Clubbing With Familiar Social Groups: Relaxed Vigilance and Implications for Risk

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ABSTRACT. Objective: This research examined the relationship between the intragroup familiarity among peers visiting nightclubs and the likelihood of experiencing negative outcomes. We hypothesized, based on our prior work, that members who are more familiar with their group would be more likely to experience sexual and physical aggression while at the club. **Method:** The study involved 1,765 young adults (within 654 natural groups) sampled at nightclubs in the San Francisco Bay area. Participants were interviewed about their clubbing history and expectations before entering the club and about their experiences in the club as they exited. Breath samples were collected at both entry

and exit to obtain objective measures of alcohol use. **Results:** Using generalized linear mixed modeling to accommodate correlated data, we found that, to the extent that club patrons were familiar with more of their peer group, the more likely they were to experience sexual and physical aggression, although this was moderated by participant gender. **Conclusions:** Although in many circumstances group cohesion can be a protective factor, the results of this study suggest that greater group familiarity might sometimes be associated with less concern for safety, reduced vigilance, and an increase in negative experiences. (*J. Stud. Alcohol Drugs*, 76, 924–927, 2015)

NIGHTCLUB ENTERTAINMENT, like electronic music dance events (EMDEs), attracts young adults and has been associated with excessive drinking and other drug use (e.g., Miller et al., 2005, 2009, 2013a, 2013b). Although hosted in legitimate, regulated establishments and part of normal entertainment for diverse patrons, EMDE environments often are the scene of negative behaviors like drinking and driving or riding with an impaired driver (Johnson et al., 2012; Voas et al., 2013) and sexual and physical aggression (Miller et al., 2015). Data from ongoing research show that EMDE patrons are wary about the risks associated with the clubs they attend, with more than 60% reporting at least some concern for their safety. It would seem that patrons typically deal with their concern by adopting harm-reduction approaches to managing risks. Clearly, some people want to drink excessively, take drugs, accept free drinks from strangers, act provocatively, etc., but it is unlikely they desire to get sick, overdose, get injured in a crash, or be assaulted. Club patrons reportedly prefer to minimize the risk of negative consequences without reducing risky behavior, such as by using designated drivers.

Uncertainty and vigilance

We know, for example, that in groups where a designated driver has been selected, passengers often consume more

alcohol than in groups where a designated driver has not been selected (Harding et al., 2001; Johnson & Clapp, 2011; Lange et al., 2006b; Rivara et al., 2007). One explanation for these findings is that passengers in groups with a designated driver, being certain about having a (relatively) sober ride home, will relax their vigilance—that is, let their guard down. No longer fettered by the possibility of having to ride with a drunk driver, passengers are free to pursue their original drinking goals. On the other hand, passengers in groups lacking a designated driver may drink less as a protective mechanism, perhaps in case they are called on to drive or in case they need to be able to seek out an alternative way home.

We can extend this logic to a variety of risks. We know that in drinking environments, a little vigilance can go a long way in reducing harm, including drinking and driving (Johnson & Clapp, 2011; Lange et al., 2006b), the experience of sexual victimization (Kelley-Baker et al., 2011), and aggression (Brooks et al., 2013). However, when people perceive that they are protected from experiencing negative consequences, they may relax their guard, be less vigilant, and be more willing to engage in risky behavior. Thus, uncertainty regarding the risk of negative outcomes sometimes may be protective.

Three field experiments examined how providing drinkers with tools for estimating their blood alcohol concentration (BAC) influenced risk perceptions and behavior. Counterintuitively, people who were provided with BAC estimation tools had less accurate perceptions of impairment (Johnson & Voas, 2004; Johnson et al., 2008) and were more likely to drive with a BAC in excess of .05 (Johnson & Clapp, 2011) than control subjects who

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were not provided with BAC estimation tools. People not equipped to estimate their BACs had no choice but to play it safe, but those who thought they could determine their BACs were not so constrained.

Group familiarity, a false sense of security, and negative outcomes

It was observed in an earlier study on EMDE patrons (Johnson et al., 2012) that group members who previously experienced clubbing together were significantly more likely to ride home with a driver who had a high BAC. This resulted in positing an explanation that groups who had ridden or driven drunk together before were desensitized to potential risks—even if the actual risk levels were not reduced (see Marczynski et al., 2008). This suggests that strong familiarity with one's group may promote a sense of security leading to relaxed vigilance, greater involvement in risky behavior, and increased negative outcomes—particularly in groups that have not discussed or agreed on a safety strategy.

