



Published in final edited form as:

*Addict Behav.* 2013 October ; 38(10): 2581–2585. doi:10.1016/j.addbeh.2013.06.004.

## Exploring relationships between facets of self-esteem and drinking behavior among diverse groups of young adults

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### Abstract

Theory and empirical evidence suggest that North American-based measures of self-esteem, which measure individualistic positive self-regard, may be less applicable to Eastern cultures. In the present exploratory study, we examined how different conceptualizations of self-esteem, as measured by the Rosenberg Self-esteem Scale and the Collective Self-esteem (CSE) Scale, predicted drinking behavior among three groups of American college students ( $N = 326$ ) with varying ethnicities: White, Korean, and Chinese/Taiwanese. Hierarchical negative binomial regression was employed to evaluate these relations and ethnic identity was controlled in all analyses. Findings indicated that while global self-esteem was positively associated with drinking for the whole sample, ethnicity moderated this relationship such that global self-esteem was related to drinking for White participants but not for their Chinese/Taiwanese counterparts. In addition, while CSE did not associate with drinking for the whole sample, effects emerged for specific ethnicities. Specifically, private CSE was associated with less drinking for Korean and Chinese/Taiwanese participants. Depending on specific Asian ethnicity, public CSE served as a risk (Korean participants) or a protective factor (Chinese/Taiwanese participants) for drinking. Findings suggest that above and beyond ethnic identity, differential relationships between facets of self-esteem and drinking behavior may exist among White, Korean, and Chinese/Taiwanese young adults. Intervention and prevention programs should develop strategies to help Chinese/Taiwanese- and Korean American young adults to cultivate protective factors within domains of CSE.

### Keywords

Collective self-esteem; self-esteem; alcohol use; young adults; Asian American

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Although White college students typically consume more alcohol than their Asian American (AA) counterparts (e.g., Larimer et al., 2009; Office of Applied Studies (OAS), 2008; Pascal et al., 2005), rates of alcohol use among AA young adults are rising (Grant et al., 2004; So & Wong, 2006; Wechsler et al., 1998). Some AA subgroups appear to be at a higher risk than others, with differential risk and protective factors depending on ethnicity (e.g., Chang, Shrake, & Rhee, 2008; Lum et al., 2009; OAS, Substance Abuse and Mental Health Services

Administration (SAMHSA), 2002). Since alcohol use and related problems are concerning for AA and White young adults, understanding risk and protective factors is an important priority.

Global self-esteem refers to the appraisal of one's self-worth. Findings regarding alcohol use and self-esteem are mixed in predominately White young adult samples, with some research suggesting a negative association (Brennan, Walfish, & Aubuchon, 1986; Gerrard, Gibbons, Reis-Bergan, & Russell, 2000; Glindemann, Geller, & Fortney, 1999) and others indicating a positive relationship; perhaps due to social satisfaction and status (Corbin, McNair, & Carter, 1996; Hsu & Reid, 2012). Research on alcohol and self-esteem among AAs is based on adolescents and has yielded equivocal findings (Hahm, Lahiff, & Guterman, 2003; Maddahian, Newcomb, & Bentler, 1988; Otsuki, 2003). Only one study has examined an Asian subgroup (i.e. Korean Americans) but found no significant association between global self-esteem and drinking (Nakashima & Wong, 2000).

It is possible that global self-esteem may have differential relationships with drinking across cultures because North American and East Asian cultures vary in their construal of *the self* (Markus & Kitayama, 1991; 2003). Based on social identity theory (Tajfel & Turner, 1979), a more interdependent view of self-regard within East Asian cultures is conceptualized as collective self-esteem (CSE; Luhtanen & Crocker, 1992). Whereas global self-esteem refers to how one views and evaluates the self as an individual, CSE refers to one's view of the self within the social identity one holds. Referring to one's racial/ethnic group, CSE contains four components: Membership CSE (i.e., judgment of one's worth as a member of their race/ethnicity), private CSE (i.e., evaluation of the worth of one's own race/ethnicity), public CSE (i.e., evaluation of how others view the worth of one's race/ethnicity), and importance to identity (i.e., how important being a member of one's race/ethnicity is to one's self-concept).

Limited research to date has examined CSE as a predictor of mental health (e.g., depression) (Crocker, Luhtanen, Blaine, & Broadnax, 1994; David, 2008; Kim & Omizo, 2005; Lam, 2007; Zhang, 2005) and health risk behavior (Pedersen, Hsu, Neighbors, & Larimer, 2013). Findings indicate that CSE has a stronger association with positive mental health and lower health risk behavior for ethnic minority groups than for Whites. For Whites who find themselves in the majority in most social contexts, collective aspects of the self may not be particularly relevant and may therefore not be associated with mental health (Crocker et al., 1994). For AAs, collective aspects of the self may be particularly relevant and therefore may be more strongly associated with mental health.

