# "SUPPORT DRINKING": MOTIVATIONS FOR DRINKING WITH CLOSE

# OTHERS FROM THE PERSPECTIVE OF SOCIAL SUPPORT

by

**KYUNGEUN JANG**

**(Under the Direction of Jennifer Monahan)**

## ABSTRACT

This thesis explores drinking occasions in which people seek out close others to drink with to obtain social support or "support drinking." Specifically, this thesis examines why people initiate support drinking, who is more likely to engage in those occasions, and problematic outcomes of support drinking. In addition to examining concrete characteristics of support drinking, the motivational model for alcohol use, individual differences (e.g., interdependent/independent self-construal, extraversion /introversion) and alcohol expectancies were used to generate hypotheses. Participants (N = 193, mean age = 26, 59% were female.) completed an on-line survey. The most prevalent reason reported for support drinking occasions was feeling stressed or depressed. Of the personality characteristics, only the interdependence orientation of self-construal was a consistent predictor of behaviors in support drinking situations (e.g., initiating support drinking, amount of alcohol consumed, and problematic consequences). Gender, age and ethnicity were also significant predictors of characteristics of support drinking occasions and support drinking behaviors.

INDEX WORDS: Support drinking, Social support, Alcohol outcome Expectancy, Coping motive, Buddy drinking, Interdependence, Independence, Extroversion, Introversion

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**Chapter 1: Introduction**

Common beliefs about alcohol consumption include that it helps people to socialize and it alleviates negative feelings. Numerous studies have examined these beliefs and attempted to suggest plausible grounds for whether alcohol consumption truly accomplishes these goals. Specifically, motivations for drinking and alcohol expectancies are most frequently researched in an attempt to explain why people drink (Cooper et al., 1995) and what kinds of outcomes people expect (Brown et al., 1980). Although both perspectives provide important information on social drinking, researchers usually spend little time examining specific reasons for a drinking occasion and how those reasons might affect such drinking behavior. At best, under the concept of social drinking, prior studies suggest that people seek to enjoy and to socialize when drinking with others (e.g., Andrew et al., 2012; Dias, 2011; Kuendig & Kuntsche, 2012; Williams, 1966). Thus a focus on social drinking— with its emphasis on positive aspects of socializing-- does not account for a specific drinking situation in which people choose to drink with other for social support; for help in coping with negative feelings when they are going through a bad time. Thus while prior research has emphasized drinking occasions for which individuals have positive emotions and seek social pleasure (e.g., Cooper et al., 1995) this thesis examines the drinking occasions that involves coping motives in a group setting.

Towards that goal, I examine the outcomes drinkers have when they call others to cope with their negative feelings. As will be reviewed below, individuals have a variety of expectations about alcohol consumption and those expectations vary according to emotional status (i.e., whether one feels good or bad) and drinking settings (i.e., whether one drinks alone or together with others). Therefore, this thesis seeks to identify what type of

expectations people have when they have a drink with coping motive in a group setting based on the alcohol outcome expectancies proposed by Brown and colleges (1985).

A second key way this thesis is distinct from prior work is it focuses on *initiators* of drinking practices that involve coping motives. Previous studies on drinking practice that involves get-togethers lack information about the process that brings about the meetings. In other words, they pay attention to the participants invited without being concerned with whom initiates the get-togethers (e.g., Brown et al., 1980; Cooper et al., 1995; Farber et al., 1980). Except for some formal social parties that certain organizations might arrange, there is likely someone who decides when and how the group gets together. However, prior research rarely considers those "initiators" and their characteristics. Considering individual characteristics in terms of personality traits is important since some individual characteristics may be associated with preference on handling their negative feelings with others over doing it by oneself. In this sense, this thesis attempts to examine individual characteristics in terms of extroversion/introversion, interdependence and independence.

This thesis begins with the assumption that individuals call close others to have a drink when they feel bad. In particular, this thesis seeks to explore those drinking contexts from the perspective of *social support*. The concept of social support is critical as calling others when one is going through a bad time means they want others to support them. Specifically, one may believe that s/he can get desired outcome (e.g., feeling better, reducing tension level) through others' sympathy, comfort, and advice, which are the functions of social support (Goldsmith, 2004). This thesis explores alcohol outcome expectancies and personality traits and introduces a new concept, "support drinking," to denote a drinking practice that involves close others who can provide social support when one feels bad.

Under the concept of support drinking, this thesis first explores characteristics of support drinking. Specifically, I examine a) specific issues/reasons that motivate people to

seek others to drink with when they feel bad, b) what expectations they have in the occasion in terms of alcohol outcome expectancies, c) who is more likely to initiate such occasions, d) how they enjoy the occasions in terms of frequency, amount of alcohol and time, and e) what consequences there are of alcohol consumption in support drinking occasions.

Meanwhile, to examine the mechanism underlying the effects of alcohol outcome expectancy on the amount of alcohol and time spent in a drinking practice, I pose a research question to see which alcohol outcome expectancy encourage individuals to spend more time and drink more in the amount of alcohol and time spent in a support drinking occasion:

RQ: Which alcohol outcome expectancies predict the amount of alcohol and time spent in a support drinking occasion?

To achieve those goals, the first part of this thesis clarifies the support drinking concept. Then, to examine the communication behavior associated with support drinking, I review the concept of social support. Third, to demonstrate how individuals choose to drink with others for the purpose of coping, I explore the motives for drinking alcohol (i.e., enhancement, coping, and social) that Cooper and colleagues (1992) proposed. The coping motive will be my main focus as support drinking occurs when one seeks to cope with his/her negative emotions. Fourth, to explore the expectations that an individual has for support drinking, three types of alcohol outcome expectancies (i.e., positive agent, tension reduction, social assertion) related to the support drinking context will be examined. Fifth, to examine personality characteristics of those who initiate support drinking occasions, I examine four types of personality traits (i.e., independence, interdependence, extroversion and introversion) and explore how each relates to alcohol motives and alcohol outcome expectancies and evaluation of the social support received by friends in support drinking contexts.

**Characteristics of Support Drinking Occasions**

The first purpose of this thesis is to collect data that helps describe concrete aspects of support drinking occasions. I conceptualize support drinking as alcohol consumption with close others (i.e., intimate friends, close co-workers and/or romantic partners) to receive support when one is anxious, depressed or stressed. Support means the primary attributes of social support or the perceived or actual assistance that individuals receive from close/significant others specifically when s/he is depressed (Caplan, 1974; Cobb, 1976; Leavy 1983). Therefore, the term "support drinking" involves one's desire to gain a certain type of social support while drinking together. While concrete aspects of support drinking occasions (e,g., who they call, how important the friends called are, how many get together, where they meet, how long they meet, etc.) will be examined through the data collected, conception concerning the context (e.g., settings) of support drinking is provided below.

First, support drinking involves negative affect and components of social support such as emotional, informational, and companionship support (Cohen, Wills, 1985). Individuals are likely to seek out others to obtain comfort or advice, specifically when individuals are distressed or depressed. For example, when one has bad news, s/he may choose to drink with friends in hopes that the friends will comfort and emphasize so that s/he can feel better as a result. From this viewpoint, here support drinking means drinking with close others to reduce anxiety or depressed feelings through receiving social support when one is going through a bad time.

Second I suggest that support drinking will likely occur with fewer than six people (i.e., two to six people) as individuals are unlikely to experience quality interpersonal interactions with a large number of people (Miller & Steinberg, 1975). In other words, individuals in large groups are not likely to be able to pay close enough attention to have

"interpersonal" interactions, and this inability for attention affects the contents of the conversations and gratifications of the individuals who engage in the encounter (Bales, 1950).

Third, I suggest people will seek out "close" friends or colleagues in support drinking rather than meeting with mere acquaintances that are in the initial phase of relationships. As noted above, since individuals tend to interact more deeply with others and sincerely share their feelings with small number of individuals, it is more likely that people call on others intimate enough to have in-depth interactions and who can best understand and care about one's personal concerns or fears (Carstensen, 1992). In this regard, the current research suggests that support drinking settings are encounters in which individuals attempt to meet with others with whom they are close and important.

Support drinking involves encounters where the participants are willing to have interpersonal interactions beyond surface interactions caring about one another's personal matters. Every group meeting and interaction has its own goals (Bales, 1950), and social drinking has been regarded as aiming mainly at socializing. However, individuals engage in drinking practices not only to socialize but also to deal with their affect or emotions (Cooper et al., 1995; Farber et al., 1980). Therefore, it is important to consider those goals at the same time to define support drinking. As a result, this thesis proposes that individuals in support drinking settings attempt to share personal concerns and are motivated to care about each other's psychological and/or emotional status.

To validate these assumptions and provide data on concrete aspects of support drinking occasions, respondents will be asked to describe the reason for the last time they initiated a support drinking occasion. Within the context of that last time they initiated a support drinking occasion, participants will indicate how much and what they drank, the amount of time spent in the support drinking occasion, the number of people they invited and to indicate the relationship status of those friends (e.g., how close they are to those friends).

Finally, their perceptions of the support provided by their friends will be examined and participants will indicate the problematic consequences of their last support drinking occasion. Thus an important outcome of this thesis will be to provide basic descriptive data of a support drinking occasion. The concept of social support and alcohol outcome expectancy and the relationship of them with support drinking will be discussed in the next chapter.

**Chapter 2. Literature Review**

**Social Support**

There has been extensive research defining the concept of social support, generally defined as perceived or actual assistance that one can receive from a group members where s/he belongs (i.e., family, friends, and organizations), specifically when one is in troubled or depressed situations (Caplan, 1974; Cobb, 1976; Cohen & Wills, 1985; Leavy 1983). Additionally, Cohen and Wills (1985) suggests that these supportive resources can be emotional (e.g., caring), physical (e.g., financial assistance), informational (e.g., advice), or for companionship (e.g., sense of connection).

Cutrona and Russell (1990) conceptualize emotional support as providing affective messages such as care, love, and interest, especially when one is under a distressed or anxious situation. Burleson (2003) notes that emotional support works by "listening to, empathizing with, legitimizing and actively exploring the depressed one's feelings" and that "expressions of encouragement, respect, reassurance and appreciation" can be perceived as forms of emotional support (p.2). Therefore, emotional support involves exchange and expressions of one's deepest emotions, playing a vital role in close relationships. Support tends to occur in close relationships as one is most likely to reveal one's inner most feelings to close others and close others are willing to listen to one's concerns and express sincere empathy and supportive words (Bolton, 1986). In this regard, Cunningham and Barbee (2000) regard emotional support as a fundamental bridge of close relationships, and Samter (1994) recognizes it as a key factor that affects the degree of satisfaction and development of relationships.

Another form of social support, companionship support, can be established by spending time and engaging in activities with members of one's social networks such as chatting or having meals (Uchino, 2004). Rook (1985; 1987) suggests that companionship support from one's social network helps decrease one's feelings of loneliness and enhances a sense of belonging and closeness. Therefore, companionship provides individuals who seek to strengthen a relationship or validate their self-concept with feelings of being secure.

Informational support is defined as providing advice, personal opinion or instructive information, while physical support is described as offering concrete assistance such as money or performing activities for others when one is coping with difficulties (House, 1981). Specifically, informational support can be beneficial to those who strive to solve a problem. For example, one can provide useful strategies on how to manage conflicts effectively to his/her friends who are having trouble in a relationship with others.

Effects of social support have been known to be beneficial to support receivers, not only mentally but also physically. Specifically, social support can help individuals cope more effectively with their troubled situation by having others listen to them as well as by offering advice, empathy, and encouragement (Burleson, 1994; Stroebe & Stroebe, 1996). In addition, research finds that individuals involved with supportive social networks report better physical health than those who do not (Berkman et al., 2000). Particularly, research finds individuals who receive active emotional support from others can recover more quickly from various diseases and may survive longer when struggling with severe diseases such as heart disease or cancer (Seeman, 2001; Spiegel & Kimerling, 2001). All in all, receiving active social support occurs primarily in close relationships, and research overwhelmingly demonstrates that it has a positive influence on one's physical as well as metal health.

In sum, when individuals are in a mentally depressed or distressed situation, they may need emotional support from others, actual assistance or advice to solve the problem, or

a sense of connectedness; those attributes may be the reason that one seeks friends when going through a bad time. Likewise, I anticipate the mechanism of support drinking to be similar. When people experience bad events, they want to receive emotional cares and assistance or advice and want to feel that they are with good friends who help cope with the situation. In this perspective, I suggest that individuals demand and can become recipients of social support through support drinking, and this is why the functions of social support should be considered. Next, I examine support from the perspective of the larger alcohol literature specifically examining initial motives for alcohol drinking and alcohol outcome expectancies

**Motivation for Alcohol Drinking: Enhancement, Coping and Social Motives**

One of the most cited models to explain motives for alcohol drinking is the motivational model of alcohol use. The motivational model of alcohol use suggests that one's desire for handling his/her emotional status is associated with one's drinking practices as a critical motif (Cooper et al., 1995). Specifically, Cooper and colleagues (1995) conceptualize alcohol drinking as a strategic and purposive behavior to handle one's affect and propose two dimensions of motives for drinking: drinking to "cope" and drinking to "enhance" (p. 990). Drinking to enhance involves an individual's alcohol use to enhance positive affect when s/he desires to enjoy or boost his/her positive feelings. For example, when people have a ceremonial event or win praise from others, they are likely to have alcohol to enhance these positive feelings.

On the other hand, drinking to cope involves people's strategic drinking practice to handle negative affect; when they are anxious, troubled or depressed in order to escape from or alleviate the unfavorable emotions. To illustrate, when one receives a negative result from an important task, she or he may feel depressed and as a result, rely on alcohol to manage the negative feelings. In particular the individual may hope to escape or soothe the unfavorable

and unwanted emotional status while drinking. The motivational model of alcohol use argues that one's emotional dimensions are associated with two critical motives, enhancement and coping, that lead individuals to alcohol consumption.

Other researchers have also identified the relationship between emotion and drinking motives, demonstrating that emotional statuses are antecedents of one's engagement in alcohol drinking. Marlatt (1987) indicates that emotions can lead one to alcohol engagement as one expects to improve or cope with their feelings. In the same vein, Cappell and Greeley (1987) and Freed (1978) suggest that alcohol has been viewed as promoting tension reduction as well as emotional enhancement. All in all, the findings of the previous studies support the fact that emotional motives are key factors that predict one's alcohol decisions. I suggest support drinking clearly falls within the scope of the coping motive.

In addition to the emotional motives, Newcomb (1988) found that social motives or the desire to get along with people affects one's engagement in alcohol practice, indicating that building social bonds is a motive for drinking. Cooper and colleagues (1992) also conceptualize the social motive as engaging in drinking behavior to be sociable or enjoyable in a social gathering. In addition, Kirchner and colleagues' study (2006) demonstrates that alcohol facilitates processes of group formation, and that one's alcohol expectancies can be influenced by the social context. However, these studies suggest social motive are related to emotional motives and more likely to occur when individuals have positive emotions than negative emotions. Thus researchers usually consider social motives within the context of the enhancement motive. However, in this thesis, social motives are assumed to occur within the context of the coping motive as well.

By and large, the motivational model of alcohol use and other previous studies congruently argue from an emotion management perspective that people tend to purposively drink alcohol expecting to enhance or cope with their emotions. Moreover, the results of prior

studies effectively demonstrate that differentiated emotional states (i.e., positive/negative emotions) lead to distinguished motivational cues (i.e., enhancement, coping). This thesis positions support drinking under the *coping motive* perspective.

**Predictors of Support Drinking: Alcohol Outcome Expectancies**

While motives for drinking set the stage for why people drink, expectancies for how alcohol affects one's perceptions, feelings and behaviors predict actual behavior in drinking contexts. Expectancy theory defines an expectancy as a cognitive process to perceive consequences that an event may bring about (Goldman et al., 1987). That is, people tend to have certain anticipations toward upcoming events and beliefs that the events will generate the expected outcomes. Further, they note that individuals' expectancies involve a causal process such as "if-then" (p. 183) assumptions. People may believe that if a certain event occurs, then a certain effect will follow as a consequence. In this regard, many studies have incorporated the concept of expectancies to illustrate the relationship between stimuli for alcohol-related behaviors and behavioral effects.

Alcohol expectancy theory suggests that cognitive processes can play a decisive role in predicting alcohol-related behaviors (Goldman et al., 1987). Specifically, alcohol outcome expectancies refer to one's beliefs that s/he can achieve the desired consequences if they engage in alcohol drinking practices (Goldman et al., 1999; Sher et al., 1996). Research demonstrates that people tend to have certain expectancies, such as they can reduce their anxiety or that they can enhance their pleasure, when they engage in drinking practices (Kushner et al., 1994). Accordingly, studies demonstrate that alcohol expectancies predict drinking decisions and the extent to which drinkers will continue drinking (Brown et al., 1985; Falk, 1983). In addition, it is not simply alcohol itself, but alcohol expectancies that operate alcoholics' uncontrollable behaviors (Marlatt, et al., 1973). Specifically, individuals who decide to drink alcohol with positive alcohol expectancies will drink alcohol until the

desired outcomes occur. Therefore, the stronger the expectancies, the more the individual will drink. In the same vein, Brown and colleagues (1980) argue that having outcome expectancies is a necessary condition for engaging in alcohol behavior and predicts the amount of alcohol consumed. For example, one who drinks to cope with negative emotions, hoping to escape from the unfavorable emotional status, tends to drink until his/her negative feelings are alleviated; whereas another who drinks to enhance feelings, hoping to experience a euphoric status, tends to drink to the extent that he or she feels elation.

Both Brown and colleagues (1980) and Cooper and colleagues (1995) suggest that one's motives for alcohol drinking are closely related to alcohol outcome expectancies. That is, they argue that the coping motive is associated with tension reduction expectancies, and the enhancement motive is associated with social enhancement expectancies. By assessing whether alcohol drinking helps people to be relaxed when they are in a bad mood or to feel friendly when they are in social settings, Brown and Cooper's research support that people tend to have different types of expectancies according to their motives for alcohol drinking. Wardell and colleagues (2012) also supports that one's alcohol motives are associated with alcohol outcome expectancies such that motives for positive mood enhancement are associated with expectations that alcohol will boost one's positive mood, whereas motives for coping with negative moods are associated with expectations that alcohol can relieve a negative mood.

