

2015

A Program Designed to Address Academic Failure due to Alcohol Abuse

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Walden University

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Frank Plateroti

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Walden University
2015

A Program Designed to Address Academic Failure due to Alcohol Abuse

by

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MA, William Paterson University, 1983

BS, Fairleigh Dickinson University, 1974

Doctoral Study Submitted in Partial Fulfillment

of the Requirements for the Degree of

Doctor of Education

Walden University

May 2015

Abstract

This project study addressed the problem of alcohol and binge drinking at a local rural college campus in the Northeast United States and the lack of an effective long-term academic intervention program to address the problem. The purpose of this research study was to determine the prevalence of the problem of the alcohol abuse problem and to develop a long-term program that would respond to the problem of repeat alcohol offenders. Guided by Mezirow's transformative learning theory, which holds that transformational learning causes changes in a learner that significantly shift the pattern of a learner's future experiences, this study examined the awareness by participants of the prevalence of alcohol abuse on the college campus and explored alcohol intervention programs. A qualitative, instrumental case study research design was used and involved interviews with 6 key professional stakeholders and 5 students. Interview transcripts were color coded and thematically analyzed. The themes that developed from the interviews revealed discrepant perspectives regarding the prevalence of the problem, and the discovery that no long-term intervention is available to students who are repeat offenders. The analysis of the data revealed the need for an increased awareness of the problem, as well as the development of a long-term program that contained an academic curriculum that addressed the problem of alcohol abuse and binge drinking for the repeat offender. This project study has the potential to revise to alcohol abuse programs and may spawn an awareness of the problem of heavy alcohol consumption. Student participation in the long-term program may offer greater student academic success and the avoidance of academic expulsion, thereby creating an important social change for those students who are repeat alcohol offenders.

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Dedication

I dedicate this work first to my late parents. To my father who always told me to be creative and think big, and to my mother who encouraged me before her death to earn my doctorate. With equal gratitude I dedicate this work to my children Catherine and Ryan, as well as my godson Nicholas who were sometimes the recipient of my anxiety and who had to deal with my often frustration, while accepting the sacrifice of the times when I had to focus on studying, writing and meeting deadlines. My gratitude also goes to my dear and close friend Dr. John Mully who helped me in many ways to achieve my goal and whose encouragement and belief in myself made quitting not an option. It is through their inspiration and belief in me that got me through some lonely and frustrating times, which helped me discover some talents and abilities I would have otherwise never realized. I also dedicate this work to my university students who may benefit from this work, and in a small way will allow me to make a difference in their lives. I love you all and dedicate this work to all of you.

Acknowledgments

I first want to acknowledge my family who gave me the inspiration, patience, understanding, and love that inspired me to complete my work. I also want to acknowledge someone who was my guide and who helped me over some of many the rough times. Someone who dedicated a lot of time to provide the feedback that allowed me to move at a faster pace. Someone who also believed in my work and the ability to complete my doctorate: Dr. Billie Andersson. It is with gratitude that I acknowledge someone who helped me while he was going through some difficult times himself, Dr. Ramo Lord. I want to thank Dr. Cathryrn White for her diligence in reviewing my paper in preparation for its final approval. Gratitude and acknowledgments also goes to all the professional staff and students who gave of their time to share their perspectives and knowledge that was an important contributing factor that made this work possible. And lastly, but certainly not least, I want to acknowledge the thousands of my university students who allowed me to inspire them to believe in themselves, which in turn allowed me to believe in myself. I thank you all.

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Section 1

Introduction

A Centers for Disease and Control Prevention (CDC) report found that “excessive alcohol abuse and binge drinking is the third leading preventable cause of death in the United States” (Kanney, Thompson, Okoro, Town, & Balluz, 2011, p.1). Wechsler and Nelson (2008) found that colleges and universities respond to the problem of alcohol abuse through educational programs that make students aware of the dangerous and life-threatening consequences of alcohol abuse and the possible influence alcohol abuse has on the college life environment, and potential academic failure (Lamis, Malone, Langhinrichsen-Rohling, & Ellis, 2010). As Wechsler and Nelson (2008) had found nationally, the local colleges and universities in the Northeast of the United States are actively addressing the problem of binge drinking specifically with educational flyers, lectures, video presentations, and mandatory interactive computer programs. The problem of alcohol abuse and binge drinking is not related to a single reason and White and Swartzwelder (2009) and other researchers found that the problem often starts with incoming 18-year-old college and university freshmen that bring previously formed unhealthy drinking habits with them when they enter college or university (Cleveland, Lanza, Ray, Turrisi, & Mallett, 2011; Hustad, Pearson, Neighbors, & Borsari, 2014; Kanney, Hummer, & LaBrie, 2010; Patrick, Schulenberg, Martz & Maggs, 2014; Turrisi & Ray, 2009).

For those students who do not have an existing alcohol problem, the transitioning to a college environment can create anxiety and depression and may result in alcohol-related problems that require more proactive effective alcohol abuse educational programs (Reynolds, MacPherson, Tull, Baruch, & Lejuez, 2011). Researchers found that colleges and universities are well aware of the problem and have implemented alcohol abuse educational awareness, policies, codes of conduct, and mandatory computer interactive programs such as AlcoholEdu. (Lovecchio, Wyatt, & DeJong, 2010; New Jersey State Epidemiological Profile Substance Abuse, 2008; Wodarski, Macmaster, & Miller, 2012; Ziegler-Hill, Madson & Ricedorf, 2012). In spite of these efforts the heavy drinking and alcohol abuse is still prevalent, (Lovecchio, Wyatt, & DeJong, 2010; New Jersey State Epidemiological Profile Substance Abuse, 2008; Wodarski, Macmaster, & Miller, 2012; Ziegler-Hill, Madson & Ricedorf, 2012) and locally the problem of alcohol abuse for 18 to 25 year olds is exceeding the national levels (New Jersey State Epidemiological Profile Substance Abuse, 2008). Locally the problem of alcohol abuse is further evidenced by the death of a 19-year old honor roll freshman at a Northeastern United States college student who was found unresponsive with the cause of death being attributed to alcohol abuse by witnesses and the death is still under investigation (Knezevich, 2014).

At a local rural college in the Northeast United States (referred to as Acme College hereafter) there is no “long-term on-campus” alcohol abuse education program to address the problem. Although Acme College has an alcohol abuse policy and a student

code of conduct in place, there are still students who continually commit alcohol and binge drinking infractions. Students who are charged with the alleged alcohol abuse violations are referred by a designee of the vice president of student development to either the judicial or counseling centers. And depending on the infraction, students may be referred to both the judicial and counseling centers.

For those students who are found to have violated the alcohol code of conduct the process may include an evaluation by a counselor who may refer the student to an “off-campus” agency. Students who commit more serious alcohol abuse infractions are subject to the judicial process. Judicial sanctions range from official warning to expulsion, and depending on the infraction, students may also be accountable to both the judicial process and local law enforcement. Students who go through the judicial process may also be referred out to an off-campus outside agency. Students who live on-campus and have very serious alcohol abuse problem are housed in an alcohol-prohibited dorm and are constantly monitored. In spite of all these efforts there is no long-term on-campus alcohol academic education program to address the problem.

George Koob, a director at the National Institutes of Health (NIH), found that drinking in colleges and universities is increasing, as well as the number of those being hospitalized. Koob calls for colleges to do more to tackle the problem (Sherman, 2014). While national and local colleges and universities have implemented educational awareness programs and policies, and mandatory computer interactive programs such as AlcoholEdu, the heavy drinking and alcohol abuse continues (Lovecchio, Wyatt, &

DeJong, 2010; Wodarski, Macmaster, & Miller, 2012; Ziegler-Hill, Madson, & Ricedorf, 2012). The outcome of this project study may be a new awareness of the problem at Acme College and the development of an on-campus long-term alcohol abuse program that contains an academic curriculum that builds self-esteem, which may decrease alcohol abuse by repeat offenders whose personal health, and successful academic performance are at risk.

Definition of the Problem

Acme College, locally located in the Northeast of the United States, has no effective academic long-term intervention program in place to curb and stop alcohol abuse and binge drinking. It is clear from the literature that additional resources are needed for those students who are repeat offenders and who have not benefited from the alcohol online computer courses, traditional alcohol abuse programs, or community coalitions aimed to reduce high-risk drinking (CDC, 2014; Carey, DeMartini, Prince, Luteran, & Carey, 2013; Linowski & Di Fulvio, 2012; Maggs, Williams, & Lee, 2011).

To identify and determine the prevalence of alcohol abuse at Acme College, and if an on-campus long-term program was in place to address the problem, there were discussions with some of the professional stakeholders of Acme College, which consisted of the vice president of student development, a department chairperson, and a professor. The vice president of student development stated the problem of alcohol abuse and binge drinking exists and is being addressed with alcohol abuse policies, a student code of conduct, and a mandatory interactive computer program for incoming freshmen. Serious

infractions were “outsourced” to the appropriate “off-campus” agencies. (personal communication, February 13, 2012).

A discussion with a department chairperson revealed that she was not “specifically” aware of the problem of alcohol abuse and any short-term or long-term alcohol intervention programs that are available to students. She was aware of some articles in the school paper about binge drinking, but was not sure when they were published. There may be an indifference due to being unaware of the prevalence of the problem (personal communication, April 25, 2012). And when the problem was discussed with a professor, he felt there might be a problem due to poor academic performances but did not want to acknowledge the problem with any students even though there were suspicions of alcohol abuse. Any heavy drinking was seen as part of the college life (personal communication, February 25, 2013). These discussions revealed that there are differing degrees of awareness of the problem. There was also the underlining attitude that heavy drinking, especially with incoming freshmen, is part of the college experience. These differing degrees of unawareness and attitudes may be a contributing factor to the problem, since according to the local Acme College counselor, the most recent figures illustrate a 17% recidivism rate from 2013 to 2014 of students who continually committed alcohol abuse infractions (personal communication, March 9, 2015).

Although Acme College is addressing the problem with a mandatory alcohol awareness interactive computer program, such as Alcohol.edu, which may be effective

for some students, researchers have found that face-to-face interventions provide better and more enduring effects (Carey, Scott-Sheldon, Elliott, Garey, & Carey, 2010). If the findings from the study determine there is a prevalence of alcohol abuse at Acme College there may be need to address the problem. The development of an on-long-term program that contains an alcohol abuse academic education curriculum may provide Acme College administrators and counselors with a more effective and enduring resource to address the continual alcohol abusers, and a possible reduction in the recidivism rate of students who continually committed alcohol abuse infractions.

Rationale

Evidence of the Problem at the Local Level

The problem of alcohol abuse among the 18 to 25 year-old population in New Jersey is exceeding the national level (New Jersey State Epidemiological Profile Substance Abuse 2008). To determine if the problem exists locally at Acme College, some informal discussions provided evidence that the problem exists and the type of alcohol abuse interventions that are available to students. The vice president of student development at Acme College stated that the problem exists and is being addressed by short-term educational programs with short-term counseling. A mandatory interactive computer program (AlcoholEdu) is online for incoming freshmen. A judicial officer enforces alcohol abuse rules and regulations. Counseling is available for evaluation and short-term counseling. Students with a serious drinking problem are referred an off-campus agency. The vice president of student development also stated that there is a

special dorm for those students that have more serious chronic problem with alcohol abuse and their behavior is monitored. The vice president of student development showed a preliminary interest in the development of an on-campus long-term program that contains an alcohol abuse academic education curriculum, but had a concern of how it would be implemented (personal communication, February 13, 2012).

A chairperson stated the extent of her awareness was through informal conversations with students but she was not aware of the prevalence of the problem. She was also not aware of any programs that specifically addressed binge drinking, but if the rules are broken, for example with underage drinking, the student should be turned over to outside law enforcement. The chairperson had a general interest to an on-campus long-term program that contains an alcohol abuse academic education curriculum even if it just helped a few students (personal communication, April 25, 2013).

A professor stated he was not aware of the problem or of any alcohol abuse interventions. The professor stated that he did not think he would approach a student if there even were a suspicion of any problem regarding alcohol abuse. The professor said he was torn whether or not he would help a student if he really knew a student had an alcohol problem. The professor was not totally familiar with any alcohol abuse policies or the student code of conduct (personal communication, September 10, 2013). These initial discussions provided evidence that the problem should be explored further and there should be more of an effort for alcohol abuse awareness, available resources to help students, and the best referral process. There was a general consensus of interest with the

development of an on-campus long-term program that contains an alcohol abuse academic education curriculum (personal communication, 2013).

Evidence of the Problem from the Professional Literature

The United States Department of Education funded a survey from 2010 regarding the perceptions among college students at two and four year institutions. According to the survey (2010), “91.3% consumed alcohol in the past year, 81.3% of students consumed alcohol in the past 30 days, and 61% of students reported binge drinking in the previous two weeks with binge drinking defined as 5 or more drinks per binge” (Core Alcohol and Drug Survey, 2010, p.1). The Centers for Disease Control (CDC, 2012) found that binge drinking was highest among 18 to 24 year olds with 4.4 episodes of binge drinking per month, and 7.9 drinks at one occasion. Recent data illustrates that alcohol abuse and binge drinking continues to be on the rise on a national level (Maggs et al., 2011; Velazquez et al., 2011) and locally in New Jersey the increase of alcohol abuse is exceeding the national level (New Jersey State Epidemiological Profile Substance Abuse 2008).

The Centers for Disease Control (CDC, 2012) found that binge drinking was highest among 18 to 24 year olds with 4.4 episodes of binge drinking per month, and 7.9 drinks at one occasion. Recent data illustrates that alcohol abuse and binge drinking continues to be on the rise on a national level (Maggs et al., 2011; Velazquez et al., 2011) and in New Jersey, the increase of alcohol abuse is exceeding the national level (New Jersey State Epidemiological Profile Substance Abuse 2008).

The problem of alcohol abuse and binge drinking for many college freshmen students begins in high school and they bring their drinking problem with them upon entering college or university (Shannon, Hummer, & La Brie, 2010; White & Swartzwelder, 2009). Although social norms are a good predictor of alcohol consumption, drinking in order to cope with stress is a better predictor of the problem (Hustad et al., 2014; Gonzalez, Bradizza, & Collins, 2009; Neighbors et al., 2011). In 2008, Wechsler and Nelson conducted a College Alcohol Study (CAS) for Harvard School of Public Health conducted a College Alcohol Study (CAS), which focused on the college students' alcohol consumption and the higher learning environment that promotes college drinking. The researchers in this 2008 study surveyed students from a nationally representative sample of "more than 100, four-year colleges in the United States" (Wechsler & Nelson, 2008, p. 4). Wechsler and Nelson (2008) found that alcohol consumption at or beyond binge drinking has a "significant impact on college students' academic performance, social life, and dangerous behaviors, such as; risky sexual behavior, unplanned sexual activity, unprotected sex, anti-social behavior, vandalism and, getting into trouble with the law" (Wechsler & Nelson, 2008, p. 3).

There is the evidence that the problem of alcohol abuse and binge drinking is not only a serious national problem but the problem locally is exceeding the national level. Though personal communications indicates there is a general consensus of the problem, there is a varying degree of awareness of the problem among the stakeholders. The local problem at Acme College should be explored further to help determine if there should be

more of an effort of alcohol abuse awareness and if additional resources are needed to address the problem.

Definitions

Binge Drinking: A binge is 7.9 drinks at one occasion (CDC, 2012).

Self-esteem: In the context of this research project self-esteem is defined as, “confidence in our ability to think, confidence in our ability to cope with the challenges of life, and the confidence in our right to be successful and happy” (Branden, 1995, p. 4).

Energy Drinks (AmEDs): Alcohol and energy drink “cocktails” allows the drinker to consume more alcohol faster by overriding the important interceptive cues to stop drinking and allows the user to feel drunk faster and to drink more before drowsiness or blackouts. This increases the risks for injuries, accidents and physiological effects of alcohol poisoning (Herschl, McChargue, Mackillop, Stoltenberg, & Highland, 2012; Marczinski, 2011; Marczinski, Fillmore, & Bardgett, (2011).

Contingent self-esteem: An individual’s self-worth is strongly determined by whether that individual meets their goals and standards (Ziegler-Hill et al., 2012).

Noncontingent high self-esteem: An individual’s self-worth is not strongly determined by whether that individual meets their goals and standards (Ziegler-Hill et al., 2012).

Significance of the Study

Alcohol abuse and binge drinking can result in depression, difficulty with interpersonal relationships, fighting, unplanned and unprotected sexual activity, unplanned pregnancy, poor academic performance and expulsion, and in the worst case life threatening situations, accidental deaths, and suicide (Ceperich & Ingersoll, 2011; Dillard, Midboe, & Klein, 2009; Drum, Brownson, Denmark, & Smith, 2009; Hicks & Heastie, 2008; Johnson et al., 2010; Goldsmith et al., 2009; Gonzalez et al., 2011; Gonzalez, 2012). Locally, Acme College is addressing the problem of student's alcohol abuse with short-term awareness programs. However, for the heavy drinker and continual abuser there is no on-campus long-term programs in place. It is hoped that this project study may spawn a new awareness of the problem and the need for an on-campus long-term program that contains an alcohol abuse academic education curriculum, which may address the problem and in turn may curb or stop students' alcohol abuse.