Importantly, we do not hypothesize that visiting drinking environments in groups directly increases risk. People very often patronize risky environments with groups of their peers, and groups can be highly protective, particularly when members are acutely aware and actively involved in promoting safety (e.g., Kelley-Baker et al., 2012; Lange et al., 2006b). Previous research at EMDEs indicates that, aside from designated drivers, groups typically do not enter these environments with safety strategies in place. Lacking explicit strategies, highly familiar groups may become complacent and feel free to let down their collective guard. If real risks in the environment persist, complacency may increase the chance of negative consequences.

This study conducted a series of straightforward analyses, simply testing to see if the degree of group familiarity among EMDE patrons relates to negative experiences (victim of sexual and physical aggression). We predicted that familiarity between group members would result in higher rates of negative experiences. The study measured participants' reported concern for safety, which was used as a proxy variable to explain any observed relationship between familiarity and negative experiences. However, if our hypotheses are confirmed, future research might specifically examine measures of vigilance or risk perceptions as potential mediators.

Method

Data were collected using the portal survey method (Voas et al., 2006), which involves sampling and interviewing groups of individuals before they enter a high-risk environment (e.g., bars, clubs) and resampling the same groups as they leave the environment. This provides the opportunity

to collect objective measures of substance use at both entry and exit: breath samples (to test for alcohol) and oral fluid samples (to test for drugs). The Pacific Institute for Research and Evaluation (PIRE) has conducted portal survey studies at the border crossing into Tijuana, Mexico (Johnson, 2012; Johnson & Clapp, 2011; Kelley-Baker et al., 2012; Lange et al., 2006a, 2006b), and at the entrances to clubs that feature electronic music (e.g., Johnson et al., 2012; Miller et al., 2005, 2009, 2013a; Voas et al., 2013).

Recruitment and procedure

The research described here used data that were collected with the portal survey method from 70 EMDEs (defined by event advertising) in the San Francisco Bay area between May 2010 and November 2012. Recruitment consisted of randomly approaching groups as they approached the club. Detailed recruitment procedures are presented in prior studies (Johnson et al., 2012; Miller et al., 2013a). Respondents provided informed consent to participate in anonymous research before data collection began.

Upon entrance and exit, participants anonymously provided oral fluid and breath samples and completed a brief interview and a self-administered survey. Participants were offered \$10 for entry data collection and \$20 after exit data collection. Participants were verified between entry and exit via wristbands containing unique identifiers. Among those who stopped to listen to the recruiter and were considered eligible (e.g., planning to enter club recreationally), median participation rate was 57.9% across EMDEs in the overall sample (Miller et al., 2015). Most participants (89%) provided both entrance and exit data.

Key variables

Group familiarity. During the entry survey, participants were asked two questions related to their familiarity with their immediate peer group: "How many people in your group do you know very well?" and "How many people in your group have you gone out to clubs with before?" Responses were measured using the 5-point Likert scale (from *none* to *everyone*). The items were highly correlated ($r = .82$), and we averaged the two scores together to form a group familiarity index.

Negative outcomes. Analyses included two dependent variables: self-reported victimization of sexual aggression (i.e., did the participant experience unwanted touching or fondling) and self-reported victimization of physical aggression (i.e., did the participant experience being pushed or punched during the evening).

Covariates. We included sex, race, ethnicity, age, education, sexual orientation, income, employment status, driver status, and group size (dyad vs. three or more people), and whether they tested positive for alcohol on entry to the club

(pregaming). All analyses also included peer group as a random variable in the analysis model.

Analytic approach

Analyses were conducted using generalized linear mixed modeling in SAS (Version 9.3, SAS Institute Inc., Cary, NC) using peer group as a random variable. Generalized linear mixed modeling can accommodate binomial dependent measures, which was the case for both our dependent measures.

For each dependent measure, we tested first a model of control variables (described above) and whether patrons were alcohol positive on entry to the club to identify a parsimonious set of significant predictors to include as covariates in the analysis of familiarity. After identifying a set of covariates for each outcome, we analyzed whether group familiarity predicted outcomes above and beyond the covariates. Although we were interested in main effects of familiarity, because both sexual and physical aggression may largely be determined (statistically) by gender and age, we included the three-way interactions among familiarity, age, and gender in our models. Our models for each outcome, therefore, included covariates, familiarity index, and the following interactions: Familiarity $\times$ Age, Familiarity $\times$ Sex, Age $\times$ Sex, and Familiarity $\times$ Sex $\times$ Age.

Results

Sample

Analyses included data from 1,765 participants, based on 654 peer groups, sampled from 70 different EMDEs in the San Francisco Bay area between May 2010 and November 2012. In our sample, a very slight majority was female (50.5%). The plurality identified as non-Hispanic White (33.6%), followed by Hispanic White (19.1%) and Asian (18.6%) participants. More than one quarter (28.0%) reported having Hispanic ethnicity.