**Positive and Negative Alcohol Expectancies.**    Adopting a social learning theory perspective (Bandura, 1977), Wardell and colleagues (2012) suggest that an individual's personality or preference with regard to alcohol drinking should be considered to examine one's alcohol expectancies. To illustrate, individuals who drink more frequently or heavily may have stronger positive alcohol expectancies, such that the desired consequences of alcohol drinking will most likely occur because the individual has learned these beliefs

through the past drinking practices (Read et al., 2004; Wardell et al., 2012). As a result, Wardell et al. demonstrates that more experienced alcohol drinkers are more knowledgeable about expected effects of alcohol and, as a result, have easier access to alcohol expectancies in their memory, and thus are more actively engaged in drinking. With regard to expected effects of alcohol, some may be concerned with aversive consequences such as a hangover, impairment of the body or irresponsible behaviors. However, Rohsenow (1983) maintains that it is not the anticipated *aversive* effects of drinking that result in someone choosing to drink, but rather the expectancy that there will be *positive* outcomes from drinking. In other words, one may imagine aversive outcomes such as having a hangover or blacking-out caused by alcohol drinking; however, one is more likely to believe that s/he can obtain the desired results to offset the unpleasant expectancies (Rohsenow, 1983). As individuals tend to prime positive effects of alcohol, the negative consequences tend to be considered less; therefore, desired positive expectancies may become more salient to drinking decisions as behavior is generally governed by anticipated, desired outcomes rather than actual ones (Bandura, 1977). Thus, it is more compelling that positive alcohol expectancies are stronger predictors of one's alcohol engagement and play a decisive role in one's drinking decisions.

**Dimensions of alcohol outcome expectancies.** Brown et al. (1980) examined the domain of alcohol outcome expectancy and proposed six categories of alcohol expectancies: "(a) positive agent; (b) social pleasure enhancement; (c) sexual enhancement; (d) social assertion increase; (e) arousal with feelings of power; and (f) tension reduction."(p. 422). *Positive agent* refers to expectations that alcohol will bring about favorable feelings such as being interesting. S*ocial pleasure* indicates expectations that alcohol helps socializing with people and involves feelings such as being enjoyable to join in social occasions. Third, *sexual enhancement* represents expectations that alcohol reinforces the sexual experience or sex-related pleasure, and *arousal with feelings of power* refers to expectations about alcohol

inciting feelings of power or aggression such as increased aggressiveness. *Social assertion increase* indicates expectations that drinking helps one to boldly express one's feelings or thoughts, and *tension reduction* represents expectations that drinking helps to reduce or forget one's anxieties. The six dimensions of alcohol outcome expectancies are the foundation of alcohol outcome expectancy. Most studies about alcohol outcome expectancies (e.g., Cooper et al., 1995; Rohsenow, 1983; Wardell et al., 2012) utilize or reframe the concept of alcohol expectancy based on Brown and colleagues' (1980) framework.

Since those expectancies are developed based upon individual needs for drinking without considering one's emotional motive caused by negative affect, expectancies such as sexual enhancement, feelings of power, and social pleasure are involved and considered as important motives for drinking decisions. However, this thesis does not incorporate those specific expectancies as primary expectancies that predict support drinking. The rationale for the exclusion derives from the definition of support drinking in the earlier portion of this thesis. I conceptualize support drinking as drinking practices that one seeks close others to drink with when they are going through bad feelings. Therefore, I argue that enjoying social events will not be one's primary expectation when choosing support drinking. In addition, with regard to the expectancies for sexual enhancement and feelings of power, I maintain that those expectancies are less relevant in support drinking settings since one may be less likely to expect to enhance one's sexual arousal or aggressiveness while soliciting support from others. Rather, positive agency, social assertion and tension reduction are three expectancies that are likely to be important in support drinking occasions.

Distressed individuals may expect that drinking alcohol with friends will bring about better feelings since meeting and chatting with close friends is a good way to feel better. Also, they may expect that they will feel better if their friends comfort and empathize with them

while drinking. Therefore, positive agent is likely an important expectancy in support drinking occasions.

A common belief is that one can better express their intimate feelings and thoughts when they have some alcohol than when they are sober (Debra & Kevin, 2013). Since support drinking relies on interactions with others and a desire to open oneself up to others to receive support, I propose that expectations that one can better express what is going on to him/her (i.e., social assertion) is an important expectancy one may have in the context of support drinking. Third and not surprisingly, tension reduction expectancies should be considered as critical needs of people who choose call friends to drink with since coping with negative feelings such as tension or anxiety is the main motive of support drinking. Therefore, positive agency, social assertion and tension reduction are examined as relevant expectancies to support drinking in this thesis.

Meanwhile, as noted earlier, this thesis aims to test the effects of alcohol outcome expectancy on the amount of alcohol and time spent in a support drinking practice and questions which alcohol outcome expectancies predicts the amount of alcohol and time consumed in a support drinking occasion. Specifically, this thesis will focus on the effects of social assertion as the negative relationship between positive agent expectancy and alcohol consumption and positive relationship between tension reduction and alcohol consumption was well established in the original studies of Brown et al. (1980) and Cooper et al. (1995). While no significant relationship between social assertion expectancy and alcohol consumption was found in Brown et al.'s (1980) study, some studies report that social assertion expectancy is positively associated with the amount and frequency of alcohol consumption (e.g., Carrigana et al., 2008; Mooney et al., 1987). To replicate those results, this thesis attempts to test the relationship between social assertion expectancy and alcohol drinking patterns in support drinking occasions. Specifically, I posit that one's expectation

that alcohol will give power to talk and better present oneself will result in more consumption of alcohol and more time in a support drinking occasion.

H1a: As the level of social assertion expectancy increases, the amount of alcohol consumed in a support drinking occasion will also increase.

H1b: As the level of social assertion expectancy increases, the amount of time spent in a support drinking occasion will also increase.

All in all, people often drink with a specific purpose. Specifically, when they feel bad, having expectations that drinking alcohol will facilitate them to better express what they are going through, to feel better and to reduce anxiety plays a decisive role when one makes a drinking decision. Then, one may believe that s/he can gain the desired alcohol outcomes through drinking with close others rather than drinking alone as the close others can provide support such as sympathy, comfort, advice, and companionship. In this regard, this thesis emphasizes the importance of social support as a mechanism of support drinking that explains why one invites others for a drink. Meanwhile, this thesis assumes that people may differ in terms of their needs to engage in support drinking; some may cope with negative feelings by drinking with friends more often than may others. Also, what individuals expect to gain in the support drinking context will vary according to individual characteristics. Based on this assumption, this thesis explores personal characteristics that affect support drinking decisions in the following section.

**Personality Traits**

While I propose that people seek out close others to drink with to receive social support, I also assume that individual characteristics will affect what one expects in the support drinking encounter and how often they engage in the encounters. Importance of personality traits in drinking contexts was indicated in some prior research. Brown and Munson (1987) found personality is associated with alcohol outcome expectancies and

therefore, alcohol outcome expectancies vary with personal characteristics. In the same vein, Cooper and colleagues (1995) found adolescents' personal predisposition influences their drinking decisions. From this perspective, I suggest that often people engage in support drinking occasions, how much they drink, and how long they spend in the occasion will vary, in part, depending upon personality characteristics.

To explore the relationship between personality and alcohol behaviors associated with support drinking four personality traits are examined: a) extraversion, b) introversion, c) interdependence orientation of self-construal, and d) independence orientation of self-construal, as the characteristics related to support drinking behaviors. Since support drinking involves coping motives to deal with negative affect through interaction with others, the personality traits associated with extroversion and interdependence (e.g., gregariousness, activeness, openness, and interdependence; Costa & McCrae, 1992; Lu & Gilmour 2007; Markus & Kitayama, 1991; Triandis & Gelfand, 1998) were considered as key factors that affect engagement in support drinking occasions.

As noted earlier, prior research neglects to examine the initiator of drinking occasions, while this thesis attempts to account for who "initiates" the occasion of support drinking as well as who seeks it. Also, this thesis explores what personality traits are more saliently related to what type of alcohol outcome expectancies. Then, personality traits related to the amount of alcohol intake, the amount of time spent in an occasion of support drinking, and the number of experience in problematic consequences during/after having support drinking will be examined. To explore the relationship between personality traits and support drinking behavior, attributes of each personality traits and specific hypotheses based on the personality traits are discussed below.

**Extroversion/Introversion.**    Extroversion is defined as being active and talkative. (Costa & McCrae, 1992). Costa and McCrae (1992) also argue that extraverts are fond of

getting along with others, expressing feelings and seeking sensation. Since extroverts enjoy things that are active and sensational, it is not surprising that extraversion correlates positively with risky health such as cigarette smoking and binge drinking (Martsh & Miller, 1997). On the other hand, introversion is associated with being shy, quiet and having difficulties opening up and sharing one's feelings with others (Vogel, 1959). Specifically, Vogel suggests introverts tend to use alcohol to calm themselves before sleeping and do not drink excessive amounts of alcohol at once but are more likely to have it "steadily" (p.81). As such, both personality traits are concerned with alcohol drinking but the literature suggests introverts may be more disposed to drink alcohol in solitude whereas extroverts are more open to drinking with others than introverts.

Moreover, based on the extrovert's active and expressive personality, it is plausible that extroverts will call others and ask more frequently if they can have support drinking than will introvert individuals who have shy and reserved characteristics. Specifically, this thesis postulates that there is a possibility that an introvert may call others to drink less frequently than extraverts even when s/he wants to get support such as comfort or advice. This is because support drinking, different from solitary drinking, requires not only a willingness to have the encounter but also the effort and/or courage to call others and express one's feelings, which is not easy for introverts to do. In this regard, this thesis distinguishes the degree to which individuals believe that engagement in support drinking will be beneficial for them from the degree to which they actually initiate a support drinking occasion. Particularly, as suggested earlier, the extrovert will be comfortable with actively calling others and sharing their feelings to receive support whereas the introvert will have difficulties in doing so. Zellars and Perrewe (2001) also suggest that extroverts' outgoing characteristic enables them to actively ask others for support and they feel comfortable with telling their concerns to others. Due to extroverts' characteristic to be active and to like to get along with and talk to

others, they will initiate support drinking occasions more often they will introvert. Also, they

will participate in support drinking occasions called by friends needing support more often

than will introverts. Therefore, I suggest:

H2a: Extroverts will self-report initiating support drinking occasions more often than

will introverts.

H2b. Extroverts will self-report being called by friends needing support to engage in

drinking than will introverts.

With regard to alcohol outcome expectancies, pleasure enhancement may be the most

influential factor for alcohol decisions for extroverts. As noted above, since they enjoy things

that are active and sensational, they may hope to refresh themselves and feel better while

having support drinking as a result of coping with negative feelings. Therefore, I suggest:

H2c: Extroverts will self-report having stronger positive agent expectancies than will

introverts.

On the contrary, as noted above, the perspective that introverts tend to drink to calm

themselves suggests that introverted individuals may have a great need for support drinking

with a tension reduction expectancy, hoping to alleviate their anxieties or troubled feelings

while drinking with others:

H2d: Introverts will self-report having stronger tension reduction expectancies than will

extroverts.

While I posit that introverts may be less likely to call friends for support drinking, if and

when they *do* engage in support drinking, I argue they will spend more time in a support

drinking occasion than extroverts as introverts usually has fewer opportunities to get along

and share their feelings with others in their everyday life even though they have needs for

support from others.

H2e: Introverts will self-report spending more time per support drinking occasion than

will extroverts.

In addition, I propose that extroverts will drink more than introverts in terms of

frequency as well as quantity since extroverts attempt to enjoy positive feelings and prefer

something sensational.

H2f: Extroverts will self-report drinking more alcohol per support drinking occasion than

will introverts.

As a result of drinking more and as Vogel (1959) notes, extroverts may have more

problematic consequences after drinking such as getting into a fight, blacking out, and

neglecting responsibilities. From this view, during a support drinking occasion, I propose that

extroverts will be more associated with problematic drinking consequences than will

introverts:

H2g: Extroverts will self-report having more problematic consequences during/after a

support drinking occasion than will introverts.

As another consequence of support drinking, Zellar and Perrewe (2001) suggest that

extraverted individuals' tendency to interact with others and to actively seek social support

will result in greater perceived social support. Along with this perspective, I hypothesize that

extroverts will evaluate other's support that they received during the support drinking

occasions more positively than will introverts.

H2h: Extraverts will perceive their friend's support as more helpful than will introverts

**Interdependent/Independent Self-Construal.** Interdependent self-construal is

perceived as valuing cooperation and harmonious relationships with others and being

attentive to others' thoughts and feelings (Singelis, 1994). Specifically, those whose self-

construal is interdependence-oriented are concerned with fitting in with others, engaging in

socially approved behaviors, caring about others' goals and socializing with others (Markus

& Kitayama, 1991; Triandis & Gelfand, 1998). Guire (2002) conducted multi-cultural research on motivations for drinking alcohol and suggested that interdependence-oriented people are more likely to report social motives for drinking alcohol than any other motives, which means they expect to have sociable or enjoyable experience while drinking. Thus, I posit that interdependence-oriented individuals' tendency to have harmonious encounters and positive feelings while being with others will be associated with expectations to have positive feelings during/after having support drinking. Accordingly, it is presumable that interdependence-oriented persons will engage in a support drinking occasion for positive agent expectancy.

> H3a: Those whose self-construal is predominantly interdependent will have more
>
> positive agent expectancies than those whose self-construal is predominantly
>
> independent.

On the other hand, independent self-construal is conceptualized as being concerned with overtly expressing the self, caring about personal achievements, and being a direct (as opposed to indirect) communicator (Singelis, 1994). Previous research suggests that independent and interdependent perceptions of self are not negatively related; rather they reflect separate aspects of the self and are often uncorrelated (Singelis, 1994; Lu, 2006). Specifically, independence-orientated people are concerned with being unique, expressing feelings and thoughts directly, focusing on one's own goals and being self-reliant (Markus & Kitayama, 1991;Triandis & Gelfand, 1998). Guire's (2002) study suggests that those whose self-construal is independence-oriented are influenced most by a coping motive when they make a drinking decision. Taking into account that the study results imply that independence-oriented people are likely to drink alcohol when they believe alcohol will help them to cope with troubled feelings, I suggest that expectancies that alcohol will help alleviate anxieties or tension will play a key role when independence-oriented individuals make a support drinking

decision whereas those expectancies are less important for interdependence-oriented individuals. Therefore:

H3b: Those whose self-construal is predominantly interdependent will have less tension reduction expectancies than those whose self-construal is predominantly independent.

As noted above, interdependent self-construal includes tendencies to fit in with others and care about other's feelings and thoughts. Therefore, they may have more opportunities to get together with close others to drink with to give or receive social support. On the other hand, Burleson (2003) notes that solidarity with others is *less* likely to be assumed in individualist cultures than in collectivist cultures as individualistic people are more likely to directly express their thought and feelings so that they do not need to meet with others to receive support. As there are much common attributes between individualistic characteristics (i.e., self-reliance and self-fulfillment; Triandis, 1995) and independent characteristics, it is presumable that independence-oriented people be less likely to engage in support drinking to express and explore their negative feelings. In this sense, I posit that individuals higher in interdependence orientation are more associated with both initiating support drinking occasions and participating in support drinking occasions invited by friends needing support.

H3c: Those whose self-construal is predominantly interdependent will engage in more initiation of support drinking than those whose self-construal is predominantly independent.

H3d: Those whose self-construal is predominantly interdependent will participate in more support drinking occasions called by friends needing support than those whose self-construal is predominantly independent

Moreover, due to the characteristic that interdependence-oriented individuals tend to meet group norms and other's expectations, I expect that they may spend a longer time in an occasion of support drinking than may independence-oriented individuals. To be specific,

when there is a support drinking occasion, interdependence-oriented individuals will be more mindful about if any of participants wants to receive support than will independence-oriented individuals and will have a harder time leaving earlier than other participants since being together with friends who need support is perceived as desirable qualities of a good friendship. On the contrary, I premise that independence-oriented individuals will spend a relatively shorter time in a support drinking encounter since they care more about their own feelings than other's and feel comfortable for leaving the encounter earlier than others once they get what they desired.

> H3e. Those whose self-construal is predominantly interdependent will individuals self-report spending more time per support drinking occasion than those whose self-construal is predominantly independent.

**Summary**

In summary, the first goal of this thesis is to provide descriptive data on concrete aspects of support drinking occasions. A second goal is to assess how individual differences (interdependent/independent self-construal, extraversion/introversion) are associated with (a) alcohol expectancies of support drinking occasions, (b) perceptions of helpfulness of friends and (c) behavioral outcomes of support drinking occasions. Additionally, this thesis attempts to examine which alcohol outcome expectancies predicts the amount of alcohol and time consumed in a support drinking occasion. The results for these research goals will be discussed in the following section.

**Chapter 3. Methods**

**Procedures**

The initial page of the survey presents a consent form, which includes the purpose of the study, procedures, risks/discomforts, benefits, confidentiality, compensation, and contact information of the researchers. Then, questions asking demographic information are presented (gender, race, and age) to define the sample groups and a potential variable (Phelps, et al., 2000). Next, questionnaire asks about how many times respondent imitated support drinking or were asked to come support drinking occasions by friends during the past year. Next, the questionnaire asks about specific reasons for initiating support drinking, the number of friends they called, characteristics of the friends and the place of the drink occasion. Then, the questionnaire explores evaluation on helpfulness of friends, alcohol outcome expectancy, the amount of time spent and quantity of alcohol consumed in a support drinking situation, the experience of problematic consequences, and personality traits in turn. 99 questions were asked to respondents. After completing the survey, participants were asked if they were taking COMM 1500 or 1100. If they checked YES, they were asked to enter their name and their instructor's name to provide research credit. Participants who checked NO were informed that six participants of this study were eligible for a $50 gift card drawing based on a random selection and were asked to enter their name and email address if they would like to participate in the drawing. On average, participants took between 15-20 minutes to complete the survey.