We are not aware of research that has examined the relationships between facets of self-esteem and alcohol use among White and AA young adults. To address this gap in the literature, our study examined how self-esteem and CSE predicted drinking behavior by comparing Korean American and Chinese/Taiwanese American young adults to White young adults. Based on empirical evidence, Korean Americans represent a heavier drinking AA subgroup while Chinese/Taiwanese Americans represent a lighter drinking subgroup (e.g., Hendershot et al., 2008; OAS, SAMHSA, 2002) with distinct ethnic drinking cultures (Cook, Mulia, & Karriker-Jaffe, 2012). Consistent with national surveys, Chinese and Taiwanese individuals were combined into one subgroup.

Ethnic identity refers to one's sense of belonging to their ethnic group (Phinney, 1990). It has been linked to higher global self-esteem among AA and White adolescents (e.g., Phinney, Cantu, & Kurtz, 1997) and is associated with substance use among ethnic minorities (e.g., Gong, Takeuchi, Agbayani-Siewert, & Tacata, 2003). To clarify the relationships between facets of self-esteem and drinking, we accounted for ethnic identity in

all analyses. It was hypothesized that White young adults would drink more than Korean and Chinese/Taiwanese young adults and that greater global self-esteem would be associated with more drinking among White young adults. Facets of CSE would be negatively associated with drinking among Chinese/Taiwanese and Korean young adults while these relations would be weaker or non-significant for White young adults.

## 2. Method

College students ( $N = 326$ ) from one four-year university completed anonymous surveys in psychology courses. Of the 179 students who identified as AA, 46 identified with Chinese/Taiwanese ethnicity and 28 with Korean ethnicity. Two hundred and fifty-two students identified as “White/Caucasian.” Participants reported a mean age of 19.24 years ( $SD = 2.18$ ) with 61% female. Most (89%) were freshman and sophomore. Approximately 80% of Chinese/Taiwanese and Korean participants and all White participants were at least second-generation.

Participants indicated how many drinks they typically consumed on each night of a week in the past month, using the Daily Drinking Questionnaire (DDQ; Collins, Parks, & Marlatt, 1985). A drinks-per-week variable was computed by summing typical drinks consumed during each day of the week. The six-item Multigroup Ethnic Identity Measure– Revised (MEIM-R; Phinney & Ong, 2007) was also used. Each item (e.g., “I have a strong sense of belonging to my own ethnic group”) was rated from 1 (strongly disagree) to 5 (strongly agree),  $\alpha = 0.89$ .

The Rosenberg Self-esteem Scale was used to assess global self-esteem (Rosenberg, 1965). Ten items were rated from 0 (strongly disagree) to 3 (strongly agree),  $\alpha = 0.88$ . The Collective Self-esteem Scale (Luhtanen & Crocker, 1992) was used to assess the value participants placed on being a member of their ethnic group. Sixteen items were rated from 1 (strongly disagree) to 7 (strongly agree). Factors included membership CSE (e.g., I am a worthy member of my race/ethnic group), private CSE (e.g., I feel good about the race/ethnicity I belong to), public CSE (e.g., Overall, my racial/ethnic group is considered good by others), and importance to identity (e.g., The racial/ethnic group I belong to is an important reflection of who I am.). This scale has demonstrated adequate reliability in this ( $\alpha$ 's ranged from 0.78 to 0.88) and other studies (Crocker et al., 1994; David, 2008; Luhtanen & Crocker, 1992).

### 2.3 Analytic plan

Hypotheses for drinks per week outcome were evaluated using negative binomial hierarchical regression (Hilbe, 2008) in three steps. Step 1 consisted of ethnicity (dummy coded White-Korean and White-Chinese/Taiwanese contrasts), ethnic identity, global self-esteem, and CSE factors. Step 2 was designed to test whether the association between global self-esteem and drinking varied across ethnicities, with two-way product terms between the dummy-coded ethnicity variables and global self-esteem. Step 3 was designed to test whether the association between CSE and drinking varied across ethnicities, after accounting for the interactions with global self-esteem, with two-way products between the two dummy coded ethnicity variables and the four CSE factors.

## 3. Results

On Step 1, Whites drank more than Koreans and Chinese/Taiwanese, and global self-esteem was positively associated with drinking. None of the CSE facets had unique associations with drinks per week after controlling for ethnic identity. Results at Step 2 revealed a two-way interaction between the Chinese/Taiwanese-White contrast and global self-esteem but

not between the Korean-White contrast and global self-esteem. For Whites, greater global self-esteem was associated with increased drinking (simple slope  $e^{\beta} = 1.05$ ,  $p = .001$ ), while the simple slope for Chinese/Taiwanese was not significant,  $e^{\beta} = 0.95$ ,  $p = 0.40$ .

