Hospitality Students Perceptions About High Risk Behaviors in Relation To Destructive Behaviors And Decision Making

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HOSPITALITY STUDENTS’ PERCEPTIONS ABOUT HIGH RISK BEHAVIORS IN RELATION TO DESTRUCTIVE BEHAVIORS AND DECISION MAKING
HOSPITALITY STUDENTS’ PERCEPTIONS ABOUT HIGH RISK BEHAVIORS IN RELATION TO DESTRUCTIVE BEHAVIORS AND DECISION MAKING

A thesis submitted in partial fulfillment of the requirements for the degree of Master of Science in Human Environmental Sciences

By

Boris Roslov
University of Arkansas
Bachelor of Science in Human Environmental Sciences, 2009

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University of Arkansas
This study investigated hospitality students’ perceptions regarding alcohol consumption and personal actions related to high risk behaviors. Those behaviors included: sexual encounters and binge drinking, and their effect on academic tasks and performance. The study investigated whether the hospitality student who is employed full time consumes alcohol at a higher level than a hospitality student does that is not employed full time.
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DEDICATION

I dedicate this document to all those that thought they couldn’t, tried anyway, and figured out they accidently did.
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CHAPTER 1

INTRODUCTION

The issue of adolescent teen and young adult drinking has received attention in recent years. Binge drinking is defined as drinking alcoholic beverages with the primary intention of becoming intoxicated by heavy consumption of alcohol over a short period of time (Dowshen, 2009). In 1993, the Harvard School of Public Health’s College Alcohol Study found that binge drinking was a prevalent activity among American college students. Two in five (44%) attending 4-year colleges drank at this level or higher (College Alcohol Study, 1993). There is currently no worldwide consensus (International Center Alcohol Policies, 2010) on how many drinks constitute a "binge"; but, the term is often taken to mean consuming five or more standard drinks for male or four or more drinks for female in about one hour (CAS, 2004). This is called the "5/4 definition". However, these numbers vary significantly based on weight and numerous other variables (Binge Drinking, n.d.). Formerly, most countries defined the term as a multi-day, heavy drinking session during which the drinker neglects usual responsibilities and otherwise behaves recklessly (Shchukit, 1998)(ICAP, 2010). Other, less common definitions are based on blood alcohol concentration (BAC). For example, the National Institute on Alcohol Abuse and Alcoholism recently redefined the term "binge drinking" as any time a drinker reaches a peak BAC of 0.08% or higher (Center for Disease Control and Prevention, 2008) as opposed to some arguably arbitrary number of drinks in an evening. One study showed that university students often have numerous, different definitions of "binge drinking" depending on their drinking habits, with drinkers having significantly higher consumption definitions than nondrinkers (Students Have Different Definition for Binge Drinking, 2000).
According to the Substance Abuse and Mental Health Services Administration (SAMHSA, 2008), young adults age 18 to 22, enrolled full time in college, were more likely than their peers who were not enrolled full time to use alcohol in the past month, binge drink, and drink heavily. The Office of Juvenile Justice and Judicial Prevention (2005) stated an estimated 75% of alcohol consumed by adults in the United States is in the form of binge drinks. Binge and heavy use rates for college students were 43.6 and 17.2% respectively, compared with 38.4 and 12.9% for 18 to 22 year olds not enrolled full time in college (SAMSHA, 2008). Out of those listed by SAMSHA (2008), 57.8% of full-time college students aged 18 to 20 consumed alcohol in the past month, 40.1% engaged in binge alcohol use, and 16.6% engaged in heavy alcohol use. SAMSHA (2008) continues by stating; each year, drinking by college students, ages 18-24, contributes to an estimated 1,700 student deaths, almost 600,000 injuries. Underage drinking is strongly associated with many health and social problems among youth including alcohol-impaired driving, physical fighting, poor school performance (Miller, Naimi, Brewer, & Jones, 2006). There are approximately 1.5 billion episodes of binge drinking among persons aged 18 years or older in the United States annually (Naimi, Brewer, Mokdad, Serdula, Denny, & Marks, 2003). Although this high risk behavior does not always end in a catastrophic occurrence, it may lead to detainment, arrest, and an eventual conviction for a Driving While Intoxicated (DWI), Public Intoxication (PI), Disorderly Conduct (DC,) or another alcohol related offense.

During heavy binge drinking, students forgo normal judgment and decision making that would come with a sober mind and act out some decisions that are not sound. Alcohol is a depressant and as such it impairs motor skills, impedes speech, and slows reaction time. In addition to this, alcohol lowers inhibitions and allows students to make a mistake they may regret
in the future or as early as the time that they become sober enough to appreciate the consequences of their actions. See Figure 1 for Effects of High Risk Drinking.

*World Health Organization, The Alcohol Use Disorders

Hospitality students today are in an increasingly difficult position. They must match the industry standards for entertainment, socialization, and interaction with customers while maintaining the highest standards of academic achievement. They must be able to attain good
grades while at the same time having full-time employment, usually during the late-night hours. In an environment that includes smoking, drinking, drug use, and negative social interactions as a result of binge drinking, hospitality students are strained to the outer ranges of peer pressure. In an industry that encourages consumption of alcohol for profit, the hospitality student must balance academic achievement with profit driven performance to sell large quantities of alcohol to patrons that may already be legally intoxicated.

**Purpose of study**

This study investigated hospitality students’ perceptions regarding alcohol consumption and personal actions related to high risk behaviors. These behaviors included: sexual encounters and binge drinking, and their effect on academic tasks and performance.

**Problem Statement**

The definition of binge drinking for the purpose of this study was the consumption of alcohol which results in a blood alcohol content of >.08. While the study of alcohol consumption among college students continues to be a “productive area of research”, there were limited studies focusing on hospitality students who consumed alcohol on a regular basis and were between the ages of 18 to 22 years old. Binge drinking can result in various destructive behaviors including by not limited to: alcohol-impaired driving, physical fighting, poor school performance, and the deterioration of relationships. The most common of these destructive, high risk behaviors spreading through the 18 to 22 year old range is binge drinking. There was limited research documenting college age hospitality students’ high risk behaviors resulting from alcohol consumption and as a result: poor academic performance.
Research Questions

1) What is the hospitality students drinking profile in relation to employment in the hospitality industry?

2) According to students’ perceptions, are university faculty tolerant of hospitality student’s consumption of alcohol at levels that may impair academic performance?

3) Are demographic variables such as gender and age associated with different levels of alcoholic consumption?

4) Do hospitality students feel they can stop drinking once started?

Limitations of Study

It was assumed that participants answered the questionnaire honestly and accurately, were knowledgeable enough about the issue of alcohol consumption in regard to their status as students in the hospitality programs at their designated schools. It was also assumed that the participants would complete the questionnaire objectively.

The research was limited in scope due to the following factors:

- The present study was comprised of college students in hospitality programs at selected universities. Therefore the results could not be generalized beyond this population.
- There was no way to ascertain whether the responses represented the true opinion of all college students.
- Drinking more drinks was not associated with a higher likelihood of poor decision making. It was possible that a progressive loss of judgment after consuming more drinks was counteracted by a greater awareness of impairment, because the
sensation of impairment was generally attained at or above the number of drinks used to define binge drinking (Midanik, 1999).

- Students who were not hospitality majors might have been included in the research even though the study was targeted towards upper classman to correct for this variable.

**Definition of Terms**

The following key terms and definitions were used in this study.

1. **Binge drinking**- For women, 4 or more drinks during a single occasion. For men, 5 or more drinks during a single occasion (CDC, n.d.)
2. **High Risk Behavior**- Behavior that may lead to immediate criminal risk as well as short and long term health risks.
3. **Excessive drinking**- includes heavy drinking, binge drinking or both (CDC, n.d)

**Summary**

This study went into detail about past research as well as general information regarding alcohol consumption and its effects on hospitality students. The research was focused on alcohol, as well as the most common guidelines for generally accepted safe servings of alcohol. To better explain the implications and consequences of drinking as it relates to high risk behavior, student led organizations will be briefly explained. In addition to peer reviewed articles, the University of Arkansas’ *The Traveler (2010)* recently published a special edition dedicated to informing the student body about recent news and events contributing to drinking. A student on the University of Arkansas campus was believed to have been coerced by his “big brother” (a Greek fraternity
equivalent of mentor and older member of the fraternity) to consume enough alcohol to reach an intoxication blood alcohol level of almost .60.

According to RU AWARE (2010), the standard accepted level for death by alcohol consumption for half the population is .40 BAC. A yearly federally mandatory publication released by the University of Arkansas’ Police Department titled The Jeanne Clery Disclosure of Campus Security and Campus Crime Statistics Report was analyzed for content related to drinking and driving and the locations of incidents according to official police records. This report also contained activities and programs that the University of Arkansas promotes and sponsors to better prepare incoming and current students to avoid alcohol related problems. This report can be utilized at other universities.
CHAPTER 2

LITERATURE REVIEW

Alcohol

An alcoholic beverage is a drink that contains ethanol; commonly called alcohol. Alcoholic beverages are divided into three general classes: beers, wines, and spirits. Alcoholic beverages are consumed in most countries. According to the International Center for Alcohol Policies (ICAP), each nation has laws that regulate their production, sale, and consumption. In particular, such laws specify the minimum age at which a person may legally buy or drink alcohol. The minimum age varies between 16 and 25 depending on the nation and the type of drink. Most nations set their minimum drinking age at 18 (ICAP, n.d.).

The production and consumption of alcohol occurs in most cultures of the world, from hunter-gatherers to nation-states. Alcoholic beverages are often an important part of social events in all cultures. In many cultures, drinking plays a significant role in social interaction — mainly because of alcohol’s neurological effects (Arnold, 2005). Initially, alcohol generally produces feelings of relaxation and cheerfulness, but further consumption can lead to blurred vision and coordination problems. Cell membranes are highly permeable to alcohol, so once alcohol is in the bloodstream it can diffuse into nearly every biological tissue of the body. After excessive drinking, unconsciousness can occur and extreme levels of consumption can lead to alcohol poisoning and death (a concentration in the blood stream of 0.40% will kill half of those affected) (RU Aware, 2010). Unfortunately, due to this neurological effect and partial immobilization of the basic reflexes, operating any heavy machinery or motorized vehicles can pose a grave danger to the operator, the passengers, and those around the driver.
Alcohol is a psychoactive drug that has a depressant effect. A high blood alcohol level is usually considered to be legal drunkenness because it reduces attention and slows reaction speed. Alcoholic beverages can be addictive, and the state of addiction to alcohol is known as alcoholism (American Medical Association, 2011).

