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Women's Drinking Decisions in Sexually Risky Situations: Effects of a Low Level of Intoxication

Nora E. Noel, Ph.D.,

University of North Carolina Wilmington

Karen A. Daniels, Ph.D.,

University of North Carolina Wilmington

Richard L. Ogle, Ph.D.,

University of North Carolina Wilmington

Stephen A. Maisto, Ph.D.,

Syracuse University

Lee A. Jackson Jr., Ph.D.,

University of North Carolina Wilmington

Sarah J. Ehlke, M.A., and

University of North Carolina Wilmington

Mallorie G. Carroll, B.A.

University of North Carolina Wilmington

Abstract

Introduction—Alcohol administration studies assessing alcohol's deleterious effects on women's threat perception and response in potential sexual assault situations usually employ a moderate to high dose (.07% BAC or more) and measure alcohol's effects specifically on women's sexual decisions. The current study used a low dose (.03%, equivalent to about 1–2 drinks) to assess women's projected decisions on a different risky behavior: decisions to continue drinking and to drink higher amounts in a series of ecologically-valid sexual risk situations.

Methods—Young adult women ($n = 17$; M age = 21.8, $sd = 1.3$, range 21 – 25) participated in a three-session double-blind within subjects 2 (type of scenario) $\times$ 3 (beverage) experiment, responding each time to 6 vignettes with an attractive man who was either Familiar or had Just Met her. In each session participants consumed a beverage (alcohol, placebo or water, random

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Corresponding Author: Nora E. Noel, Ph.D., Department of Psychology, University of North Carolina Wilmington, Wilmington, NC 28403-5612, noeln@uncw.edu, 910.962.4044.

Some of the data from this study were presented at the Research Society on Alcoholism conventions in both 2013 and 2014.

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order) and projected emotional reactions and drinking decisions (likelihood and amount) in each of the 6 scenarios.

Results—Regardless of beverage, women predicted greater happiness, drinking likelihood, and drinking amount with “Familiar” men. However, there was also an interaction: They projected increased subsequent amounts in the .03% BAC (vs. water and placebo) condition differentially in the “Familiar” scenarios.

Conclusion—When the woman is Familiar with the man in a risky sexual situation, just one drink may increase subsequent projected alcohol amount over that originally intended. Implications include a low dose as a possible prime for more drinking, increasing sexual assault risk.

Keywords

Alcohol administration; young adult women; unwanted sex; scenarios

Despite attention to the problem, young adult women (ages 18 – 25) remain at disturbing risk for coerced or even forced sex or rape. In their seminal national study, Koss et al (1987) reported that 27.5% of college women had experienced at least one incident of rape or attempted rape since the age of 14. In a recent review, Gidycz et al. (2006) pointed out that several subsequent studies have consistently shown that 16 – 18% of college women in the US reported a rape or attempted rape just in the 3 – 6 months prior to being surveyed. This, despite the fact that much research has been directed towards understanding and reducing these incidents (see Gidycz et al. 2006, for a complete review). One of the most robust findings is that sexual assault is associated with alcohol consumption by both men and the women (Abbey, 2002; Ullman, 2003; Testa & Livingston, 2009). Ullman (2003) cited statistics showing that alcohol use was present in anywhere from one-half to two-thirds of sexual assault cases, but also pointed out that these associations were not sufficient evidence for a causal effect. However, Parks et al. (2008), using Interactive Voice Response for an 8-week daily assessment of college women, found that the incidence of sexual aggression was significantly higher on heavy drinking days. Testa and Livingston (2009), after reviewing alcohol administration studies, suggested that a moderate to high dose of alcohol, bringing the Blood Alcohol Concentration (BAC) to .08 or above, led women to be less aware of assault risk cues (or at least, less uncomfortable with them—see Davis et al., 2009), more likely to endorse sexual approach behaviors and less likely to say they would resist sexual advances.

