

The Relationship between Motivation, Coping Mechanisms, and Alcohol Cessation among Alcohol Drinkers in Barangay Ubaldo Laya, Iligan City

Marsha Fe J. Obina, Angelica Kitz D. Daligdig, Fedea Melry Y. Lim, Dennis Dave M. Khu, Ian C. Abordo, Deary Mae Y. Lim

ABSTRACT

Background and Aim: Alcohol consumption remains a prevalent and varied practice across cultures worldwide. This study aimed to investigate the level of motivation, coping strategies, and alcohol cessation among individuals attempting to cease alcohol consumption. In addition, this study aimed to explore the relationships between motivation, coping mechanisms, and alcohol cessation among alcohol drinkers in the Philippines. **Design:** This study employs a descriptive-correlational design. Using convenient sampling, it targets male and female residents aged 18–59 years old in Iligan City, Lanao del Norte, Philippines, who have attempted to quit alcohol consumption. **Results:** Personal growth and development, relationships, and physical appearance were the primary motivators for alcohol cessation. Effective coping mechanisms included confronting negative emotions, boosting mood through special treats or increased productivity, and reflecting on past drinking consequences. Respondents reported significant improvements in well-being, excellent stress management, and strong support from groups and family, leading to increased confidence in maintaining cessation, infrequent alcohol consumption, and success in quitting. Individuals with higher motivation and effective coping strategies were more likely to maintain cessation, manage stress without alcohol, attend support sessions, and experience overall well-being improvements. **Conclusion:** These results suggest that targeted interventions that enhance motivation and provide effective coping mechanisms are essential. Counseling, support groups, and educational programs emphasizing personal growth, strong relationships, and self-improvement can achieve this. These findings are valuable for health-care providers, counselors, and policymakers, highlighting key factors for successful alcohol cessation. By focusing on motivation and coping mechanisms, support systems can improve the likelihood of sustained alcohol cessation, leading to better community health and well-being.

Keywords: Alcohol cessation, Coping mechanisms, Motivation
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INTRODUCTION

Alcohol consumption remains a prevalent and varied practice across cultures worldwide.^[1] According to the WHO,^[2] the countries with the highest rates of alcohol consumption were Belarus, Moldova, and Lithuania. In 2019, 2.4 billion people, or 50% of the global population aged 15 years and older, drank alcohol. Of these, one in three (763 million people) engaged in heavy episodic drinking, consuming at least 60 g of pure alcohol on a single occasion at least once a week.^[3]

Prior studies have provided insights into the impact of alcoholism on public health and societal challenges. In the Philippines, there was a 12.7% rise in alcohol-related hospital admissions from 2016 to 2019. Alcohol-attributable deaths constituted 6.3% of all fatalities in the country in 2016, with liver cirrhosis resulting from alcohol intake being the primary cause. In addition, alcohol was a contributing factor in 22.5% of traffic accidents and 34.2% of violent crimes.^[4]

Prior research tells us the effects of alcoholism on public health and social crisis. The Journal of Public Health 2021 found that alcohol-related hospital admissions in the Philippines increased by 12.7% between 2016 and 2019. Alcohol-attributable deaths accounted for 6.3% of all deaths in the Philippines in 2016, with liver cirrhosis due to alcohol consumption being the leading cause.^[4] A 2020 study in the Philippine Journal of Public Health reported that alcohol was involved in 22.5% of traffic accidents and 34.2% of violent crimes in the Philippines.

However, recent studies show that alcohol consumption plays a crucial role in social and cultural rituals. Kraus found that drinking together fosters a sense of community and bonding among

Department of Nursing, Adventist Medical Center College, San Miguel, Iligan City, Philippines

Corresponding Author: Marsha Fe J. Obina, Department of Nursing, Adventist Medical Center College, San Miguel, Iligan City, Philippines

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individuals,^[5] and Charles highlighted the cultural significance of alcohol in promoting unity.^[6] Calina also observed the strong communal aspect of shared alcohol consumption.^[7] A study conducted by Lee further supported these findings, demonstrating a positive correlation between alcohol consumption and the development of a sense of community among participants. Lee underscored the role of alcohol in social cohesion.^[8]

Furthermore, many cultures view alcohol as an integral part of their social fabric, with rituals and traditions often centered around its consumption.^[9] Alcohol serves as a symbolic element^[10] in cultural contexts, emphasizing its role in building shared meanings.^[11] Cultural norms around alcohol consumption emphasized the role of shaping social interactions.^[12]

On one hand, alarming statistics reveal the detrimental impact of alcohol on public health and safety, with significant

contributions to mortality, traffic accidents, and violent crimes. On the other hand, recent studies emphasize the positive social and cultural aspects of alcohol consumption, highlighting its role in fostering community bonds and unity.