Alcoholic beverages that have lower alcohol content (beer and wine) are produced by the fermentation of sugar- or starch-containing plant material; beverages of higher alcohol content (spirits) are produced by fermentation followed by distillation.

Beer is the world's oldest (Arnold, 2005) and most widely consumed (Volume of World Beer Production, 2010) alcoholic beverage, and the third most popular drink overall after water and coffee (Nelson, Naimi, Brewer, and Wechsler, 2005). It is produced by the brewing and fermentation of starches which are mainly derived from cereal grains — most commonly malted barley; although wheat, corn and rice are also used. Alcoholic beverages which are distilled after fermentation, fermented from non-cereal sources such as grapes or honey, or fermented from unmalted cereal grain, are not classified as beer (Lichine, 1987). Most beer is flavored with hops, which adds bitterness and acts as a natural preservative. Other flavorings, such as fruits or herbs, may also be used. The alcoholic strength of beer is usually 4% to 6% alcohol by volume (ABV), but it may be less than 1% or more than 20%. Beer is part of the culture of various nations and has acquired social traditions such as beer festivals and pub culture, which involves activities such as pub crawling and pub games.

Wine involves a longer (complete) fermentation process and a long aging process (months or years) that results in an alcohol content of 9%–16% ABV. Sparkling wine can be made by adding a small amount of sugar before bottling, which causes a secondary fermentation
to occur in the bottle.

Unsweetened, distilled, alcoholic beverages that have an alcohol content of at least 20% ABV are called *spirits* (Lichine, 1987) Spirits are produced by the distillation of a fermented product; this process concentrates the alcohol and eliminates some of the congeners. Spirits can be added to wines to create *fortified wines*, such as port and sherry (Lichine, 1987)

**Binge Drinking**

Binge drinking is the modern definition of drinking alcoholic beverages with the primary intention of becoming intoxicated by heavy consumption of alcohol over a short period of time (Dowshen, 2009) or, alternatively, a consistent amount of alcohol over a long period of time. It is a kind of purposeful drinking style that is popular in several countries worldwide, and overlaps somewhat with social drinking since it is often done in groups. However, it is also done alone as a method of self medication. The exact degree of intoxication, however, varies between and within various cultures that engage in this practice. Formerly, most countries defined the term as a multi-day, heavy drinking session during which the drinker neglects their usual responsibilities and otherwise behaves recklessly (Shchukit, 1998)(ICAP, 2010).

There is currently no worldwide consensus (ICAP, 2010) on how many drinks constitute a "binge"; but, the term is often taken to mean consuming five or more standard drinks for a male or four or more drinks for a typical adult female in about one hour (CAS, 2004). This is called the "5/4 definition." However, these numbers vary significantly based on weight and numerous other variables (Binge Drinking, n.d.). Other, less common definitions are based on blood alcohol concentration. For example, the *National Institute on Alcohol Abuse and Alcoholism* recently redefined the term "binge drinking" as anytime a drinker reaches a peak
BAC of 0.08% or higher (CDCP, 2008) as opposed to some arguably arbitrary number of drinks in an evening. One study showed that university students often have numerous different definitions of "binge drinking" depending on their drinking habits, with drinkers having significantly higher consumption quantity definitions than nondrinkers (Students Have Different Definition for Binge Drinking, 2000). Whatever the numerical definition used, rapid consumption (shots, chugging, or drinking games) is often implied when the term is used informally, since a drinker can remain relatively sober if the 4 or 5 drinks are spread out widely over the course of a long evening.

In the United States, sometimes the term "extreme drinking" or "industrial-strength bingeing" is used to describe a more severe form of single-evening binge drinking; it is often defined as ten or more standard American drinks on a single occasion; sometimes as many as eight drinks for women (Hitti, 2006) (From Binge Drinking to Extreme Drinking, 2010) If done over 2 to 3 hours, a typical adult would have a peak BAC of at least 0.20%

Social drinking refers to casual drinking in a social setting without the intent to get drunk. Social drinking plays an important, but not traditional, role in such social functions as dating and marriage. For example, a person buying another a drink at a singles’ bar is a gesture that they are interested in the other person and often initiates conversation, or at least flirtation. Bad news is often expressed through a drink, whilst good news is often celebrated by having a few drinks - for example, a drink to "wet the baby's head" is used to celebrate a birth. Buying someone a drink is a gesture of goodwill, and can be used as an expression of gratitude or mark the resolution of a dispute or the end to an aggressive relationship. The physical act of going to a comfortable setting with friends is a large part of sharing a drink in the above situations; but the fact remains that people have found as many reasons to meet for a drink as they have to meet for
Alcohol Safety Programs

The Serve Safe Alcohol program is the most comprehensive well known and accepted alcohol safety program available on the market today (Why Serve Safe Alcohol, 2010). The author claims the course is based on a model of success, real world expertise, and the most current applicable laws. For this program, a class is divided into multiple sections that require the completion of a quiz after each section. After the completion of all quizzes, a test moderator administers a test that requires a minimum course test grade to pass. Upon completion of the course and a satisfactory grade, the participant is issued a completion certificate that is accepted in most reputable corporate and local companies requiring verification of an alcohol training course. Some researchers question the credibility of such courses and their long term sustainable reliability. In the quick turnaround and poor retention of today’s restaurants and bars, it is difficult to maintain a training program that will stay implemented for any length of time while maintaining the effectiveness of the program’s intentions. According to Dina Berta of the Nation’s Restaurant News, the Peoples’ Report, a Dallas, Texas based firm that tracks human resource data, the Annual Turnover Rate (ATR) for their members was 109% for employees and 29% for management. Johnsson’s study aimed to examine whether the decrease in the mean BAC and the rowdy social atmosphere reported after one-month remained stable in the five-month assessment. Johnsson’s 2009 study of responsible beverage programs suggests that even with training the BACL did not remain lower in the student bars with trained bar tenders in the five-month follow-up. There was no significant difference between the experimental and the control condition, indicating that the significant effect of the training program shown in the one-month follow-up assessment was not stable. (Johnsson, 2009)
Although no data exists, the researcher suggests that, with adequate training within a specified time period and mandatory training programs for new personnel, it would be possible to lower BAC levels and increase safe serving practices in restaurants and bars.

**Student Led Organizations**

Students Against Destructive Decisions (SADD) is a 27-year-old student founded organization committed to empowering young people to lead education and prevention initiatives in their schools and communities. SADD is a national organization that uses peer-to-peer methods of preventing destructive decisions. The SADD mission statement is to provide students with the best prevention and intervention tools possible to deal with the issues of underage drinking, drug use, impaired driving, and other destructive decisions.

**University of Arkansas’ Newspaper The Traveler**

The University of Arkansas publishes and circulates a daily campus wide newspaper comprised of several sections. The newspaper is tailored to the university students, faculty and staff. Although not heavily followed, the March 17th, 2010 edition of The Traveler brought alcohol consumption on the University campus to light. In preparation for Spring Break, the University newspaper attempted to warn students of potential alcohol problems and what can be done to avoid them. Eight articles, titled: “Cheers!”, “City, UA police combat underage drinking”, “Campus alcohol offenses on the rise, reports say”, “Officials promote safe alcohol consumption”, “Bar ownership comes with responsibility”, “Spring break publicity encourages promiscuity, study says”, “Spring break ruins some cities’ reputations”, “Vacation brings pressure to drink”, and “Alcohol violation sting”, were included in this special edition of the paper. All these articles offer insight into a University student’s mindset for Spring Break and
alcohol consumption because *The Traveler* is written by students for students. Most notable is Lindsey Pruitt’s (2010) article, “Alcohol Violation Sting”. The article states that students were notified by both word-of-mouth and electronic mediums that there would be a DWI Sting in effect on Friday, March 12th, 2010, in the downtown bar district. Although it could not be independently verified, Pruitt suggested that the police force was increased from the standard 15 police officers to 34. The researcher found this passage most notable:

“It is more than a common fact that drinking and driving is hazardous and that avoiding it is always the best idea even if you feel fine and able to drive. Still, there have been a few times, after a couple drinks, I have gotten into my car and driven home. Why? Maybe because I don’t want to be one of those girls who shacks. Maybe because I don’t want to spend money on the cab fee. Maybe because Safe Ride doesn’t always come when I expect or because I’ll get a ticket if I stay. For whatever reason, mostly because I just enjoy the comfort of my own bed, I’ve gone ahead and driven home and, for now, it has worked out for me; I haven’t been stopped. That doesn’t mean I won’t end up like some of my friends, unlucky. The idea here is that one text message stopped me from partying at all because I was aware of the Sting, but that’s only because I knew it would only be for one night and then it would be over. My question here is if police are worried about drunk driving, why do they think one random Sting will solve the trick?” (Pruitt, 2010)

**Hospitality Students’ Future Prospective Employment**

There is no definitive research on the hospitality student’s career choices or perspective employment, but it is important to note that Nowlis (1996) has stated that hospitality education
must undertake a comprehensive curriculum reform to better serve the hotel and restaurant industries on the threshold of the third millennium. Lashley (1999) states that ever since hospitality degree programs were first enacted, they have been under almost constant criticism from hospitality management practitioners. This may suggest that the hospitality student is placed under stressful situations, and required to balance the commitments of academics, work, and social interactions. If the students coming out of upper education institutions are failing to meet the burden of today’s hospitality industry, there must be factors contributing to this phenomenon. Jogaratnam and Buchanon (2004) state that a large proportion of students at present must work one or more jobs to help pay for college or university expenses while attempting to balance curricular and program demands. They go on to state that “most hospitality programs also require the completion of internships, academic service-learning components, cooperative education placements, and/or practicum as a part of their degree requirements”.

Although other campus majors require an off campus commitment to fulfill their degree requirements, hospitality majors differ in the fact that the student sometimes must be placed in environments that could create a negative influence and place unneeded stressors on the students. Heavy alcohol consumption and drug use is prevalent among today’s entry level, low retention rate, labor intensive, low paid jobs in which students must partake. Dunkel-Schetter and Lobel (1990) state that among this population, stress may be a major contributor to the high incidence of substance abuse, eating disorders, depression, and attrition from college.