Although the offender is completely culpable for his actions in a sexual assault, several researchers have suggested that changing women’s drinking might reduce the probability of sexual assault by attenuating the deleterious effects of alcohol on cognition in sexual situations (see Gidycz, et al. 2006 and Norris, 2011). The Cognitive Mediation Model (CMM) (Norris et al, 2004) characterizes sexual decision making as a complex series of subtle interactions between the woman and the man and suggests, for example, that especially with a man to whom she is sexually attracted, a woman might experience difficulty distinguishing between sexual assault cues and a man’s expression of sexual

attraction. Alcohol's cognitive effects might add further complexity to her decision regarding the safety or riskiness of continuing an interaction with the man.

Moderate to high doses of alcohol appear to impair sexual decision-making either by misperception of sexual assault risk or by impeding a woman's self-protective decisions to leave or stop a potentially coercive interaction or both (Gidycz et al. 2006). However, an additional type of decision that has received little research attention is alcohol's effects on women's decisions to continue drinking in potentially coercive situations, possibly increasing the risk she faces of assault with each additional drink. Drinking in potentially coercive circumstances is itself a primary risky behavior partly because even a small dose of alcohol may potentiate decisions to consume more alcohol than originally intended. A woman may initiate, then continue alcohol consumption in a sexual situation in a reciprocal pattern: Drinking leads to alcohol-related cognitive deficits, potentiating decisions to drink more and eventually leads to risky decisions about sexual behavior (and further drinking).

One way to conceptualize women's drinking decisions in sexual situations is through decision theory (see Kuther, 2002; Janis & Mann, 1977). A woman in a sexual situation is often conflicted about drinking. Risks for coercion may be present and perceived, but alcohol consumption is attractive for a number of reasons, including its associations with good times, dating and good (not coerced) sex (Crowe & George, 1989). Decision theory posits that a person's response selection in a conflict situation is based on balancing inhibitory danger signals (risk) vs impelling cues (signaling possible rewards). Alcohol Myopia theory (Steele & Josephs, 1990) is often used to explain effects of intoxication on people's decisions to engage in risky behavior and posits that intoxication narrows their focus to the salient impelling cues to the relative neglect of cues signaling risk. Accordingly, the influence of impelling cues and the strength of their association specifically with women's drinking decisions in sexual situations have been our recent research focus.

To assess specific cues that could make drinking in sexual situations attractive to young adult heterosexual women, we asked eleven focus groups to generate relevant alcohol-related social situations with mixed "attraction" and "risk" cues (Noel et al. *in press*). These data were used to construct several short ecologically-relevant vignettes representing typical sexual situation conflicts in which these women had to make decisions about what to drink (likelihood and amount). The vignettes were kept short deliberately by presenting only the "beginning" of the story. Whether or not the man would be sexually coercive was left up to the projection of the participant, as it is in a real situation where she must make judgments about her drinking. We wrote, then winnowed and shaped the vignettes through four subsequent studies validating attraction cues, risk cues, and believability with our target group. (These data are available from the first author.) Through Factor Analysis of vignette responses and a Confirmatory Factor Analysis with a second sample, we derived two vignette groupings, each with three scenarios, representing two types of alcohol-related risky sexual situations as perceived by these women: one group in which the man was "Familiar" (they had known him for a short while and perhaps had even been on a couple of dates with him) and the other in which they had only recently "Just Met" the man who seemed interested in her. We found, consistent with the CMM (Norris et al. 2004), that the "Familiar" men presented the strongest conflict because they were deemed more risky for

coercion but also more attractive than “Just Met” men. Sober women in both our large samples projected themselves as significantly more likely to drink and more likely to consume at a higher level with the Familiar men. Figure 1 shows an example of each scenario type. In a study of women’s decisions regarding risky sex (versus sexual assault), Zawacki et al. (2009) similarly found that women reported they would drink more in a sexual interaction with a Familiar man. However, in that study the familiar man was seen as “safer” than a New Acquaintance at least in regard to their likelihood of being exposed to HIV or another STD.

