

Introduction

Self-determination theory (SDT; Ryan & Deci, 2000) is a potentially useful framework for understanding alcohol use, particularly the mechanisms through which intervention/treatment influence behavior and the natural process of change. However, few studies have empirically applied SDT to the study of alcohol use. Existing research has focused primarily on the relationship between controlled motivation and negative drinking outcomes (e.g., Neighbors, Walker, & Larimer, 2003). These studies provide support for SDT in relation to alcohol use, but neglect the potential benefits of autonomous motivation on alcohol use.

The purpose of the present study was to investigate the influence of dispositional autonomy on engagement in alcohol-related protective behavioral strategies through autonomous motivation to control alcohol use.

Method

Participants and procedure

Participants were 355 undergraduate psychology students from a university located on the U.S./México border who reported having consumed alcohol at least once in the past 3 months (68.4% female; 87.9% Hispanic; $M_{age} = 21.3$, $SD = 5.0$). Participants completed the measures online as part of a larger study in order to receive partial course credit.

Measures

The Index of Autonomous Functioning (IAF; Weinstein, Przybylski, & Ryan, 2012), a 15-item self-report measure, was used to assess dispositional autonomous motivation.

The autonomous motivation subscale of the Treatment Self-Regulation Questionnaire (TSRQ; Ryan & Connell, 1989), a 6-item self-report measure, was used to assess autonomous motivation for controlling alcohol use.

The Protective Behavioral Strategies Scale (PBSS; Martens et al., 2005), a 15-item self-report measure, was used to assess alcohol-related protective behavioral strategies. The PBSS consists of three subscales that reflect different strategies: stopping/limiting drinking (S/LD), manner of drinking (MOD), and serious harm reduction (SHR).

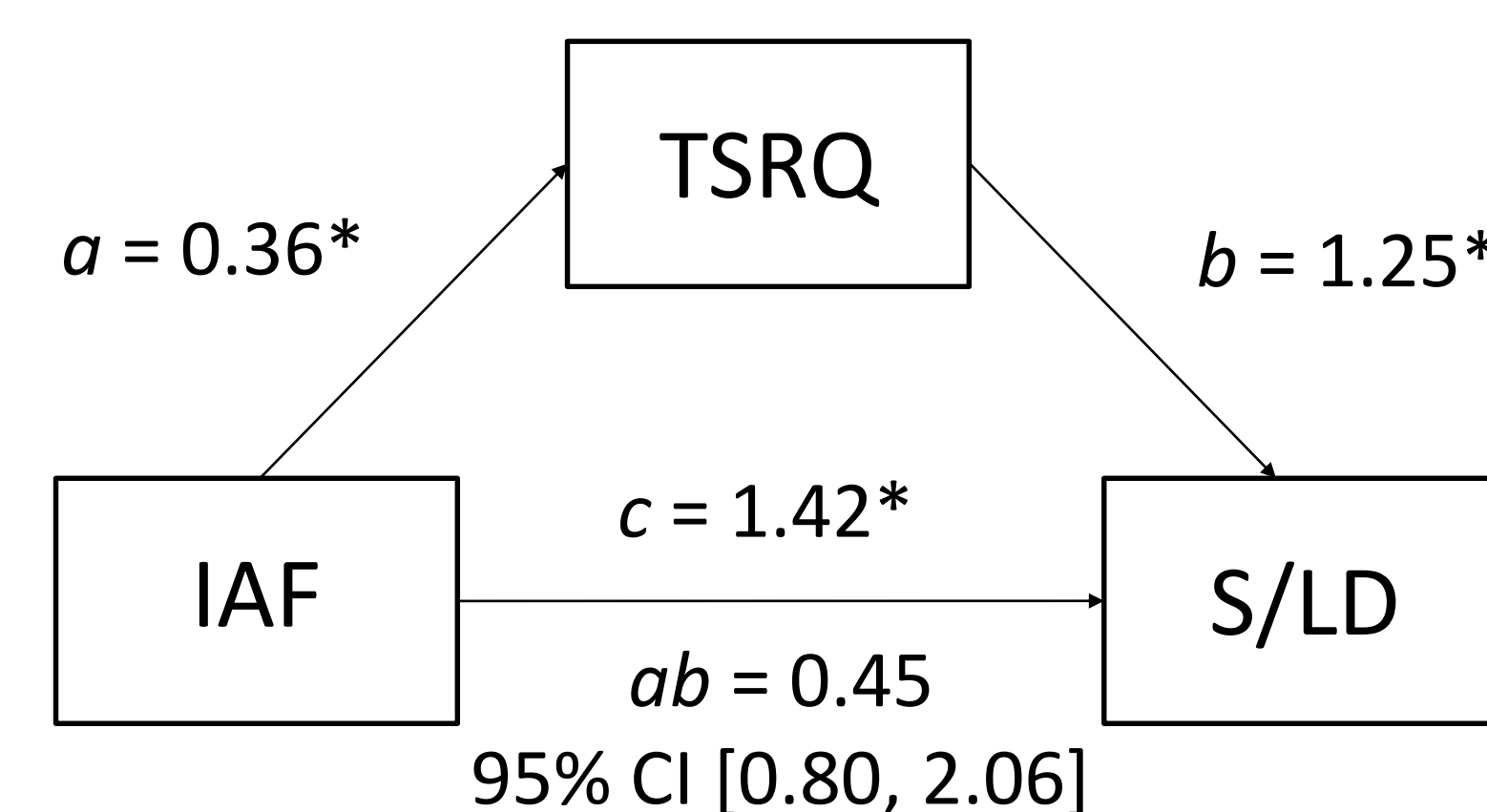
Results

Table 1. Means, standard deviations, Cronbach's alphas, and intercorrelations for all study variables.