Jogaratnam and Buchanon (2004) go on to state that for those employed in the hospitality industry, the nature of transactions in most service industries, and especially hospitality work, may contribute to a lack of control, increased ambiguity and uncertainty within the work place. Sarabakhsh (1989) reported that hospitality operations rank high on the list of stressful
environments for both managers and employees.

The claim is frequently made that hospitality students and employees in the hospitality industry drink at higher levels than their non-hospitality peers and coworkers. This research will attempt to find evidence to support Borchgrevink’s (2010) Alcohol Consumption Among Hospitality Students and Hospitality Employees study that found in a general sense that hospitality students and hospitality employees consume alcohol at higher rates than students and employees with different affiliations. The current completed research does not concentrate on hospitality students in the United States and is only generalizable to Scandinavian populations. Borchgrevink (2010) used the Alcohol Use Disorders Identification Test (AUDIT) developed by Babor, Higgins-Biddle, Saunders and Monteiro in 2001 to replicate a study by Larson and colleagues in 1991, 1994, and 2003, concentrating on alcohol consumption among hospitality and service employees. The AUDIT has been found to be reliable and valid in determining with specificity a diagnosis for high risk, harmful, and hazardous drinking among college and non-college populations. The test scores are on a scale of 0-40 with a score of 8+ indicating hazardous and harmful alcohol use. In 2001, Babor, et. al, (2001) indentified four risk zones within the AUDIT and created their association interventions. A score of 0-7 is rated as a Low Risk Drinker and this person should receive general alcohol education. A score between 8 and 15 represents a Medium Risk for alcohol abuse and this person should receive simple advice on the reduction of alcohol consumption. A score of 16 and 19 represents High Risk and this person should receive alcohol reduction education in addition to brief counseling. Subjects scoring above 20 on the AUDIT are at Very High Risk and should be referred to a specialist for diagnosis and potential treatment (Babor, et. al, 2001).

Using the AUDIT, Borchgrevink found that in a survey of 84 Scandinavian college
students, separated into four groups by their educational concentrations, that students enrolled in Lodging, Food, and Beverage majors consumed alcohol at levels approximately three times higher than educational majors (7.67 Lodging, 7.85 Food and Beverage, 2.28 Education, 6.82 from other majors).

Unlike the Scandinavian data, the United States data does not specify alcohol consumption by major. There are studies that concentrate on consumption for Greek Life affiliations but do not subdivide by major specifics. In a study of 989 undergraduate students, Fleming, Barry, and MacDonald (1991) found that 29% of students met the criteria for alcohol abuse. Among those that misused alcohol, 92% reported having one or more blackouts and 49% said their families objected to their drinking (Fleming, Barry, and MacDonald, 1991). In addition, Fleming, Barry, and MacDonald (1991) reported a mean score of 9 on the AUDIT and further reported that 25% drank more than 6 drinks on a single occasion at least once peer week, 15% were involved in an injury during drinking, 12% reported a monthly blackout, 12% had received advice to cut down or eliminate drinking, 10% felt guilty about drinking at least monthly, 4% could not stop drinking once they started, 2% failed to fulfill responsibilities due to drinking and less than 1% needed an alcoholic beverage in order to feel better.”

For this study, the researcher also asked questions relating to alcohol consumption and its relationship to academic performance. Although there was no definitive research on the correlation of alcohol consumption to academic performance, some suggested there was a relationship between alcohol consumption and class attendance. For example, in the 1999 College Alcohol Study (CAS, n.d.; Wechsler, et. al, 2000), a mail survey based on a national representation of students (n = 14,138) it was found that 62.5% of students who “binge drank” reported failure to appear to class and 46.3% reported that they had fallen behind in their school
work as a consequence of their drinking. Also, Presley and Pimentel (2006) found in a sample of
28,774 students that “heavy drinkers” were far more likely than “non-heavy drinkers” to report
that they had missed class (64.4% vs 11.9%) and that they had performed poorly on a test or
other project (40.2% vs 6.8%). Some suggested there was a direct correlation between alcohol
consumption and grade point average. Wolaver (2002) found that intense alcohol use lowered
GPA both directly and indirectly by depressing daily study hours, and the association between
drinking and academic performance was stronger for students younger than age 21 than for those
21 and older.

It seemed evident that younger collegiate students have had the hardest time adjusting to
life at college and a commitment to an industry with such high demands. Jogaratnam and
Buchanon (2004) stated that freshman seemed to face greater stressors than students at
subsequent levels. The study goes on to state that full time students showed greater exposure to
stressors than part time students. This is not surprising as freshman students are placed into an
environment that is much different than that of high school and home; and, full time students
must commit more time to academic endeavors.

These stressors may lead hospitality students into destructive behaviors. Borchgrevink
(2010) stated that those working in hospitality consumed alcohol at higher rates and were at
higher risk of hazardous and harmful alcohol consumption that those who worked elsewhere.
Borchgrevink (2010) went on to raise a question of whether there were interpersonal similarities
among students and practitioners of hospitality business or structural elements across hospitality
organizations and cultures.

There was conflicting data on consumption differences for females and males, but
according to Jogaratnam and Buchanon (2004), there were significant differences in alcohol consumption with respect to gender. The researchers suggest that this may be due in part to there being significantly more females than males in the hospitality industry.
CHAPTER 3

METHOD

This was a descriptive correlation study using survey methodology to examine factors that related to drinking by hospitality students and their interpretation of alcohol consumption, binge drinking and high risk behavior. The specific research questions centered in this study as source information from the population was:

1) What is the hospitality students drinking profile in relation to employment in the hospitality industry?

2) According to students’ perceptions, are university faculty tolerant of hospitality students’ consumption of alcohol at levels that may impair academic performance?

3) Are demographic variables such as gender and age associated with different levels of alcoholic consumption?

4) Do hospitality students feel they can stop drinking once started?

Research Design

Planning and development for the research began in Spring 2010 and continued through Spring 2011. During that time a review of literature was conducted and data collection procedures were determined. A stable, valid, and peer reviewed set of questions was duplicated from the Alcohol Use Disorders Identification Test (AUDIT) which was developed by Babor, Higgins-Biddle, Saunders and Monteiro in 2001 combined with researcher designed survey questions. An Institutional Review Board approval form for research involving human subjects
was submitted to the Institutional Review Board. The approval was accepted and approved on April 19th, 2011.

**Population**

The population selected for analysis was students at randomly selected 4-year universities offering 4-year hospitality programs. The study sample was self-selected and participation was not mandatory; selection of participants is based on enrollment in upper division courses requiring prerequisites in the hospitality concentration. By surveying students within the hospitality industry, the study was better able to collect applicable data representing the target population.

**Data Collection Techniques**

The data was collected by instructors on Tuesdays, Wednesday or Thursday classes to maximize attendance and participation in the survey. The instructor informed the class that participation was voluntary and all responses would be held in strict confidence. The data would not contain names, or tracking information of any student other than the data needed to compile a demographic representation. After completion, the students would place the surveys in a pre-postage envelope that was in the instructor’s possession. When all surveys were completed, the envelope was sealed and shipped to the researcher at the University of Arkansas. When the data collection was complete, the data was imported in the Statistical Package for Social Sciences (SPSS, 2011). The respondents were assured that their answers would be kept confidential. After data collection and the data input procedures were completed, the survey data was destroyed.

**Instrument**
The self–administered questionnaire (See appendix A) was created from the information obtained from the literature review, AUDIT Survey, and focus–group. Furthermore, a pilot study (N=10) of this questionnaire was conducted among hospitality educators and industry practitioners to test the content validity and clarity of the questionnaire as well as the ease of use and estimate of time required to complete it.

The focus group consisted of ten participants: five hospitality educators and five hospitality industry practitioners. The five hospitality educators were associates of the research from two different hospitality programs located in the United States. The five hospitality industry practitioners were selected from various hospitality establishments. Revisions were made to the questionnaire based on the recommendations of the focus group.

In order to test the content validity of the survey, a pilot study of ten participants was conducted. The ten participants were acquaintances of the researcher and agree to participate in the pilot test. Upon corrections, the researcher distributed the survey.

The questionnaire was divided into three sections as well as an additional comments or suggestions segment. The sections of the questionnaire were: (1) questions related to drinking frequency, (2) demographics, and (3) questions related to binge drinking and activities and the status of hospitality enrollment. The three sections employed multiple choice questions of measurement.

Survey questions were a combination of questions designed by the researcher and the AUDIT survey. The AUDIT was found to be reliable and valid in determining with specificity a diagnosis for high risk, harmful, and hazardous drinking among college and non-college populations. This study did not utilize the grading scale developed for use with the AUDIT since
not all questions were used. Some questions from the AUDIT were omitted because this study was not concentrating on determining the level of alcohol abuse, but instead the difference of alcohol consumption between hospitality students and their non-hospitality peers. Questions duplicated from the AUDIT test included on this survey were questions 11-20.

Data Analysis

The data was compiled and analyzed to answer the previously listed research questions. The collected data was analyzed using descriptive statistics, percentages, frequencies, ANOVA, and t-tests. Data was coded and analyzed with the Statistical Package for Social Sciences (SPSS Inc, 2011). The second section of data analysis involved a demographic profile of the respondents. Demographic data from the questionnaires was tabulated using frequencies and percentages.

Content Validity

The ideal in any scale is to “generate a score that reflects true differences in the characteristic one is attempting to measure, without interference from irrelevant factors” (Churchill, 1996, p. 402). Any measurement instrument that accurately measures what it was intended to measure may be considered valid. Validity refers to the relationship between a concept and its indicators. The validity of a measurement instrument is defined as the extent to which differences in scores on that instrument reflect true differences among individuals, groups, or situations from one occasion to another, rather than a constant or random error (Churchill, 2001; Cobanoglu, 2001). For this study, a panel of experts, consisting of hospitality educators and hospitality related industry professionals, reviewed the instrument and assessed it against study objectives to ensure content validity.
The panel submitted their replies during the week ending April 1st, 2011. Their collective responses were processed by the researcher to find areas that could be improved to create a more stable and valid survey. Several questions were edited for grammatical correctness as well as for content. Two questions were added to create clarification and control for students who were working hospitality students. An assessment was needed for the time commitment that hospitality students were making to extracurricular employment in addition to their standard full time academic course load.