The aim of our current alcohol administration study was to assess if the ingestion of a single beverage containing alcohol would affect women’s projected likelihood and amount of alcohol consumption in potentially sexual situations and whether Familiarity with the man might be an exacerbating factor. In all of our previous studies, participants making the judgments about drinking were sober. This study was designed to test whether a small amount of alcohol (the beginning of a drinking episode) potentiated more alcohol use in a risky sexual situation. The ecologically-relevant cues for both sexual attraction and sexual assault-risk were present in all scenarios. Given that a moderate (.07%) or higher alcohol dose tends to impair women’s cognitive abilities, we hypothesized that the cognitive impairment potentiating drinking more than originally intended begins earlier in the drinking episode; that is, the first drink may lead to more drinking and the slightly intoxicated woman increases the amount she intends to drink with each new decision (new opportunity to drink). By the time she reaches the .07% level, healthy drinking choices may be more difficult and interventions might be less effective. Prior familiarity with the man might further increase drinking likelihood. Similar to the alcohol myopia process studied at higher dose levels, even a small amount of alcohol might cause an increased focus on his impelling (attractive) cues and less concern about the assault risks possible in the situation. To date, no research examines whether decisions regarding future drinking likelihood or amount change from immediately before to immediately after the first drink at a social event.

To test this hypothesis, the effects of a small dose of alcohol (projected BAC .03%) was contrasted with a clearly non-alcohol condition. Further, we were concerned that at such a low dose, alcohol’s pharmacological effect might be confounded with expectancy effects, so we added a placebo administration session. The design was a double-blind 2×3 within-subjects factorial design with 17 young adult women (ages 21 – 25), assessing drinking decisions in the three Familiar versus three Just Met romantic conflict scenarios.

Methods

Design

The 17 participants each came for three sessions, during which they consumed a beverage (no alcohol, placebo, or low alcohol; given in random order) and made drinking decisions about each of the six scenarios (“Familiar” versus “Just Met”). An advantage of the 2×3 double-blind within-subjects design was that each participant served as her own control, thereby decreasing variability due to individual differences and reducing the number of participants needed. Dependent measures included the woman’s projected likelihood of

accepting an alcoholic drink and the projected number of standard drinks she would consume in each vignette.

Participants

Women responded to flyers on the campus of a southeastern US state university asking for healthy heterosexual females age 21 – 30 who were “regular drinkers” willing to participate in a three-session study that included consuming alcohol in the laboratory. They were told about the criteria for participating (see details cited later), and the requirements of the study and were asked if they wanted to be screened: 19 volunteers passed the screening criteria with no self-reported alcohol or drug problems, no use of medications that might interact negatively with alcohol, no health or psychiatric problems contraindicating alcohol consumption, and agreement to participate in three weekly sessions of up to three hours (because they would be required to remain in the laboratory after each session until their BACs returned to zero). Of the 19, one participant decided to quit after the first session and another completed only two sessions because she experienced a need for medication incompatible with ethanol dosing.

The 17 women (M age = 21.8, SD = 1.3, Range 21 – 25) who completed all three sessions self-identified as Euro-American (13), African-American (2), Hispanic (1), and Multi-racial (1). All were single, although three were “in a dating relationship.” They reported 15 – 80 (M = 39.06, SD = 19.01) days drinking in the last 90 days, with a mean of 3.5 (SD = 0.61) standard drinks per drinking occasion. Three reported that they drank about once per week, 13 drank 2 – 4 times per week and one reported drinking almost every day. For other substances, 15 reported caffeine use every day or nearly every day while two reported occasional caffeine use; three were smokers, and only one an everyday smoker; seven reported occasional marijuana use, with only one using more than once per week; all 17 were using oral contraceptives. No other drug use was reported. All reported being voluntarily sexually active with men during the past year. However, 10 reported at least one occasion of “unwanted (but not forced)” sexual interaction with a man and six reported “unwanted (but not forced)” sexual intercourse. One reported one occasion of “forced” sexual interaction, but no one reported forced sexual intercourse.