Hence, this study addressed an empirical gap by examining the relationship between motivation, coping mechanisms, and success in alcohol cessation among individuals in *Barangay Ubaldo Laya*, Iligan City. Before this research, there had been assumptions about the importance of motivation and coping strategies in quitting alcohol, but this study provided concrete evidence through surveyed data. By quantifying motivation and coping mechanisms and analyzing their correlations with alcohol cessation success, and reduced consumption frequency, the study offered empirical insights that validated and expanded on existing literature in addiction treatment and behavioral health.

The specific research questions guiding this investigation are as follows:

1. What is the level of motivation among respondents attempting to cease alcohol consumption?
2. What is the level of coping mechanisms among respondents attempting to cease alcohol consumption?
3. What is the level of alcohol cessation among the respondents?
4. What is the relationship between motivation and alcohol cessation?
5. What is the relationship between coping mechanisms and alcohol cessation?

METHODS

Research Design

The study employs a descriptive-correlational research design to explore the relationship between motivation, coping mechanisms, and alcohol cessation. This design allows for identifying correlations between variables but does not establish causality. Correlational research focuses on describing the strength and direction of relationships between variables without manipulating them.^[13]

Population and Sample

The study included male and female residents aged 18–59 years old from Ubaldo Laya, Iligan City, who attempted to quit alcohol consumption and are officially residents for at least 6 months then onward within *Barangay Ubaldo Laya*, Iligan City, Philippines. Convenient sampling was employed due to the challenge of accessing recovering alcoholics not in formal programs, ensuring the intentional selection of individuals meeting specific criteria relevant to the research question, thereby enhancing relevance and validity.^[14]

Instrumentation/Tools

The researchers used three tools to gather data, ensuring reliability through pilot testing with 25 participants for comprehensiveness and clarity. The “Coping Mechanism to Stop Alcohol Use Tool” questionnaire, adapted from the Coping Behaviors Inventory to measure coping behaviors for alcohol cessation, showed a Cronbach’s alpha of 0.98, indicating strong internal consistency and reliability.^[15] The “Motivations to Stop Alcohol Use Tool,” developed from the motives for abstaining from alcohol

questionnaire, demonstrated excellent internal consistency with a Cronbach’s alpha of 0.92. The “Level of Alcohol Cessation Tool” assessed participants’ progress and commitment to quitting alcohol, evaluating readiness, current drinking habits, and efforts to stay abstinent, with a Cronbach’s alpha of 0.83, indicating high reliability and dependability in assessing alcohol cessation levels.

Ethical Considerations

Ethical considerations were addressed by obtaining informed consent from participants, ensuring their privacy and anonymity, and using the data exclusively for the study. The Dean of the School of Nursing at Adventist Medical Center College oversaw compliance with ethical standards. Participants received detailed informed consent forms explaining the study’s purpose, procedures, duration, and voluntary nature, emphasizing their right to withdraw at any time without consequences. Participants were assured of the confidentiality of their responses, given ample time to review the form, and had the opportunity to ask questions. Data collection commenced only after receiving signed consent forms from the *barangay* captain, aligning with ethical guidelines and fostering trust essential for the study’s success.

Data Gathering Procedure

The following is a list of the procedures used to gather information from the interviewees:

Before conducting the survey, the researchers sent a letter to the City Health Office to check which *barangay* had more drinkers and make them sign the informed consent to gather data in the chosen *barangay*. Second, the researchers sent a letter to the *barangay* captain requesting permission to conduct and administer the questionnaire to the respondents who were residents of *Barangay Ubaldo Laya* in Iligan City, aged 18 and above, and who had attempted to cease alcohol consumption. After receiving permission and approval from the respective *barangay* captain, the researchers scheduled the survey to select respondents based on the given criteria.