A pilot study to establish internal consistency using the instrument was also conducted; members were randomly selected students from University of Arkansas’ School of Human Environmental Sciences.

Content validity ensures that the measurement instrument adequately covers the most important aspects of the construct that is being measured (Churchill, 1996). One way would be to search the literature and see how other researchers defined and investigated the concept. After this stage the researcher may add and delete some items from the previous instrument (Kim, 2002). This study utilized the procedures suggested by Churchill (1996) to develop an instrument that had content validity by adopting reliable and valid measures used in many previous studies.

Reliability

Reliability refers the extent to which a measurement of a phenomenon provides stable and consistent results (Carmines & Zeller, 1979). In addition, reliability refers to the ability to obtain similar results by measuring an object, trait, or construct with independent but comparable measures (Churchill, 2001). Reliability establishes an upper bound on validity because an unreliable measure cannot be valid (Pedhauzer & Schmelkin, 1991). Internal validity issues were
addressed for importance and preference scales in the instrument. Internal consistency between
the items in the measures was estimated using Cronbach’s coefficient alpha. Cronbach’s (1951)
alpha is a measure of internal consistency (reliability) generally used to assess the reliability of
items in an index. Alpha ranges from 0 to 1.0 and indicates how much the items in an index are
measuring the same thing. A generally accepted rule is that an alpha of .70 or greater indicates
acceptable internal consistency (Babbie, Halley & Zaino, : Foster, 2001). It is the most widely
used reliability measure to estimate the degree to which the items on a measure are associated.
Multiple authors (Babbie, Halley & Zaino, 200: Nunnaly, 1978) have indicated 0.70 to be an
acceptable reliability coefficient for social sciences research, but, lower thresholds are sometimes
used in literatures.
CHAPTER 4

RESULTS

Chapter 3 elaborated on the research methodologies that were used to investigate the research questions. Through the utilization of statistical analysis techniques, this chapter presents the results of the proposed research questions. These questions involved the descriptive statistics of demographics profiles and were further extended into hospitality students’ feelings about alcohol consumption and high risk behaviors in relation to destructive behaviors and decision making.

The objective of this study was to investigate hospitality students’ perceptions regarding alcohol consumption and personal actions related to high risk behaviors. These behaviors included: sexual encounters and their effect on academic tasks and performance.

The study asked the following research questions:

Research Questions:

1. What is the hospitality students drinking profile in relation to employment in the hospitality industry?
2. According to students’ perceptions, are university faculty tolerant of hospitality student’s consumption of alcohol at levels that may impair academic performance?
3. Are demographic variables such as gender and age associated with different levels of alcoholic consumption?
4. Do hospitality students feel they can stop drinking once started?
Response Rate

A total of 221 surveys were sent to 7 universities (30 each) separated into 4 quadrants across the nation; Northwest, Southwest, Northeast, and Southeast. The schools selected were: University of Arkansas, Oklahoma State University, University of Nevada at Las Vegas, Washington State University, University of Nebraska, University of New Hampshire, and University of Alabama. Of the selected schools, the University of New Hampshire failed to return the surveys in the allocated time and although included in the total survey count, an adjusted response rate was also posted in Table 2. The 221 surveys sent out produced a response rate of 172 surveys (75.34%) that were clearly legible with data suggesting an honest response. Thirty surveys were subtracted from the total dispatched in order to account for the failure to comply by the University of New Hampshire. The newly calibrated response rate was 172 surveys out of 195 returned (87.9%) see Table 3. Due to a restriction on shipping weight and cost, only 30 surveys could be mailed with a pre-paid return envelope enclosed. To accommodate for the total response failure rate by the University of New Hampshire, the researcher’s local on-site university (University of Arkansas) was asked to distribute 15 additional surveys to raise the total number of surveys as close to the Institutional Review Boards’ (IRB) granted total number.
Table 2.

<table>
<thead>
<tr>
<th>University</th>
<th>Sent</th>
<th>Returned</th>
<th>Percent Rate Return</th>
</tr>
</thead>
<tbody>
<tr>
<td>Arkansas</td>
<td>45</td>
<td>41</td>
<td>91%</td>
</tr>
<tr>
<td>Washington State</td>
<td>30</td>
<td>29</td>
<td>96.6%</td>
</tr>
<tr>
<td>Nebraska</td>
<td>30</td>
<td>20</td>
<td>66.60%</td>
</tr>
<tr>
<td>New Hampshire</td>
<td>30</td>
<td>0</td>
<td>0%</td>
</tr>
<tr>
<td>Alabama</td>
<td>30</td>
<td>29</td>
<td>96.60%</td>
</tr>
<tr>
<td>UNLV</td>
<td>30</td>
<td>23</td>
<td>76.6</td>
</tr>
<tr>
<td>Oklahoma State</td>
<td>30</td>
<td>30</td>
<td>100%</td>
</tr>
<tr>
<td></td>
<td>220</td>
<td>172</td>
<td>75.34%</td>
</tr>
</tbody>
</table>

Table 3.

<table>
<thead>
<tr>
<th>University</th>
<th>Sent</th>
<th>Returned</th>
<th>Percent Rate Return</th>
</tr>
</thead>
<tbody>
<tr>
<td>Arkansas</td>
<td>45</td>
<td>41</td>
<td>91%</td>
</tr>
<tr>
<td>Washington State</td>
<td>30</td>
<td>29</td>
<td>96.6%</td>
</tr>
<tr>
<td>Nebraska</td>
<td>30</td>
<td>20</td>
<td>66.60%</td>
</tr>
<tr>
<td>New Hampshire</td>
<td>30</td>
<td>0</td>
<td>0%</td>
</tr>
<tr>
<td>Alabama</td>
<td>30</td>
<td>29</td>
<td>96.60%</td>
</tr>
<tr>
<td>UNLV</td>
<td>30</td>
<td>23</td>
<td>76.6</td>
</tr>
<tr>
<td>Oklahoma State</td>
<td>30</td>
<td>30</td>
<td>100%</td>
</tr>
<tr>
<td></td>
<td>195</td>
<td>172</td>
<td>87.9%</td>
</tr>
</tbody>
</table>

Respondent Profile

The demographic characteristics of the respondents surveyed was different for each institution, but held valid for overall distribution of male to females in all age group categories.
A typical student surveyed from an upper curriculum class within the hospitality concentration as the selected population was found to be a Female (Table 4), Junior or Senior (Table 5), age 21 or older (table 6). The tables breakdown age groups, class status and gender of all surveyed.

Table 4.

<table>
<thead>
<tr>
<th>Sex</th>
<th>Frequency</th>
<th>Percent</th>
<th>Valid Percent</th>
</tr>
</thead>
<tbody>
<tr>
<td>Male</td>
<td>54</td>
<td>31.4%</td>
<td>31.4%</td>
</tr>
<tr>
<td>Female</td>
<td>113</td>
<td>65.7%</td>
<td>65.7%</td>
</tr>
<tr>
<td>No Response</td>
<td>5</td>
<td>2.9%</td>
<td>2.9%</td>
</tr>
<tr>
<td>Total</td>
<td>172</td>
<td>100%</td>
<td>100%</td>
</tr>
</tbody>
</table>

Table 5.

<table>
<thead>
<tr>
<th>Age</th>
<th>Frequency</th>
<th>Percent</th>
<th>Valid Percent</th>
</tr>
</thead>
<tbody>
<tr>
<td>19</td>
<td>5</td>
<td>2.9%</td>
<td>2.9%</td>
</tr>
<tr>
<td>20</td>
<td>28</td>
<td>16.3%</td>
<td>16.3%</td>
</tr>
<tr>
<td>21+</td>
<td>134</td>
<td>77.9%</td>
<td>77.9%</td>
</tr>
<tr>
<td>No Response</td>
<td>5</td>
<td>2.9%</td>
<td>2.9%</td>
</tr>
<tr>
<td>Total</td>
<td>172</td>
<td>100%</td>
<td>100%</td>
</tr>
</tbody>
</table>
Participants were asked to report how they selected the hospitality program as their academic major. The data demonstrated the finding that student’s transferred out of other majors to commit to hospitality programs at their respective universities because they were looking for the “right fit” in a major and a career.

Table 7.

<table>
<thead>
<tr>
<th>Total Surveyed Selection of Hospitality Program</th>
<th>Frequency</th>
<th>Percent</th>
<th>Valid Percent</th>
</tr>
</thead>
<tbody>
<tr>
<td>Wanted to be a hospitality major since before entry into higher education.</td>
<td>47</td>
<td>27.3%</td>
<td>27.3%</td>
</tr>
<tr>
<td>I looked at other majors and after consideration decided to go with the hospitality program</td>
<td>39</td>
<td>22.7%</td>
<td>22.7%</td>
</tr>
<tr>
<td>I chose the major after realizing that other majors are not the &quot;right fit&quot; for me.</td>
<td>68</td>
<td>39.5%</td>
<td>39.5%</td>
</tr>
<tr>
<td>I chose this major because it allows for significant social activity.</td>
<td>2</td>
<td>1.2%</td>
<td>1.2%</td>
</tr>
<tr>
<td>I am not a hospitality major</td>
<td>12</td>
<td>7%</td>
<td>7%</td>
</tr>
<tr>
<td>No Response or all the above</td>
<td>4</td>
<td>2.3%</td>
<td>2.3%</td>
</tr>
<tr>
<td>Total</td>
<td>172</td>
<td>100%</td>
<td>100%</td>
</tr>
</tbody>
</table>

Research Questions

Research question one asked: “What is the hospitality students drinking profile in relation to employment in the hospitality industry?” It was determined that the data collected from question number eleven on the survey was best suited to answer RQ1. Question eleven focused on the total amount of hours worked per week. The answers were divided into sections
that would be used to decipher whether a student worked part-time (0-10 hours per week), moderate time (11-29 hours per week), or full-time (more than 30 hours per week). The data for student employment status is shown in Table 8.

Table 8.

