

Personality Traits, Alcohol Expectancies and Alcohol Use: The Role of Social Support.

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Title

Personality Traits, Alcohol Expectancies and Alcohol Use: The Role of Social Support.

Abstract

The aim of this research was to examine personality traits, social support and alcohol expectancies and the role they play in alcohol use. Questionnaires were used for data collection on an Irish student population from Dublin Business School. Sample size consisted of eighty participants.

Results from a quantitative study showed that

- a) There is a significant negative relationship between conscientiousness and alcohol use
- b) There is a significant negative relationship between openness and alcohol use.
- c) The alcohol expectancies of social expression, careless unconcern and social and physical pleasure were positively associated with alcohol use.

1. Introduction

“Many people die from thirst but the Irish people were born with one” - Author Spike Milligan

“I know I've got Irish blood because I wake up every day with a hangover” - Singer, Noel Gallagher.

“God invented whiskey to keep the Irish from ruling the world.” - Ed McMahon, American comedian.

These are only some of the well known references to the Irish and their love of alcohol. The topic of alcohol misuse is a widely discussed subject in Ireland and the purpose of this research is to examine the relationship between personality traits, alcohol expectancies, social support and alcohol. In a country where alcohol is a central component of cultural identity gaps in existing research must be examined and further research conducted to increase our knowledge on the topic. This research aims to examine personality traits, social support and alcohol expectancies and the role they play in alcohol use. The research will be conducted on an Irish student population.

The literature reviewed for this study firstly examines the extent of alcohol use in Ireland and examines some of the consequences of the levels of such use. Existing literature on personality traits and alcohol use, with particular reference to studies that refer to the big five personality traits will be examined with the aim of finding gaps in the existing research that could be applied to the Irish context. Research on the topic will be reviewed under the headings – neuroticism and alcohol use, extraversion and alcohol use, conscientiousness and alcohol use, agreeableness and openness and alcohol use.

A review of the literature pertaining to the relationship between social support and alcohol use will be examined. The aim of this research is to extend previous findings on personality traits and alcohol use, whilst also examining the effects of strong versus weak social support system on

this relationship. Ireland is a country with a dominant alcohol culture. Therefore it is paramount that more research is applied in the Irish context.

Finally the relationship between alcohol expectancies and alcohol use will be examined in brief, in relation to how alcohol expectancies may play a role in alcohol use. It is hoped that by examining the alcohol expectancies of careless unconcern, social expressiveness, power and aggression, relaxation and tension reduction, sexual enhancement, social and physical pleasure, global positive and cognitive impairment, it will be determined whether they play a role in high alcohol use. Research in this area had suggested that alcohol-related expectancies can influence the behavioural effects of alcohol and decisions regarding alcohol use (Brown, Christianson & Goldman, 1987).

1.1 Alcohol use in Ireland

Reports in the last few years have highlighted the extent of alcohol use in Ireland and do not portray the Irish in a positive light. A report by the Steering Group on National Substance Misuse Strategy revealed this year that Ireland's per capita alcohol consumption is 11.3 litres per adult- the tenth highest of 40 member countries in the Organisation for Economic co-operation and development in 2009 (Department of Health 2012, p.8). It also found that Irish adults binge drink more than any other European country, with one-quarter of Irish adults reporting that they binge drink every week.

Another survey published recently by the Health Research Board, (Markey, 2012) found that more than four out five people believe that current levels of alcohol consumption in Ireland are too high. The survey, conducted and analysed by Ipsos MRBI, sought to measure Irish people's knowledge, attitudes and behaviours in relation to alcohol consumption, marketing and selling of alcohol and current and potential responses to alcohol-related health and social harms. Interestingly this survey also found that very few people understand what a standard drink is. Only one in ten

people know the recommended maximum number of standard drinks that they can safely consume in one week. Of the 1,020 people surveyed, three in every four people believe that Irish society tolerates high levels of alcohol consumption. A considerable majority, 72% of the people surveyed say that they know someone who, in their opinion, drinks too much and 42% of this group say that this person is an immediate family member (Markey, 2012).

This high consumption of alcohol can lead to negative alcohol-related consequences in relation to health and social issues. The Irish Times recently reported a 2011 study by professor Brendan Walsh of University College Dublin and Dermot Walsh of the Mental Health Commission which showed that alcohol consumption has a significant impact on suicide rates among males of all ages, and young women aged 15 to 24 (O'Brien, 2013). According to Conor Cullen of Alcohol Action Ireland (2013, p.1)

The World Health Organisation has estimated that the risk of suicide when a person is currently abusing alcohol is eight times greater than if they were not abusing alcohol. However, a person doesn't have to be a heavy drinker or even a regular drinker to be at risk – just one occasion of heavy drinking can reduce inhibitions enough to self-harm or act on suicidal thoughts.

The My World survey conducted with 14,500 young people also provides clear evidence of the link between excessive use of alcohol and poor mental health and well-being. Worryingly, excessive drinking was reported by 58% of over 16 year olds.

Not only can alcohol have a damaging affect on mental health but alcohol-related deaths rose in Ireland over a five year period between 2004 and 2008 (Lyons, Lynn, Walsh, Sutton & Long, 2011). In the first study of its kind in Ireland, this Health Research Board paper (Lyons et al, 2011) shows that alcoholic liver disease made up almost one in six of the 4,332 alcohol-related deaths in this period. The rate of hospital discharges for alcoholic liver disease in the 15-34 year age group

increased by 247% between 1995 and 2007 in Ireland. This period coincided with record levels of alcohol consumption.

Other social problems arise from alcohol use and seem to be increasing in recent years. Alcohol-related social problems, such as violence, public disturbance, poor work performance and family problems are imposing a serious burden on Irish society. A report by the Health Research Board in 2009 revealed a 30% increase in alcohol-related offences between 2003 and 2007 (Hope & Mongan, 2011). Another worrying report by the Independent Child Death Review Group (Department of Children and Youth Affairs, 2012) examined the deaths of children in care, receiving aftercare or known to the HSE at the time of their deaths. Alcohol in the home was named as a key child welfare issue, second only to neglect, in the cases of unnatural death reviewed.

It is evident that alcohol consumption is increasing in recent years in Ireland. Similarly negative alcohol related consequences such as mental health issues, suicide rates, negative health issues and crime are on the increase. The factors that lead to alcohol consumption need to be examined. Are certain personality traits more vulnerable to alcohol abuse? If so can social support act as a buffering mechanism to this abuse and finally do our alcohol expectancies play a role in determining alcohol use?

1.2 Personality traits

Traits are consistent patterns in the way individuals behave, think and feel and are aspects of personality that are enduring, typical and public. They serve three main functions to summarise, predict and explain behaviour. Traits are the '*fundamental building blocks of personality*' (Pervin, 1989, p.17). Whilst there is much debate amongst trait theorists, there is one basic assumption - that people possess broad dispositions to behave in particular ways – based on their personality traits. Much research has been conducted to examine the relationship between personality traits and

addictive behaviours such as alcohol use.

Earlier studies in a non-Irish context have identified the importance of personality traits in relation to alcohol use. Positive correlations have been found between alcohol consumption and dishibitory personality traits (sensation seeking, impulsivity, psychopathy, nonconformity) and dimensions (psychoticism and extraversion) (Grau &Ortet, 1999). Also stress responsivity-related personality traits (neuroticism) were found to significantly influence alcohol expectancies and this study will be discussed in further detail when alcohol expectancies are being examined (Williams& Clark, 1998). In a longitudinal study three dimensions of personality (novelty-seeking, harm avoidance and reward dependence) in children was found to predict alcohol abuse in young adults (Clonginger, Sigvardsson & Bohman, 1988).