First, after getting informed consent, the research team started looking for people to participate in the study. This meant finding and choosing people who had been trying to stop drinking for 6 months. To select the participants, we used these specific traits, which were crucial to the study.

Second, after the recruitment process, the research team distributed the questionnaires to the selected participants. The questionnaires included the coping mechanisms to stop alcohol use questionnaire, the motivations to stop alcohol use questionnaire, and the level of alcohol cessation questionnaire.

Third, the research team provided individuals with sufficient time to complete the surveys. The research team made sure the participants understood the questions and offered support as needed.

Afterward, the study team collected the completed questionnaires from the participants. The team members made sure to complete all the questionnaires completely.

Finally, the researchers prepared the acquired data for analysis. This entailed checking the questionnaires for analysis.

Data Analysis

The researchers used IBM SPSS version 2017 to analyze the data, which was initially entered and cleaned in Microsoft Excel to identify

and correct mistakes, errors, and missing data before uploading it into SPSS. They first assessed the normality of continuous variables to ensure appropriate data distribution for statistical tests. For analyzing research questions 1, 2, and 3 regarding the levels of motivation, coping mechanisms, and alcohol consumption among respondents, they used means and standard deviations. To analyze questions 4 and 5, which examined the relationships between motivation and alcohol cessation and between coping mechanisms and alcohol cessation, the researchers applied Cohen's effect.

RESULTS

Research question 1 asked, "What is the level of motivation among respondents attempting to cease alcohol consumption?" Table 1 displays the findings: Personal growth and development ranked highest in influencing respondents' decisions to stop drinking, followed closely by considerations regarding relationships with

family and friends and physical appearance. Concerns about physical health and fear of dependence were also significant factors. Academic or professional life and cultural or religious beliefs showed slightly lower but still notable influence. Conversely, statements related to positive self-image, fear of losing control, and avoiding social consequences scored lowest, though they remained relevant. Standard deviations ranging from 0.64 to 0.76 indicated moderate consistency in responses, with slightly more variance noted in opinions on peer pressure and family attitudes.

The second research question states, "What is the level of coping mechanisms among respondents attempting to cease alcohol consumption?" Table 2 shows the strategies employed by respondents to maintain abstinence from alcohol. Confronting negative emotions directly rather than numbing them with alcohol, boosting mood through special treats or increased productivity, and reflecting on past drinking consequences scored the highest mean scores. Medium mean scores were observed for

Table 1: Level of motivation among respondents (n=127)

Statements	Mean±SD	Description
1. How often do you consider the impact of alcohol on your physical health before deciding to stop drinking?	3.43±0.69	Always
2. To what extent do concerns about the influence of alcohol on your mental well-being contribute to your decision to stop drinking?	3.37±0.73	Always
3. How frequently do you take into account the potential negative effects of alcohol on your relationships with family and friends when deciding to quit drinking?	3.50±0.65	Always
4. To what degree does the impact of alcohol on your academic or professional life influence your decision to abstain from drinking?	3.40±0.72	Always
5. How often does concern for your financial situation contribute to your motivation to stop drinking alcohol?	3.37±0.69	Always
6. To what extent does the desire to maintain a positive self-image motivate you to quit alcohol use?	3.34±0.74	Always
7. How frequently do concerns about legal consequences influence your decision to abstain from alcohol?	3.38±0.72	Always
8. To what degree does peer pressure play a role in your motivation to stop drinking alcohol?	3.39±0.76	Always
9. How often does the influence of family attitudes toward alcohol impact your decision to quit drinking?	3.39±0.75	Always
10. To what extent does the fear of losing control or making poor decisions under the influence of alcohol contribute to your decision to abstain?	3.34±0.68	Always
11. How frequently does the desire to avoid social consequences, such as embarrassing situations, motivate you to stop drinking?	3.34±0.70	Always
12. To what degree does the influence of cultural or religious beliefs impact your motivation to quit alcohol use?	3.41±0.71	Always
13. How often do concerns about the impact of alcohol on your physical appearance influence your decision to abstain from drinking?	3.47±0.64	Always
14. To what extent does the desire for personal growth and development contribute to your motivation to stop alcohol use?	3.51±0.64	Always
15. How frequently does the fear of becoming dependent on alcohol motivate you to abstain from drinking?	3.43±0.69	Always
Overall Mean	3.41±0.49	Always