Guiding Research Question

The initial review of the literature and informal discussions with stakeholders at local Acme College helped guide the research questions for this study. In spite of the problem of the continual abuser and with a 17% recidivism rate, Acme College does not have an on-campus long-term alcohol abuse program. Instead, the continual abuser is referred to off-campus agencies, which may put the continual abusing student's successful academic performance at risk, and the possibility of eventual expulsion. Initial discussions with stakeholders determined that there is the further need for investigation

regarding the prevalence of alcohol abuse and binge drinking, and the possible necessity for an effective on-campus long-term program that contains an alcohol abuse academic education curriculum:

The following research questions were used to investigate the nature of the problem and guide the study:

- How prevalent is alcohol abuse and binge drinking among Acme College students?
- What do Acme College administrators, professors, advisors, counselors, and students see as possible motivating forces for alcohol abuse and binge drinking?
- What is the perception of the prevalence of the problem as seen by the professional stakeholders and the students, and is there a difference between the two groups?
- What short and long-term on-campus alcohol abuse academic interventions are available?
- Can an on-campus long-term academic alcohol abuse program that contains a curriculum that integrates positive self-esteem help curb or stop alcohol abuse?

Review of the Literature

This literature review presents research related to the prevalence of alcohol abuse and binge drinking by university and college students. The study objectives for the

research and literature review will help the reader understand the historical roots of college and university alcohol abuse and the motivations of the problem and how the problem is being addressed on a national and local level. The interest of conducting this project study is the prevalence of alcohol abuse and binge drinking on the local Acme College campus and the absence of an on-campus long-term academic educational alcohol abuse program.

Theoretical Framework

Mezirow's transformational learning theory was used in this study as it attempts to explain the "habit of mind, point of view, and perceptions of people" (Mezirow, 1997, p. 5). The habit of mind is a set of generalized broad assumptions and predispositions that are used to interpret the meaning of our experiences. The point of view is made up of schemes, which are "sets of immediate specific beliefs, feelings, attitudes, and judgments" (Mezirow, 1997, p. 5). Habit of mind is harder to change than point of view because habit of mind is based on moral and ethical beliefs, philosophical, psychological, and general predispositions. Point of view is more easily changed because we are more aware of our point of view and receives feedback (Mezirow, 1997).

Mezirow's transformational learning theory is made up of four main components (Merriam, Caffarella, & Baumgartner, 2007): a. centrality of experience (making sense of our experiences); b. process of critical reflection (critical self-examination of our assumptions and beliefs); c. reflective discourse (rational and objective discussions and arguments); and d. action (the result of the transformational learning). It is through

critical self-reflection of assumptions, however, which allows for open discourse to allow a “perspective transformation” (Merriam et al., 2007; Taylor, 1998) or a transformational learning experience. The transformational learning is achieved when experience and critical reflection are combined with insight and supporting evidence to allow objective and rational discourse (Taylor, 2007). When there is a perspective transformation through transformational learning (action), one of an individual’s beliefs or attitudes “(point of view)” (Mezirow, 1997, p. 5) or the transformation of an entire perspective “(habit of mind)” (1997, p. 5) is changed (Mezirow, 1997).

The review of the literature illustrates that there is an established habit of mind and point of view that seems to perpetuate the prevalence, of not only of the problem, but the way the problem is being addressed. Utilizing the transformational learning framework when examining the local problem guided the direction of this project study. Dietz and Rogers (2012) stated that transformative research is motivated by concepts that challenge the status quo. The local problem was seen through the lens of the transformational learning framework to explore the status quo of the local problem. The research questions used in this project study were developed to explore “habit of mind and point of view” (Mezirow, 1997, p. 5) of the local problem and how the local problem is being addressed. It is through the utilization of Mezirow’s transformational learning framework theory that may provide an important transformational learning experience for individuals through this study project, which may in turn create social change.

Search Terms and Databases

Research strategies utilized during the gathering of the literature review include investigation search strategy that included the following electronic databases: Education from Sage(online.sagepub.com), Educational Resource Information Center (ERIC) (eric.ed.gov), PsycINFO, PsycARTICLES (psychnet.apa.org/), Google Scholar (scholar.google.com/), PubMed (www.ncbi.nih.gov/p), and SAGE Premier (www.sagepub.com/librarians/premier.sp), Accident Analysis and Prevention (www.journals.elesevier.com/accident-analysis), Journal of Higher Education (www.ashe.ws?page-186), Centers for Disease Control (CDC) (www.cdc.gov/), Journal of Drug Education (www.baywood.com/journals/previewjournals), Journal of American College Student Health (www.acha.org), Journal Study of Alcohol (www.collegedrinkingprevention.gov/), Psychology of Addictive Behavior (www.apa.org/pubs/journals/adb/), Journal of Personality and Social Psychology (www.apa.org/pubs/journals/psp), Harvard University (www.harvard.edu/), National Institutes of Health (NIH) (www.nih.gov/), National Association of Self-Esteem (NASE) (www.self-esteem-nase.org). Searches included keywords: addiction, college students and alcohol abuse and binge drinking, college alcohol abuse educational programs, interactive alcohol abuse educational computer programs, alcohol abuse and fraternities and sororities, New Jersey statistics of college and university binge drinking, self-esteem and depression, self-esteem and education, self-esteem and binge drinking, contingent and noncontingent self-esteem, high school alcohol abuse and the college freshmen,

history of American College alcohol abuse, college student alcohol abuse fatalities, transformative learning and alcohol abuse.

Alcohol use on the first American college campuses

Since colonial times in America, colleges and universities have been dealing with the problem of alcohol abuse. In the early and mid-1800s taverns were the meeting places where most of the socializing took place and where college and university students could drink and be treated like “grown men” (Dietz, 2008; Hevel, 2011). Students would split their time between drinking in their rooms and drinking in the nearby taverns to help cope with their heavily regulated campus life (Hevel, 2011). During this time every recreational activity or celebration was accompanied by alcohol, which was encouraged by some students’ parents who even provided the alcohol (Hevel, 2011). Heavy drinking was especially prevalent with the freshman students who were overwhelmed with the anxiety of college life, the regulations, and the academic pressures to succeed. Concurrently, the upper classmen would consider drinking until “drunk” as an immature and low class behavior that was discouraged, yet drinking till drunk considered immature and low class didn’t discourage the excesses drinking that still took place on-campus or off-campus (Hevel, 2011).

Drinking in colleges and universities was also influenced by *college novels*, which are fictional accounts of college life and trace the academic career of college students and their exploits with friends, professors, administrators, and love interests, with the main character who is often under the influence of alcohol (Hevel, 2011). Some examples of

college novels are *Tom Brown at Oxford* in (Hughes, 1862) and *The Diary of a Freshman* (Flandrau, 1912). The trend of drinking alcohol as part of college and university experience continued through the beginning of the twentieth century. The epitome of college novels, Fitzgerald's *This Side of Paradise* published in 1920, coincided with the beginning of the enactment of the 18th Amendment of the Constitution, The Volstead Act or National Prohibition (Constitution of the United States, 1933).

Prohibition and the jazz age

Prohibition had an immense impact on romanticizing college drinking and gave birth to the *Jazz Age*, cheap bootleg liquor, and the crime associated with the making and selling of illegal alcohol (Anderson & Thelin, 2009; Hevel, 2011). An example of the heavy drinking jazz age college student is the main character in *This Side of Paradise*, Amory Blaine who is the personification of the roaring twenties college student who is traced through the novel as a spoiled and lazy country club young man searching for a college identity. Confusing arrogance with confidence Amory turns to liquor to help him cope with his frustrations. At one point in the novel, disappointed with his life and rejected by his love interest, Amory goes through a three week drinking binge (Fitzgerald, 1920). This is an early example of negative motivation with Amory using heavy drinking as a coping mechanism due to Amory's inability to meet life's challenges and inability to accept rejection (Jessop & Wade, 2008; Stinson et al., 2010).

Amory Blaine's binge drinking had a different history at the time of the novel's publication. When someone was said to binge drink, or "go out on a binge" it was meant

to refer to drinking over several days (Berridge, Herring & Thom, 2009). The more contemporary meaning of the type of binge drinking occurs when college and university students imbibe, refers to an excessive drinking episode, which is “five or more drinks for males and four or more drinks for females within a few hours” (CDC, 2012, p. 1). However, the negative and possible fatal consequences of both forms of bingeing are potentially the same (Drum et al., 2009; Dove & Hafliger, 2011; Hingson, Zha, & Weitzman, 2009; NIAAA, 2012; Patrick, Schulenberg, Martz, & Maggs, 2014; Parada et al., 2011; Parada et al., 2012; Singleton & Wolfson, 2009; White, Hingson, Pan, & Yi, 2011). The jazz age college students wanted to vicariously live as the fictional characters in the college novels (Hevel, 2011). The consequences that were associated with heavy drinking were anything but fictional but the trend of heavy drinking in college would continue to rise in spite of the consequences.

Over the next few decades from the 1930s through the 1960s drinking in college and universities became a “rite-of-passage” for the college and university freshman (Dietz, 2008; Hevel, 2011; Mann, Hermann, & Heinz, 1999). With the evolution of binge drinking on-campus by the late 1970s and 1980s, colleges and universities began to implement alcohol abuse programs (Dietz, 2008). Most recently national and local colleges and universities have initiated strict alcohol abuse policies and offer alcohol abuse educational and intervention programs, as well as traditional and technical resources to their students. However, binge drinking is still a serious problem (Wechsler & Nelson, 2008).

The context of alcohol abuse among college and university students

Alcohol abuse and its consequences is an ever-growing global problem (Gonzalez-Alcaide et al., 2013). The ongoing pressures and challenges for college students is resulting in the growth of alcohol abuse and the negative consequences, which is increasing in a similar manner locally, nationally, as well as globally. In the United States, before even entering college, 25% of graduating high school seniors have already participated in heavy drinking (Hustad, Pearson, Neighbors, & Borsari, 2014; Patrick, Schulenberg, Martz, & Maggs, 2014; Quinn & Frome, 2011). Subsequently, some students bring the problem of alcohol abuse to the university setting and continue as heavy drinking college or university freshmen (Hustad et al., 2014; Quinn, & Fromme, 2011; White & Swartzwelder, 2009). Fraternities and sororities are environments where alcohol abuse is an ongoing and increasing problem. A recent example is a local New Jersey College Sophomore who was 19 years old, died from alcohol abuse while attending a fraternity party. Koob the director at the National Institutes of Health (NIH) stated that drinking in colleges and universities is increasing, and the number students being hospitalized is increasing as well (Sherman, 2014).

For incoming college freshmen, “the transition from high school to college is a significant milestone in a young person’s life” (Wechsler & Nelson, 2008) p. 4) and is an emotional process. The experience is compounded by incoming students’ perceptions that they need to develop a new college or university identity in order to be accepted by college peers (Hustad et al., 2014). For incoming freshmen to develop a new college

identity researchers found that stressors are associated with the transitioning experience and students begin to abuse alcohol so they can cope with the pressures and stress (Christie, 2009; Dehart, Tennen, Armeli, Todd, & Mohr, 2009; Moller & Crocker, 2009). The psychological responses of not “fitting in” creates anxiety and stress and individuals then seek to self-medicate with binge drinking in order to feel accepted by their peers (Grywacz & Almedia, 2008; Stinson et al., 2010). Alcohol, when used as a coping mechanism when dealing with peer pressures, may have fatal results. For example, in the fall of 2012, a Northern Illinois University freshman student died during a hazing incident that involved binge drinking (Yaccino, 2012; Walberg & St. Clair, 2012). According to the police investigating the fatality, getting the student highly intoxicated was not a random event but was preplanned by the fraternity members (Yaccino, 2012, Walberg & St. Clair, 2012). The attorney for the student’s family said that the 19 year old just wanted to be “liked and accepted” (Yaccino, 2012, Walberg & St. Clair, 2012). Dietz (2008) found that the strongest predictor of alcohol abuse and binge drinking is the membership hazing of a fraternity or sorority. This is an important finding because many college and university freshman begin their educational experience by pledging for fraternities and sororities and they should be made aware of the possible problems with heavy drinking when pledging (Yaccino, 2012, Walberg & St. Clair, 2012).

Aside from the importance of students’ well being, researchers also cite the risk of failure and completion of their academic goals in a new educational environment (Flett et al., 2008). Parental pressures on expected academic performance also has an effect on

transitioning freshmen students' ability to cope while striving toward perfectionism, which is exacerbated with the pressure to conform to peers in order to be accepted (Flett et al., 2008). The parental and academic pressures created by the college environment can create a state of depression, which in turn can influence students to drink heavily in order to cope with their depression. Gonzalez et al. (2009) found that there is a connection with heavy drinking in order to cope with not feeling like a part of the educational experience, which leads to depression and suicide (Gonzalez, 2012).

University students in Hong Kong have experienced similar alcohol problems with serious health issues such as depression due in part to the academic pressures in the college setting (Kim et al., 2009). Kim et al. (2009) found that alcohol abuse had become so rampant in Chinese colleges and universities that there was an urgent need to study the problem and enforce proactive policies in order to curb the unhealthy and dangerous trend in the university environment. While the alcohol problem for college students has not been studied in depth in the East, however, it can be noted that there are similarities with the problem of alcohol in Western Cultures and Eastern countries. It is not clear whether the higher learning environment encourages students to abuse alcohol. However, "Chinese undergraduates are starting to resemble those reported in the United States during the period of rapid globalization of the problem" (Kim et al., 2009, p. 255). The problem of alcohol abuse and binge drinking in colleges, as well as the negative consequences, seems to be becoming an international problem.

Impact of alcohol abuse

Singleton and Wolfson (2009) found that alcohol abuse among college students may result in academic performance and failure, while researchers also found an array of the more serious consequences of heavy drinking ranging from accidental fatalities (Zakletskaia, Mundt, Balousek, Wilson, & Fleming, 2009) to intentional deaths (Drum et al., 2009; Gonzalez, 2011; Gonzalez et al., 2009). In the United States, “binge drinking is a risk factor for multiple adverse health and social outcomes, including unintentional injuries and motor vehicle accidents” (CDC, 2011, p. 3). It is also reported that “binge drinking is common among U.S. adults, especially among white males aged 18-34” (CDC, 2007, p. 3).

According to The National Institute on Alcohol Abuse and Alcoholism (NIAAA, 2012) annually and nationally “696,000 students between the age of 18 and 24 are assaulted by other students who have been drinking” (NIAA, 2012, p. 1); “97,000 students between the age of 18 and 24 are victims of sexual assault or date rape” (NIAA, 2012, p.1); 599,000 students between the age of 18 and 24 are unintentionally injured under the influence of alcohol abuse” (NIAA, 2012, p. 1); and “1,825 college students between the age of 18 and 24 died from unintentional injuries, including motor vehicle crashes” (NIAA, 2012, p. 1) due to alcohol abuse.

The consequences of binge drinking also include: unprotected consensual sex, especially among women (Kiene, Barta, Tennen, & Armeli, 2009; Ross, Kolars, Gomberg, Clark, & Niehaus, 2011; Scott-Sheldon, Carey, & Carey, 2010), with increased

incidence of sexually-transmitted diseases, including HIV, as well as unwanted pregnancy (Ceperich & Ingersoll, 2011; Scott-Sheldon et al., 2010); uninhibited flirting and unwanted sexual advances, by either sex, with consequences that may range from humiliation via social media to date rape (McCauley, Ruggiero, Resnick, Conoscenti, & Kilpatrick, 2009); alcohol-induced rage/aggression/assault, aspiration of vomitus, and alcohol poisoning (with associated morbidities of brain damage, cardiac damage, and liver damage) (Fallon, 2011; Gonzalez, 2012; Novik, Howard, & Boekeloo, 2011; Reynolds et al., 2011). There is also an increased risk of other life-threatening consequences (Zakletskaia et al., 2009) such as; accidental injuries, vehicular-associated accidents injuries, suicide, and death (Gonzalez & Hewell, 2012; Klibert, Langhinrichsen-Rohling, Luna, & Robichaux, 2011; Zakeletskaia et al., 2009).

Even with the awareness of the negative consequences of alcohol abuse, identifying and helping at risk students is a challenge. Winters et al. (2011) found that approximately 20% of students throughout the country need alcohol abuse treatment or intervention, but do not recognize the need to get help. To address the type of student that does not recognize the need to get treatment, it would be advantageous to look deeper into the influences of alcohol abuse.

Family History of Alcohol Abuse.

Children of alcoholic parents have a higher rate of heavy drinking and the associated negative consequences, when compared with children of parents that do not have alcoholic parents (Braitman et al., 2009; Nodar, 2014). Labrie, Migliuri, Kenney, &

Lac (2010) found that this may account for the 35% of the college and university population that come from families with a history of problematic drinking. Children of alcoholic parents drink more in high school and have a greater chance of being part of the lifetime alcoholic group, than children of non-alcoholic parents (Braitman et al., 2009; Nodar, 2014). Research studies found that alcohol abuse that has its roots in a familial environment is a well-documented risk factor for both male and female college and university freshman students (LaBrie et al., 2010). However, there are other influences that account for alcohol abuse by students who do not come from families that have a history of alcohol abuse.

Student perception on binge drinking

Peer pressure is an influential factor in the motivation of individual behavior, especially when it comes to drug and alcohol abuse (Neighbors et al., 2011). The Social Norm Theory is based on the theory that if negative perceptions can be changed then behavior can change, which will in turn reduce drinking and create positive peer pressure (La Mastro, 2008; Lewis et al., 2010; Neighbors et al., 2011). Students have the perception that they should drink heavily because they perceive that their peers drink heavily and it is the correct social norm, even if their perception is inaccurate. Neighbors et al. (2011) found that, "...if students overestimate the drinking of other students and this overestimation contributes to heavier drinking, the correction of these overestimates should lead to a reduction in drinking" (Neighbors et al., 2011, p. 652). In other words, if

the perception of the social norm is changed to less drinking then the reality will change and the drinking will be less.