Elkins et al. (2006) found that personality traits confer generalized risk for developing any substance disorder, though some traits are more strongly linked with some substance disorders than with others. A recent report by the Irish Times suggests that poor impulse control is more likely to lead to problem drinking, which in turn can lead to more impulsive and dangerous behaviour (O'Brien, 2013). Mackie (2011) conducted longitudinal research which examined personality and the relationship between psychological symptoms and alcohol use, the results of which highlighted the importance of examining personality traits in studying the associations between alcohol use and psychological symptoms.

Therefore, evidence suggests that there is positive correlation between certain personality traits and alcohol use but more research is needed. A very recent study (Quinn, Stappenbeck& Fromme, 2011) found that college students were lower in trait-based risk for drinking, and accounting for traits revealed a stronger positive association between attending college and drinking more heavily. This present study is therefore using a sample from a college population where alcohol use is prevalent.

Whilst certain personality traits such as low-self esteem, impulsivity, anxiety and dependence have been associated with high levels of alcohol use studies examining the relationship

between the big five personality traits and alcohol use in Ireland are sparse. The five factor model is a hierarchical organization of personality traits in terms of five basic dimensions - neuroticism, agreeableness, conscientiousness, openness and extraversion. Martin and Sher note "*The five-factor model of personality holds promise for studying personality traits in alcohol use disorders*" (1994). Therefore this study will attempt to examine this relationship, using the five factor model, in the Irish context and with a college sample population.

1.2.1 Neuroticism and alcohol use

Pervin defines neuroticism as "*a dimension of personality defined by stability and low anxiety at one end as opposed to instability and high anxiety at the other end*" (1989, p. 6-7). Insecurity, emotional, nervousness and worry would be characteristics of an individual who would score high in neuroticism.

Ruiz, Pincus and Dickinson (2003) investigated the relationships between Five-factor model domains and facets and alcohol-related problems. Two hundred students who had used alcohol in the past year completed self-reports and interview assessments. Neuroticism was linked to drinking, but only some of the facets from this domain had significant relationships to drinking.

A longitudinal study of 620 college students found that narcissism predicted alcohol use (Luhtanen& Crocker, 2005) and alcohol use disorders have been positively associated with neuroticism (Martin & Sher, 1994).

1.2.2 Extraversion and alcohol use

Extroversion refers to someone with good social skills, who focuses on the external world and people. Someone who would score high in extraversion would be socialable, talkative, person-orientated, optimistic, fun-loving and affectionate.

Tomcikova and Zuzana (2011) attempted to compare characteristics of adolescent excessive drinkers compared with consumers and abstainers in terms of family characteristics. Cross-sectional data was collected from 3694 students in Slovakia. Adolescents who scored high in extraversion, negative self-esteem and aggression and who also scored low in perceived social support from family and for well-being were more likely to develop a risky pattern of alcohol consumption. In a study of two hundred students who had used alcohol in the past year a bivariate analysis demonstrated an association between facets of extraversion and alcohol use (Ruiz et al. 2003).

In contrast however, a study by Von Knorring, Smiggen, Lindberg & Edholm (1987) on subtype alcoholics found that both groups scored low on a scale that measured social ability. Jang et al (2000) found liability to alcohol misuse is related to genetic factors common to a specific subset of antisocial personality traits describing conduct problems, narcissistic and stimulus-seeking behaviour. This area needs to be further examined.

1.2.3 Conscientiousness and alcohol use

The five factor model measures conscientiousness, that is, it assesses the individual's degree of organisation, persistence and motivation in goal directed behaviour (Costa & McCrae, 1990). Those who score low in this area would be characterised as aimless, lazy, careless and weak-willed. Conscientiousness and most of its facets have been found to be associated to alcohol-related problems (Ruiz et al 2003).

Results from a meta-analysis of conscientiousness-related traits and leading behavioural contributors to mortality showed that conscientiousness-related traits were negatively related to all risky health-related behaviours such as excessive alcohol use and positively related to all beneficial health-related behaviours (Bogg & Roberts, 2004).

1.2.4 Agreeableness, Openness and alcohol use

Costa and McCrae (1990) also assesses agreeableness which refers to an individual's interpersonal skills with high scores reflecting characteristics such as helpfulness, trustworthiness, gullibility and a forgiving nature. Whilst openness refers to how willing people are to make adjustments in notions and activities in accordance with new ideas or situations. Based on the five factor model (Costa & McCrae, 1990) those who score high in openness are curious, creative, imaginative and have broad interests.

Martin & Sher (1994) examined Neuroticism, Extraversion, Openness (NEO) Five-Factor Inventory correlates of risk for alcoholism, alcohol use disorders, in a sample of 468 young adults. Familial risk for alcoholism was positively associated with openness and negatively associated with agreeableness. However, facets of agreeableness, but not the domain, were associated with drinking (Ruiz et al. 2003).

1.3 Social support and alcohol use

A study by Pauley (2010) exploring the role of social relationships in college students' alcohol use decisions, indicated that students believe that alcohol is an integral part of college life. The study hypothesized that the quality of socially supportive relationships moderates the relationships between personality traits and alcohol-related outcomes. Pauley predicted that social support interacts with impulsive personality traits such that high levels of social support predict increased alcohol consumption for highly impulsive individuals. In contrast the theory also predicted that social support interacts with anxious/neurotic personality traits such that high levels of social support predict decreased alcohol consumption. Using a sample of 668 students, results

demonstrated that social drinking motivations and peer alcohol use were significant predictors in the model using these variables. However social support did not interact with impulsivity to predict student's alcohol use. There was no support for the relationship between anxiousness, support, and alcohol problems. On the basis of these results it is evident that more research into the relationship between alcohol use, personality traits and social support is needed.

Research on relationship between social support and alcohol use in Ireland is sparse. A study by Grube and Morgan (1990) investigated the extent to which an interactive model of attitudes and perceived social support increased the prediction of adolescent smoking, drinking, and other drug use above and beyond an additive model among Irish post-primary students. They collected data three times over a one year period using surveys and questionnaires. They found significant contingent consistency interactions primarily involved perceived substance use by friends. Whilst this study was conducted in the post primary context it suggests that there may be differences in the effects of perceived social support from friends in comparison to perceived social support from family. This is an area that should be further explored.

Interestingly, Tomcikova and Zuzana (2011) found that a risky pattern of alcohol consumption was more frequent among adolescents who had divorced parents, higher scores for perceived social support from friends and lower scores for social support from family. Other research literature on social support and alcohol use found that students with high social support decreased their alcohol consumption during stressful examination time whilst those with low social support showed an increase in alcohol consumption (Steptoe, Wardle, Pollard, Canaan & Davies, 1996). Other research suggested that family social support was indirectly associated with subsequent increases in peer alcohol use (Mason & Windle, 2001). Whilst other research supported the buffering influence of tangible support on the financial stress-alcohol involvement relationship (Pierce, Frone, Russell & Cooper 1996) and that perceived social support was negatively related to depression and that depression in turn, was positively related to alcohol use (Pierce, Frone, Russell, Cooper, Lynne & Mudar, 2000).

It is therefore evident that social support does play a role in determining alcohol misuse, and this role needs to be more fully assessed in terms of the relationship between personality traits consistent with alcohol high alcohol use. The social support questionnaire will assess individuals perceived social support as it asks questions about people in their environment that provide them with help and support.

1.4 Alcohol Expectancies

Leigh (1989) defines alcohol expectancies as the cognitive, affective, and behavioural outcomes an individual expects to occur due to drinking. Whilst expectancies vary from individual to individual it has been found that those who expect positive outcomes drink more often, drink more alcohol and show signs of problem drinking.

Williams and Clarke (1998) examined the role of alcohol consumption in university students in terms of the reasons for drinking, coping strategies, expectancies, and personality traits. They determined whether reasons for drinking, coping strategies, alcohol expectancies, and personality traits predict binge drinking and alcohol consumption levels in university students. The results suggested that alcohol expectancies played a significant role by influencing reasons for drinking and that stress responsivity-related personality traits played a significant role, primarily via an influence on alcohol expectancies.