**Participants**

The data was collected using three sources. First, undergraduate students were solicited by means of the research pool in the Department of Communication Studies at the

University of Georgia and from upper division communication courses if faculty wanted to offer extra-credit to their students for participating. In terms of the research pool, these are undergraduates who are taking one of the basic courses can sign up for this study to receive course participation credit for completing the survey. 54 % of the participants ($n = 99$) was from the research pool and the extra credit options. Table 3.1 summarizes the demographics of the sample. To recruit the comparable number of Korean undergraduate sample, I contacted a professor at Inha University in Korea for help in soliciting Korean undergraduates. She forwarded an email that includes the purpose of the study and the survey URL to undergraduate students. However, as shown in Table 3.2, very few Korean students (N=5) participated. This very low participation was most likely because students were on a three month break from late December to early March and data collection for this thesis occurred in late January and in February. Hence, most Korean undergraduates were on break during data collection.

Second, participants were recruited from fellow graduate in the Department of Communication Studies and in the Grady College at the University of Georgia (UGA). Fellow graduate students were sent an email that includes the purpose of the study and the survey URL. They were asked to participate in the survey and then circulate the email and URL link to the survey to their own friends and to encourage them to fill out the survey as well.

Third, I have several friends who work in business settings. I emailed former colleagues with the URL for the study and asked them to complete it. I also posted the URL on the Facebook page and ask friends to complete the survey and to repost on their own Facebook pages. Approximately 40 participants were recruited from this method. Specifically, as I am from South Korea; therefore, most of the participants based on this recruitment method were Koreans.

**Table 3.1:** Demographics of the Participants

|  |  | Frequency (N) | Percent (%) |
|---|---|---|---|
| **Gender** | Male | 78 | 40.6 |
|  | Female | 115 | 59.4 |
| **Nationality** | American | 111 | 57.5 |
|  | Korean | 72 | 37.3 |
|  | Other | 10 | 5.2 |
| **American Composition** |  |  |  |
|  | Caucasian American | 99 | 89.2 |
|  | African American | 4 | 3.6 |
|  | Hispanic American | 3 | 2.7 |
|  | Asian American | 2 | 1.8 |
|  | Multiracial American | 3 | 2.7 |
| **Occupation** | Undergraduate students | 104 | 53.9 |
|  | Graduate students | 46 | 23.8 |
|  | Non-students | 43 | 22.3 |
| **Age** |  | M=26 | SD=6.12 |
| **Total** |  | 193 | 100 |

Asian participation in this study was deemed useful as it aims to examine personality traits such as independence and interdependence. As many studies regarding cultural influence on independent and interdependent self-construal note, Asian individuals (i.e., Korean, Japanese and Chinese) tend to score higher on interdependence whereas Western/European individuals tend to score higher in independent self (Lu & Gilmour 2007; Markus & Kitayama, 1991; Triandis, 1995). Therefore, this study attempted to recruit 60-70

Koreans to increase variance on the independent/interdependent personality measures. As indicated in Table 3.1, 72 (39%) of respondents self-reported that they were Koreans.

Of the 216 people who started the survey, 193 completed it, thus, the data are based on those 193 participants. Of the final sample, approximately 54% were undergraduate students, 24% were graduate students and 22% were not in school. The gender breakdown skewed toward women (56 % female) and the age ranged from 19 to 53 ($M = 26$; *Median* = 23; *SD* = 6.12). In terms of nationality, the sample was split between Americans (57.5%), Koreans (37.3%) and 5.2% reported other nationalities including British and Chinese. Among the Americans, Caucasians consisted the largest portion of sample (89.2%), followed by African Americans (36%), Hispanic (2.7%), Asian American (1.8%), and multiracial (2.7%). As shown in Table 3.2, the majority of American respondents were undergraduate students from the communication studies research pool while most Korean respondents were graduate school students or post-graduates.

Prior to data collection, the Institutional Review Board (IRB) in UGA approved the study. Undergraduate participants in UGA were informed that they will receive research participation credit or extra credit as a reward for participating in the study. Participants other than UGA undergraduate students were informed that six participants were eligible for a $50 gift card drawing.

**Table 3.2.** Composition of Respondents Characterized by Nationality and Occupation

|  | American | Korean | Total |
| --- | --- | --- | --- |
| Undergraduate students | 93 (94.9) | 5 (5.1) | 98 |
|  | (81.6) | (6.9) | (52.7) |
| Graduate students | 9 (20) | 36 (80) | 43 |
|  | (7.9) | (50) | (24.2) |
| Not in school | 12 (27.9) | 31(72.1) | 43 |
|  | (10.5) | (43.1) | (23.1) |
| Total | 114 | 72 | 186 |
|  | (61.3) | (38.7) | (100) |

Data reflect number of participants per category and percentages are found in parentheses. 7 participants who have nationality other than American and Korean were excluded in this table. Percent next to N indicates the proposition of the sample within the row. Percent under N indicates the proposition of the sample within the column.

**Measures**

**Independent Variables: Personality Traits**

This thesis aims to examine a) motivations for support drinking, b) personality traits that affect that decision, c) salient expectations in the occasion based on personality traits, and d) drinking patterns in the occasion based on personality traits. To examine those variables, I propose measurements based on prior measurement frameworks. The study will be conducted through an online survey-based procedure using a combination of Likert-type items, open-ended questions and checklists (See Appendix A for the complete measurement instrument).

As this study was an on-line data collection with many people not receiving any incentives or compensation, I elected to use short versions of most of the personality

measures. Preliminary research with the proposed sample found using shortened versions encouraged participants to complete the entire study.

  **Extroversion/Introversion:** Extroversion and introversion traits were measured using the Revised NEO Personality Inventory (NEO-PI-R; Costa & McCrae, 1992). The NEO-PI-R is a self-report measure of normal personality designed to operationalize the five broad personality domains (i.e., Extroversion, Neuroticism, Openness, Agreeableness, and Conscientiousness). The total inventory asks respondents 240 specific questions regarding feelings, preferences, and social behavior and consists of five broad personality domains each composed of 48 items from of six facets. That is, each domain scale (e.g., Extroversion) is further comprised of six lower-order facet scales (i.e., warmth, gregariousness, assertiveness, activity, excitement-seeking and positive emotions for extrovert domain), each consisting of 8 items. Each item is rated on a 5-point Likert scale ranging from 1 (strongly disagree) to 5 (strongly agree). Domain and facet scores were calculated by averaging the scores for items that correspond with the given domain/facet.

  The 48-item domain scales of the NEO-PI-R have demonstrated high levels of internal consistency in prior research, with coefficient alphas ranging from 0.86 to 0.95 (Costa, McCrae, & Dye, 1991). Specifically, for the Extroversion domain, Cronbach's α was found to be .89 and Cronbach's α coefficient for the six facet scales in the Extrovert domain ranged from .63 to .77 with a median of .73. NEO-PI-R domain scores also show high levels of construct validity. It is evidenced by the fact that NEO-PI-R facet scales are correlated with alternative measures of similar constructs. For example, the Extroversion scale is found to be highly correlated with affiliation, exhibition and play domain scales in Jackson's (1984) Personality Research Form. Additionally, discriminant validity has been demonstrated by the contrasting correlates of different facets within the same domain (Costa & McCrae, 1992).

Eighteen items of the original 48 Extrovert domain scale items were used for this study. As noted earlier, a shortened version was used as this survey is comprised of an on-line data collection. To prevent participants from being exhausted or overwhelmed by too many questions during the survey, 1/3 of the questionnaire items from each facet was used. Therefore, I chose three items in each facet scale taking into account face and content validity so that each question can represent attributes of a given factor. To create the extroversion and introversion measures the 18 items were first summed and averaged ($M$ =3.52, Median=3.5, $SD$ =.51). Then, those scored higher than median were classified as extroverts and those scored lower than median were classified as introverts. An independent-samples t test was conducted to evaluate the mean difference between interdependence and independence. The results demonstrated that the mean scores for those two groups were significantly different, t (183) = - 16.53, p < .001.

**Self-construal Orientation: Interdependence/Independence**. To assess the level of independence and interdependence, the Independent and Interdependent Self Scale (IISS; Lu & Gilmour, 2007) was used. Based on characteristics of independent/interdependent self-construal (Markus & Kitayama, 1991; Triandis & Gelfand, 1998) and individualistic/ collectivist characteristics (Cross, Bacon, & Marris, 2000; Triandis & Gelfand, 1998), IISS suggests seven facets for the independent and interdependent self-construal. In particular, facets for the independent subscale include: 1) being independent, unique and consistent; 2) expressing oneself; 3) realizing internal attributes; 4) promoting one's own goal; 5) being direct; 6) separation from the in-group, and 7) self-reliance with hedonism. Facets for the interdependent subscale involve: 1) belonging and fitting in; 2) occupying one's proper place; 3) engaging in appropriate action; 4) promoting others' goals; 5) being indirect; 6) family integration; and 7) interdependence with sociability. Cronbach α reliabilities for the

independent and interdependent subscales were found to be .86 and .89 in the Lu and Gilmour's (2007) study.

In comparison with individualism /collectivism measure (Triandis, 1995), results represent that interdependent self is strongly correlated with collectivism (r = .75), whereas an independent self moderately correlated with individualism (r = .43). On the other hand, interdependent self is weakly correlated with individualism (r = .24), and independent self does not correlate with collectivism (r = .08). These correlations demonstrate the convergent and divergent validity of the IISS.

While the original IISS questionnaire consists of 42 items, for the convenience of survey respondents, this study used14 items out of the original 42. Specifically, seven items were adopted to organize the independence scale and seven items for interdependence scale. Each item out of seven items was from each facet of the seven facets, and I chose items taking into account face and content. Reliability for these 18 items was high (α = .85) and comparable to prior study using all 48 items (α = .89; Costa, McCrae, & Dye, 1991). Scores from the seven items were summed and the summed scale was normally distributed with minimum skew. The Interdependence scale (M = 3.38, SD = .60) and Independence scale (*M* = 3.78, *SD* = .60) were uncorrelated (r = - .03, N= 193, *ns*) in this study.

Then, I created a measure of self-construal orientation to represent the degree to which each participant was *more* interdependent-oriented or more independent-oriented. Specifically this scale was constructed by taking difference of each person's scores on the Interdependence and the Independence scales (i.e., Interdependence-Independence). Therefore, positive numbers reflect a person who is predominantly interdependence oriented, and negative numbers reflect an individual who is predominantly independence oriented. This self-construal orientation scale will provide an effective way of representing the degree to which each individual is predominantly interdependence-oriented or independence-oriented.

**Dependent Variables**

      **Alcohol Outcome Expectancy.** Alcohol outcome expectancies were assessed using Brown et al.'s (1980) Alcohol Expectancy Questionnaire (AEQ). The 120-item version of the AEQ assesses six alcohol expectancies (positive agent, social pleasure enhancement, sexual enhancement, social assertion increase, arousal with feelings of power, and tension reduction). The items were answered on a response scale of 1 (strongly disagree) to 5 (strongly disagree). Responses were summed and averaged so that a mean expectancy score can be derived for each drinking expectancy subscale. The AEQ demonstrated adequate reliability among adults sample ($\alpha$=.72–.92, mean coefficient=.84; Brown et al., 1987). As indicated earlier, this study measures only three types of expectancy: positive agent, social assertion, and tension reduction). Twenty one items from the original 120 were used to measure three types of alcohol outcome expectancies, which mean 7 items were used to measure each expectancy.

      Reliability was comparable to prior study (Brown et al., 1987) that ranged from .72 to .92 with a mean coefficient of .84. Cronbach's $\alpha$ for positive agent expectancy was .83, for tension reduction expectancy $\alpha$ was.80 and for social assertion $\alpha$ was .88. To create the measures for each type of alcohol outcome expectancy, the 7 items for each type of alcohol outcome expectancy were summed and then divided by the number of items. The average score for positive agent expectancy was 3.31 ($SD = 0.63$), for social assertion expectancy was 3.64 ($SD = 0.68$), and for tension reduction expectancy was 3.39 ($SD = 0.66$) on the 5 point scale. As indicated in Table 3.3, the three types of alcohol outcome expectancies were all significantly highly correlated. The pattern of inter-correlations among those factors has been confirmed in previous research as well (see e.g., Brown et al., 1980; 1987). As the 3 alcohol outcome expectancies affected the dependent measures differentially, they were kept as three separate expectancies for analysis purposes.

Table 3.3., Correlation Analyses Amongst Alcohol Outcome Expectancies

|  | Positive agent | Social assertion |
| --- | --- | --- |
| Tension reduction | .63** | .59** |
| Social Assertion | .63** |  |

** p < .001.

**The Number of Support Drinking Initiation.** Four items were created to assess how many times the respondents called friend(s) to come drink with them to get support during the past year. Respondents were asked to indicate how many times they called friends for each type of occasion on the 5-point scale (1 = *never* to 5 = *more than 5 times*). The four issues were a) to get emotional support when they were going through a bad time b) to get support when I received some bad news, c) to get help when I was feeling stressed, nervous or anxious, and d) to get help make a difficult decision. Scores for each type of issue were averaged to construct the scale.

**The Number of Participation in Support Drinking Called by Friends**. Along with the measure for the number of support drinking initiation, four items were used to assess how many times the respondents were called by friend(s) to come drink with them to support them during the past year. Respondents were asked to indicate how many times they were called by friends needing support for each type of occasion on the 5-point scale (1 = *never* to 5 = *more than 5 times*). The four types of occasion above were given to this measure as well.

**Amount of Time**. One item was used to ask how long respondents stayed in a support drinking occasion (e.g., During the past year, when you call your friends to drink with you to receive emotional support from them, how long on average do you drink on those occasions?). Options ranged from *1 hour* to *4 or more hours* were given. Scores for the item were averaged to construct the scale.

**Quantity of Alcohol**. Nine items were used to assess how much alcohol respondents consumed in occasions of support drinking. First, respondents were asked what type of alcohol they usually drank when they had support drinking. A checklist that incorporates beer, wine and hard liquor (whiskey, vodka, etc.) was provided. Then, respondents were asked how much they consumed of the alcohol they chose and to enter the number of glasses /shots /bottles they usually consumed when they called others vs. when they were invited by others. Based on the Standard Drink suggested by the National Institute on Alcohol Abuse and Alcoholism, one glass of beer (12 fl oz.), one glass of wine (5 fl oz.) and one shot of hard liquor (1.5 fl oz.) represent one standard drink. The standardized responses were averaged to construct the scale.

**Problematic Consequences.** To assess how many times the respondents have ever been involved in problems during/after support drinking, eight items among 18 items were adopted from the Rutgers Alcohol Problem Index (RAPI; White & Labouvie, 1989). Respondents were asked to indicate which problems they have experienced, either while drinking alcohol or as a result of drinking alcohol and how many times it has occurred during the last three years: for example, "Got physical impairment, got into fights, acted bad, or did mean things." Although the original RAPI subscale contains 18 items ($\alpha = .92$, White & Labouvie, 1989), this thesis adopts eight items mostly related to support drinking occasions. In other words, this thesis seeks to determine the degree to which one experiences negative consequences after "support drinking" instead of one's chronic problematic drinking habit. Therefore, items in RAPI such as "Kept drinking when you promised yourself not to." and "Felt physically or physiologically dependent on alcohol." were not included. Also, I altered the 3-year time frame to 1 year in accordance with other measures. The options range from never to more than ten times.

Reliability for these 8 items was high (α = .88) and comparable to prior studies using all 22 items (α = .92). To create the problematic consequences of drinking measure, the 8 items were summed and then divided by the number of items. The average for this sample was low (*M* = 1.4, *SD* = .54) on a 5 point scale indicating not a lot of problematic behavior as a function of alcohol consumption on support drinking occasions. The distribution was fairly skewed with a spike at 1 or "no problems." Given that the variable did not closely approximate a normal distribution, we recoded the variable to three levels: 1 (no problems associated with support drinking, n = 49), 2 (a few problems, N = 69) and 3 (some problems, N = 68).

**Evaluation of How Helpful Friends were in Support Drinking Occasion**. To measure how participants assess support drinking occasions they had, 17 items were used from Bippus' comforting message evaluation (2001). The original scale had 37 items. The present study used five categories that best represent the nature of support drinking from the original eight categories. The five were other orientation (e.g., My friends were focused on my feelings), problem solving (e.g., My friends provided good advice), positive mood (e.g., My friends made me smile), empowerment (e.g., My friends helped me have a more productive attitude), and stopped rumination (e.g., My friends stopped me from being so focused on my problem or issue). Reliability of the five categories was appeared to be high in the original study ranged from .86 to .92 (Bippus, 2001).

17 items that correspond to five factors on Bippus (2001) scale were used: 3 items measured other orientation (α = .88), 3 items assessed problem solving (α = .87), 4 items assessed empowerment (α = .89) and, finally, 3 items measured the degree to which the friends helped the support recipients stop ruminating (α = .86). The 3 items for positive mood did not form a reliable scale (α = .57) and, in an exploratory factor analyses, these items cross-loaded on the other 4 factors and thus were eliminated from analyses.

The correlations amongst the 4 factors for friends' helpfulness evaluation were all positive and significant, ranging from .26 to .69. A secondary exploratory factor analysis (principal components analysis, variamax rotation) indicates that three factors (other orientation, problem solving and empowerment) were highly correlated and formed one higher level factor with an eigenvalue greater than 1 (α for this higher level factor was .85) whereas stop rumination did not load highly with this higher level factor although it was positively correlated, $r = .49$, $p < .001$. Thus two measures were created for the Bippus scale: first a general helpfulness of friends evaluation scale (combining other orientation, problem solving, and empowerment, ($M = 5.39$, $SD = 0.95$) and second, a measure of how well one's friends helped the participant stop ruminating on a problem ($M = 5.02$, $SD = 1.30$).