In 2008 the New Jersey Department of Human Services, Division of Addiction Services, published a report that surveyed students from nine New Jersey colleges who participated in a social norm project that explored students' perception of drinking. The objective of the social norm campaign was to change the way students "perceived the prevalence of drinking" (Neighbors et al., 2008, p. 2) and reduce peer pressure because there is a tendency to overestimate the prevalence of drinking among peers related to alcohol consumption at the college level. Stappenback et al. (2010) found that some students may have the false perception that alcohol abuse is more prevalent than it actually is and consequently they follow the false perception of drinking heavily. The objective is to correct the misconception, which may lead to a reduction in heavy drinking (Neighbors et al., 2011).

The objective of the social norm approach is to create a motivation through the reduction of peer pressure, rather than an individual motivation. Although a seemingly interesting approach, it does not deal with individual cognitive motivations such as the motivation of self-esteem, which could have a negative on one's ability to abstain or avoid binge drinking (Neighbors et al., 2011). Research has found that the social norm approach does not have long-lasting effects, which may leave New Jersey and other colleges and universities throughout the country with the same increasing problem of alcohol abuse (Neighbors et al., 2011).

Addressing the problem of alcohol abuse among college freshmen

The connection of inbound college students and heavy drinking is an even greater problem than previously estimated (Hustad et al., 2014; CDC, 2012). The problem of heavy drinking is exacerbated by economics as well as a concern for physical appearance. Male students drink without eating to get drunk faster and female students drinking without eating in order to reduce caloric intake. This form of alcohol abuse results in blackouts, extreme hangovers, as well as more serious consequences such as personal injuries and unanticipated and intentional fatalities (Johnson et al., 2010; White & Swartzwelder, 2009).

The increase in the amount of drinks consumed per binge may also be related to a new phenomenon. In 2011 Marczinski conducted a study to examine the consequences of mixing alcohol with energy drinks (AmEDs). This is important to note because mixing the energy drinks (AmEDs) allows the drinker to consume more alcohol faster by overriding the important interceptive cues to stop drinking and allows the user to feel drunk faster and to drink more before drowsiness or blackouts. This increases the risks for injuries, accidents and physiological effects of alcohol poisoning (Herschl et al., 2012; Ishak, Ugochukwu, Bagot, Khalili, & Zaky, 2012; Marczinski, 2011; Marczinski et al., 2011). Findings also suggest that the consumption of energy drinks (AmEDs) may be strongly associated with alcohol dependence (Aria et al., 2011) and that those individuals who consume energy drinks (AmEDs) represent a target group for specific prevention efforts that address the

consequences of mixing alcohol with energy drinks (AmEDs) (Aria et al., 2011; Ishak, Ugochukwu, Bagot, Khalili, & Zaky, 2012).

Alcohol abuse educational efforts

Addressing and dealing with alcohol abuse in American colleges is an important objective because of the many negative consequences that are a result of alcohol abuse (Dove & Hafliger, 2011; Hingson et al., 2009; NIAAA, 2012; Parada et al., 2011; Parada et al., 2012; Singleton & Wolfson, 2011). By law, American colleges and universities are required, through the Drug-Free Schools and Community Act Amendments of 1989 (Provision PL 101-226, 1989), to make information readily available regarding their alcohol policies that are often found on the school's web sites.

The Harvard School of Public Health published the results of a 14 year College Alcohol Study (CAS) by principal investigator, Henry Wechsler, PhD. (Harvard School of Public Health, 2000) that outlined a 12-step program to address the alcohol problem on college and university campuses. The study defined binge drinking and its consequences and offered a twelve-step program that would help solve the problem:

1. "Colleges must acknowledge that an alcohol problem exists and assess its scope" (CAS, 2000, p. 7).
2. "A systemic effort must begin with the president and organizes for the long-term" (CAS, 2000, p. 8).

3. "Involve everyone and think broadly about solutions" (CAS, 2000, p. 8).
4. "Student education" (CAS, 2000, p. 8).
5. "Work with the local community" (CAS, 2000, p. 8).
6. "Establish the rights of non-bingeing students" (CAS, 2000, pg. 7).
7. "Develop a code of conduct in concert with non-binging students" (CAS, 2000, pg. 8).
8. "Provide alcohol-free living environments" (CAS, 2000, p. 9).
9. "Address problem drinking at fraternities and sororities" (CAS, 2000, p. 9).
10. "Provide full-time education for a full-time tuition" (CAS, 2000, p. 9).
11. "Encourage problem drinkers to seek help or treatment" (CAS, 2000, p. 9).
12. "Start freshman orientation before students arrive on-campus" (CAS, 2000, p. 9).

Note: Aside from step 11 -- Educators and administrators should encourage the problem drinker to seek help or treatment -- there is nothing within the 12 steps that address the motivation of binge drinking.

As a result, the national and local colleges have followed many of the suggestions published in the CAS report. The local college and university communities of Northern New Jersey have provided educational flyers, lectures, and video presentations regarding on-campus alcohol policies and the negative consequences of excessive drinking. Efforts also include methods of avoiding being pressured into excessive drinking, as well as heavy drinking prevention strategies. Some colleges and universities require inbound

students to participate in mandatory online alcohol educational programs. Students with existing drinking problems are monitored and stay in facilities that reduce the temptation to drink.

Consequential alcohol abuse education

In 2008 The Harvard School of Public Health published a consequential follow-up report to the 1999 Harvard College Alcohol Study in order to review what was learned regarding the implications of alcohol abuse prevention with college and university students (Wechsler & Nelson, 2008). The study focused on the environmental conditions on-campus and how the marketing of alcohol affects the drinking habits of college and university students. The study recommends putting resources into interventions that target the heavier drinkers and to conduct research and test the intervention efforts (Wechsler & Nelson, 2008). There is no mention in the follow-up report regarding the motivation of the drinker.

In 2009, The Harvard School of Public Health published an article highlighting the ongoing frustration of educators' inability to deter underage college drinking. To deal with the problem, college presidents representing 120 U.S. colleges proposed opening up the debate to lower the drinking age from 21 to 18 due to the frustration of underage drinkers flaunting the law. As a result of the suggestion of lowering the drinking age, law enforcement officials, leaders in education, substance abuse specialists, and Mothers Against Drunk Driving (MADD) were outraged at the suggestion of reducing the

drinking age as an answer to the worsening problem of alcohol abuse by young adults (The Harvard School of Public Health, 2009).

One point that was made by Wechsler and Nelson (2008) is “There is no one size fits all” solution (Harvard School of Public Health, 2009, p. 1). The states that had less problems were the states that enforced stronger minimum drinking age, reducing the marketing of alcohol toward college students, and forming community coalitions to reduce drinking (Linowski & Di Fulivo, 2012; Wechsler & Nelson, 2008). Efforts to change the environment and the marketing of alcohol, although helpful, do not seem to stem alcohol abuse in colleges. Additional research is needed to find an affective means of combating college binge drinking (Paschal, Antin, Rinwalt, & Saltz, 2011).

However, efforts to curb the rising trend of binge drinking can have unintentional negative effects. A study conducted by the British Psychology Society (Jessop & Wade, 2008) has shown that using a Terror Management Theory (TMT) to illustrate the negative consequences of binge drinking and using fear as a deterrent to binge drinking, may even have the opposite effect and actually *increase* binge drinking (Jessop & Wade, 2008). Terror Management Theory (TMT) perspectives that utilize mortality-related health campaigns may evoke fear and thus create the behaviors of binge drinking that the health campaigns are trying to deter. Jessop and Wade (2008) found that some individuals may create a *distal defense* by searching for a way to defend their self-esteem and binge drink because “Binge drinking makes me feel better about myself” (Jessop & Wade, 2008,

p. 779) and ignore the fact of their mortality, which unintentionally creates a motivation to binge drink. This makes the challenge of curbing binge drinking even more challenging.

Self-perception and alcohol abuse

Mezirow's (1997) transformative learning theory can be used to change the frame of reference of abusing alcohol through changing, "...expectations, perceptions, cognition, and feelings" (Mezirow, 1997, p. 5). The goal is to change the habits of mind, point of view, and perceptions (Mezirow, 1997, p. 5) of the learner when dealing with alcohol abuse and binge drinking. This will affect how one views themselves and the effect on their self-esteem.

Self-esteem is a reflection of one's self-worth. Low self-worth is associated with low self-esteem and there may be harmful psychological, physical and social issues associated with low self-esteem (McClure, Tanski, Kingsbury, Gerard, & Sargent, 2010). A 2011 study by Michalek et al. found that the levels of self-esteem fluctuate and this fluctuation is associated with depression. In other words, "This means that the level of self-esteem is a poor predictor of depressive states; instead high fluctuation and reactivity of self-esteem over time in reaction to daily stressors and boosts (caused by basing self-esteem on external factors) make people vulnerable to depressive symptoms in the future" (Michalak et al., 2011, p.751). It is the unstable level of self-esteem that differentiates people who are at risk of experiencing depressive symptoms and the need of a coping mechanism (Michalak et al., 2011). That coping mechanism may be alcohol

and depending on the individual's ability to cope may determine the amount of alcohol he consumes. But what if that coping mechanism can be replaced?

One possibility is an acceptance and commitment therapy coping mechanism, which may help regulate internal experiences that could be the cause of self-esteem fluctuation (Eisenbarth, 2012). Gundy, Woidneck, Pratt, Christian, and Twohig, (2011) found that replacement, distraction, and positive self-talk can regulate self-esteem fluctuation. However, even if the coping mechanism can be replaced, it is important that one believes that one is capable of changing his actions and his ability to succeed in particular situations; specifically, the ability to properly manage drinking habits and the way one organizes and executes a course of action is through the concept of self-efficacy (Bandura, 1982).

La Chance, Feldstein, Ewing, Bryan, and Hutchinson (2009) found that self-efficacy is a mediator for the reduction of problem drinking among college students. Bandura (1982), stated that efficacy is not simply not knowing what to do, "...rather it involves a generative capability in which component cognitive, social, and behavioral skills that must be integrated courses of action to serve innumerable purposes" (Bandura, 1982, p. 122). In other words, in order to reach the point of "capability", one's self-esteem has to be healthy enough to get to the point of carrying out the task. In this case the task is to curb or abstain from drinking one must have healthy self-esteem.

Self-esteem as an alcohol abuse motivation

Although education directed programs and interventions that deal with alcohol abuse awareness can be effective tools in reducing the negative consequences of alcohol abuse, for first year students and the general college population (Borden et al., 2011; Hayes et al., 2010; Kazemi, Linman, Nies, Dmochowski, & Walford, 2011; Novik et al., 2011; Schaus et al., 2009), the amount of alcohol abuse and the average number of drinks per binge are increasing (CDC, 2012). It may be argued that new types of research and new types of alcohol abuse education are needed to more deeply understand the cognitive-behavioral motivations of alcohol abuse. Over the past 40 years the concept of self-esteem and its effects on human behavior have become a controversial and complicated factor when considering its impact on human behavior. When an individual is experiencing low self-esteem it manifests in the inability to meet life's challenges and handle rejection. Alcohol abuse and binge drinking may then be used as a coping mechanism (Jessop & Wade, 2008; Stinson et al, 2010; Manzi et al., 2010). A 2013 study by Zeigler-Hill et al. found that there is a connection between people who "possess high levels of contingent self-esteem" (Ziegler et al., 2013, p. 546), (an individual's self-worth is strongly determined by whether that individual meets their goals and standards)" and alcohol abuse when an individual's goals and standards are not met. There are also more reported negative consequences by individuals with "high levels of contingent self-esteem" (Ziegler-Hill et al., 2013,

p. 546) due to alcohol abuse when compared to those individuals with noncontingent high self-esteem. Ziegler-Hill et al. (2012) found that low self-esteem, especially among male students, is a predictor for alcohol dependence, and additional literature indicates that self-esteem may be a motivating force when dealing with alcohol abuse and binge drinking among college and university students (Fallon, 2011; Neuman et al., 2009; Ziegler-Hill et al., 2012). Exploring the connection of self-esteem and alcohol abuse may offer an alternative resource to curb alcohol abuse that is longer lasting than conventional programs (Ziegler-Hill et al., 2012), especially for repeat offenders.

Transitioning college freshmen and self-esteem

Doumas et al. (2011) found that first year students represent the highest at risk groups due to newfound stress and socialization challenges. Alcohol abuse is prevalent among college students and is the root of many social and psychological problems that could result in negative consequences (Hustad et al. 2014; Reynolds et al., 2011; Lovecchio et al., 2010). A challenge to the transitioning experience is the assault on students' level of self-esteem, which can be a determining factor in their academic success. The results from a current research study point out that there is a relationship with the unstable levels of self-esteem and depression (Manzi et al., 2010; Michalak, Teisman, Heidenreich, Strohle, & Vocks, 2011). Some first-year transitioning students try to cope with their transitioning anxiety through drinking, which exacerbates their problems and can include difficulty with

interpersonal relationships, fighting, unplanned and unprotected sexual activity, depression, and unintentional and intentional fatalities (Gonzalez, 2012). Aside from the serious consequences of alcohol, the repeat offenders risk academic failure and eventual expulsion if the alcohol abuse continues.

Implications

The literature clearly illustrates that traditional education interventions and computer programs directed at the consequences of alcohol abuse can be an effective tool in reducing alcohol abuse for some students. However, for the continual offender the positive effects of the traditional short-term alcohol abuse education and interventions are short lived. (Borden et al., 2011; Carey, Henson, Carey, & Maisto, 2009; Hayes et al., 2010; Kazemi et al., 2011; Martens, Smith, & Murphy, 2013; Novik et al., 2011; Schaus et al., 2009). Researchers found that for continual offenders who violate campus alcohol policies, in-person interventions and interventions that include face-to-face interviewing (Martens et al., 2013) were more effective in curbing drinking when compared to educational alcohol computer programs (Carey et al., 2009).

Although Acme College is addressing the problem of binge drinking and has implemented alcohol abuse policies, codes of conduct, and a mandatory computer program for incoming freshmen, the problem of alcohol abuse and binge drinking is still prevalent with a 17% recidivism rate of students who have continual alcohol abuse infractions. Students who are continual abusers and commit infractions are

referred to the judicial department for disciplinary actions and the counseling department for evaluation, but there is no available on-campus long-term program. Instead, the continual abuser is referred to off-campus agencies for treatment. However, students may be better served with an on-campus long-term alcohol abuse educational program utilizing a different approach.

Monahan et al. (2012) and Reynolds et al., (2011) found a connection with anxiety and depression, brought on by academic and peer pressure. Anxiety and depression are also often associated with self-esteem issues (Eisenbarth, 2012) and studies found that self-esteem and alcohol abuse have a connection (Faloon, 2011; Zeigler-Hill et al., 2013). The results from current research studies indicate that there is a connection with the unstable levels of self-esteem and alcohol abuse (Manzi et al., 2010; Michalak et al., 2011; Norman, 2011; Neumann, Lefingwell, Wagner, Mignogna, & Mignogna, 2009; Ziegler-Hill et al., 2013). The data found from the review of the literature clearly illustrates that there is a need for the development and creation of an on-campus long-term program that contains an alcohol abuse educational curriculum that utilizes the positive motivation of self-esteem as the core of an educational curriculum, which may help students who are repeat offenders avoid academic failure or expulsion and will offer important social change.

The primary objective of this study is to explore the prevalence of the problem of alcohol abuse and binge drinking at Acme College, and investigate the

need for a long-term program that contains an alcohol abuse academic education curriculum. The program will be taught within the framework of Mezirow's (1997) transformative learning theory, which will attempt to change the habits of mind, point of view, and perceptions (Mezirow, 1997, p. 5) of the learner when dealing with alcohol abuse and binge drinking.

Summary

New Jersey 18 to 25 year olds are exceeding the national levels of alcohol abuse (New Jersey State Epidemiological Profile Substance Abuse, 2008). The literature illustrates that heavy college drinker and continual offender are exposing themselves to health risk, as well as the risk of academic failure and expulsion. Local northeast New Jersey colleges and universities have implemented strict alcohol policies, code of conduct, and educational and intervention programs that outline the dangerous consequences of alcohol abuse. In spite of these efforts of the short-term educational programs that create an awareness of the negative consequences of alcohol abuse, the problem still exists and additional long-term programs are needed (O'Brien et al., 2012; Hustad et al., 2014). Locally Acme College is aware that the problem exists and is addressing the problem. However, there is a recidivism rate of 17% and there is no on-campus long-term alcohol abuse educational programs in place.

The purpose of this project study is to investigate the prevalence of the problem of alcohol abuse at Acme College. Utilizing Mezirow's transformative learning theory is the framework for this study. A qualitative, instrumental case study research design will

explore the awareness regarding the prevalence of the problem, and if the development of an on-campus long-term program that contains an alcohol abuse academic education curriculum may offer administrators and counselors an alternate resource to address the problem.