	M	SD	1	2	3	4	5
1. IAF	5.36	1.38	(.87, .88, .78)	-	-	-	-
2. TSRQ	5.19	1.59	0.30*	(.91)	-	-	-
3. S/LD	26.99	7.89	0.34*	0.33*	(.81)	-	-
4. MOD	19.20	5.72	0.33*	0.35*	0.61*	(.78)	-
5. SHR	14.72	3.09	0.24*	0.16*	0.46*	0.30*	(.57)

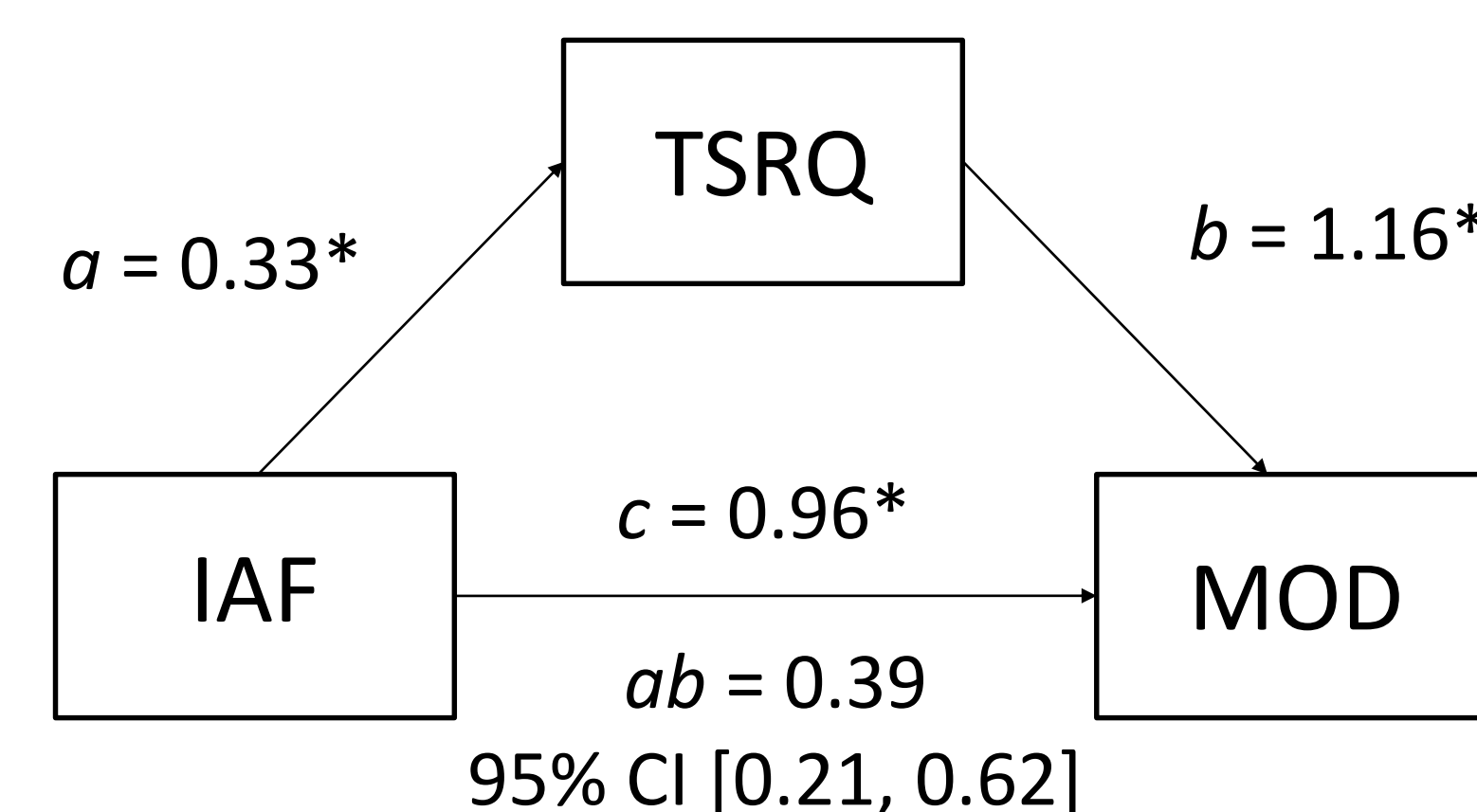
Note: * is $p < .01$

Figure 1. Indirect effect of dispositional autonomy on stopping/limiting drinking through autonomous motivation to control alcohol use.