**Measures for Descriptive Statistics for Support Drinking**

To delineate how individuals have support drinking, several items were asked for responders to think of the last time they called their friends to come drink with to support them. First, an open-ended question asking to indicate specific issues or event to have support drinking was given (e.g., What was the reason why you wanted your friend's support?). Then, how many friends they called and gender of the friends were asked.

To assess the closeness of the friends, 2 items evaluating how close they were with the friends and how important their relationship with the friends were asked on a 7-poin scale. The two items assessing relationship closeness and importance were positively and strongly related α=.79 and thus these two items were averaged to create a relational closeness measure ($M = 6.09$, $SD = 1.04$).

Also, respondents were asked to indicate if the friends are only drinking buddies or if they see those friends when we are drinking but we also hang out when we are sober. Lastly, the place where they drank was asked. Options were my home, bar, club, friend's house, and café.

**Chapter 4. Results**

**Dependent and Independent Variables as a Function of Demographics Factors**

Differences in the dependent and independent variables as a function of gender, age and nationality are reviewed below.

*Gender*. As shown in Table 4.1, women were significantly more likely than men to ask friends to drink to get support, to drink less alcohol and to evaluate friend's support more positively and to view their friend's efforts as more effective at stopping them from ruminating about their problems. No other dependent or independent variables differed significantly as a function of gender.

Table 4.1. Mean Scores of Dependent and Independent Variables as a Function of Gender

|  | Male | Female |
|---|---|---|
| **Dependent measures** | | |
| Times called by friends | 10.79(4.23) | 11.71 (4.81) |
| Times initiated support drinking* | 8.55 (4.05) | 10.32 (5.10) |
| Amount of time | 2.70 (.99) | 2.57 (.95) |
| Amount of drinks* | 5.97(5.12) | 3.50 (2.31) |
| AOE-Positive agent | 3.35(.63) | 3.29 (.64) |
| AOE-Tension reduction | 3.38(.70) | 3.39 (.64) |
| AOE-Social Assertion | 3.61(.58) | 3.65 (.74) |
| Problematic outcomes (RAPI) | 2.10(.71) | 1.96 (.76) |
| Helpfulness of friends* | 5.13 (.94) | 5.56 (.93) |
| Stop rumination | 4.68(1.30) | 5.24(1.24) |
| **Independent measures** | | |
| Extraversion | 3.51(.48) | 3.53 (.53) |
| Independence | 3.75 (.64) | 3.80 (.57) |
| Interdependence | 3.44(.60) | 3.34 (.61) |

*indicates $p < .05$ within row.     Standard deviations are in parentheses. AOE stands for alcohol outcome expectancy.

*Nationality*.   As shown in Table 4.2, Americans had stronger alcohol expectancies than did Koreans. Americans also perceived their friends support more positively and perceived their friend's efforts as more effective in stopping their rumination than did Koreans. Finally, Americans were more extraverted and independent whereas Koreans scored higher on interdependence.

Table 4.2. Mean Scores of Dependent and Independent Variables as a Function of Nationality

|  | American | Korean |
|---|---|---|
| **Dependent measures** | | |
| Times called by friends | 10.89 (4.59) | 12.14 (4.63) |
| Times initiated support drinking | 9.19 (4.52) | 10.29 (5.18) |
| Amount of time | 2.52 (0.94) | 2.83 (0.97) |
| Amount of drinks | 4.11 (2.91) | 5.12 (5.13) |
| AOE-Positive agent* | 3.42 (0.62) | 3.14 (0.64) |
| AOE-Tension reduction* | 3.47 (0.67) | 3.23 (0.67) |
| AOE-Social assertion* | 3.71 (0.68) | 3.50 (0.68) |
| Problematic outcomes (RAPI) | 1.96 (0.72) | 2.12 (0.77) |
| Helpfulness of friends * | 5.53 (0.95) | 5.14 (0.95) |
| Stop rumination* | 5.29 (1.29) | 4.60 (1.22) |
| **Independent measures** | | |
| Extraversion* | 3.66 (0.49) | 3.30 (0.47) |
| Independence* | 3.99 (0.49) | 3.43 (0.60) |
| Interdependence* | 3.26 (0.63) | 3.57 (0.51) |

*indicates $p < .05$ within row.    Standard deviations are in parentheses

*Age.*    Table 4.3 reports the independent and dependent variables correlated with age of respondents. Older respondents spend more time in a support drinking occasion but perceive their friend's support and efforts to stop them ruminating less positively. As age increased, participants reported being less extraverted and less independent.

Table 4.3.    Correlation Analyses on Independent and Dependent Measures as a Function of Participant's Age.

| Dependent Measures | |
| --- | --- |
| Times called by friends | -.05 |
| Times initiated support drinking | - .06 |
| Amount of Time** | .19 |
| Amont of Drinks | .13 |
| AOE-Positive agent | - .02 |
| AOE-Depression reduction | <.01 |
| AOE-Social assertion | -.12 |
| Problematic outcomes (RAPI) | -.03 |
| Helpfulness of friends ** | -.31 |
| Stop Rumination** | -.26 |
| Independent Measures | |
| Extraversion** | -.26 |
| Independence** | -.25 |
| Interdependence | .01 |

** Correlation is significant at the 0.01 level.

Table 4.4 shows the mean difference between undergraduate students and non-undergraduate students as a function of dependent and independent measure. The same results as the above correlation analyses on age were found in this analyses[1].*[1]

[1]Comparison analyses between undergraduate and post-graduate students did not show different results from the analyses on the age factor.

Post-undergraduate sample reported spending more time on a support drinking occasion but perceiving their friend's support and efforts to stop them ruminating less positively. Also, post-undergraduate participants reported being less extraverted and less independent. A different finding than correlation analyses on age was that post-undergraduate sample reported having less positive agent and social assertion expectancies.

Table 4.4. Mean Scores of Dependent and Independent Variables as a Function of Undergraduates vs. Post-undergraduate Students

|  | Undergraduates | Post-undergraduates |
| --- | --- | --- |
| Dependent measures |  |  |
| Times called by friends | 11.14 (4.80) | 11.53(4.33) |
| Times initiated support drinking | 9.37 (4.96) | 9.86 (4.52) |
| Amount of Time* | 2.47 (.96) | 2.80 (.94) |
| Amount of Drinks | 4.35 (3.26) | 4.70 (4.59) |
| AOE-Positive agent* | 3.40 (.60) | 3.21 (.66) |
| AOE-Tension reduction | 3.47 (.67) | 3.29 (.65) |
| AOE-Social assertion* | 3.76 (.68) | 3.49 (.66) |
| Problematic outcomes (RAPI) | 2.01(.73) | 2.02 (.75) |
| Helpfulness of friends * | 5.60 (.93) | 5.11 (.91) |
| Stop Rumination* | 5.33 (1.24) | 4.66 (1.28) |
| Independent measures |  |  |
| Extraversion* | 3.67 (.48) | 3.34 (.48) |
| Independence* | 3.95 (.56) | 3.57 (.57) |
| Interdependence | 3.33 (.61) | 3.44 (.58) |

*indicates $p < .05$ within row. Standard deviations are in parentheses.

***Correlations amongst Dependent measures.*** Table 4.5 reports correlations amongst dependent measures. Most dependent measures are positively associated with each other. Not surprisingly, the strongest association is between calling others for support drinking occasions and having others call oneself for support drinking. Also not surprising based on previous literature are the strong inter-correlations amongst the three alcohol outcome expectancies. While the three types of alcohol outcome expectancies are all related to the number of times one initiated support drinking occasions tension reduction expectancy correlated the highest with the number support drinking initiation,. Amount of drinks and helpfulness of friends evaluation was associated negatively, indicating that as the amount of drinks increases, one evaluate friend's support more negatively.

***Correlations amongst independent measures.*** The Extraversion/Introversion scale was significantly correlated with interdependence ($r = .15$, $p = .04$) as well as independence ($r = .37$, $p < .001$). Higher correlation between extraversion and independence may be because a few facets in independence scale, (i.e., expressing oneself and self-reliance with hedonism), overlapped with the facets in extraversion (i.e., assertiveness, activity, excitement-seeking). As expected, the relationship between independence and interdependence was not significant ($r = -.03$, *ns*).

Table 4.5. Correlation Analyses Amongst Dependent Variables

|  | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | 10 |
|---|---|---|---|---|---|---|---|---|---|
| 1. Times called by friends | .76** | .35** | .19 | .11 | .32** | .18* | .28** | .23** | .17* |
| 2. Times initiated support drinking | 1 | .34** | .23** | .21** | .40** | .20** | .37** | .25** | .19** |
| 3. Amount of time | .34** | 1 | .47** | .22** | .31** | .30** | .30** | .00 | .04 |
| 4. Amount of drinks | .23** | .47** | 1 | .22** | .26** | .14* | .29** | -.15* | -.05 |
| 5. Positive agent | .21** | .22* | .22** | 1 | .63** | .63** | .23** | .06 | .23** |
| 6. Tension reduction | .40** | .31** | .26** | .63** | 1 | .59** | .30** | .09 | .26** |
| 7. Social assertion | .20** | .30** | .14* | .63** | .59** | 1 | .31** | .24** | .22** |
| 8. Problematic outcome | .37** | .30** | .30** | .23** | .30** | .31** | 1 | -.03 | -.05 |
| 9. Helpfulness of friends | .25** | .00 | -.15* | .06 | .09 | .24** | -.03 | 1 | .40** |
| 10. Stop Rumination | .19** | .04 | -.05 | .23** | .26** | .22** | -.05 | .40** | 1 |

** Correlation significant at the 0.01 level * Correlation significant at the 0.05 level. Positive agent, tension reduction and social assertion are alcohol outcome expectancies.

**Characteristics of Support Drinking Occasions**

*Support drinking engagement.* Table 4.6 reports the mean number of times
participants initiated support drinking occasions in the past year using the 5-point scale (1 =
never to 5 = more than 5 times). Note that 16.8% (N=32) reported having never called a
friend for support drinking reasons. Participants initiated support drinking occasions most
often when feeling stressed, followed by when going through a bad time, receiving bad news
and the least often for making a difficult decision.

The mean for how often support drinking was initiated differed significantly as a
function of reason for support drinking. Using paired sample t-tests, the number of times
support drinking was initiated for feeling stressed and going through a bad time were not
significantly different however both were significantly higher than bad news or making a
tough decision (which were significantly different than each other). Thus, it appears that
bad feelings (e.g., stress, nervousness, anxiety) and going through a bad time were the
reasons individuals contacted others to engage in support drinking most often.

Table 4.6.    Mean Number of Times Participants Initiated Support Drinking Occasions.

|  | Mean | Standard Deviation |
|---|---|---|
| Feeling stressed, nervous or anxious | 2.65[a] | 1.40 |
| Going through a bad time | 2.58[b] | 1.36 |
| Receiving bad news | 2.26[ab] | 1.38 |
| Making a difficult decision | 2.12[ab] | 1.39 |

Shared superscript indicates means that are significantly different.

Table 4.7 reports how often respondents were asked by friends needing support to
drink with. Note that 7.3% had never been called by friends to engage in support drinking.
The number of support drinking occasions called by friends when friends were feelings
stressed and when friends were going through a bad time were the two reasons friends most

frequently called participants to engage in support drinking.    Friends called participants to engage in support drinking significantly more often for these two reasons than for when friends received bad news or when friends made a difficult decision.

Table 4.7. Mean Score on the 4 Types of Support Drinking Occasions Called by Friends

|  | M | SD |
|---|---|---|
| Feeling stressed, nervous or anxious | 3.13[ab] | 1.31 |
| Going through a bad time | 2.98[cd] | 1.26 |
| Receiving bad news | 2.74[bc] | 1.30 |
| Making a difficult decision | 2.45[ad] | 1.39 |

Shared superscript indicates means that are significantly different

*Specific Event/Issue*. An open ended item asking why participants wanted their friend's support the last time they called friends to drink with was given to participants. The responses were coded and classified into five categories: Relational issues, career issues, desire to talk, family issues and other. Table 4.8 presents the percentage of participants who indicated each of these reasons.

The most prevalent reason (36.4% of respondents) was relationship issues which involve concerns about romantic relationship such as break-ups and interpersonal matters such as conflicts with others (e.g., "I got in a huge fight with my roommate." "I had problems in my social life"). About 70% of responses in this category was concerned with relationship problems with a romantic partner (e.g., "I had a bad break up," "I ended a 4 year relationship.") indicating that relational issues with a romantic partner was the primary factor that motivates people to call friends to come drink with to get support.

Second, career issues (25.4%) include anxiety about school, job or career decisions and future plans (e.g., "Didn't receive a position I desired", "Figuring out life after graduation", "the job hunt", etc.). Also, problems concerned with academic performances

(e.g., "Bad grades", "fail in exams", "not doing well in school", etc.) were included in this category.

Third, the category "a desire to talk," selected by 21.4% of participants, was used when respondents specifically indicated their desire was for someone to listen to them or share their feelings. While occasionally someone in this category also refers to negative feelings, the respondent makes it clear that their desire was for the chance to talk out their thoughts (e.g., "I just wanted to externally process my thoughts and feelings with another human being, and have someone to listen to", "Want to share my feeling and need comfort from their care." "After a long work day I needed to be around positive people," "To share my thought or decision with my friends and to take some advices from them", "I wanted a second opinion from someone with different views to my own").

Fourth, family issues (9.2% selected) were rated as the fourth biggest reason that respondents wanted to call friends to come drink with. Family issues were mainly about conflicts/troubles with family members or loss of family members (e.g., I was upset about the loss of my mother", "I got into an argument with some family members", etc.).

Last, 7.5% of responses were coded as "other;" most "other" reasons consist of mere stress or depression (e.g., feeling stressed, emotional down, depression). Since where those distressed or depressed feelings came from were not indicated, we categorized those responses into the other section.

Table 4.8. Specific Issues/Events for Support Drinking

|  | Frequency | Percent |
|---|---|---|
| Relationship issues | 63 | 36.4 |
| Career Issues | 44 | 25.4 |
| Desire to talk | 37 | 21.4 |
| Family Issues | 16 | 9.2 |
| Other | 13 | 7.5 |
| Total | 173 | 100 |

Chi-square tests were conducted to examine if the specific reasons for support drinking differed according to demographic variables (nationality and gender). Figures 4.1and 4.2 show clustered bar charts for the frequency of each specific issue by nationality (Figure 4.1) and gender (Figure 4.2). Gender was not significantly related to the reasons for support drinking $\chi^2$ = (1, N=172) = 4.51, *ns,* however nationality was significantly to the reasons for support drinking that respondents offered, $\chi^2$ (4, N=166) = 16.04, p =.003, Cramer's V=.31. Koreans were more likely to call friends to come to drink with as they have a desire to talk than are Americans whereas Americans were more likely to call a friend for support drinking about relationship issues.   Finally, in a one-way analysis of variance we examined if age was significantly associated with the specific issues/events, the F value was not significant, F (4,168) = 1.84, *ns.* No other difference was found as a function of demographic factors
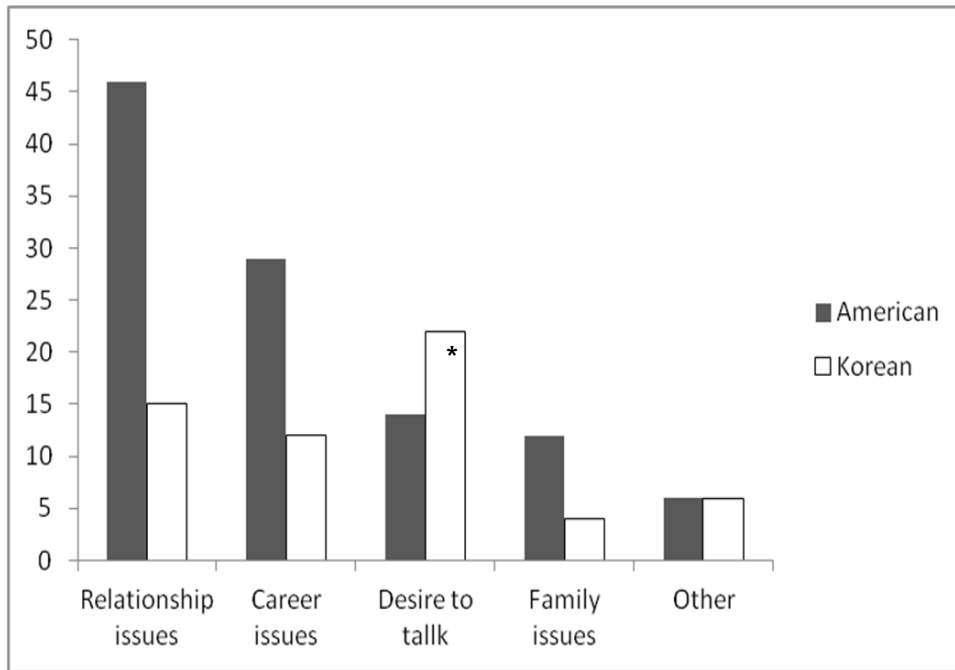
Figure 4.1. Clustered Bar Charts for the Frequency of Each Specific Issue by Nationality
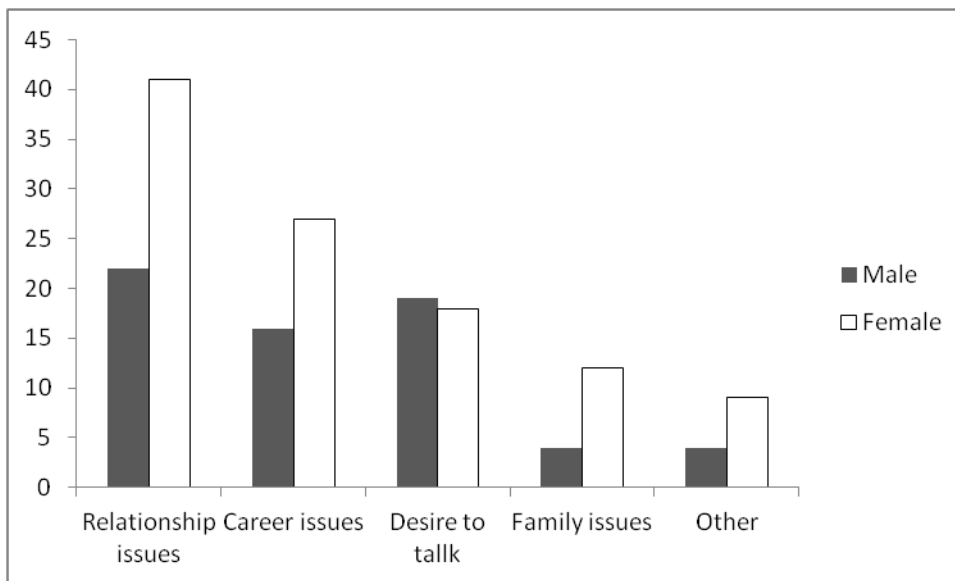* indicates significant difference in proportion of American and Korean.