Section 2: The Methodology

Introduction

This project study utilized a qualitative instrumental case study with a transformative research design. The rationale for utilizing the instrumental case study design is that it attempts to inductively develop an in-depth theory by empirical exploration and analysis of the behavior of a group or situation (case) within a bounded system (bounded by time and space), undergraduate students on the Acme College Campus. An analysis of the project data will determine whether the theory that is being explored is proven to be true, or it is proven to be false (Creswell, 2013; Glesne, 2011; Lodico, Spalding, & Voegtle, 2010; Merriam, 2009).

The rationale in utilizing the transformative strategy was that it may radically change the way the existing problem that is being addressed is currently viewed and understood, and a new theory may emerge as a result of the exploration. Mezirow's (1997) transformative learning theory may be used to change the existing "habit of mind and point of view" (Mezirow, 1997, p. 5) of the behavior that is the result of the problem.

The case study for this project study focused on an in-depth objective inquiry regarding negative motivations. The case study data revealed themes that emerge based on the participants' perceptions of the problem. The data were collected by deep inquiry interviews, which subsequently revealed themes and hypothesis that were in agreement with the researcher's goal. The value of the instrumental case study for this project study is that it provided a deep inquiry in the form of words, rather than numbers and statistics

from quantitative methodologies. A quantitative study would not have had the breadth and depth that the qualitative data analysis revealed. Due to the nature of the topic of this project study themes that have emerged may have a transformative effect on established resources that address the problem.

Justification for Utilizing the Case Study Qualitative Research Method

The qualitative case study qualitative research method was best suited for this project study because the instrumental case study design attempts to inductively develop an in-depth theory by empirical exploration and analysis of the behavior of a group or situation (case) within a bounded system (bounded by time and space) unlike the other research designs. For example, the narrative design is not bounded and the research collects stories over time and an important characteristic is the relationship that is developed during the researchers experiences with the participant(s). Narrative researchers collect stories about the individual's lives and experiences through interviews. Data is collected by the researcher as he is experiencing events, personal observations, as well as collecting documents and pictures, if applicable. The result is a collaborative chronological subjective narrative of the researcher's views of the participant or participants' life experiences with the researcher (Creswell, 2009; Creswell, 2013; Glesne, 2011). The case study is bounded and the researcher is not interested in the researcher's subjective experiences with the participants. The researcher's goal with the case study methodology is an objective perspective of the problem. This may include discriminant information that may change the theory of the project study.

The phenomenological design is an approach that focuses on the meaning of peoples' lived experiences toward a phenomenon as a philosophy and "attempts to capture the 'essence' of human experience" (Lodico et al., 2010, p. 16). Extensive open-ended interviews are primarily used over a long period of time to reveal patterns and relationships of meaning (Creswell, 2013; Lodico et al., 2010). The focus of the case study is the motivation of negative behavior not lived experiences. The case study's focus is not in a "phenomenon as a philosophy" (Creswell, 2013; Lodico et al., 2010).

The ethnographic design is a long-term approach that studies the intact behaviors of a group or culture where the researcher emerges himself in the group or culture he is studying over a long, and unspecified period of time. Unstructured in-depth interviews, field notes and observations are used to create a complex interpretation of the group or culture that is being studied. The result of the study is a "thick description" for interpreting how a cultural group develop and share cultural meanings (Glesne, 2011; Creswell, 2013). The case study is focusing on motivations through structured in-depth interviews regarding negative behavior. The researcher's goal is to achieve an objective inquiry, not a subjective observation, which is a result of immersing himself with the participants, which is the goal of the ethnographic methodology.

The grounded theory is "a methodology that is used for developing theory that is 'grounded' in data" (Glesne, 2011, p. 21). Grounded theory involves specific data collection and analysis, and a rigor of continual data sampling, coding, categorizing, and sampling. The data is collected through interviews and observations on a specific topic.

When analyzed the data may reveal a theory and that theory is then tested by collecting further data to see if the views of the participants are grounded in a general abstract theory of a process, action, or interaction (Creswell, 2013; Glesne, 2009; Lodico et al., 2010; Merriam, 2009).

The instrumental case design for this project study focused on an in-depth objective inquiry regarding negative behaviors as a result of the problem. The case study data developed themes that emerged based on the participants' perceptions of the problem. The themes and hypothesis that were revealed are in agreement with the researcher's goal.

Participants

The participants included seven professional stakeholders and five students. The seven professional stakeholders who participated were: one department chair, three professors, one alcohol abuse counselor, one judicial officer, and the vice president of student development. The vice president of student development, the alcohol abuse counselor, and the judicial officer were chosen because of their position and responsibilities regarding alcohol abuse on-campus and their direct contact with the continual alcohol abuser. The department chair and the professors were chosen because of their close work with students and their over 10 years length of service at the college. After a brief discussion regarding the project study the potential participants were handed an Informed Consent Cover Letter (Appendix B) that served as an invitation to participate in the project study. The Informed Consent Letter contains my contact

information, project description, procedure, risks, benefits, cost compensation, and confidentiality. After reviewing the Informed Consent Letter, if the potential participant agreed to be interviewed they were given the Informed Interview Consent Form (Appendix C). The Informed Consent Form consists of an explanation of the project and my contact information, background information, procedures, the voluntary nature of the project, risks and benefits of the study, privacy and protection, statement of consent, and their required signature. After the Informed Consent Form was signed and any questions were answered, a mutually agreed time and secure place was chosen for the interviews to take place. The professional stakeholders' signed forms were put in an individual participant file and locked in a file cabinet in my home.

The five students who participated were: two freshmen, one sophomore, one junior, and one senior. The students were chosen personally at random on-campus and I did not have any connection or share prior experiences with the student participants. There was some difficulty with getting students to participate due to the nature of the subject, even though the inquiry would be on the perceptions of the problem and not their participation in the problem. After a brief discussion I followed the same procedure regarding the Informed Consent Cover Letter (Appendix B) and the Informed Interview Consent Form (Appendix C) as the professional stakeholders. And like the professional stakeholders, after the Informed Consent Form was signed and any questions were answered, a mutually agreed time and secure place was chosen for the interviews to take place. The students' signed forms were also put in an individual participant file and

locked in a file cabinet in my home.

The participants achieved a purposeful sampling, which showed a different perspective from the key informants through the deep inquiry interviews, documents, and observations of each participant's nonverbal behaviors during the interviews, such as silence or nervous fidgeting (Creswell, 2013). Every effort was made to achieve the participants' protection and privacy, as well as validity and reliability in gathering and analyzing the data.

Data Collection

Following the required Institutional Review Board (IRB) approval (# 07-17-14-0085789 exp. July 16, 2015) to conduct the interview process, the required documents explaining the project purpose and goals, and the approved IRB application required to develop the project were delivered to the college sponsor for written permission from the college to conduct the interviews. The college sponsor was also provided with copies of the documentation regarding the interview protocol and interview questions, issues of confidentiality, and the informed consent and protection from harm form.

After the college sponsor gave written permission to proceed with the interviews, I hand delivered the project introductory letters, which included the project topic, objective of the study, and the request to be interviewed (See Appendix B & C), to the perspective stakeholders and students. When a participant agreed to the open-ended interview, a copy of the issues of confidentiality and an informed consent and protection from harm form were signed. The signed informed consent forms, the transcripts, and

any written field notes are locked in a file cabinet in the researcher's home (See Appendix B & C).

I proceeded to gather information by means of quality, rigor and trustworthiness in an ethical manner. Deep inquiry and in-depth face-to-face interviews were conducted over time in a setting where participants were able to act naturally within a familiar context (Creswell 2013; Golafshani, 2003; Merriam, 2009). The interviews included open-ended, broad questions followed by more specific narrow questions that provided a deep inquiry (See Appendix D). The interviews were conducted at a time and within an environment that was familiar and comfortable for the participants (See Appendix D). The nonverbal behaviors were constant with all participants. There were no nonverbal behaviors (lack of eye contact, fidgeting, etc.) that indicated any discomfort. The interviews were recorded and I made the subsequent transcripts for better analysis and data recall. The transcripts were coded and stored in a locked file cabinet in the researcher's home (See Appendix B & C).

Data Analysis

When the transcripts from the recorded interviews were completed, the data were coded and categorized (Creswell, 2013) manually. Before the data were gathered, I developed a list of possible categories that the data would fit into (Creswell, 2013; Merriam, 2009) based on the information from the review of the literature in Section 1. The data were then coded by color highlighting and underlining. During the analysis of the data, themes emerged that were true to the theory of the project study (Creswell,

2013; Glesne, 2011; Lodico et al., 2010; Merriam, 2009). To describe the findings, I created rich, thick descriptions that contain no negative or descriptant information. The results are objective as possible and there is no bias, which can be qualified from a review of the transcripts.

Based on the information from the review of the literature in Section 1, some possible categories were identified into which the data might fit. The data were reviewed, coded and put into the different categories under the category headings of the Professional Staff: Vice-President of Student Development; Counselors (judicial officer and alcohol and drug abuse counselor); professors; and chairperson. The students were broken down by class headings: freshmen, sophomore, junior, and senior, as well as fraternity and sorority representatives. The categories were basically the same for the Professional staff and the Students. During this process themes began to emerge. As the themes emerged (Creswell, 2013) they began to concur with the information from the review of the literature in Section 1. I constantly crosschecked the data from the transcripts to determine if any mistakes were made during the transcribing and color coding (Creswell, 2013; Glesne, 2011; Lodico et al., 2006; Merriam, 2009).

As a result of the analysis of the data four main themes emerged: First, the information was in line with the review of the literature in Section 1, which found that there is a problem of alcohol abuse and binge drinking by college and university students; second, the problem is occurring on a local level; three, there is no on-campus long-term program for the continual abuser; fourth, self-esteem is a motivating factor in alcohol

abuse and binge drinking; and five, it justified the development of a program that contains an alcohol abuse curriculum that integrates self-esteem as a positive motivating force for the continual alcohol abuse offender to curb or tops alcohol abuse. Overall, the information from the project data provided two similar, but in some ways different perspectives from the Professional staff and the Students. The findings are as follows:

Professional Staff

Alcohol and binge drinking awareness and its causes

The professional staff, which consists of the professors, and the Vice-President of Student Development, the judicial officer, and the counselor, had a general awareness of the problem of alcohol abuse and binge drinking in colleges and universities. These findings were in line with the information found in the review of the literature in Section

The Vice-President of Student Development, the judicial officer, and the counselor discussed the problem of alcohol abuse and binge drinking on a general level. The judicial officer, who deals with alcohol policy infractions committed by students stated, "It's the message from the media, it's what they see on TV and in the movies. I really hate to say that the American culture has really stereotyped college as partying: 'You'll get your degree, don't worry about it, this is a time to kick back and enjoy'. Unfortunately alcohol is required". The Vice-President of Student Development was more specific regarding the problem and stated, "I think the students who do have the more significant problems are the repeat offender, and those are the students that need the more intense interventions. Thankfully they are in the minority".

The professional staff was aware of the problem of the continual offender and for some of continual offenders, traditional interventions are not effective. The judicial officer stated that, "...the nature of judicial affairs is reactive and not proactive. So by the time that I'm meeting students they've already engaged in alcohol consumption that has either damaged the community or threatened their health". The perception of the judicial officer is in line with the Vice-President of Student Development, which is that the problem locally is under control. However, this perspective is not shared by the students, which is discussed in the analysis of the data within the students' findings. The overall perspective of the students is that the majority of students abuse alcohol, the problem is prevalent, and needs to be addressed as soon as possible. However, this is not the case as the counselor stated, "...the students that drink and binge drink tend to be low, and the perception seems to be all students binge drink and the reality is, it's just not so". However, the counselor points out that for the students that do abuse alcohol the problem is serious, and the challenge on a local level is to find out the reason why, "... it is important when you're working with drugs and alcohol to really asses the motivation; is this a biological thing, is this a psychological thing, social, familial: how is it being instituted". One reason for this may be the social norm concept. This is the false perception that all students drink heavily, therefore it becomes socially normal and acceptable to mimic the same behavior of heavy drinking students. The counselor pointed out, "Those are people where it is part of their social norms. Sometimes they don't even enjoy it, but they need to do this to fit in. So those students are going to be

different because how can you maintain your social status”. As a result, students will be motivated by the social norm and consequently drink heavily.

Another motivation to drink heavily may be the familial connection where heavy drinking is the family norm. That behavior is then brought with the students when they enter college or university. The counselor found that, “...when you get kids whose parents are alcoholics, they tend to be alcoholics themselves”. There is a challenge to counsel the students with a familial connection and the counselor stated, “Your saying to a kid don’t drink at dinner and the whole family drinks at dinner. That’s not going to work so the whole family has to support the kid by everyone drinking seltzer”. It may be beyond the student’s ability to help the family change the heavy drinking culture, which in turn can help the student stop drinking.

The perspective of the professors differs from that of the judicial and counseling staff who are in direct contact with the continual offenders. The professors can only suspect the problem of alcohol abuse through a student’s behavior or more specifically with a student’s poor academic performance. Professor A stated that, “You know it’s difficult for me to assess that {alcohol abuse} because I see my students strictly in the classroom, and to the best of my knowledge none of them have ever come in drunk, or hung over”. Professor C pointed out, “I’ve had a couple of instances where students have dropped out, dropped the class. I had a feeling those students were abusing alcohol. In one case I smelled alcohol on a guy’s breath when he came to class and he didn’t last the semester. When you put two and two together maybe that’s what the situation was; I’m

not sure”. There is also an awareness through “here say”. Professor B stated that, “ I heard them {students} say there was a lot of drinking in the dorms.” Professor C stated that, “Yes, I have heard of things like that of course {heavy drinking}. Students have told me about their activities over the weekend or over night”. Professor A stated that, “I have students who don’t participate; there could be lot of reasons for that. I have students this semester who haven’t handed in a single assignment, there could be lots of reasons for that and alcohol abuse could be one of them”.

Although there are suspicions that alcohol abuse is a problem due to poor academic performance or “here say” that may be attributed to alcohol abuse, there were no eyewitness accounts from any of the professors so there is very little evidence that academic failure is due to alcohol abuse. However, the professional stakeholders in the student development and counseling departments who work directly with the continual abuser, have witnessed academic failure as the result of alcohol abuse. The counselor stated, “ I’ve certainly seen students failing out of the school with dramatically low GPAs and when you ask them about that because it’s just so shocking at that number, ‘ I was drinking a lot or I was doing a lot of party drugs and so I couldn’t concentrate’. So it definitely does affect them”. Some students who are the continual abuse drink heavily in high school and bring their heavy drinking habits with them. Many students don’t realize or admit that alcohol is affecting their grades until they begin to fail courses toward the end of the semester, then it’s too late. The judicial officer found that, “...there is a huge correlation with a student’s success, with the GPA attainment and the amount of alcohol

they consume on a weekly basis. Many students don't believe that because a lot of students had done really well in high school because high school was easy for them so they assume that college is going to be just as easy for them". As a result, by the time many incoming freshmen realize that alcohol abuse is the reason for their poor academic performance or failure it may be too late and the student would flunk out or be dismissed from school.

An awareness of the intensity of the problem by freshmen

All the professional participants agree that most of the alcohol abuses experienced by students are incoming freshmen. The judicial officer stated, "My personal theory it is a message has been appropriately sold to them {freshmen} and that they bought into that; this is what college is". This was also found by the counselor, "... nationally the first six weeks you tend to see a pretty dynamic uptick, and these are national stats". The awareness of the alcohol abuse by freshmen was also supported by the vice president of student development who stated "... there is something called the 'college effect', that means that when students come to campus there is a surge in drinking during the first six to eight weeks of the semester that's why many of the interventions target college freshmen".

Although the professional stakeholders' perceptions are not eyewitness accounts of the actual alcohol abuse, the professional stakeholders only hear about the heavy drinking. A chairperson was aware of the problem through her advising role when students would recall heavy drinking when they were freshmen. The chairperson stated,

“When I talk to students in general when were talking in general about their lives and things like that, they’ll role their eyes about, ‘Oh my God, freshman year. Oh yeah, oh yeah! I didn’t do much freshman year except party’. So they will talk about it in those certain terms”. The chairperson also had a personal experience with her son who had an alcohol abuse problem while in college so she was very aware of the problem on a personal basis, but her overall awareness in the local university was limited.

One of the main problems regarding the motivation of alcohol abuse by students is the perception that the culture of the higher learning experience is heavy drinking. This is supported through the historical information of college drinking in the review of the literature in Section 1. The judicial officer stated that when the problem is discussed with the continual abuser, “The conversation tends to be that ‘this is college. I don’t understand why am I in trouble for something everybody does’”. That perception by some students supports the social norm concept that even though the perception that everyone in college and university drinks and that concept is false, for the continual abuser it becomes their rational. The counselor found that “... we get a lot of data where we look at the perception of student drinking of what actually happens and the students that drink and binge drink tend to be low and the perception seems to be all students and the reality is, it’s just not”.

The information from the review of the literature in Section 1 found that much of the problem of alcohol abuse is within the fraternities and sororities. The judicial officer stated that, “Alcohol abuse is completely integrated into the culture of the fraternities and

sororities, absolutely”. Within the fraternities and sororities drinking is not only a strong part of the culture perceived to fit into the Greek Life, but also to fit into the overall higher learning social life. The counselor found, “When you ask them {the students} what is this fascination with alcohol, they can take it or leave it but it’s part of the culture so they’ll take that. And it’s a lot easier to talk to a girl if you’re not anxious so if your slightly buzzed it’s easier and if someone says you can’t do this and you want to show off and that will give you more attention so that’s what you’re going to do”.