Note: * is $p < .0001$

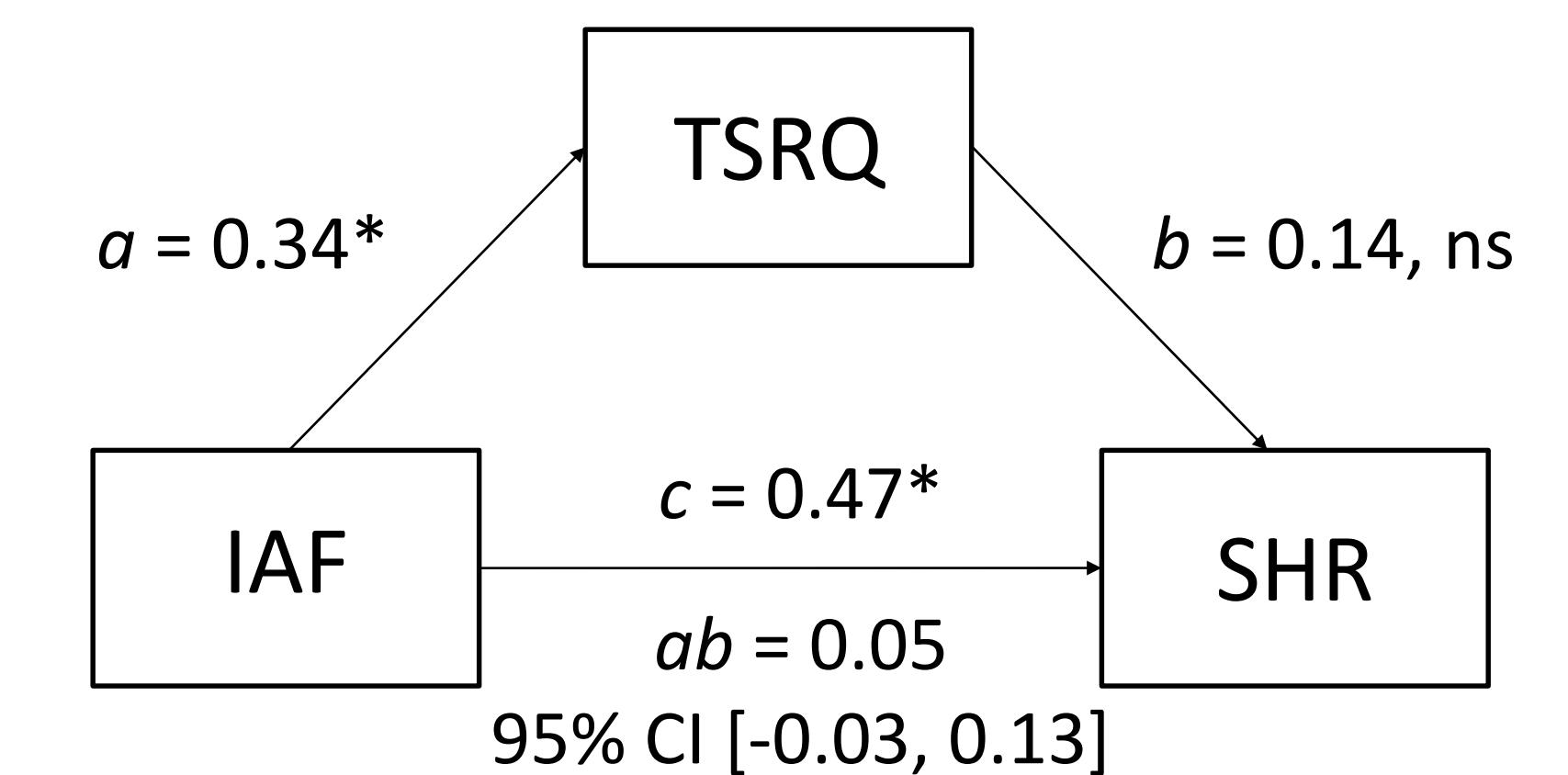
Figure 2. Indirect effect of dispositional autonomy on manner of drinking through autonomous motivation to control alcohol use.



Note: * is $p < .0001$

Results cont'd

Figure 3. Indirect effect of dispositional autonomy on serious harm reduction through autonomous motivation to control alcohol use.



Note: * is $p < .001$

Discussion

Generally, this study contributes to the limited understanding of the relationship between SDT postulates and alcohol use. Results support SDT such that higher levels of dispositional and context-specific autonomous motivation were related to more frequent engagement in alcohol-related protective strategies. Furthermore, the effects of dispositional autonomous motivation on stopping/limiting drinking and serious harm reduction were mediated by autonomous motivation to control alcohol use, providing support for Vallerand's (1997) hierarchical extension of SDT.

SDT offers an alternative model to describe the processes of change in drinking behavior following efficacious interventions. Specifically, SDT postulates that efficacious interventions result in increased autonomous motivation to abstain from or control alcohol use. The present study is one of the first to demonstrate the relationship between autonomous motivation and protective drinking behavior.

References

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