Measures

Measures included a demographics questionnaire (age, ethnicity, education level, sexual orientation, and dating status) a self-reported sexual experiences (mutual, ambivalent/unwanted or forced) questionnaire for the past year, the set of six scenarios and response sheets with a series of questions for each scenario. We collected drinking and drug use data via a self-report of use in the past 90 days showing that all were regular social drinkers. We screened for alcohol problems (Rutgers Alcohol Problem Index; White & Labouvie, 1989), and health conditions, both current and chronic, that contraindicated alcohol use. In addition, each participant gave a breath sample (AlcoSensor 3, Intoximeters, Inc.) and used a urine-based pregnancy test before each session.

Procedures

All procedures were approved by the university IRB. The design was a 3 (beverage condition) $\times$ 2 (familiar with versus just met the man) double-blind factorial design, all within subjects, with random order for the beverage conditions between sessions and for the six scenarios within each session. Participants were paid a small amount for each session (\$7) and, at the end of the experiment, one participant was randomly drawn to win \$50. All had to sign an informed consent at the beginning of each session agreeing to remain in the laboratory until their BAC was zero as measured by the breathalyzer. The sessions were scheduled about one-week apart.

A phone call the night before each session reminded the participant to refrain from using alcohol or other psychoactive substances (except caffeine and nicotine) and to refrain from eating for one hour, and caffeine and nicotine use for 30 minutes before the session. Each session began with an informed consent, a health questionnaire, a breath test and pregnancy test. Participants' weight and height were measured each time to allow the correct proportions of alcohol (80 proof vodka) and tonic to achieve a .03% BAL (using BAL calculator: Curtin, J.) (M BAL = .031%; SD = .009 measured 30 mins later). Alcohol was consumed in only one session, but to preserve the double-blind, we always prepared the participant for an alcohol session.

All of the sessions took place in a dimly lit simulated bar setting with the participants sitting on a sofa near the bar. The server was a female research assistant (RA) who did not know the alcohol content of the beverage. Beverages were prepared in a different room out of sight and wheeled into the bar on a rolling cart after the participant had completed all of her paperwork, weigh-in and breath/pregnancy testing. Both the placebo (flattened tonic water) and the vodka tonics were served in two chilled highball glasses, with vodka drops all around the glasses and swabbed on the rim and an empty vodka bottle (as a prop). A small amount of grenadine was added for flavor. In the control condition, the rolling cart revealed a sealed bottle of chilled water with a plastic cup, so from that point on she was clearly in a control (water) condition.

The RA gave the participant 15 minutes to drink her beverage and then another 15-minute absorption period, so she was still on a rising BAC in the alcohol condition (assessed through breath tests 10 minutes later). Each participant then read all six scenarios in random order and imagined being in the vignette, being offered a drink by an attractive man. At the end of each scenario, the participant projected her likelihood to drink on a scale of 0 (not at all) to 7 (very), the number of drinks she anticipated consuming (measured in standard drinks), her excitement and happiness, and the perceived pressure for her to drink, both also on the scale of 0 – 7.

At the end of each session, the participant waited until she was at zero BAC before leaving (snacks provided). We did not want to alert them to the presence of a placebo so we did not show them their breath test results. We asked each time how intoxicated they felt (not at all, slightly, or very much). In both the placebo and alcohol conditions, all participants reported feeling at least “slightly intoxicated” and all were surprised to discover at the end of the three sessions that one “dose” was a placebo.

After we collected data from all 17 participants, ratings for scenario measures in each session were averaged within familiarity type (three Familiar scenarios versus three Just Met). We used SPSS 19 to check for order effects and then did separate 2 (familiarity) $\times$ 3 (beverage condition) within-subjects analyses of variance on each of the measured variables: 1) likelihood to drink; 2) number of projected standard drinks; 3) happiness; and 4) pressure to drink in each type of situation.