Figure 4.2. Clustered Bar Charts for the Frequency of Each Specific Issue by Gender

***Who is called for support drinking***. The average number of friends respondents called last time to drink with for getting support was 2.37 (*SD* = 1.47) with a range from 1 to 10. Using student's t-tests (gender and nationality) and correlations (for age), the average number of friends called by participants did not differ as a function of differ as a function of participant's age, gender, or nationality.

Approximately 2/3rds of respondents reported calling same sex friends for their last support drinking occasion with same sex friends, 11% reported calling opposite gender friends whereas 27% indicated both males and females were called. Using $\chi^2$ tests, who was called (in terms of gender of friends) did not significantly differ as a function of participant's age, gender, or nationality.

Overwhelmingly, respondents (97.7%) reported the friend(s) they call for support drinking occasions are those they see when they are sober as well; only 2.3% of respondents reported that the friends they called were drinking buddies only. Friends that are called were considered to be quite close. Specifically, the mean scores for closeness and importance were 6.05 (*SD* = 1.34) and 6.12 (*SD* = 0.91) on 7-point scales, indicating that people, when they want to drink to get support, tend to call friends whom they consider very close and important. Using student's t-tests (gender and nationality) and correlations (for age), relational closeness and importance did not differ as a function of differ as a function of participant's age, gender, or nationality. In summary, for the last support drinking occasion respondents on average called 2-3 friends who were primarily the same-sex as the respondent and viewed by the respondent as very close and important.

***Where support drinking takes place***.    Respondents reported their last support drinking occasion occurred in a bar (49.2 %), the respondent's home (29.1%), a friend's home (15.9%), restaurants/café (2.1%) or clubs (1.1%). For Koreans, the proportion of bar (63.8%) was much higher than other places; my home (18.8%) and friend's house (18.2%), whereas

Americans divided more evenly between a bar (39.1%) or their own home (36.4%) and were similar to Koreans in the percent that were at a friend's house (18.4%). That more Koreans report engaging in support drinking in a bar may be due to a cultural tradition whereby most unmarried Koreans live with their parents and thus may feel uncomfortable asking friends over to drink.

*Type and amount of alcohol*. Beer was the most often mentioned alcohol (48.1%) followed by liquor (32.3%) and wine (19.6%). While other groups had the similar ratio of alcohol type to the overall population, Koreans reported having more beer and less wine than other population, beer (61.4%), liquor (35.7%), and wine (2.9%).

Respondents reported that they drank an average of 4.51 bottles (sd = 3.91) of beer/shot of liquor/glasses of wine on average in a support drinking occasion. While there was no significant difference as a function of demographic factors, type of alcohol was a significant factor, F (2, 186) = 9.026, p <.001, .$\eta^2$=. 09. On average, respondents had 5.97 shots of liquor (*SD* = 4.51), 4.27 bottles of beer (*SD* = 3.86) and 2.7 glasses of wine (*SD* = 1.43), indicating that people tend to drink larger amount of stronger alcohol on support drinking occasions.

*Time spent in a support drinking occasion*. The mean score for time spent in a support drinking occasion was 2.62 (*SD* = 1.47) on a 4-point scale from 1 (*1 hour*) to 4 (*more than 4 hours*), suggesting that individuals were likely to spend a significant amount of time in a support drinking occasion, approximately two and a half hours. No significant difference was found as a function of demographic factors.

In sum, based on these characteristics for the last time participants called friends for a support drinking occasion, support drinking can be described as a practice that one engages in *on average* with 2-3 close same-sex friends to receive support for relationship issues, career problems, and family issues or to share one's feelings. Participants on average spent 2-3

hours on a support drinking occasion were most likely to engage in support drinking at a bar and were more likely to drink beer.

**Hypothesis Testing**

Results are grouped by dependent measure for ease of reading.

      **Initiating Support Drinking Occasions**. H2a states that extroverts will self-report initiating support drinking occasions more often than introverts. H3c states that those whose self-construal is predominantly interdependent will engage in more initiation of support drinking than those whose self-construal is predominantly independent. For the outcome of initiating support drinking, gender was the only significant demographic predictor and thus is included in all analyses.

      To test these hypotheses, the number of times participants called friends to come drink with them to give emotional support was the dependent measure in a step-wise regression. Gender was entered in step 1 and self construal orientation and the median split extraversion/introversion scale was entered in step 2. The model was significant $F(3, 179) = 2.66$, $p = .05$, adjusted $R^2 = .09$. Gender was not significant, $\beta = .12$, *ns*. The effect of extraversion was also not significant, $\beta = .06$, ns, thus H2a is not supported. Self construal was significant ($\beta = .17$, $p = .02$), indicating that those whose self-construal was predominantly interdependent initiated more support drinking occasions, supporting H3c.

      **Amount of Alcohol During Support Drinking Occasions**. H2f states that extroverts will self-report drinking more alcohol per support drinking occasion than will introverts. For the outcome of the amount of alcohol consumed in a support drinking occasion, gender was the only significant demographic predictor and thus is included in all analyses. Gender was entered in step 1 and self-construal orientation and extraversion/introversion were entered in step 2. The model was significant $F(3, 176) = 11.90$, $p < .001$, adjusted $R^2 = .15$. Gender was significant, $\beta = -.29$, $p < .001$. Extroversion

was not a predictor of the amount of alcohol consumed in a support drinking occasions, $\beta$ =.06, *ns*. Thus, H2f was not supported. Rather, while not hypothesized, self-construal appeared to be a predictor of support drinking occasion, $\beta = .28$, $p < .001$, indicating that those whose self-construal was predominantly interdependent drank more alcohol in support drinking occasions.

In addition, with regard to the relationship between alcohol outcome expectancies and the amount of alcohol consumed in support drinking occasions, H1a states that as the level of social assertion expectancy increases, the amount of alcohol consumed in a support drinking occasion will also increase. To test this hypothesis, gender was entered in step 1 and the three types of alcohol outcome expectancies were entered in step 2 as predictors of the amount of alcohol. The result was significant, $F(4, 183) = 9.81$, $p < .001$, adjusted $R^2 = .16$. Specifically, gender ($\beta = -.31$, $p < .001$) and tension reduction expectancies ($\beta = .25$, $p = .01$) were the significant predictors of the amount of alcohol consumed in a support drinking occasion, indicating that the more one has tension reduction expectancies, the more alcohol he or she drinks in a support drinking occasion. Thus, H1a was not supported.

**Amount of Time spent in Support Drinking**. H2e states that extroverts will self-report spending more time per support drinking occasion than will introverts. H3e states that those whose self-construal is predominantly interdependent will individuals self-report spending more time per support drinking occasion than those whose self-construal is predominantly independent. For the outcome of time spent in a support drinking occasion, age was the only significant demographic predictor and thus is included as a covariate.

To test these hypotheses, the amount of time spent in a support drinking occasion was the dependent measure. Age was entered first in a step-wise regression. In step two, self construal orientation and extraversion/introversion were entered. While the model was significant, $F(3, 175) = 3.02$, $p = .03$, adjusted $R^2 = .03$, age ($\beta = .15$, ns), extraversion ($\beta = .05$,

p = .ns) and self-construal orientation ($\beta$ =.14, *ns*) were not significant predictors. Thus, both H2e and H3e were not supported.

To test H1b stating that as the level of social assertion expectancy increases, the amount of time spent in a support drinking occasion will also increase, age was entered in step 1 and the three types of alcohol outcome expectancies were entered in step two as predictors of the amount of time spent in support drinking occasions. The results were significant, $F_{(4, 182)} = 9.31$, $p < .001$, adjusted $R^2 = .15$. Age ($\beta$ =.23, $p = .001$), tension reduction expectancy ($\beta$ =.20, $p = .03$, and social assertion expectancy ($\beta$ =.24, $p = .01$) were significant predictors of the amount of time spent in support drinking occasions, indicating that the older the participants and the stronger the tension reduction/social assertion expectancies they have, the more time they spent in a support drinking occasion. Thus, H1b was supported.

**Friends Needing Social Support**. H2b states that extroverts will self-report being called by friends to give emotional support during a support drinking occasion than will introverts. H3d stated that those whose self-construal is predominantly interdependent will participate in more support drinking occasions called by friends needing support than those whose self-construal is predominantly independent

To test these hypotheses, the number of times friends called the participant to come drink with them to give emotional support was the dependent measure. Introversion/extraversion and self construal orientation were the independent variables. As noted above, none of the demographic items were significant predictors.

The model was significant, $F_{(2, 182)} = 6.58$, $p = .002$, adjusted $R^2 = .06$. Extraversion/introversion was not significant, $\beta$ =.10, *ns*, thus H2b was not supported. It was self-construal orientation that predicted the number of times one participated in support drinking occasions called by friends needing support, $\beta$ =.25, $p = .001$, indicating that the

higher a participant's score on interdependence the more often they were called by friends to offer support in a drinking context. Thus, H3d was supported.

**Alcohol Outcome Expectancies associated with Support drinking**. As noted above, nationality was a significant predictor of alcohol expectancies such that Americans had significantly stronger alcohol expectancies than did Koreans (see Table 4.2) and nationality was controlled for in all analyses.

*Positive Agent Expectancies*. H2c states that extroverts will self-report having stronger positive agent expectancies than will introverts. H3a argues that those whose self-construal is predominantly interdependent will have more positive agent expectancies than those whose self-construal is predominantly independent

To test these two hypotheses, a step-wise regression was computed with the positive agent alcohol expectancy as the dependent measure. Nationality (American vs. Korean) was entered in step one and self construal orientation and extraversion/introversion were entered in step 2. The model was significant, $F(3, 174) = 3.88$, $p = .01$, adjusted $R^2 = .05$. Nationality was significant, $\beta = -.20$, $p = .01$ whereas extraversion was not a significant predictor, $\beta = -.07$, *ns,* H2c was not supported. Interdependence was significant, $\beta = .17$, $p = .05$, indicating that those whose self-construal was predominantly interdependent had stronger positive agent expectancy. Thus H3a was supported.

*Tension Reduction Expectancies*. H2d states that introverts will self-report having stronger tension reduction expectancies than will extraverts. H3b suggests that those whose self-construal is predominantly interdependent will have less tension reduction expectancies than those whose self-construal is predominantly independent.

To test these relationships, the tension reduction alcohol expectancy was the dependent measure in a step-wise regression with nationality entered in the first step, and introversion/extraversion and self-construal orientation were entered in step two. The model

was not significant, F (3, 174) = 2.41, *ns*. While nationality was significant, β = -.24, p = .01, extraversion was not significant, β = - .04, ns, H2d was not supported. Self-construal was also not significant, β = .12, *ns,* thus H3b was not supported.

Social Assertion Expectancies. The measurement of alcohol outcome expectancies was changed to include a measure of social assertion after hypotheses were written and thus post hoc analysis are presented for social assertion. The same step-wise analysis as noted above with nationality entered on step 1 and the 2 personality measures on step 2 was used to examine social assertion alcohol expectancies. Overall F test results was not significant, F (3,174) =2.14, *ns,* While nationality was significant (β = -.22, p = .01)*,* extraversion, β = -.06, *ns*, and self-construal β =.14, *ns,* were not significant.

**Problematic Consequences of Support Drinking**. H2g states that extroverts will self-report having more problematic consequences during/after a support drinking occasion than will introverts. In post hoc analyses, we also examined whether self-construal, alcohol outcome expectancies and the amount drank per support drinking occasion would affect problematic consequences. Demographic variables were not significant predictors of problematic consequences of drinking.

Thus in a simple regression, extraversion, self-construal orientation, the 3 alcohol outcome expectancies and the amount alcohol consumed were independent variables and the problematic consequences was the dependent measure. The model was significant, F (6, 174) = 7.11, p < .001, adjusted $R^2$ = .17. Extraversion/introversion was not a significant predictor, β = .03, *ns,* H2g was not supported.

Meanwhile, interdependent self-construal was a significant predictor of problematic consequences of support drinking, β = .25, p = .001, indicating that those whose self-construal is predominantly interdependent were more likely to have problematic consequences during/after support drinking occasions than were those whose self-construal is

predominantly independent . For the 3 alcohol outcome expectancies, positive agent was not significant, $\beta$ = -.004, *ns,* tension reduction was not significant, $\beta$ = .09, *ns.* However, the social assertion expectancy ($\beta$ = 21, p =. 02) was significant. Finally, amount of alcohol drank was also significant, $\beta$ = .16, p = .03. Thus the predictors of problematic drinking were interdependent self-construal, social assertion expectancy, and the amount of alcohol.

**Evaluation of How Helpful Friends were in Support Drinking Occasion**. In the preliminary analysis, the items for evaluating how helpfulness of friends formed two separate factors, a general evaluation of friend's helpfulness and whether the friends were effective in getting the participant to stop ruminating. Therefore, two measures of evaluation of friends were used in analyses reported below. As shown in preliminary analyses, gender, age and nationality are significant predictors and thus are included in analyses reported below. Relational closeness was also a significant predictor in preliminary analyses and thus is also included below.

H2h argues that extraverts will perceive their friends as more helpful than will introverts. To test H2h, the general friend's helpfulness measure and the stop rumination measure were dependent measures and extraversion was an independent measure in a multivariate analysis of variance with age and relational closeness as covariates and gender and nationality as independent variables. The multivariate main effect for gender was not significant, Wilks $\Lambda$ = .97, F (2, 110)= 1.70, *ns.* The multivariate main effect for nationality was significant, Wilks $\Lambda$ = .92, F (4, 220) = 2.51, p, = .04, $\eta^2$ = .04. The covariates of age, Wilks $\Lambda$ = .87 F (2, 110) = 8.01 , p = .001, $\eta^2$ = .13, and relational closeness were also significant, Wilks $\Lambda$ = .82, F (2, 110)=10.92 p < .001, $\eta^2$ = .18.

The multivariate main effect for extraversion was not significant, F (2, 102,)=1.08, *ns.* However, extraversion did interact with nationality, Wilks $\Lambda$ = .92, F (2, 101) =3.85, p = .02, $\eta^2$ = .07). The univariate interaction effect for ruminating was not significant, F (1, 103) <1.

The univariate interaction effect for the general evaluation of friend's helpfulness was significant, $F (1, 103) = 12.13$, $p = .001$, $\eta^2 = .11$. As shown in Table 4.9, results for introverts do not vary as a function of nationality, however, American extraverts perceive their friends as more helpful whereas Korean extraverts perceive their friends as least helpful. Thus, H1h receives weak support as extraversion was only significant for one helpfulness factor and only when it interacted with nationality.

Table 4.9.  Evaluation of Friend's Helpfulness as a function of Nationality and Extraversion

|            | Americans         | Koreans         |
|------------|-------------------|-----------------|
| Introverts | 5.06 [a] (1.0)    | 5.08 [b] (.86)  |
| Extraverts | 5.97 [abc] (.72)  | 4.58 [c] (1.48) |

Shared superscript indicates means that are significantly different. Standard deviations are in parentheses.

## Chapter 5. Discussion

This study conceptualized support drinking as occurring when one seeks out close friends to drink with to receive social support. A second goal of this thesis was to explore a) personality traits that affect the drinking decision, b) salient alcohol outcome expectancies based on personality traits, c) drinking patterns based on personality traits and alcohol outcome expectancies and d) consequences of support drinking in terms of problematic drinking outcomes and evaluation of support received from friends. Interdependent self-construal was the only personality trait that consistently predicted support drinking behavior and consequences. The characteristics of support drinking occasions are discussed first below, followed by a discussion of the findings for personality traits and demographic measures. Implications for the alcohol and social support literatures are then discussed followed by limitations and future directions.

### Characteristics of Support Drinking Occasions

This thesis was a preliminary investigation of support drinking. Participants reported on average calling 2-3 friends to receive support. The specific reasons for the last time they called friends for support drinking were concerning relationship issues, career problems, and family issues or to share one's feelings. They called friends to engage in support drinking most often when they felt stressed, anxious or depressed followed by when they were going through a bad time, when they received bad news, and when they had difficult decisions to make. They tended to call very close friends and those friends were the persons they hang out not only when drinking but also when sober. Thus the initial conceptualization about the characteristics of support drinking occasions as occurring with a small group of close friends were largely supported.

Participants reported that they engage in support drinking more often in public setting (i.e., bar) than private settings (i.e., home). They reported spending a considerable amount of time during their last support drinking occasion, an average of 2-3 hours and drinking a substantial amount of alcohol (5.97 shots of liquor ($SD = 4.51$) or 4.27 bottles of beer ($SD = 3.86$) or 2.7 glasses of wine ($SD = 1.43$). I did not assess how long they spent actually engaged in supportive communication during support drinking occasions, an omission future research might consider as there may be important differences between support drinking occasions where much of the time is spent on social support and those occasions where perhaps only 20 minutes out of 3 hours is spent on social support. Note that while participants found the support provided by their friends to be very helpful ($M = 5.39$ on a 6 point scale) amount of alcohol consumed was negatively correlated with perceptions of support.    Thus more measurement of what communicative behaviors occurred during support drinking occasions (other than the comforting interaction) would be a useful addition to the literature.

Next, the effects of personality characteristics on support drinking measures are discussed. Interdependent self-construal is first discussed followed by a discussion of the lack of findings for independence and extraversion/introversion.