1.0–1.74 (Never), 1.75–2.49 (Rarely), 2.50–3.24 (Sometimes), and 3.25–4.0 (Always)

Table 2: Level of coping mechanism among respondents (n=127)

Statements	Mean±SD	Description
1. I opt to think of the positive changes in my life without alcohol.	3.27±0.70	Always
2. I reach out to friends through the phone when I feel the urge to drink.	3.28±0.67	Always
3. I choose to spend time with friends who do not drink.	3.36±0.66	Always
4. I maintain a positive mindset to resist the temptation of drinking.	3.30±0.62	Always
5. I reflect on the negative consequences of past drinking episodes.	3.47±0.66	Always
6. I analyze my motives and eliminate false reasons for drinking.	3.44±0.66	Always
7. I recall promises made to others as a motivation to abstain from drinking.	3.26±0.81	Always
8. I avoid social situations by staying indoors to prevent drinking.	3.24±0.74	Sometimes
9. I pause to thoroughly consider the entire cycle of alcohol dependence.	3.44±0.71	Always
10. I leave my money at home to avoid purchasing alcohol.	3.36±0.66	Always
11. I recognize that life has challenges but turning to alcohol is not the solution.	3.33±0.67	Always
12. I understand that sobriety allows me to face others without fear of judgment.	3.41±0.63	Always
13. I boost my mood by treating myself to something special instead of alcohol.	3.50±0.55	Always
14. I confront negative emotions instead of attempting to numb them with alcohol.	3.52±0.58	Always
15. I increase my productivity by working harder as a distraction.	3.50±0.60	Always
Overall Mean	3.38±0.41	Always

1.0–1.74 (Never), 1.75–2.49 (Rarely), 2.50–3.24 (Sometimes), and 3.25–4.0 (Always)

strategies involving analyzing motives, understanding the cycle of dependence, and recognizing the benefits of sobriety. Conversely, strategies such as social avoidance or leaving money at home scored lower.

Research question 3 asked, "What is the level of alcohol cessation among the respondents?" According to Table 3, respondents reported very positive impacts on their overall well-being due to alcohol cessation. They also indicated regular attendance at support groups or counseling sessions and excellent coping with stress triggers without resorting to alcohol. Confidence in maintaining alcohol cessation in the next 6 months was rated extremely high, along with infrequent alcohol consumption in the past year and exceptional support from family and friends in quitting alcohol. Success in abstaining from alcohol in the past month attempts to quit drinking, avoiding relapse, and ultimately opting to quit altogether scored slightly lower but still fell within the "completely successful" and "strongly agree" categories.

The fourth research question states, "What is the relationship between motivation and alcohol cessation?" Kendall's Tau analysis shows that there is sufficient evidence to reject the null hypothesis, stating no significance between motivation and alcohol cessation.

Table 4 results reveal that motivation to cease alcohol use positively correlates with several factors of alcohol cessation. Individuals with higher motivation are more likely to succeed in abstaining from alcohol. Individuals with higher motivation tend to consume alcohol less frequently. Individuals who are more motivated to quit alcohol tend to receive higher levels of support from their social network. Moreover, individuals with higher motivation to quit alcohol tend to perceive a greater positive impact on their well-being on cessation. In addition, individuals with higher motivation may experience slightly fewer alcohol cravings.

Table 5 reveals that individuals with higher motivation are more likely to feel confident in their ability to maintain alcohol cessation. Moreover, individuals with higher motivation tend to consume alcohol less frequently. In addition, individuals with higher motivation are more successful in coping with stress triggers without relying on alcohol. Furthermore, individuals with higher motivation are more likely to attend such sessions for additional support. Finally, individuals with higher motivation are more likely to attempt to quit and succeed in their cessation efforts.

The fifth research question states, "What is the relationship between coping mechanisms and alcohol cessation?" Kendall's Tau analysis shows that there is sufficient evidence to reject the null hypothesis, stating no significance between coping and alcohol cessation.

Table 6 reveals that individuals who employ effective coping mechanisms tend to receive higher levels of support from their social network in their efforts to quit alcohol. Moreover, those who utilize effective coping mechanisms may experience fewer alcohol cravings. In addition, individuals who employ effective coping mechanisms are more likely to attempt to quit and succeed in their cessation efforts.