There is a significant amount of research into the role alcohol expectancies play in alcohol consumption, particularly alcohol misuse. One such study by Zamboanga, Schwartz, Ham, Borsari and VanTyne (2010) sought to examine how alcohol expectancies and the valuations (i.e., desirability) of these expectancies were associated with hazardous alcohol use. Results showed sufficient discriminant validity among pregameing behaviours, drinking game participation, and hazardous alcohol use. Pregaming referring to risky drinking behaviour that occurs when students drink alcohol before a social event. Findings also revealed that pregameing mediated the

associations between positive alcohol expectancies and hazardous drinking behaviours (Zamboanga et al, 2010). These findings offer an insight into the factors that contribute to the development of risky alcohol consumption patterns.

It is hoped that this research will contribute similarly by examining the alcohol expectancies of careless unconcern, social expressiveness, power and aggression, relaxation and tension reduction, sexual enhancement, social and physical pleasure, global positive, cognitive and physical impairment. The aim will be to examine whether these alcohol expectancies determine high alcohol use.

1.5 The current study

In a country that is known for its extensive alcohol culture worldwide and with alcohol consumption on the rise in recent years more research is needed, particularly in the college context where high alcohol consumption is prevalent. As mentioned there are many negative alcohol-related consequences such as mental health issues, increasing suicide rates, negative health issues and crime are on the increase. The factors that lead to alcohol consumption need to be examined.

This research is conducted with the hope that it will shed light on the personality traits and alcohol expectancies that are more consistently related to alcohol misuse. As is evident, research exploring the relationship between the five personality traits (Extraversion, Agreeableness, Conscientiousness, Neuroticism and Openness) and alcohol use, in Ireland, are sparse. Research exploring the relationship between alcohol expectancies and alcohol use is also an area that needs to be further explored in the Irish context. Therefore the aim of this study to determine whether the relationships between personality traits, alcohol expectancies and alcohol use are mediated by high social support.

This research is conducted with the hope that it will enhance knowledge within alcohol/addiction fields, that it will highlight the relationship between certain personality characteristics and

social support in leading to alcohol misuse and that it will highlight the role of alcohol expectancies in alcohol use. Foxcroft, Lowe and Breen (2008) in their review of primary prevention for alcohol misuse in young people found that 20 of the 56 studies included showed evidence of ineffectiveness. No firm conclusions about the effectiveness of prevention interventions in the short- and medium-term were possible. More research is needed on alcohol misuse in Ireland. It is hoped that findings from this study will provide useful information on the implications for the prevention of alcohol mis-use and the improvement of addiction treatment.

1.6 Main hypothesis

Hypothesis One: It is hypothesized that individuals who score high in extraversion and have a weak social support system will have significantly higher levels of alcohol use than those who score low in extraversion and have a strong social support system.

Hypothesis Two: It is also expected that individuals who score high in neuroticism and have a strong social support system will have significantly higher levels of alcohol use than those who score low in neuroticism and have a weak social support system.

Hypothesis Three: It is hypothesized that individuals who score high in conscientiousness and have a strong social support system will have significantly lower levels of alcohol use than those who score low in conscientiousness and have a weak social support system.

Hypothesis Four: It is also expected that individuals who score high in agreeableness and openness and have a strong social support system will have significantly lower levels of alcohol use than those who score low in agreeableness and openness and have a weak social support system.

Hypothesis Five: It is hypothesized that individuals who have high alcohol expectancies (careless unconcern/social expressiveness/power and aggression/relaxation and tension reduction/sexual enhancement/social and physical pleasure/global positive/cognitive and physical impairment) will have significantly higher levels of alcohol use than those who have low alcohol expectancies.

This research hopes to demonstrate that there is a significant relationship between personality traits (-extraversion, neuroticism, conscientiousness, agreeableness, openness), alcohol expectancies and alcohol use. It is also hoped that this study will demonstrate the importance of a strong social support system as an influential factor in reducing harmful alcohol use. As a result this study will yield valuable information in tackling the problems that derive from alcohol misuse in Irish society.

2.0 Method

2.1 Participants:

Convenience sampling was conducted on a college student sample from Dublin Business School. Participation in the research was voluntary and confidential, this was clearly communicated to the students before questionnaires were handed out. Student classes were randomly selected and questionnaires were handed out in classes. A higher rate of participation was seen in smaller classes. There was a final sample of eighty participants (N=80). The study sample consisted of males (N=28) and females (N=52). Table 2 demonstrates the percentages in relation to the gender of participants, with the majority of participants (65%) females in comparison to males(35%).

Table 1 Gender of participants.

Male	N	Valid	28
Female	N	Valid	52

Table 2 Pie chart demonstrating Gender percentages of Participants.

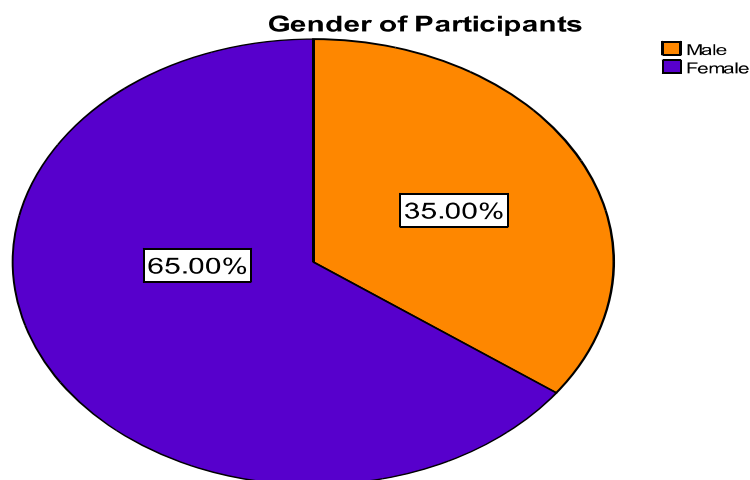
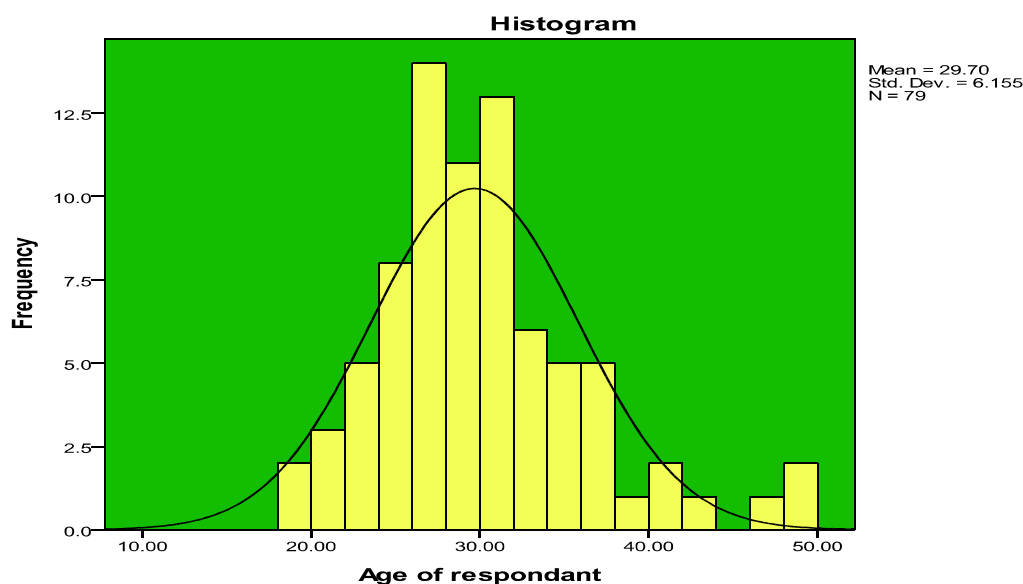


Table 3 demonstrates that the sample had an age group, with youngest participation age 19 and the oldest age 49. The mean age of participants was 29.6. Standard deviation was 6.15.