**Interdependent Self-Construal**

Interdependent self-construal, of the four personality measures, was the predictor most associated with support drinking. Interdependent self-construal was significantly associated with positive agent expectancy, initiating support drinking occasions, participating support drinking occasions invited by friends needing support, amount of alcohol spent in support drinking occasions and problematic outcomes. These findings are reviewed below.

*Support Drinking Occasions*. Amongst the four types of personality predictors assessed, interdependent self-construal was the only predictor of initiating a support drinking occasion and a predictor of the participating a support drinking occasion called by friends

needing support. The more whose self-construal is predominantly interdependent, the more he or she initiated support drinking occasions and the more often he or she was called by friends for a support drinking occasion. These findings were hypothesized based on the inherent characteristics of the interdependent self-construal to like to fit in with others and to be attentive to others' thoughts and feelings.

While scant research examined the relationship between interdependent self-construal and social support, the main reason for the active engagement patterns of the interdependence-oriented people may be found in their inherent characteristics noted earlier to be mindful about others' feelings and to be attentive to others' perception on them. Since perception about how others will recognize them is very important for them, they may have difficulties in expressing what they feel and what they need. Therefore, this may result in difficulties in active seeking for social support.

In other words, individuals whose self-construal is predominantly interdependent are likely to shrink from sharing negative affect with others for fear of negatively affecting others' feelings (e.g., getting them worried, getting them depressed too ) or of being perceived negatively (e.g.., trouble maker, worrier) by sharing negative events they are going through. Previous research on the characteristics of interdependent self- construal in interpersonal relationship suggests that as the level of interdependence increases individuals are more likely to make efforts to understand others expectation and others' probable behavior and therefore they hesitate to disclose information that could potentially affect other's behavior or their relationships (Rusbult & Van Lange, 2003). Rusbult and Van Lange also note that individuals higher in interdependence engage in more accommodating or even sacrificing in order to satisfy the other's well-being and the future relationship with the other.

In this sense, interdependence-oriented people might have some inhibitions about sharing negative affect/concerns with others and therefore, they may seek alcohol as well as

intimate persons to discuss what they are going through so that they can less care about the listeners' perception. Thus, once they are placed in support drinking occasions, they may be more likely then to share their worries or negative feelings. And this may explain the reason why those whose self-construal is predominantly interdependent are likely to drink more alcohol in a support drinking occasions and result in more problematic consequences than those whose self-construal is predominantly independent. They needed special occasions as well as help of alcohol to encourage them to care less about other's perception on them so that they can focus on coping with their own problems. Thus, they engaged very deeply and actively in the occasion once they initiated it.

The suggestions above provides new insight into the domain of social support research that interdependence-oriented individuals who want to cope with negative affect are more likely to seek social support *when drinking* than when sober. For interdependence-oriented individuals, initiating support drinking in an intimate setting may be a safe way to solicit social support without fear of being negatively assessed by others or discomforting others by sharing bad feelings or bad news. This means that support drinking is a unique option for interdependence-oriented individuals to solicit and receive social support.

*Alcohol outcome expectancies and consequences*. Interdependent self-construal was significantly correlated with positive agent expectancy. As noted earlier, this result may be related to the personal characteristics of interdependence-oriented individuals to expect to have more positive and enjoyable experience during/after drinking with others. That is, even though they were coping with negative feelings, what they expected may be an enjoyable and harmonious encounter rather than being affected by the negative feelings a great deal.

Wardell et al.'s (2012) findings that more experienced alcohol drinkers are more knowledgeable about anticipated results of alcohol and therefore develop specific expectations and are more actively engaged in drinking may explain why interdependence-

oriented people who have positive agent expectancies are more likely to initiate support drinking occasions, drink more alcohol and report more problematic consequences on those occasions.

Combined, these results indicate that interdependence-oriented people have stronger expectancies for positive agent, call friends more often for support drinking occasions, participate in the drinking occasions called by friends needing support, drink more and have more problematic consequences. Thus, drinking setting and drinking partner may be very important for interdependent individuals. One could speculate that for interdependence-oriented people, an intimate setting with a few close friends they trust may be necessary in order to share their feelings without negatively affecting a larger group of people when sharing concerns or anxieties. As they are less comfortable sharing their intimate feelings, alcohol may prove to be a useful key to them doing so. That is, support drinking occasions may be very important to those whose self-construal is predominantly interdependent and a key way for them to reduce their inhibitions about disclosing negative affect to others.

Moreover, the results of our study suggest that assessment of interdependence and independence should not be conflated with cultural level or country level variables. Specifically, some studies in the field of interpersonal communication or alcohol research perceive that independence is prevalent in Western countries and that interdependence is prevalent in Asian countries. For example, Taylor et al. (2004) suggest that interdependent people are more likely to use alcohol and other substances to cope with stress more often than independent people do. Yet this result was found assuming that Americans are independent and Koreans are interdependent without measuring self-construal of respondents. However, in our study, it was Americans whose self-construal was slightly (although not significantly) more interdependent. From this perspective, researchers should not make universal claims

about countries/cultures being interdependent or independent. Rather, self-construal of each individual within cultures should be considered to appraise self-construal orientation.

**Independent self-construal**

Independent self-construal was not a significant predictor of any of the measures associated with support drinking behavior. In retrospect, these "lack" of findings may align with the suggestion that individualistic people are less likely to pursue solidarity with others (Burleson, 2003). The lack of findings for independent self construal may be a function of how independent self-construal measures taps into an individual's ability to be direct, assertive, self-reliant, and expressive. That is, if one feels comfortable seeking social support, expressing one's feelings and asking help/advice from others when sober, than alcohol may not be needed by those with an independent sense of self.

The suggestion above that independence-oriented people are more likely to seek social support when sober than when drinking raises the necessity of the future research on alcohol outcome expectancies for independence-oriented individuals. Specifically, positive agent, tension reduction and social assertion were not the salient alcohol outcome expectancies for those whose self-construal is predominantly independent in our study, indicating that coping motive may not be the main motive that leads them to drink contrary to Guire's (2002) study. Therefore, exploring if enhancement motive and other types of expectancies than we studied is the predictor of alcohol consumption for independence-oriented people will generate original findings in the field of alcohol study.

**Extroversion/Introversion**

Contrary to the hypotheses, extroversion and introversion did not affect any measure of support drinking with the sole exception of the evaluation on helpfulness of friends. Extraverts perceived their friend's support more positively than did introverts. The lack of findings, especially for extraversion, is perplexing as several studies find extraversion and

drinking to be positively correlated (e.g., Brown & Munson, 1987; Jackson & Matthews, 1988; Ruch, 1994). One reason for the lack of findings may be a function of why people engage in support drinking: To get social support from friends. Jackson and Matthews (1988) found only the extraversion sub-factors of impulsivity and sociability predicted drinking behavior suggesting that extraverts may drink more for *social* occasions or for the drinking motive of enhancing positive feelings rather than for the coping motive. Similarly, Mohr and colleagues (2001) suggest that extroverted people tend to drink with others when they have relatively positive feelings rather than negative feelings, implying that coping motive for alcohol drinking is not related to extroversion.

In further support of this claim, Carney, et al., (2000) did a diary study with 87 social drinkers and found extraversion did not predict drinking practices for coping with stressful occasions. Taking both the Carney et al. and the present thesis lack of findings suggests that extraverts may drink more on social occasions (well documented in the literature) but they are not more likely than introverts to turn to alcohol to help cope with negative occasions or at least do not engage in support drinking occasions more than do introverts. In other words, it is possible that they seek social support mainly *when sober* and they drink a lot mainly when seeking fun or excitement. Therefore future research might compare the frequency of extrovert's drinking occasions for the purpose of having fun (enhancement) with the occasions for the purpose of coping to help establish whether extraverts' drinking is more a function of socializing than of coping with stress.

The one significant result associated with extraversion was for helpfulness of friends in the support drinking occasion. While the multivariate main effect for extraversion was not significant, extraversion did interact with nationality. American extraverts perceive their friend's support most positively whereas Korean extraverts perceive their friend's support least positively. As shown in Table 4.2, Americans scored significantly higher on extroversion

than did Koreans and the mean age of Korean respondents ($M =29.5$) were significantly older than American respondents ($M = 23.82$). Considering that extroverts tend to evaluate received social support positively because of their optimistic personality (Sarason et al., 1983; Zellars &Perrewe, 2001) and that the older are likely to evaluate received social support negatively, the interaction effect may occur because Americans were for the most part younger than their Korean counterparts.

**Demographic factors**

Demographic factors such as age, gender and nationality affect support drinking. As participants' age increased they were more likely to spend more time in support drinking occasions and to perceive friend's supportive support less positively. These results are in line with prior research on social support that the younger have more available networks (i.e., friends, family, relatives) to solicit support and report greater perceived support (Vaux, 1985). Thus, the result can be interpreted that the older spend longer time in an occasions of support drinking as they may have fewer occasions to receive support. While scant research was found to explain the reason why older individuals may perceive friend's support less positively, Barrera et al.'s (2002) study also reported that the older diabetes patients evaluated perceived social support more negatively. Considering most literature including Barrera et al.'s study that involves assessment of social support focuses on one's evaluation on perceived social support (i.e., available social support sources) rather than on received social support, our findings may shed light on the evaluation of received support to the future research. However, the future research of course is needed to bridge the gap.

Gender was also a significant predictor such that females initiated more support drinking occasions, drank less, and scored higher on helpfulness of friends evaluation and that their friend's effort were more effective at stopping them from ruminating than did males. The fact that women drink less than men is well established in numerous national surveys and

prior alcohol research (e.g., Cooper et al., 1992). Then, the rationale for female's more active engagement in support drinking can be supported based on Cooper et al.'s (1992) study. Their study indicates that females report having more stressful life events and having more available social support sources than are males, and are less likely to have drinking occasions under the coping motives than are males. The results imply that females are more likely to rely on social support resources to cope with stressful events but not to use alcohol to do so. Also, considering gender roles, female characteristics are perceived as having more expressive, supportive, compassionate than male's characteristics (Bem, 1974) so that they can better exchange and perceive social support (Vaux,1985). All those previous research suggests that females may feel comfortable relying on social support sources when they need to cope with stressful situations. While the link between using social support sources and having alcohol for females is weak, one possible speculation is that females are more likely to seek alcohol when seeking social support under a coping motive compared to when they internalize their negative affect.

Nationality was related to three types of alcohol outcome expectancies and evaluation of friends' general supprort and stopping rumination. American self-reported having higher alcohol outcome expectancies and perceived their friends support more positively. However, extreme caution is needed in any interpretation of results associated with the nationality measure. As shown in Table 4.3, American participants reported significantly higher scores on interdependence, independence and extroversion. The mixed results might be caused from unevenly distributed sample in terms of age. That is, Korean participants were mainly post-undergraduate students whereas American participants were almost undergraduate students. This age gap between two groups means that it is very difficult to disentangle whether it is age or nationality that resulted in American's higher scores on these personality traits factors as older people are more likely to report less extroversion and

independence. Therefore, to examine the exact effect of nationality factor, a study that involves evenly distributed samples in terms of age and nationality with more participants is needed.

**Alcohol outcome expectancy**

While tension reduction and social assertion expectancies were not related to *any* of the personality traits, positive agent expectancy was related to interdependent self-construal. With regard to the relationship between the three alcohol outcome expectancies and support drinking patterns, Table 4.5 shows that three types of alcohol outcome expectancies are significantly and positively correlated with most support drinking behavioral measures including the number of times one initiated support drinking occasions, the amount of alcohol, the amount of time, and problematic consequences.

More importantly, we found that the amount of alcohol consumed in a support drinking occasion was predicted by tension reduction expectancy and that the amount of time spent in a support drinking occasion was predicted by tension reduction expectancy and social assertion expectancy. The reasons for the results would be explained by the nature of support drinking that involves coping motive and social support. In other words, since support drinking involves a desire to cope with tension or anxiety by receiving support which requires open-ups and self-disclosure. Therefore, one may drink and spend time in the occasion as much as they achieve the desired result. Therefore, our findings are not surprising and those relationship align with Cooper et al.'s (1995) suggestion that drinking practices to cope with tension or anxiety result in abusive drinking patterns.

Overall, those results imply that, even though one's expectations to escape from the unfavorable feelings or to be more assertive are not related to specific personal characteristics, they still play an important role when people make a support drinking decision and are

further related to the pattern of drinking in terms of amount of drinks and time spent in the occasions.

**Problematic consequences**

Interdependent self-construal was a predictor of problematic consequences in support drinking occasions while extroversion was not. Although interdependence orientation was a predictor of consequences of support drinking, we should consider that the distribution of initial responses of all respondents was fairly skewed at having no problem with a mean of 1.4 (1 = *never*, 2 = *1-2 times,* 3= *3-5 times,* 4 = *6-10 times,* and 5= *more than 10 times; SD* = .54). In fact, most respondents reported having few problematic consequences during/after support drinking. This result may replicate the result of prior research that problematic consequences are more likely to occur in group socializing or solitary drinking (Correia, 2003). Thus, it may be that support drinking occasions do not lend themselves to the type of binge drinking and problematic consequences associated with group socializing. Yet, the literature suggests that drinking associated with the coping motive is most likely to lead to problematic outcomes and the likelihood of alcoholism over the long haul (Carey & Correia, 1997; Cooper et al., 1995). In this sense, comparing problematic consequences after having solitary drinking with a coping motive with consequences after having support drinking may provide meaningful findings regarding the context that binge/problematic drinking occurs.

While there is little research that indicates the relationship between interdependent self-construal and problematic drinking, future research exploring whether interdependence orientation predicts long-term problematic drinking would be relevant and beneficial to the alcohol research. Specifically, comparing problematic consequences reported from solitary drinking occasions under a coping motive with those reported from support drinking occasions will provide meaningful implications on how drinking in social settings can become habitual and affect problematic consequences in the long run.

**Limitations and future directions**

This study explored support drinking within diverse demographic factors such as gender, age and nationality. While overall demographic factors meet the recruiting criteria we planned, participants' age was relatively young ($M$=26, Median=23, $SD$=6.12). Since most adolescents and college students tend to drink with others merely for enjoyment or social reasons and thus support drinking may not be an important part of their drinking behavior (Emmanuel et al., 2005), future research should target an older sample.

As noted above, most undergraduates in the sample were Americans and the largest percent of graduate students/professionals were Korean. Thus, these two are cofounded which is a serious weakness that this study cannot ignore. Taking into account that support drinking should consider cultural aspects as significant variables, future research should be able to include more Asian population compared to Western population.

Moreover, most of the alcohol outcome expectancies examined did not differ significantly as a function of the personality traits. Only positive agent expectancies were found to be significantly related to interdependence. This lack of results may be because personality traits other than interdependent self-construal were not predictors of engaging in support drinking occasions. In this sense, comparing drinking occasions that involve a group of friends *for fun* with support drinking occasions will be a meaningful extension of this study as it can provides substantial implications on extroverts and independent individuals. As suggested above, extroverts and independence-oriented people actively seek social support when sober enough so they rarely use drinking occasions as a coping strategy. This means that they drink with others for other purposes (i.e., enhancement or social motives) than coping motives. Therefore, comparing drinking settings aimed at having fun or socializing should be examined to explore initiating motives for drinking and dominant alcohol outcome expectancies for those populations.

Future research should also compare solitary drinking with support drinking. Specifically, interdependence-oriented people were found to seek both alcohol and friends when feel bad. However, as prior study notes that interdependence-oriented people self-reported using alcohol or cigarette as a coping strategy (Taylor et al., 2004), there still is a possibility that interdependence-oriented people have solitary drinking as a coping strategy. Therefore, comparing the drinking settings for interdependent will be a meaningful extension of alcohol research on interdependent self- construal.

Further, most of our respondents could think of a time they wanted social support and wanted alcohol to be involved. This implies that most people other than interdependence-oriented individuals may also need alcohol when they seek social support. Therefore, future research on social support may need to consider measuring alcohol use in the context of social support exchange. Specifically, exploring if social support that involves alcohol brings about better outcomes in terms of emotional support would be useful for the extension of social support studies.

In addition, the lack of findings on extroversion in this study strengthens the necessity of distinction between support drinking and social drinking. That is, one of the implications of this study was that extroverted individuals may drink with others when they have enhancement or social motives rather than coping motives. Therefore, future studies on group drinking will benefit from taking into account drinking motives and purposes. Group drinking for fun/socializing should be distinguished from group drinking for support.

Lastly, exploring a new type of alcohol outcome expectancies related to receiving social support (e.g., receiving comforts and empathy) will generate fresh insights as support drinking is a special circumstance of drinking that involves others. That is, extant six types of alcohol outcome expectancies (Brown et al., 1980) were proposed without considering drinking contexts/settings (e.g., group socializing, solitary drinking). Therefore, expectations

that one can get social support were not incorporated even though it is very likely for one to have those expectations in a drinking context that involves intimate friends. The desire to talk that was frequently rated by respondents in this study as a reason for calling friends to come to drink with may represent that expectancy related to receiving social support can an important factor that predicts group drinking practices under a coping motive.

**General Conclusions**

Prior studies in social drinking mainly focused on the contexts that people get together to get to know or socialize with each other. Therefore, most social drinking research has not focused on the context that people seek social support under the group drinking context. On the other hand, social support is a behavior that is often studied in the communication field focused on the health context that one seeks help from others when they are sick. That is, scant research on social support has focused on the context in which people seeks for social support while drinking alcohol with a coping motive. This thesis proposed and studied the concept of support drinking to consider those contexts in which alcohol and social support co-occur. Moreover, previous studies on drinking practice that involves get-togethers lack information about *initiators* of the drinking occasion. This thesis focused on the initiator in terms of personality traits and explained why they need others to drink with under a coping motive. The findings of this study may extend the research on both alcohol behavior and social support.