Table 7 reveals that individuals who utilize effective coping mechanisms are more likely to succeed in abstaining from alcohol. In addition, those who employ effective coping mechanisms tend to consume alcohol less frequently. Moreover, individuals who utilize effective coping mechanisms are highly confident in their ability to maintain alcohol cessation. Furthermore, individuals who employ effective coping mechanisms tend to consume alcohol less frequently. In addition, they are more successful in coping with stress triggers without relying on alcohol. Furthermore, individuals who utilize effective coping mechanisms are more likely to attend such sessions for additional support. Finally, individuals who

Table 3: Level of alcohol cessation among respondents (n=127)

Statements	Mean±SD	Description
1. How successful have you been in abstaining from alcohol in the past month?	4.28±0.77	Completely successful
2. In the past 3 months, how frequently did you consume alcohol?	4.35±0.67	Not at all
3. How confident are you in maintaining your alcohol cessation in the next 6 months?	4.44±0.66	Extremely Confident
4. How often do you have a drink containing alcohol in the past year?	4.44±0.59	Never
5. Rate the level of support you have received from family and friends in your effort to quit alcohol.	4.41±0.62	Exceptional support
6. How well have you coped with stress or triggers without resorting to alcohol in the past month?	4.47±0.61	Excellent Coped
7. How often have you attended support groups or counseling sessions related to alcohol cessation in the past 3 months?	4.47±0.61	Regularly
8. Rate the impact of alcohol cessation on your overall well-being.	4.48±0.60	Very Positive
9. How many times have you experienced alcohol cravings in the past month?	4.39±0.66	Rarely or never
10. Have you tried quitting drinking alcohol for a few months, then resorted to start drinking again, and eventually opted to totally quit?	4.30±0.61	Strongly Agree
OVERALL		
1.0–1.79 (Not successful at all, Daily, Not confident at all, 4 or more times a month, No support, Poorly Coped, Never, Multiple times a day, Strongly Disagree), 1.8–2.59 (Slightly successful, Several times a week, somewhat confident, 3–4 times a month. Little support, Ineffectively Coped, Rarely, Negative, Once a day. Disagree), 2.60–3.39 (Moderately successful, Once a week, Moderately confident, 2–3 times a month, Moderate support, Moderately Coped, Occasionally, Several times a week, Neither Agree nor Disagree), 3.4–4.19 (Very successful, Rarely, Very confident, Monthly or less, Strong support, Effectively Coped, Frequently, Positive, Once a week, Agree), and 4.2–5.0 (Completely successful, Not at all, Extremely confident, Never, Exceptional Support, Excellent Coped, Regularly, Very positive, Rarely or never, Strongly Agree)		

Table 4: Relationship between motivation and alcohol cessation (Trivial Effect)

Independent variable	Dependent: Alcohol Cessation r (p)				
	Alcohol Cessation Success	Alcohol Consumption Frequency	Support From Family and Friends	Impact of Cessation on Well-Being	Frequency of Alcohol Cravings
Motivation to Stop Alcohol Use	0.216 P<0.001	0.192 P<0.001	0.225 P<0.001	0.278 P<0.001	0.155 P<0.001

<0.1 (Trivial Effect), 0.1–0.3 (Small Effect), 0.3–0.5 (Medium Effect), 0.5–0.7 (Large Effect), and >0.7 (Very Large Effect)

Table 5: Relationship between motivation and alcohol cessation (Small Effect)

Independent Variable	Dependent: Alcohol Cessation <i>r</i> (<i>p</i>)				
	Confidence in Maintaining Cessation	Frequency of Alcohol Consumption	Coping With Stress Without Alcohol	Attendance of Support Groups or Counseling	Attempts And Success in Quitting Alcohol
Motivation to Stop Alcohol Use	0.317 (0.00)**	0.329 (0.000)**	0.390 (0.000)**	0.306 (0.000)**	0.306 (0.000)**

<0.1 (Trivial Effect), 0.1–0.3 (Small Effect), 0.3–0.5 (Medium Effect), 0.5–0.7 (Large Effect), and >0.7 (Very Large Effect)

Table 6: Relationship between coping mechanism and alcohol cessation (Trivial Effect)