Analysis of group familiarity on risk outcomes

Participants' mean group familiarity score (on a 1 to 5 scale) was 2.67 ($SD = 1.40$). A total of 18.8% of participants reported experiencing physical aggression (20.6% for women; 17.0% for men) that night, and 20.0% reported experiencing sexual aggression (25.4% for women; 14.6% for men). Of participants who experienced either negative outcome, only 28.5% experienced both. This means that the two outcomes are not redundant. For brevity, we only report significant effects of the familiarity variables (and significant interactions involving familiarity), but we do not report effects of covariates.

Physical aggression. Group familiarity only marginally predicted reports of experiencing physical violence ($p = .08$),

with greater familiarity associated with greater likelihood. However, results did reveal a statistically significant Sex $\times$ Familiarity interaction, $F(1, 743) = 3.2, p < .05$, but no other higher-order interactions. There was relatively little difference in physical violence as a function of low versus high familiarity scores for men (16.3% vs. 17.2%, respectively). However, for women, higher familiarity scores predicted a greater likelihood of experiencing physical violence (15.6% vs. 23.1% for relatively low vs. high scores, respectively).

Sexual aggression. There was no statistically significant main effect of group familiarity; however, our analysis found the Group Familiarity $\times$ Sex $\times$ Age interaction to be statistically significant, $F(1, 778) = 3.8, p < .05$. For younger women and both younger and older men, there is no evidence that reported group familiarity was associated with higher risk of experiencing sexual aggression. However, as women increased in age, group familiarity became increasingly predictive of negative experiences. For women 1 SD above the mean in age (~ 34), there was a threefold increase in the likelihood of experiencing sexual victimization for women with high (1 SD above the mean) relative to low familiarity (4.1% vs. 11.8%, respectively).

Concern for safety

Our hypothesis that group familiarity might predict negative experiences was based partly on a belief that group familiarity was related to perception of safety. We conducted an analysis to examine the relationship between group familiarity and self-reported perceptions of safety. During the entry survey, participants were asked if they were concerned about their safety that evening. With scores ranging from 0 to 3, the mean concern score was 1.4 ($SD = 1.3$), indicating that on average individuals were between "a little" and "moderately" concerned about safety.

Above and beyond covariates (sex, age, driver status, and education level on alcohol positive on entry), group familiarity significantly predicted participants' reported concern, $F(1, 782) = 8.5, p < .01$, with participants who knew more group members better expressing less concern. The size of this effect, however, was quite small. According to our model, a participant who knew no one very well would be expected to have a safety score of 1.17, whereas a participant who knew everyone very well was expected to have a score only 0.38 points higher (1.55). A preliminary attempt to test mediation, however, found that concern for safety failed to significantly reduce previously observed relationships between group familiarity and each negative outcome.

Discussion

The premises of this study were that group vigilance can go a long way in preventing harm in drinking environments, that perception of safety can undermine vigilance, and that

being among peers one knows very well can promote a sense of safety, thus undermining vigilance and increasing risk of negative outcomes. Our research found evidence of this hypothesis regarding experience of sexual and physical aggression, although the effects only materialized for women.

Groups may play an important role protecting their members from harm, but this protection may not be equal for all members or circumstances. For example, it is reasonable to speculate that groups may be more concerned with protecting their female members from sexual aggression than their male members. If this is true, and if a group's vigilance were to break down, we might expect women to have an elevated risk of experiencing sexual aggression compared with men.

A second issue is that although group familiarity was negatively correlated with concern for safety, concern for safety was not significantly related to risky outcomes. Such findings would have assumed that concern for safety was a proxy for vigilance. In other words, our hypothesis states that high familiarity can lead groups to be secure, which leads them to relax vigilance, which leads to greater prevalence of negative experience. We did not have a measure of vigilance in our data set, and it is possible that although concern for safety might not be predicted to risk outcomes, some direct measure of vigilance may.

Regardless, the study produced consistent results regarding risk outcomes. The research is correlational, and we cannot make claims about underlying causal mechanisms. However, at the same time it is unclear what alternative hypothesis might parsimoniously explain the results. The idea that greater group familiarity sometimes can increase risk warrants further investigation.

Nevertheless, the results should not be interpreted as indicating that patronizing clubs in close groups, as opposed to going alone or going with strangers, is necessarily a risk. Groups can be protective—particularly when group members devise and discuss plans for maintaining safety (Kelley-Baker et al., 2012; Lange et al., 2006b). Perhaps belonging to a very familiar group does sometimes lead members to let down their guard in settings where high vigilance would be beneficial, but there is no reason to avoid close groups. Strategies that encourage members of all types within groups to maintain vigilance and carefulness in club settings should be explored.

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