<table>
<thead>
<tr>
<th>Total Hours a Week Working the Hospitality Industry</th>
<th>Frequency</th>
<th>Percent</th>
<th>Percent</th>
</tr>
</thead>
<tbody>
<tr>
<td>Not employed in the hospitality industry</td>
<td>67</td>
<td>39%</td>
<td>39%</td>
</tr>
<tr>
<td>Work less than 10 hours a week in the hospitality industry</td>
<td>17</td>
<td>9.9%</td>
<td>9.9%</td>
</tr>
<tr>
<td>Work 11-29 hours a week in the hospitality industry</td>
<td>57</td>
<td>33.1%</td>
<td>33.1%</td>
</tr>
<tr>
<td>Work 30-40 hours a week in the hospitality industry</td>
<td>26</td>
<td>15.1%</td>
<td>15.1%</td>
</tr>
<tr>
<td>Work 40+ hours a week in the hospitality industry</td>
<td>3</td>
<td>1.7%</td>
<td>1.7%</td>
</tr>
<tr>
<td>No Response</td>
<td>2</td>
<td>1.2%</td>
<td>1.2%</td>
</tr>
<tr>
<td>Total</td>
<td>172</td>
<td>100%</td>
<td>100%</td>
</tr>
</tbody>
</table>

The data above was cross-referenced with question number 12 on the survey, which asked how often a particular hospitality student consumed alcohol per week. The resulting data is listed in Table 9.

Table 9.

<table>
<thead>
<tr>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>Not employed in the hospitality industry</td>
<td>5</td>
<td>9</td>
<td>19</td>
<td>30</td>
<td>3</td>
<td>1</td>
<td>67</td>
</tr>
<tr>
<td>Work less than 10 hours a week in the hospitality industry</td>
<td>0</td>
<td>1</td>
<td>9</td>
<td>5</td>
<td>2</td>
<td>0</td>
<td>17</td>
</tr>
<tr>
<td>Work 11-29 hours a week in the hospitality industry</td>
<td>5</td>
<td>4</td>
<td>19</td>
<td>23</td>
<td>6</td>
<td>0</td>
<td>57</td>
</tr>
<tr>
<td>Work 30-40 hours a week in the hospitality industry</td>
<td>0</td>
<td>4</td>
<td>5</td>
<td>14</td>
<td>3</td>
<td>0</td>
<td>26</td>
</tr>
<tr>
<td>Work 40+ hours a week in the hospitality industry</td>
<td>0</td>
<td>0</td>
<td>1</td>
<td>1</td>
<td>1</td>
<td>0</td>
<td>3</td>
</tr>
<tr>
<td>No Response</td>
<td>0</td>
<td>0</td>
<td>2</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>2</td>
</tr>
</tbody>
</table>
It was determined that of those participants that consumed alcohol 2 to 3 times a week, 41% were not employed in the hospitality industry, 31.5% worked 11 to 29 hours a week in the hospitality industry and 21% of those that worked at least 30 hours per week in the hospitality industry consumed alcohol 2 to 3 times per week. This was an important finding, because it was previously suggested that alcoholic beverage consumption was more prevalent for participants that were more often exposed to the consumption and sale of alcohol on the job than those that were not. It was speculated, that a contribution of longer working hours in the hospitality industry, in addition to a full time course load, could significantly reduce the desire to consume alcohol as well as pose a negative effect or a hindrance to effective scheduling. There was further need to investigate the unexpected inverse relationship of alcohol consumption and employment in the industry.

Further analysis was needed of the daily consumption and drinking habits of hospitality students employed in the hospitality industry. The study analyzed the amount of alcoholic drinks consumed by a student on a typical day of drinking. In terms of frequency, it was found that participants not employed in the hospitality industry consumed alcohol at the highest rate on a typical day. Those not employed in the hospitality industry consumed between 3 and 6 drinks 42% of the time, those working less than 10 hours a week in the hospitality industry consumed 3 to 6 drinks 10% of the time. Those working 11 to 29 hours a week in the hospitality industry consumed 3 to 6 drinks 30% of the time, and those working more than 30 hours per week in the hospitality industry consumed 3 to 6 drinks on a typical day less than 16% of the time. This was an interesting finding since it showed that those participants employed in the hospitality industry did not consume alcohol at higher rates than those not employed in the hospitality industry (See Table 10).
Table 10.

<table>
<thead>
<tr>
<th>How Many Drinks Does a Hospitality Student Consume on a Typical Day?</th>
<th>1 or 2</th>
<th>3 or 4</th>
<th>5 or 6</th>
<th>7 to 9</th>
<th>10+</th>
<th>NA</th>
<th>Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>Not employed in the hospitality industry</td>
<td>16 (23%)</td>
<td>27 (40%)</td>
<td>15 (22%)</td>
<td>3 (4%)</td>
<td>3 (4%)</td>
<td>3 (4%)</td>
<td>67</td>
</tr>
<tr>
<td>Work less than 10 hours a week in the hospitality industry</td>
<td>2 (12%)</td>
<td>7 (41%)</td>
<td>3 (18%)</td>
<td>4 (24%)</td>
<td>1 (6%)</td>
<td>0</td>
<td>17</td>
</tr>
<tr>
<td>Work 11-29 hours a week in the hospitality industry</td>
<td>14 (30%)</td>
<td>20 (35%)</td>
<td>10 (17%)</td>
<td>3 (5%)</td>
<td>5 (9%)</td>
<td>5 (9%)</td>
<td>57</td>
</tr>
<tr>
<td>Work 30-40 hours a week in the hospitality industry</td>
<td>8 (31%)</td>
<td>11 (42%)</td>
<td>3 (11%)</td>
<td>4 (15%)</td>
<td>0</td>
<td>0</td>
<td>26</td>
</tr>
<tr>
<td>Work 40+ hours a week in the hospitality industry</td>
<td>0</td>
<td>1 (33%)</td>
<td>1 (33%)</td>
<td>1 (33%)</td>
<td>0</td>
<td>0</td>
<td>3</td>
</tr>
<tr>
<td>No Response</td>
<td>1 (50%)</td>
<td>0</td>
<td>1 (50%)</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>2</td>
</tr>
<tr>
<td>Total</td>
<td>41</td>
<td>66</td>
<td>33</td>
<td>15</td>
<td>9</td>
<td>1</td>
<td>172</td>
</tr>
</tbody>
</table>

Research question one: “What is the hospitality students drinking profile in relation to employment in the hospitality industry?” data indicates that hospitality students employed in the hospitality industry consumed less alcohol as their amount of employed hours per week increased. Once again, the data can only stipulate as to the reason why, since the survey did not specifically ask why as a student increases their work hours their desire to consume alcohol decreases. Some contributing factors may be: physical demands on the body, the combination of full course load along with full time employment reduces the amount of time left for social interaction and/or those that are employed in the industry usually work during the most socially acceptable times to drink, thus, leaving the heaviest employed with less preferential times to consume alcohol.

Research question number two asked: “According to students’ perceptions, are university faculty tolerant of hospitality student’s consumption of alcohol at levels that may
impair academic performance?” This question was asked to answer the question of hospitality professors’ tolerances for student consumption. It was previously suggested that if a professor or instructor was previously been in a food and beverage environment, they were more tolerant and understanding of the students who came to class “hung over” or intoxicated or produce inferior academic performance(s) based on alcohol consumption. Question number twenty-seven on the survey specifically asked this research question. The data was representative as a whole for all respondents and was then broken down by age group and sex. The following Table (11) shows a complete breakdown of all data collected as it related to RQ2.

Table 11.

<table>
<thead>
<tr>
<th>Hospitality Professors Treatment of Students</th>
<th>Frequency</th>
<th>Percent</th>
<th>Valid Percent</th>
</tr>
</thead>
<tbody>
<tr>
<td>We should know better as hospitality students.</td>
<td>19</td>
<td>11%</td>
<td>11%</td>
</tr>
<tr>
<td>We are held to the same standard as all other majors</td>
<td>92</td>
<td>53.5%</td>
<td>53.5%</td>
</tr>
<tr>
<td>Kind of, they understand and are more tolerant than other majors</td>
<td>37</td>
<td>21.5%</td>
<td>21.5%</td>
</tr>
<tr>
<td>Yes, they understand and I have been given a favor such as an extension</td>
<td>13</td>
<td>7.6%</td>
<td>7.6%</td>
</tr>
<tr>
<td>Have you witnessed a professor given preferential treatment to someone else?</td>
<td>2</td>
<td>1.2%</td>
<td>1.2%</td>
</tr>
<tr>
<td>No response</td>
<td>9</td>
<td>5.2%</td>
<td>5.2%</td>
</tr>
<tr>
<td>Total</td>
<td>172</td>
<td>100%</td>
<td>100%</td>
</tr>
</tbody>
</table>

The data supports that that majority of the hospitality students support the research question that hospitality students were held to the same standard as all other students (53.5%) or
to a higher standard than all other students (11%). To further investigate this particular question, the researcher broke the data set into several sections to determine if there was a statistical difference in the response rates of female or male respondents as well as the breakdown of age groups. The data is shown in Table 12.

Table 12.