Under the distinction, this study characterized support drinking as a practice that one engages in with 2-3 close friends to receive support for relationship issues, career problems, and family issues or to share one's feelings. Then we found that those whose self-construal is predominantly interdependent are the main beneficiaries of support drinking. Higher scores on interdependence were associated with initiating more support drinking occasions, having stronger tension reduction expectancies, spending more time, and having more problematic

consequences in the occasions. Demographic factors also indicated significant results. Females reported initiating more support drinking occasions and older people reported spending more time in the occasions. Moreover, with regard to evaluation on helpfulness of friends, Americans, the younger, and females evaluated friend's general support more positively than Koreans, the older, and males. All those significant results based on personality traits and demographic factors suggest that not only cultural factors but also individual characteristics associated with self-construal should be considered in both alcohol and social support research.

**References**

Halim, A., Hasking, P., & Allen, F. (2012). The role of social drinking motives in the relationship between social norms and alcohol consumption. *Addictive Behaviors*, 37(12), 1335–1341.

Bales, R. F. (1950). *Interaction process analysis*. P. 33. Cambridge, MA: Addison-Wesley.

Bandura, A. (1977). *Social learning theory*. New York: General Learning Press.

Barrera, M. R., Glasgow, R. E., McKay, H., Boles, S. M., & Feil, E. G. (2002). Do Internet-based support interventions change perceptions of social support?: An experimental trial of approaches for supporting diabetes self-management. *American Journal of Community Psychology*, 30(5), 637-654.

Beckwith, J. B. (1987). Psychological functions of eating, drinking, and smoking in adult women. *Social Behavior and Personality*, 15,185-206.

Bem, S. (1974). The measurement of psychological androgyny. *Journal of Consulting and Clinica,* 42, 155-162.

Berkman, L. F., Glass, T., Brissette, I., & Seeman, T. E. (2000). From social integration to health: Durkheim in the new millennium. *Social Science & Medicine*, 51, 843-857.

Bippus, A. M. (2001). Recipients' Criteria for Evaluating the Skillfulness of Comforting Communication and the Outcomes of Comforting Interactions. *Communication Monographs*, 68, 301-313.

Bolton, R. (1986). People skills: how to assert yourself, listen to others, and resolve conflicts / Robert Bolton. In , *A Touchstone book* New York : Simon & Schuster, 1986, c1979.

Brown, S. A., Goldman, M. S., Inn, A., & Anderson L. R. (1980). Expectations of reinforcement from alcohol: Their domain and relation to drinking patterns. *Journal of Consulting and Clinical Psychology,* 48, 419-426.

Brown, S.A., Christiansen, B.A., & Goldman, M.S. (1987). The Alcohol Expectancy

    Questionnaire: An instrument for the assessment of adolescent and adult alcohol

    expectancies. *Journal of Studies on Alcohol*, 48, 483–491

Burleson, B. R. (1994). Comforting messages: Features, functions, and outcomes. In J. Daly,

    J. M. Wiemann (Eds.), *Strategic interpersonal communication* (pp. 135-161).

    Hillsdale, NJ England: Lawrence Erlbaum Associates, Inc.

Burleson, B. R. (2003). The experience and effects of emotional support: what the study of

    cultural and gender differences can tell us about close relationships, emotion, and

    interpersonal communication. *Personal Relationships*, 10(1), 1-23.

Caplan, G. (1974). Support Systems. In G Caplan (ed.), *Sussport Systemns and Community

    Mental Health*, (pp.1-40). New York: Behavioral Publications.

Cappell, H., Greeley, J., (1987). Alcohol and tension reduction: An update on research and

    theory. In: Blane, H.T., Leonard, K.E. (Eds.), *Psychological Theories of Drinking and

    Alcoholism. Guilford*, New York, pp. 15–54.

Carey, K. B., & Correia, C. J. (1997). Drinking motives predict alcohol-related problems in

    college students. *Journal of Studies on Alcohol*, 58(1), 100-105.

Carrigana, M. H., Hamc, L. S., Thomasb, S. E., Randallb, C. L.(2008). Alcohol outcome

    expectancies and drinking to cope with social situations. *Addictive Behaviors*,

    33,1162-1166.

Carney, M. A., Armeli, S., Tennen, H., Affleck, G., & O'NEIL, T. P. (2000). Positive and

    negative daily events, perceived stress, and alcohol use: A diary study. *Journal of

    Consulting and Clinical Psychology*, 68(5), 788-798.

Carstensen, L. L. (1992). Social and emotional patterns in adulthood: Support for

    socioemotional selectivity theory. *Psychology and Aging*, 7(3), 331-338.

    doi:10.1037/0882-7974.7.3.331

Cobb, S (1976). Social Support as a moderator of like stress. *Psychosomatic Medicine*, 38, 300-314.

Cohen, S., & Syme, S. (1985). *Social support and health*. San Diego, CA US: Academic Press.

Cohen, S., & Wills, T. A. (1985). Stress, social support, and the buffering hypothesis. *Psychological Bulletin*, 98(2), 310-357. doi:10.1037/0033-2909.98.2.310

Connors, G. J., O'Farrell, T. J., Cutter, H. S. , & Thompson, D. L. (1987). Dose-related effects of alcohol among male alcoholics, problem drinkers and nonproblem drinkers. *Journal of Studies on Alcohol*, 48, 461-466.

Cooper, M. L., Frone, M. R., Russell, M. M., & Mudar, P. P. (1995). Drinking to regulate positive and negative emotions: A motivational model of alcohol use. *Journal of Personality and Social Psychology*, 69.

Cooper, M., Russell, M., Skinner, J. B., & Windle, M. (1992). Development and validation of a three-dimensional measure of drinking motives. *Psychological Assessment*, 4(2), 123-132.

Cooper, M., Russell, M., Skinner, J. B., Frone, M. R., & Mudar, P. (1992). Stress and alcohol use: Moderating effects of gender, coping, and alcohol expectancies. *Journal of Abnormal Psychology*, 101(1), 139-152.

Correia, C., Carey, K., Simons, J., & Borsari, B. (2003). Relationships between binge drinking and substance-free reinforcement in a sample of college students: a preliminary investigation. *Addictive Behaviors*, 28(2), 361-368.

Costa, P. T., Jr., & McCrae, R. R. (1992). *Revised NEO Personality Inventory (NEO-PI-R) and NEO Five-Factor Inventory (NEO-FFI): Professional manual*. Odessa, FL: Psychological Assessment Resources

Coyne, J. C., & Downey, G. G. (1991). Social factors and psychopathology: Stress, social support, and coping processes.

Cross, S. E., Bacon, P. L., & Marris,M. L. (2000). The relational-interdependent self-construal and relationships. *Journal of Personality and Social Psychology*, 78, 791–808

Cunningham, M. R., 7 Barbee, A, P. (2000). Social support. In C. Hendrick & S. S. Hendrink (Eds), *Close relationships*: A source book (pp. 272-285). Thousand Oaks, CA: Sage.

Cutrona, C. E., & Russell, D. W. (1987). The provisions of social relationships and adaptation to stress.

Cutrona, C., & Russell, D. (1990). Type of social support and specific stress: Toward a theory of optimal matching.

Cutter, H. S., & O'Farrell, T. J. (1984). Relationship between reasons for drinking and customary drinking behavior. *Journal of Studies on Alcohol*, 45, 321-325.

Debra K., M., & Kevin J., C. (2013). The relationship between assertiveness, alcohol- related expectations for social assertion and drinking patterns among college students. *Addictive Behaviors*, 14301-305. doi:10.1016/0306-4603(89)90061-0

Dias, P., Oliveira, A., & Lopes, C. (2011). Social and behavioural determinants of alcohol consumption. *Annals of Human Biology*, 38(3), 337-344.

Emmanuel, K., Ronald, K., Gerhard, G., & Rutger, E. (2005). Why do young people drink? A review of drinking motives. *Clinical Psychology Review*, 25841-861. doi:10.1016/j.cpr.2005.06.002

Eysenck, H. J., & Sybil, B. G. (1964). An improved short questionnaire for the measurement of extraversion and neuroticism. *Life Sciences*, 3(10), 1103-1109. doi:10.1016/0024-3205(64)90125-0

Falk, J. L. (1983). Drug dependence: Myth or motive? Pharmacology, *Biochemistry & Behavior*, 19, 385-391.

Farber, P. D., Khavari, K. A., & Douglass, F. M. (1980). A factor analytic study of reasons for drinking: Empirical validation of positive and negative reinforcement dimensions. *Journal of Consulting and Clinical Psychology*, 48(6), 780-781.

Gire, J. (2002). A cross-national study of motives drinking alcohol1. *Substance Use & Misuse*, 37(2), 215.

Goldman, M. S. (1999). Risk for substance abuse: Memory as a common etiological pathway. *Psychological Science*, 10, 196-197.

Goldman, M. S., Brown, S. A., Christiansen, B. A., Blane, H. T., & Leonard, K. E. (1987). *Expectancy theory: Thinking about drinking*. Psychological Theories of Drinking and Alcoholism, New York : Guilford Press

Goldsmith, D. J. (2004). *Communicating social support / Daena J. Goldsmith*. Cambridge, UK ; New York : Cambridge University Press, 2004.

House, J. S. (1981). *Work stress and social support / James S. House*. Reading, Mass. : Addison-Wesley Pub. Co., c1981.

Kareen, T., Gregory D., Z., & Samson, T. (2013). Assessing social support among South Asians: The multidimensional scale of perceived social support. *Asian Journal of Psychiatry*, 5.

Kirchner, T. R., Sayette, M. A., Cohn, J. F., Moreland, R. L., & Levine, J. M. (2006). Effects of Alcohol on Group Formation among Male Social Drinkers. *Journal of Studies on Alcohol*, 67(5), 785-793.

Kropp, F., Lavack, A. M., Silvera, D. H., & Gamer, J. R. (2004). Alcohol Consumption among University Students: A Multi-Country Study of Attitudes, Values, Identity,

and Consumer Influence. *Journal of Nonprofit & Public Sector Marketing*, 12(2), 1-28.

Kuendig, H., & Kuntsche, E. (2012). Solitary versus social drinking: an experimental study on effects of social exposures on in situ alcohol consumption. *Alcoholism, Clinical and Experimental Research*, 36(4), 732-738.

Kushner, M. G., Sher, K. J., Wood, M. D., & Wood, P. K. (1994). Anxiety and drinking behavior: Moderating effects of tension-reduction alcohol outcome expectancies. *Alcoholism, Clinical and Experimental* Research, 18(4), 852-860.

Leavy R. L. (1983). Social support and psychological disorder: a review. *Journal of Community Psychology*, 11, 3-21.8869(97)00015-9

Leigh, B. C., & Stacy, A. W. (1993). Alcohol outcome expectancies: Scale construction and predictive utility in higher order confirmatory models. *Psychological Assessment*, 5(2), 216-229.

Lu, L., & Gilmour, R. (2007). Developing a new measure of independent and interdependent views of the self. *Journal of Research In Personality*, 41(1), 249-257.

MacAndrew, C., & Edgerton, R. B. (1969). *Drunken comportment: a social explanation [by] Craig MacAndrew and Robert B. Edgerton*. Chicago, Aldine Pub. Co.

Markus, H. R., & Kitayama, S. (1991). Culture and the self: implication for cognition, emotion, and motivation. *Psychological Review*, 98, 224–253.

Marlatt, G. (1987). Alcohol, the magic elixir: Stress, expectancy, and the transformation of emotional states. In E. Gottheil, K. A. Druley, S. Pashko, S. P. Weinstein (Eds.) , Stress and addiction, 302-322. Philadelphia, PA US: Brunner/Mazel.

Marlatt, G. A., Demming, B., & Reid, J. B. (1973). Loss of control drinking in alcoholics: An experimental analogue. *Journal of Abnormal Psychology*, 82, 233-241.

Martsh, C., & Miller, W. R. (1997). Extraversion predicts heavy drinking in college students. *Personality and Individual Differences*, 23(1), 153-155.

Matsumoto, D. D. (1999). Culture and Self: An empirical assessment of Markus and Kitayama's theory of independent and interdependent self-construal. *Asian Journal of Social Psychology*, 2, 289-310.

McCarty, D, & Kaye, M. (1984). Reasons for drinking: Motivational patterns and alcohol use among college students. *Addictive Behaviors*, 9, 185-188.

Mehl, M. R., Vazire, S., Holleran, S. E., & Clark, C. S. (2010). Eavesdropping on happiness: Well-being is related to having less small talk and more substantive conversations. *Psychological Science*, 21, 539–541.

Miller, G. R., & Steinberg, M. M. (1975). *Between people : a new analysis of interpersonal communication* / Gerald R. Miller, Mark Steinberg. Chicago : Science Research Associates, 1975.

Mohr, C. D., Armeli, S., Tennen, H., Carney, M., Affleck, G., & Hromi, A. (2001). Daily interpersonal experiences, context, and alcohol consumption: Crying in your beer and toasting good times. *Journal of Personality and Social Psychology*, 80(3), 489-500. doi:10.1037/0022-3514.80.3.489

Mooney, D., Fromme, K., Kivlahan, D., & Marlatt, G. (1987). Correlates of alcohol consumption: sex, age, and expectancies relate differentially to quantity and frequency. *Addictive Behaviors*, 12(3), 235-240.

Newcomb, M. D. , Chou, C., Bentler, P. M., & Huba, G. J. (1988). Cognitive motivations for drug use among adolescents: Longitudinal tests of gender differences and predictors of change in drug use. *Journal of Counseling Psychology*, 35, 426-438.

Phelps, J., Nowak, G., & Ferrell, E. (2000). Privacy concerns and consumer willingness to provide personal information. *Journal of Public Policy & Marketing*, 27-41.

Procidano, M. E., & Heller, K. K. (1983). Measures of perceived social support from friends and from family: three validation studies. *American Journal of Community Psychology*, 1.

Raynor, D. A., & Levine, H. (2009). Associations Between the Five-Factor Model of Personality and Health Behaviors Among College Students. *Journal of American College Health*, 58(1), 73-82.

Read, J. P., Wood, M. D., Lejuez, C. W., Palfai, T. P., & Slack, M. (2004). Gender, Alcohol Consumption, and Differing Alcohol Expectancy Dimensions in College Drinkers. *Experimental and Clinical Psychopharmacology*, 12(4), 298-308.

Rohsenow, D. J. (1983). Drinking habits and expectancies about alcohol's effects for self versus others. *Journal of Consulting and Clinical Psychology*, 51, 752-756.

Rook, K. S. (1985). The functions of social bonds: Perspectives from research on social support, loneliness and social isolation. In I. G. Sarason & B. R. Sarason (Eds.), *Social support: theory, research and applications* (pp. 243–267). Dordrecht, Netherlands:Martinus Nijhoff.

Rook, K. S. (1987). Reciprocity of social exchange and social satisfaction among older women. *Journal of Personality and Social Psychology*, 52, 145–154.

Rusbult, C. E. & Van Lange P. A. M (2003). Interdependence, interaction and relationships. *Annual Review of Psychology*, 54, 351-375.

Samter, W. W. (1994). Unsupportive relationships: Deficiencies in the support-giving skills of the lonely person's friends.

Sarason, I. G., Levine, H. M., Basham, R. B., & Sarason, B. R. (1983). Assessing Social Support: The Social Support Questionnaire. *Journal of Personality & Social Psychology*, 44(1), 127-139.

Seeman, T. (2001). How do others get under our skin? Social relationships and health. In C. D. Ryff, B. H. Singer (Eds.) , *Emotion, social relationships, and health* (pp. 189-210). New York, NY US: Oxford University Press.

Sher, K. J., Wood, M. D., Wood, P. K., & Raskin, G. (1996 Alcohol outcome expectancies and alcohol use: A latent variable cross-lagged panel study. *Journal of Abnormal Psychology*, 105, 561–574.

Singelis, T. M. (1994). The measurement of independent and interdependent self-construals. *Personality and Social Psychology Bulletin*, 20, 580-591.

Sobell, M. M., & Sobell, L. L. (2012). Weekly Drinking Awareness Record. *Center of Alcohol Studies, Rutgers*, The State University, Smithers Hall, Busch Campus, Piscataway, NJ 08854

Spiegel, D., & Kimerling, R. (2001). Group psychotherapy for women with breast cancer: Relationships among social support, emotional expression, and survival. In C. D. Ryff, B. H. Singer (Eds.) , *Emotion, social relationships, and health* (pp. 97-123). New York, NY US: Oxford University Press.

Stroebe, W., & Stroebe, M. (1996). The social psychology of social support. In E. Higgins, A. W. Kruglanski (Eds.), Social psychology: Handbook of basic principles (pp. 597-621). New York, NY US: Guilford Press.

Taylor, S., Sherman, D., Kim, H., Jarcho, J., Takagi, K., & Dunagan, M. (2004). Culture and social support: who seeks it and why?. *Journal of Personality and Social Psychology*, 87(3), 354-362.

Thoits, P. A. (1995). Stress, Coping, and Social Support Processes: Where Are We? What Next?. *Journal of Health and Social Behavior*, 3553-79.

Triandis, Henry C. (1995), *Individualism and Collectivism*, Boulder, CO: Westview Press.

Triandis, H. C., Bontempo, R. R., Villareal, M. M., Asai, M. M., Lucca, N. N., & Bontempo, R. R. (1993). INDCOL (Individualism-Collectivism) Scale. *Journal of Cross-Cultural Psychology*, 24, 149-166.

Triandis, H. C., & Gelfand, M. J. (1998). Converging measurement of horizontal and vertical individualism and collectivism. Journal of Personality and Social Psychology, 74, 118–128.

Tubbs, S. L., & Moss, S. (1981). Interpersonal communication. New York : Random House.

Uchino, B. (2004). *Social Support and Physical Health: Understanding the Health Consequences of Relationships*. New Haven, CT: Yale University Press. p. 17.

Vaux, A. (1985). Variations in Social Support Associated with Gender, Ethnicity, and Age. *Journal of Social Issues*, 41(1), 89-110.

Vogel, M. (1959). Alcohol, alcoholism, and introversion-extraversion. *Canadian Journal of Psychology/Revue Canadienne De Psychologie*, 13(2), 76-83.

Wardell, J. D., Read, J. P., Curtin, J. J., & Merrill, J. E. (2012). Mood and Implicit Alcohol Expectancy Processes: Predicting Alcohol Consumption in the Laboratory. *Alcoholism: Clinical & Experimental Research*, 36(1), 119-129.

