1. Trait negative affect: relationship to alcohol problems

Negative affect variables show consistent direct relationships with alcohol related problems, over and above levels of consumption. Studies show direct relations from stress (McCreary & Sadava, 2000), negative affect (Rodgers et al, 2000), depression and anxiety (Holahan, Moss, Holahan, Cronkie, & Randall, 2001; Peirce et al., 1994), neuroticism (Cooper et al., 2000), and trait anger (Leibsohn et al., 1994) to alcohol-related problems. These relationships cannot be accounted for solely by the level of alcohol consumption, indicating that individuals experiencing negative emotions are more vulnerable to experience problems, regardless of their level of alcohol use. The predominant explanation for these relationships is that alcohol is used by some individuals for affect regulation. Research indicates that the strength of these relationships may differ as a function of age, being stronger among young individuals (Rodgers et al., 2000; SAMHSA, 2001; Welte, 1985). Due to the wide age ranges of Red Cross paid and volunteer staff, this study will explore the effects of age in moderating the relationships between trait negative affect and alcohol use and related problems. It is hypothesized that the association between trait

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