Although the perception of the heavy drinking is from the repeat offender who is being reprimanded through the judicial department or treated through the counseling department, the problem may be much worse because many of the fraternity and sorority houses are off-campus and not under the jurisdiction of the colleges and universities, and therefore not monitored. A more accurate assessment may be from the actual eyewitness accounts by the Greek Life members.

Low self-esteem as a motivation for alcohol abuse

From the perspective of the judicial and counseling representatives, and the professors there is an agreement that low self-esteem may be a factor in alcohol abuse. They agreed that students’ who have low self-esteem begin to drink to better socialize in order to “fit in”; to help develop their new higher learning identity; and to cope with the social and academic pressures. The Vice-President of Student Development stated that, “I’m not aware of the data that would suggest that the reason that many or all students abuse alcohol or drugs because of low-self-esteem, but it seems certainly possible”.

However, both the counselor and the judicial officer had a stronger assessment. Based on the counselor's direct work with students who abuse alcohol, when asked if low self-esteem is a problem with students who abuse alcohol, the counselor stated, "Absolutely. Absolutely. Because when you get to the point where negative things are happening and you're still continuing to do it then you have to look at what's the continuing motivation. It takes a lot of self-esteem to say, 'I'm not going to do this because it's not going to make me feel good' and part of the fact is that you're not OK with that {alcohol abuse}'. Low self-esteem may also be attributed to heavy drinking in order to cope with new higher learning experiences and environments. The judicial officer found that students, "...would consume more than they previously have and more than they would in a different environment".

The professors interviewed also attributed low-self esteem as a motivation to abuse alcohol. Professor B stated, "Yes, Absolutely...I do think that there has to be a connection between self-esteem and drinking". One main reason is that when someone has low self-esteem he needs something to make him feel good about himself and he may turn to alcohol. Professor C stated that, "Addictions seem to me are often linked to self-esteem. If your life is not what you hoped it would be, if you don't feel good about yourself so you turn to something that makes you feel better, that won't reject you like people won't reject you. A beer won't reject you". Although a heavy drinker may have that perception, not only is that perception wrong, the long-term effects due to his bad behavior because of the heavy drinking can lower his self-esteem even more. In a higher

learning environment the result of heavy drinking is academic failure, dismissal, or worse.

High self-esteem is a motivation for alcohol abuse

There was agreement that high self-esteem can be a factor in alcohol abuse, but the perceptions were somewhat different. For some high self-esteem was perceived as synonymous with arrogance, which is characterized by students who consider themselves above the norm. The judicial officer found, “{students with high self-esteem} tend to be the celebratory. People that are in high status groups like athletes and Greek organization members”. This can be a dangerous mindset and a rationale to drink heavily. Some students with high self-esteem create their own convenient rationale as the judicial officer found, “What I perceive as being dangerous {heavy drinking} and they perceive as normal maybe because they feel protected, a protected status. They’re a member of a group and ‘ it’s not going to affect me’”. But for some the heavy drinking does have negative effects, especially with their health as the counselor pointed out, “... you look at these kids and you really feel sorry for them. You can’t do everything. You don’t have control over everything. They have to learn moderation. I always say you have one body and you don’t get to do an upgrade at thirty”.

The perception of the chairperson was not in agreement with the negative opinion of high self-esteem and alcohol abuse stated by the judicial officer and counselor”. The chairperson’s perception is that high self-esteem can be an asset to curb alcohol abuse. The counselor stated that, “... high self-esteem is very important in terms of giving a

young person the tools in excessive partying, excessive alcohol, giving the ability to say, why would I go to that party, everybody is going to get loaded”, that sort of thing”. The Professors thought it might have an effect, but was not sure or were in agreement with the judicial officer. Professor A stated that, “I think the higher the self-esteem the lower incident you will find with alcohol abuse.”

It would seem that the counselors and judicial officer might have a better insight of the students who have high self-esteem because as professional stakeholders they work directly with the students, however their perceptions are not based on eyewitness accounts, nor informal relationships with the abusers as with the students who observe the abuse. The perceptions of the counselors and judicial officer are based on discussions with the continual abuser and the continual abuser’s honesty or dishonesty.

The benefits of a curriculum that integrates self-esteem as a motivator to stop or curb alcohol abuse

The professional stakeholders generally agree that a program that contains an educational curriculum that integrates positive self-esteem as a motivator may be an effective alternative to the traditional interventions for the repeat offender. However, the professional stakeholders although agreeing, would like to examine the curriculum. A nine-week course that integrates and focuses self-esteem into the curriculum is a novel way of addressing the problem, but it is an untested approach. As the Vice-President of Student Development pointed out when asked if the curriculum would be effective he stated, “I don’t know. That’s why you doing this study. Again, it’s a reasonable

hypothesis, You may be aware through your literature and survey results that you indicate”. The counselor who works directly with repeat offenders had a more supportive perspective and stated that, “...I think that if students are willing to do something that long-term I think it’s great”. However, the counselor views the implementation as part of an established intervention that would use the nine-week curriculum as an extension of a traditional intervention already in being used. The counselor stated that, “They’ve {repeat offenders} already done the workshops, now we’re looking at further sanctions, you are now required to take and nine-week course and within this time you will be monitored, you’re still on probation, if you violate your probation, you’re out of the residence hall, your out of here. That has a lot of impact because every week they are being reminded that someone is watching, someone is checking in, and the university will take action”. The judicial officer who also works directly with the students had a different perspective. The judicial officer stated that, “I think this would have to be an orientation or a pre-orientation. I think you have to get your students early. Or have some kind of indicator system where students can be referred to the program once they come to college and they are not quite fitting in”. There is also the question of when the curriculum would be most effective: As a last step before a repeat offender is dismissed, or as a requirement for the student who wants to return the school after being dismissed due to alcohol abuse. The judicial officer stated that, “Honestly, for a particular portion of our students the most educational thing we can do is remove them from school. And quite honestly, alcohol and drugs play a big role on many of those students leaving and

yes I think this would be an excellent pre-condition for their return”. This opinion was shared with the professors and the chairperson who stated that, “Why that might work is if you have people, have returning students who want to return then they are likely to engage in the program. If they are willing to engage, which they should, then you have a shot at it”.

In theory, all the professional stakeholders agree that the concept of a curriculum that integrates self-esteem in a curriculum may be an effective intervention, however, there are challenges. The first challenge is when and how to implement the curriculum: as part of freshmen orientation, before a student’s dismissal, as part of a returning student’s requirement, or all three-time periods. The second challenge is the willingness of students to commit to a nine-week course. As the Vice-President of Student Development stated, “Many of these students will go through these things because they have to, not because they want to, and you have to bring students along to the point that they have a problem and acknowledge that they have an issue otherwise they are quote-unquote are resistant to any kind of intervention. So this is the challenge”.

As a result of the project data, the challenge of the acknowledgement of the problem by the students has been integrated into the curriculum as one of its main objectives. However, it is the actual implementation then the summative and evaluative course evaluations that will determine the overall effectiveness of the curriculum. The project data from professional stakeholders confirmed the three objectives that were developed as a guide: First, there was a contrast with the information found in the review

of the literature in section 1 regarding the problem of alcohol abuse in universities and colleges; second, the problem of alcohol abuse and binge drinking students is occurring on a local level at Acme College; and third, the project data justified developing a program that contains an alcohol abuse academic education curriculum that integrates self-esteem as a positive motivating force for the continual alcohol abuse offender.

Students

Alcohol and binge drinking awareness and its causes

All the students had a general awareness of the problem of alcohol abuse and binge drinking in colleges and universities. There was also agreement that alcohol abuse and binge drinking is a prevalent problem with the continual abuser. These findings underlined the information found in the review of the literature in Section 1. The problem of alcohol abuse and binge drinking on a local level at Acme College was discussed by the students who were eyewitnesses and observed the abuse of alcohol to the point of binge drinking. This was in contrast to the professional stakeholders who did not have eyewitness accounts. Student A stated, “I feel like in a typical college experience, binge drinking and drinking of any kind is prevalent. It’s part of the experience”. The perception of the students is that binge drinking is a constant occurrence as Student B pointed out, “As the student body as a whole I would say 60 – 70 percent of students at my university would binge drinking I would say”. This was supported through eyewitness accounts by all the students interviewed who stated that alcohol abuse and binge drinking are both a prevalent and a continual problem, especially

with the continual abuser. Student C stated that, “Heavy drinking in college is expected: Especially to fit in. I see it at every party I go to and social events where it may be done before the event and continued afterward. It doesn’t matter if someone is underage. It is sometimes the same underage kids that drink the most because they haven’t had any experience with it, or they just drink and binge till they pass out or throw-up”. According to the students, many times the underage drinker is characterized as the continual abuser. Student E pointed out that, “The ones that are 21 and older, ‘ok there’s alcohol here, that’s great’. But the younger ones are really much more involved with the alcohol process”.

The opinions of the students that the majority of students abuse alcohol and binge drink is in sharp contrast to the professional stakeholders (vice president of student development, judicial officer, and counselor) belief that the social norm perception of alcohol abuse by the majority of students is false. The perception that alcohol abuse and binge drinking is the social norm creates a problem because even if the perception is false it is perceived as reality with students and it is then the rationale for students to abuse alcohol because it is perceived that it is socially normal and acceptable to binge drink and abuse alcohol. As Student B pointed out, “A lot of times they don’t know why they are doing it {heavy drinking}, it’s the norm and they don’t realize that it’s not the norm so if they realize why they binge drink and maybe and see that it’s not an acceptable form of behavior that type of class will limit their binge drinking”. Overall, the perception of the students regarding alcohol abuse locally is in line with the information from the review of

the literature in Section 1. As Student E stated, “A lot of times they {students} don’t know why they are doing it, it’s the norm and they don’t realize that it’s not the norm so if they realize why they binge drink and maybe and see that it’s not an acceptable form of behavior that type of class will limit their binge drinking”. As the students interviewed observed, the problem of alcohol abuse begins with the incoming freshmen who follow what they think is the social norm. Student B stated, “Normally among college students, I said this to myself, everybody else is doing it, we’re in college, it’s time to do it, to binge drink. However, I wouldn’t classify it among ourselves as binge drinking. We would say we’re going out to have fun, we’re going out partying. But definitely the perception is that everybody does it”. The social norm among the students is that alcohol abuse and binge drinking is an acceptable and is a normal behavior. For some students the perception of binge drinking is perceived as just “partying” perhaps to make it more acceptable.

A major source of the problem of alcohol abuse and binge drinking are the students who are members of fraternities and sororities, especially if the house is off-campus where the college or university has little or no jurisdiction. Heavy drinking is a usual occurrence. As Student B stated, “Fraternity parties, sorority parties, heavily in most Greek Life and normal house parties on all campus housing. Not so much at the campus bars, more at house parties, stuff like that”. The problem of alcohol abuse in fraternities and sororities is especially experienced by the students who are underage drinkers and are new to the higher learning environment as Student E stated, “I would say

often. Especially the ones that are 21 and younger. Because in their mind it is such a big thing they can't believe that they have access to it. The ones that are 21 and older, "ok there's alcohol here, that's great". But the younger ones are really much more involved with the alcohol process". Heavy drinking with underage drinkers is a problem even with those students who are not members of fraternities and sororities. Often the problem starts with the freshmen students.

An awareness of the intensity of the problem by freshmen

It was the perception by all the students interviewed that most of the underage freshmen who are underage drink heavily and at times binge drink. Student E stated, "... I remember, especially coming in freshman year, there were always those people for two weeks of school that were oh so excited, 'I'm in college. I get to go and drink now'. Then they would find those places off-campus and to the apartments here. Since most of the ones I know have done that, some are in school and some are not in school". One of the main reasons freshmen in particular abuse alcohol is the lack of parental supervision and for those who dorm it is the first time they are living away from home. Another reason is that the freshmen are trying to fit into a new higher learning environment and they are dealing with academic and social pressures. Student A stated that, "I feel like it's more prevalent among college freshman because they are getting out of their safety zone of their parent's home and they can go off on their own and they don't know their own limits. They'll go to their first college parties and they're trying to fit in with everyone else". There is also the perception from the students that for some of the

freshmen the problem of alcohol abuse was brought from high school as Student A stated, “They carried it over and made it worse”. There was no awareness regarding the familial reason for alcohol abuse.

Low self-esteem as a motivation for alcohol abuse

From the perception of the students there is an agreement that low self-esteem may be a factor in alcohol abuse, which is also the belief of the professional stakeholders. However, the students and the professional stakeholders see it from two different perspectives. The professional staff may determine if low self-esteem is a motivating factor of alcohol abuse by dealing with the students directly through judicial means or counseling sessions. The perceptions of the motivation of low self-esteem to abuse alcohol from the perspectives of the students were from eyewitness observations. Student F stated, “I have seen for myself that low self-esteem is definitely a reason there is binge drinking, especially to fit in look cool. But the stupid thing is that the students who binge drink or are always drunk make fools of themselves and when they are told about it from other guys or girls when they aren’t drunk or hung over, their self-esteem gets even lower and they drink again. So it is a circular thing that keeps happening until they flunk out or have to get help.”

The students all agreed that those students who have low self-esteem begin to drink to better socialize in order to fit in, to help develop their new higher learning identity, and to cope with the social and academic pressures. Student E pointed out, “I think low self-esteem and peer pressure go hand-in-hand because your friends who you

think are cooler than you are saying, 'Yeah. Let's go out and drink' you're more likely to say, 'Yeah, that's a great idea' because you want to impress them. You have to have that feel better about your self and to make other people think you are better than you believe you are. So, I think it definitely plays a factor".

High self-esteem is a motivation for alcohol abuse

There was also agreement among the students that high self-esteem can be a factor in alcohol abuse. Student A stated, "Some people with high self-esteem are generally arrogant and drink or binge drink because they think they are above everyone else and they can do anything and if they get caught they can get away with it". Students who have high self-esteem may even be a bad influence on students who have normal or low self-esteem, as student E pointed out, "I think so because, I think they can encourage the ones that have low self-esteem to have alcohol abuse. They may not have it themselves, but they may encourage the ones that they see as inferior to them".

Unlike the professional stakeholders who had two different perspectives that high self-esteem can be a negative motivator to binge drink and a positive motivator not to drink, the students saw high self-esteem as a negative motivating force to abuse alcohol. Student F stated that, "It seemed like it was always the guys that thought they were bigshots, like the fraternity guys or the football guys, that made it look like if you didn't keep up with the drinking or "party hardy" you weren't going to get invited or party with the big guys. Low self-esteem and high Self-esteem are big reasons to binge and get drunk. Sometimes you can't tell the difference between who has the low and who has the

high self-esteem”. All the Students who were eyewitnesses to the alcohol and binge drinking believed that self-esteem was a definite motivator in alcohol abuse and it didn’t matter if it was low or high self-esteem.

The benefits of a program that contains a curriculum that integrates self-esteem as a motivator to stop or curb alcohol abuse

There was agreement with the students that an on-campus long-term program that contains an alcohol abuse academic education curriculum that integrates self-esteem as a motivator to stop or curb drinking would have positive benefits. They also see an immediate need for such a program. This was different somewhat from the professional stakeholders who seemed more cautious to totally agree to the benefits, which is reasonable due to their positions. One reason may be that the students who are eyewitnesses to the abuse have a more accurate perception of the problem and see the motivation to take the course as a viable option. Student E stated, “Being told, for example, that you either go to this course or you’re kicked out of the college, or you’re kicked out of residence life. They have the option of, ‘if you don’t want this to happen, which is significantly worse, you can go to this course’”. Student A thought the motivation to attend the class was even more basic and stated, “Their choice would be to be dismissed, but because of outside choices {to get] jobs and their parents and their family {pressures} and high expectations, they would be forced to stay”.

There was not as much interest in what was in the actual program curriculum as with the professional stakeholders. The interest of the students was that something had to

be done immediately and the mere fact of a curriculum that would possibly make a student realize the problem and its impact on their lives would be beneficial. Student E stated, "Some of these students need to be told from a higher source that they have a problem and there may be an option rather than get dismissed. Just telling them that not everyone binge drinks and they need help to stop would be good and the longer the course the better". The basic feeling of the students is that something had to be done to address the problem as soon as possible and help the continual abuser and a curriculum that integrates self-esteem may curb or stop the alcohol abuse and binge drinking.

Summation of the Project Data

The basic information found from the project data was somewhat similar among the professional stakeholders and the students. The students' perceptions are based on eyewitness accounts of the alcohol abuse and binge drinking and the problem is very prevalent and needs to be addressed as soon as possible. The perception of all the students is that alcohol and binge drinking is the social norm and in turn, their perspective is that drinking is part of the higher learning experience. Also, the students who participate in the Greek Life are most vulnerable to alcohol abuse and binge drinking. This is in complete contradiction to the perspective of the professional stakeholders who state that the social norm is false and the perspective that most students abuse alcohol is not correct.

The professors and the chairperson perceptions of alcohol abuse and binge drinking are not eyewitness accounts of the abuse, but rather incidental and informal

“here say” conversations, as well as suspicions of alcohol abuse that may attributed to poor academic performance. The perception of the Vice-President of Student Development, the judicial officer, and the counselor is perceived from working directly with students who have a problem and who are being reprimanded or treated for alcohol abuse. The perspective of Vice-President of Student Development, the judicial Officer, and the counselor is that although the problem is serious, there are not a majority of students who are experiencing the problem. Their perspective is directly related to their interaction with students inside the university environment and the students’ honesty (or dishonesty) in regards to the motivations of their alcohol problem, the Vice-President of Student Development, the judicial officer, and the counselor’s training and experiences, and the knowledge of the problem from the data of studies.