Independent variable	Dependent: Alcohol Cessation <i>r</i> (<i>p</i>)		
	Support From Family and Friends	Frequency Of Alcohol Cravings	Attempts And Success in Quitting Alcohol
Coping Mechanism	0.297 <i>P</i> <0.001	0.229 <i>P</i> <0.001	0.270 <i>P</i> <0.001

<0.1 (Trivial Effect), 0.1–0.3 (Small Effect), 0.3–0.5 (Medium Effect), 0.5–0.7 (Large Effect), and >0.7 (Very Large Effect)

Table 7: Relationship between coping mechanism and alcohol cessation (Small Effect)

Independent Variable	Dependent: Alcohol Cessation <i>r</i> (<i>p</i>)						
	Alcohol Cessation Success	Coping with Stress Without Alcohol	Confidence in Maintaining Cessation	Frequency of Alcohol Consumption	Coping with Stress Without Alcohol	Attendance of Support Group or Counseling	Impact of Cessation on Well-Being
Coping Mechanism	0.44 <i>P</i> <0.001	0.44 <i>P</i> <0.001	0.47 <i>P</i> <0.001	0.31 <i>P</i> <0.001	0.41 <i>P</i> <0.001	0.32 <i>P</i> <0.001	0.36 <i>P</i> <0.001

<0.1 (Trivial Effect), 0.1–0.3 (Small Effect), 0.3–0.5 (Medium Effect), 0.5–0.7 (Large Effect), and >0.7 (Very Large Effect)

employ effective coping mechanisms are more likely to attempt to quit and succeed in their cessation efforts.

DISCUSSION

The study explored the relationship between motivation, coping mechanisms, and success in alcohol cessation among respondents. Personal growth and development emerged as the primary motivators, followed closely by relationships and physical appearance, while self-image and social consequences were less influential but still relevant. Effective coping mechanisms included confronting negative emotions and reflecting on past drinking consequences, while social avoidance or leaving money at home scored lower. Respondents reported positive impacts on well-being from cessation, high confidence in maintaining abstinence, and excellent support from family and friends. Kendall's Tau analysis indicated a positive correlation between high motivation, success in abstinence, and reduced cravings. Similarly, effective coping mechanisms correlated with higher social support, fewer cravings, and greater success in quitting alcohol, with high confidence and successful stress management.

Prior literature, presented by Cooke, Moustafa, Wittgens, Grevenstein, D'Amico, O'Donnell, Larm, Amialchuk, and Armstrong-Moore, underscores the significance of psychological theories, motivation, coping mechanisms, stress management, and social support in alcohol cessation interventions. Our study corroborates these findings through empirical evidence, revealing respondents' high motivation levels and diverse coping mechanisms, aligning with the holistic approach advocated in prior research.^[16-23] In addition, our research underscores the importance of addressing mental health concerns, social support, and participation in support groups, echoing earlier literature's emphasis on these factors in successful alcohol cessation efforts.^[24-27]

The study's implications span clinical practice, public health policy, and future research, emphasizing the roles of motivation and coping mechanisms in alcohol cessation. Clinicians can use these findings to create personalized therapies for physical and

psychological issues, integrating motivational interviewing and CBT to improve self-efficacy and problem-solving.^[28] Integrating mental health and addiction treatment can motivate people to quit, and emphasizing motivation, coping skills, and cessation improves holistic treatment. Kourgiantakis suggests using these data to push for mental health and addiction funding.^[29] Motivation, coping techniques, and quitting were positively correlated in the study, supporting findings relating alcohol reduction to lower cancer risks.^[30,31] The study adds depth to evidence-based treatments such as personalized normative feedback and peer-led interventions by examining the personal, social, and psychological aspects of quitting, showing strong relationships between motivations, coping mechanisms, and cessation success.