Results at Step 3 revealed higher private CSE associated with non-significant increased drinking for Whites ( $e^{\beta} = 1.03$ ,  $p = 0.24$ ), while it associated with significantly decreased drinking for Koreans ( $e^{\beta} = 0.67$ ,  $p = .003$ ) and marginally significant decreased drinking for Chinese/Taiwanese ( $e^{\beta} = 0.91$ ,  $p = 0.11$ ) (Figure 3, right). There were significant interactions between the Korean-White contrast and public CSE and between the Chinese/Taiwanese-White contrast and public CSE (Figure 3, left). The relationship between public CSE and drinking among Whites was not significant ( $e^{\beta} = 1.02$ ,  $p = 0.37$ ), the simple slope for Koreans was positive ( $e^{\beta} = 1.95$ ,  $p = .001$ ), and the relationship between public CSE and drinking for Chinese/Taiwanese was negative ( $e^{\beta} = 0.89$ ,  $p < .05$ ).

## 4. Discussion

AA students reported less drinking than White students and global self-esteem was positively related to drinking only for White students. In the college context, general positive feelings about oneself may place one in more social situations where drinking may be viewed favorably and is more normative among White students (Gerrard et al., 2000; Schaefer et al., 1976). There was no overall effect of CSE on drinking for all students. However, AA participants who evaluated their ethnic group as highly favorable (i.e. private CSE) drank less, while this relationship was not significant for Whites. The findings for public CSE varied according to Asian subgroup. While the relationship between public CSE and drinking was not significant for White participants, Chinese/Taiwanese participants who believed that others viewed their ethnic group more favorably drank less. A non-hypothesized finding revealed Korean participants who believed that others viewed their ethnic group more favorably drank more. This may be explained by cultural practice regarding drinking. Heavy drinking is socially acceptable in Korean culture (Helzer et al., 1990; Weatherspoon, Park, & Johnson, 2001), and Korea has higher per capita annual alcohol consumption than other Asian countries and U.S. (World Health Organization, 2004). Per capita drinking rates in one's ethnic home country are positively associated with drinking rates among AA adults (Cook et al., 2012). Thus, Korean participants' public CSE may be contingent upon their ability to "handle their alcohol." Contrary to hypotheses, there was no significant interaction between the contrasts (i.e. Korean-White and Chinese/Taiwanese-White) and membership self-esteem or importance to identity in predicting drinking. In the absence of theoretical and empirical evidence, these findings are difficult to interpret. Future research should seek to replicate these findings in a larger sample of AA young adults.

### 4.1 Limitations

Gender effects were not examined because this approach would have reduced the sample size dramatically and thus limited power. It is uncertain the degree to which we could extend these findings to young adults not attending college. We conceptualized participants as homogeneous groups and inevitably there may have been some within-group differences based on specific nationality. Furthermore, additional variables (e.g., acculturation) that were not included in this study could increase our ability to interpret findings. Finally, data were cross-sectional and causal relationships cannot be inferred from these findings.

### 4.2 Future directions and implications

The current study offers preliminary evidence for the protective effects of some domains of CSE for Chinese/Taiwanese and Korean young adults. CSE and ethnic pride may work in

similar ways to enhance health among ethnic minorities (Constantine & Sue, 2006). Ethnic pride is associated with less substance use among ethnic minority adolescents and young adults (e.g., Iwamoto, Takamatum & Castellanos, 2012; Wills et al., 2007). Based on findings in this and other studies, intervention and prevention programs should help Chinese/Taiwanese and Korean American young adults cultivate private CSE.

Findings suggest that for Korean American young adults, fostering a sense of high public CSE that is not contingent upon drinking may be important. Basing self-esteem on external qualities (e.g., appearance, performance) is associated with more alcohol use (Luhtanen & Crocker, 2005). The same could be said for basing one's public CSE on ability to consume alcohol. The solution may be to help young adults shift the contingencies to internal qualities (e.g., virtue) (Crocker, 2002). This can be accomplished by integrating a discussion of contingencies of CSE to evidence-based interventions, such as Brief Alcohol Screening and Intervention for College Students (Dimeff, Baer, Kivlahan, & Marlatt, 1999).

This study serves as the initial step in exploring the relationships between facets of self-esteem and drinking among AAs. It suggests that relationships between drinking and facets of self-esteem may vary depending on race and ethnicity, underscoring the importance of cross-cultural and cultural considerations in alcohol research with young adults.