Table 3 Histogram demonstrating age of respondents



These variables, age and gender will be used further in the analysis section to examine the differences in findings of personality traits, social support, alcohol use and alcohol expectancy.

2.2 Design:

This research was a quantitative survey design. It was a correlational study with personality traits (neuroticism, openness, conscientiousness, extraversion, agreeableness), alcohol expectancies (careless unconcern, social expressiveness, power and aggression, relaxation and tension reduction, sexual enhancement, social and physical pleasure, global positive, cognitive and physical impairment), demographics (gender and age), and social support the predictor variables(PV). Alcohol use was the dependent variable (DV). External variables to account for in this study will be further examined in the limitations section.

2.3 Materials

2.3.1 The Alcohol Effects Questionnaire (AEFQ), (Rohsenow,1983).

This questionnaire consists of forty statements that describe possible effects following alcohol use. It assesses the participants present beliefs about alcohol in relation to alcohol effects under the following domains- careless unconcern, social expressiveness, power and aggression, relaxation and tension reduction, sexual enhancement, social and physical pleasure, global positive and cognitive and physical impairment. It is a revision of the Alcohol Expectancy Questionnaire (Brown, Christiansen & Goldman, 1987) and assesses undesirable effects of alcohol and positive reinforcing effects. Allen and Columbus (1997, p.87) note that factor analysis of the Alcohol Effects Questionnaire on college students largely support the first six rationally derived factors and combined the two negative scales into one factor.

Statements such as 'Drinking makes me feel flushed' or 'I can't act as quickly when I've been drinking' are listed and the participant reads the statement and responds according to their experiences with a heavy (5 drinks or more per occasion) amount of alcohol. They check agree or disagree based on their experiences and then they fill the number that best corresponds to the strength or their belief. This is based on a scale of 1 for mildly believe to 10 strongly believe. Written instructions were provided at the start of the questionnaire. Each scale score is the sum of the items that are marked agree on the subscales of careless unconcern, social expressiveness, power and aggression, relaxation and tension reduction, sexual enhancement, social and physical pleasure, global positive and cognitive and physical impairment.

Allen and Columbus (1997, p.87) note that factor analysis of the Alcohol Effects Questionnaire on college students largely support the first six rationally derived factors and combined the two negative scales into one factor.

2.3.2 Alcohol Use Questionnaire

A questionnaire to ascertain the participant's alcohol use in the last month was devised by the researcher. It comprised 3 questions and participants had to tick the appropriate box or write a figure in the appropriate box on their alcohol consumption in the last month.

One such question was as follows:

On average, how many times in the past month have you been drunk?

NONE	
1-5 times	
6-10 times	
11-15 times	
16-20 times	
More than 20 times	

The results of question one and two were added to produce an alcohol use total score. Question three was inputted based on the box that they ticked to produce a score in relation to drunkenness.

2.3.3 The Big Five Inventory (John&Srivastava, 1999)

Personality traits were assessed using the Big Five Inventory. This questionnaire provides scores for participants in Extraversion, Agreeableness, Conscientiousness, Neuroticism, and Openness. There are forty-four items in the questionnaire consisting of statements. The participant had to indicate the extent to which they agreed or disagreed with the statement using a scale of 1-5. 1 indicating they disagreed strongly to 5 indicating that they agreed strongly.

Statements such as 'Tends to be lazy', 'Is reserved' and 'Can be moody' were read by the

individual and a number written beside it, based on the scale 1-5. Instructions were written at the beginning of the inventory. For scoring the Big five Inventory all negatively keyed items were reversed scored and recoded by subtracting the score for all reverse-scored items from six.. Then all scale scores were created by averaging the items for each Big Five domain.

2.3.4 The Social Support Questionnaire (Short-Form) (Sarason, Sarason, Shearin, Pierce, 1987)

This assesses the individual's perceived social support. It measures two dimensions of social support - availability and satisfaction. It asked questions about people in their environment that provide them with help and support. The short form with twelve items was used as it was found to have high internal reliability and correlated highly with the long version of the social support questionnaire(Sarason, Sarason, Shearin, Pierce, 1987). Each odd numbered question asked that they list all the people they know, excluding themselves that they can count on for help and support in the manner described in the question. Such as

'Whom can you really count on to help you feel better when you are feeling generally down-in-the dumps?'

Participants were asked to give the persons initials and their relationship to them. The evenly numbered questions asked that they circle how satisfied they are with the overall support they have on a scale from 6- very satisfied to 1-very dissatisfied. Instructions were written on the previous page of the questionnaire and an example question was provided.

To score the Social Support Questionnaire the total number of people were added together for each odd-numbered item and divided by six to provide a social support number score. Then the satisfaction scores for the six even-numbered items were totalled and divided by six for per item satisfaction score.

2.4 Ethical issues

All participants were over the age of eighteen. DBS strict ethical guidelines have been followed and the research proposal was reviewed by DBS ethical committee and approved. Questionnaires used in the study were reviewed and approved by research supervisor Garry Prentice prior to data collection. Lecturers were contacted before questionnaires were handed out to organise an approved class time for data collection. All questionnaires were handed out at the beginning of each class and participants were fully informed on the topic. Participants were informed that it was on a voluntary basis and completely confidential. Approximately ten questionnaires were not filled in, however time restrictions may have played a role as the questionnaire took ten minutes to complete and many arrived to class late. Due to the sensitive nature of the topic all participants were provided with a number for the Samaritans and Alcoholics Anonymous, should it have caused any upset. They were also provided with the researchers email address, should they have wanted to examine the results of the study at a later date.

2.5 Data Analysis

Answers from the questionnaires were inputted into statistics software SPSS 18 for a quantitative research analysis. Descriptive statistics were used for the different variables (gender and age) in the method section. A multiple regression analysis was conducted to examine the relationship between personality, demographics, social support and alcohol expectancy and alcohol use. Results from data collection will be discussed in detail in the results section.

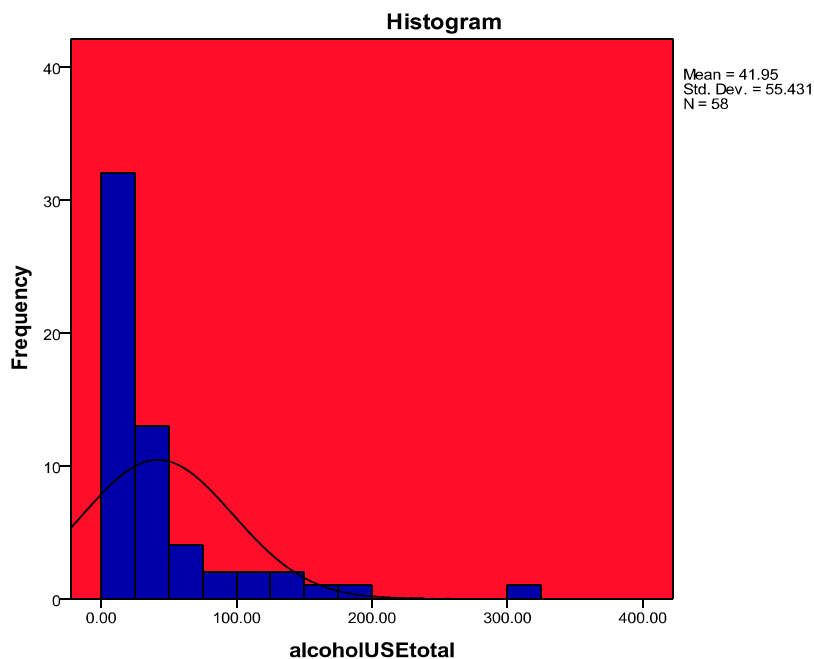
3. Results

There were a total of 90 questionnaires handed out to students who participated in the study, however from this ten were eliminated as questionnaires were not filled in, two of which indicated that they didn't drink alcohol. Once these ten questionnaires were omitted, a total of eighty remained with complete or near complete data. Multiple regression was conducted using the statistical software programme SPSS. Results of data analysis are below.