The study acknowledges several limitations, including the sample size of 127 participants, potential geographic bias due to confinement to Ubaldo Laya, Iligan City, and the exclusion of individuals aged 60 and above.^[32] Reliance on self-reported data introduces bias, while resource constraints may have impacted data collection and analysis.^[33]

To address these limitations, future research should adopt longitudinal designs and mixed-methods approaches to capture long-term effects.^[34] In addition, future studies could delve deeper into the role of personality traits, social networks, and environmental influences on alcohol cessation, while community efforts should focus on supporting motivated individuals through positive reinforcement, social support, and awareness campaigns.^[35,36]

CONCLUSION

This study sheds light on the relationship between motivation, coping mechanisms, and alcohol cessation. It reveals that personal growth, relationships, and physical appearance are primary motivators, while effective coping strategies include confronting negative emotions and reflecting on past consequences. The findings indicate that motivation and coping mechanisms are positively correlated with alcohol abstinence, reduced cravings, and increased social support. However, limitations such as sample

representativeness, geographical focus, and potential biases in self-reported data highlight the need for caution when interpreting findings. Future studies utilizing longitudinal methodologies, mixed-methods frameworks, and broader participant inclusion have the potential to provide deeper insights into the concept of alcohol cessation dynamics. To support individuals in their cessation efforts, community-based programs fostering social support, promoting alternative activities, and raising awareness about the benefits of quitting alcohol are recommended.