Weber, K., Johnson, A., & Corrigan, M. (2004). Communication Emotional Support and its Relationship to Feelings of Being Understood, Trust, and Self-Disclosure. *Communication Research Reports*, 21(3), 316-323.

Williams, A. F. (1966). Social drinking, anxiety and depression. *Journal of Personality & Social Psychology*, 3(6), 689-693.

Wills, T. (1985). Supportive functions of interpersonal relationships. In S. Cohen, S. Syme (Eds.), *Social support and health* (pp. 61-82). San Diego, CA US: Academic Press.

Wills, T. (1991). Social support and interpersonal relationships. In M. S. Clark (Ed.) , *Prosocial behavior* (pp. 265-289). Thousand Oaks, CA US: Sage Publications, Inc.

Xu, Y., & Burleson, B. R. (2001). Effects of sex, culture and support type of perceptions of
    spousal social support in early marriage. *Human Communication Research*, 27, 535-
    566.

Zellars, K. L., & Perrewe, P. L. (2001). Affective Personality and the Content of Emotional
    Social Support: Coping in Organizations. *Journal of Applied Psychology*, 86, 459-467.

**APENDIX A**

**CONSENT SCREEN FOR RESEARCH POOL PARTICIPANTS**

I agree to take part in a research study titled, **"Support Drinking : Motivations for Drinking with Close Others from the Perspective of Social Support**", which is being conducted by Kyungeun Jang, Communication Studies Department, University of Georgia, 706) 542-3199 under the direction of Dr. Jennifer Monahan, Communication Studies Department, University of Georgia, 706-542-4893.

My participation is voluntary; I can refuse to participate or stop taking part at any time without giving any reason, and without penalty or loss of benefits to which I am otherwise entitled. If I decide to withdraw from the study, the information that can be identified as mine will be kept as part of the study and may continue to be analyzed, unless I make a written request to remove, return, or destroy the information.

Purpose of the study: People drink alcohol in social settings for a variety of reasons. Most often we drink at parties or bars where drinking is simply part of the social occasion. Other times we drink with a few close others to provide support to a friend or close other (e.g., when they feel bad) and sometimes we ask our friends to come drink with us so they can provide us with emotional support. The purpose of this study is to examine people's needs for seeking close others to drink with and to provide insight into what motivates people to drinking with close others.

I understand that I must be at least 21 years old to be eligible to participate in this research project.
I understand that in the past year I must have drank alcohol to support a close friend or other (e.g., when they feel bad or perhaps to help them celebrate) OR I must have asked friends to come drink with me to provide me with emotional support.

Benefits. I will not benefit directly from this research.
I understand I will receive course research participation credit (graded as completed/not completed) for my COMM1100 or COMM1500 class or extra credit for my communication studies class for participating. My grade in this class will not be affected whether I decide to participate or not, or if I decide to stop taking part after giving my consent. If I do not want to participate in this study, I can elect to participate in a different study or I can elect to take the option of reviewing a research project or attending a colloquium.

Procedures. In this study I will complete a brief on-line survey. The survey will ask me some questions about myself, what occasions I drink on and with whom I drink. I understand that the entire study will take approximately 15-20 minutes to complete.

Discomfort or Stress. No discomforts or stresses are expected.
Risks. No risks are expected.

Confidentiality.    The only people who will know that I am a research subject are members of the research team. No individually-identifiable information about me, or provided by me during the research, will be shared with others, except if necessary to protect my rights or welfare (for example, if I am injured and need emergency care); or if required by law. Internet communications are insecure and there is a limit to the confidentiality that can be guaranteed due to the technology itself. However once the materials are received by the researcher, standard confidentiality procedures will be employed.    Here is how that will work.    At the end of the study, I will type in my name and my instructor's name in order to receive course research credit for my communication studies class.    The researchers will keep the list of names/instructor's names in a separate file than the data with my responses in it.    Therefore, when the data are downloaded into a spread sheet, my identifying information will not be with my answers to the survey questionnaire.    After the semester is over (April 2013), the list of participant names will be destroyed.

The researcher (Kyungeun Jang) will answer any further questions about the research, now or during the course of the project, and can be reached by telephone at (706) 583-0952 or by email at katejang@uga.edu.

Additional questions or problems regarding your rights as a research participant should be addressed    to The Chairperson, Institutional Review Board, 629 Boyd Graduate Studies Research Center, Athens, Georgia 30602- 7411; Telephone: (706) 542-3199; E-Mail Address: IRB@uga.edu

- ☐    By clicking here, I indicate that the researchers have answered all of my questions to my satisfaction and that I consent to volunteer for this study.
- ☐    I do not give consent to participate in this research project.

## APENDIX A

## CONSENT SCREEN FOR POST-UNDERGRADUATE PARTICIPANTS

I agree to take part in a research study titled, "**Support Drinking : Motivations for Drinking with Close Others from the Perspective of Social Support**", which is being conducted by Kyungeun Jang, Communication Studies Department, University of Georgia, 706) 542-3199 under the direction of Dr. Jennifer Monahan, Communication Studies Department, University of Georgia, 706-542-4893.   My participation is voluntary; I can refuse to participate or stop taking part at any time without giving any reason, and without penalty or loss of benefits to which I am otherwise entitled. If I decide to withdraw from the study, the information that can be identified as mine will be kept as part of the study and may continue to be analyzed, unless I make a written request to remove, return, or destroy the information.

Purpose of the study:    People drink alcohol in social settings for a variety of reasons. Most often we drink at parties or bars where drinking is simply part of the social occasion.   Other times we drink with a few close others to provide emotional support to a friend or close other (e.g., when they feel bad) and sometimes we ask our friends to come drink with us so they can provide us with emotional support.   The purpose of this study is to examine people's needs for seeking close others to drink with and to provide insight into what motivates people to drinking with close others.

I understand that I must be at least 22 years old to be eligible to participate in this research project.

I understand that in the past year I must have drank alcohol to support a close friend or other (e.g., when they feel bad) OR I must have asked friends to come drink with me to provide me with emotional support.

Benefits.    I will not benefit directly from this research.

 There is a drawing for $50 gift cards associated with this study.   After data collection is complete, six names will be drawn to receive a gift card.   You will be notified by email if you were one of the six chosen to receive a gift card and the gift card subsequently will be mailed to the address provided by you.   You do not have to participate in the study to be eligible for the drawing.   If you click "I do not give consent to participate" in the options below, you will be sent to the gift card drawing page.

Procedures. In this study I will complete a brief on-line survey.   The survey will ask me some questions about myself, what occasions I drink on and with whom I drink.   I understand that the entire study will take approximately 15-20 minutes to complete.

Discomfort or Stress.   No discomforts or stresses are expected.

Risks.   No risks are expected.

Confidentiality.   The only people who will know that I am a research subject are members of the research team. No individually-identifiable information about me, or provided by me during the research, will be shared with others, except if necessary to protect my rights or welfare (for example, if I am injured and need emergency care); or if required by law. Internet communications are insecure and there is a limit to the confidentiality that can be guaranteed due to the technology itself. However once the materials are received by the researcher, standard confidentiality procedures will be employed.   Here is how that will work.   At the end of the study, I will type in my name and my email address IF I want to be entered into the drawing for a gift card.   The researchers will keep the list of names and email addresses in a separate file than the data with my responses in it.   Therefore, when the data are downloaded into a spread sheet, my identifying information will not be with my answers to the survey questionnaire.   After gift cards are mailed and received, the list of names and email addresses will be destroyed.

The researcher (Kyungeun Jang) will answer any further questions about the research, now or during the course of the project, and can be reached by telephone at (706) 583-0952 or by email at katejang@uga.edu.

Additional questions or problems regarding your rights as a research participant should be addressed   to The Chairperson, Institutional Review Board, 629 Boyd Graduate Studies Research Center, Athens, Georgia 30602- 7411; Telephone: (706) 542-3199; E-Mail Address: IRB@uga.edu

☐    By clicking here, I indicate that the researchers have answered all of my questions to my satisfaction and that I consent to volunteer for this study.

☐    I do not give consent to participate in this research project.

## APPENDIX B

## THESIS MEASUREMENT QUESTIONNAIRE

**DEMOGRAPHICS**

1. What is your gender?
(1) Female
(2) Male

2.  What is your *nationality?*
A.  American
B.  Korean
C.  Other (please specify) _____

2.a  If "American" on Q2 then, what is your ethnic background? Please select all that apply:
White/ Caucasian American
African American
Asian American
Spanish/Latino/Hispanic American
American Indian or Alaska Native
Biracial or multiracial
Other (please specify)_____

3. How old are you?   __

4.  I am
a.  an undergraduate student
b.  a graduate student
c.  not in school

**NUMBER OF ENGAGEMENT IN SUPPORT DRINKING**
In this study, we are interested in why people drink with close friends so they can get emotional support.
<u>During the past year</u> how often do your friend(s) ask you to come drink with them to get support from you?

|  | Never | Once | A few times | 3-5 times | more than 5 |
|---|---|---|---|---|---|
|  | 1 | 2 | 3 | 4 | 5 |

My friend(s) call me to come drink with them to…
5. Get emotional support when they were going through a bad time.
6. Get support when they received some bad news
7. Help them when they were feeling stressed, nervous or anxious
8. Help make a difficult decision

During the past year how often do you ask your friends to come drink with you to get support?

|  | Never | Once | A few times | 3-5 times | more than 5 |
|---|---|---|---|---|---|
|  | 1 | 2 | 3 | 4 | 5 |

I call friends to come drink with me to….

9. Get emotional support when I was going through a bad time

10. Get support when I received some bad news

11. Help me when I'm feeling stressed, nervous or anxious

12. Help make a difficult decision

**DESCRIPTION OF SUPPORT DRINKING**

Think of the **last time** you called your friends to come drink with you to support you.

13. What was the reason why you wanted your friend's support?

_____

14.   How many friends did you call?   _____

15.   Were the friends you called

___All male          ___All female     _____Some male and some female

16.   How close are you with the friends you called to drink with you for support?     (7 point scale:   not close-very close)

17.   How important is your relationship with these friends?    (1-7 point scale:   not much-very important)

18.   What characterizes your relationship with these friends?

    ___Drinking buddies only

    ___I see them when we are drinking but we also hang out when we are sober

19.   Where did you drink?

___   At my home     ____ at a bar     ___   at a club     ____ at a friend's house

____ Other (please indicate)

**EVALUATING HELPFULNESS OF FRIENDS**

How helpful were your friends during the drinking encounter?

7 point scale: 1= *strongly disagree* to 7=*strongly agree*

**Other Orientation**

    20. Was focused on my feelings

    21. Let me know that they cared

    22. Made me feel like I could tell them anything

**Problem Solving**

    23. Was useful in coming up with solutions to my problem

    24. Told me what I could do to fix my problem

25. Helped me to solve my problem
26. Provided good advice

**Positive Mood**

27. Made me feel negatively toward them
28. Got a laugh out of me
29. Made me smile

**Empowerment**

30. Helped me have a more productive attitude
31. Made me feel confident about my ability to deal with the situation I was in
32. Helped me to cope with the situation
33. Put me in a healthier frame of mind for dealing with my problem

**Stopped Rumination**

34. Distracted me from my problem
35. Stopped me from being so focused on my problem or issue
36. Helped me to quit thinking about my problem

37. During the past year, when you **call your friends to** drink with you to receive emotional support from them, how long on average do you drink on those occasions?

1 hour          2 hours          3 hours          4 or more hours Not Applicable

38. During the past year, when you **call your friends to** drink with you to receive emotional support from them, how much do you usually drink alcohol you chose at a sitting?

_____ Beers,    _____ glasses of wine,      _____ shots of liquor

**PROBLEMATIC CONSEQUNCIES**

Different things happen to people when they are drinking ALCOHOL, or as a result of their ALCOHOL use. Some of these things are listed below. Please indicate how many times each has happened to you while you were getting support from your friends and drinking with them.

Never          1-2 Times          3-5 times          6-10 times          More than 10 times
1              2                  3                  4                  5

**During or after I drank alcohol I….**

39. Got into fights, acted bad, or did mean things.
40. Went to work or school high or drunk.
41. Neglected my responsibilities.
42. Suddenly found myself in a place that you could not remember getting to.
43. Felt I was going crazy.
44. Passed out or fainted suddenly.
45. Had a fight, argument, or bad feelings with a friend.
46. Felt I needed more alcohol than I used to use in order to get the same effect.

**Alcohol Outcome Expectancy**

Here is a list of some effects or consequences that some people experience after drinking alcohol. How likely is it that these things happen to you when you drink alcohol? Please circle the number that best describes how drinking alcohol would affect you.

5 point scale: 1 = *strongly disagree* to 5 = *strongly agree*

**Tension Reduction**

    47.   Alcohol makes me worry less

    48.  Alcohol helps deaden my pain

    49.   I am not as tense when I am drinking

    50.   Having a few drinks help me relax in a social situation

    51.  Drinking makes me feel calm and serene

    52.   At times, drinking is like permission to forget problems

    53.  Drinking helps me get out of a depressed mood.

**Social Assertion**

    54.  If I have a couple of drinks, its is easier to express my feelings

    55.  A few drinks make it easier to talk to people

    56.  When I'm drinking, its easier to open up and express my feelings

    57.  A few drinks make me less shy

    58.  Drinking gives me more confidence in myself

    59.  Drinking makes me feel free to be myself and to do whatever I want

    60.  Alcohol allows me to be more assertive

**Positive agent**

    61.  Drinking makes me feel good

    62.  Drinking makes the future seem brighter

    63.  If I feel restricted in any way, a few drinks make me feel better

    64.  When I feel high from drinking, everything seems to feel better.

    65.  Alcohol can eliminate feelings of inferiority.

    66.  Things seem funnier when I have been drinking or at least I laugh more.

    67.  I feel like a more happy-go-lucky person when I drink.

**PERSONALITY TRAITS**

Please indicate how much you agree with the statements below.

**Extroversion/Introversion**

5 point scale: 1 = *strongly disagree* to 5 = *strongly agree*

    68.  I am known as a warm and friendly person

    69.  I really enjoy talking to people

    70.  I find it easy to smile and be outgoing with strangers

    71.  I am shy away from crowds of people (R)

    72.  I like to have a lot of people around me

    73.  I usually prefer to do things alone (R)

74. I sometimes fail to assert myself as much as I should (R)
75. I have often been a leader of groups I have belonged to
76. Other people often look to me to make decisions.
77. When I do things, I do them vigorously.
78. I often feel as if I'm bursting with energy
79. I am a very active person
80. I often crave excitement
81. I have sometimes done things just for "kicks" or thrills."
82. I tend to avoid movies that are shocking or scary. (R)
83. I have sometimes experienced intense joy or ecstasy.
84. I am a cheerful, high-spirited person.
85. I laugh easily.

**Independence**
7 point scale: 1 = *strongly disagree* to 7 = *strongly agree*
86. I believe that people should be unique and different from others.
87. I believe that people should stick to their opinions in any circumstances
88. I believe that people should fully realize their potential.
89. I believe that once a goal is set, one should do one's best to achieve it.
90. I believe that people should be direct with others.
91. I believe that people should maintain their independence in a group
92. I believe that people should be self-resilient and self-reliant.

**Interdependence**
7 point scale: 1 = *strongly disagree* to 7 = *strongly agree*
93. Belonging to a group is important to my self-identity, or sense of myself
94. My self-identity is a result of my social status.
95. I believe that people should behave appropriately according to their different social status and roles
96. I believe that the group should come first when it is in conflict with the individual.
97. I believe that people should consider the opinions and reactions of the others before making decisions
98. I believe that the success and failure of my family is ultimately related to my self-identity
99. I believe that intimate relationships could reflect one's self-identity.

*Thank you for your participation. Your responses will make a valuable contribution to research on human communication and alcohol behaviors.*

■■■■■■■■■■■■■■■■■■■■■■■■■■■■■■■■■■■■■■■■■■■■■■■■■■■■■■■■■■■■■■
Post Survey Participants are sent to one of two screens depending on whether they are doing the study for research pool participation.

RESEARCH POOL & EXTRA CREDIT PARTICIPANTS

Please provide the following information in order to get CREDIT for participation.

Your Name.          _____
The course for which you want course research credit by completing this survey:
Course Number (e.g., COMM 1500) _____
Name of Professor (or Instructor) _____


NON-RESEARCH POOL/EXTRA CREDIT PARTICIPANTS
You are eligible for a $50 gift card drawing. Based on random selection, six recipients will be notified individually and receive the gift cards. If you are interested in the drawing, please leave your email address below. Winners will be notified via email by April 30.

Name:      _____
Email Address _____

**APPENDIX C**

**DEBRIEFING FORM**

Thank you for your help in our research!

You have just completed a survey that asked you to answer questions regarding your alcohol drinking and communication behaviors. Prior studies explore factors that lead to a drinking decision without considering various contexts in which drinking practices take place (e.g., others with whom to drink, locations to drink). The current project proposes to examine those elements and suggests a new concept, "support drinking", to represent how people are likely to seek out close others to drink with to obtain social support

We will examine the data provided by you and other participants to understand what people expect when they call others to drink with and how social support affects the drinking decisions. Specifically, we are interested in exploring a) personality traits that affect support drinking decision, b) salient alcohol outcome expectations for occasions of support dinking, c) drinking patterns that occur around support drinking such as the frequency/amount of drinks, and finally d) problematic consequences of support drinking. Since support drinking is a common type of drinking practice, exploring motivations, patterns and consequences of support drinking will generate meaningful insights into how social support and drinking may be linked in society. Taking into account that there are a number of people suffering from alcohol problems or social isolation in our society, this study will suggest valuable findings to cope with those issues.

Your responses are very valuable to us and we appreciate that you took the time to complete our survey. Please email Kyungeun Jang (katejang@uga.edu) if you have any question about the study or if you would like a summary of our findings.

Many Thanks,

Kyungeun Jang                                                    Jennifer L.Monahan
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706-542-4893