3.1 Descriptive Statistics

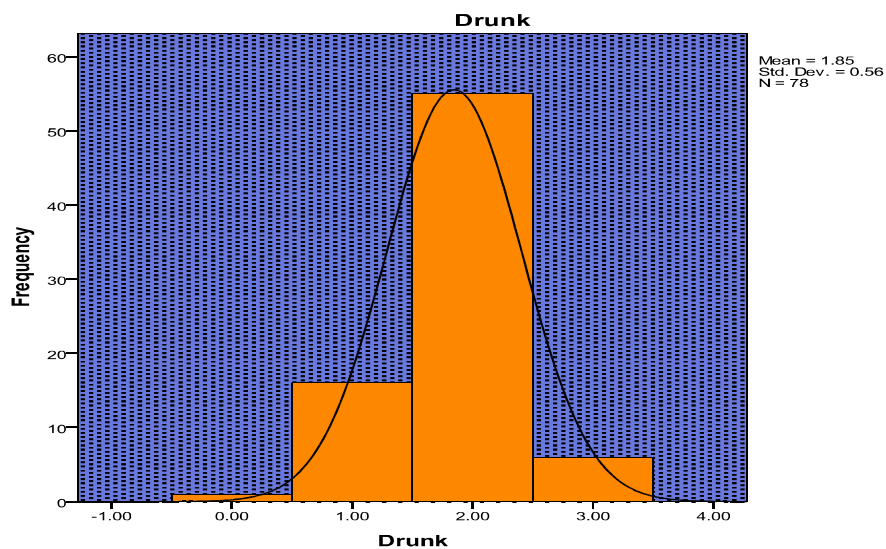
A positively skewed distribution was found for the variable of alcohol use. Therefore the mean (41.96) was not used as the measure of central tendency, the median was used as it was more representative of the typical score in the sample. Table 4 demonstrates the positively skewed distribution for alcohol use.

Table 4 Positively Skewed Distribution for Alcohol Use



As a result of the positively skewed distribution for alcohol use, the variable of drunkenness was also examined in relation to alcohol use and used during data analysis. Table 5 demonstrates a normal distribution curve with a mean 1.86 and standard deviation of 0.56 for drunkenness. This variable was used in multiple regression analysis and Pearson's correlation along with alcohol use to explore significant relationships with other variables.

Table 5 Normal Distribution Curve for Drunkenness



3.2 Multiple regression

Hypothesis in this research aim to find a relationship between personality traits, alcohol expectancies, social support and alcohol use. The multiple regression model with all fifteen predictors produced on alcohol use produced $R^2 = .387$, $F(17,44) = 1.633$, $p < .001$. As can be seen in Table 6, no significant relationships were found.

Table 6 Summary statistics, correlations and results from the multiple regression analysis

<i>Variable</i>	<i>Beta</i>	<i>t</i>	<i>Significance</i>
Extraversion	.059	.367	.716
Agreeableness	-.011	-.075	.941
Conscientiousness	-.260	-1.796	.079
Neuroticism	-.295	-1.909	.063
Openness	-.123	-.849	.400
Global positive	-.032	-.178	.860
Social Physical	.098	.614	.542
Sexual Enhancement	-.170	-1.012	.317
Power aggression	-.132	-.749	.458
Social expression	.296	1.558	.126
Relaxation/Tension reduction	-.010	-.064	.949
Cognitive Physical impairment	.103	.642	.524
Careless unconcern	.176	.999	.323
Gender	.231	1.304	.199
Age	.056	.371	.712
Perceived Social support figures	.277	1.852	.071
Satisfaction with social support	-.240	-1.460	.151

The multiple regression model with all fifteen predictors produced on amount of times participants were drunk in the last month produced $R^2 = .363$, $F(17, 44) = 1.472$ $p < .001$. As can be seen in Table 7, there was no significant relationship between the variables (Extraversion,

Agreeableness, Conscientiousness, Neuroticism, Openness, global positive, social physical, sexual enhancement, power aggression, social expression, relaxation/tension reduction, cognitive physical impairment, careless unconcern, gender, age, perceived social support and satisfaction with social support) and the amount of time participants were drunk in the last month.

Table 7 Summary statistics, correlations and results from the multiple regression analysis -

Drunkness

<i>Variable</i>	<i>Beta</i>	<i>t</i>	<i>Significance</i>
Extraversion	-.237	- .548	.586
Agreeableness	-.090	.244	.808
Conscientiousness	.038	-1.273	.210
Neuroticism	-.188	- .293	.771
Openness	-.046	-1.573	.123
Global positive	.032	.175	.862
Social Physical	.238	1.464	.150
Sexual Enhancement	-.047	- .271	.788
Power aggression	-.144	- .801	.428
Social expression	.109	.563	.576
Relaxation/Tension reduction	-.033	- .204	.839
Cognitive Physical impairment	.105	.642	.524
Careless unconcern	-.161	- .897	.374
Gender	.058	.322	.749
Age	.038	-1.540	.131
Perceived Social support figures	.110	.720	.475
Satisfaction with social support	-.016	- .094	.926

3.3 Pearson's correlation

To further analyse data a Pearson's correlation was conducted. In relation to personality traits and alcohol use a Pearson's correlation found a moderate significant negative correlation between drunkenness and the personality trait of openness ($r = -.288$; $p = .011$). A Pearson's correlation found a strong negative correlation between alcohol use and openness ($r = -.239$; $p = .035$). There was a strong negative correlation between alcohol use and conscientiousness ($r = -.298$; $p = .008$).

In relation to social support an alcohol use a Pearson's correlation found a strong significant positive correlation between alcohol use and perceived social support. ($r = .259$; $p = .024$).

Some support was found for hypothesis five in relation to alcohol use and the alcohol expectancies of social expression and careless unconcern.. A Pearson's correlation found a moderate significant positive correlation between alcohol use and social expression. ($r = .291$; $p = .011$). A Pearson's correlation found a strong significant positive correlation between alcohol use and careless unconcern. ($r = .316$; $p = .005$). Interestingly, a Pearson's correlation found a moderate positive correlation between drunkenness and the alcohol expectancy of social expression. ($r = .238$; $p = .038$) A Pearson's correlation found a moderate positive correlation between drunkenness and social and physical pleasure. ($r = .264$; $p = .024$) . A Pearson's correlation found a strong negative correlation between drunkenness and age of the participants. ($r = -.302$; $p = .008$).