<table>
<thead>
<tr>
<th>GENDER</th>
<th>Age</th>
<th>Preferential Treatment by Professors</th>
<th>NULL</th>
<th>Total</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>19</td>
<td>0</td>
<td>1 (100%)</td>
<td>1</td>
</tr>
<tr>
<td>Male</td>
<td>20</td>
<td>2 (40%) 1 (20%) 1 (20%) 1 (20%)</td>
<td>0</td>
<td>5</td>
</tr>
<tr>
<td>Male</td>
<td>21+</td>
<td>4 (8%) 26 (54%) 10 (21%) 3 (6%) 1 (2%)</td>
<td>1 (2%)</td>
<td>48</td>
</tr>
<tr>
<td>Total</td>
<td>6 (11%) 28 (52%) 11 (20%) 4 (7%) 1 (2%)</td>
<td>1 (2%)</td>
<td>54</td>
<td></td>
</tr>
<tr>
<td>Female</td>
<td>Age</td>
<td>19</td>
<td>1 (25%) 3 (75%)</td>
<td>0</td>
</tr>
<tr>
<td>Female</td>
<td>20</td>
<td>5 (22%) 12 (52%) 6 (26%)</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>Female</td>
<td>21+</td>
<td>7 (8%) 49 (57%) 20 (23%) 6 (7%) 1 (1%)</td>
<td>3 (3%)</td>
<td>86</td>
</tr>
<tr>
<td>Total</td>
<td>13 (11%) 64 (57%) 26 (23%) 6 (5%) 1 (&lt;1%)</td>
<td>5 (4%)</td>
<td>113</td>
<td></td>
</tr>
<tr>
<td>No Response</td>
<td></td>
<td></td>
<td></td>
<td>5</td>
</tr>
</tbody>
</table>

For the purpose of rounding error and illustrating only the significant numbers in the results, only those legally eligible to consume alcohol were included in the data set separated by
sex. Of those males 21 years of age and older 8% who stated “we should know better as students in the hospitality industries and are not held to a higher standard”, 56% stated “we are held to the same standard as everyone else”, 21% stated that “instructors understand since they have been there and are more tolerant than non-major professors”, and 13% of males 21 years of age and older said “yes they completely understand and had received favorable action on at least one occasion”. Of those females 21 years of age who reported, 8% stated “they should know better as hospitality students”, 59% stated “they were held to the same standard as everyone else”, 24% stated they had been there and were more tolerant than non-major professors”, and 7% stated “they completely understood and had received favorable action on at least one occasion”. It was important to note this interesting finding: although both males and females were heavily separated in frequency (almost 2:1 female to male), the answers recorded during the survey reflected similar answers for the kind of regard that professors hold for their students. All answers recorded were within + or - 6 % points.

Research question three: “Are demographic variables such as gender and age associated with different levels of alcoholic consumption?” This question was used to separate drinking tendencies of hospitality students by age and gender. Question twenty-eight on the survey was used to segregate male and female populations. The results were from the same figure as listed previously in Table 5 and restated in Table 13.
Table 13.

<table>
<thead>
<tr>
<th>Total Surveyed Male or Female</th>
<th>Sex</th>
<th>Frequency</th>
<th>Percent</th>
<th>Valid Percent</th>
</tr>
</thead>
<tbody>
<tr>
<td>Male</td>
<td>54</td>
<td>31.4%</td>
<td>31.4%</td>
<td></td>
</tr>
<tr>
<td>Female</td>
<td>113</td>
<td>65.7%</td>
<td>65.7%</td>
<td></td>
</tr>
<tr>
<td>No Response</td>
<td>5</td>
<td>2.9%</td>
<td>2.9%</td>
<td></td>
</tr>
<tr>
<td>Total</td>
<td>172</td>
<td>100%</td>
<td>100%</td>
<td></td>
</tr>
</tbody>
</table>

Question twenty-eight’s results were cross-tabulated with question twelve’s asking how often hospitality students consume alcohol. This question was used to cross tabulated how often hospitality students consume alcohol. The results are listed in Table 14.

Table 14.

<table>
<thead>
<tr>
<th>Alcohol Consumption Frequency Broken Down by Age and Sex.</th>
<th>never</th>
<th>monthly or less</th>
<th>2 - 4 times a month</th>
<th>2-3 times per week</th>
<th>4 or more times a week.</th>
<th>often</th>
<th>Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>GENDER Age</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Male 19</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>1 (100%)</td>
<td>0</td>
<td>0</td>
<td>1</td>
</tr>
<tr>
<td>20</td>
<td>0</td>
<td>1 (20%)</td>
<td>1 (20%)</td>
<td>1 (20%)</td>
<td>2 (40%)</td>
<td>0</td>
<td>5</td>
</tr>
<tr>
<td>21+</td>
<td>0</td>
<td>4 (8%)</td>
<td>11 (23%)</td>
<td>26 (54%)</td>
<td>7 (14%)</td>
<td>0</td>
<td>48</td>
</tr>
<tr>
<td>Total</td>
<td>0</td>
<td>5 (9%)</td>
<td>12 (22%)</td>
<td>28 (52%)</td>
<td>9 (16%)</td>
<td>0</td>
<td>54</td>
</tr>
<tr>
<td>Female 19</td>
<td>1 (25%)</td>
<td>0</td>
<td>3 (75%)</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>4</td>
</tr>
<tr>
<td>20</td>
<td>6 (26%)</td>
<td>3 (13%)</td>
<td>8 (3%)</td>
<td>5 (22%)</td>
<td>1 (4%)</td>
<td>0</td>
<td>23</td>
</tr>
<tr>
<td>21+</td>
<td>3 (3%)</td>
<td>9 (10%)</td>
<td>30 (34%)</td>
<td>39 (45%)</td>
<td>4 (4%)</td>
<td>1 (1%)</td>
<td>86</td>
</tr>
<tr>
<td>Total</td>
<td>10 (8%)</td>
<td>12 (10%)</td>
<td>41 (36%)</td>
<td>44 (39%)</td>
<td>5 (4%)</td>
<td>1 (&lt;1%)</td>
<td>113</td>
</tr>
<tr>
<td>No Response</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>5</td>
</tr>
</tbody>
</table>

It was apparent that consumption of alcohol was evident by both male and females 2 to 3 times per week. Of those surveyed, the highest frequency of consumption was between 2 to 4
times per month and 2 to 3 times a week for both males and females. The data determined approximately 9% of male participants consumed alcohol at a rate of once monthly, 22% consumed alcohol 2 to 4 times a month, 52% consumed alcohol 2 to 3 times per week, and 16% of those male participants reported they consumed alcohol 4 or more times a week or greater. Female participants stated (10%) they never consumed alcohol, 11% stated they consumed alcohol once a month or less, 37% state they consumed alcohol 2 to 4 times a month, 39% stated they consumed alcohol 2 to 3 times a week, and only 4% stated that they consumed alcohol 4 or more times a week or greater. The study wanted to determine how much alcohol was being consumed on each of those reported days. To further investigate the amount of drinks that were consumed per day: question twenty-eight (gender) was cross tabulated with question thirteen (consumption of alcoholic drinks on each day drinking). The results are shown in Table 15.

Table 15.

<table>
<thead>
<tr>
<th>GENDER</th>
<th>Total Drinks Per Day Drinking Broken Down by Age and Sex.</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>1 or 2</td>
</tr>
<tr>
<td>Male Age 19</td>
<td>0</td>
</tr>
<tr>
<td>20</td>
<td>2 (40%)</td>
</tr>
<tr>
<td>21+</td>
<td>6 (16%)</td>
</tr>
<tr>
<td>Total</td>
<td>8 (14%)</td>
</tr>
<tr>
<td>Female Age 19</td>
<td>1 (25%)</td>
</tr>
<tr>
<td>20</td>
<td>6 (26%)</td>
</tr>
<tr>
<td>21+</td>
<td>24 (27%)</td>
</tr>
<tr>
<td>Total</td>
<td>30 (26%)</td>
</tr>
<tr>
<td>No Response</td>
<td></td>
</tr>
</tbody>
</table>
It was found that no probative value could be deduced by separating age groups when surveys were sent to upperclassman at all universities and the majority of the data gathered accounts for 21-year-old or older students. This limitation stated the results from those separated by gender (males) that did consume alcohol on a typical day: 15% drank 1 or 2 alcoholic beverages, 33% drank 3 or 4 alcoholic beverages, 19% drank 5 or 6 alcoholic beverages, 20% drank 7 to 9 alcoholic beverages and 13% drank 10 or more alcoholic beverages. Of the females participants: 26% drank 1 or 2 alcoholic beverages, 41% drank 3 or 4 alcoholic beverages, 20% drank 5 or 6 drinks, 4% drank 7 to 9 drinks, 2% drank more than 10 drinks. It is important to note that 7% of the female respondents with data which was cross referenced for a typical day of consumption did not accurately report their consumption on the survey and were excluded from the number set.

Research question four asked: “Do hospitality students feel they can stop drinking once started?” Males and females were separated to see if gender was a contributing factor. Of those surveyed, 85% of the males reported never having this problem or having this problem less than monthly, while 91% of females reported never having this problem or having a problem less than monthly. An interesting determination from this data set is that 13% of males and 8% of females had a problem in (at least monthly) stopping drinking once started. See Table 16.
Table 16.

<table>
<thead>
<tr>
<th>Gender</th>
<th>Age</th>
<th>never</th>
<th>less than monthly</th>
<th>monthly</th>
<th>weekly</th>
<th>daily or almost daily</th>
<th>NULL</th>
<th>Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>Male</td>
<td>19</td>
<td>1 (100%)</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>1</td>
</tr>
<tr>
<td></td>
<td>20</td>
<td>3 (60%)</td>
<td>1 (20%)</td>
<td>0</td>
<td>0</td>
<td>1 (20%)</td>
<td>0</td>
<td>5</td>
</tr>
<tr>
<td></td>
<td>21+</td>
<td>33 (68%)</td>
<td>8 (16%)</td>
<td>4 (8%)</td>
<td>3 (6%)</td>
<td>0</td>
<td>0</td>
<td>48</td>
</tr>
<tr>
<td>Total</td>
<td>37 (68%)</td>
<td>9 (16%)</td>
<td>4 (7%)</td>
<td>3 (5%)</td>
<td>1 (2%)</td>
<td>0</td>
<td>54</td>
<td></td>
</tr>
<tr>
<td>Female</td>
<td>19</td>
<td>1 (25%)</td>
<td>1 (25%)</td>
<td>1 (25%)</td>
<td>1 (25%)</td>
<td>0</td>
<td>0</td>
<td>4</td>
</tr>
<tr>
<td></td>
<td>20</td>
<td>19 (82%)</td>
<td>3 (13%)</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>1 (4%)</td>
<td>23</td>
</tr>
<tr>
<td></td>
<td>21+</td>
<td>66 (76%)</td>
<td>12 (14%)</td>
<td>4 (4%)</td>
<td>4 (4%)</td>
<td>4 (4%)</td>
<td>0</td>
<td>86</td>
</tr>
<tr>
<td>Total</td>
<td>87 (76%)</td>
<td>16 (14%)</td>
<td>5 (4%)</td>
<td>5 (4%)</td>
<td>4 (3%)</td>
<td>1 (1%)</td>
<td>113</td>
<td></td>
</tr>
</tbody>
</table>

The data set was then cross referenced with data from participants who consumed alcohol and had encountered an injury as a result of their drinking. It was found that 33% of males, 21 years of age and older, had injured themselves or someone around them due to their alcohol consumption. A similar trend for females was also detected. Eighteen percent of females, 21 years of age and older, reported injuring either themselves or someone around them due to their alcohol consumption.
Table 17.