Results

Participants' mean ratings of how happy and excited they would be, how pressured they would feel to drink, and how likely they would be to drink (all on scales of 0 – 7) in each beverage condition and type of situation are shown in Table 2. In addition, Table 2 shows the number of standard drinks participants projected consuming in each beverage condition and type of situation. A manipulation check for a session-order effect used two within-subjects analyses of variance for drinking likelihood and amount. All F 's were non-significant, suggesting that any difference found would be due to the beverage conditions.

A within subjects 2 $\times$ 3 analysis of variance for happiness ratings showed a significant main effect for familiarity (familiar men were rated higher) (Greenhouse-Geisser $F(1, 16) = 48.52$; $p < .001$), but no beverage effect or interaction (F 's n.s.). A similar analysis for pressure to drink revealed no significant effects.

Participants' drinking likelihood showed a main effect for familiarity, with higher likelihood for drinking projected when the main character in the vignette was familiar with the man (Greenhouse-Geisser $F(1, 16) = 39.92$; $p < .001$), but no beverage condition effect or interaction (F 's n.s.). The amount of projected drinking, however, showed two main effects, such that the participants projected higher amounts when familiar with the man (Greenhouse-Geisser $F(1, 16) = 32.61$; $p < .001$) and when they had consumed one alcoholic beverage already (Greenhouse-Geisser $F(1, 16) = 3.63$; $p < .04$). Most importantly, a significant interaction (Greenhouse-Geisser $F(1, 16) = 3.70$; $p < .04$) showed that when they had consumed a drink, they projected drinking significantly more alcohol subsequently, but only with Familiar, not Just Met, men. This interaction is illustrated in Figure 1.

Discussion

Our findings partially support the hypothesis that even a small dose of alcohol, the equivalent of one to two drinks, may increase a woman's projection of the amount she will subsequently drink in a risky sexual situation with a Familiar man. First of all, across all three beverage conditions, our participants reported that they were more likely to drink and would drink greater amounts with Familiar, versus Just Met men. This is consistent with a large number of findings with risky sex studies: regardless of beverage conditions, happiness ratings were higher with the Familiar versus Just Met men. The fact that both drinking and happiness ratings were elevated in Familiar situations suggests an association between attraction and drinking decisions. In the Zawacki et al (2009) study of risky sex and drinking, women reported that they would feel safer having sex with Familiar men whom they judged to be less likely to give them a sexually transmitted disease.

However, the interaction of Familiarity and alcohol dose differentially increasing the projected amount is most interesting. Once having consumed alcohol (versus placebo or water) in a Familiar man vignette, participants projected a significant increase in subsequent drinking amount. With the combination of a Familiar man and a low dose of alcohol, they projected that they would increase their drinking to levels significantly higher than they intended when they were sober.

The finding of a Familiarity by beverage interaction in the data was not expected, but there are several possible post hoc explanations for this result. All of the scenarios were developed in our lab to be conflict situations. There were clear indications both of risk and of impelling (attraction) cues taken from similar women's responses in the earlier study (Noel et al, *in press*). Consistent with a myopia theory explanation, alcohol intoxication may have produced an effect such that the higher level of happiness felt in the Familiar scenarios intensified the focus on the impelling cues in the alcohol condition. However, the alcohol dose (.03% BAC) is much lower than that seen to produce an alcohol myopia effect, which is hypothesized to occur through alcohol's impairing effect on information processing. With a few exceptions (Davis et al., 2009), alcohol administration studies of the myopia model have assessed changes in attentional focus at higher dosages (.06% – .08% BAC). In addition, most studies have assessed likelihood of risky sexual behaviors, not, as in our study, whether the participant sees herself as drinking more. It is especially intriguing in the current study that the placebo beverage did not cause the same change in projected additional drinking as the alcohol beverage did. Even though subjective reports of intoxication were similar, the presence of even a small amount of alcohol changed drinking intentions.