The professional stakeholders agreed that self-esteem may be a positive and negative motivating force of alcohol abuse. The professional stakeholders and students also agreed that low self-esteem is a negative motivation. Some professional stakeholders stated that high self-esteem could be both a positive and negative motivating force for alcohol abuse. However, the students all agreed that high self-esteem is only a negative motivating force for alcohol abuse.

The professional stakeholders and the students agreed that a program that contains an academic educational curriculum that integrates self-esteem may help students curb or stop alcohol abuse. However, the professional stakeholders would want to examine the curriculum closer and there was discussion of when the curriculum should be

implemented and if it could or should be part of an existing program. The professional stakeholders also questioned the willingness of students to participate in an academic curriculum that integrates self-esteem, even if it means dismissal from school. And although the students stated that an on-campus long-term that contains an alcohol abuse academic education curriculum may help students who have a problem with alcohol, the motivating force to participate in the curriculum is dismissal from school and having to find a job, as well as parental pressure. The only way to determine the efficacy of the curriculum is to implement the academic curriculum with willing candidates and conduct summative and evaluative evaluations.

On-Campus Alcohol Abuse

The vice president of student development, the judicial officer, and the counselor discussed Acme college's alcohol abuse regulations and student code of conduct that addresses the problem of alcohol abuse and binge drinking. There is also a mandatory computer program, AlcoholEDU, for incoming freshmen. A special monitored dorm is on-campus for students who have a continual problem with alcohol abuse. The vice president of student development, the counselor, and the judicial officer all stated that there is no on-campus long-term academic education program that deals with alcohol abuse. Depending on the infraction, the continual abuser will be referred to the judicial officer for disciplinary measures, a counselor for evaluation, or if a more serious and longer treatment is necessary may be referred out to an off-campus agency, or even expelled from the college.

Reliability and Validity through Triangulation

The main goal of the data collection was to achieve reliable and valid data if the findings are to be true, useful, and credible. The strategy triangulation was used to maximize reliability and validity through triangulation, which provided collaboration of the data from different sources and perspectives (Creswell, 2013; Golafshani, 2003; Lodico et al., 2010; Merriam, 2009). Triangulation was achieved through theory triangulation, member checking, and peer review.

Theory Triangulation is the use of a professional outside the field of study being researched to offer multiple perspectives of the data. If the information from the data is interpreted the same way in spite of the professionals' different discipline, validity and reliability is established (Creswell, 2013; Guion et al., 2013). The study was reviewed by a professional outside the study who felt that the study was valid and reliable.

Member Checking, also called respondent validation, is the effort to make sure that the analysis of the information gathered from each participant is not misinterpreted. The transcripts were offered to each participant for the opportunity to clarify any misinterpretation (Creswell, 2013; Merriam, 2009), but there were no requests from any of the participants to review the completed transcripts.

Peer Review, also known as debriefing, was achieved through the involvement of the researcher's peer. I conducted peer meetings to review the data and it was determined the interpretation is free from any prejudice and there was no bias included in the interpretation of the data. Notations were made from the meetings. This was an honest

effort to illustrate the researcher's objectivity of the interpretation of the data, which is as free from any prejudices, as well as a clarification of any bias. (Creswell, 2013; Glesne, 2011).

Conclusion

An analysis of the project data revealed that alcohol abuse by students is a prevalent problem at Acme College. The project data also revealed that there is a different perception regarding the awareness of the problem between the professional stakeholders and the students. In spite of a 17% recidivism rate, the professional stakeholders acknowledged that the problem exists and it is being properly addressed. However, the students' "eyewitness accounts", and therefore their perceptions revealed that the problem is very prevalent and something should be done immediately to address the problem. The project data revealed although there are the continual alcohol abusers, there is no on-campus long-term program to address the problem. The development and availability of an on-campus long-term program that contains an alcohol abuse academic educational curriculum, may be an alternative resource to address the continual abuser who may be facing academic failure or expulsion. The student's perception, based on their eyewitness accounts of the problem, is that there is an immediate need for an on-campus long-term program to address the problem.

Section 3: The Project

Introduction

The project data revealed that locally there is a prevalent problem of alcohol abuse at Acme College and there is no on-campus long-term academic program for the continual abuser. The project also revealed that the perception of the problem is different between the professional stakeholders and the students. The students' perception of the problem is that the problem is very prevalent and needs to be addressed as soon as possible, while the professional stakeholders acknowledged the problem and stated that it is being properly addressed.

The project data supported the development of an on-campus long-term program that contains an academic curriculum that integrates positive self-esteem as a positive motivating force to curb or eliminate alcohol abuse for the continual offender. The program may be a viable intervention for the continual abusers who are at risk of academic failure and dismissal.

Description and Goals

The goal of the project study is the development of an on-campus long-term academic program for Acme College that contains an alcohol abuse education curriculum that integrates self-esteem as a positive motivating force to curb alcohol abuse and binge drinking. The project revealed that both the professional stakeholders and the students agree that an academic program that contains an alcohol abuse curriculum (See Appendix A) that integrates self-esteem may offer an alternative resource for students who abuse

alcohol and binge drink. The academic educational program was developed as an on-campus long-term program that that could attended either as a nine week, two 90-minute classes per week program, or one 180-minute class per nine week program (depending on a student's availability).

The program curriculum is broken down into Three Modules:

Module One: Alcohol Abuse and Binge Drinking (three weeks): Objective: To understand the reasons for alcohol abuse and the acknowledgement of the serious consequences of heavy dinking in a higher learning environment, which include academic failure and dismissal, as well as the serious health issues. To also provide data that illustrates how the false perception of the social norm, which is the belief by students that abusing alcohol is an expected and accepted behavior in order to acclimate to a higher learning environment.

Module Two: Self-Concept (three weeks): Objective: To recognize the importance of a positive self-identity, and understand the importance of honest intrapersonal communication, which is the first steps to the development of healthy self-esteem and self-worth.

Module Three: Self-esteem as a Motivating Force (three weeks): Objective: To illustrate how self-esteem can be a potential positive motivating force that may break the cycle of alcohol abuse and binge drinking.

The three modules of the curriculum will be evaluated through face-to-face interviews with the participant(s) that include open-ended questions, and a confidential

attitudinal survey: The College Drinking Influence Scale (CDIS). The curriculum will also have a formative and summative evaluation conducted by the professional stakeholders in order to determine the curriculum's efficacy. The ultimate goal is to provide an alternative resource for those students who are at risk of becoming, or who already are, continual alcohol abusers.

Rationale

The rationale of the project is to utilize the positive motivating force of self-esteem in an academic discipline as an alternative intervention when traditional interventions have failed. Utilizing the transformative strategy to radically change the way the existing problem is being addressed may reveal a new theory that may emerge as a result of the exploration. Dietz and Rogers (2012) stated that transformative research is driven by ideas that challenge the status quo and the result of the research must create changes in an understanding of an existing theory. The pathways, rather than the ideas, are what are radical.

A major theme that has been revealed from the analysis of the project data challenges the "status quo", and suggests that a curriculum that integrates positive self-esteem as a motivating force may be an effective alternative and "pathway" for the student who has failed the traditional alcohol abuse education and intervention routes, as well as the person who wants to return to school after his dismissal due to his continual alcohol offender.

Review of the Literature

The information from the review of the literature found that the problem of alcohol abuse and binge drinking is a serious and prevalent problem in colleges and universities. (Cleveland, Lanza, Ray, Turrisi, & Mallett, 2011; Hevel, 2011; Hustad, Pearson, Neighbors, & Borsari, 2014; Kanney, Hummer, & LaBrie, 2010; Patrick, Schulenberg, Martz, & Maggs, 2014; Turrisi & Ray, 2009). Over the centuries, as with today, it is considered a “right of passage” to drink heavily in higher learning environments (Dietz, 2008; Hevel, 2011). However, the information from the review of the literature found that this so-called “right of passage” has regressed to high school and alcohol abuse has impacted the problem when students enter college and university (Hustad et al., 2014; Kenney, Hummer, & LaBrie, 2010; Mallett, Marzell, & Turrisi, 2011; White & Swartzwelder, 2009). Extensive research was conducted to trace a closer source of the problem of alcohol abuse by college and university students. The review of the literature found that sometimes the problem of alcohol abuse may be rooted in a familial environment where alcohol is abused and students who abuse alcohol at an early high school age and continue through college may become alcoholics (Braitman et al., 2009; Hustad, Pearson, Neighbors, & Borsari, 2014; Kenney et al., 2010).

Research found that colleges and universities are well aware of the problem and have implemented educational awareness programs and policies and mandatory computer interactive programs such as, AlcoholEdu. In spite of these efforts the heavy drinking and alcohol abuse is still prevalent (Lovecchio, Wyatt, & DeJong, 2010; Wodarski,

Macmaster, & Miller, 2012; Ziegler-Hill, Madson, & Ricedorf, 2012). Although administrators and educators have been searching for an efficacious alternative to the traditional alcohol abuse programs, an alternative program that takes a different route may offer a partial solution.

To help determine if an alternative program would be effective in curbing or stopping alcohol abuse, a qualitative instrumental case study and an analysis of the project data determined whether the theory that is being explored is proven to be true, or it is proven to be false (Creswell, 2013; Glesne, 2011; Lodico et al., 2010; Merriam, 2009). This strategy may radically change the way the existing problem that is being addressed is currently viewed and understood and a new theory may emerge as a result of the exploration. The transformative research method helped determine that an academic curriculum that integrates self-esteem as a positive motivating force may be an alternative resource to traditional alcohol abuse interventions and educational programs. The integration of an academic curriculum that integrates self-esteem, which may be transformative, is the exploration of the unknown (Dietz & Rogers, 2012).

To also help direct and support the case study, the results of a study by Zeigler-Hill et al. (2013) found that there is a connection between individuals who possess high levels of contingent self-esteem (an individual's self-worth is strongly determined by whether that individual meets their goals and standards) and alcohol abuse when an individual's goals and standards are not met. There are also more reported negative consequences by people with high levels of contingent self-esteem due to alcohol abuse

when compared to those individuals with noncontingent high self-esteem. Studies also found that low self-esteem, especially among male students, (Ziegler-Hill et al., 2012) is a predictor for alcohol dependence, and additional literature indicates that self-esteem may be a motivating force when dealing with alcohol abuse and binge drinking among college and university students (Faloon, 2011; Neuman et al., 2009; Ziegler-Hill et al., 2012). A study by Bushman, Moeller, and Crocker (2011) found that college students who have great value of their self-esteem, value their self-esteem more than drinking alcohol. These findings further supported the exploration of a connection of between the positive motivation of self-esteem and alcohol abuse (Bushman et al., 2012; Ziegler-Hill et al., 2012). These findings may also offer an alternative resource to curb alcohol abuse that is longer lasting than conventional programs if self-esteem is integrated into an academic curriculum. However, extensive research did not find a resource such as an academic curriculum that integrates the positive self-esteem that may curb or stop alcohol abuse. However, the information from the review of the literature, and the project data that is a result of interviews with the university professional stakeholders (Vice-President of Student Development, Judicial Officer, Counselor, Department Chair, and Professors) and the Students (freshman, sophomore, junior, and senior, and Greek Life representatives) that had been gathered and analyzed, supports the justification of the development and implementation of a nine-week academic curriculum the integrates the motivation of self-esteem in order to curb or stop alcohol abuse in colleges and universities.

Implementation

The nine-week curriculum will be reviewed by the stakeholders to determine its efficacy and also determine if it can be accepted into the university's culture and then implemented. There would be three ways that the curriculum may be utilized:

The *continual offender* will be mandated to attend the course by the university's judicial officer or counselor as an alternative to dismissal due to the student's continual offenses of the university's alcohol abuse regulations and policies.

The *student who is at risk of academic failure* due to behavior attributed to alcohol abuse determined by the student's academic advisor or counselor may also benefit from the curriculum. Sections of the curriculum can be integrated into the existing freshman orientation program that all freshmen are mandated to attend.

A *pilot project of the curriculum* could also be conducted for summative and evaluative evaluations in order to increase efficacy and acceptance. The curriculum could then be revised and modified according to the results of the evaluations.

Potential Resources and Existing Supports

The cost of the instruction of the course and support materials would be provided by the university, under the jurisdiction of the student development office within the university. Information about the purpose and availability of the course would be created through an awareness program that would include articles in the school newspapers; informational brochures; and the inclusion in other media such as the school television

and radio stations, as well as bulletin boards throughout the campus. All academic departments would receive materials regarding the course and contact information.

Potential Barriers

A potential barrier to be aware of is the confidentiality of the student who would be taking the course and who is under the legal drinking age. Students will be made aware that if they are under the legal drinking age there will be no legal ramifications if they take the course. Students will be informed of this through the curriculum awareness efforts.

An additional barrier is the timing of the curriculum as an intervention. The project data found that all the participants were unanimous in their opinion that such a curriculum would be an effective intervention resource for the continual offender. However, there were different opinions in regards to when it should be implemented. The professional stakeholders suggested that it would be difficult to mandate students to attend a nine-week course, even if they were facing academic failure. The data from the students suggested that most students would take the course through parental pressure, and also as a more favorable alternative to having to find a full time job.

The professional stakeholders suggest that the curriculum would be most effective for the student who had left school either voluntarily or was dismissed, and after a year or so wants to return to the university. This was of a particular belief of the counselors who are involved with students who want to return. They believed that the majority of the people that wanted to return and were dismissed because of alcohol abuse would attend

the course. The counselors believed that an intervention resource that integrates self-esteem would also indicate a returning student's sincerity and commitment to succeed.

Proposal for Implementation and Timetable

After the professional stakeholders and the college approve the curriculum, the implementation can be immediate. The timetable of implementation may vary depending on the determination of the judicial officer or the counselors. The course can be conducted concurrently during the semester or throughout the summer. One student or many students can attend the course. Two or three sections of the course may be implemented at different times for flexibility. For example, an evening course can be offered for those students who are still academically active in the university, or for those people who work during the day and would like to return to the university.

Roles and Responsibilities of Student and Others

The attendance, participation, and class work is mandatory in order to successfully complete the course curriculum. Student evaluations will be conducted after the completion of the three modules of the curriculum to determine a student's performance and his successful completion of the course. The student's progress will be shared with the professional stakeholders who mandated the student to attend the course.

Project Evaluation

The program will be evaluated by a two-tier evaluation process: the student and the professional stakeholders. The evaluations will be ongoing and will be both formative and summative.

Students will evaluate each of the three modules of the course through face-to-face interviews that include open-ended questions after the completion of each module of the course with the instructor. This will also include a confidential attitudinal survey that will be given at the beginning of the course and after each module utilizing, The College Drinking Influence Scale (CDIS). The Test Format: A Likert –type 5-point scale: College Drinking Expectations Scale and Drinking Values ranging from 1 (strongly disagree) to 5 (strongly agree); Psychosocial Drinking Inventory items ranging from 1 (extremely unlikely to drink) to 5 (extremely likely to drink).

Professional stakeholders will be given a student’s progress report from the instructor after the completion of each of the three modules of the course. Based on each student’s progress report, stakeholders will determine whether or not to interview the student depending on their progress. The stakeholder will evaluate the efficacy of the course to determine if modifications are needed (formative) and the success of the course (summative) after the completion of the course based on the evaluations by the students and meetings with the instructor. The evaluations of the course by the stakeholders will be ongoing.

Implications Including Social Change

Local Community

The success of the project has far reaching benefits to everyone involved in the university culture directly and indirectly:

For the *student* who benefits from attending the course his successful completion will benefit him in more ways than being able to continue on his academic course. It may increase his self-esteem, which in may have a positive affect on his health and well being. It will also enable a person who has left the university due to alcohol abuse the opportunity to return and successfully complete his academic career.

The *student's family* will also benefit from the successful performance in the course because it may alleviate unneeded stress within the student's familial relationship. It may also have indirect benefits in the way the family views alcohol consumption and may create a new awareness of alcohol abuse.

Instructors who observe students who improve their academic performance will offer the instructor a resource for other students who are failing and who are suspected of alcohol abuse. That student can now be directed to a counselor for intervention.

The *administrators* will have an alternative to offer students rather than dismissing students that have failed existing interventions.

Community partners who are other colleges and universities on a local and national level can share the curriculum if it is successful.

Far-Reaching

The information from the review of the literature suggests that many incoming college and university students bring their problem with alcohol abuse with them from high school (Hustad, J.T., Pearson, Neighbors, Borsari, 2014; Quinn & Fromme, 2011; White & Swartzwelder, 2009). The literature also finds that fifty percent of high school

students who bring their drinking problems to college or university come from families that already have an alcohol abuse problem (Braitman et al., 2009). The data concur with the review of the literature. The nine-week curriculum could be modified for all high school seniors, or for those students who have been identified as having a problem with alcohol abuse and are at risk of taking it with them to college and university.

Conclusion

The review of the literature in Section 1 illustrated the serious and prevalent problem of alcohol abuse among college and university students. The project data revealed that there is a prevalence of alcohol abuse at Acme College. The data also revealed that the perception of the problem is different between the professional stakeholders and the students. The professional stakeholders acknowledge that the problem exists and it is being properly and accordingly addressed. The eyewitness accounts of the students are that the problem is very prevalent and should be addressed immediately. In spite of the perception of the problem from the professional stakeholders and the students there is no long-term program.