Personality Trait	Extraversion	Agreeableness	Conscientiousness	Neuroticism	Openness	PSS	SSS	Global Positive	Social Physical	Sexual Enhancement	Power/Aggression	Social Relaxation/Te	Cognitive/Physical Impairment	Carelessness/Alcohol use Unconcern	Drunkenness	Age
Extraversion																
PC																
Sig(2-tailed)																
Agreeableness																
PC	-.122															
Sig(2-tailed)	.288															
Conscientiousness																
PC	-.076	-.439**														
Sig(2-tailed)	.507	.000														
Neuroticism																
PC	-.324**	-.134	-.173													
Sig(2-tailed)	.004	.247	.136													
Openness																
PC	.260*	-.089	.222	-.244												
Sig(2-tailed)	.022	.439	.051	.052												
PSS																
PC	.094	.105	-.003	-.123	-.146											
Sig(2-tailed)	.422	.372	.980	.302	.212											
SSS																
PC	.200	.152	.052	-.213	.044	.385**										
Sig(2-tailed)	.086	.192	.657	.071	.706	.001										
Global Positive																
PC	-.043	-.195	-.180	.069	-.083	-.075	.099									
Sig(2-tailed)	.717	.097	.124	.563	.481	.531	.409									
Social Physical																
PC	-.034	-.022	-.156	.134	-.109	.143	-.014	.353**								
Sig(2-tailed)	.774	.855	.190	.269	.361	.237	.910	.002								
Sexual Enhancement																
PC	.144	.007	-.100	.098	.023	.102	.050	.339**	.126							
Sig(2-tailed)	.216	.953	.389	.407	.843	.387	.673	.003	.290							
Power/Aggression																
PC	-.009	-.243*	-.231*	.139	.105	.057	-.164	.316**	.246*	.030						
Sig(2-tailed)	.942	.038	.050	.246	.377	.634	.173	.007	.040	.797						
Social Expression																
PC	-.310	-.086	-.205	.355	-.228	.024	-.125	.286	.261	.400	.296					
Sig(2-tailed)	.007	.463	.078	.002	.049	.842	.292	.013	.026	.000	.011					
Relaxation/Tension Reduction																
PC	-.130	-.093	-.032	.286*	-.061	-.207	-.046	.420**	.273*	.162	.238*	.382**				
Sig(2-tailed)	.273	.436	.791	.015	.606	.083	.702	.000	.020	.167	.046	.001				
Cognitive/Physical Impairment																
PC	-.155	.135	.092	.123	.016	.103	-.035	-.022	.111	.054	.416**	.284*	.211			
Sig(2-tailed)	.183	.250	.430	.300	.895	.385	.769	.850	.350	.642	.000	.014	.071			
Carelessness/Unconcern																
PC	-.096	-.024	-.150	.030	-.122	.140	.078	.301**	.446**	.108	.466**	.268*	.245*	.456**		
Sig(2-tailed)	.414	.835	.198	.798	.297	.237	.510	.009	.000	.351	.000	.020	.035	.000		
Alcohol Use																
PC	.074	-.035	-.298**	-.119	-.239*	.259*	-.002	.024	.224	.142	.164	.291*	.011	.316**	.169	
Sig(2-tailed)	.518	.758	.008	.306	.035	.024	.986	.841	.056	.218	.163	.011	.923	.005	.145	
Drunkenness																
PC	-.095	-.017	-.196	.091	-.288*	.052	-.087	.067	.264*	.112	.028	.238*	.027	.071	.454**	
Sig(2-tailed)	.412	.881	.087	.435	.011	.657	.459	.567	.024	.330	.811	.038	.816	.543	.000	
Age																
PC	.105	-.095	.190	-.298**	.256*	-.116	.134	.018	-.198	-.054	-.198	-.246	-.099	-.186	-.193	-.302**
Sig(2-tailed)	.362	.409	.098	.010	.024	.323	.252	.876	.095	.644	.093	.033	.403	.110	.089	.008

4.0 Discussion

The aim of this research was to examine the relationship between personality traits, alcohol expectancies, social support and alcohol use. Descriptive statistical analysis demonstrated a positively skewed distribution of alcohol use and value of 2.9 skewness indicating a large positive skewness. This suggested deviations from normality and therefore the variable of drunkenness was also used in relation to alcohol use.

4.1 Extraversion, Alcohol Use and Social Support.

It was hypothesized that individuals who scored high in extraversion and have a weak social support system would have significantly higher levels of alcohol use than those who score low in extraversion and have a strong social support system. Findings did not support this hypothesis. There was no significant relationship between extraversion, a weak social support system and alcohol use. This does not support findings by Ruiz, Pincus and Dickinson (2003) who demonstrated an association between facets of extraversion and alcohol use. However these findings do support a study on alcoholics that found both groups scored low on a scale that measured sociability (Von Knorring, Smiggen, Lindberg & Edholm, 1987). However participants in their study were alcoholics and not students. Results from a study on daily alcohol consumption among extraverts suggested that at the individual level, higher scores on the extraversion scale were associated with higher levels of alcohol being consumed per day amongst students (McCabe, 2011). A Pearson's correlation did not find a significant relationship between extraversion and alcohol use.

4.2 Neuroticism, Alcohol Use and Social Support

It was hypothesised that individuals who scored high in neuroticism and have a strong social support system would have significantly higher levels of alcohol use than those who score low in neuroticism and have a low social support system. This hypothesis was not supported. There was no significant relationship between alcohol use, social support and neuroticism. This does not support research in this area on student alcohol use and neuroticism. This result is quite unexpected as previous research suggests a significant relationship between neuroticism and alcohol use. Ruiz, Pincus and Dickinson (2003) found that neuroticism was linked to drinking and Martin and Sher (1994) found that alcohol use disorders were positively associated with neuroticism. However results from Pauley's study using 600 students, found there was no support for the relationship between anxiousness, support, and alcohol problems. A reason for this may be that those who are anxious and have high levels of social support may use that social support to cope with their worries rather than using alcohol as a coping mechanism. Differences between peer social support and family social support and the role they may have with alcohol use amongst neurotic individuals should be further examined, as social support may mediate the relationship between alcohol use and neuroticism.

4.3 Conscientiousness, Alcohol Use and Social Support

Hypothesis three stated that individuals who score high in conscientiousness and have a strong social support system would have significantly lower levels of alcohol use than those who score low in conscientiousness and have a weak social support system. Findings did not fully

support this hypothesis. There was no significant relationship between participants who scored high in conscientiousness, had a strong social support system and low levels of alcohol use. Previous research has found an association between conscientiousness and alcohol use (Bogg & Roberts, 2004). A Pearson's correlation between alcohol use and conscientiousness conducted in this study did find a significant negative correlation suggesting that individuals who are highly conscientious have lower levels of alcohol use. Individuals who score low in conscientiousness would be characterised as aimless, lazy, careless and weak-willed and therefore this could lead to increased alcohol use as they may be easily influenced by others around them. Interestingly the alcohol expectancy of careless unconcern was associated with higher levels of alcohol use, a trait that one would associate with an individual low in conscientiousness. This significant relationship supports research in the area as conscientiousness and most of its facets have been found to be associated to alcohol-related problems (Ruiz et al 2003). However, there was no support for a weak social support system contributing to this relationship between low conscientiousness and alcohol use.

4.4 Agreeableness, Openness, Alcohol Use and social support.

It was also expected that individuals who scored high in agreeableness and openness and had a strong social support system would have significantly lower levels of alcohol use than those who score low in agreeableness and openness and had a weak social support system. This hypothesis was not supported as there was no significant relationship between openness, social support and alcohol use or agreeableness, social support or alcohol use.

However there was a significant negative relationship between drunkenness and openness and between alcohol use and openness. This suggests that those who scored high in the personality trait of openness may be less inclined to drink and get drunk often in comparison to

those who scored low in openness. As mentioned previously based on the five factor model (Costa & McCrae, 1990) those who score high in openness are curious, creative, imaginative and have broad interests. Therefore their lower levels of alcohol use could be explained by the fact that they have more interests and are less inclined to use drinking as a pastime.

This does not support research in the area. Martin & Sher (1994) found that familial risk for alcoholism was positively associated with openness and negatively associated with agreeableness. However this study examined correlates of risk for alcoholism, alcohol use disorders and alcoholism sub typing dimensions in a sample of 468 young adults on the basis of a family history of paternal alcoholism. These differences in results may be explained by the use of a student population in this study with no basis for family history of alcoholism.

There was no significant relationship between alcohol use and agreeableness however; Ruiz et al (2003) found that facets of agreeableness, but not the domain, were associated with drinking. This may explain the lack of a significant relationship as facets of the domain may be associated with alcohol use and not the complete domain. Individuals who scored high in agreeableness would have good interpersonal skills reflecting characteristics such as helpfulness, trustworthiness and may be less inclined to find the need to use alcohol in a social setting.