Of course, all of these findings are limited by the fact that they are based on participants' self-assessment of their future behavior in a set of scenarios. Scenarios, often-used in social psychology, can have good validity (see Biernek, 2009) in situations where the real parameters cannot be achieved for ethical or practical reasons. However, scenario studies do rely on self-report of people's belief about how they will behave. Thus, despite their ecological validity, these scenarios are still at least a step away from reality. Further research with a real opportunity to drink more will begin to answer these questions. Additionally, a protocol that allowed administration of multiple doses over the course of several hours might demonstrate alcohol's dynamic decisional effects at subsequent higher doses and the possible influence of rising versus falling BAC. Finally, although the within-subjects design used here has many advantages (with participants acting as their own controls), a limitation of the relatively small group of participants is the inability to examine the contributions of individual differences. For example, none reported having experienced forced intercourse in the previous year and only one reported any forced sexual interaction. In our telephone prescreening statement, women were told that we would ask about alcohol, drug, and sexual experiences, so perhaps those who had problems in these areas opted out before the screening session.

In addition, all of the participants could be classified as social drinkers. What drinking history, sexual history or other factors, might be most associated with a decision to change

projected drinking? A much larger and more diverse group of participants is necessary to answer these questions.

In summary, this is the first study that shows a clear change in planned risky behavior (drinking) just on the basis on a very low alcohol dose. Overall, it appears that consuming a low dose of alcohol with a man in a social situation might increase the likelihood of a woman's heavier drinking later, but only if the man is someone she already knows. One implication is that interventions targeting women's drinking decisions in possible sexual assault situations should begin at a very low BAC level.

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Highlights

- Alcohol administration study with young adult women
- 2 (familiar versus just met man) $\times$ 3 (beverage type) within subjects design
- Consumed water, placebo or low alcohol dose
- Responded to six vignettes with attractive man and likelihood to continue drinking/amount they would drink
- interaction in which a small dose of alcohol led to increased estimates of planned amounts, but only when man was “Familiar”

Figure 1.

Figure 1 shows the mean number of standard drinks the participants planned to consume in each type of situation. Both main effects (beverage condition and scenario type) were significant with a significant interaction such that participants increased their drinking amount estimated when consuming alcohol in the “Familiar” scenarios.

Table 1

Examples of “Familiar” man versus “Just Met” man scenarios.

Familiar:
You have been seeing a guy casually for a few weeks now. You have been occasionally dating, and getting to know each other, and you’d like to know him better. He asks you to a party at a big house out in the country with all of his friends. The house has a pool and lots of land. You accept the date and you drive out with him. When you are at the party, he drinks some and tells you he’s really enjoying himself. Then he asks you to be his partner in a beer pong tournament.
Just Met:
You are at a bar with some girlfriends and a very attractive stranger comes up to you and starts a conversation with you. You keep talking to him for the rest of the night and he buys you a couple of drinks. When the bar closes, he asks if you and your friends would like to go to his house for the after party.

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Table 2

Mean ratings of Happiness and Excitement, Pressure to Drink, and Likelihood to Drink, with Mean Projected Standard Drinks of alcohol (Amount) for each type of scenario in each beverage condition.

		Beverage Condition		
Familiarity		Water	Placebo	Alcohol
Familiar	Happy	5.08 (1.24)	4.94 (0.70)	4.90 (0.93)
	Pressure	2.43 (1.47)	2.16 (1.65)	2.39 (1.43)
	Likely	4.71 (1.11)	4.69 (1.14)	5.00 (0.99)
	Amount	2.02 (0.91)	2.06 (0.77)	2.47 (0.96)
Just met	Happy	2.94 (1.32)	3.03 (1.39)	3.15 (1.55)
	Pressure	2.15 (1.66)	2.00 (1.64)	2.21 (1.86)
	Likely	2.85 (1.49)	2.85 (1.66)	3.12 (1.35)
	Amount	1.09 (0.71)	1.12 (0.77)	1.18 (0.65)

All n's are 17. The table shows means and (standard deviations). Participants rated Happiness, Pressure and Likelihood to drink on a scale of 0 to 7. Projected amount is in terms of standard drinks.