The review of the literature suggested that self-esteem could be a positive motivating factor in addressing alcohol abuse. Analysis of the project data and information from the review of the literature gave credibility and justification for a program that contains an educational curriculum that integrates self-esteem as a positive and motivating force. Implementing and evaluating the program is the only true method to determine its efficacy and value, but there are some barriers and limitations.

Section 4: Reflections and Conclusions

Introduction

The project data revealed that there is the prevalence of alcohol abuse at Acme College, which is underscored by a recidivism rate of 17%. The project data also revealed that there is no on-campus long-term alcohol abuse program and students are sometimes referred to outside agencies, depending on the severity of the problem. An on-campus long-term program that contains a educational curriculum that integrates self-esteem and is designed to address academic failure due to alcohol abuse, may be an alternative to interventions for continual offenders who have failed traditional interventions. Although there are strengths, limitations, and recommendations of the program, until the program is implemented and evaluated the efficacy of the program cannot be determined.

Project Strengths

An alcohol abuse program that contains an academic curriculum that integrates self-esteem as a positive motivator to curb and stop alcohol abuse has many strengths and may offer an alternative resource. The project's main strength is that the program contains an academic educational alcohol abuse curriculum that will be taught within the framework of Mezirow's (1997) *transformative learning theory*. The goal of using Mezirow's theory is to change the *frame of reference* of abusing alcohol through changing, "...expectations, perceptions, cognition, and feelings" (Mezirow, 1997, p. 5). This program will attempt to change the *habits of mind, point of view, and perceptions* (Mezirow, 1997, p. 5) of the learner when dealing with alcohol abuse and binge drinking.

Recommendations for Remediation of Limitations

There are two definite limitations to the curriculum:

The *primary limitation* of the curriculum is to identify the proper candidate to take the course. The literature finds that students who abuse alcohol and are incoming freshman begin the abuse in high school. Fifty percent of those who abuse alcohol in high school and continue as an incoming freshman come from families who live an environment where alcohol abuse exists. By the time that this student is mandated for the course he may already be an alcoholic and would not be a good candidate because more serious measures would have to be taken to treat that type of student. The *remediations of the limitation* would be found through the implementation of the curriculum. The first limitation is the student who is already an alcoholic would have to be remediated after initial treatment of an alcoholic student who is being treated by a professional alcohol abuse program. The curriculum may be integrated as an independent adjuvant to an already established alcoholic abuse treatment, such as Alcoholics Anonymous.

A *secondary limitation* of the curriculum was identified during the project data gathering and subsequent analysis, which is when to implement the curriculum. The stakeholders suggested that it would be difficult to mandate students to attend a nine-week course, even if the students were facing academic failure. The data from the students suggested that most students would take the course through parental pressure, and also as a more favorable alternative to leaving the university and having to find a full time job. The *remediation of the second limitation* would have to be discovered through

the actual implementation of the curriculum. The curriculum would have to be implemented as a mandated course as a last step before a student is dismissed from the college or university, and as a mandated step before a student who was dismissed due to alcohol abuse is allowed to return.

The remediations may be addressed by conducting a pilot program that could evaluate any weakness in the curriculum and modify the program in order to strengthen the curriculum. This would be accomplished by both a formative and summative evaluation of the curriculum. The results of the evaluations would then be analyzed to determine the most efficacious modifications of the curriculum.

Scholarship

The scholarship that was developed during the doctorate study process was exhaustive, frustrating, and an extremely satisfying life changing experience. The necessary work and skill required to satisfy every aspect of the doctorate process pushed me beyond what I believed I was capable of achieving. One of the most important results of the doctorate process is the opportunity to develop a project that may potentially change a student's life. However, the work and scholarship does not stop with the development of the project. It is the implementation and evaluation of the project that will hopefully be the most exciting aspect of the doctorate process.

Project Development and Evaluation

The development of a project is an exciting journey with many "ups and downs". A project is only as valuable as its potential effectiveness to address a serious problem.

To have an idea to develop a project is not a sufficient reason for its development. Intensive and thorough research is required to first determine if there is a problem, and then there must be the research to justify the development of a project that will potentially address the problem. Once the research justifies the development and subsequent implementation of a project, the development does not stop with its implementation. The formative and summative evaluation is an ongoing process that will determine the project's efficacy and the justification to continue the implementation of the project. It is also an important learning process, in spite of whether the curriculum succeeds or fails.

Leadership and Change

A successful leader is one who is able to change and adapt. In the education field in order to be an effective teacher, a teacher has to also be learner. As a university professor I was able to apply what I was learning with my own students as I was progressing with the doctoral process. Because I already integrate self-esteem into my intra-personal communication classes, I changed my curriculum by integrating more recent research regarding self-esteem, critical thinking, and self-identity, which expanded my expertise. Positive and productive change and also listening to students and adapting any changes based on the current classroom culture maintain successful leadership.

Analysis of Self as Scholar

As I look back and now analyze myself as a scholar I can see there was the necessity to push myself beyond what I believed I was able to achieve academically.

There were many challenges that had to be overcome to continue work through the doctoral process. I discovered the real meaning of tenacity very early on when I realized that failure could not be an option. There were many challenges, the first one being that the doctoral experience was not taught in the traditional classroom environment or academic process. A grasp of technology was a pre-requisite, which eventually became a blessing rather than a chore. In order to succeed a big challenge was to change my writing style from a journalistic to a scholarly style. Discipline and time management was a necessity in order to meet deadlines and maintain a high-grade level. I had to use every talent and educational resource I had available, I otherwise would not have ever discovered.

There were many other advantages and benefits that the doctoral experience yielded. For example, achieving scholarship inspires humility and at the same time confidence. I realize that important personal investments are necessary to continue as an effective educator. The achievement of a doctoral degree is an important element in providing effective education. Effective and thorough research is the cornerstone in the achievement of the doctoral degree in education, and the benefits the doctoral process provides will not only benefit me personally, but will also benefit my students.

Analysis of Self as Practitioner

As a practitioner, it has given me an increased scholarship that I can offer my students. The doctoral degree will also offer me opportunities as a practitioner that would not otherwise be available. It also given me a little more empathy for the students'

frustrations, but at the same time increasing my commitment to not only teaching my students, but inspiring them to go beyond what they believe are their own limitations.

Analysis of Self as Project Developer

Probably the most exciting aspect of the doctoral process is the development of the project, which is the curriculum that addresses alcohol abuse and binge drinking of college and university students. I had to push myself beyond what I thought were my limitations by developing a curriculum that will hopefully have social change beyond my university. The curriculum also has the potential to be modified for high school students before entering college or high school.

The implementation of the curriculum in high school may be even more effective in changing the alcohol abuse behavior of students before the problem becomes serious both academically and life threatening. The development of the academic curriculum may offer me other opportunities to develop programs or academic curriculum opportunities that would not otherwise been available. During the development of the academic curriculum as a result of the project data there are other programs that may benefit students in different areas of education.

The Project's Potential Impact on Social Change

As my research has found, alcohol abuse among high school and college and university students is becoming a growing problem that exceeds the traditional educational programs and interventions, especially for the continual abuser. A curriculum that can potentially change the behavior of the continual abuser may not only

have a positive effect academic performance, but may also have positive life changing outcomes. The potential impact on social change goes beyond alcohol abuse. If the curriculum is successfully implemented and if it can be determined that the integration of self-esteem was an effective element, the results can be modified beyond the problem of alcohol abuse. The integration of self-esteem into academic programs can be applied to students who have low self-esteem and are experiencing bullying, poor academic habits, binge eating and binge dieting, and other negative aspects that affect a student's academic performance.

Implications, Applications, and Directions for Future Research

If the curriculum is successfully implemented there will be many things that can be learned through the evaluation of the curriculum. The nine weeks of the course will offer a longitudinal study versus an educational program that is a few hours or an intervention that is only a few days. If successful, a very important application of the curriculum should be a curriculum that can be modified for high school students where the research found that is where the problem with alcohol abuse begins for many students.

It is important to realize that success of the curriculum will also determine the impact of self-esteem, which can be applied to other aspects of education. The positive motivation of self-esteem may have a positive impact on students who are suffering academically because of their low self-esteem. It can also be modified for anti-bullying programs. The potential of positive motivation may also go beyond high school and

college. The proper implementation of self-esteem into the lower grades, when negative self-esteem is first experienced by students, may give students a more solid foundation in order to overcome the challenges of high school and college. The positive impact of positive self-esteem motivation has the potential for many social changes.

Conclusion

Reflecting on the experience of the doctoral process and the development of the project has been life changing, to say the least. An important aspect of the experience was not only the achievement of scholarship, but also the realization that my work has just begun. An exciting achievement, which is almost as a secondary benefit, is the educational discipline that was necessary to achieve my doctoral goals. That discipline can be used for my future research, writing, and project development. But probably the most exciting aspect of the development of the project was the analysis of the project data.

The project data confirmed my belief that Acme College has a prevalent alcohol abuse problem. The development of an on-campus long-term program that contains an alcohol abuse academic curriculum that integrates self-esteem as a positive motivating force, which may help the continual abuser may also have serious positive social change. The project's positive potential may go beyond the integration of self-esteem as an alcohol abuse intervention, but also the potential of integrating the positive motivation of self-esteem in other academic disciplines both locally and nationally. That is a very exciting prospect.

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Appendix A: A Program Designed to Address Academic Failure due to Alcohol Abuse

Section 1: The Problem

Introduction

The information from the review of the literature found that alcohol consumption among the young adult population, whether in athletics or academics, is associated with a combination of anxiety, poor self-esteem, depression, pressure to excel, and an inability to withstand peer pressure (Borden et al., 2011; Cleveland, Lanza, Ray, Turrisi, & Mallett, 2012; Fallon, 2011; Goldsmith, Tran, Smith, & Howe, 2009; Hayes, Curry, Freeman, & Kuch, 2010; Martens et al., 2008). Alcohol abuse educational intervention programs are helpful in reducing heavy drinking, however the effects of the interventions are sometimes short-lived and the drinking continues, which increases alcohol related injuries (Carey, Henson, Maisto, & De Martini, 2010; Mundt, Zakletskaia, & Fleming, 2009). Although colleges and universities are aggressively addressing the problem, the problem still exists and additional ways of dealing with the problem are needed (Cleveland et al., 2012). Researchers found that if given a choice, heavy college drinking students preferred face-to-face brief motivational interventions that reduced their drinking, over computer-delivered interventions (Carey, De Martini, Prince, Luteran, & Carey, 2013).

Researchers found that low self-esteem, especially among male students, (Ziegler-Hill, Madison, & Ricedorf, 2012) is a predictor for alcohol dependence, and additional literature indicates that *self-esteem* may be a motivating force when dealing with alcohol

abuse and binge drinking among college and university students (Fallon, 2011; Neuman et al., 2009; Ziegler-Hill et al., 2012). Addressing the motivation of self-esteem may offer an alternative resource to curb alcohol abuse that is longer lasting than conventional programs (Ziegler-Hill et al., 2012).

Section 2: Audience

The audience for this program is adult college and university students who are challenged with an alcohol abuse problem in spite of their prior experience with educational alcohol abuse programs. These include repeat offenders and students who need further educational reinforcement and who are at risk of serious health issues and poor academic performance or failure.

Section 3: The Program Outcome

The goal of this program is to help heavy drinking students who are repeat offenders to stop the heavy consumption of alcohol and binge drinking. To achieve this goal, the program outcome is broken down into three Modules:

Module One: To understand the reasons for alcohol abuse and serious consequences of heavy dinking in a higher learning environment, which range from health issues, poor academic performance, to intentional and unintentional fatalities.

Module Two: To recognize the importance of a positive self-identity, and understand that honest intrapersonal communication can be a link to the benefits of healthy self-esteem.

Module Three: To illustrate how self-esteem can be a potential positive motivating force to curb or totally stop alcohol abuse and binge drinking.

Section 4: Theoretical Framework

The alternative resource offered in this program will be taught within the framework of Mezirow's (1997) *transformative learning theory*. The goal of using Mezirow's theory is to change the *frame of reference* of abusing alcohol through changing, "...expectations, perceptions, cognition, and feelings" (Mezirow, 1997, p. 5). This program will attempt to change the *habits of mind, point of view, and perceptions* (Mezirow, 1997, p. 5) of the learner when dealing with alcohol abuse and binge drinking.

Section 5: Program Evaluation

The three Modules of the curriculum will be evaluated before and after the completion of each module through face-to-face interviews that include open-ended questions, and an anonymous attitudinal survey: The College Drinking Influence Scale (CDIS).

Original Publication:

Fisher, Celia B., Fried, Adam L., and Anushko, and Andrea. (2007).

Development and validation of the College Drinking Influences Survey. *Journal of American College Health*, 56(3). 217-230 doi:10.3200/JACH.56.3.217-230

Test Format: College Drinking Expectations Scale and Drinking Values Scale items on five point Likert-type scales ranging from one (strongly disagree) to five (strongly agree);

Psychosocial Drinking Inventory items are rated a five point Likert-type scale ranging from one (extremely unlikely to drink) to five (extremely likely to drink).

Section 5: The Curriculum

The curriculum of this educational program is a nine-week, two 90-minute classes per week program, or a nine-week, one 180 minute class, that is broken down into three Modules:

- Module One: *Alcohol Abuse and Binge Drinking* (three weeks);
- Module Two: *Self-Concept* (three weeks);
- Module Three: *Self-esteem as a Motivating Force* (three weeks).

Each section will consist of specific topics related to the section, with lectures, scholarly papers, written and oral exercises, video presentations, and class discussions.

Module One. Alcohol Abuse and Binge Drinking: Module Objective: *To illustrate the depth and breadth of alcohol abuse and the consequences among college age students.*

Information Covered

Recent data illustrates that alcohol abuse and binge drinking is on the rise on a national level (Maggs, Williams, & Lee, 2011; Velazquez et al., 2011) and in New Jersey, the increase of alcohol abuse is exceeding the national level (New Jersey State Epidemiological Profile Substance Abuse 2008). To provide a foundation and perspective of the problem, a historical background of college heavy drinking will be discussed to illustrate the roots of the problem beginning with colonial times in America

when colleges and universities began dealing with the problem of alcohol abuse and binge drinking (Dietz, 2008; Hevel, 2011). Subsequently, the traditions of college drinking grew over the generations through the roaring twenties and prohibition, the Great Depression, the war years, up to today when the new phenomenon is mixing drinks with alcohol. Although historically times are different, the culture and result of heavy drinking has not changed (Dietz, 2008; Hevel, 2011). Alcohol abuse results in poor academic performance and failure, numerous health and mental issues, as well as unintentional and intentional fatalities.

White and Swartzwelder (2009) found that the problem of alcohol abuse and binge drinking for many college and university inbound students begins in high school and the problem of alcohol abuse and binge drinking is brought with them as a transitioning college or university freshman. For many inbound college students the problem of their heavy drinking habits that begin in high school may be the result of the influence of living in a familial environment of heavy drinking parents (Arria et al., 2008; Turrisi & Ray, 2010). Children of alcoholic parents have a higher risk of abusing alcohol and the associated negative consequences, when compared with children of parents that do not have alcoholic parents (Hussong, Huang, Serrano, Curran, & Chassin, 2012). The numbers of young adults that have been brought up by alcoholic parents are found to be more than 20 million. Labrie, Migliuri, Kanney, and Lac (2010) found that this may account for the 35% of the college and university population that come from families with a history of problematic drinking. Children of alcoholic parents drink more in high

school and have more chance of being part of the lifetime alcoholic group, than children of non-alcoholic parents. Research studies find that a family history of alcohol abuse is a well-documented risk factor for both male and female college and university freshman students (La Brie et al., 2010; Nodar, 2014). However, there are other influences that account for alcohol abuse by students who do not come from families that have a history of alcohol abuse.

The problem of alcohol abuse among college age students will be illustrated with the statistics from The National Institute on Alcohol Abuse and Alcoholism (NIAAA) which finds that 1,825 students a year die from alcohol-related unintentional injuries. College drinking is also accompanied by a litany of injuries (Hingson, Zha, & Weitzman, 2009) and illnesses (Dove & Hafliger, 2011), which also accounts for annual hospital costs in the range of \$1.2 billion for 18 to 24-year-olds who require medical treatment due to their drinking (White, Hingson, Pan, & Yi, 2011). Singleton and Wolfson (2009) relates the problem of alcohol abuse to diminished academic performance and Prada et al. (2011; 2012) shows an association of alcohol abuse and intellectual ability.

The problem of alcohol abuse and binge drinking is not related to a single reason. White and Swartzwelder (2009) found that the problem often starts with incoming 18 year old college and university freshmen who may bring already formed unhealthy drinking habits with them when they enter college or university. For those students who do not have an existing alcohol problem the transitioning to a higher learning environment may lead to depression and alcohol-related problems, which requires specialized

orientation programs that deal with alcohol abuse (Reynolds, MacPherson, Tull, Baruch, & Lejuez, 2011).

Module Two. Self-Concept: Section Objective: *To illustrate the importance of understanding the negative and positive power of self-concept, intrapersonal communications, self-identity and self-efficacy, in order to learn and change negative behavioral habits.*

Module Two will be divided into three parts:

Part One: The importance of understanding the *self-concept* as the first step to transformative learning.