## Acknowledgments

Manuscript preparation was supported by a National Research Service Award (F31AA018591) awarded to Eric R. Pedersen from the National Institute of Alcohol Abuse and Alcoholism (NIAAA), by a National Research Service Award (F31AA019608) awarded to Sharon Hsin Hsu from the NIAAA, and by a National Research Service Award (F31AA021051) award to Andrew P. Paves from the NIAAA.

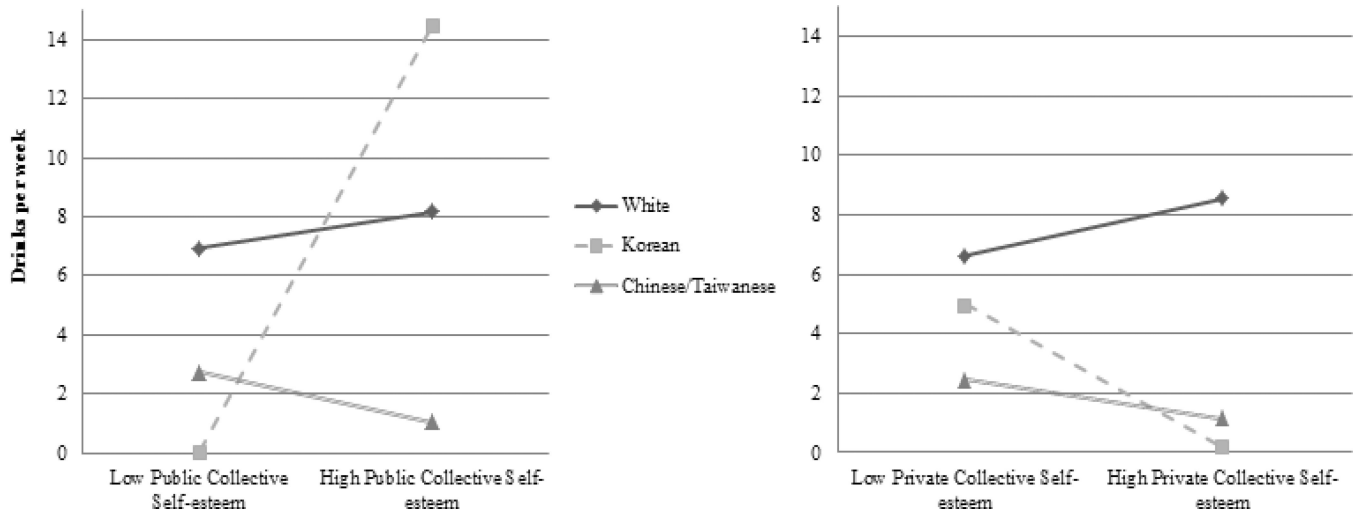
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**Figure 1.** Association between CSE factors and the White- Chinese/Taiwanese and White- Korean contrasts.



**Table 1**

Negative binomial regression analyses predicting drinks per week outcome

	<b>B</b>	<b>Standard Error</b>	<b>Wald Chi-Square</b>	<b>p</b>
<b>Step 1</b>				
Korean	-0.72	0.26	7.89	0.005
Chinese/Taiwanese	-0.97	0.21	20.94	0.000
Multigroup Ethnic Identity Measure- Revised	-0.01	0.02	0.12	0.727
Global Self-esteem	0.03	0.01	5.11	0.024
Membership self-esteem	-0.03	0.02	2.38	0.123
Private CSE	-0.01	0.02	0.08	0.777
Public CSE	0.02	0.02	1.51	0.219
Importance of Identity	0.02	0.01	2.35	0.126
<b>Step 2</b>				
Korean-White × Global Self-esteem	-0.04	0.05	0.73	0.394
Chinese/Taiwanese-White × Global Self-esteem	-0.09	0.04	6.57	0.010
<b>Step 3</b>				
Korean-White × Membership CSE	0.07	0.11	0.42	0.517
Korean-White × Private CSE	-0.43	0.14	10.15	0.001
Korean-White × Public CSE	0.65	0.16	16.16	0.000
Korean-White × Importance of Identity	0.05	0.11	0.21	0.646
Chinese/Taiwanese -White × Membership CSE	0.01	0.07	0.00	1.000
Chinese/Taiwanese -White × Private CSE	-0.12	0.06	3.80	0.050
Chinese/Taiwanese-White × Public CSE	-0.14	0.06	5.58	0.018
Chinese/Taiwanese-White × Importance of Identity	0.05	0.06	0.51	0.474

Note: Korean (1 = Korean, 0 = White), Chinese/Taiwanese (1 = Chinese/Taiwanese, 0 = White)