Finally in relation to personality traits and alcohol use the mean age of participants in this study was 29.7, this is older than your average student age and may account for differences in results in comparison to previous findings. Soto, John, Gosling and Potter (2011) completed research that examined age differences in personality traits from ten years of age to sixty-five years of age using the big five inventory and a large cross sectional sample. Results from their study showed that all the traits assessed by the Big Five Inventory showed substantial mean-level age differences. Neuroticism showed negative trends across adulthood and middle age suggesting that the older people get the less neurotic they become. This would also explain our findings as the sample used here are older than your average student age, report lower levels of

neuroticism and lower levels of alcohol use. Conscientiousness showed a positive age trend from adolescence across early adulthood and middle age. There were particularly substantial differences for the facet of self discipline. This would explain the findings from this research, as people get older they are more conscientious and become more disciplined in their consumption of alcohol. This would also explain such low levels of alcohol use reported in this study.

4.5 Alcohol Expectancies and Alcohol Use

It was hypothesized that individuals who scored high in relation to alcohol expectancies (careless unconcern/social expressiveness/power and aggression/relaxation and tension reduction/sexual enhancement/social and physical pleasure/global positive/cognitive and physical impairment) would have significantly higher levels of alcohol use than those who have low alcohol expectancies. Multiple regression analysis did not find a significant relationship between alcohol expectancies and alcohol use. Williams and Clarke (1998) examined the role of alcohol consumption in university students in terms of the reasons for drinking, coping strategies, expectancies, and personality traits. Their results suggested that alcohol expectancies played a significant role by influencing reasons for drinking and that stress responsivity-related personality traits played a significant role, primarily via an influence on alcohol expectancies.

Further analysis was conducted and a Pearson's correlation found a moderate significant positive correlation between alcohol use and social expression and, between drunkenness and social expression. There was also a significant positive correlation between neuroticism and social expression and neuroticism and relaxation, tension reduction. These findings may suggest a link between neuroticism, social expression and alcohol use. Further research similar to Williams and Clarke (1998) may be needed to examine whether the alcohol expectancy of social

expression may play a role by influencing the reasons for drinking and that neuroticism plays a significant role primarily via an influence on the alcohol expectancy of social expression.

A Pearson's correlation found a moderate significant positive correlation between alcohol use and careless unconcern. ($r=.327$; $p=.013$). Therefore unsurprisingly, participants who scored high in the alcohol expectancy domain of careless unconcern had increased levels of alcohol use. A Pearson's correlation also found a moderate positive correlation between drunkenness and the alcohol expectancy social and physical pleasure ($r= .264$; $p=.024$). These findings suggest that participants drink as they expect alcohol to lead to increased social and physical pleasure.

4.6 Social support

In relation to social support and alcohol use a Pearson's correlation found a strong significant positive correlation between alcohol use and perceived social support ($r= .385$; $p=.010$), suggesting that those who feel they have a strong social support network have higher levels of alcohol use. More research on the relationship between social support and alcohol use is necessary as these results indicate that perceived levels of social support play a significant role in alcohol use. The differences between perceived social supports from family versus perceived social support from friends needs to be further explored.

This research and the social support questionnaire used did not take into account the different effects family support may have on alcohol use in comparison to friend support and this may explain the findings. A study by Grube and Morgan (1990) suggested that there may be differences in the effects of perceived social support from friends in comparison to perceived social support from family in relation to substance use. Further research needs to be conducted specifically on the effects that different types of social support may have on alcohol use.

4.7 Limitations of the study.

As discussed findings from this research are contrary to the majority of previous studies in the area of personality traits, alcohol expectancies, social support and alcohol use. There are a number of limitations with this study. The initial aim of a sample size of one hundred students was not reached. Whilst final sample size was eighty participants, some questionnaires were not fully completed and possible data collection errors may be seen in students misinterpreting questions or skimming questions. The questionnaire itself took approximately ten minutes to complete and some students were under time pressure as lectures were commencing. The alcohol use questionnaire was based on self-reporting and some level of errors may have taken place. However questionnaires are the most frequently used data collection method in educational and evaluation research (Radhakrishna, 2007) and are a useful method for conducting research on a large sample size.

There was a gender imbalance with female (N=52) and male (N=28) participants and this may have affected findings. Females may have responded differently to males as research suggests there are gender differences in alcohol consumption. Dawson and Archer (2006) found that men are more likely than women to be current drinkers, have an average daily alcohol intake about twice as high as women and are more likely to be classified as heavy drinkers. Other research suggests that women drink less, are more likely to have certain protective factors and that women perceive greater social sanctions for drinking (Nolen-Hoeksema, 2004). This gender imbalance may have implications for the findings of this research and the lack of support for hypotheses.

This gender imbalance may also have affected findings in relation to social support as

females may have responded differently in comparison to males. Matnd, Ibanez, Bethencourt, Marrero and Carballeira (2003) concluded in their study examining gender differences in the area of social support that there are gender differences in the structure of perceived social support. The higher percentage of female participants may have implications for the findings of this study in relation to the social support questionnaire.

This study examined the relationship between alcohol use, personality traits, alcohol expectancies and social support in the Irish context and with a college sample population. Whilst a college sample population was used with participant's students from Dublin Business School, a majority were from part-time evening classes. This was reflected in the findings with the mean age of participants being 29.7. Results found a strong negative correlation between drunkenness and age of the participants, suggesting that the older the participants, the less inclined they were to get drunk and therefore further research in this area should use a younger student sample with a mean age of approximately 21, as alcohol use may be more prevalent amongst that age group.

The means of delivering the survey was by accessing students during class time. However the majority of participants were from part-time evening classes. Another demographic that should have been included was that of whether the students were full time or part time students and also what ethnicity they were. The inclusion of these variables may have shed more light on the low levels of alcohol use reported in the research. Time pressure was also a factor that may have lead to participants rushed the completion of the survey. The majority of part-time students may also have been rushing from work and have been tired in the evening. Email or delivering the survey online would have been a more effective method for collecting data as time pressure, tiredness and stress may have been less inclined to impact results. An online survey would also have allowed respondents time to consider their answers particularly in regards to the alcohol use questionnaire.

The Alcohol Effects Questionnaire was used to conduct this research. Whether

participants agreed or disagreed with statements were used to examine alcohol expectancies, the strength of their beliefs were not examined and future research should be conducted examining this area and the role the strength of participants beliefs about alcohol expectancies play in alcohol use. Whilst much research examines the relationship between personality traits, alcohol expectancies and alcohol use, it was the aim of this study to examine them in light of perceived social support. Future research should examine the relationship between these variables, with a larger, younger and more gender balanced student population. A strength of this research is that it attempted to examine alcohol use in relation to a large variety of variables. Future research however, should examine the differences in alcohol consumption, personality traits, alcohol expectancies and social support within different ethnicities as this was not taken into account in this study. The different types of social support and the role they play in mediating alcohol use should also be taken into account in future research.

4.8 Conclusion

This dissertation examined the levels of alcohol use on a small number of third level Irish students under the headings of personality traits, social support and alcohol expectancies. It found that those who scored high in the personality traits of openness and conscientiousness had lower levels of alcohol use. Perceived social support did not have a significant relationship with personality traits and alcohol use. It also found that the alcohol expectancies of social expression, careless unconcern and social and physical pleasure were positively associated with alcohol use.

Future research should examine personality traits, alcohol use and the role of social support, whilst differentiating between the role of peer support and the role of family support. It should also examine this with a younger student population. Conscientiousness and openness are

both traits that are negatively associated with alcohol use and more research should be conducted in this area to ascertain how those who score low in such traits can adopt some of the coping strategies used by those that are considered high in conscientiousness and openness.