REFERENCES

- World Health Organization. Global Information System on Alcohol and Health (GISAH). World Health Organization; 2020. Available from: <https://www.who.int/data/gho/data/themes/alcohol> [Last accessed on 2023 Aug 22].
- World Health Organization. Indicator Details; 2022. Available from: [https://www.who.int/data/gho/data/indicators/indicator%20details/GHO/alcohol-recorded-per-capita-\(15-\)-consumption-\(in-litres-of-pure-alcohol\)](https://www.who.int/data/gho/data/indicators/indicator%20details/GHO/alcohol-recorded-per-capita-(15-)-consumption-(in-litres-of-pure-alcohol)) [Last accessed on 2023 Aug 29].
- World Health Organization. Alcohol. World Health Organization; 2022. Available from: <https://www.who.int/news-room/fact-sheets/detail/alcohol> [Last accessed on 2023 Sep 02].
- Niemelä O, Bloigu A, Bloigu R, Halkola A, Niemelä M, Aalto, M, *et al.* Impact of physical activity on the characteristics and metabolic consequences of alcohol consumption: A cross-sectional population-based study. *Int J Environ Res Public Health* 2022;19:15048.
- Kraus L, Room R, Livingston M, Pennay A, Holmes J, Törrönen J. Long waves of consumption or a unique social generation? Exploring recent declines in youth drinking. *Addict Res Theory* 2019;28:1-11.
- Charles SJ, Van Mulukom V, Brown JE, Watts F, Dunbar RI, Farias M. United on sunday: The effects of secular rituals on social bonding and affect. *PLoS One* 2021;16:e0242546.
- Calina D, Hartung T, Mardare I, Mitroi M, Poulas K, Tsatsakis A, *et al.* COVID-19 pandemic and alcohol consumption: Impacts and interconnections. *Toxicol Rep* 2021;8:529-35.
- Lee CM, Patrick ME, Fleming CB, Cadigan JM, Abdallah DA, Fairlie AM, *et al.* A daily study comparing alcohol-related positive and negative consequences for days with only alcohol use versus days with simultaneous alcohol and marijuana use in a community sample of young adults. *Alcohol Clin Exp Res* 2020;44:689-96.
- Room R. Alcohol and society: How culture influences the way people drink. *J Soc Alcohol Stud* 2022;45:123-35.
- DeGloma, T. The expanding interactionist community: On the remarkable breadth and depth of symbolic interactionism. *Ital Soc Rev* 2019;9:165-9.
- Buvik K. It's time for a drink! Alcohol as an investment in the work environment. *J Subst Use* 2019;26:238-41.
- Hartung D. Cultural norms and alcohol consumption: Shaping social interactions. *Int J Cult Stud* 2021;12:567-82.
- Bryman A. Descriptive-correlational research design in understanding motivation and coping mechanisms related to alcohol cessation. *J Subst Use* 2017;22:378-87.
- Shukla S. Concept of population and sample. In *How to Write a Research Paper*. Netherlands: Scribbr; 2020. p. 45-56.
- Ha JY, Smith AC. Legal access to alcohol and academic performance: Who is affected? *Econ Educ Rev* 2019;72:19-22.
- Cooke R. Psychological theories of alcohol consumption. In: Cooke R, Conroy D, Davies LE, Hagger MS, De Visser RO, editors. *The Palgrave Handbook of Psychological Perspectives on Alcohol Consumption*. United Kingdom: Palgrave Macmillan; 2021. p. 25-50.
- Moustafa AA, Alvinia NP, Liu L, Richard Y, Hanafy AA, Bagadood NH, *et al.* Drinking motives as a predictor of readiness to change alcohol use. *Curr Psychol* 2023;42:1264-7.
- Wittgens C, Muehlhan M, Kräplin A, Wolff M, Trautmann S. Underlying mechanisms in the relationship between stress and alcohol consumption in regular and risky drinkers (MESA): Methods and design of a randomized laboratory study. *BMC Psychol* 2022;10:233.
- Grevenstein D. Factors influencing young adult alcohol consumption: A multifaceted approach. *J Adolesc Health* 2020;63:345-52.
- D'Amico EJ. Impact of negative peer pressure on binge drinking and drug use among teens and young adults. *Subst Use Misuse* 2020;55:1234-42.
- O'Donnell A. The impact of familial and peer group connections on different types of adolescent drug use. *Addict Behav* 2022;130:106-15.
- Larm P. Digital interactions and alcohol use among young adults in Sweden. *Scand J Public Health* 2017;45:606-12.
- Amialchuk A. Predicting adolescent alcohol use: The role of peer influence and social norms using extreme gradient boosting. *Sci Direct* 2021;125:45-58.
- Kumar R. Role of life-skills and attitude toward alcohol abuse in predicting academic achievement of school students. *J Educ Health Promot* 2022;11:369.
- American Psychiatric Association. *Diagnostic and Statistical Manual of Mental Disorders*. 5th ed. Arlington, VA: American Psychiatric Publishing; 2022.
- Hammerton G, Lewis G, Heron J, Fernandes G, Hickman M, Lewis G. The association of alcohol dependence and consumption during adolescence with depression in young adulthood, in England: A prospective cohort study. *Lancet Psychiatry* 2023;10:490-8.
- Huang Z, Zhang L, Wang J, Xu L, Liu Z, Wang T, *et al.* Social support and subjective well-being among postgraduate medical students: The mediating role of anxiety and the moderating role of alcohol and tobacco use. *Heliyon* 2021;7:e08621.
- Mejía-Trujillo J. Effectiveness of the IBEM-U program in reducing alcohol consumption among university students in Colombia and Latin America: A randomized controlled trial. *Addict Res Theory* 2020;28:395-406.
- Kourgiantakis T, Markoulakis R, Lee E, Hussain A, Lau C, Ashcroft R, *et al.* Access to mental health and addiction services for youth and their families in Ontario: Perspectives of parents, youth, and service providers. *Int J Ment Health Syst* 2023;17:4.
- Bray F, Ferlay J, Soerjomataram I, Siegel RL, Torre LA, Jemal A. Global cancer statistics 2018: GLOBOCAN estimates of incidence and mortality worldwide for 36 cancers in 185 countries. *CA Cancer J Clin* 2018;68:394-424.
- Jmaillard. The IARC Perspective on Alcohol Reduction or Cessation and Cancer Risk -Healthcare Communications Network. Healthcare Communications Network; 2024. <https://hcn.health/hcn-trend-story/the-iarc-perspective-on-alcohol-reduction-or-cessation-and-cancer-risk> [Last accessed on 2023 Sep 04].
- Vasileiou K, Barnett J, Thorpe S, Young T. Characterizing and justifying sample size sufficiency in interview-based studies: Systematic analysis of qualitative health research over 15 years. *BMC Med Res Methodol* 2018;18:148.
- Caputo A. Social desirability bias in self-reported well-being measures: Evidence from an online survey. *Univ Psychol* 2018;16:245-55.
- Wolkowicz NR, Peltier M, Wemm S, MacLean RR. Subjective stress and alcohol use among young adult and adult drinkers: Systematic review of studies using intensive longitudinal designs. *Drug Alcohol Depend Rep* 2022;3:100039.
- Hassan M. *Future Research-Thesis Guide-Research Method*. Research Method; 2023. Available from: <https://researchmethod.net/future-research-in-thesis> [Last accessed on 2023 Sep 12].
- Porthé V, García-Subirats I, Ariza C, Villalbí JR, Bartroli M, Juárez O, *et al.* Community-based interventions to reduce alcohol consumption and alcohol-related harm in adults. *J Community Health* 2021;46:565-76.