<table>
<thead>
<tr>
<th>GENDER</th>
<th>Age</th>
<th>No</th>
<th>Yes, but not in the last year</th>
<th>Yes, during the last year</th>
<th>Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>Male</td>
<td>19</td>
<td>1 (100%)</td>
<td>0</td>
<td>0</td>
<td>1</td>
</tr>
<tr>
<td></td>
<td>20</td>
<td>3 (60%)</td>
<td>2 (40%)</td>
<td>0</td>
<td>5</td>
</tr>
<tr>
<td></td>
<td>21+</td>
<td>30 (62%)</td>
<td>10 (21%)</td>
<td>8 (16%)</td>
<td>48</td>
</tr>
<tr>
<td></td>
<td>Total</td>
<td>34 (63%)</td>
<td>12 (22%)</td>
<td>8 (15%)</td>
<td>54</td>
</tr>
<tr>
<td>Female</td>
<td>19</td>
<td>2 (50%)</td>
<td>0</td>
<td>2 (50%)</td>
<td>4</td>
</tr>
<tr>
<td></td>
<td>20</td>
<td>16 (70%)</td>
<td>3 (13%)</td>
<td>4 (17%)</td>
<td>23</td>
</tr>
<tr>
<td></td>
<td>21+</td>
<td>66 (76%)</td>
<td>11 (13%)</td>
<td>9 (10%)</td>
<td>86</td>
</tr>
<tr>
<td></td>
<td>Total</td>
<td>84 (74%)</td>
<td>14 (13%)</td>
<td>15 (13%)</td>
<td>113</td>
</tr>
<tr>
<td>No Response</td>
<td></td>
<td>3</td>
<td>2</td>
<td></td>
<td>5</td>
</tr>
</tbody>
</table>

When confronted by a relative, friend, doctor, or other health-care worker, 16% of male participants reported that sometime in their life someone had been concerned about the level of their alcohol consumption, while 8% of female participants stated that someone in their life had been concerned over their consumption of alcohol.

Data was then crossed tabulated with question number 8 on the survey which asked whether the hospitality student had received any safe alcohol practices training and question number 12 which asked how often did a student have an alcoholic drink. The results indicated there were no specific or consistent findings to support a correlation between safe alcohol training and how often a participant consumed alcohol. It was determined that of those participants without formal training (20%) drank monthly or less, 36% drank 2 to 4 times a month, and 43% drank 2 to 3 times a week.
Of those participants who had received on-the-job alcohol training (10%) drank monthly or less, 32% drank 2 to 4 times a month, and 57% drank 2 to 3 times per week. Participants who had a certificate of alcohol training (21%) stated that they drank monthly or less, 36% stated they drank 2 to 4 times a month, and 43% stated they drank 2 to 3 times per week. Although the data for participants who had no certificate in alcohol training and those who had a certificate in alcohol training were similar, it should be noted that those participants who had on-the-job alcohol training had a 1.3% higher likelihood of consuming alcohol 2 to 3 times a week.
CHAPTER 5

CONCLUSION

This study investigated hospitality students’ perceptions regarding alcohol consumption and personal actions related to high risk behaviors. These behaviors include: sexual encounters and binge drinking and their effect on academic tasks and performance. The definition of binge drinking is the consumption of alcohol which results in a blood alcohol content of >.08. While alcohol consumption for college students continues to be a productive stream of research, there are limited studies that focus on hospitality students (who consume alcohol on a regular basis) between the ages of 18-22 years old. Binge drinking can result in various destructive behaviors including by not limited to: alcohol-impaired driving, physical fighting, poor school performance, sexual activity, smoking and the deterioration of relationships. The most common of these destructive high risk behaviors spreading through the 18-22 year old range is binge drinking and high risk sexual encounters. There is limited research documenting college age hospitality students’ high risk behaviors resulting from alcohol consumption and poor academic performance. Research Questions answered by this study were:

1) What is the hospitality students drinking profile in relation to employment in the hospitality industry?

2) According to students perceptions, are university faculty tolerant of hospitality student’s consumption of alcohol at levels that may impair academic performance?

3) Are demographic variables such as gender and age associated with different levels of alcoholic consumption?

4) Do hospitality students feel they can stop drinking once started?
The research was conducted in the Spring of 2011. An extensive literature review in combination with the objectives of this study was used as the guideline to build the questionnaires. A self-guided survey was designed and distributed to the members of a focus group consisting of three hospitality educators and three industry practitioners. The population selected for analysis was students attending at randomly selected 4-year universities offering 4-year hospitality programs. The study sample was self-selected and participation was not mandatory; selection of participants was based on enrollment in upper division courses requiring prerequisites in the hospitality concentration. By surveying students within the hospitality industry, the study was better able to collect applicable data representing the target population.

The literature review consisted of a search for relevant work by leaders in this field. Multiple relevant articles were cited for the purpose of background data collection and to investigate the causes for excessive alcohol consumption among prevalent in the hospitality student’s.

The questionnaire was developed through a literature review and an evaluation of focus group findings. The study employed a self-administered survey with several major sections. A total of 172 out of 220 surveys were returned for a 75% return rate.

The first section asked questions relating to demographics dealing with gender, age, and industry experience. The second section of the questionnaire consisted of questions relating to hospitality student’s perceptions of alcohol consumption and its effect on their lives, school and social interaction (See Appendix A).
Descriptive Results of Respondents

The demographic characteristics of the respondents surveyed were different for each institution, but indicated validity in the overall distribution of male to females in age group categories. The study found the “typical” respondent in the survey of hospitality students was female with junior or senior classification and was 21 years or older. The male respondents represented less than one-third of the total respondents in the study.

Results from Surveys

The study questioned if hospitality students working in hospitality related jobs (30 hours a week or more) were more likely to consume alcohol than those students working less than 30 hours. The results indicated that students working 10 hours or less who were male and under the age of 21 were most likely to consume alcohol at dangerous levels (binge drink) and cause harm to themselves or others. Therefore, it can be concluded that hospitality students working in hospitality related jobs for more than 10 hours per week are less likely to binge drink. This could be attributed to increased work experience with alcohol in the form of training and educational programs including but not limited to The ServSafe Alcohol Program. Additionally, results indicated that males, 21-years-old and younger had a higher probability to omit or forgo academically required assignments by the university in lieu of events sanctioning (officially or unofficially) the consumption of alcohol.

Recommendations

Upon completion of the study, the researcher found no evidence to support the conclusion that there is a higher consumption rate of alcohol for hospitality students who are employed in the hospitality industry. Due to the limitations of this study it is recommended that a future study
be conducted to include a control group in an academic area that include non-hospitality students as a comparison. This would provide a true sample of the population that could be inferred back to the entire higher education system to determine whether the working hospitality student is in fact a higher consumer of alcohol versus students not majoring in hospitality. Without the control group, the researcher was unable to determine that hospitality students who are working full time in the hospitality industry did not consume as much alcohol as unemployed hospitality students or those working ten hours or less weekly.

Work place injuries are a burden for the employer costing higher premiums for workers’ compensation insurance, partially placing the financial ramifications of the accident on the tax payer. Although work place injuries in corporate America are often immediately followed by a urinalysis sample to confirm trace elements of mind altering agents (drugs and alcohol), the researcher feels it would be interesting to question past and future hospitality employees about any accidents they may have had that involved the consumption of alcohol that were possibly not reported or downplayed. Downplaying or under-reporting these incidents could be based on fears of reprisal from management or policies that are in effect. The researcher feels that collecting data related to on-the-job injuries/accidents which are a direct result of alcohol consumption would be beneficial for the financial and reputational cost the establishment of each occurrence as well as those injured. In addition, this would provide an interesting and rewarding stream of literature contributing to the body of knowledge in hospitality research.

The study found that the hospitality students surveyed felt that they were treated fairly by their hospitality instructors/professors related to absences, tardiness, and failure to complete academic assignments. The researcher deduces that academic stimulation cast upon the hospitality students by their hospitality professors/instructors related to in-class training on the
subject of alcohol service would create standardized data that could be used to judge the
effectiveness of the students’ academic and occupational performance associated with alcohol
service and finally with their personal alcohol consumption.

If research was instigated to reach conclusions in the effectiveness of alcohol safety
programs, higher education could concentrate, encourage, or mandate its existence for industries
focusing on for-profit alcohol distribution to ensure compliance with alcohol policies in their
jurisdiction. In addition, such training or education could deter students from dangerous levels of
personal consumption (binge drinking). Inquiring as to the effectiveness of alcohol safety
programs would render relevant suggestive data allowing curriculum designers to have access to
unbiased peer reviewed data to enhance the future of the next generation of student leaders
within the hospitality industry. Simply maintaining the status quo without probative research to
inquire to the contrary would do the hospitality student an injustice. Research must be completed
providing repudiating evidence of current academic and alcohol training curriculums.
REFERENCES


International Center for Alcohol Policies. (n.d.). "Minimum Age Limits Worldwide".


Greetings:

This study will solicit information in the form of a survey from students enrolled in hospitality classes at eight randomly selected four year universities in an attempt to deduce if hospitality students have a higher consumption of alcohol according to their own personal perceptions and life experiences.

If you would please take 15 minutes of your time to complete the survey, it would be greatly appreciated. Please note that participation is purely voluntary and refusing to complete the questioner will not harm you in any way. Please answer as truthfully as possible. There are no wrong or right answers and your complete honesty will provide the most accurate data. The success of this study largely depends on you participation and a survey to be completely filled out. The survey you fill out will be analyzed for the purpose of this research only. There are no known risks associated with taking this survey.

This study is being undertaken by Masters Candidate Boris A. Roslov at the University Of Arkansas School Of Human Environmental Sciences, department of Hospitality and Restaurant Management. Your response is completely voluntary, anonymous, and will be kept strictly confidential. Responses will be reported in aggregate form.