The use of alcohol for social expression and for social and physical pleasure should also be further explored. If these are reasons that are leading to risky drinking habits amongst Irish students then these reasons should be dealt with and programmes set up to make students aware of the negative social and physical effects of high alcohol use. Advertisements and campaigns such as that of Drinkaware.ie could be more effective if the reasons students drink are more thoroughly examined in relation to alcohol expectancies. Particularly those of social expression, social and physical pleasure and careless unconcern. Future treatments should be aimed at reducing these positive expectancies amongst college students.

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6.0 Appendices

Appendix 1: Alcohol Use Questionnaire

Alcohol Use

1. On average, about how often did you have a drink of each of the following in the *past month*?
(Please write the figure(s) in the appropriate box/ boxes)

If the answer is none at all please indicate with '0'.

Beer	
Wine	
Cider	
Spirits	
Alcopops	

2. Those times when you drink each of these alcoholic beverages *in the past month*, about how much did you usually have at any one time?

(Please write the figure(s) in the appropriate box/ boxes)

If the answer is none at all please indicate with '0'.

Beer (pints)	
Wine (glasses)	
Cider (pints)	
Spirits (shots)	
Alcopops (bottles)	

3. On average, how many times in the past month have you been drunk?

(Please tick the appropriate box)

NONE	
1-5 times	
6-10 times	
11-15 times	
16-20 times	
More than 20 times	

Appendix 2: Alcohol Effects Questionnaire

This questionnaire consists of a series of statements that describe possible effects following alcohol use. We would like to find out about your present beliefs about alcohol.

Please read each of the statements and respond according to your experiences with a **heavy (5 drinks or more per occasion)** amount of alcohol. If you believe alcohol sometimes or always has the stated effect on you, check AGREE. If you believe alcohol never has the stated effect on you, check DISAGREE.

Then, in the column to the far right, fill in the number that **best corresponds to the strength of your belief**, according to the following scale:

1 = Mildly Believe

10 = Strongly Believe

For example, if you strongly believe that alcohol makes you more intelligent, you would check AGREE and enter a "10" in the far column.

Please answer every question without skipping any.

For a **HEAVY (5 or more drinks per occasion)** amount of alcohol

	Agree	Disagree	Strength of Belief
1. Drinking makes me feel flushed.	_____	_____	_____
2. Alcohol decreases muscular tension in my body.	_____	_____	_____
3. Drinking makes me feel less shy.	_____	_____	_____
4. Alcohol enables me to fall asleep much more easily.	_____	_____	_____
5. I feel powerful when I drink, as if I can really influence others to do what I want.	_____	_____	_____
6. I'm more clumsy after I drink.	_____	_____	_____
7. I'm more romantic when I drink.	_____	_____	_____
8. Drinking makes the future seem brighter to me.	_____	_____	_____
9. If I have had alcohol it is easier for me to tell someone off.	_____	_____	_____
10. I can't act as quickly when I've been drinking.	_____	_____	_____
11. Alcohol can act as an anesthetic for me; that is, it can deaden the pain.	_____	_____	_____
12. I often feel sexier after I've been drinking.	_____	_____	_____
13. Drinking makes me feel good.	_____	_____	_____
14. Alcohol makes me careless about my actions.	_____	_____	_____
15. Alcohol has a pleasant, cleansing, tingly taste to me.	_____	_____	_____
16. Drinking increases my aggressiveness.	_____	_____	_____
17. Alcohol seems like magic to me.	_____	_____	_____
18. Alcohol makes it hard for me to concentrate.	_____	_____	_____
19. After drinking, I'm a better lover.	_____	_____	_____
20. When I'm drinking, it is easier to open up and express my feelings.	_____	_____	_____
21. Drinking adds a certain warmth to social occasions for me.	_____	_____	_____
22. If I'm feeling restricted in any way, drinking makes me feel better.	_____	_____	_____
23. I can't think as quickly after I drink.	_____	_____	_____
24. Having drinks is a nice way for me to celebrate special occasions.	_____	_____	_____
25. Alcohol makes me worry less.	_____	_____	_____
26. Drinking makes me inefficient.	_____	_____	_____
27. Drinking is pleasurable because it's enjoyable for me to join in with other people	_____	_____	_____

who are enjoying themselves.

- | | | | |
|---|-------|-------|-------|
| 28. After drinking, I am more sexually responsive. | _____ | _____ | _____ |
| 29. I feel more coordinated after I drink. | _____ | _____ | _____ |
| 30. I'm more likely to say embarrassing things after drinking. | _____ | _____ | _____ |
| 31. I enjoy having sex more if I've had alcohol. | _____ | _____ | _____ |
| 32. I'm more likely to get into an argument if I've had alcohol. | _____ | _____ | _____ |
| 33. Alcohol makes me less concerned about doing things well. | _____ | _____ | _____ |
| 34. Alcohol helps me sleep better. | _____ | _____ | _____ |
| 35. Drinking gives me more confidence in myself. | _____ | _____ | _____ |
| 36. Alcohol makes me more irresponsible. | _____ | _____ | _____ |
| 37. After drinking it is easier for me to pick a fight. | _____ | _____ | _____ |
| 38. Alcohol makes it easier for me to talk to people. | _____ | _____ | _____ |
| 39. If I have alcohol it is easier for me to express my feelings. | _____ | _____ | _____ |
| 40. Alcohol makes me more interesting. | _____ | _____ | _____ |

Appendix 3: The Five-factor Inventory

How I am in General

Here are a number of characteristics that may or may not apply to you. For example, do you agree that you are someone who *likes to spend time with others*? Please write a number next to each statement to indicate the extent to which **you agree or disagree with that statement.**

1 Disagree Strongly	2 Disagree a little	3 Neither agree nor disagree	4 Agree a little	5 Agree strongly
----------------------------------	----------------------------------	---	-------------------------------	-------------------------------

I am someone who...

- | | |
|--|--|
| <p>1. ____ Is talkative</p> <p>2. ____ Tends to find fault with others</p> <p>3. ____ Does a thorough job</p> <p>4. ____ Is depressed, blue</p> <p>5. ____ Is original, comes up with new ideas</p> <p>6. ____ Is reserved</p> <p>7. ____ Is helpful and unselfish with others</p> <p>8. ____ Can be somewhat careless</p> <p>9. ____ Is relaxed, handles stress well.</p> <p>10. ____ Is curious about many different things</p> <p>11. ____ Is full of energy</p> <p>12. ____ Starts quarrels with others</p> <p>13. ____ Is a reliable worker</p> <p>14. ____ Can be tense</p> <p>15. ____ Is ingenious, a deep thinker</p> <p>16. ____ Generates a lot of enthusiasm</p> <p>17. ____ Has a forgiving nature</p> <p>18. ____ Tends to be disorganized</p> <p>19. ____ Worries a lot</p> <p>20. ____ Has an active imagination</p> <p>21. ____ Tends to be quiet</p> <p>22. ____ Is generally trusting</p> | <p>23. ____ Tends to be lazy</p> <p>24. ____ Is emotionally stable, not easily upset</p> <p>25. ____ Is inventive</p> <p>26. ____ Has an assertive personality</p> <p>27. ____ Can be cold and aloof</p> <p>28. ____ Perseveres until the task is finished</p> <p>29. ____ Can be moody</p> <p>30. ____ Values artistic, aesthetic experiences</p> <p>31. ____ Is sometimes shy, inhibited</p> <p>32. ____ Is considerate and kind to almost everyone</p> <p>33. ____ Does things efficiently</p> <p>34. ____ Remains calm in tense situations</p> <p>35. ____ Prefers work that is routine</p> <p>36. ____ Is outgoing, sociable</p> <p>37. ____ Is sometimes rude to others</p> <p>38. ____ Makes plans and follows through with them</p> <p>39. ____ Gets nervous easily</p> <p>40. ____ Likes to reflect, play with ideas</p> <p>41. ____ Has few artistic interests</p> <p>42. ____ Likes to cooperate with others</p> <p>43. ____ Is easily distracted</p> <p>44. ____ Is sophisticated in art, music, or literature</p> |
|--|--|