Part Two: The importance of *intrapersonal communications* and the impact of *internal/external locus*.

Part Three: Understanding the importance and potential power of positive *self-identity* and *self-efficacy*.

Information Covered

Part One: *Self-concept*

Wood (2006) defines *Self* as an ongoing process that is formed and sustained through intrapersonal and interpersonal communication. It is an ever-changing system that is made up of perceptions. We see ourselves through our perceptions that develop our *self-concept* and we then evaluate ourselves through our *self-esteem* (Seiler & Beal, 2008). Part of this process is to reexamine established *habits of mind* and *point of view* (Mezirow, 1997, p. 5) to determine how we see ourselves (Mezirow, 1997). If negative

behavioral patterns are to change, we have to examine the negative experiences and grow intellectually from what we learned from those experiences (Merriam, 2004). A knowledge and understanding of our Intrapersonal communication is a key component to that process (Jemmer, 2009).

Part Two: Intrapersonal Communication

Jemmer (2009) considers *intrapersonal communication* (self-talk) as key in the development of *self-awareness*. The proper intrapersonal communication process is immensely important. We take the information from the outside world and we then determine how we filter that information, which is crucial. Understanding and becoming aware of the importance of honest self-talk, "...can produce apparently 'magical' results in the creation of unfolding, positive realities of choice" (Jemmer, 2009, p. 37). The "positive realities of choice" can be to choose to see the negative consequences of alcohol abuse and curb its abuse. However, we must first determine how we choose what influences our intrapersonal communication.

It is important to understand how our "self-talk" is influenced by our internal and external locus of control (Jemmer, 2009). Those who use an external locus of control will attribute consequences due to external circumstances and are prone to depression and anxiety. Those who use internal locus of control will attribute consequences to their own control and are less prone to negative feelings such as depression and anxiety primarily due to the fact that they take responsibility for their actions (Jemmer, 2009). This can be applied to those who blame outside sources for their alcohol abuse and do not take the

responsibility for their actions. This is made possible through honest intrapersonal communication, which can be life changing (Jemmer, 2009).

Part Three: Self-identity and Self-efficacy

Manzi, Vignoles and Remaglia (2010), found that enduring self-identity changes during life transitions, such as the transition from high school to university. The anxiety of this transition, which can result in a poor adjustment to the new situation and environment (university), can create dejected-related emotions and depression. Pre-transition desires that are positive will result in positive prospective predictors and fearful predictors would result in negative prospective predictors and negative behaviors (Manzi et al., 2010). A re-evaluation and understanding of one's self-identity through an inventory of assets and liabilities can create a better understanding of self and a better well-being.

Trucco, Connery, Griffin, and Greenfield (2010), found that a positive perception of "self" through the development of self-identity can play a role in overcoming alcohol abuse. Self-efficacy, which is the ability to create a confidence (Bandura, 1982) thus creating a better coping mechanism not to drink when in high-risk situations.

Module Three. Self-esteem. Section Objective: To illustrate the power of self-esteem when used to change human behavior.

This section will begin with the introduction of the Rosenberg Self-esteem scale. Each participant will complete the Rosenberg self-esteem scale for his personal knowledge only. The survey *will not* be shared with the instructor or the class.

Information Covered

The section will begin by factually illustrating the consequences of recent cases of alcohol abuse and binge drinking, and how self-esteem may have been a negative motivating factor. For example, in the fall of 2012, a 19-year-old Northern Illinois University freshman student died during a hazing incident that involved binge drinking (Walberg, 2012; Fox, Bergquist, Gu, & Sinha, 2010). According to the police investigating the fatality, getting the student highly intoxicated was not a random event but was preplanned. The attorney for the student's family said that the 19 year old just wanted to be "liked and accepted" (Walberg, 2012). And most recently, a local underage New Jersey college sophomore, 19, died from alcohol abuse while attending a fraternity party (Sherman, 2014). George Koob, a director at the National Institutes of Health (NIH), found that drinking in colleges and universities is increasing, as well as the number of those being hospitalized, and colleges must do more to tackle the problem (Sherman, 2014). Healthy self-esteem can help in the need for students to overcome the need to drink heavily to fit in or to be accepted.

The power of self-esteem can be a *powerful motivating force* when making personal choices and decisions. Trucco et al. (2007) found that lower self-esteem was a strong predictor for alcohol abuse and relapse. Fallon (2011) has found an association with *low self-esteem* and heavy drinking among college woman. Neuman, Leffingwell, Wagner, Mignogna and Mignona (2009) found that male students with *high self-esteem* are particularly resistant to *information* on the negative consequences of alcohol abuse, as

a result male students with *high self-esteem* are associated with a higher binge drinking frequency. Conversely male students who are open to information on strategies to curtail heavy drinking but have low self-esteem report relatively high levels of alcohol consumption (Ziegler et al., 2012). To understand the negative *and* positive motivating powers of self-esteem, the confusion over the decades regarding self-esteem will be explained and discussed to qualify the potential of self-esteem.

In the 1970s and 1980s self-esteem was proposed to be the answer to whatever problem a person was experiencing (Baumeister, Campbell, Krueger, & Vohs, 1987). In his book written in 1987, *How to Raise Your Self-Esteem*, self-esteem “guru” Nathaniel Branden claimed that aside from any biological problem almost every human challenge and problem can be directly connected to self-esteem. The concept of self-esteem was critically reviewed claiming that the high value placed on self-esteem was in fact not as valuable as claimed by Branden (Baumeister et al., 1987). While for years it was thought that high self-esteem was synonymous with success and happiness in all aspects of life, a search of the literature in 2003 (15,059 publications and 11,680 articles) by Baumeister et al. (2003) found that self-esteem may be more of a *personal liability* than an *asset* due to the misconception of how self-esteem is defined due to the perception of how certain people identify themselves as having high *self-esteem*, as discussed by Baumeister et al. (2003) who also stated that the concept of high self-esteem can be synonymous with arrogance. Baumeister et al. (2003) pointed out that many people with high self-esteem might exaggerate their success and good traits, and accept their good qualities along with

narcissistic, defensive, and conceited characteristics. Branden (1995) claimed that the higher the self-esteem the more chance of happiness and fulfillment and that there is no such thing as too much self-esteem as it is not possible to have too much physical health an immune system that is too powerful. But Baumeister et al. (2003) claims that what is now considered high self-esteem can be perceived as narcissistic, arrogant and destructive. The data revealed by Baumeister et al. (2003) suggests that the hopes that many had for the benefits of self-esteem were far fewer than expected.

Branden (1995) refers to low-self esteem and poor self-esteem synonymously as a fear of reality. Baumeister et al. (2003) data illustrates that people who experience low self-esteem may also experience depression, externalizing behavior and delinquency. The common denominator of both Branden (1995) and Baumeister et al. (2003) studies is that the concept that self-esteem may be a stronger predictor of human behavior than previously thought.

With the conclusion of this three-week Module, the course will conclude by taking the Rosenberg Self-esteem scale and compare before and after completing the course. The Rosenberg self-esteem scale and comparison is for the participant's personal knowledge only. The surveys *will not* be shared with the instructor or the class unless it is voluntary on behalf of the class participant.

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Appendix B: Informed Consent Cover Letter

An Invitation to Participate

Date: _____

_____ You are invited to participate in an research project entitled: *A Curriculum Designed to Address Academic Failure due to Alcohol Abuse*

Project Researcher: Frank Plateroti (Cell Phone: 973-769-1121; Email: pcomminc@optonline.net)

Please review the following if you are interested in participating in this important research study.

Project Description: Local New Jersey colleges and universities are exceeding the national trend of alcohol abuse, which results in an increase of negative health and safety issues, and the risk of academic failure and expulsion. Although studies have shown that educational awareness programs are effective for some students who abuse alcohol, studies also show that for the repeat offender the effects are short lived. Seriously concerned college and university administrators and counselors are looking for additional resources to address the problem of repeat offenders. There are recent studies that have found self-esteem to have a motivational effect on alcohol abuse. To help determine the motivations of alcohol abuse by second time offenders, this qualitative instrumental case study will utilize a transformative research design by gathering information through deep inquiry face-to-face interviews. The participants will vary from specific stakeholders (e.g. instructors, department chairs, counselors, official in the student development office) to students in varying categories (e.g. freshmen, sophomores, seniors, fraternities). If the

data illustrates a positive theoretical basis that self-esteem is a motivating factor when dealing with alcohol abuse, an educational program with a curriculum that addresses the motivation of self-esteem may be an effective resource for the repeat offender. The result of this educational curriculum may create social change by helping the student who is a repeat offender avoid academic failure or expulsion.

Procedure: In order to participate in the project the interviews will be recorded with your written consent, and no personal identifiers will be used during the interview, to ensure your anonymity. Please feel free to say as much or as little as you want. You can decide not to answer any question, or to stop the interview any time you want. The tapes and transcripts will become the property of project. If you so choose, the recordings and recording-transcripts (or notes taken during the interview) will be kept anonymous without any reference to your identity, and your identity will be concealed in any transcripts and reports written from the interviews. The transcripts will be available for you to review the transcripts for accuracy. All the recordings, transcripts, notes, and consent forms will be kept within a locked file cabinet.

Risks: There are no known risks associated with participation in the study.

Benefits: It is hoped that the results of this study will benefit the college and university community by providing greater insight into the problem of college and university alcohol abuse and binge drinking by creating and implementing a curriculum based on the positive motivation of self-esteem.

Cost Compensation: Participation in this study will involve no costs or payments to you.

Confidentiality: All information collected during the study period will be kept strictly confidential. No publications or reports from this project will include identifying information on any participant without your signed permission, and after your review of the materials. All the recordings, transcripts, notes, and consent forms will be kept within a locked file cabinet. If you agree to join this study, please sign your name on the following page.

Appendix C: Informed Interview Consent Form

Project: A Program Designed to Address Academic Failure due to Alcohol Abuse

You are invited to take part in a research study that will help determine the usefulness of an educational curriculum that will address academic failure due to alcohol abuse. Seriously concerned college and university administrators and counselors are looking for additional resources to address the problem of alcohol abuse and repeat offenders. This research project is inviting instructors, department chairs, counselors, as well as students in varying categories (e.g. freshmen, sophomore, junior senior, and fraternities and sororities) to participate and offer their personal perceptions of the problem. This form is part of a process called “informed consent” to allow you to understand this study before deciding whether to take part. Declining or discontinuing will not negatively impact your relationship with me.

This study is being conducted by a researcher named Frank Plateroti, who is a doctoral student at Walden University. I am a professor at William Paterson University, but this study is a separate role.

Background Information:

Studies have found that self-esteem can be a motivating force with alcohol abuse and binge drinking. The findings of this study will help determine if an educational curriculum that focuses on self-esteem can be effective in curbing or stopping alcohol abuse among college and university students, and thus avoid academic failure.

Procedures:

If you agree to take part in this study you will be asked to participate in a face-to-face, approximately 30 minute, recorded interview.

Here are some sample questions:

1. In your experience how prevalent is alcohol abuse -- which includes binge drinking -- among the students?
2. Do you think that alcohol abuse is more prevalent among university freshman?
3. How does alcohol abuse affect a student's academic performance?
4. How prevalent are the repeat offenders?

Voluntary Nature of the Study: This study is voluntary. Everyone will respect your decision of whether or not you choose to be in the study. No one at William Paterson University will treat you differently if you decide not to be in the study. If you decide to join the study now, you can still change your mind later. You may stop at any time.

Risks and Benefits of Being in the Study: Being in this study would not pose a risk to your safety or wellbeing. Your participation will help determine if an educational curriculum that focuses on the motivation of self-esteem and can be effective for helping students who are repeat offenders overcome their problem with alcohol abuse and avoid academic failure.

Payment: Participation in this study will involve no costs or payments to you.

Privacy: Your participation will be kept confidential by the researcher. The researcher will not use your personal information for any purposes outside, including within the university, of this research project. Also, the researcher will not include your name or

anything else that could identify you in the study reports. All data and materials (audio tapes, transcripts, field notes, signed consent forms) will be kept in a locked file cabinet by the researcher in a secure location. Data will be kept for a period of at least 5 years, as required by the university.

Contacts and Questions: You may ask any questions you have now. Or if you have questions later, you may contact the researcher personally by phone: 973-769-1121. If you want to talk privately about your rights as a participant, you can call Dr. Leilani Endicott. She is the Walden University representative who can discuss this with you. Her phone number is 612-312-1210. Walden University's approval number for this study is 07-17-14-0085789 and it expires on July 16, 2015.

The researcher will give you a copy of this form to keep.

Statement of Consent:

I have read the above information and I feel I understand the study well enough to make a decision about my involvement. I understand that I am agreeing to the terms described above.

Printed Name of Participant: _____

Date of Consent: _____

Participant's Signature _____

Researcher's Signature _____

Appendix D: Interview Protocol and Questions

Interview Protocol: After the participant agrees to the terms of the interview and signs the consent form, a mutually agreeable time will set for the recorded interview. A private and comfortable meeting place will be agreed upon to perform the recorded interview, which will be approximately 30 to 45 minutes.

Interview Categories:

1. One University Counselor
2. Three General elective professors
3. One General elective department chair
4. One Vice-President of Student Development
5. One Freshman student
6. One Sophomore student
7. One Junior Student
8. One Senior student

1. Interview Questions: University Counselor

1. In your experience how prevalent is alcohol abuse -- which includes binge drinking -- among the students?
2. Do you think that alcohol abuse is more prevalent among university freshman?
3. How does alcohol abuse affect a student's academic performance?
4. How prevalent are the repeat offenders?
5. What is the university's recourse for repeat offenders?
6. How often are students asked to leave or flunkout of the university due to repeat alcohol abuse offenses?
7. Do you think that low self-esteem plays a role in alcohol abuse?
8. Do you think high self-esteem plays a role in alcohol abuse?
9. Do you think that a curriculum that includes the positive motivation of self-esteem would be effective in helping to curb or stop alcohol abuse?

2. Interview Questions: General elective professors

1. In your experience how prevalent is alcohol abuse -- which includes binge drinking -- among the students?
2. Do you think that alcohol abuse is more prevalent among university freshman?
3. How does alcohol abuse effect a student's academic performance?
4. How often are students asked to leave or flunkout of the university due to repeat alcohol abuse offenses?
5. Do you think that low self-esteem plays a role in alcohol abuse?
6. Do you think high self-esteem plays a role in alcohol abuse?
7. Do you think that a curriculum that includes the positive motivation of self-esteem would be effective in helping to curb or stop alcohol abuse?

3. Interview Questions: Department chair

1. In your experience have you witnessed alcohol abuse -- which includes binge drinking -- among the students?
2. If so, do you think that alcohol abuse is more prevalent among university freshman?
3. If so, how does alcohol abuse affect a student's academic performance?
4. How prevalent are the repeat offenders?
5. In your department, how often are students asked to leave or flunkout of the university due to repeat alcohol abuse offenses?
6. Do you think that low self-esteem plays a role in alcohol abuse?
7. Do you think high self-esteem plays a role in alcohol abuse?
8. Do you think that a curriculum that includes the positive motivation of self-esteem would be effective in helping to curb or stop alcohol abuse?

4. Interview Questions: Vice-President of Student Development

1. In your experience, how prevalent is alcohol abuse -- which includes binge drinking -- among the students?
2. Do you think that alcohol abuse is more prevalent among university freshman?
3. How does alcohol abuse affect a student's academic performance?

4. How prevalent are the repeat offenders?
5. What is the university's recourse for repeat offenders?
6. How often are students asked to leave or flunk out of the university due to repeat alcohol abuse offenses?
7. Do you think that low self-esteem plays a role in alcohol abuse?
8. Do you think high self-esteem plays a role in alcohol abuse?
9. Do you think that a curriculum that includes the positive motivation of self-esteem would be effective in helping to curb or stop alcohol abuse?
10. Do you think that alcohol abuse is prevalent within fraternities and sororities ?

5. Interview Questions: Freshman and Sophomore students

1. In your experience how prevalent is alcohol abuse -- which includes binge drinking -- among the students?
2. Do you think that alcohol abuse is more prevalent among university freshmen?
3. How does alcohol abuse affect a student's academic performance?
4. How prevalent are the repeat offenders?
5. What is the university's recourse for repeat offenders?
6. How often are students asked to leave or flunk out of the university due to repeat alcohol abuse offenses?
7. Do you think that low self-esteem plays a role in alcohol abuse?
8. Do you think high self-esteem plays a role in alcohol abuse?
9. Do you think that a curriculum that includes the positive motivation of self-esteem would be effective in helping to curb or stop alcohol abuse?
10. Do you think that alcohol abuse is prevalent within fraternities and sororities ?

6. Interview Questions: Junior and Senior student

1. How prevalent do you think alcohol abuse is-- which includes binge drinking -- among the students?
2. Do you think that alcohol abuse is more prevalent among university freshmen or seniors?
3. How does alcohol abuse affect a student's academic performance?

4. How prevalent are the repeat offenders?
5. What is the university's recourse for repeat offenders?
6. How often are students asked to leave or flunk out of the university due to repeat alcohol abuse offenses?
7. Do you think that low self-esteem plays a role in alcohol abuse?
8. Do you think high self-esteem plays a role in alcohol abuse?
9. Do you think that a curriculum that includes the positive motivation of self-esteem would be effective in helping to curb or stop alcohol abuse?
10. Do you think that alcohol abuse is prevalent within fraternities and sororities ?