We will be most happy to answer any questions you may have. My email address is BRoslov@uark.edu. For inquiry about your rights as a research participant you may contact University of Arkansas research compliance coordinator Iroshi Windwalker at 120 Ozark Hall, University of Arkansas, Fayetteville, AR 72701, phone number: (479)575-2208.
College Alcohol Consumption Survey

*The researcher is asking questions about your alcohol use. Your answers will remain confidential so please be honest. Please circle the answer that best describes you.*

1. I primarily drink alcohol beverages for the purpose of: (If you don’t drink, go to the next question)
   a. Recreation
   b. It makes it easier for me to be more sociable
   c. I feel happy and relaxed
   d. I forget my problems
   e. All of the above
   f. Other

2. When first applying to college, what were your intentions regarding your major?
   a. I knew I wanted to be a hospitality major since high school.
   b. I looked at other majors and after consideration decided to go with hospitality.
   c. I chose this major after realizing that other majors are not the “right fit” for me.
   d. This major opens up significant time for “social activity”.
   e. All of the above.
   f. I am not a hospitality major.

3. Have you ever decided that “a night on the town” with a friend was more important than a class?
   a. No, I try to attend all classes.
   b. Occasionally, but I sent my instructor an email with a creative explanation.
   c. Yes, I have skipped class once or twice per semester, due to the following symptoms: extreme headache, nausea, sensitivity to light and sound as a result of drinking alcohol.
   d. I skip class often for the sake of social gatherings, sporting events, holidays, or any other event that embraces consumption of alcohol
4. Have you ever been encouraged to consume alcohol as a result of hospitality employment (shift beer, or leftover alcohol from a catering event, etc…?)
   a. Never, I do not work in an environment that encourages alcohol consumption.
   b. Rarely, but it will never happen again.
   c. Often, I sometimes take advantage of alcohol perks offered by my employer.
   d. All the time, I choose this job because of alcohol discounts or perks.

5. Have you ever been asked to leave a bar, friend’s house, or an event due to your behavior related to alcohol consumption?
   a. No, I have never been asked to leave or thrown out of anywhere.
   b. I was told that I should probably not have any more and start looking for a ride home.
   c. I was gently escorted out of an establishment or friend’s house.
   d. I was escorted out of a bar or friends house, and placed under arrest by a law enforcement official.

6. Which of the following statements best describes your behavior in regards to assisting a friend(s) who have possibly consumed an excessive amount of alcohol?
   a. Most of the time I am the designated driver ensuring my friends do not get into trouble.
   b. More of the “middle of the road”; I make sure my friends do not get in serious trouble, but I let them live a little.
   c. I don’t like being responsible for my friends: I prefer to mind my own business and only step in when I absolutely have to or am myself involved.
   d. I am in no way shape or form responsible for anything any of my friends do.
   e. Although I may consume alcoholic beverages with friends: I will step in if a friend is placing themselves in danger.

7. How would you rate hospitality students in terms of alcohol consumption? (comment only to your campus)
   a. Hospitality students drink less than students of other majors.
   b. Hospitality students drink about as much as other students.
   c. Hospitality students drink more than other students.
   d. Don’t know.
8. Have you received any formal training in safe alcohol practices? (such as ServSAFE ®)
   a. No, I have not received any formal training on safe alcohol service
   b. I went through the required training provided by my place of employment.
   c. I have a certification indicating my compliance with an alcohol safety training course;
      I received by taking a course in my hospitality program.

9. Academics to me are:
   a. I never miss assignments, regardless of whether I’ve had anything to drink (100% academics, 0% other).
   b. Academics are really important but I go out and do other things too. (75% academics, 25% other).
   c. I think a well balanced life is important (50% academics/50% other).
   d. I have mastered the art of staying in school (25% academics, 75% other).
   e. I probably won’t be here for much longer. (0% academics, 100% other).

10. I tend to miss assignments, papers, or other assigned work when I:
   a. Have just a few recreational drinks.
   b. Drink several drinks.
   c. Get legally intoxicated.
   d. Drink excessively.
   e. None of the above.
   f. All of the above.

11. Are you:
   a. Not employed in the hospitality industry.
   b. Work less than 10 hours a week in the hospitality industry.
   c. Work 11-29 hours a week in hospitality industry.
   d. Work 30 -40 hours a week in the hospitality industry.
   e. Work 40+ hours a week in the hospitality industry.
<table>
<thead>
<tr>
<th>Question</th>
<th>0</th>
<th>1</th>
<th>2</th>
<th>3</th>
<th>4</th>
</tr>
</thead>
<tbody>
<tr>
<td>12. How often do you have a drink containing alcohol?</td>
<td>Never</td>
<td>Monthly or less</td>
<td>2-4 times a month</td>
<td>2-3 times a week</td>
<td>4 or more times a week</td>
</tr>
<tr>
<td>13. How many drinks containing alcohol do you have on a typical day when you are drinking?</td>
<td>1 or 2</td>
<td>3 or 4</td>
<td>5 or 6</td>
<td>7 or 9</td>
<td>10 or more</td>
</tr>
<tr>
<td>14. How often do you have six or more drinks on one occasion?</td>
<td>Never</td>
<td>Less than monthly</td>
<td>Monthly</td>
<td>Weekly</td>
<td>Daily or almost daily</td>
</tr>
<tr>
<td>15. How often during the last year have you found that you were not able to stop drinking once you had started?</td>
<td>Never</td>
<td>Less than monthly</td>
<td>Monthly</td>
<td>Weekly</td>
<td>Daily or almost daily</td>
</tr>
<tr>
<td>16. How often during the last year have you failed to do what was normally expected of you because of drinking?</td>
<td>Never</td>
<td>Less than monthly</td>
<td>Monthly</td>
<td>Weekly</td>
<td>Daily or almost daily</td>
</tr>
<tr>
<td>17. How often during the last year have you needed a first drink in the morning to get yourself going after a heavy drinking session?</td>
<td>Never</td>
<td>Less than monthly</td>
<td>Monthly</td>
<td>Weekly</td>
<td>Daily or almost daily</td>
</tr>
<tr>
<td>18. How often during the last year have you had a feeling of guilt or remorse</td>
<td>Never</td>
<td>Less than monthly</td>
<td>Monthly</td>
<td>Weekly</td>
<td>Daily or almost daily</td>
</tr>
<tr>
<td>Question</td>
<td>Never</td>
<td>Less than monthly</td>
<td>Monthly</td>
<td>Weekly</td>
<td>Daily or almost daily</td>
</tr>
<tr>
<td>------------------------------------------------------------------------</td>
<td>-------</td>
<td>-------------------</td>
<td>---------</td>
<td>--------</td>
<td>----------------------</td>
</tr>
<tr>
<td>19. How often during the last year have you been unable to remember what happened the night before because of your drinking?</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>20. Have you or someone else been injured because of your drinking?</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>21. Has a relative, friend, doctor, or other health care worker been concerned about your drinking or suggested you cut down?</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

This next section involves answering some questions about the consequences of binge drinking and how you perceive it.

22. I regret a sexual partner/experience that I have had as a result of excessive consumption of alcohol.
   a. Yes
   b. No

23. If you answered yes to question 21, approximately how many alcoholic drinks did you consume?
   a. 0-2
   b. 3-5
   c. 6-8
   d. 9+
   e. No recollection
24. After the above mentioned encounter in number 21, have your drinking patterns changed?
   a. No
   b. Yes
   c. N/A

25. When consuming alcohol with a group of friends, typically how many friends are you drinking with?
   a. Don’t consume alcohol with friends
   b. few
   c. 5-10
   d. 10-15
   e. 15+

This next section pertains to your instructors and professors within the hospitality program in which you are currently enrolled and demographic questions about yourself.

26. How many faculty are in your major?
   a. 1-3
   b. 3-6
   c. 6-9
   d. 10 or more.

27. Do you think that hospitality instructors are more likely to understand and be tolerant of students that show signs of “excessiveness due to previous night’s activities”?
   a. No, as the matter of fact, we should know better as students in hospitality.
   b. No, we are held to the same standard as everyone else.
   c. Kind of, they understand because they have been there and are more tolerant than any of my non major specific professors, but the work still needs to be done.
   d. Yes, I think they completely understand. I have on at least one occasion been given a favorable action (such as an extension) from my hospitality professor.
   e. If the faculty are tolerant, have you ever witnessed them giving anyone favorable treatment, not just experienced it yourself.

28. Are you a male or female?
   a. Male
   b. Female
29. How old are you?
   a. 18 or under
   b. 19
   c. 20
   d. 21+

30. What is your current academic rank?
   a. Freshman
   b. Sophomore
   c. Junior
   d. Senior

31. What university are you currently attending?
   a. Arkansas
   b. Washington State
   c. Nebraska
   d. New Hampshire
   e. Alabama
   f. UNLV
   g. Oklahoma State

Any additional comments or suggestions?

Thank you very much for your participation.
APPENDIX B

PROCTOR INSTRUCTIONS

2011 University of Arkansas HESC Hospitality Management Alcohol Consumption Study

Included Inside- 60 questioners, one pre-labeled envelope for return, one proctor instructions

**Instructions to Questioner Proctor (DO NOT VERBALLY SAY)**

1) Please provide at least 15 minutes for completion of the attached questionnaire.
2) If possible, please select a class that falls on a Tuesday, Wednesday or Thursday.
3) Please only circulate the required number of questioners and do not allow duplicates. If a subject feels they need to restart with a new questioner, inform the subject that placing the correct answer next to the question circled will be the answer that will be selected.
4) Please circulate a questionnaire to each person. Also, please provide the following information:
   a. Students enrolled in this class: _____________
   b. Students in attendance today: _____________
5) Provide the following contact info to any student that wishes to ask any questions or wants more information:

**Instructions to the Subjects. (PLEASE READ OUT LOUD)**

You are about to participate in a nationwide study of alcohol consumption for college aged students. There are no demographic restrictions for participation. Please note that participation is purely voluntary and refusing to complete the questionnaire will not harm you in any way. Please answer as truthfully as possible. There are no wrong or right answers and your complete honesty will provide the most accurate data. The survey proctor will issue everyone in the room a questionnaire. If for any reason at all you oppose filling it out, please write REFUSE in large font at the top of the questionnaire and turn it over. If for any reason during the allocated time that you feel you cannot, or choose not to answer a question, simply write REFUSE next to that question. If you change your mind about an answer, please clearly scratch out the incorrect response, and circle the actual response you wish to have recorded. Please do not leave any questions blank. Thank you in advance for your participation and if you have any questions, you may receive contact information for the researchers from the proctor in the room.